OHIO DEPARTMENT TRAFFIC CRAS	LOCAL REPORT NUMBER*											
PHOTOSTAKEN OH-2 OH-	2 + 0 + 2 + 3 + - + 0 + 0 + 0 + 0 + 0 + 8 + 9 + -											
SECONDARY CRASH — OH-1P [OTH		NCIC*		1 COLVED OO ANIMAL								
PRIVATE PROPE		y of Kent Police)	1010	6,7,0,3	L12 - UNSOLVED	0,1,0	⊥ 1 99 - UNKNOWN				
1-CITY	N: CITY, VILLAG		CRASH DATE / TIME* 0 1 0 3 2 0 2 3 / 0 4 0 0 0 1 0 3 2 0 2 3 / 0 4 0 0									
3-TOWNSHIP	RTH LOCAT	LATITUDE DEGI		- SERIOUS INJURY SUSPECTED								
S R 50 4 E-EA	UTH ST TMTA			ROAD TYPE	4.1.1.5.1.	- MINOR INJURY SUSPECTED						
ROUTE TYPE ROUTE NUMBER PREFIX N-NO	RTH REFER	RENCE ROAD NAME (ROAD	, MILEPOST, HOI	JSE #)	ROAD TYPE	LONGITUDE DEC		- INJURY POSSIBLE				
ROUTE TYPE ROUTE NUMBER PREFIX N - NO S - SO E - EA	ST SPA	ULDING			$\mathbf{D}_{\perp}\mathbf{R}_{\perp}$	$ _{78,1_{10},3,8,7}$	- PROPERTY DAMAGE					
REFERENCE POINT DIRECTION		ROUTE TYPE	 .	ROAD TYPE			NTERSECTION RELATE					
1 - INTERSECTION REFERENCE N - NORTH 2 - MILE PÖST A S - SOUTH	1 .	1			D - ROAD	WITHIN INTERSECTION OR ON APPROACH						
1 3- HOUSE # 4 S-SOUTH W-WEST	US-FEDER	RI BI	/-AVENUE L -BOULEVARD N		Q - SQUARE T - STREET	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES						
DISTANCE DISTANCE FROM REFERENCE UNIT OF MEASURE	-	EDED COUNTY POUTE CF			E - TERRACE L - TRAIL							
1-MILES	TR - NUMBI ROUTE	ERED TOWNSHIP DE			VA - WAY	ROADWAY DIVIDED						
1 0 2 3-YARDS	KOUTE	- н	E - HEIGHTS F	PL - PLACE	· · · · · · · · · · · · · · · · · · ·		1000					
LOCATION OF FIRST HARMFUL 1-ON ROADWAY 9-CROS			NNER OF CRASH COLLISION 4-	COLLISION/IMPA	CT	DIRECTION OF TRAVEL		AN TYPE				
0 4 2-ON SHOULDER 10-DRIV	/EWAY/ALLEY	ACCESS 1 1 BET	TWEEN 5-	BACKING		N - NORTH S - SOUTH	(<4 FEE					
TA THE	.WAY GRADE C RED USE PATI	CKOSSING — VE	IIIOLLO IN	- ANGLE - SIDESWIPE, SAM	E DIRECTION	E - EAST W - WEST	2 - DIVIDED (≥4 FEE	FLUSH MEDIAN T)				
5-ON GORE TRAI 6-OUTSIDETRAFFIC WAY 13-BIKE		2 - RE/ 3 - HE/		- SIDESWIPE, OPPO - OTHER / UNKNOV			1	, DEPRESSED MEDIAN , RAISED MEDIAN				
7-ON RAMP 14-TOLL	_ BOOTH ER / UNKNOW!		1D-011 /-	- OTHER TOWNS		ļ	(ANY TY 9 - OTHER/U					
8-OFF RAMP 99-OTH			LOCATION	LOT ODAGU WALL	NRK 70115	CONTOUR	CONDITIONS	SURFACE				
WORK ZONE RELATED	1 - LANE (K ZONE TYPE Closure	1-1	I of Crash in W o Before the 1st		3	2	2				
WORKERS PRESENT		SHIFT/CROSSOVER ON SHOULDER		WARNING SIGN ADVANCE WARNII	NG AREA	1 - STRAIGHT LEVEL 1 - DRY 1 - CONCRETE						
LAW ENFORCEMENT PRESENT	OR MEI	DIAN		TRANSITION AREA	A	2 - STRAIGHT GRADE	2-WET	2 - BLACKTOP,				
ACTIVE SCHOOL ZONE	4 - INTER 5 - OTHER	LMITTENT OR MOVING WOR R	1	ACTIVITY AREA TERMINATION AR	EΑ	3 - CURVE LEVEL	3 - SNOW 4 - ICE	BITUMINOUS, ASPHALT				
LIGHT CONDITION		WEAT	 Her		······································	4 - CURVE GRADE 9 - OTHER/UNKNOWN	3 - BRICK/BLOCK					
1 - DAYLIGHT		1-CLEAR 2-CLOUDY	6-SNOW			4 - SLAG, GRAVEL, STONE						
3 - DARK - LIGHTED ROADWAY		CROSSWINDS S SAND, SOIL, DIRT	T, SNOW		6 - WATER (STANDING, MOVING)	5 - DIRT 9 - OTHER/UNKNOWN						
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIG	HTING	4 - RAIN 5 - SLEET, HAIL	9 - FREEZIN	G RAIN OR FREEZ UNKNOWN	ING DRIZZLE		7 - SLUSH 9 - OTHER/UNKNOWN					
9-OTHER/UNKNOWN		,	., .,				9-01HER/GNKNOWN					
NARRATIVE	-						d	Indicate the north				
Unit 1 was driving eastbour	ıd on W	Main St. Unit 1					14	an "N" on the				
went off the roadway and							<u> </u>					
Wolfe off the following that		deniej polei										
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		1	NOT TO	3 5500								
		ļ]	SPA	ULDING DR.								
		NAL										
			WEST MAIN STREET	1 1								
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CRASH REPORTED DATE / TIME		ATCH DATE/TIME	RIVAL DATE / TIM		SCENE CLEARED DATE / TIME REPORT T							
			$\begin{array}{c c} b_1 \cup 1 \cup 3 \cup 2 \cup 2 \cup 3 \cup 4 \cup 5 \cup 3 \cup 4 \end{array} \begin{array}{c} \longrightarrow \\ \longrightarrow $									
TOTAL TIME OTHER ROADWAY CLOSED INVESTIGATION TIME		CHECKED BY OF Nelson,	officer's name* 1, Josh Supplement									
		1	BADGE NUMBER		Снеск	ED BY OFFICER'S BADGE NUMBER* [CORRECTION OF ADDI- 10 AN EXISTING REPORT SENT TO						
0 8 4 0 1 0	$0_{\perp}9_{\perp}9_{\perp}$	2 2 0			2 ;	3 2						

LOCAL REPORT NUMBER

2+0+2+3+-+0+0+0+0+0+0+8+9+

UNIT#	OWNER NAME: LAST, FIRST	, MIDDLE (X) SAME AS DRIVER)	CHAFI	OWNER BUONE, WALLS	THE PART OF THE PARTY OF THE PARTY OF	DAMAGE							
	ANDERSON, DRESS: STREET, CITY, STATE,			DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE									
	ONGMERE D		2 - MINOR DAMAGE 4 - DISABLING DAMAGE										
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP			COMMERCIAL CARRIER P	HONE: INCLUDE AREA CODE	9 - UNKNOWN								
LP STATE LICENSE PLATE # VEHICLE IDENTIFICATION #			VEHICLE YEAR	R VEHICLE MAKE	DAMAGED AREA(S) INDICATE ALL THAT APPLY								
	JVN5061	MAJ_3S_2K	12	12									
INSURAN	CE INSURANCE COMPA	INY	ISURANCE POLICY#	COLOR	VEHICLE MODEL		11 12						
L VERIFIE	TYPE OF USE		US DOT #	TOWED BY: COMPANY	ESCAPE NAME	$\frac{10}{10}$	10 11 1 2						
COMMER		IN EMERGENCY RESPONSE	1 1 1 1	City Service		9 3 3	3 9 9 3						
INTERL	UÇK		HICLE WEIGHT GVWR/GCWR		S MATERIAL LASS # PLACARD ID #	8 4 7	8 4 5						
DEVICE	HIT/SKIP UNIT	$\begin{bmatrix} & & & & & & & & & & & & & & & & & & &$	1 - ≤10K LBS, 2 - 10,001 - 26K LBS.	I L RELEASED		6	12 7 6 5						
		7 - MOTORCYCLE 2-WHEELED	3 - >26K LBS. 12-GOLF CART		23 - PEDESTRIAN / SKATER	6 1	1 12 1 6 5						
.0.1.	2 - PASSENGER VAN (MINIVAN)	8 - MOTORCYCLE 3-WHEELED	13-SNOWMOBILE	19-BUS (16+ PASSENGERS)	24-WHEELCHAIR (ANYTYPE)	10	11 2						
UNIT TYPE	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE 10 - Moped or motorized			25 - OTHER NON-MOTORIST 26 - BICYCLE	9	10 2 -						
	5 - CARGO VAN	BICYCLE		22 - ANIMAL WITH RIDER OR	27 - TRAIN	-							
<u> </u>	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8	7 6 5 4						
	# of TRAILING UNITS					11 12 1	5 12 1						
	WAS VEHICLE OPERATING IN AUMODE WHEN CRASH OCCURRED			3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	10 12 2	10 11 1 2						
	1-YES 2-NO 9-OTHER/UNKN	1 U 1		4 - HIGH AUTOMATION 5 - FULL AUTOMATION		10 2	10 2						
		MODE LEVEL	33 FIDE	1/ 5404	03 11411 0400000	9 3 3	3 9 9 3 3						
		6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY	11 - FIRE 12 - MILITARY	16-FARM 17-MOWING	21 - MAIL CARRIER 99 - OTHER / UNKNOWN	8 7 5 4	8 7 5 4						
SPECIAL	3 - ELECTRONIC RIDE SHARING	8 - BUS-SHUTTLE	13 - POLICE	18-SNOW REMOVAL		7 6 5	7 6 5						
	4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER	9 - BUS - OTHER	14-PUBLIC UTILITY 15-CONSTRUCTION EQUIPMENT	19-TOWING		6	6						
		3 - VEHICLETOWING ANOTHER		8 - POLE	12 - CONCRETE MIXER		12 12 12						
01	/ NOT APPLICABLE	MOTOR VEHICLE	CHASSIS	9 - CARGOTANK	13 - AUTOTRANSPORTER	12 6 8							
BODY	2 - BUS	4 - LOGGING	6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	10-FLAT BED	14 - GARBAGE/REFUSE	98 2 3 9	3 9 1 3 9 1 3						
TYPE				11-DUMP	99-OTHER/UNKNOWN								
	1 - TURN SIGNALS 2 - HEAD LAMPS	4 - BRAKES 5 - STEERING	7 - WORN OR SLICKTIRES 8 - Trailer Equipment	9 - MOTOR TROUBLE 10-disabled from Prior	99 - OTHER / UNKNOWN	6							
DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT			5 5 5						
	1 - INTERSECTION - MARKED	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12 - FIRST RESPONDER	☐ - NO DAMAGE	[0]						
NON-MOTORIST	CROSSWALK 2-INTERSECTION - UNMARKED	4 - MIDBLOCK - MARKED CROSSWALK	7 - SHOULDER / ROADSIDE	10 - DRIVEWAY ACCESS	AT INCIDENT SCENE 99 - OTHER / UNKNOWN	□-TOP [13]	- ALL AREAS [15]						
LOCATION AT IMPACT	CROSSWALK	5 - TRAVEL LANE - OTHER LOCATION	8 - SIDEWALK	11 - SHARED USE PATHS OR Trails	77-07HER7 GRAINWAR	UNIT NOT AT SCENE [16]							
	1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18-APPROACHING	INITI	AL POINT OF CONTACT						
3 .	2-NON-COLLISION 3-STRIKING 0 1	2 - BACKING 3 - Changing Lanes	8 - ENTERING TRAFFIC LANE	14 - ENTERING OR CROSSING Specified Location	OR LEAVING VEHICLE 19 - Standing	0 - NO DAMA							
	4- STRUCK PRE-CRASH	4 - OVERTAKING/PASSING	9 - LEAVING TRAFFIC LANE 10 - PARKED	15 - WALKING, RUNNING,	20 - OTHER NON-MOTORIST	1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE							
	5 - BOTH STRIKING ACTIONS		11 - SLOWING OR STOPPED	JOGGING, PLAYING 16 - WORKING	21 - STANDING OUTSIDE Disabled vehicle	13 - TOP	99 - UNKNOWN						
	& STRUCK 9-Other/Unknown	6 - MAKING LEFTTURN	INTRAFFIC 12-DRIVERLESS	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN	TRAFFIC							
	1 - NONE	7 - LEFT OF CENTER	13 - IMPROPER START FROM A	17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL						
	2 - FAILURE TO YIELD	8 - FOLLOWING TOO CLOSE / ACC	DA PARKED POSITION 14-STOPPED OR PARKED	18 - OPERATING DEFECTIVE EQUIPMENT	22 - NOT DISCERNIBLE	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN						
11	3 - RAN RED LIGHT 4 - RAN STOP SIGN	9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING	ILLEGALLY	19 - LOAD SHIFTING/FALLING/	23 - OPENING DOOR INTO ROADWAY	2 - TW0-WAY	2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL						
CONTRIBUTING CIRCUMSTANCE	G S 5 - UNSAFE SPEED	11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - Wrong Way	SPILLING 20 - IMPROPER CROSSING	99 - OTHER IMPROPER ACTION	# or TUDOUSU LANCS	· · · · · · · · · · · · · · · · · · ·						
	6 - IMPROPER TURN	12-IMPROPER BACKING				# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED						
E SEMUENC!	E OF EVENTS		NON-COLLISION		Village and the control of the con	4	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING						
$_{1}$ $_{1}$ $_{1}$ $_{2}$ $_{3}$ $_{4}$ $_{5}$ $_{1}$	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION	6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE OPPOSITE DIRECTION OF	16 - RAILWAY VEHICLE 17 - ANIMAL — FARM	22 - WORK ZONE MAINTENANCE EQUIPMENT		3 - IMANTAEN-LY201AE CKN991IAR						
	3 - IMMERSION	7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	TRAVEL	18-ANIMAL - DEER	23 - STRUCK BY FALLING,	UNIT / N	ON-MOTORIST DIRECTION						
₂ 4 0	J 4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION	19 - ANIMAL OTHER 20 - MOTOR VEHICLE IN	SHIFTING CARGO OR ANYTHING SET IN MOTION		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST						
	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	14 - PEDESTRIAN	TRANSPORT	BY A MOTOR VEHICLE 24 - Other Movable object	FROM 4 TO	3 3-EAST 7-SOUTHEAST						
3		COLLISTO	15-PEDALCYCLE ON WITH FIXED OBJEC	21-PARKED MOTOR VEHICLE			4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN						
41 1	25 - IMPACT ATTENUATOR	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CURB	50 - WORK ZONE MAINTENANCE EQUIPMENT								
	J / CRASH CUSHION 26 - BRIDGE OVERHEAD	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	38-OVERHEAD SIGN POST 39-Light/Luminaries	44 - DITCH 45 - Embankment	51 - WALL	UNIT SPEED	DETECTED SPEED						
5	STRUCTURE 27 - BRIDGE PIER OR ABUTMEN	34 - MEDIAN GUARDRAIL	SUPPORT 40 - UTILITY POLE	46-FENCE	52 - BUILOING 53 - Tunnel	0 3 5	1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR						
	28 - BRIDGE PARAPET	35 - MEDIAN CONCRETE	41 - OTHER POST, POLE	47 - MAILBOX 48 - Tree	54 - OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED						
61	29 - BRIDGE RAIL 30 - Guardrail Face	BARRIER 36 - MEDIAN OTHER BARRIER	OR SUPPORT 42 - CULVERT	49 - FIRE HYDRANT	99 - OTHER / UNKNOWN	İ	, 4,,,-,milian						
. 2	FIRST HARMFUL EVE	2	HARMFUL EVENT			2 5							
	JINDI HARMITULEVE	.,. <u> </u>	HARMI OF EARINI										

OHO DEPARTMENT MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER							
								2 + 0 + 2 + 3 + - + 0 + 0 + 0 + 0 + 0 + 8 + 9 + - +							
UNIT#	NAME: LAST, FIRST, MIDDLE ANDEDSON DOREDT MICHAEL								DATE OF BIRTH AGE GENDER						
	ANDERSON, ROBERT, MICHAEL								1 2 0 3 1 9 9 2 5 3 6 M CONTACT PHONE - INCLUDE AREA CODE						
address: street, city, state, zip 547 LONGMERE DR, Kent, OH 44240															
3	INJURIES INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT									-Compliant	SEATING POSITIO	ON AIR BAG L	USAGE EJECTION	TRAPPED	
5	TAKEN BY							USED 9 9		HELMET	0 1		2 1 1		
OL STATE	OPERATOR LI	CENSE NUMBER		CODE			OFFENSE DESC				ON NUMBER				
OL STATE OL CLASS	ENDODOSMENT I	DECEDIOTION OF COLUMN	TO A I DDN	4511.19A1a			Driving While		Alcohol	TEST	2177	/9 Drug test(s	5)		
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP	TO3 DRIV	rDACTED	X ALCOH	OL / DRUG SUSPE OHOL MAF		CONDITION	STATUS		VALUE			LT SELECTUPTO4	
4				1	□ отн	ER DRUG		1	_2_	1		_1	1		
UNIT#	NAME: LAST, FI	IRST, MIDDLE								DA	TE OF BIRTH		AGE	GENDER	
ADDDESS	ATDEST AND AT	TE 710							LLL	OT PUON				<u> </u>	
SING ADDRESS:	: STREET, CITY, STA	ATE, ZIP							CUNIA	ICI PHUN	IE - INCLUDE AREA	CODE			
ADDRESS:		EMS AGENCY (NAME)		INJURED T	AKEN TO: 1	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT			SEATING POSITI	ON AIR BAG	USAGE EJECTIO	N TRAPPED	
NON.	TAKEN BY							USED		T-COMPLIAN HELMET				_	
OL STATE	OPERATOR LI	ICENSE NUMBER		OFFENS	E CHARG	iED	LOCAL	OFFENSE DESC	CRIPTION	ų.		CITAT	ION NUMBER		
<u> </u>						351-121/				ALCOHO	LTEST		DRUG TEST(5)	
OL CLASS	SELECT UP TO 2	RESTRICTION SELECT U	TO3 DRI DIS BY	DRIVER ALCOHOL / DRUG SUSPECTED CONDITIO			1	STATUS	TYPE	VALUE	STATUS	TYPE RESU	LT SELECT UPTO 4		
)	🗖 отн	HER DRUG		L	J		•]	L		
UŅIT#	NAME: LAST, F	IRST, MIDDLE							DATE OF BIRTH AGE GENDER						
<u> </u>	1														
ADDRESS	: STREET, CITY, ST	ATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
INJURIES	INJURED	EMS AGENCY (NAME)		INJUREDT	TAKEN TO:	MEDICAL FACILITY	(NAME, CITY	SAFETY EQUIPMEN	<u> </u>		SEATING POSIT	TON AIR BAG	USAGE EJECTION	ON TRAPPED	
NON	TAKEN BY	KEN			INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIL USED				DOT-COMPLIANT MIC HELMET						
OL STATE	OPERATOR L	ICENSE NUMBER	······	OFFENSE CHARGED LOCAL CODE			OFFENSE DES	CRIPTION		1.	CITATION NUMBER				
1010 	J							AND TEST					/a>		
OL CLASS	SELECT UP TO 2	RESTRICTION SELECT U	DIS	DRIVER ALCOHOL / DRUG SUSPECTED DISTRACTED ALCOHOL MARIJUAN		CONDITION	STATUS TYPE VALUE		STATUS TYPE RESULT SELECTOPIO						
	 		.	1	🗖 от	HER DRUG			J L	ـــا اـــــا	•	1			
INU 1. FATAL	URIES	SEATING POSITION	1 - NOT DE	AIR BAG		OL CLAS 1-CLASS A	S No. 100	OL RESTRI	Committee State State St.	11 St. 18 . 18 . 1	RIVER DISTRA NOT DISTRACTED	ACTION	TEST S	TATUS	
2 - SUSPECTE	D SERIOUS INJURY	(MOTORCYCLE DRIVER)	2-DEPLOY			2 - CLASS B		2 - CDL INTRASTA	TE ONLY	2 -	MANUALLY OPERA		2 - TEST REFUSE		
3 - SUSPECTEI 4 - POSSIBLE	D MINOR INJURY	2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3 - DEPLOY	YED SIDE Yed both fro	ONT/SIDE	3 - CLASS C 4 - REGULAR CLASS		3 - CORRECTIVE I			ELECTRONIC COMM DEVICE (TEXTING, DIALING)		3 - TEST GIVEN, SAMPLE / UN		
5 - NO APPARE		4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	5 - NOT AP	PLICABLE		(OHIO = D) 5 - M/C MOPED ONLY		5 - EXCEPT CLAS	S A BUS	3-	TALKING ON HAND		4 - TEST GIVEN, 5 - TEST GIVEN,	RESULTS KNOWN	
INJURED	TAKEN BY	5-SECOND-MIDDLE	9-DEPLO	YMENT UNKN	OWN	6 - NO VALID OL		6 - EXCEPT CLAS & CLASS B BU		3. 32. 4. 7. 7.	COMMUNICATION I	HELD	UNKNOWN	NEGOLIO	
1 - NOT TRANS /TREATED		6-SECOND - RIGHT SIDE 7-THIRD - LEFT SIDE		JECTION	jr (%)	OL ENDORSI	EMENT	7 - EXCEPT TRAC			COMMUNICATION I OTHER ACTIVITY V	10 March 1981	5 - 15 (8) (5) (1) (1) (1)	TEST TYPE	
2 - EMS 3 - POLICE		(MOTORCYCLE SIDE CAR) 8 - Third – Middle	1-NOTEJ	IECTED Ally ejected		H - HAZMAT M - Motorcycle		RESTRICTION 9 - LEARNER'S P	\$		ELECTRONIC DEVI Passenger	CE	1 - NONE 2 - Blood		
9-OTHER/U	NKNOWN	9 - THIRD - RIGHT SIDE	100	LY EJECTED		P - PASSENGER		RESTRICTION	S	1.	OTHER DISTRACTI		3 - URINE 4 - BREATH		
SAFETY	EQUIPMENT	10 - SLEEPER SECTION OF TRUCK CAB	4 - NOT AP	PLICABLE		N -TANKER Q - Motor scooter		10 - LIMITED TO D			OTHER DISTRACTI	A 10 THE REST OF	5 - OTHER		
ENCLOSED CARGO AREA			TRAPPED	RAPPED R -THREE-WHEEL MOTORCYCLE 12 - LIMITED - 0			Q : OTHER / LINKNOWN			N	A STANDARD OF THE STANDARD	STTYPE			
3 - LAP BELT	3 - LAP BELT ONLY USED PICK-UP WITH CAP) 2-		2 - EXTRI	TRICATED BY T DOUBLE & TRIPLE TRAILERS			(SPECIAL BR	AKES, HANI	ES, HAND		DN.	1 - NONE 2 - Blood			
100000000000000000000000000000000000000	4 SHOULDER & LAP BELT USED 12 PASSENGER IN UNENCLOSED CARGO AREA 5 - CHILD RESTRAINT SYSTEM -		MECHANICAL MEANS X - TANKER / HAZ			AT	ADAPTIVE DE	VICES) 1 - APPARENTLY NOR HICLES ONLY 2 - PHYSICAL IMPAIR LES WITHOUT 3 - EMOTIONAL (E.G.,		300 (10) 300	L 3-URINE				
FORWARD	FORWARD FACING 13-TRAILING UNIT 6-CHILD RESTRAINT SYSTEM - 14-RIDING ON VEHICLE EXTERIOR		NON-MECHANICAL MEANS GENDER			R	15 - MOTOR VEHIO AIR BRAKES			3 - EMOTIONAL (E.G., DEPRESSED, 👌		4 - OTHER	DECLUSION.		
REAR FAC	ING	(NON-TRAILING UNIT)				F - FEMALE M - Male		16-OUTSIDE MIR	ROR	4-	ANGRY, DISTURBED) ILLNESS		1 - AMPHETAM	RESULT(S)	
7 - BOOSTER 8 - HELMET I		99 - OTHER / UNKNOWN				U - OTHER / UNKNO	VN	17 - PROSTHETIC	AID	5.	FELL ASLEEP, FAII FATIGUED, ETC.	NTED,	2 - BARBITURA 3 - BENZODIAZI		
	IVE PADS USED (NEES, ETC.)							1 10 - UIIIER		. 6	- UNDER THE INFLU OF MEDICATIONS		4 - CANNABINO		
10 - REFLECTI	IVE CLOTHING										/ALCOHOL - OTHER / UNKNOW		5 - COCAINE 6 - OPIATES / O	PIOIDS	
/ BICYCLE	한 성공하다 하는 사람이 나를 만나?										- OTHER VUNNION		7 - OTHER		
99-0THER <i>Ì</i> U	INKNOWN								idayiyasi s Haraday				8 - NEGATIVE I	RESULTS	