CR NUMBER ACCIDENT DATE 7/13/23	ACCIDENT TIME 2029 DAY OF WEEK T L V DAYLIGHT DAYLIGHT DAYNOR DUSK DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OT	
1945 Mogadore RD Kent, OH 44240 Fair	
VEHICLE NO. 1	VEHICLE NO. 2.(OR PROPERTY DAMAGED)
DRIVER LAST FIRST MIDDLE DOB Smith Rita M 9/29/	BRIVER LAST FIRST MIDDLE DOB
ADDRESS 3447 Brunk RD	ADDRESS
CITY, STATE, ZIP PHONE NUMBER AKYON OH 44312	CITY, STATE, ZIP PHONE NUMBER
DRIVER'S LICENSE NUMBER STATI	E DRIVER'S LICENSE NUMBER STATE
VEHICLE OWNER'S NAME LAST FIRST MIDD	VEHICLE OWNER'S NAME LAST FIRST MIDDLE
ADDRESS SAME	ADDRESS
CITY, STATE ZIP SAME PHONE NUMBER	THORE HOWBER
VEHICLE YEAR MAKE MODEL COLO	
LICENSE PLATE NUMBER STATE HKJ8611 OH	LICENSE PLATE NUMBER STATE
INSURANCE COMPANY EVIL INSUVANCE Q126007	19 INSURANCE COMPANY
PARTS OF PORT REAR LEFT PRI VEHICLE DAMAGED	IGHT PARTS OF DET FRONT DET REAR DEFT DET RIGHT VEHICLE DAMAGED
DESCRIBE HOW ACCIDENT OCCURRED Unit I was unoccupied at	
1945 Mogadore RD.	· Unit 2 left the Parking lot
Striking Unit am I on the passenger side door cousing damage. Unit 2 was a Yellow truck Unknown registration. Unit 2 left the scene	
Unknown registration	on. Unit 2 left the scene
\int	SKETCH HOW ACCIDENT OCCURRED INDICATE NORTH BY
	ARROW
	Mosadore 102
	1 Not
	Not to Scale
	E Scole"
OFFICER /SUPER/VISOR SIGNATURE 1+1 455/4-5	Parking lot
	Revised 7/22/20