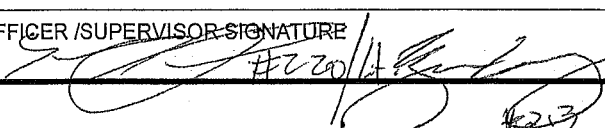
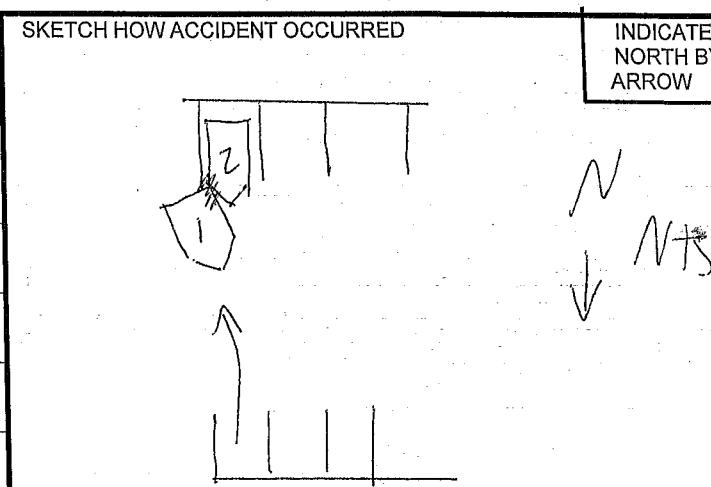


CR NUMBER 24-4079	ACCIDENT DATE 3-18-24	ACCIDENT TIME 1714	DAY OF WEEK Monday	<input checked="" type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK		
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 113 E Summit St			WEATHER Snow			
VEHICLE NO. 1			VEHICLE NO. 2 (OR PROPERTY DAMAGED)			
DRIVER LAST FIRST MIDDLE DOB Mudry Grace Allison 3-2-05			DRIVER LAST FIRST MIDDLE DOB			
ADDRESS same			ADDRESS			
CITY, STATE, ZIP PHONE NUMBER			CITY, STATE, ZIP PHONE NUMBER			
DRIVER'S LICENSE NUMBER STATE OH			DRIVER'S LICENSE NUMBER STATE			
VEHICLE OWNER'S NAME LAST FIRST MIDDLE Mudry Shelly Ann			VEHICLE OWNER'S NAME LAST FIRST MIDDLE Simmons Bruce G			
ADDRESS 14860 Thornton Dr			ADDRESS 2336 Ernest Lyntz Rd SW			
CITY, STATE ZIP PHONE NUMBER N Royalton, OH 44133			CITY, STATE, ZIP PHONE NUMBER Warren OH 44481			
VEHICLE YEAR MAKE MODEL COLOR 2021 Honda HR-V Grey			VEHICLE YEAR MAKE MODEL COLOR 2012 Honda CRV Grey			
LICENSE PLATE NUMBER STATE SSH5609 OH			LICENSE PLATE NUMBER STATE HWB6885 OH			
INSURANCE COMPANY Progressive			INSURANCE COMPANY Erie			
PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT R			PARTS OF VEHICLE DAMAGED <input checked="" type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT F			
DESCRIBE HOW ACCIDENT OCCURRED Unit 1 backed up into Unit 2						
OFFICER /SUPERVISOR SIGNATURE 			SKETCH HOW ACCIDENT OCCURRED			
					INDICATE NORTH BY ARROW	