OF PUBLIC SAFETY TRAFFIC CRASH	,	LOCAL REPORT NUMBER	*								
□ OH-2 □ OH-3		2 0 2 3	- + 0 + 0 + 0 + 0 + 9	7,5,7,							
PHOTOS TAKEN X OH-1P OTHER	REPORTING AGENCY NAME*	NCIC*	HIT/SKIP NUMBER OF UNITS UNIT IN ERROR								
SECONDARY CRASH PRIVATE PROPERTY	6,7,0,3	1-SOLVED 0,2 98-ANIMAL 2-UNSOLVED 0,2 99-UNKNOWN									
COUNTY* LOCALITY* LOCATION: CIT	Y, VILLAGE, TOWNSHIP*			CRASH DATE / TIME* CRASH SEVERITY							
6 7 1 2-VILLAGE Kent	0.6.2.3.2.0.2.3./.2.0.1.9. 5 1- FATAL 2 - SERIOUS INJURY										
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH	LOCATION ROAD NAME		ROAD TYPE	E LATITUDE DECIMAL DEGREES SUSPECTED							
S - SOUTH S - SOUTH S - SOUTH S - SOUTH S - W - WEST	WATER		$S \setminus T$	41 1 4 4 1 5 0 3-MINOR INJURY SUSPECTED							
	REFERENCE ROAD NAME (ROA	D, MILEPOST, HOUSE #)	ROAD TYPE	CONTROL CONTRO							
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W - WEST	CHERRY		$S \setminus T$	-81,258	.3.2.0.	PROPERTY DAMAGE					
REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD TYPE	<u> </u>		INTERSECTION RELATED	ONLY					
1-INTERSECTION FROM REFERENCE N - NORTH IR			RD - ROAD	[22]	RSECTION OR ON APPROA						
1 2-MILE POST S-SOUTH US	I EDENAL OU NOUTE		SQ - SQUARE ST - STREET			_4					
	STATE ROUTE		TE - TERRACE	X WITHIN INTE	RCHANGE AREA NUM	BER OF APPROACHES					
FROM REFERENCE UNIT OF MEASURE	NUMBERER TOWNSHIP		TL - TRAIL		ROADWAY						
2-FEET 3-YARDS	ROUTE	DR - DRIVE PI - PIKE HE - HEIGHTS PL - PLACE	WA - WAY	ROADWAY DIV	/IDED						
LOCATION OF FIRST HARMFUL EVEN		ANNER OF CRASH COLLISION/IMPA	ACT	DIDECTION OF TRAVE	MEDIA	TVDE					
1 - ON ROADWAY 9 - CROSSOVER	1 - NO	OT COLLISION 4 - REAR-TO-REAR		DIRECTION OF TRAVE N - NORTH		LUSH MEDIAN					
	DADE COCCUME 6 T	ETWEEN 5-BACKING WO MOTOR (ANGLE		S - SOUTH	(<4 FEET)					
4-ON ROADSIDE 12-SHARED US		LITTOLLOTIN	6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION W-WEST 2 - DIVIDED F (≥4 FEET								
5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	E STATES	EAR-END 8 - SIDESWIPE, OPP EAD-ON 9 - OTHER / UNKNO	355555			DEPRESSED MEDIAN RAISED MEDIAN					
7 - ON RAMP 14-TOLL BOOT	н	EAD-ON 9-OTHER/ONKNO	WIN		(ANY TYPE	E)					
8-OFF RAMP 99-OTHER/UN	IKNOWN				9 - OTHER/UN	KNOWN					
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH IN W		CONTOUR	CONDITIONS	SURFACE					
The state of the s	LANE CLOSURE LANE SHIFT/CROSSOVER	1 - BEFORE THE 1ST WARNING SIGN	WURK ZUNE	_1_	_1_	_2_					
LAW ENFORCEMENT PRESENT 3-	WORK ON SHOULDER OR MEDIAN	2 - ADVANCE WARNI 3 - TRANSITION ARE	DVANCE WARNING AREA 1 - STRAIGHT LEVEL 1 - DRY RANSITION AREA 2 - STRAIGHT GRADE 2 - WET								
The state of the s	INTERMITTENT OR MOVING WO			2 - WET 3 - SNOW	2 - BLACKTOP, BITUMINOUS, ASPHALT						
ACTIVE SCHOOL ZONE 5 -	OTHER	5 - TERMINATION AR	TERMINATION AREA 3 - CURVE LEVEL 3 - SNOW 4 - CURVE GRADE 4 - ICE								
LIGHT CONDITION	WEAT	THER	9 - OTHER/UNKNOWN 5 - SAND, MUD, DIRT,								
1 - DAYLIGHT 1 2 - DAWN/DUSK	1-CLEAR 0 1 2-CLOUDY	6 - SNOW 7 - SEVERE CROSSWINDS			OIL, GRAVEL 6 - WATER (STANDING,	STONE					
3 - DARK - LIGHTED ROADWAY	CO C C	KE 8 - BLOWING SAND, SOIL, DIR	T, SNOW	MOVING)	5 - DIRT 9 - OTHER/UNKNOWN						
4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING	4 - RAIN 5 - SLEET, HAIL	9 - FREEZING RAIN OR FREEZ 99 - OTHER / UNKNOWN	NG RAIN OR FREEZING DRIZZLE 7 - SLUSH 7 - STUSH 9 - OTHER/UNKNOW								
9 - OTHER / UNKNOWN		546 - Table Table Bulletin Balletin			9-0THER/UNKNOWN						
NARRATIVE					A	Indicate the north					
UNIT 1 WAS TRAVELING NO	RTHROUND ON S					direction with an "N" on the compass diagram.					
						compass diagram.					
WATER ST IN THE LEFT LA											
TRAVELING EASTBOUND O	ON CHERRY ST. U	NIT			w						
2 ENTERED THE INTERSEC	TION OF CHERR	Y	SWATERST) (î						
ST & S WATER ST AND FAILED TO YIELD TO											
UNIT 1 CAUSING THE ACCIDENT.											
		CHERRYST	* 1 _		BOWMANDE	9					
				ili							
			- 1	1 11 1	1						
ODAGU DEDGGETTO CATE ATTACK	DICDATOU DATE /TIME	ADDIVAL BASE (5000		COENE OL FARE	DATE /TIME I -	EDADT TAKEN SY					
	DISPATCH DATE / TIME	ARRIVAL DATE / TIME		SCENE CLEARED	I⊽I	POLICE AGENCY					
TOTAL TIME OTHER TOTAL			HECKED BY OFFI		$\begin{bmatrix} 3_1/1_2 \end{bmatrix} \begin{bmatrix} 4_18_1 \end{bmatrix} \begin{bmatrix} 2_1\\ 1_2\end{bmatrix}$	MOTORIST					
ROADWAY CLOSED INVESTIGATION TIME MINUT			nond Short, Jason M								
	ES Knapp, Derek	Raymond S	hort, Jas	son IVI		SUPPLEMENT (CORRECTION OF ADDITION					
	OFFICER'S	BADGE NUMBER*		SON IVI BY OFFICER'S BADGE I	NUMBER*	SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)					

LOCAL REPORT NUMBER 2 . 0 . 2 . 3 . - . 0 . 0 . 0 . 0 . 9 . 7 . 5 . 7 . OWNER PHONE: INCLUDE AIRA CODE (MISAMEAS DRIVER)
Redacted per ORC 149.43(A)(1) OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER) DAMAGE SANFILIPPO, MICHELLE, RAE DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER) 1 - NONE 3 - FUNCTIONAL DAMAGE 3 8025 AVON RD ,LODI ,OH 44254 2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE DAMAGED AREA(S) INDICATE ALL THAT APPLY LP STATE LICENSE PLATE # **VEHICLE IDENTIFICATION #** VEHICLE YEAR VEHICLE MAKE 5. NP₁E₁B₁4₁A₁C₅ B₁H1₁0₁1₉7₁6₁2₁0₁1₁1 Hyundai O H GKA3826 INSURANCE POLICY # INSURANCE VERIFIED INSURANCE COMPANY COLOR VEHICLE MODEL STATEFARM RED SONATA 3925571 SFP 35 US DOT# TYPE OF USE TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT RESPONSE HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR INTERLOCK DEVICE #OCCUPANTS MATERIAL CLASS # PLACARD ID # 1 - ≤10KLBS. HIT/SKIP UNIT 2 - 10,001 - 26K LBS. EQUIPPED $0_{\perp}1$ PLACARD 」 3 - >26K LBS. 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13-SNOWMORILE 19-BUS (16+ PASSENGERS) 24 - WHEFI CHAIR (ANY TYPE) 0 1 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST UNITTYPE 4 - PICKUP 10 - MOPED OR MOTORIZED 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE BICYCLE 5 - CARGO VAN 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 27 -TRAIN 11 - ALL TERRAIN VEHICLE ANIMAL-DRAWN VEHICLE 6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - LINKNOWN OR HIT/SKIP (ATV/UTV) $00_{
m ullet}$ # of trailing units WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 0 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION AUTONOMOUS 2 - PARTIAL AUTOMATION 1-YES 2-NO 9-0THER/UNKNOWN 5 - FULL AUTOMATION MODE LEVEL 1 - NONE 6 - BUS - CHARTER/TOUR 11-FIRE 16-FARM 21 - MAIL CARRIER 12 - MILITARY 17 - MOWING 99 - OTHER / UNKNOWN 0 1 2 - TAXI 7 - BUS - INTERCITY SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18-SNOW REMOVAL FUNCTION 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY 19-TOWING 5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 1 - NO CARGO BODY TYPE 8 - POLE 12 - CONCRETE MIXER 0.1 / NOT APPLICABLE MOTORVEHICLE CHASSIS 9 - CARGO TANK 13-AUTOTRANSPORTER CARGO 2 - RUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 14-GARBAGE/REFUSE 10-FLAT BED BODY * 7 - GRAIN/CHIPS/GRAVEL 11-DUMP 99-OTHER / UNKNOWN 00 $0_1 1_1$ 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN 8 - TRAILER EQUIPMENT 10-DISABLED FROM PRIOR 5 - STEERING ACCIDENT DEFECTIVE 6 - TIRE BLOWOUT -NO DAMAGE [0] - UNDERCARRIAGE [14] 1 - INTERSECTION - MARKED 9 - MEDIAN/CROSSING ISLAND 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 12 - FIRST RESPONDER CROSSWALK AT INCIDENT SCENE ☐-TOP [13] - ALL AREAS [15] 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS 99 - OTHER / UNKNOWN CROSSWALK B - SIDEWALK 11 - SHARED USE PATHS OR CROSSWALK - UNIT NOT AT SCENE [16] 5 - TRAVEL LANE - OTHER LOCATION TRAILS 1-NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18-APPROACHING INITIAL POINT OF CONTACT OR LEAVING VEHICLE 14 - ENTERING OR CROSSING 2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 0 1 3 - CHANGING LANES 14 - UNDERCARRIAGE 0 - NO DAMAGE 4 19-STANDING SPECIFIED LOCATION 3-STRIKING 9 - LEAVING TRAFFIC LANE 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE PRE-CRASH 4 - OVERTAKING/PASSING 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST 10-PARKED DIAGRAM 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN JOGGING, PLAYING 99 - UNKNOWN 21 - STANDING OUTSIDE 11 - SLOWING OR STOPPED 13-TOP 16-WORKING DISABLED VEHICLE & STRUCK INTRAFFIC 6 - MAKING LEFT TURN 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN 9-OTHER/UNKNOWN 12 - DRIVERLESS TRAFFIC 1-NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM A 17 - VISION OBSTRUCTION 21 -LYING IN ROADWAY TRAFFIC CONTROL TRAFFICWAY FLOW PARKED POSITION 18-OPERATING DEFECTIVE 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 14 - STOPPED OR PARKED EQUIPMENT 2 - TWO-WAY 3 - RAN RED LIGHT 9-IMPROPER LANE CHANGE 23 - OPENING DOOR INTO 5 - YIELD SIGN 2 - SIGNAL ILLEGALLY 19 - LOAD SHIFTING/FALLING/ ROADWAY 4 - RAN STOP SIGN 10-IMPROPER PASSING 3 - FLASHER 6 - NO CONTROL 15 - SWERVING TO AVOID SPILLING 99-OTHER IMPROPER ACTION 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IMPROPER CROSSING # of THROUGH LANES RAIL GRADE CROSSING 6-IMPROPERTURN 12 - IMPROPER BACKING ON ROAD 1 - NOT INVOLVED 4 2 - INVOLVED-ACTIVE CROSSING NON-COLLISION 3 - INVOLVED-PASSIVE CROSSING 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE -16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE OPPOSITE DIRECTION OF EQUIPMENT 17 - ANIMAL - FARM 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS

LOCAL REPORT NUMBER

of PC	SERVICE - PROTECTION UNLI						2 0 2 3 -	0_	$0_{+}0_{+}0_{+}9_{+}7_{+}5_{+}7_{+}$				
UNIT #	OWNER NAME: LAST, FIRS BLACKISTO		r ORC 149.43(A)(1	DAMAGE DAMAGE SCALE									
OWNER A	DDRESS: STREET, CITY, STATE,	, ZIP (X SAME AS DRIVER)	0.0000				3 1-NONE 2-MINOR	DAMA	3 - FUNCTIONAL DAMAGE GE 4 - DISABLING DAMAGE				
211 LINDEN RD ,Kent ,OH 44240 COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP				Co	MMERCIAL CARRIE	ER PHONE: INCLUDE AREA CODE	9 - UNKNOWN						
LP STATE	LICENSE PLATE #		CLE IDENTIFICATION#	- 0 0	VEHICLE Y				GED AREA(S) ALL THAT APPLY				
	JYB6394 NGE INSURANCE COMP.		INSURANCE POLICY #	5,9,8	2 0 2	I TIDDEELL	11 12 1		11 12 1				
VERIFIED STATEFARM 271			2710526 SFP 35 US DOT #	TOW	BLK ED BY: COMPA	ROGUE	10/11/0/	2	10 11 1 2				
COMME	TYPE OF USE RCIAL GOVERNMENT	IN EMERGENCY RESPONSE		J		OUS MATERIAL	9 9 3	3	9 3				
INTER DEVICE EQUIP	E HIT/SKIP UNIT	#0CCUPANTS			MATERIAL RELEASED PLACARD	CLASS # PLACARD ID #	8 7 6 5	74	8 7 5 5 6 6 5				
O_1 UNIT TYPE	4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)	7 - MOTORCYCLE 2-WHEELE 8 - MOTORCYCLE 3-WHEELE 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE (ATV / UTV)	D 13-SNOWMOBILE 14-SINGLEUNITTRUCK 15-SEMI-TRACTOR	18 - LIMO (LIVERY VEHICLE) 19 - BUS (16 + PASSINGERS) 10 - OTHER VEHICLE 12 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE		23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (AINY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP	9	11 10 9 0 0	5 6				
	WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 1-YES 2-NO 9-CTHER/UNKNOWN AUTONOMOUS		1 - DRIVER ASSISTANCE US 2 - PARTIAL AUTOMATION	4 - HIGH AU	IONAL AUTOMATIOI UTOMATION UTOMATION	N 9-UNKNOWN	11 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2 3	5 12 1 10 11 12 1 10 10 2				
01 SPECIAL FUNCTION	2 EL ECTRONIC DIDE CHARING	9 - BUS - OTHER	11 - FIRE 12 - MILITARY 13 - POLICE	16 - FARM 17 - MOWIN 18 - SNOW R 19 - TOWING 20 - SAFETY	REMOVAL G	21 - MAIL CARRIER 99 - OTHER / UNKNOWN	8 7 6 5	74	8 7 6 5				
O 1 CARGO BODY TYPE	1 - NO CARGO BODYTYPE /NOTAPPLICABLE 2 - BUS		EHICLETOWING ANOTHER 5 - INTERMODAL CONTAINER 8 OTORVEHICLE CHASSIS 9		TANK Ed	12 - CONCRETE MIXER 13 - AUTOTRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN	9 2 3	9 9	3 9 3 3				
	1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS	4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT		9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT		99 - OTHER / UNKNOWN	6 □- NO DAMAG	5.00	6 6				
NON-MOTORIST LOCATION AT IMPACT	CROSSWALK 2 - INTERSECTION - UNMARKED	3 - INTERSECTION - OTHER 4 - NIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE - OTHER LOCK	7 - SHOULDER / ROADSIDE B - SIDEWALK	10 - DRIVEV	/CROSSING ISLAND VAY ACCESS D USE PATHS OR	D 12-FIRST RESPONDER AT INCIDENT SCENE 99-OTHER / UNKNOWN	□-TOP [13]		-ALL AREAS [15]				
_3_ACTION	2-NON-COLLISION 0 6	1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - CVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFTTURN	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED INTRAFFIC	13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE		18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN	0 - NO DAM	IAGE ER TO I	OINT OF CONTACT 14 - UNDERCARRIAGE UNIT 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN				
O_2 CONTRIBUTING CIRCUMSTANCES	1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN	7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / A 9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING	13 - IMPROPER START FROM A : ACDA PARKED POSITION : 14 - STOPPED OR PARKED : ILLEGALLY : 15 - SWERVING TO AVOID	18-OPERAT EQUIPN 19-LOAD SI SPILLIN	HIFTING/FALL:NG/	21 - LYING IN ROADWAY 22-NOT DISCERNIBLE 23-OPENING DOOR INTO ROADWAY 99-OTHER IMPROPER ACTION	TRAFFICWAY FLOW 1 - ONE-WAY 2 - TWO-WAY # OF THROUGH LANES		TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL RAIL GRADE CROSSING				
SEQUENCE	OF EVENTS	AC-IMP NOT EN DRONING		- controlle			ON ROAD	27.	1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING				
1_ 2 _0		6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF	17 - ANIMAL		22 - WORK ZONE MAINTENANCE EQUIPMENT	ENANCE		3 - INVOLVED-PASSIVE CROSSING				
3	5 - CARGO / EQUIPMENT LOSS OR SHIFT		12-DOWNHILL RUNAWAY 13-OTHER NON-COLLISION 14-PEDESTRIAN 15-PEDALCYCLE ION WITH FIXED OBJECT	TRANSF 21 - PARKED - STRU	L — OTHER VEHICLE IN PORT D MOTORVEHICLE		FROM _ 4 TO	1 - NORTH 5 - NORTHEAST 2 - SQUTH 6 - NORTHWEST 3 - EAST 7 - SQUTHEAST 4 - WEST 8 - SQUTHWEST 9 - OTHER / UNKNOWN					
4	25-IMPACT ATTENUATOR / CRASH CUSHION 26-BRIDGE OVERHEAD	31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	38 - OVERHEAD SIGN POST	43 - CURB 44 - DITCH 45 - EMBAN	KMENT	50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL	UNIT SPEED		DETECTED SPEED				
5	STRUCTURE 27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE	SUPPORT 40 - UTILITY POLE	46 - FENCE 47 - MAILBO 48 - TREE		52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT	0,1,0,		1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR				
6 4	29-BRIDGE RAIL 30-GUARDRAIL FACE	BARRIER 36 - MEDIAN OTHER BARRIEF	OR SUPPORT	48 - I KEE 49 - FIRE HY	YDRANT	99 -OTHER / UNKNOWN	POSTED SPEED		3 - UNDETERMINED				

1 FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

2 5

OFF PUBLIC SAFETY MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER									
							2 + 0 + 2 + 3 + - + 0 + 0 + 0 + 0 + 9 + 7 + 5 + 7 +									
UNIT#	IT # NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH AGE GENDER							
0,1	KELLER, JACQUELYN, RILEY								0 + 8 + 0 + 2 + 2 + 0 + 0 + 4 1 1 8 F							
	ADDRESS: STREET, CITY, STATE, ZIP 4157 HOGUL AVE ,RAVENNA ,OH 44266								Redacted per ORC 149.43(A)(1)							
INJURIES	INJURED	EMS AGENCY (NAME)			AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITIO	N AIR BAG I	JSAGE EJE	CTION	TRAPPED		
5	TAKEN BY							USED 0 4	□MC HE	LMET 0 1	1	1 1 1				
OL STATE		LICENSE NUMBER	4.4.40	OFFENS	SE CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION		CITATION NUMBER					
O H	REDAC	TED PER ORC 450	1:1-12													
OL CLASS	ENDORSEMEN SELECT UP TO 2		UP TO 3 DRIV	VER TRACTED	_	OHOL / DRUG SUSPI		CONDITION	STATUS T	YPE VALUE	STATUS TYPE RESULT SELECTUPTO					
. 4 .			BY	1	=	LCOHOL MAR	RIJUANA	1	1	1	. 1	1				
UNIT #	NAME: LAST	FIRST, MIDDLE			υ٠	THER DROG				DATE OF BIRTH		AG	E	GENDER		
. 0 . 2 .	BLAC	KISTON, ERIN,	MARI	\mathbf{E}					0 5 2 0 1 9 7 8 45 F							
	STREET, CITY, S			0.77					CONTACT	PHONE - INCLUDE AREA	CODE					
211 LI	NDEN	RD ,Kent ,OH 442	240						Reda	acted per C)RC 1	149.4	13(/	۹)(1) _،		
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJUREDI	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	□DOT-C:	SEATING POSITIO	N AIR BAG I	AIR BAG USAGE EJECTION TRAPPED				
² _5_	BY							0 4	Шмс не	LMET 0 1	_ 1 _ 1 _ 1					
OL STATE		LICENSE NUMBER TED PER ORC 450	11-1-12	OFFENS		RGED	LOCAL	OFFENSE DESC	RIPTION		CITATION NUMBER					
OH				331.			X		Right of Way at Inte			25710 DRUG TEST(S)				
OL CLASS	SELECT UP TO 2		UP TO 3 DRIV	TRACTED	_	COHOL / DRUG SUSPI	E CTED RIJUANA	CONDITION	STATUS T	YPE VALUE				SELECTUPTO4		
4				1	=	THER DRUG		1	1	1	1	1		تالاال		
UNIT#	NAME: LAST	, FIRST, MIDDLE								DATE OF BIRTH		AG	E	GENDER		
ADDRESS:	STREET, CITY, S	TATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE							
010										1 1 1	1					
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJUREDI	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED	Прот-с∘		N AIR BAG L	JSAGE EJE	CTION	TRAPPED		
OL STATE		LICENSE NUMBER		OFFENS	SE CHAI	RGED LOCAL OFFENSE DESC				CITATI	CITATION NUMBER					
ORIS	V-51./			100000000000000000000000000000000000000			CODE									
OL CLASS	ENDORSEMEN SELECT UP TO 2						ECTED	CONDITION	STATUS T	YPE VALUE		DRUG TEST(S) STATUS TYPE RESULT SELECTOR TO A				
	SELECT OF TO 2		BY	TRACTED	=	LCOHOL MAR	RIJUANA			TALVE	JIAIOS		LOOLI	32220101101		
TNJU	RIES	SEATING POSITION		IR BAG		THER DRUG OL CLASS	s	OL RESTRIC	TION(S)	DRIVER DISTRAC	TION	TES	T STA	TUS		
1 - FATAL		1 - FRONT - LEFT SIDE	1-NOT DEP	A Part of		1 - CLASS A		1 - ALCOHOL INTER		1 - NOT DISTRACTED	100	L - NONE GIV	52 AVE			
2 - SUSPECTED : 3 - SUSPECTED :	SERIOUS INJURY	(MOTORCYCLE DRIVER) 2 - FRONT – MIDDLE	2 - DEPLOYE 3 - DEPLOYE			2 - CLASS B 3 - CLASS C		2 - CDL INTRASTAT 3 - CORRECTIVE LE		2 - MANUALLY OPERATIN ELECTRONIC COMMUN	HOLTECH	-TEST REF		TAMINATED		
4 - POSSIBLE IN		3 - FRONT - RIGHT SIDE		D BOTH FRONT / SIDE 4 - REGULAR CLASS 4 - FARMWAIVER				DEVICE (TEXTING, TYPING,			3 - TEST GIVEN, CONTAMINATED SAMPLE / UNU SABLE					
5 - NO APPAREN	T INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	5-NOTAPP		E MIC HODED ONLY				J INCIDIO ON THINGS THEE			4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS				
INJURED	INJURED TAKEN BY 5 - SECOND - MIDDLE 9 - DEPLOYMENT UNKNOWN					6 - NO VALID OL		6 - EXCEPT CLASS A & CLASS B BUS		4 - TALKING ON HAND-HE	LD	LD UNKNO₩N				
1 - NOT TRANSPO /TREATED AT	A CONTRACTOR OF THE PARTY OF TH	6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	EJ	ECTION		OL ENDORSE	MENT	7 - EXCEPT TRACTO 8 - INTERMEDIATE		5 - OTHER ACTIVITY WITH	HAN	CHANGE I	LTES	TTYPE		
2 - EMS		(MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE	1 - NOTEJE			H - HAZMAT		RESTRICTIONS		ELECTRONIC DEVICE		L - NONE 2 - BLOOD				
	3 - POLICE 6 - THIND - WINDLE 2 - PARTIALLY E. 9 - OTHER / UNKNOWN 9 - THIRD - RIGHT SIDE 3 - TOTALLY E.EC				DESTRICTION			7 - OTHER DISTRACTION			3 - URINE					
	10 - SLEEPER SECTION 4 - NOTAPPLICABLE SAFETY EQUIPMENT 10 - SLEEPER SECTION 4 - NOTAPPLICABLE					N-TANKER 10-LIMITED TO DA						4 - BREATH 5 - OTHER				
1 - NONE USED	ZOTE WIENT	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	T	RAPPED		Q - MOTOR SCOOTER R - THREE-WHEEL MO	TORCYCLE	12 - LIMITED - OTHE		THE VEHICLE		DRUG	TEST	TYPE		
2 - SHOULDER B		(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1 - NOTTRA			S - SCHOOL BUS		13 - MECHANICAL DI (SPECIAL BRAK		9 - OTHER / UNKNOWN	1	L - NONE				
4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED MECHANIC			ICAL MEANS T - DOUBLE & TRIPLE TRAILERS CONTROL X - TANKER / HA7MAT ADAPTIV			CONTROLS, OR O ADAPTIVE DEVI	OTHER CONDITION			2 - BL00D 3 - URINE						
5 - CHILD RESTRAINT SYSTEM – CARGO AREA 3 - FREED BY FORWARD FACING 13 - TRAILING UNIT NON-MECH			Y HANICAL MEANS 14 - MILITARY V			14 - MILITARY VEHI	ICLES ONLY 2 - PHYSICAL IMPAIRMENT			4 - OTHER						
6 - CHILD RESTR	RAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR				GENDER F-FEMALE		15 - MOTOR VEHICLE AIR BRAKES	S WITHOUT	3 - EMOTIONAL (E.G., DEPR ANGRY, DISTURBED)		DRUG TE	STRE	SULT(S)		
7 - BOOSTER SE	R FACING (NON-TRAILING UNIT) STER SEAT 15 - NON-MOTORIST					M - MALE 16 - OUTS				1 - AMPHETAMINES						
8 - HELMET USE		99 - OTHER / UNKNOWN				U -OTHER / UNKNOWN		17 - PROSTHETIC AII 18 - OTHER		5 - FELL ASLEEP, FAINTEI FATIGUED, ETC.		2 - BARBITU 3 - BENZODI		S		
	TECTIVE PADSUSED 30W, KNEES, ETC.)								6 - UNDERTHE INFLUENCE OF MEDICATIONS / DRUGS			4 - CANNABINOIDS				
10 - REFLECTIVE 11 - LIGHTING - F										/ALCOHOL 9-OTHER/UNKNOWN		6 - COCAINE 6 - OPIATES	OPIOID	S		
/ BICYCLE ON	ILY									The state of the s		7 - OTHER				
99 - OTHER / UNK	NOWN										1	B - NEGATIVI	E RESUL	TS		

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