

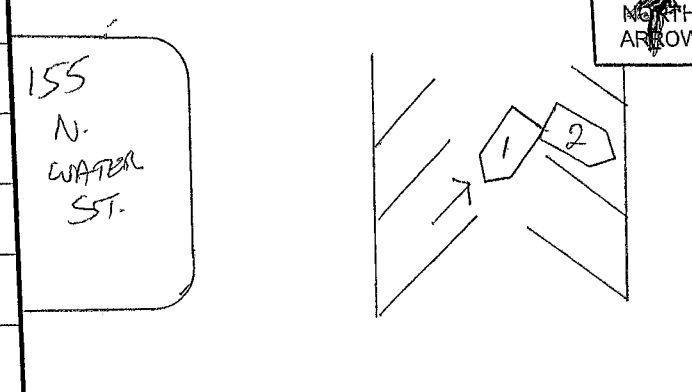
CR NUMBER 23-12884	ACCIDENT DATE 8-17-23	ACCIDENT TIME 12/14	DAY OF WEEK THURS	<input checked="" type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 155 N. WATER ST			WEATHER NO ADVERSE	

VEHICLE NO. 1					VEHICLE NO. 2 (OR PROPERTY DAMAGED)				
DRIVER LAST	FIRST	MIDDLE	DOB		DRIVER LAST	FIRST	MIDDLE	DOB	
KAVALEC	LINDA	M.	1-16-61		REISER	SYDNEY	N.	9-4-02	
ADDRESS 1541 NORTH BLVD					ADDRESS 18821 GEORGEA LAKE RD				
CITY, STATE, ZIP			PHONE NUMBER		CITY, STATE, ZIP			PHONE NUMBER	
KEST, OH 44246					CHAGRIN FALLS, OH 44023				
DRIVER'S SOCIAL SECURITY NUMBER					DRIVER'S SOCIAL SECURITY NUMBER				
DRIVER'S LICENSE NUMBER					DRIVER'S LICENSE NUMBER				
STATE OH					STATE OH				
VEHICLE OWNER'S NAME LAST			FIRST	MIDDLE	VEHICLE OWNER'S NAME LAST			FIRST	MIDDLE
KAVALEC			STUART	W.	REISER			AMANDA	C.
ADDRESS 1541 NORTH BLVD					ADDRESS 18821 GEORGEA LAKE RD				
CITY, STATE, ZIP			PHONE NUMBER		CITY, STATE, ZIP			PHONE NUMBER	
KEST, OH 44240					CHAGRIN FALLS, OH 44023				
VEHICLE	YEAR	MAKE	MODEL	COLOR	VEHICLE	YEAR	MAKE	MODEL	COLOR
2008		CHEV	MALIBU	TAN	2022		FORD	BRONCO	BLUE
LICENSE PLATE		NUMBER	STATE		LICENSE PLATE		NUMBER	STATE	
HXM 1291			OH		JDL 4374			OH	
INSURANCE COMPANY					INSURANCE COMPANY				
STATE FARM / 2433908 SFP 35					STATE FARM / 3422616 SFP 35				
PARTS OF VEHICLE DAMAGED	<input type="checkbox"/> FRONT	<input checked="" type="checkbox"/> REAR	<input type="checkbox"/> LEFT	<input type="checkbox"/> RIGHT	PARTS OF VEHICLE DAMAGED	<input type="checkbox"/> FRONT	<input checked="" type="checkbox"/> REAR	<input type="checkbox"/> LEFT	<input type="checkbox"/> RIGHT

DESCRIBE HOW ACCIDENT OCCURRED

UNIT 1 AND UNIT 2 WERE PARKED IN THE PARKING LOT BEHIND TOWNHALL II (155 N. WATER ST.). UNIT 1 BACKED INTO UNIT 2.

SKETCH HOW ACCIDENT OCCURRED



OFFICER / SUPERVISOR SIGNATURE  
 ANICKAND #1238 *[Signature]*