OF PUBLIC SAFETY TRAFFIC CRASH	l ,	OCAL REPORT NUMBER	`			
□ 0H-2 □ 0H-3	LOCAL INFORMATION			2.0.2.4	- 0 0 0 0 9	0.0.1.9.
PHOTOS TAKEN X OH-1P OTHER	REPORTING AGENCY NAME*		NCIC*	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR
SECONDARY CRASH PRIVATE PROPERTY	City of Kent Poli	ice	0,6,7,0,3	1 - SOLVED	0_2_0	98 - ANIMAL 99 - UNKNOWN
COUNTY* LOCALITY* LOCATION: CIT	Y, VILLAGE, TOWNSHIP*			CRASH DATE / 1	70000 COOL	SH SEVERITY
6 7 1 2-VILLAGE Kent				0.6.2.0.2.0.2.4	/1245 5	FATAL SERIOUS INJURY
A N NORTH	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DE		SUSPECTED
S - SOUTH S - SOUTH S - SOUTH S - W. WEST	MANTUA		$\mathbf{S} \cdot \mathbf{T}$	41,16,1	5 1 0	MINOR INJURY SUSPECTED
W-WEST	REFERENCE ROAD NAME (RO	AD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DE		INJURY POSSIBLE
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W - WEST	STINAFF	920 U.P. 40 U.S. 10 P. 1	$S \setminus T$	-01 3 5 0	3 7 3 5-	PROPERTY DAMAGE
	AND COLORS OF THE POLICE AND THE POL		5 1	-8 ₁ ,3 ₅ 8		ONLY
REFERENCE POINT DIRECTION 1 - INTERSECTION FROM REFERENCE N - NORTH IR	ROUTE TYPE - INTERSTATE ROUTE(TP)	AL - ALLEY HW- HIGHWAY	RD - ROAD	E21	INTERSECTION RELATED	
1 2-MILE POST 1 S-SOUTH US	- FEDERAL US ROUTE	AV - AVENUE LA - LANE	SQ - SQUARE	WITHIN INTE	RSECTION OR ON APPROAG	3
	STATE ROUTE	BL - BOULEVARD MP - MILEPOST CR - CIRCLE OV - OVAL	ST - STREET TE - TERRACE	WITHIN INTE	RCHANGE AREA NUMI	BER OF APPROACHES
DISTANCE DISTANCE CR	NUMBERED COUNTY ROUTE	CT - COURT PK - PARKWAY	TL - TRAIL		ROADWAY	
0 5557	NUMBERED TOWNSHIP ROUTE	DR - DRIVE PI - PIKE	WA - WAY	ROADWAY DIV	IDED	
1 0 3 3-YARDS		HE - HEIGHTS PL - PLACE				
LOCATION OF FIRST HARMFUL EVEN	\$7 market	MANNER OF CRASH COLLISION/IM		DIRECTION OF TRAVE	MEDIAN	ITYPE
1 - ON ROADWAY 9 - CROSSOVER 2 - ON SHOULDER 10 - DRIVEWAY	ALLEY ACCESS	NOT COLLISION 4 - REAR-TO-REA BETWEEN 5 - BACKING	R	N - NORTH	1 - DIVIDED FI (< 4 FEET	LUSH MEDIAN)
U 1 3-IN MEDIAN 11-RAILWAY G	RADE CROSSING	TWO MOTOR 6-ANGLE		S - SOUTH E - EAST	2 - DIVIDED FI	LUSH MEDIAN
4 - ON ROADSIDE 12-SHARED U 5 - ON GORE TRAILS	F94888844468	TRANSPORT 7 - SIDESWIPE, S REAR-END 8 - SIDESWIPE, 0		W-WEST	(≥4 FEET 3 - DIVIDED, D	EPRESSED MEDIAN
6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	3-H	HEAD-ON 9 - OTHER / UNKI			4 - DIVIDED, R	AISED MEDIAN
7-0N RAMP 14-TOLL BOOT 8-0FF RAMP 99-0THER/UI					(ANY TYPE 9 - OTHER/UNI	A Part of the Control
O-OFF NAME		LOCATION OF ORACH IN	WORK ZONE	CONTOUR	CONDITIONS	SURFACE
WORK ZONE RELATED	WORK ZONE TYPE LANE CLOSURE	LOCATION OF CRASH IN 1 - BEFORE THE 1:		520		
T	LANE SHIFT/CROSSOVER	WARNING SIGN	l	_1_	_1_	
LAW ENFORCEMENT PRESENT 3-	WORK ON SHOULDER OR MEDIAN	2 - ADVANCE WAR 3 - TRANSITION AF		1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE	1 - DRY 2 - WET	1 - CONCRETE 2 - BLACKTOP,
	INTERMITTENT OR MOVING WO			3 - CURVE LEVEL	3 - SNOW	BITUMINOUS,
ACTIVE SCHOOL ZONE 5-	OTHER	5 - TERMINATION	AREA	4 - CURVE GRADE	4 - ICE	ASPHALT 3 - BRICK/BLOCK
LIGHT CONDITION	WEA	ATHER		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT,	4 - SLAG, GRAVEL,
1					OIL, GRAVEL	
1 - DAYLIGHT	1-CLEAR	6 - SNOW				STONE
1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY	0.1. 2-CLOUDY	6 - SNOW 7 - SEVERE CROSSWINDS OKE 8 - BLOWING SAND, SOIL, DI	RT, SNOW		6 - WATER (STANDING, MOVING)	5 - DIRT
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	2 - CLOUDY 3 - FOG, SMOG, SMI 4 - RAIN	7 - SEVERE CROSSWINDS OKE 8 - BLOWING SAND, SOIL, DI 9 - FREEZING RAIN OR FRE	1900 To 1900 T		6 - WATER (STANDING, MOVING) 7 - SLUSH	North Districts
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	0 1 2 - CLOUDY 3 - FOG, SMOG, SM	7 - SEVERE CROSSWINDS OKE 8 - BLOWING SAND, SOIL, D	1900 To 1900 T		6 - WATER (STANDING, MOVING)	5 - DIRT
2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	2 - CLOUDY 3 - FOG, SMOG, SMI 4 - RAIN	7 - SEVERE CROSSWINDS OKE 8 - BLOWING SAND, SOIL, DI 9 - FREEZING RAIN OR FRE	1900 To 1900 T		6 - WATER (STANDING, MOVING) 7 - SLUSH	5 - DIRT 9 - OTHER/UNKNOWN
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1	LOCAL REPORT NUMBER
2	
R)	DAMAGE
4	DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE
	3 2 - MINOR DAMAGE 4 - DISABLING DAMAGE
-	9 - UNKNOWN
_	DAMAGED AREA(S)
1	INDICATE ALL THAT APPLY
10	11 12 1 12 1 12 1 12 1 12 1 12 1 12 1 12 1
7	11 1 1 1 2
9	9 9 9 3
8	7 5 4 8 7 5 4
1	7 6 5 11 12 7 6 5
	12
	10 1 1 2
	9 9 3 3
	6 1 4
	8 7 5 4
	12 7 5 12
7	11 12 1
10	11 1 2 10 11 1
9	9 3 3 9 9 9 3
⊣ °_	
8	7 5 4 8 7 5 4
	7 6 5
	6
4	12 12 12
	12
	9 3 9 3 9 3 3
\dashv	
	6 6 6
-	- NO DAMAGE [0] - UNDERCARRIAGE [14]
	☐-TOP [13] ☐-ALL AREAS [15]
	<u> </u>
	- UNIT NOT AT SCENE [16]
	INITIAL POINT OF CONTACT
	0 - NO DAMAGE 14 - UNDERCARRIAGE
L	1 2 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE
	13-TOP 99-UNKNOWN
	20 E
	TRAFFIC
T	RAFFICWAY FLOW TRAFFIC CONTROL 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN
	1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 2 2 - TWO-WAY 6 2 - SIGNAL 5 - YIELD SIGN
1 3	

1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST FROM 1 TO 2 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST

	9 - OTHER / UNKNOWN
UNIT SPEED	DETECTED SPEED
.0.2.0.	1 - STATED / ESTIMATED SPEED
0 2 0	2 - CALCULATED / EDR
POSTED SPEED	3 - UNDETERMINED
3 5	

OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER) MCLAUGHLIN, MICHAEL, GEORGE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X) SAME AS DRIVER)

OWNER PHONE: INCLUDE ATEA CODE (TI SAME AS DR Redacted per ORC 149.43(A) 333 CENTRAL AVE ,Ravenna ,OH 44266 COMMERCIAL CARRIER: NAME ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE LP STATE LICENSE PLATE # **VEHICLE IDENTIFICATION #** VEHICLE YEAR VEHICLE MAK 2 0 1 0 Nissan O H KIJ5344 3 N 1 A B 6 A P 3 A L 6 9 2 5 4 8 INSURANCE POLICY # INSURANCE VERIFIED **INSURANCE COMPANY** COLOR VEHICLE MODE WHI ALLSTATE 992486525 SENTRA TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT RESPONSE City Service HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS INTERLOCK DEVICE EQUIPPED MATERIAL CLASS # PLACARD ID 1 - ≤10KLBS. RELEASED HIT/SKIP UNIT 2 - 10,001 - 26K LBS. 0,2PLACARD ILL J 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 - SNOWMOBILE 19-BUS (16+ PASSENGERS) 24 - WHEEL CHAIR (ANY TYP 0 1 2 - PASSENGER 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 - UNKNOWN OR HIT/SKIP (ATV/UTV) # OF TRAILING UNITS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 0 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION 2 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 0 1 2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99 - OTHER / UNKNOWN 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 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10-FLAT BED 14-GARBAGE/REFUSE BODY 7 - GRAIN/CHIPS/GRAVEL TYPE 11-DUMP 99-OTHER / UNKNOWN 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN 8 - TRAILER EQUIPMENT 10-DISABLED FROM PRIOR VEHICLE 2 - HEAD LAMPS 5 - STEERING DEFECTIVE ACCIDENT DEFECTS 3 - TAIL LAMPS 6 - TIRE BLOWOUT 3 - INTERSECTION - OTHER 9 - MEDIAN/CROSSING ISLAND 1 - INTERSECTION - MARKED 6 - BICYCLE LANE 12 - FIRST RESPONDER CROSSWALK AT INCIDENT SCENE 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS NON-MOTORIST 2-INTERSECTION - UNMARKED 99 - OTHER / UNKNOWN CROSSWALK B - SIDEWALK 11 - SHARED USE PATHS OR LOCATION CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION TRAILS AT IMPACT 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18-APPROACHING OR LEAVING VEHICLE 2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING 1 1 3 - CHANGING LANES 3____ 3-STRIKING 19-STANDING SPECIFIED LOCATION 9 - LEAVING TRAFFIC LANE ACTION 4- STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST 10-PARKED JOGGING, PLAYING 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN 21 - STANDING OUTSIDE 11 - SLOWING OR STOPPED 16-WORKING DISABLED VEHICLE & STRUCK INTRAFFIC 6 - MAKING LEFT TURN 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN 9-OTHER/UNKNOWN 12 - DRIVERLESS 13 - IMPROPER START FROM A 1-NONE 17 - VISION OBSTRUCTION 21 -LYING IN ROADWAY 7 - LEFT OF CENTER PARKED POSITION 18-OPERATING DEFECTIVE 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA 22 - NOT DISCERNIBLE 14 - STOPPED OR PARKED EQUIPMENT 3 - RAN RED LIGHT 9-IMPROPER LANE CHANGE 23 - OPENING DOOR INTO 0 8 ILLEGALLY 19 - LOAD SHIFTING/FALLING/ ROADWAY 4 - RAN STOP SIGN 10-IMPROPER PASSING 3 - FLASHER 6 - NO CONTROL CONTRIBUTING 5 - UNSAFE SPEED 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 SEQUENCE OF EVENTS 4 2 - INVOLVED-ACTIVE CROSSING 1 NON-COLLISION 1 2 0 1 - OVERTURNIROLLOVER 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 UNIT / NON-MOTORIST DIRECTION TRAVEL 23 - STRUCK BY FALLING, 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 18-ANIMAL - DEER 12 - DOWNHILL RUNAWAY SHIFTING CARGOOR 19-ANIMAL - OTHER 9 - RAN OFF ROAD LEFT

25 - IMPACT ATTENUATOR 31 - GUARDRAIL END / CRASH CUSHION 32 - PORTABLE BARRIER 26-BRIDGE OVERHEAD 33 - MEDIAN CABLE BARRIER STRUCTURE 34 - MEDIAN GUARDRAIL 27 - BRIDGE PIER ORABUTMENT BARRIER 28-BRIDGE PARAPET 35 - MEDIAN CONCRETE _ 29-BRIDGE RAIL

10 - CROSS MEDIAN

36 - MEDIAN OTHER BARRIER

5 - CARGO / EQUIPMENT

LOSS OR SHIFT

COLLISION WITH FIXED OBJECT - STRUCK 37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39-LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT

42 - CULVERT

13 - OTHER NON-COLLISION

14-PEDESTRIAN

15-PEDALCYCLE

21 - PARKED MOTOR VEHICLE 43-CURB 44 - DITCH 45 - EMBANKMENT 46-FENCE 47 - MAILBOX 48-TREE 49-FIRE HYDRANT

20 - MOTOR VEHICLE IN

TRANSPORT

24 - OTHER MOVABLE OBJECT 50 - WORK ZONE MAINTENANCE EQUIPMENT 51-WALL 52 - BUILDING 53-TUNNEL 54 - OTHER FIXED OR JECT 99-OTHER/UNKNOWN

ANYTHING SET IN MOTION

BY A MOTOR VEHICLE

30 - GUARDRAIL FACE

LOCAL REPORT NUMBER

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UNIT #	CROOKSTO	ST, MIDDLE (SAME AS DRIVER) N. KENNETI	H. AARON	ORC 149.43(A)(1)	DAMAGE DAMAGE SCALE				
OWNER A	DDRESS: STREET, CITY, STATE	, ZIP (X SAME AS DRIVER)		1 - NONE	3 - FUNCTIONAL DAMAGE				
	INE ST ,Kent					2 - MINOR DAM			
COMMER	CIAL CARRIER: NAME, ADDR	ESS, CITY, STATE, ZIP		COMMERCIAL CARRIES	PHONE: INCLUDE AREA CODE		- UNKNOWN		
LP STATE	LICENSE PLATE #	VEHICI	E IDENTIFICATION #	VEHICLE YE	AR VEHICLE MAKE		MAGED AREA(S) TE ALL THAT APPLY		
OH	HKJ7755		F ₁ E ₁ 9 ₁ C ₁ 8 ₁ 1 ₁ 3 ₁ 3 ₁ 9			12	12		
INSURA VERIFI			INSURANCE POLICY #	SIL	COLORAD	11 12	11 12		
- VERIL	TYPE OF USE	IDE	9234J383984 US DOT #	TOWED BY: COMPAN		11 1 2	10 11 1		
COMME		IN EMERGENCY RESPONSE	1 1 1 1 1	1		9 9 3	9 9 3		
INTER	LOCK	#OCCUPANTS VE	EHICLE WEIGHT GVWR/GCWR 1 - ≤10KLBS.	MATERIAL	DUS MATERIAL CLASS # PLACARD ID #	8 4 7	* * * * 7		
DEVICE EQUIP	E HIT/SKIP UNI	0,1,	2 - 10,001 - 26K LBS	☐ RELEASED		0	8 6		
	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	3 - >26K LBS. 12-GOLF CART	18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	6 11	12 7 6 5		
0.4		8 - MOTORCYCLE 3-WHEELED		19-BUS (16+ PASSENGERS)	24 - WHEELCHAIR (ANY TYPE)	10	11 1 2		
UNITTYPE	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE		20 - OTHER VEHICLE	25 - OTHER NON-MOTORIST		10 2		
	5 - CARGO VAN	10 - MOPED OR MOTORIZED BICYCLE		21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR	26-BICYCLE 27-TRAIN	_	8 11 4		
	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8	7 5 4		
	# of TRAILING UNITS	590.500 \$50.50				11 12 7	6 5 11 12 1		
1	WAS VEHICLE OPERATING IN AU		D - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	12	10 12		
, 2	MODE WHEN CRASH OCCURRED		A DARTIAL AUTOMATION	4 - HIGH AUTOMATION		10 11 1 2	10 11 1 2		
	1-YES 2-NO 9-OTHER/UNK	NOWN AUTONOMOUS MODE LEVEL	2 - PARTIAL AUTOMATION	5 - FULL AUTOMATION		9 3 3	9 3		
		6 - BUS - CHARTER/TOUR		16-FARM	21 - MAIL CARRIER	8 4 7	8 4		
0,1	2 - TAXI 3 - ELECTRONIC RIDE SHARING	7 - BUS - INTERCITY 8 - BUS - SHUTTLE		17 - MOWING 18 - SNOW REMOVAL	99 - OTHER / UNKNOWN	8 6	8 6 5		
SPECIAL FUNCTION	4 - SCHOOL TRANSPORT	9 - BUS - OTHER		19-TOWING		6 5	7 6 5		
	5 - BUS-TRANSIT/COMMUTER	10-AMBULANCE	15 - CONSTRUCTION EQUIPMENT	20 - SAFETY SERVICE PATROL		9	12 12 12		
0.1	1 - NO CARGO BODY TYPE / NOT APPLICABLE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	0111.0010	8 - POLE	12 - CONCRETE MIXER	12	1 1 🖹		
CARGO	C - 200	4 - LOGGING	/ A1044 W W THA A450 DAY	9 - CARGOTANK 10 - FLAT BED	13-AUTOTRANSPORTER 14-GARBAGE/REFUSE	a Ma			
BODY TYPE			7 004111/0/1700/0041/51	11-DUMP	99 - OTHER / UNKNOWN	9 3 9	9 T 3 9 M 3		
	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICKTIRES	9 - MOTOR TROUBLE	99-OTHER / UNKNOWN	6			
	2 - HEAD LAMPS	5 - STEERING		10-DISABLED FROM PRIOR ACCIDENT		8	6 6 6		
DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT		- NO DAMAGE [0]		
	***********	3 - INTERSECTION - OTHER		9 - MEDIAN/CROSSING ISLAND	12 - FIRST RESPONDER AT INCIDENT SCENE	□ TOD (121	□ ALL ADEAC (3/53		
NON-MOTORIST	1 2-INTERSECTION - UNMARKED	4 - MIDBLOCK - MARKED CROSSWALK		10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR	99 - OTHER / UNKNOWN	□-TOP [13]	- ALL AREAS [15]		
AT IMPACT		5 - TRAVEL LANE - OTHER LOCATIO		TRAILS		- UNIT	NOT AT SCENE [16]		
		1 - STRAIGHT AHEAD		13 - NEGOTIATING A CURVE	18-APPROACHING OR LEAVING VEHICLE	INITIAL	POINT OF CONTACT		
4		2 - BACKING 3 - CHANGING LANES	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE	14 - ENTERING OR CROSSING SPECIFIED LOCATION	19-STANDING	0 - NO DAMAG			
ACTION	4 - STRUCK PRE-CRASH	4 - OVERTAKING/PASSING	10 - PARKED	15 - WALKING, RUNNING, JOGGING, PLAYING	20 - OTHER NON-MOTORIST	0 6 1-12 - REFERT	TO UNIT 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN		
	5 - BOTH STRIKING ACTIONS & STRUCK	5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	11 - SLOWING OR STOPPED INTRAFFIC	16 - WORKING	21 - STANDING OUTSIDE DISABLED VEHICLE	13-TOP			
	9-OTHER/UNKNOWN	O MANUAL CELL TOWN		17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN		TRAFFIC		
		7 - LEFT OF CENTER	DIDVED DOGITION	17 - VISION OBSTRUCTION	21 -LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL		
Λ 1	2 - FAILURE TO YIELD 3 - RAN RED LIGHT	8 - FOLLOWING TOO CLOSE / ACC 9 - IMPROPER LANE CHANGE	14 - STOPPED OR PARKED	18 - OPERATING DEFECTIVE EQUIPMENT	22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN		
O I	4 - RAN STOP SIGN	10-IMPROPER PASSING	ILLEGALLY 15 - SWERVING TO AVOID	19-LOAD SHIFTING/FALLING/	ROADWAY	2 - TWO-WAY	6 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL		
CONTRIBUTING CIRCUMSTANCE	S 5 - UNSAFE SPEED	11 - DROVE OFF ROAD		SPILLING 20 - IMPROPER CROSSING	99 - OTHER IMPROPER ACTION	# of THROUGH LANES	RAIL GRADE CROSSING		
	6-IMPROPERTURN E OF EVENTS	12-IMPROPER BACKING		: 500 chi il 200 chi il 300 chi i		ON ROAD	1 - NOT INVOLVED		
	FOR EAEW 12		NON-COLLISION			4	2 - INVOLVED-ACTIVE CROSSING		
1 2 0		6 - EQUIPMENT FAILURE	*********	16-RAILWAY VEHICLE 17-ANIMAL — FARM	22 - WORK ZONE MAINTENANCE EQUIPMENT		3 - INVOLVED-PASSIVE CROSSING		
	2 - FIRE/EXPLOSION 3 - IMMERSION	7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	TRAVEL	18-ANIMAL - PEER	23 - STRUCK BY FALLING,	UNIT / NON	-MOTORIST DIRECTION		
2	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	12 OTHER NON COLLICION	19-ANIMAL — OTHER 20-MOTOR VEHICLE IN	SHIFTING CARGOOR ANYTHING SET IN MOTION		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST		
2025 VI 44	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	14 - PEDESTRIAN	TRANSPORT	BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	FROM L 1 TO L			
3		CULLISIO	15-PEDALCYCLE N WITH FIXED OBJECT	21 - PARKED MOTOR VEHICLE - STRUCK		- United (1000)	4 - WEST 8 - SOUTHWEST		
4	25 - IMPACT ATTENUATOR	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CURB	50 - WORK ZONE MAINTENANCE		9 - OTHER / UNKNOWN		
7	AL DRIBAT DISTRICTA	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER		44 - DITCH 45 - EMBANKMENT	EQUIPMENT 51 - WALL	UNIT SPEED	DETECTED SPEED		
5	STRUCTURE 27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL	SUPPORT	46-FENCE	52 - BUILDING	0 1 0	1 - STATED / ESTIMATED SPEED		
		BARRIER 35 - MEDIAN CONCRETE	AT ATHER BOOT BOLE	47 - MAILBOX 48 - TREE	53 - TUNNEL 54 - OTHER FIXED OBJECT		2 - CALCULATED / EDR		
6	29-BRIDGE RAIL	BARRIER 36 - MEDIAN OTHER BARRIER	OR CHIDDODT	49-FIRE HYDRANT	99 - OTHER / UNKNOWN	POSTED SPEED	3 - UNDETERMINED		
. 1	30-GUARDRAIL FACE	1				3 5			
HSY8304 O	FIRST HARMFUL EVEN H1U 1/19 [760-0820]	I MOST F	HARMFUL EVENT				PAGE 3 OF 5		
110 1 0004 0	11.0 1/10 [/00-0020]						FAUL 3 UF 3		

OFF PUBLIC BAFETY MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER							
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UNIT#	NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH AGE GENDER					
_0,1_I	MCLA	UGHLIN, CAMR	RYN, D	IANI	C				0 + 7 + 3 + 0 + 2 + 0 + 0 + 7 + 1 + 6 + F					
	CENTRAL AVE ,Ravenna ,OH 44266								CONTACT PHONE - INCLUDE AREA CODE Redacted per ORC 149.43(A)(1)					
INJURIES I									SEATING POSITION AIR BAG USAGE EJECT				JECTION	TRAPPED
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		LICENSE NUMBER	4 4 40	OFFENS	E CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION		CITATION NUMBER			
O H	REDAC	CTED PER ORC 4501:1-12 4511.21A						Assured Clea	r Distan		27678			
OL CLASS E	NDORSEMEN SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED		OHOL / DRUG SUSPI		CONDITION	STATUS T	YPE VALUE	STATUS	DRUG T		SELECTUPT04
. 4	BY				=	LCOHOL MAI	RIJUANA	1 1	1	1	1	1	INC.	
	NAME: LAST	FIRST, MIDDLE			Ц °	THER DRUG				DATE OF BIRTH			GE	GENDER
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ADDRESS: ST		Control Contro	2,20	Lore					75	PHONE - INCLUDE AREA			,	
631 VI	NE ST	Kent ,OH 44240								acted per C		149.	43(A)(1)
INJURIES I		EMS AGENCY (NAME)		INJUREDT	AKEN TO	MEDICAL FACILITY	(NAME, CITY)		DOT-C:	SEATING POSITIO	N AIR BAG	USAGE E.	JECTION	TRAPPED
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OL CLASS E	NDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED	_	HOL / DRUG SUSPI		CONDITION	STATUS T	YPE VALUE		DRUG T		SELECTUPTO4
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	NAME: LAST	FIRST, MIDDLE		-	υ٠	THER DRUG				DATE OF BIRTH		_	GE	GENDER
1900,000											w 8			
ADDRESS: ST	TREET, CITY, S	TATE, ZIP							CONTACT	PHONE - INCLUDE AREA (CODE			
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INJURIES I	NJURED	EMS AGENCY (NAME)		INJUREDT	AKEN TO	MEDICAL FACILITY	(NAME, CITY)		DOT-C:	SEATING POSITIO	N AIR BAG	USAGE E.	JECTION	TRAPPED
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OL CLASS	SELECT UP TO 2	RESTRICTION SELECT		VER Tracted		LCOHOL MAI	ECTED RIJUANA	CONDITION	STATUS T	YPE VALUE		TYPE		SELECTOP TO 4
	iii			1	=	THER DRUG	KIDOAIIA		l	_ •				
INJUR	IES	SEATING POSITION	A	IR BAG		OL CLAS	s	OL RESTRIC	TION(S)	DRIVER DISTRAC	TION	TES	ST STA	==
1 - FATAL 2 - SUSPECTED SE	DIQUE INHIDV	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP 2 - DEPLOYE			1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTER 2 - CDL INTRASTAT		1 - NOT DISTRACTED 2 - MANUALLY OPERATIN		1 - NONE GI 2 - TEST RE		
3 - SUSPECTED MI		2 - FRONT – MIDDLE	3- DEPLOYE			3 - CLASS C		3 - CORRECTIVE LE		ELECTRONIC COMMUN	NICATION	3 - TEST GI	VEN, CON	TAMINATED
4 - POSSIBLE INJU		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE		ED BOTH FRO	NT/SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER		DIALING)			VEN RESI	BLE ULTS KNOWN
5 - NO APPARENT I	INJURY	(M0TORCYCLE PASSENGER)	5-NOTAPP 9-DEPLOYI	LICABLE MENT UNKNO	WN	5 - M/C MOPED ONLY		5 - EXCEPT CLASS		3 - TALKING ON HANDS-F COMMUNICATION DEV	REE	5 - TEST GI	VEN, RESI	
INJURED TA	1000	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS 7 - EXCEPT TRACTO	D TDAILED	4 - TALKING ON HAND-HE COMMUNICATION DEV	ICE _	UNKNO		
/TREATED AT S	A CONTRACTOR OF THE PARTY OF TH	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)		ECTION	75	OL ENDORSE	MENT	8 - INTERMEDIATE		5 - OTHER ACTIVITY WITH	HAN	ALCOH 1 - NONE	OL TES	TTYPE
2 - EMS 3 - POLICE		8 - THIRD - MIDDLE	1 - NOTEJE	CTED LY EJECTED		H - HAZMAT M - MOTORCYCLE		9 - LEARNER'S PER	MIT	6 - PASSENGER		2 - BL00D		
9 - OTHER / UNKNO	0WN	9 - THIRD - RIGHT SIDE	3-TOTALLY			P - PASSENGER		RESTRICTIONS	LICHT ONLY	7 - OTHER DISTRACTION INSIDE THE VEHICLE		3 - URINE 4 - BREATH		
SAFETY EQU	UIPMENT	10 - SLEEPER SECTION OF TRUCK CAB	4-NOTAPP	LICABLE		N - TANKER Q - MOTOR SCOOTER		10 - LIMITED TO DAY 11 - LIMITED TO EM		8 - OTHER DISTRACTION		5 - OTHER		
1 - NONE USED		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA		RAPPED	UT E	R. THREE-WHEEL MO	TORCYCLE	12 - LIMITED - OTHE		THE VEHICLE 9 - OTHER / UNKNOWN		DRUG	TEST	TYPE
2 - SHOULDER BEL 3 - LAP BELT ONLY		(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1 - NOTTRA 2 - EXTRICA			S - SCHOOL BUS	TDATIER	13 - MECHANICAL DI (SPECIAL BRAK	ES, HAND			1 - NONE		
4 - SHOULDER & L.		12 - PASSENGER IN UNENCLOSED CARGO AREA		IICAL MEANS		T - DOUBLE & TRIPLE X - TANKER / HAZMAT		CONTROLS, OR O ADAPTIVE DEVI		1 - APPARENTLY NORMAL	100	2 - BLOOD 3 - URINE		
5 - CHILD RESTRA FORWARD FACI		13 - TRAILING UNIT	3- FREED B NON-ME	CHANICAL ME	ANS	GENDER		14 - MILITARY VEHICLE		2 - PHYSICAL IMPAIRMEN	NT .	4 - OTHER		
6 - CHILD RESTRAI	INT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				F-FEMALE		AIR BRAKES		3 - EMOTIONAL (E.G., DEPR ANGRY, DISTURBED)		DRUG T	EST RE	SULT(S)
7 - BOOSTER SEAT		15 - NON-MOTORIST				M - MALE U - OTHER / UNKNOWN		16 - OUTSIDE MIRRO 17 - PROSTHETIC AL		4 - ILLNESS 5 - FELL ASLEEP, FAINTEI		1 - AMPHET 2 - BARBITI		
8 - HELMET USED 9 - PROTECTIVE PA		99 - OTHER / UNKNOWN				O -OTHER / UNKNOWN		18 - OTHER		FATIGUED, ETC.		2 - BAKBIT 3 - BENZOD		S
(ELBOW, KNEES	S, ETC.)									6 - UNDERTHE INFLUENCE OF MEDICATIONS / DRU	JGS	4 - CANNAB		
10 - REFLECTIVE CL										/ALCOHOL 9-OTHER/UNKNOWN		5 - COCAIN 6 - OPIATES		S
/ BICYCLE ONLY	Y											7 - OTHER		
33 - UINEK/UNKNU	9 - OTHER / UNKNOWN											8 - NEGATI	VE RESUL	15

HSY8306 OH1M 1/19 [760-1500] PAGE 4 OF 5

U	OF PURPLE SAFETY OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER							
_	Z:: 	176						2,0,2,4,-,0,0,0,9,0,1,9,						
	UNIT # NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER						
Ļ	01 EDWARDS, PENNY, A							0 3 0 8 2 0 1 0 1 4 F						
PAN	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
OCCUPANT	6378 MARCHINN RD ,Ravenna Twp ,OH 44266								Redacted per ORC 149.43(A)(1					
0	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	ITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
	5	BY					$\lfloor 0_{\perp} 4_{\perp}$	MC HELMET		2	1	1		
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
								ــــــــــــــــــــــــــــــــــــــ	1 1 1					
PAN	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE	- INCLUDE AREA CO	DE				
OCCUPAN														
0	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: Medical Facility (NAME, CITY) SAFETY EQUIPMEN USED				SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
	نــــا	BY				U3E8	DOT-COMPLIANT MC HELMET	سس		ـــا ا				
	UNIT#	NAME: LAS	T, FIRST, MIDDLE		·			DAT	E OF BIRTH		AGE	GENDER		
									1 1 1		1.1			
ANT	ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE				
OCCUPANT														
ŏ	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	ITY (NANE, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
		BŶ					USEU	MC HELMET		ī.				
i	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
									SI 35 I	: E E	F F S			
ANT	ADDRESS:	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA GO	DE				
OCCUPANT														
ŏ	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	ITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
		BŶ					U3EU	MC HELMET			ر ا			
		INJU	JRIES	SAFET	Y EQUIPMENT USED		SEATING POS	ITION		AIR BAG U	SAGE			
	1 - FATA	AL		1 - NONE US	ED - OCCUPANT		IT – LEFT SIDE ORCYCLE DRIV	ED)	1 - NOT DE	PLOYED				
	2 - SUS	PECTEDSE	RIOUS INJURY		ER BELT ONLY USED		IT - MIDDLE	2 - DEPLOYED FRO						
			NOR INJURY		T ONLY USED	3 - FRON	IT – RIGHT SIDE	B 3 - DEPLOYED SIDE						
Ħ		SIBLE INJU			ER & LAP BELT USED		ND – LEFT SID ORCYCLE PASS		4 - DEPLO					
	5 - NO A	PPARENT	INJURY	5 - CHILD RI	ESTRAINT SYSTEM -		ND - MIDDLE	LIVULIA	PLICABLE					
		INJURED	TAKEN BY	FORWAR	D FACING		ND - RIGHT SI	DE 9 - DEPLOYMENT UNKNOW						
		TRANSPOR		6 - CHILD RI	ESTRAINT SYSTEM -		D – LEFT SIDE ORCYCLE SIDE	CAR)		EJECTI	O.N.	SINK SIN		
	2- EMS			7 - BOOSTER		8 - THIR	D - MIDDLE	1 - NOT EJECTED						
	3- POLI			8 - HELMET	USED		D - RIGHT SIDE	2 - PARTIALLY FIFCTED						
	9 - OTH	ER / UNKNO	DWN	9 - PROTECT	TVE PADS USED		ENGER IN OTH	UF TRUCK CAB						
		GE	NDER		KNEES, ETC.)	CARG	O AREA (NON-TH	RAILING UNIT, 4 - NOT APPLICABLE			E			
	F-FEMA				TVE CLOTHING		ENGER IN UNE			TRAPP	ED			
Ē	M - MAL			/ BICYCL	G – PEDESTRIAN E ONLY		CARGO AREA 1 - NOT TRAF			PPED				
B	U - OTHE	R / UNKNO	WN	99- OTHER /	UNKNOWN		LING UNIT NG ON VEHICLE	EXTERIOR	2 - EXTRICATED BY MECHANI			CAL		
							TRAILING UNIT)	271.211.011	MEANS		- O II A NITO			
							MOTORIST R/UNKNOWN		MEANS	BY NON-ME	CHANIC	AL		
Н	NAME. LAS	ST, FIRST, MIDD	i c			99 - OTHE	K / UNIKNOWN	DAT	E OF BIRTH		AGE	GENDER		
SS	IAME: CAS	o., i 1001, MIDU	to the					, DAI	_ 0. DIN III		AUL	WEHDER.		
WITNESS	ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE L		لـــــا		
≯												11		
7	NAME: LAST, FIRST, MIDDLE						DAT	E OF BIRTH	T	AGE	GENDER			
ESS							1 1 1	السا						
WITNESS	ADDRESS:	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE		3//		
										<u> </u>		1 1		
s	NAME: LAS	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER		
WITNESS											1 1			
ΙM	ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						

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