OHIO DEPARTMENT TRAFFIC CRASH	LOCAL REPORT NUMBER*							
PHOTOS TAKEN OH-2 OH-3	LOCAL INFORMATION			$2 \cdot 0 \cdot 2 \cdot 2 \cdot 2 \cdot - \cdot 0 \cdot 0 \cdot 0 \cdot 0 \cdot 1 \cdot 1 \cdot 1 \cdot 4 \cdot 3$				
X OH-1P OTHER	REPORTING AGENCY NAME*		NCIC*	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR		
SECONDARY CRASH PRIVATE PROPERTY		2	0   6   7   0   3	1 - SOLVED	0 2	0 2 98 - ANIMAL 99 - UNKNOWN		
I - CITY	ITY, VILLAGE, TOWNSHIP*			CRASH DATE / T	_	CRASH SEVERITY 1 - FATAL		
6 7 1 2-VILLAGE Kent				0 7 0 4 2 0 2 2		2 - SERIOUS INJURY		
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W - WEST			ROAD TYPE	LATITUDE DE	CIMAL DEGREES	SUSPECTED  3 - MINOR INJURY		
S R 5.9 W-WEST	HAYMAKER WY		$P \perp K$	411011511		SUSPECTED		
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W - WEST W - WEST	REFERENCE ROAD NAME (ROAD,	, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DE	CIMAL DEGREES	4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE		
	MANTUA	***************************************	S Q	-8 <sub>1</sub> 1 <sub>10</sub> 3 <sub>1</sub> 6 <sub>1</sub> 3 <sub>1</sub>	1   2   8	ONLY ONLY		
REFERENCE POINT DIRECTION  1-INTERSECTION FROM REFERENCE N N NORTH IS	ROUTE TYPE  - INTERSTATE ROUTE(TP) AL	ROAD TYPE - ALLEY HW- HIGHWAY	RD - ROAD		INTERSECTION REL			
1 2-MILE POST 3 S-SOUTH III		- AVENUE LA - LANE	SQ - SQUARE	WITHIN INTE	RSECTION OR ON APP	PROACH		
W-WEST SI	K-STATE ROUTE	-BOULEVARD MP-MILEPOST -CIRCLE OV - OVAL	ST - STREET TE - TERRACE	WITHIN INTE	RCHANGE AREA	NUMBER OF APPROACHES		
FROM REFERENCE UNIT OF MEASURE	R - NUMBERED COUNTY ROUTE CT	- COURT PK - PARKWAY	TL - TRAIL	<b>建新发展的基本</b>	ROADWAY			
2 0 0 2 2-FEET	ROUTE	- DRIVE PI - PIKE - HEIGHTS PL - PLACE	WA - WAY	ROADWAY DIV	IDED			
LOCATION OF FIRST HARMFUL EVE		INER OF CRASH COLLISION/IM	DACT	DIDECTION OF TOAUS		DIANTIA		
1 - ON ROADWAY 9 - CROSSOVE	ER 1 - NOT	COLLISION 4 - REAR-TO-REA		DIRECTION OF TRAVE		EDIAN TYPE ED FLUSH MEDIAN		
1 . 4 7 . 3 .	CRAPE CROSSING 7 TWO	WEEN 5-BACKING OMOTOR HICLES IN 6-ANGLE		S - SOUTH	( < 4 F	EET ) ED FLUSH MEDIAN		
4 - ON ROADSIDE 12-SHARED	USE PATHS OR TRA	NSPORT 7 - SIDESWIPE, SA		E - EAST W - WEST	(≥4 F	EET)		
6-OUTSIDETRAFFIC WAY 13-BIKE LAN	J-IILA				4 - DIVID	ED, DEPRESSED MEDIAN ED, RAISED MEDIAN		
7 - ON RAMP 14-TOLL BOO 8 - OFF RAMP 99-OTHER / U					I	TYPE) R/UNKNOWN		
. U-UT KAMI	WORK ZONE TYPE	LOCATION OF CRASH IN	WORK ZONE	CONTOUR	CONDITIONS	SURFACE		
	- LANE CLOSURE	1 - BEFORE THE 1S	T WORK ZONE	2	1	2		
And the second s	- LANE SHIFT/CROSSOVER - WORK ON SHOULDER	WARNING SIGN 2 - ADVANCE WARN			1 - DRY	1 - CONCRETE		
LAW ENFORCEMENT PRESENT	OR MEDIAN	3-TRANSITION AR	EA		2 - WET	2 - BLACKTOP,		
THE CONTRACTOR AND ADDRESS OF THE CO	- INTERMITTENT OR MOVING WORK - OTHER	4 - ACTIVITY AREA 5 - TERMINATION A		3 - CURVE LEVEL	3 - SNOW	BITUMINOUS, ASPHALT		
LIGHT CONDITION	WEATH	FD		4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK		
1 - DAYLIGHT	1 - CLEAR	6 - SNOW		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT OIL, GRAVEL	4 - SLAG, GRAVEL, STONE		
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	0 2 2-CLOUDY	7 - SEVERE CROSSWINDS E 8 - BLOWING SAND, SOIL, DI	MONS TO		6 - WATER (STANDIN MOVING)	NG, 5 - DIRT		
4 - DARK – ROADWAY NOT LIGHTED	4 - RAIN	9 - FREEZING RAIN OR FREE			7 - SLUSH	9 - OTHER/UNKNOWN		
5 - DARK – UNKNOWN ROADWAY LIGHTIN 9 - OTHER / UNKNOWN	G 5 - SLEET, HAIL	99 - OTHER / UNKNOWN			9 - OTHER/UNKNOW	N		
NARRATIVE						Indicate the north		
UNIT 1 & 2 WERE TRAVEL	ING E/B ON				1	direction with an "N" on the compass diagram.		
HAYMAKER PKWY APPR	OXIMATELY 200 F	FEET						
EAST OF S MANTUA ST. U			1 1	ī				
CURB LANE WHILE UNIT		And the state of t						
SECOND LANE. UNIT 2 M		ANE	MANTUAST	NOT	TO SCALE			
CHANGE INTO THE CUR		11,12	\$ \$ \$ \$ \$ \$ \$		IAKER PKWY.	→ 200 FT		
UNIT 1. UNIT 2 STATED S			-					
DISTRACTED BY A HORN						<b>←</b>		
CRASH. UNIT 1 CAUSED		<u></u>	TRAFFIC SIGN	JAL		Unit 2		
		<b>○K</b> ⇒	-					
PROPERTY DAMAGE ONLY CRASH.								
CRASH REPORTED DATE / TIME DISPATCH DATE / TIME ARRIVAL DATE / TIME SCENE CLEARED DATE / TIME REPORT TAKEN BY								
$\begin{bmatrix} 0 & 7 & 0 & 4 & 2 & 0 & 2 & 2 & / & 1 & 8 & 4 & 1 \end{bmatrix} \begin{bmatrix} 0 & 7 & 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1$						X POLICE AGENCY		
TOTAL TIME OTHER TOT	'AL OFFICER'S NAME*		CHECKED BY OFF	ICER'S NAME*		MOTORIST		
ROADWAY CLOSED INVESTIGATION TIME MINU	runer, bames		Gaydosh	h, Ryan Supplement (CORRECTION OR ADDIT)				
		DGE NUMBER*	Снескев 2 1	BY OFFICER'S BADGE I	NUMBER*	TO AN EXISTING REPORT SENT TO ODPS)		

OHIO DEPARTMENT
OF PUBLIC SAFETY
OF PUBLIC SAFETY
OF PUBLIC SAFETY LOCAL REPORT NUMBER 2,0,2,2,-,0,0,0,1,1,1,4,3 OWNER NAME: LAST, FIRST, MIDDLE (X SAME AS DRIVER) DUNED BUCK 0 | 1 | BOYLE, MICHAEL, K DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER) 1 - NONE 3 - FUNCTIONAL DAMAGE 2 3834 MORLEY DR, Brimfield Twp, OH 44240 ∠ MINOR DAMAGE 4 - DISABLING DAMAGE COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE 9 - UNKNOWN DAMAGED AREA(S) INDICATE ALL THAT APPLY VEHICLE YEAR LP STATE LICENSE PLATE # **VEHICLE IDENTIFICATION #** VEHICLE MAKE  $15 + F + N_1R_1L_15 + H_19 + 7 + C_1B_11 + 3 + 9 + 8 + 3 + 7$ 717ZBJ 2 | 0 | 1 | 2 |Honda VEHICLE MODEL INSURANCE COMPANY INSURANCE POLICY # COLOR INSURANCE VERIFIED ALLSTATE 026731031 GRY ODYSSEY TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT RESPONSE HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS INTERLOCK MATERIAL RELEASED CLASS # PLACARD ID # 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. HIT/SKIP UNIT DEVICE EQUIPPED **PLACARD** - >26K LBS. 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12-GOLF CART 23-PEDESTRIAN / SKATER 18-LIMO (LIVERY VEHICLE) 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANYTYPE) 0 12 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14-SINGLE UNITTRUCK 20-OTHER VEHICLE 25 - OTHER NON-MOTORIST UNIT TYPE 4 - PICK UP 10 - MOPED OR MOTORIZED 15 - SEMI-TRACTOR 21 · HEAVY EQUIPMENT 26-BICYCLE 5 - CARGO VAN BICYCLE 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) **□ 00** | # of Trailing Units 12 WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION 0 2 1-YES 2-NO 9-OTHER/UNKNOWN 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION AUTONOMOUS MODE LEVEL 11 - FIRE 1 - NONE 6 - BUS -- CHARTER/TOUR 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 UNCTION 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PURLIC LITTLITY 19-TOWING 5 - BUS - TRANSIT/COMMUTER 10-AMBULANCE 15-CONSTRUCTION EQUIPMENT 20-SAFETY SERVICE PATROL 1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 8 - POLE 12 - CONCRETE MIXER 0 + 1/ NOT APPLICABLE MOTOR VEHICLE CHASSIS 9 - CARGOTANK 13 - AUTO TRANSPORTER CARGO 2 - BUS 4 - LOGGING A - CARGO VÁN/FNCLOSED BOX 10-FLAT BED 14-GARBAGE/REFUSE BODY 7 - GRAIN/CHIPS/GRAVEL 11 - DUMP 99-OTHER/UNKNOWN TYPE 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99-OTHER/UNKNOWN VEHICLE 2 - HEAD LAMPS 8 - TRAILER EQUIPMENT 5 - STEERING 10-DISABLED FROM PRIOR ACCIDENT DEFECTIVE **DEFECTS 3 - TAIL LAMPS** 6 - TIRE BLOWOUT □-NO DAMAGE [ 0 ] - UNDERCARRIAGE [ 14 ] 1 - INTERSECTION -- MARKED 3 - INTERSECTION -- OTHER 6 - BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12-FIRST RESPONDER CROSSWALK AT INCIDENT SCENE 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS -TOP [13] -ALL AREAS [15] ION-MOTORIST 2 - INTERSECTION - UNMARKED CROSSWALK 99 - OTHER / UNKNOWN 8 - SIDEWALK 11 - SHARED USE PATHS OR LOCATION AT IMPACT CROSSWALK -UNIT NOT AT SCENE [16] 5 - TRAVEL LANE - OTHER LOCATION 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18'-APPROACHING INITIAL POINT OF CONTACT OR LEAVING VEHICLE 2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING 0 - NO DAMAGE 14 - UNDERCARRIAGE 4 0 1 1 3 - CHANGING LANES 19-STANDING → 3 - STRIKING 9 - LEAVING TRAFFIC LANE SPECIFIED LOCATION 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE PRE-CRASH 4 - OVERTAKING/PASSING 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST  $\lfloor 1 \rfloor 1 \rfloor$ ACTION 4- STRUCK 10 - PARKED DIAGRAM JOGGING, PLAYING 99 - UNKNOWN 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHT TURN 21 - STANDING OUTSIDE 11 - SLOWING OR STOPPED 13 - TOP 16-WORKING DISABLED VEHICLE & STRUCK IN TRAFFIC 6 - MAKING I FET 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 TRAFFICWAY FLOW TRAFFIC CONTROL PARKED POSITION 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA 18-OPERATING DEFECTIVE 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 14-STOPPED OR PARKED EQUIPMENT 3 - RAN RED LIGHT 9-IMPROPER LANE CHANGE 23 - OPENING DOOR INTO 2 - TWO-WAY 2 - SIGNAL 5 - YIELD SIGN [0]1ILLEGALLY 6\_\_ 19-LOAD SHIFTING/FALLING/ ROADWAY 4 - RAN STOP SIGN 10-IMPROPER PASSING 3 - FLASHER 6 - NO CONTROL 15 - SWERVING TO AVOID CIRCUMSTANCES 5 - UNSAFE SPEED CONTRIBUTING SPILLING 99 - OTHER IMPROPER ACTION 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IMPROPER CROSSING 6-IMPROPERTURN 12-IMPROPER BACKING # of THROUGH LANES RAIL GRADE CROSSING ON ROAD 1 - NOT INVOLVED SEQUENCE OF EVENTS 2 - INVOLVED-ACTIVE CROSSING 4 NON-COLLISION 1 2 0 1 - OVERTURN/ROLLOVER 3 - INVOLVED-PASSIVE CROSSING 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE --16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE OPPOSITE DIRECTION OF TRAVEL EQUIPMENT 7 - SEPARATION OF UNITS 17 - ANIMAL - FARM UNIT / NON-MOTORIST DIRECTION 23-STRUCK BY FALLING, 18-ANIMAL - DEER 8 - RAN OFF ROAD RIGHT 3 - IMMERSION 12 - DOWNHILL RUNAWAY SHIFTING CARGO OR 1 - NORTH 5 - NORTHEAST 19 - ANIMAL -- OTHER 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT ANYTHING SET IN MOTION 13 - OTHER NON-COLLISION 2 - SOUTH 6 - NORTHWEST 20 - MOTOR VEHICLE IN 5 - CARGO / EQUIPMENT 10 - CROSS MEDIAN **8Y A MOTOR VEHICLE** 14-PEDESTRIAN 4 3 - EAST TRANSPORT 7 - SOUTHEAST LOSS OR SHIFT 24-OTHER MOVABLE OBJECT 15-PEDALCYCLE 21 - PARKED MOTOR VEHICLE 4 - WEST 8 - SOUTHWEST COLLISION WITH FIXED OBJECT - STRUCK 9 - OTHER / UNKNOWN 31 - GUARDRAIL END 25 - IMPACT ATTENUATOR 37 - TRAFFIC SIGN POST 43-CURB 50-WORK ZONE MAINTENANCE / CRASH CUSHION EQUIPMENT 32 - PORTABLE BARRIER 38-OVERHEAD SIGN POST 44 - DITCH **UNIT SPEED** DETECTED SPEED 26 - BRIDGE OVERHEAD 33 - MEDIAN CABLE BARRIER 39-LIGHT/LUMINARIES 45 - EMBANKMENT 51 - WALL 1 - STATED / ESTIMATED SPEED STRUCTURE SUPPORT 52 - BUILDING 34-MEDIAN GUARDRAIL 46-FENCE 27 - BRIDGE PIER OR ABUTMENT 0 2 5 BARRIER 40 - UTILITY POLE 53-TUNNEL 2 - CALCULATED / EDR 47 - MAILBOX 28 - BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 54-OTHER FIXED OBJECT 48-TREE POSTED SPEED 3 - UNDETERMINED 29-BRIDGE RAIL BARRIER OR SUPPORT

99-OTHER/UNKNOWN

3 , 0 ,

49 - FIRE HYDRANT

30 - GUARDRAIL FACE

☐ FIRST HARMFUL EVENT

36 - MEDIAN OTHER BARRIER

\_\_1\_

42-CULVERT

■ MOST HARMFUL EVENT



UN	IT#	# OWNER NAME: LAST, FIRST, MIDDLE (X) SAME AS DRIVER)				EB BHUNE: 1884	HAT ADEX OART A WEALT AS BUILDS	DAMAGE				
<u>~ [0</u>	Land HOUSEL, SUZANNE, L   NER ADDRESS: STREET, CITY, STATE, ZIP (						101 A	DAMAGE SCALE				
74		IDRESS: STREET, CITY, STATE LEYVIEW ST ,Keni	-					1 - NONE 3 - FUNCTIONAL DAMAGE  2 - MINOR DAMAGE 4 - DISABLING DAMAGE				
5 554 CO		CIAL CARRIER: NAME, ADDI	<del></del>		Co	MMERCIAL CARRIER	PHONE: INCLUDE AREA CODE	9 - UNKNOWN				
		THE OTHER PROPERTY.	ness, our if our et et en		1 3		I I I I I I		MAGED AREA(S)			
LP S	TATE	LICENSE PLATE #	VEHICL	E IDENTIFICATION #		VEHICLE YE	AR VEHICLE MAKE	INDICATE ALL THAT APPLY				
	H	ETM6420		D <sub>1</sub> U <sub>1</sub> 9 <sub>1</sub> D <sub>1</sub> 5 <sub>1</sub> 6 <sub>1</sub> 4 <sub>1</sub> 5 <sub>1</sub>	1   8   2	1		12	12			
157	INSURA	INSURANCE COMF	PANY	INSURANCE POLICY#		COLOR	VEHICLE MODEL	11 12	11 12			
스	INSURAI VERIFII	ED ERIE		Q035608723		LGR	PRIUS	10 11 2	10 11 1 2			
		TYPE OF USE	IN EMERCENCY	US DOT #	TOW	ED BY: COMPAN	Y NAME	10 2	10.7 2			
	COMME	RCIAL GOVERNMENT	IN EMERGENCY RESPONSE		J	ΗΔΖΔΩΝΟ	OUS MATERIAL	9 9 3	3 9 9 3			
<b>I</b>	INTERL	.OCK	#UUGUPANIS	EHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS.	$  \Box$	MATERIAL	CLASS # PLACARD ID #	7 5 74	. T. J. T.			
▮┕	DEVICE	ED HIT/SKIP UNI	$\begin{bmatrix} \mathbf{T} & \mathbf{I} & \mathbf{I} & \mathbf{I} \end{bmatrix}$	2 - 10,001 - 26K LBS	.  〒	RELEASED PLACARD		3 6	12 7 6			
<b>.</b>		1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED		18 - LIMO (L	(VERY VEHICLE)	23-PEDESTRIAN/SKATER	6	1 12 1			
		2 - PASSENGER VAN (MINIVAN)				+ PASSENGERS)	24 - WHEELCHAIR (ANY TYPE)	10 /	11 2			
	11	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE	14-SINGLE UNITTRUCK	20-OTHERV	EHIÇLE	25 - OTHER NON-MOTORIST	<b>/</b>	10 2			
זאט		4 - PICK UP	10 - MOPED OR MOTORIZED Bicycle		21 - HEAVY I	•	26-BICYCLE	9	9 3 3			
		5 - CARGO VAN 6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE	16 - FARM EQUIPMENT 17 - MOTORHOME		WITH RIDER OR -DRAWN VEHICLE	27 -TRAIN 99 - Unknown or hit/skip					
n H			(ATV/UTV)	17 - NOTONIONE			77 - DIAMONN ON HITTORIF	8 🗸	6			
	001	# of TRAILING UNITS						11 12 1	6 11 12			
Į.		WAS VEHICLE OPERATING IN AU				ONAL AUTOMATION	9 - UNKNOWN	10 12 2	10 12 2			
	2 ,	MODE WHEN CRASH OCCURRED  1-YES 2-NO 9-OTHER/UNK		A DARTIAL AUTOMATION	4 - HIGH AU 5 - Full Au			10 2 2	10 2 2			
		T-1E9 C-MA A-MINEKIANK	NOWN AUTONOMOUS MODE LEVEL	,	J - ruck AU	I ONIAI IUN		9 3	3 9 9 3 3			
		1 - NONE	6 - BU\$ - CHARTER/TOUR		16 • FARM		21 - MAIL CARRIER	8 4 -	8 4 -			
LO		2 - TAXI	7 - BUS - INTERCITY		17 - MOWING		99-OTHER/UNKNOWN	$\begin{vmatrix} 8 & \begin{vmatrix} 7 & 3 & 5 \\ 6 & 6 \end{vmatrix} > 4$	8 7 5 4			
SP		3 - ELECTRONIC RIDE SHARING	8 - BUS - SHUTTLE 9 - BUS - OTHER		18-SNOW R			7 6	7 5			
FUN		4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER		14-PUBLIC UTILITY 15-CONSTRUCTION EQUIPMENT	19-TOWING 20-SAFETY			Ū	v			
<b>I</b>		1 - NO CARGO BODYTYPE			8 - POLE		12-CONCRETE MIXER		12 12 12			
	1	/ NOT APPLICABLE	MOTOR VEHICLE	ALLEGOIO	9 - CARGOTANK		13 - AUTO TRANSPORTER	.12				
	ARGO ODY	2 - BUS	4 - LOGGING	6 - CARGO VAN/ENCLOSED BOX	10-FLAT BE		14-GARBAGE/REFUSE	R. A AA R.	3 9 1 3 9 8 3			
	YPE			7 - GRAIN/CHIPS/GRAVEL	11-DUMP		99-OTHER/UNKNOWN					
		1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MOTORT	ROUBLE	99-OTHER/UNKNOWN	6				
		2 - HEAD LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT DEFECTIVE	10 - DISABLI ACCIDEI	ED FROM PRIOR			6 6 6			
DE	PECIS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DELFOITAE	AGGIOLI	¥1		☐ - NO DAMAGE	0]UNDERCARRIAGE [14]			
			3 - INTERSECTION - OTHER			CROSSING ISLAND	12-FIRST RESPONDER					
NON-	LLLLI Votorist	CROSSWALK 2 - INTERSECTION UNMARKED	4 - MIDBLOCK - MARKED CROSSWALK		10-DRIVEW		AT INCIDENT SCENE 99-OTHER/UNKNOWN	☐- <b>TOP</b> [13]	ALLAREAS [15]			
LO0	ATION MPACT	CROSSWALK	5 -TRAVEL LANE - OTHER LOCATION		TRAILS	USE PATHS OR	77-VIII LAS VIII VIII	☐ - UNI	T NOT AT SCENE [16]			
		1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13.NEGOTI	ATING A CURVE	18-APPROACHING		· · · · · · · · · · · · · · · · · · ·			
		2 - NON-COLLISION	2 - BACKING			NG OR CROSSING	OR LEAVING VEHICLE		L POINT OF CONTACT			
<u> </u>		3-STRIKING 0 3	3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE		ED LOCATION	19-STANDING	0 - NO DAMA	GE 14 - UNDERCARRIAGE TO UNIT 15 - VEHICLE NOT AT SCENE			
AC	TION	4 - STRUCK PRE-CRASH 5 - BOTH STRIKING ACTIONS	4 - OVERTAKING/PASSING	10 17110025		G, RUNNING, G, PLAYING	20-OTHER NON-MOTORIST 21-Standing Outside	0 5 1-12 - REFER				
		& STRUCK	5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	11 - SLOWING OR STOPPED In traffic	16-WORKIN		DISABLED VEHICLE	13 - TOP				
		9 - OTHER / UNKNOWN	- minimus said (VIIII)		17 - PUSHIN	G VEHICLE	99-OTHER/UNKNOWN		TRAFFIC			
		1 - NONE	7-LEFT OF CENTER		17 - VISION	BSTRUCTION	21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL			
		2 - FAILURE TO YIELD	8 - FOLLOWING TOO CLOSE / AC	DA PARKED POSITION  14-STOPPED OR PARKED		ING DEFECTIVE	22 - NOT DISCERNIBLE	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN			
<u>_0</u>	9	3 - RAN RED LIGHT	9-IMPROPER LANE CHANGE	THEATIN	EQUIPM 19 - LOAD SH	ENT HFTING/FALLING/	23-OPENING DOOR INTO ROADWAY	2 2 - TWO-WAY	6 2 - SIGNAL 5 - YIELD SIGN			
CONT	RIBUTING	4 - RAN STOP SIGN 5 - UNSAFE SPEED 4 - IMPRODUED THEN	10-IMPROPER PASSING 11-DROVE OFF ROAD	15 - SWERVING TO AVOID	SPILLIN		99-OTHER IMPROPER ACTION		3 - FLASHER 6 - NO CONTROL			
CIRCU	MSTANCES	6 - IMPROPERTURN	12-IMPROPER BACKING	16 - WRONG WAY	20-IMPROP	ER CROSSING		# of through lanes	RAIL GRADE CROSSING			
CIRCU II SEQ	UENCE	OF EVENTS		· · · · · · · · · · · · · · · · · · ·				ON ROAD	1 - NOT INVOLVED			
		1 AUGUSTINALISMS	/ FOUNDAMENT	NON-COLLISION			00 1110017	4	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING			
1_2	10	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	ADDÁÓITE DIDEATIAN AE	16 - RAILWA 17 - ANIMAL		22 - WORK ZONE MAINTENANCE EQUIPMENT		> Without the Wood & F Dunggilled			
		3 - IMMERSION	8 - RAN OFF ROAD RIGHT	TRAVEL	18-ANIMAL		23-STRUCK BY FALLING,	UNIT/NO	N-MOTORIST DIRECTION			
2		4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	12 ATUED MAN COLLIGIAN	19-ANIMAL		SHIFTING CARGO OR Anything set in motion		1 - NORTH 5 - NORTHEAST			
		5 - CARGO / EQUIPMENT LOSS OR SHIFT	10-CROSS MEDIAN	14 - PEDESTRIAN	20-MOTORY TRANSP		BY A MOTOR VEHICLE	FROM 4 TO L	3 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST			
3 ∟	لــــــــــــــــــــــــــــــــــــــ	LOGG ON BILL!			21 - PARKED	MOTOR VEHICLE	24-OTHER MOVABLE OBJECT	13.000 [	4 - WEST 8 - SOUTHWEST			
		25 - IMPACT ATTENHATOD	COLLISIO 31-GUARDRAIL END	ON WITH FIXED OBJECT		ICK	SO - WOOK TONE MAINTENANCE		9 - OTHER / UNKNOWN			
4 ∟		25 - IMPACT ATTENUATOR / CRASH CUSHION	32 - PORTABLE BARRIER		43 - CURB 44 - DITCH		50-WORK ZONE MAINTENANCE EQUIPMENT	UNIT SPEED	DETECTED SPEED			
		26 - BRIDGE OVERHEAD STRUCTURE	33 - MEDIAN CABLE BARRIER	39-LIGHT/LUMINARIES	45 - EMBANI	KMENT	51 - WALL	5111. 51 MED	1 - STATED / ESTIMATED SPEED			
5		27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL Barrier	IO UTO ITU DOL P	46 - FENCE	v	52 - BUILDING 53 - Tunnel	0 2 5	2 - CALCULATED / EDR			
		28 - BRIDGE PARAPET	35 - MEDIAN CONCRETE	41 - OTHER POST, POLE	47 - MAILBO 48 - TREE	٨	54-OTHER FIXED OBJECT	DAATER SSEE	3 - UNDETERMINED			
6 ∟		29 - BRIDGE RAIL	BARRIER	OR SUPPORT	49 - FIRE HY	'DRANT	99-OTHER/UNKNOWN	POSTED SPEED	3 - ONDETENMINED			
	1	30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT				3 5				
		FIRST HARMFUL EVEN	IT MOST	HARMFUL EVENT								

ONE OF PURISH SAFEEY MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER						
								$2 \cdot 0 \cdot 2 \cdot 2 \cdot 2 \cdot - 0 \cdot 0 \cdot 0 \cdot 1 \cdot 1 \cdot 1 \cdot 4 \cdot 3$						
UNI.		NAME: LAST, FIRST, MIDDLE  BOYLE, MICHAEL, K								DATE OF BIRTH AGE GENDER   0 3 / 0 7 / 1 9 4 8 7 4 M				
		STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE				
383	3834 MORLEY DR ,Brimfield Twp ,OH 44240								·L					
2	- 1	INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT TAKEN							DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED					
5		TAKEN BY	YOUNGE MILLERED		OFFEN	or ollar	orn I	10011	0 4	MC HEI	MET 0 1	1		<u> </u>
OL ST		UPERATUR I	.ICENSE NUMBER		OFFEN	SE CHAR	(GED	LOCAL	OFFENSE DESC	KIPIIUN		GHAHO	N NUMBER	
OL CL		ENDORSEMENT	RESTRICTION SELECT	UPTO3 DRI	VER	ALCO	HOL / DRUG SUSPE	CTED	CONDITION		OHOL TEST		RUG TEST(S)	
		SELECT UP TO 2		BY	TRACTED 1		_COHOL MAR	RIJUANA	1	SIAIUS	PE VALUE		YPE RESULT SELECT	UPTO4
LUNI	 T.#	NAME: LAST,	EIDET MIDDLE			07	THER DRUG		11		DATE OF BIRTH		AGE GEN	ILL.
			EL, SUZANNE, I	1						0 4		947		_ I
		TREET, CITY, ST	· · · · · · · · · · · · · · · · · · ·		<del> </del>					لتلتا	PHONE - INCLUDE AREA C	1 1		=
<b>5</b> 32	2 VA	LLEY	VIEW ST ,Kent ,0	<b>OH 44</b>	240					l				i
INJUE		TAKEN	EMS AGENCY (NAME)		INJURED.	TAKEN TO:	MEDICAL FACILITY	NAME, CITY)	USED	DOT-Co		AIR BAG US	AGE EJECTION TRAF	PPED 1
OL ST	<u>'—</u>	OPERATOR I	ICENSE NUMBER		OFFEN	SE CHAR	ocen I	LOCAL	0 4	MC HEI	LMET 0 1	CITATIO	1   1   1   TATION NUMBER	
		OF ERATOR I	TOENSE NOMBER		331.0		IULD	CODE	Driving i		ed La	2180		
OL CL		ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER		HOL / DRUG SUSPE		CONDITION	ALC	OHOLTEST		RUG TEST(S) YPE   RESULT SELECT	UD TO A
		SELECT UP TO 2		BY	TRACTED 8		_	RIJUANA	1 .	1	1 VALUE		1	UP 104
UNI'	 T#	NAME: LAST,	0 3		0	01	THER DRUG				DATE OF BIRTH			DER
ONI	"	HAME: LASI,	, INSTANTOULL								/ / /		, Auc Julia	DE.
∑ ADDF	RESS:	STREET, CITY, ST	TATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE				
OTOR												_ll_		
NON-MOTORIS	- 1	TAKEN	EMS AGENCY (NAME)		INJURED.	TAKEN TO:	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED	DOT-Co	MPLIANT SEATING POSITION	N AIR BAG U	SAGE EJECTION TRAI	PPED
		OPERATOR I	ICENSE NUMBER		OFFEN	SE CHAR	OGED	LOCAL	OFFENSE DESC		LME I	CITATIO	M NUMBER	_
OL ST		OI ENATOR I	TOLISE NOMBER			or only	, ueb	CODE	OTT ENGL DEGO	11011		- OTTAIN	W NOMBER	
OL CL	.ASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	UPTO3 DRI	VER TRACTED		OHOL / DRUG SUSPE		CONDITION	ALC STATUS T	OHOL TEST /PE VALUE		RUG TEST(S)	UP 104
				BY			LCOHOL MAF THER DRUG	RIJUANA						
	INJUI	RIES	SEATING POSITION	 	IR BAG	L v	OL CLASS	5	OL RESTRIC	TION(S)	DRIVER DISTRAC	TION	TEST STATUS	
1 - FATAL	110000	ERIOUS INJURY	1 - FRONT = LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEF 2 - DEPLOY			1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTER 2 - CDL INTRASTAT		1 - NOT DISTRACTED 2 - MANUALLY OPERATIN	A	- NONE GIVEN - Test refused	
2.100	多 网络沙洲	IINOR INJURY	2 - FRONT - MIDDLE	3 - DEPLOY	ED SIDE		3 - CLASS C		3 - CORRECTIVE LE	and the second	ELECTRONIC COMMUN DEVICE (TEXTING, TYP	ICATION : 3	-TEST GIVEN, CONTAMINA	ATED
4 - POSSI 5 - NO AP	<b>第4576</b> 6		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE	4 - DEPLOY 5 - NOT APF	ED BOTH FRO Plicable	ONT/SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER 5 - EXCEPT CLASS	A BUS	DIALING) 3 - Talking on Hands-Ff	4	SAMPLE / UNUSABLE -TEST GIVEN, RESULTS KI	NOWN
		AKEN BY	(MOTORCYCLE PASSENGER)  5 - SECOND - MIDDLE	表示 经国际股份的	MENT UNKN	OWN	5 - M/C MOPED ONLY 6 - NO VALID OL		6 - EXCEPT CLASS	Part Pile Control	COMMUNICATION DEV	ICE 5	-TEST GIVEN, RESULTS Unknown	
1 - NOTT	RANSPO	RTEO	6 - SECOND - RIGHT SIDE		I COTTON				7 - EXCEPT TRACTO	R-TRAILER	4 - TALKING ON HAND-HE COMMUNICATION DEV	ICE	ALCOHOL TEST TY	PE
2-EMS	ATED AT	SUENE	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	1 · NOT EJE	CTED		OL ENDORSEM H-HAZMAT	VIEW I	8 - INTERMEDIATE RESTRICTIONS	LICENSE	5 - OTHER ACTIVITY WITH ELECTRONIC DEVICE		- NONE	
3 - POLIC			8 - THIRD - MIDDLE 9 - Third - Right Side	14.00 (4.7.19)	LY EJECTED		M - MOTORCYCLE		9 - LEARNER'S PER RESTRICTIONS	MIT	6 - PASSENGER 7 - OTHER DISTRACTION		- BLOOD - Urine	
9-OTHE			10 - SLEEPER SECTION	3 - TOTALLY 4 - NOT APP			P - PASSENGER N - TANKER		10 - LIMITED TO DAY		INSIDE THE VEHICLE	iq do e7 + ⊈uir	BREATH	
250 450 4	SAFETY EQUIPMENT OF RUCK CAB Q-MOTOR SCOOTER 11-LIMITED TO						11 - LIMITED TO EMI 12 - LIMITED - OTHE		8 - OTHER DISTRACTION ( The Vehicle	JUISINE : 5	-OTHER			
2 - SHOU	LDER BE	LT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1 - NOTTRA	IPPED		S - SCHOOL BUS	IURUTULE	13 - MECHANICAL D	EVICES	9-OTHER/UNKNOWN	1	DRUG TEST TYPE -None	<b>.</b> * 11.5
3 - LAP B		Y USED Lap belt used	PICK-UP WITH CAP).  12 - PASSENGER IN UNENCLOSED	2 - EXTRICA MECHAN	ATED BY Vical Mean:	S	T - DOUBLE & TRIPLE X - TANKER / HAZMAT	TRAILERS	CONTROLS, OR O	THER	CONDITION 1 - APPARENTLY NORMAL	表,有限性數學 化	- BLOOD	
5 - CHILD		AINT SYSTEM -	CARGO AREA	3 - FREED E Non-Me	SY Chanical M	IEANS			14 - MILITARY VEHI	1300 July 1	2 - PHYSICAL IMPAIRMEN	医乳腺性皮肤炎	- URINE - Other	
6 - CHILD	D RESTR	AINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				GENDER F-FEMALE		15 - MOTOR VEHICLE AIR BRAKES	SWITHOUT	3 - EMOTIONAL (E.G., DEPR ANGRY, DISTURBED)		RUG TEST RESULT	Γ(S)
7 - B00S	FACING TER SEA	reading the second	15 - NON-MOTORIST				M - MALE		16 - OUTSIDE MIRRO	from the second	4 - ILLNESS		-AMPHETAMINES	
8 - HELN	MET USE	0	99-OTHER/UNKNOWN				U - OTHER / UNKNOWN		17 - PROSTHETIC AII 18 - OTHER		5 - FELL ASLEEP, FAINTEI Fatigued, etc.	3	- BARBITURATES - BENZODIAZEPINES	
(ELBC	OW, KNEI										6- UNDER THE INFLUENC OF MEDICATIONS / DRU	E IGS 4	- CANNABINOIDS	
10 - REFLI	化化硫矿矿	CLOTHING Edestrián									/ALCOHOL 9-OTHER/UNKNOWN	. The state of the	- COCAINE - OPIATES / OPIOIDS	
/ BICY	YCLE ON	Y					*						-OTHER	
99 - OTHE	1925 to 25 3												- NEGATIVE RESULTS	

OCCUPANT / WITNESS ADDENDUM							LOCAL REPORT NUMBER						
									<u>  2   0   2   2   -   0   0   0   1   1   1   4   3                    </u>				
	UNIT#		T, FIRST, MIDDLE	DATE OF BIRTH AGE GENDER									
Ę.	01	l	LE, SUSANNE,	MARIE		0 7 / 0 1 / 1 9 5 2 7 0 F							
CCUPAN		STREET, CITY,	•		CONTACT PHONE - INCLUDE AREA CODE								
		INJURED	EY DR ,Brimfi EMS Agency (NAME)	<u> </u>	SEATING POSITION	AID DAG HEAGE	CIECTION	TRADBER					
	. 5	TAKEN	EMIS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	IT (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	0 3	1 1 .	. 1	1 1	
	UNIT#	NAME	T, FIRST, MIDDLE				0,4,		E OF BIRTH		AGE	GENDER	
	ONLI #	MAME: LAS	I, FIRST, MIDDLE	/ .	. /		AUC	GENDER					
	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO				
OCCUPAN		,	<b>-</b>					1 1 1	1 1				
8	INJURIES	INJURED	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FACILI	TY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
. !	TAKEN USED USED					USED	MC HELMET		 		1		
2	UNIT#	NAME: LAS	T, FIRST, MIDDLE	Tr				DATE OF BIRTH AGE GENDER					
NYG	ADDRESS:	STREET, CITY,	STATE, ZIP			,		CONTACT PHONE	- INCLUDE AREA CO	DE			
冒		I	I				Taxabaaa		2212 22	Table 2 - a	Taure :	T	
	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	TY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
		<u> </u>								إ	<u></u>	L	
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DATI	E OF BIRTH		AGE	GENDER	
Z	ADDRESS:	STREET, CITY,	STATE 71P					CONTACT PHONE	* INCLUDE AREA CO	DE .		<u>                                     </u>	
CCUPAN	7,20,1200	or needy or in							INCODE AREA GO	<i>u</i>			
8	INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	TY (NAME, CITY)	SAFETY EQUIPMENT	DOT A	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
		TAKEN BY					USED	DOT-COMPLIANT MC HELMET		ļ			
	5 Cresses	INJU	IRIES	SAFET	Y EQUIPMENT USED		SEATING POS	ITION	(S) a tank and the	AIR BAG U	SAGE	185, 2111 451	
	1 - FATA	4 Same of S		1 - NONE US Vehicle	ED - OCCUPANT		IT – LEFT SIDE ORCYCLE DRIV	ER)	1 - NOT DE				
		<b>全年第4条。</b> 是	RIOUS INJURY Nor injury		ER BELT ONLY USED	2 - FRONT - MIDDLE			2 - DEPLOYED FRONT 3 - DEPLOYED SIDE				
		SIBLE INJU	영화하다 그런 살이 나타가 그렇게	3 - LAP BELT	ΓONLY USED		IT – RIGHT SIDE IND – LEFT SIDE		4 - DEPLOYED BOTH				
	1977 . 30	PPARENT		4 - SHOULDE	ER & LAP BELT USED	(MOTORCYCLE PASS			FRONT/SIDE				
L	All of agent	INJURED	TAKEN BY		ESTRAINT SYSTEM – D FACING		ND – MIDDLE ND – RIGHT SIC	5 NOT APPLICABLE					
	1 - NOT	TRANSPOR	Carrier and a second and designed		STRAINT SYSTEM -	7 - THIR	D - LEFT SIDE		9 - DEPLOYMENT UNKNOWN				
	194.4 50	EATED AT S	CENE	REAR FA	경기가 있다고 하다가 하는 가능이 되다.	化精制设备 电影性电影 化	ORCYCLE SIDE D – MIDDLE	CAR)	Projektoral estados	EJECTIO	ON Geografiya 90		
	2 - EMS			7 - BOOSTER 8 - HELMET	하다면 그리는 이 나는 사람들이 되었다.	The state of the state of the	D – RIGHT SIDE			무장근학과 1시			
	3 - P0L1	ER / UNKNO	N/N	9 - PROTECTIVE PADS USED 11 - PASSENGER IN 0				March Market Committee Com	2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED				
			NDER		KNEES, ETC.)	CARG	O AREA (NON-TI	RAILING UNIT, 4 - NOT APPLICABLE					
	F-FEMA	y en little of city in a			IVE CLOTHING		PICK-UPWITH CAI ENGER IN UNE			TRAPPE	D.	agilliniae ji s	
	M - MAL			/ BICYCL	G = PEDESTRIAN E ONLY	"说话是'自有感动或日锋'。	O AREA	1 - NOTTRAPPED					
	U-OIHE	.R/UNKNO	WN	99-OTHER/	UNKNOWN		LING UNIT NG ON VEHICLE	EXTERIOR	2 - EXTRIC	ATED BY M	ECHANI(	CAL	
	(NON-TRAILING UNIT 15 - NON-MOTORIST								打电线管 污污	, BY NON-ME	CHANIC	ΔL	
						手手がそのい ひこうにん	ER / UNKNOWN		MEANS				
	NAME: LA	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER	
NESS	·····	4a							/				
WIT	ADDRESS: STREET, CITY, STATE, ZIP								- INCLUDE AREA CO	DE			
٥	MAMELLA	OT FIDET MIDD	W.E.	*				DAT	E OE BIDTU		ACE	CENDED	
NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER						
ADDRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE	- INCLUDE AREA CO	DE			
Š								<u> </u>	<u> </u>	<u></u>			
S	NAME: LA	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER	
SEZ	Annnece	. OTDEET OUT	CTATE 71D					CONTACT PHONE	- Digiting 122		1_1_	<u>                                     </u>	
ΙM	AUUKESS	: STREET, CITY,	STALE, ZIP					OUNTAUT PHONE	- INGLUDE AREA CC	iue.			
								<u> </u>		<u> </u>			

OHIO DEPARTMENT	Narrative Continuation	LOCAL REPORT NUMBER					
BAPETY - SERVICE - PROTECTION	Natiative Continuation	$[2_{+}0_{+}2_{-}2_{+}-[0_{+}0_{+}0_{+}1_{+}1_{+}1_{+}4_{+}3_{+}]$					
	•						