OHIO DEPARTMENT TRAFFIC CRASH F	REPORT *DENOTES MA	ANDATORY FIELD FOR SUPPLEM	ENT REPORT	L	OCAL REPORT NUMBER*		
PHOTOS TAKEN OH-2 X OH-3	LOCAL INFORMATION		$\lfloor 2 + 0 + 2 + 2 + 2 + - + 0 + 0 + 0 + 1 + 4 + 1 + 1 + 7 + - + 1 \rfloor$				
OH-1P OTHER	REPORTING AGENCY NAME* City of Kent Police	^	HIT/SKIP 1 - SOLVED	NUMBER OF UNITS UNIT IN ERROR 98 - ANIMAL			
	, VILLAGE, TOWNSHIP*	<u> </u>	$\frac{6,7,0,3}{1}$	L 2 - UNSOLVED CRASH DATE / T.	0 2 0 2 99 - UNKNOW IME* CRASH SEVERITY		
6 / 2-VILLAGE Konf	, VICLAGE, IOWNSHIP**			0.8 2 4 2 0 2 2	10624 2 1-FATAL		
3-TOWNSHIP	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DEC	2 - SERIOUS INJURY		
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH S - SOUTH W - WEST	MAIN		$ \mathbf{S} \cdot \mathbf{T} $	4.1.15.3	7 5 0 3 - MINOR INJURY SUSPECTED		
W WES	REFERENCE ROAD NAME (ROAD	, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DE	CIMAL DEGREES 4 - INJURY POSSIBLE		
E - EAST W - WEST	HORNING		$\mathbf{R} \cdot \mathbf{D}$	-8 ₁ 1 ₁₀ 3 ₁ 3 ₁ 8 ₁	9 6 2 5 - PROPERTY DAMAG		
REFERENCE POINT DIRECTION FROM REFERENCE	ROUTE TYPE	ROAD TYPE		l	NTERSECTION RELATED		
1 2-MILE POST S-SOUTH US-			RD - ROAD SQ - SQUARE	X WITHIN INTER	RSECTION OR ON APPROACH		
1	STATE ROUTE		ST - STREET TE - TERRACE	WITHIN INTER	RCHANGE AREA NUMBER OF APPROACHI		
FROM REFERENCE UNIT OF MEASURE	NUMBERED COUNTY ROUTE CT	- COURT PK - PARKWAY	TL -TRAIL		ROADWAY		
2-FEET 13-YARDS	ROUTE	R - DRIVE PI - PIKE ' E - HEIGHTS PL - PLACE	WA - WAY	ROADWAY DIV	IDED		
LOCATION OF FIRST HARMFUL EVEN		NNER OF CRASH COLLISION/IMPA	CT	DIRECTION OF TRAVE	MEDIAN TYPE		
1 - ON ROADWAY 9 - CROSSOVER 2 - ON SHOULDER 10 - DRIVEWAY	ALLEV ACCESS BET	COLLISION 4-REAR-TO-REAR TWEEN 5-BACKING		N - NORTH S - SOUTH	1 - DIVIDED FLUSH MEDIAN (<4 FEET)		
0 1 3-IN MEDIAN 11-RAILWAY G 4-ON ROADSIDE 12-SHARED US	RADE CROSSING VE	O MOTOR HICLES IN ANSPORT 7 - SIDESWIPE, SAN	te didection	E - EAST	2 - DIVIDED FLUSH MEDIAN (≥4 FEET)		
5 - ON GORE TRAILS	2 - REA	AR-END 8 - SIDESWIPE, OPP	OSITE DIRECTION	W-WEST	3 - DIVIDED, DEPRESSED MEDIA 4 - DIVIDED, RAISED MEDIAN		
7-ON RAMP 14-TOLL BOOT	н	AD-ON 9 - OTHER / UNKNO	WN		(ANYTYPE) 9 - OTHER/UNKNOWN		
8-OFF RAMP 99-OTHER/UN				CONTOUR			
	WORK ZONE TYPE LANE CLOSURE	LOCATION OF CRASH IN W 1 - BEFORE THE 1ST		CONTOUR 2	conditions surface 1 2		
] 3.	LANE SHIFT/CROSSOVER WORK ON SHOULDER	WARNING SIGN 2 - ADVANCE WARNI	NG AREA	1 - STRAIGHT LEVEL			
LAW ENFORCEMENT PRESENT	OR MEDIAN INTERMITTENT OR MOVING WOR	3-TRANSITION ARE 4-ACTIVITY AREA	Α	2 - STRAIGHT GRADE	RITHMINOUS		
1 	OTHER	5 - TERMINATION AF	REA	3 - CURVE LEVEL 4 - CURVE GRADE	ASPHALT		
LIGHT CONDITION	WEATH	HER		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, 4 - SLAG GRAVEL		
1 - DAYLIGHT 2 - DAWN/DUSK	1-CLEAR 0 1 2-CLOUDY	6 - SNOW 7 - SEVERE CROSSWINDS			OIL, GRAVEL STONE 6-WATER (STANDING, 5-DIRT		
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	3 - FOG, SMOG, SMOK 4 - RAIN	KE 8 - BLOWING SAND, SOIL, DIR 9 - FREEZING RAIN OR FREEZ		, }	MOVING) 7 - SLUSH 9 - OTHER/UNKNO		
5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	5 - SLEET, HAIL	99 - OTHER / UNKNOWN			9 - OTHER/UNKNOWN		
NARRATIVE					Indicate the no		
Unit #1 was traveling E/B on E	Main St in the augh				direction with an "N" on the		
lane. Unit #2 was traveling W/		- to realize			compass diagra		
made a left turn onto Horning							
Unit #1. Unit #1 struck the side				SR 59 (E Main	ST)		
thrown from his motorcycle. T				_	UNIT 2		
was transported to the hospita							
#2 was issued a cite for failure				LINIT 1 E			
THE WAS ISSUED A CITE TOT TAILUTE	to yield left turn.				1		
			HORN	IING RD	Not To Scale		
3444-4-4-1-4-1							
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIN	1F	SCENE CLEARED	DATE/TIME REPORT TAKEN BY		
0.8.2.4.2.0.2.2./.0.6.2.5.0.8.2			İ		TO BOLICE ACENCY		
TOTAL TIME OTHER TOT	AL OFFICER'S NAME*		Снескей ву ОБ	FICER'S NAME*	MOTORIST		
ROADWAY CLOSED INVESTIGATION TIME MINU	Dioons, man	hew S	Short, J	ason M D BY OFFICER'S BADGE	SUPPLEMENT (CORRECTION ON ADD) 10 AM EXISTING REPORT SENT T		
0 4 5 0 6 0 1 0	1		_	2 8	1		

OHIO DO PU	DEPARTMENT UNIT	,					REPORT NUMBER	
UNIT # 0 1	OWNER NAME: LAST, FIRST WHITE, JERI	T, MIDDLE (X) SAME AS DRIVER)		OWNER PHONE : THE I	/L 1941		DAMAGE	
OWNER A	DRESS: STREET, CITY, STATE,	ZIP (X SAME AS DRIVER)	4224	<u> </u>		1 - NONE 2 - MINOR DAM	MAGE SCALE 3 - FUNCTIONAL DAMAGE AGE 4 - DISABLING DAMAGE	
	SANFORD AV		4224	Commercial Carrier I	PHONE; INCLUDE AREA CODE		- UNKNOWN	
		1				J DAMAGED AREA(S) INDICATE ALL THAT APPLY		
	LICENSE PLATE # BLV44	J ₁ H ₂ R ₁ C ₄ 4 ₁	IDENTIFICATION # $0_13_11_1$ 111_2 111_3 111_4 111_4 111_4		L Honda	12 1	11 12 1	
INSURA VERIFI		ANY	SURANCE POLICY #	WHI	SHADOW	10 12 1 2	10 11 12 0 2	
COMME	TYPE OF USE RCIAL GOVERNMENT	IN EMERGENCY RESPONSE	US DOT #	TOWED BY: COMPANY Bakers Towing	NAME	9 10 2 3 3	9 19 20 3	
INTER DEVICE EQUIP	E HIT/SKIP UNIT	#OCCUPANTS VEHI	ICLE WEIGHT GVWR/GCWR 1 - <10K lbs. 2 - 10,001 - 26K lbs	MATERIAL C	US MATERIAL Lass # Placard ID #	8 7 6 4	8 7 6 6	
			3 - >26K LBS. 12-GOLF CART	18-LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	6 11	12 1 8 5	
0.7	2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE			19-BUS (16+ PASSENGERS) 20-OTHER VEHICLE	24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST	10	11 1 2	
UNIT TYPE	4 - PICK UP	10 - MOPED OR MOTORIZED	15 - SEMI-TRACTOR	21 - HEAVY EQUIPMENT	26-BICYCLE	9 (9 3 3	
	5 - CARGO VAN 6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE	16 - FARM EQUIPMENT 17 - MOTORHOME	22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	27 - TRAIN 99 - Unknown or Hit/Skip	8	7 6 5	
	# of TRAILING UNITS	(ATV/UTV)				11 12 7	6 5 11 12 1	
	WAS VEHICLE OPERATING IN AU' MODE WHEN CRASH OCCURRED	, 0	1 - DRIVER ASSISTANCE	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION	9 - UNKNOWN	10 12 1	10 11 1	
	1-YES 2-NO 9-OTHER/UNK	NOWN AUTONOMOUS MODE LEVEL	2 - PARTIAL AUTOMATION	5 - FULL AUTOMATION		9 3	9 9 3	
, 0 , 1 ,			11 - FIRE 12 - MILITARY	16-FARM 17-MOWING	21 - MAIL CARRIER 99 - OTHER / UNKNOWN	8 7 5 4	8 7 5 4	
SDECIAL	3 - ELECTRONIC RIDE SHARING	8 - BUS - SHUTTLE	13 - POLICE	18-SNOW REMOVAL		7 6 5	7 6 5	
FUNCTIO	4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER		14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT	19-TOWING 20-SAFETY SERVICE PATROL		•	12 12 12	
.0.1.	1 - NO CARGO BODYTYPE	3 - VEHICLE TOWING ANOTHER	5 - INTERMODAL CONTAINER CHASSIS	8 - POLE	12 - CONCRETE MIXER	12		
CARGO BODY	/NOT APPLICABLE 2 - BUS	MOTOR VEHICLE 4 - LOGGING	6 - CARGO VAN/ENCLOSED BOX	9 - CARGO TANK 10 - Flat bed	13 - AUTOTRANSPORTER 14 - GARBAGE/REFUSE	a Ma		
TYPE			7 - GRAIN/CHIPS/GRAVEL	11-DUMP	99 - OTHER / UNKNOWN		3 9 1 1 3 9 9 3 1 1 3 9 9 3 1 1	
الماليا.	1 - TURN SIGNALS 2 - HEAD LAMPS	4 - BRAKES 5 - STEERING	7 - WORN OR SLICKTIRES 8 - Trailer Equipment	9 - MOTOR TROUBLE 10-disabled from Prior	99 - OTHER / UNKNOWN ,	6		
	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT		- NO DAMAGE E	6 6 6 0] - UNDERCARRIAGE [14]	
		3 - INTERSECTION OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12-FIRST RESPONDER AT INCIDENT SCENE		_	
NON-MOTORIS	CROSSWALK 7 2 - INTERSECTION – UNMARKED	4 - MIDBLOCK MARKED Crosswalk	7 - SHOULDER / ROADSIDE 8 - SIDEWALK	10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR	99-OTHER/UNKNOWN		ALL AREAS [15]	
AT IMPACT	CROSSWALK	5 - TRAVEL LANE - OTHER LOCATION		TRAILS		IND - UNI	T NOT AT SCENE [16]	
	1-NON-CONTACT 2-NON-COLLISION	1 - STRAIGHT AHEAD 2 - BACKING	7 - MAKING U-TURN 8 - Entering traffic lane	13 - NEGOTIATING A CURVE 14 - Entering or Crossing	18 - APPROACHING OR LEAVING VEHICLE	INITIA 0 - NO DAMAG	L POINT OF CONTACT GE 14 - UNDERCARRIAGE	
3	3-STRIKING ULL	2 - BACKING 1 3 - Changing Lanes 1 4 - Overtaking/Passing	9 - LEAVING TRAFFIC LANE 10-parked	SPECIFIED LOCATION 15 - WALKING, RUNNING,	19 - STANDING 20 - Other Non-Motorist	1,2, 1-12 - REFER	TO UNIT 15 - VEHICLE NOT AT SCENE	
ACTION	5 - BOTH STRIKING ACTIONS	5 - MAKING RIGHT TURN	11 - SLOWING OR STOPPED	JOGGING, PLAYING 16 - WORKING	21 - STANDING OUTSIDE DISABLED VEHICLE	DIAGR 13-TOP	AM 99 - UNKNOWN	
1	& STRUCK 9 - Other / Unknown	6 - MAKING LEFT TURN	IN TRAFFIC 12 - DRIVERLESS	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN		TRAFFIC	
	1 - NONE	7 - LEFT OF CENTER	13 - IMPROPER START FROM A	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 / ACD/ 9 - IMPROPER LANE CHANGE	14 - STOPPED OR PARKED	18-OPERATING DEFECTIVE EQUIPMENT	22-NOT DISCERNIBLE 23-Opening Door Into	1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN	
O 1	4 - RAN STOP SIGN	10-IMPROPER PASSING	ILLEGALLY 15 - Swerving to Avoid	19-LOAD SHIFTING/FALLING/ SPILLING	ROADWAY 99 - OTHER IMPROPER ACTION	2 - TWO-WAY	2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL	
CIRCUMSTANCE SEQUENCE	6 5 - UNSAFE SPEED 6 - IMPROPER TURN	11 - DROVE OFF ROAD 12 - IMPROPER BACKING	16-WRONG WAY	20-IMPROPER CROSSING	2. VIII CAME IN CREATION	# OF THROUGH LANES	RAIL GRADE CROSSING	
SEQUENC	E OF EVENTS		NOW COLL TOTAL			4	1 - NOT INVOLVED 1 - 2 - INVOLVED-ACTIVE CROSSING	
10 11 2 1 0	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	NON-COLLISION 11 - CROSS CENTERLINE —	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE	I — — I	3 - INVOLVED-PASSIVE CROSSING	
	2 - FIRE/EXPLOSION 3 - IMMERSION	7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	OPPOSITE DIRECTION OF TRAVEL	17 - ANIMAL — FARM 18 - Animal — Deer	EQUIPMENT 23 - STRUCK BY FALLING,	UNIT / NO	N-MOTORIST DIRECTION	
2[J 4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	12-DOWNHILL RUNAWAY 13-OTHER NON-COLLISION	19 - ANIMAL — OTHER 20 - MOTOR VEHICLE IN	SHIFTING CARGO OR Anything set in motion by a motor vehicle	,	1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST	
311_	5 - CARGO / EQUIPMENT Loss or Shift	10 - CROSS MEDIAN	14-PEDESTRIAN 15-PEDALCYCLE	TRANSPORT 21 - PARKED MOTOR VEHICLE	24 - OTHER MOVABLE OBJECT	FROM 4 TO L	3 3 EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST	
	OF IMPACT ATTEMULATOR		N WITH FIXED OBJEC		50 - WORK ZONE MAINTENANCE		9 - OTHER / UNKNOWN	
4LL	25-IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END 32 - PORTABLE BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST	44-DITCH	EQUIPMENT	UNIT SPEED	DETECTED SPEED	
5	26-BRIDGE OVERHEAD STRUCTURE	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARORAIL	39-LIGHT/LUMINARIES SUPPORT	45 - EMBANKMENT 46 - FENCE	51 - WALL 52 - Building	1 1 1 1	3 1 - STATED / ESTIMATED SPEED	
	27 - BRIDGE PIER OR ABUTMEN 28 - BRIDGE PARAPET	BARRIER 35 - MEDIAN CONCRETE	40 - UTILITY POLE 41 - Other Post, Pole	47 - MAILBOX 48 - Tree	53 - TUNNEL 54 - Other Fixed object		2 - CALCULATED / EDR 3 - UNDETERMINED	
6	J 29-BRIDGE RAIL 30-Guardrail Face	BARRIER 36 - Median Other Barrier	OR SUPPORT 42 - CULVERT	49 - FIRE HYDRANT	99-OTHER/UNKNOWN	POSTED SPEED	2 - 642F1 FVWH4FD	

___ FIRST HARMFUL EVENT _______ MOST HARMFUL EVENT

3 5

LOCAL REPORT NUMBER

 $2 + 0 + 2 + 2 + - + 0 + 0 + 0 + 1 + 4 + 1 + 1 + 7 + \dots$

UNIT #	OWNER NAME: LAST, FIRST	MIDDLE (X) SAME AS DRIVER)		NUMBER PHONE: INCLUD	E ARFA CODE (VI exprese bennest		AMAGE
	COONTZ, QU DRESS: STREET, CITY, STATE, 7					1 NOME	MAGE SCALE 3 - FUNCTIONAL DAMAGE
8340 G	OTHAM RD	,Windham ,O	H 44231			3 2-MINOR DAMA	
COMMERCI	(AL CARRIER: NAME, ADDRE	SS, CITY, STATE, ZIP		COMMERCIAL CARRIER F	HONE: INCLUDE AREA CODE		UNKNOWN
LP STATE	LICENSE PLATE#	VEHICLE 1	IDENTIFICATION #	VEHICLEYEA	R VEHICLE MAKE		AGED AREA(S) E ALL THAT APPLY
	JVG8006	5 NPDH4A	$\mathbf{E}_{1}7_{1}\mathbf{B}_{1}\mathbf{H}0_{1}0_{1}9_{1}$	Hyundai	11 12 1	11 12 1	
INSURAN VERIFIE	INSURANCE COMPA		SURANCE POLICY # 64511E1235C	BLK	VEHICLE MODEL ELANTRA	10 12	10 12 2
	TYPE OF USE		US DOT #	TOWED BY: COMPANY		10 2	10.1 (200) 22
COMMER	CIAL GOVERNMENT	IN EMERGENCY RESPONSE		HAZARDOL	IS MATERIAL	³	9
INTERL DEVICE EQUIPP	OCK HIT/SKIP UNIT	#UUGUPANIS	ICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS.	MATERIAL C	LASS # PLACARD ID #	B 7 6 4	8 7 7 6 74
L EQUIPP	ED HIMSKIP GHI	0,1	2 - 10,001 - 26K LBS. 3 - >26K LBS.	PLACARD L		7 6 6	12 7 6 6
					23 - PEDESTRIAN / SKATER	40	12
ULL	2 - PASSENGER VAN (MINIVAN) 3 - Sport Utility Vehicle			19-BUS (16+ PASSENGERS) 20-Other Vehicle	24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST	10/_ `	11 1 2
UNITTYPE		DIOVALE		21 - HEAVY EQUIPMENT	26 - BICYCLE	9 (9 3 3
	5 - CARGO VAN 6 - Van (9-15 Seats)	11 - ALL TERRAIN VEHICLE	16-FARM EQUIPMENT 17-MOTORHOME	22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	27 - TRAIN 99 - Unknown or Hit/Skip		7 8 5 74
_00	# OF TRAILING UNITS	(ATV/UTV)			ļ	12 7	6 5 12
	WAS VEHICLE OPERATING IN AUT		O - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	11 12	11 12 1
,	MODE WHEN CRASH OCCURRED?			4 - HIGH AUTOMATION 5 - FULL AUTOMATION		10 11 1 2	10 11 1 2 2
	1-YES 2-NO 9-OTHER/UNKN	MODE LEVEL				9 3 3	9 3 3
				16-FARM 17-MOWING	21 - MAIL CARRIER 99 - OTHER / UNKNOWN	8 4 7	$\begin{bmatrix} 1 \\ 7 \end{bmatrix}$
SDECIVI	3 - ELECTRONIC RIDE SHARING			18-SNOW REMOVAL	77-01 FER / UNANOWN	7 6 5	7 6 5
FUNCTION	4 - SCHOOL TRANSPORT 5 - BUS TRANSIT/COMMUTER		14-PUBLIC UTILITY 15-CONSTRUCTION EQUIPMENT	19-TOWING		6	6
ļ		3 - VEHICLE TOWING ANOTHER		8 - POLE	12 - CONCRETE MIXER		12 12 12
0_1	/ NOT APPLICABLE	MOTORVEHICLE	CHASSIS	9 - CARGOTANK	13 - AUTO TRANSPORTER	12 6 8	
BODY	2 - BUS		6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	10-FLAT BED 11-DUMP	14 - GARBAGE/REFUSE	9 PLA 9 9	3 9 1 3 9 20 3
TYPE	1 THOM CICHALC				99-OTHER/UNKNOWN		
		4 - BRAKES 5 - STEERING	7 - WORN OR SLICKTIRES 8 - TRAILER EQUIPMENT	9 - MOTOR TROUBLE 10-DISABLED FROM PRIOR	99 - OTHER / UNKNOWN	6	
DEFECTS		6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT		- NO DAMAGE [()]
	466641111111	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12-FIRST RESPONDER AT INCIDENT SCENE	_	_
NON-MOTORIST	2-INTERSECTION UNMARKED	4 - MIDBLOCK - MARKED CROSSWALK	7 - SHOULDER / ROADSIDE 8 - SIDEWALK	10-DRIVEWAY ACCESS 11-SHARED USE PATHS OR	99 - OTHER / UNKNOWN	TOP [13]	-ALL AREAS [15]
LOCATION AT IMPACT	CROSSWALK	5 - TRAVEL LANE - OTHER LOCATION		TRAILS		UNIT	NOT AT SCENE [16]
Ė		1 - STRAIGHT AHEAD 2 - BACKING	7 - MAKING U-TURN 8 - Entering traffic lane	13-NEGOTIATING A CURVE 14-ENTERING OR CROSSING	18 - APPROACHING OR LEAVING VEHICLE		POINT OF CONTACT
	3-STRIKING U 6	3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE	SPECIFIED LOCATION	19-STANDING	0 - NO DAMAG 0 - 3 1-12 - REFER 1	E 14 - UNDERCARRIAGE TO UNIT 15 - VEHICLE NOT AT SCENE
ACTION	4- STRUCK PRE-CRASH 5- BOTH STRIKING ACTIONS	4 - UVERIARING/PASSING	10 - PARKED 11 - SLOWING OR STOPPED	15-WALKING, RUNNING, Jogging, Playing	20 - OTHER NON-MOTORIST 21 - Standing Outside	DIAGRA	
	& STRUCK	6 - MAKING LEFT TURN	INTRAFFIC	16-WORKING	DISABLED VEHICLE	13 - TOP	
	9-OTHER/UNKNOWN	7 LECTOR SPLINGS	12 - DRIVERLESS	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN		TRAFFIC
	1 - NONE 2 - FAILURE TO YIELD	7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / ACDA	13 - IMPROPER START FROM A PARKED POSITION	17 - VISION OBSTRUCTION 18 - Operating Defective	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE	TRAFFICWAY FLOW 1 - ONE-WAY	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN
$0_{\perp}2_{\parallel}$	3 - RAN RED LIGHT	9 - IMPROPER LANE CHANGE	14 - STOPPED OR PARKED ILLEGALLY	EQUIPMENT 19-LOAD SHIFTING/FALLING/	23 - OPENING DOOR INTO ROADWAY	2 2 - TWO-WAY	2 2 - SIGNAL 5 - YIELD SIGN
CONTRIBUTING	4 - RAN STOP SIGN 5 - Unsafe speed	10 - IMPROPER PASSING 11 - DROVE OFF ROAD	15 - SWERVING TO AVOID	SPILLING	99 - OTHER IMPROPER ACTION		3 - FLASHER 6 - NO CONTROL
UINCUMSTANCE!	6-IMPROPERTURN	12 - IMPROPER BACKING	16 - WRONG WAY	20 - IMPROPER CROSSING		# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED
>	OF EVENTS		NON-COLLISION			4	1 2 - INVOLVED-ACTIVE CROSSING
1 2 0	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF	16-RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE EQUIPMENT	L	3 - INVOLVED-PASSIVE CROSSING
	2 - FIRE/EXPLOSION 3 - IMMERSION	7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	TRAVEL	17-ANIMAL — FARM 18-ANIMAL — DEER	23 - STRUCK BY FALLING,	UNIT / NO	N-MOTORIST DIRECTION
2	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	12-DOWNHILL RUNAWAY 13-OTHER NON-COLLISION	19-ANIMAL — OTHER 20-MOTORVEHICLE IN	SHIFTING CARGO OR ANYTHING SET IN MOTION	_	1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST
	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	14-PEDESTRIAN 15-PEDALCYCLE	TRANSPORT	BY A MOTOR VEHICLE 24 - Other Movable object	FROM 3 TO L	2 3 - EAST 7 - SOUTHEAST
3		COLLISIO	N WITH FIXED OBJEC	21 - PARKED MOTOR VEHICLE T - STRUCK			4 - WEST 8 - SOUTHWEST 9 - OTHER/UNKNOWN
4	25 - IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END 32 - PORTABLE BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST	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 - EMBANKMENT	51 - WALL		1 - STATED / ESTIMATED SPEED
5	27 - BRIDGE PIER OR ABUTMENT	34-MEDIAN GUARDRAIL Barrier	SUPPORT 40 - Utility Pole	46-FENCE 47-Mailbox	52 - BUILDING 53 - Tunnel	$\begin{array}{c c} 0 & 2 & 0 \end{array}$	2 - CALCULATED / EDR
61 1	28-BRIDGE PARAPET 29-BRIDGE RAIL	35 - MEDIAN CONCRETE Barrier	41 - OTHER POST, POLE OR SUPPORT	48-TREE	54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	POSTED SPEED	3 - UNDETERMINED
	30-GUARDRAIL FACE	36-MEDIAN OTHER BARRIER	42 - GULVERT	49-FIRE HYDRANT	vinem onmound	3 5	
1	FIRST HARMFUL EVE	NT $oxdots$ most h	IARMFUL EVENT				

OHIO DES	PARTMENT NA	TODICT / No	. RA	0T0	nict					LOCAL REPO	ORT NUM	BER	7
ONIO DEPARTMENT MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST							2 + 0 + 2 + 2 + - + 0 + 0 + 0 + 1 + 4 + 1 + 1 + 7						
UNIT#	NAME: LAST, FIRST, MIDDLE									DATE OF BIRTH AGE GENDER			
0,1	WHITE	, JERRY, ARTHU	JR						10_{\perp}	$0_{+}9_{+}1_{+}9_{+}$	6 5	[5,6	<u>M</u>
ADDRESS:	STREET, CITY, STA	· ·	1400	4					CONTACT PI	HONE - INCLUDE AREA CO	DDE		
9		D AVE ,Stow ,OH	4422			TRACAL MANY TOUR	-	OLEGRIC FALLENATATE	<u>L</u>	OF STIME PROPERTY.			
INJURIES	TAKEN	EMS AGENCY (NAME)				redical facility of		SAFETY EQUIPMENT	MC HELN	SEATING POSITION	AIR BAG	USAGE EJECTION	TRAPPED 1
		Kent Fire			E CHARG	y Hospital	LOCAL	0 8			1	ION NUMBER	
OL STATE	OPERATOR LI	CENSE NOMBER		OFFERE	L OTIANO		CODE	OIT LIVEL DESC	K11 11014		OII NII	ION HOMBEN	1
OL CLASS	ENDORSEMENT	RESTRICTION SELECT UP	PIN EOT	ER [ALCOF	IOL / DRUG SUSPE	CTED	CONDITION		HOL TEST		DRUG TEST(S	
	SELECT UP TO 2		DIST BY	RACTED	ALC	OHOL MAR	IJUANA	4	STATUS TYP	PE VALUE :			SELECT UPTO 4
1	$M_{\square}N_{\square}$			1	☐ OTH	IER DRUG		1	1 1		1	1	
UNIT#	NAME: LAST, F	·								DATE OF BIRTH		AGE	GENDER
	STREET, CITY, STA	TZ, QUINTON	····					·		0 4 1 9 HONE - INCLUDE AREA C		<u> </u>	<u>M</u>
第		M RD ,Windham ,	OH A	4231					CONTACT P	HUNE - INCLUDE AREA G	ODE		I
Θ		EMS AGENCY (NAME)	,011 4		TAKEN TO:	MEDICAL FACILITY	NAME. CITY)	SAFETY EQUIPMENT	L	SEATING POSITION	N AIR BAG	USAGE EJECTION	TRAPPED
NON 3	TAKEN 1							USED 0 4	DOT-COM MC HELI	PLIANT	3		1
OL STATE		ICENSE NUMBER		OFFEN	SE CHAR	iED	LOCAL	OFFENSE DESC	RIPTION		CITAT	ION NUMBER	'
O H	,			331.	17		CODE	Right of Way	when Tu		217	01	
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT U	PTO3 DRIV	VER TRACTED	_	IOL / DRUG SUSPE		CONDITION	ALCO STATUS TY	DHOLTEST PE VALUE	STATUS	DRUG TEST(S	T SELECTUPTO 4
4			BY	1		COHOL MAF HER DRUG	RJJUANA	1 1 .	$\begin{bmatrix} 1 & 1 \end{bmatrix}$	1 *	1	. 1	
UNIT#	NAME: LAST, F	FIRST MIDDLE			L 01	TER DRUG				DATE OF BIRTH		AGE	GENDER
311.1	Transfer day,	Mon Mindel				•			ļ	1 1 F			1
5 ADDRESS	3: STREET, CITY, ST	ATE, ZIP	- Instrument						CONTACT P	PHONE - INCLUDE AREA O	CODE		
10RI									ļ 	1 1			
INJURIES		EMS AGENCY (NAME)		INJURED	TAKEN TO:	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT			N AIR BAG	USAGE EJECTIO	TRAPPED
ION L	J TAKEN							U3EU	MC HEL	MET	<u> </u>		J
OL STATE	OPERATOR L	ICENSE NUMBER		OFFEN	SE CHAR	GED	LOCAL	OFFENSE DES	CRIPTION		CITAT	TION NUMBER	
	ال								AL C	OHOL TEST		DRUG TEST(C).
OL CLASS	SELECT UP TO 2	RESTRICTION SELECT U	DRI DIS BY	IVER TRACTED		HOL / DRUG SUSPI Cohol	ECTED Rijuana	CONDITION	STATUS TY		STATUS		LT SELECT UP 104
			".			HER DRUG			. .		L		
257 7 (4) 5 (4) 5 (4) 5 (4) 5 (4)	URIES	SEATING POSITION	English Street Control	AIR BAG	ereiye - Xil	OL CLAS	\$	OL RESTRIC	N. S. M. C.	DRIVER DISTRAC	TION	TEST ST	ATUS
1 - FATAL 2 - SUSPECTE	D SERIOUS INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEF 2 - DEPLOY			1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTE 2 - CDL INTRASTA	各名 "我一个你"可以说:	1 - NOT DISTRACTED 2 - Manually Operation	NG AN	1 - NONE GIVEN 2 - Test refused	
3 - SUSPECTE	D MINOR INJURY	2 - FRONT - MIDDLE 3 - Front - Right Side	3 - DEPLOY	773855706.		3 - CLASS C		3 - CORRECTIVE L	ENSES	ELECTRONIC COMMU DEVICE (TEXTING, TY		3-TEST GIVEN, CO Sample / Unu	
4 - POŚSIBLE 5 - NO APPARI		4 - SECOND - LEFT SIDE	4 - DEPLOY 5 - Not api	'EO BOTH FR Plicable	ONT / SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER 5 - EXCEPT CLASS	A BUS	DIALING) - 3 - Talking on Hands-F	FRFF	4 - TEST GIVEN, R	
	D TAKEN BY	(MOTORCYCLE PASSENGER) 5 - Second – Middle	the state of the second	MENT UNK	NOWN	5 - M/C MOPED ONLY 6 - NO VALID OL		6 - EXCEPT CLASS & CLASS B BU		COMMUNICATION DE	VICE	5 - TEST GIVEN, R UNKNOWN	ESULTS
1 - NOT TRAN	SPORTED	6 - SECOND - RIGHT SIDE						7 - EXCEPT TRACT	たる人 "豆豆麻の子」	COMMUNICATION DE	VICE	ALCOHOL T	EST TYPE
7TREATED 2 - EMS	AT SCENE	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	1 - NOT EJI	JECTION ECTED		OL ENDORSE H - HAZMAT	MENT	8 INTERMEDIAT		5 - OTHER ACTIVITY WIT ELECTRONIC DEVICE		1 - NONE	
3 - POLICE		8 - THIRD - MIDDLE 9 - Third - Right Side	2 - PARTIA	LLY EJECTE	D	M - MOTORCYCLE		9 - LEARNER'S PE RESTRICTIONS		6 - PASSENGER		2 - BLOOD 3 - URINE	
9-OTHER/U	NKNOWN	10 - SLEEPER SECTION	3 - TOTALL' 4 - Not ap			P - PASSENGER N - TANKER		10 - LIMITED TO DA	24.55 (A. 1954)	7 - OTHER DISTRACTION Inside the Vehicle		4 - BREATH	
1 1 1 1 1 1 1 1	EQUIPMENT	OF TRUCK CAB 11 - PASSENGER IN OTHER				Q - MOTOR SCOOTER		11 - LIMITED TO EI		8 - OTHER DISTRACTION THE VEHICLE	OUTSIDE	5-OTHER	
1 - NONE USE 2 - Shoulder	.U R Belt only used	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1-NOTTR	TRAPPED APPED		R - THREE-WHEEL M S - School Bus	10TORCYCLE	13 - MECHANICAL	DEVICES	9-OTHER/UNKNOWN		DRUG TES	STTYPE
3 - LÁP BELT		PICK-UP WITH CAP)	2 - EXTRIC	ATED BY Inical Meai	NS	T - DOUBLE & TRIPL	E TRAILERS	The second secon	OTHER	CONDITION	1	2 - BLOOD	
1.00	R & LAP BELT USED Straint system –	CARGO AREA	3 - FREED	вү		X - TANKER / HAZMA	II	ADAPTIVE DE 14 - MILITARY VEI	对网络特殊证明的 人	1 - APPARENTLY NORMA 2 - Physical impairme		3 - URINE	
FORWARD	FACING STRAINT SYSTEM -	13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR	NUN-M	ECHANICAL	MEANS	GENDE	R.	15 - MOTOR VEHIC	网络美俚女孩 化	3 - EMOTIONAL (E.G., DE		4-OTHER	
REAR FAC	ING	(NON-TRAILING UNIT)				F - FEMALE M - MALE		AIR BRAKES 16-OUTSIDE MIR	ROR	ANGRY, DISTURBED) 4 - ILLNESS		DRUG TEST 1-AMPHETAMIN	Secretary of Comment
7 - BOOSTER 8 - HELMET		15 - NON-MOTORIST 99 - OTHER / UNKNOWN				U - OTHER / UNKNOW	IN .	17 - PROSTHÉTIC	AID	5 - FELL ASLEEP, FAINT Fatigued, etc.	ED,	2 - BARBITURATI	\$
9-PROTECT	IVE PADS USED	4. 1일 경기 전기 : - 지역상 2년 		. y				: 18-OTHER		6 - UNDER THE INFLUE		3 - BENZODIAZEI 4 - CANNABINOII	
100	(NEES, ETC.) Ive clothing									OF MEDICATIONS/D /Alcohol	KUGS	5 - COCAINE	
11 - LIGHTING / BICYCLE	- PEDESTRIAN ONLY							44.74		9-OTHER/UNKNOWN		6-OPIATES/OP 7-OTHER	loids
99 - OTHER / L												8 - NEGATIVE RE	SULTS

OHIO DEF	PARTMENT IC BAFETY ICS - PROTECTION	CCUPANT /	WITNES	S ADDENDUM		ſ	· · · · · · · · · · · · · · · · · · ·	LOCAL REPO	RT NUMBER		
~							$2 \cdot 0 \cdot 2 \cdot 2$	<u> </u>	$0_{1}1_{1}4$	1 1	7
UNIT#	NAME: LAST	r, FIRST, MIDDLE					DATE	OF BIRTH		AGE	GENDER
	ADDRESS: STREET, CITY, STATE, ZIP										
ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	· INCLUDE AREA COD	E.		
	Imunen	FMC A		MUNICIPALITY III		CACCTY FAMILIAT		SEATING POSITION	ATD DAO DEAOF	FIFOTION	TRAPPED
INJURIES	INJURED TAKEN BY	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FACILIT	Y (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIK BAG USAGE	EDECTION	IRAPPED
							<u> </u>				
UNIT#	NAME: LAS	T, FIRST, MIDDLE					DATE	OF BIRTH		AGE	GENDER
455556							CONTACT BUONE	1 1 1			
ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA COL	DE		
TALULDYEE	Trumpen	FMC A (MANE)		INLUISED TAVENTO, Menical Francis	(11111 AIT AIT)	CAFETY COURSENT		SEATING POSITION	ATD DAC HEADE	EJECTION	TRAPPED
INJURIES	INJURED TAKEN BY	EMS Agency (NAME)		INJURED TAKEN TO: Medical Facilit	TY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	3EAI ING PUSITION	AIR BAG USAGE	ENECTION	IKAPPED
UNIT#	INIT # NAME: LAST, FIRST, MIDDLE						DATI	E OF BIRTH		AGE	GENDER
		A. A					CONTACT PURSE		<u></u>		<u> </u>
ADDRESS	S: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE		
	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	TV (114 ME 02TV)	SAFETY EQUIPMENT		SEATING POSITION	AID BAG HEAGE	EJECTION	TRAPPED
MORIES	TAKEN	EINO AGENCY (NAMIE)		INJURED PAREN TO: MEDICAL PAGILI	IT CWANG, GIT?	USED	DOT-COMPLIANT MC HELMET	orvilla i dollion	AIN DAG COAGE	EGEGITOR	TRAIT LD
111177	<u> </u>				77.7.33			E OF BYDTH		1	ACMBER
UNIT#	NAME: LAS	T, FIRST, MIDDLE					JAI	E OF BIRTH		AGE	GENDER
ADDDEES	S. STREET SITY	OTATE 71D					CONTACT PHONE		L		<u> </u>
ADDRESS	3: STREET, CITY,	, STATE, ZIP					CONTACT PHONE	" INCLUDE AREA CO	DE		
INTIDIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	TY (NAME OTTV)	SAFETY FOLIDMENT		SEATING POSITION	ATR RAC HEACE	FJECTION	TRAPPEN
INJUNES	TAKEN	EMS AGENC! (NAME)		INJUNED TAKEN TO, INEBIDAL TABILI	iri (mame, ciri)	USED	DOT-COMPLIANT MC HELMET	OLATING F VOITION	AIN DAG GOAGE	LOCOTION	I I I I
		URIES	SAFET	Y EQUIPMENT USED		SEATING POS	ITION		AIR BAG U	SAGE	
1 - FAT	Market de la		1 - NONE US	Elikar markira, kandari arabasi mendarah	Translation contr	IT – LEFT SIDE		1 - NOT DE	9146/03/44/25/07/0		
2 - SUS	SPECTED SI	ERIOUS INJURY	VEHICLE	OCCUPANT	1. 连左帝 (ORCYCLE DRIV	ER)	2 - DEPLO	YED FRONT		
3 - SUS	SPECTED M	INOR INJURY		ER BELT ONLY USED		IT – MIDDLE IT – RIGHT SID	F 2 32 3 3 3 4 3 3	3-'DEPLO	YED SIDE		
4 - P0S	SIBLE INJU	JRY		T ONLY USED	4 - SEC0	ND - LEFT SID	E	4 - DEPLO	P 474 A 379 344 3 4		
5 - NO	APPARENT	INJURY		ER & LAP BELT USED		ORCYCLE PASS OND – MIDDLE	SENGER)	FRONT	75IDE PPLICABLE		
5.555 As \$5.5	INJURED	TAKEN BY		ESTRAINT SYSTEM – D FACING		ND – RIGHT SI	DE		YMENT UN	(NOWN	
	TTRANSPOI			ESTRAINT SYSTEM -	A SECTION OF THE PROPERTY OF T	D - LEFT SIDE	ČAD)	1			
	REATED AT S	SCENE	REAR FA	중 강경하다 하는 사람들은 사람들이 되었다.	医外腺性 医多种	TORCYCLE SIDE RD – MIDDLE	CARI	NOTE	EJECTI	UN	
2 - EM 3 - POI			8 - HELMET		9 - THIR	RD – RIGHT SID	2 PARTIALLY FIFCTED				
	HER / UNKN	own		TIVE PADS USED	"我是我们的我是我		ON OF TRUCK CAB TOTALLY EJECTED				
	为行为的影響	NDER		, KNEES, ETC.)	CAR	GO AREA (NON-T	RAILING UNIT,		PPLICABLE		
F-FEM	oping project			TIVE CLOTHING	医复数医皮肤试验	PICK-UPWITH CA SENGER IN UNI		Start State	TRAPE	ं विकास (विक्र	and the second
M - MA	$\{\{(r,q)\}_{p\in \mathcal{A}_{p}}\}_{p\in \mathcal{A}_{p}}$ is			IG – PEDESTRIAN LE ONLY	CAR	GOAREA		1 - NOT T	医克斯特氏 经分类 医水溶液		
U - OTH	ER/UNKNO	OWN	99 - OTHER /		 Billippe in present. 	ILING UNIT	CCVTCDIAD		CATED BY N	/ECHAN	ICAL
					the state of the s	NG ON VEHICLI -TRAILING UNIT)	1. 注:"我我们是你们要接受你们是一个人。"	MEAN			
	기 (2007년) 2007년 - 국				1 A 4 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A	-MOTORIST		3 - FREEU MEAN	D BY NON-M S	ECHANI	CAL
					99 - OTH	ER/UNKNOWN	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			405	AFAIRER
16	AST, FIRST, MID						0.9.1	TE OF BIRTH	6.8	AGE 5,3	GENDER
7	S: STREET, CIT	YNN, P					CONTACT PHON			5 5	
3	•	KMAN CT ,Sto	owOH 44	1224			1	///			
	AST, FIRST, MIC		.,,			William H. A. L. B.	DA	TE OF BIRTH		AGE	GENDER
ESS								1 1	, , ,	1 1 1	
ADDRES	SS: STREET, CIT	Y, STATE, ZIP					CONTACT PHON	E - INCLUDE AREA	CODÉ		
2											
NAME: I	LAST, FIRST, MIC	DDLE					D/	TE OF BIRTH		AGE	GENDE
<u> </u>								<u></u>			
ADDRES	SS: STREET, CIT	Y, STATE, ZIP					CONTACT PHON	E - INCLUDE AREA	CODE		
		5	ntal is more than the board.	and the second s							1



TRAFFIC CRASH WITNESS STATEMENT

LOCAL REPORT NUMBER	REPORTING AGENCY	DA		RASH
22-14117	Kent PD	м8	024	Y 22

FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

	·
I, Lynn Hobart	HEREBY MAKE THIS VOLUNTARY STATEMENT TO
Hilbrune #237 OFFICER'S NAME	AT E. Main St C Hopming 121
X I was driving toward	Ravenna on Main Street. The
light at Horning Rd. and	Main St. was green and the
man on the motorcycle	and I were traveling straight.
I was ahead of the mo	torcycle (in the left lane) and the
	vas in the right lane. As I
	heard a crosh and looked in
	saw the man on the motorcyck
	the car turning onto Horning
	nd called 911. The man in the
1	vere others that arrived on the
scene to help.	
	•
ADDRESS OF WITNESS 27.39 Stockman Ct., S	Stow, OH PHONE
2739 Stockman Ct., S SIGNATURE PAWITNESS X Y	X Dfc. Hilbruner #237



TRAFFIC CRASH WITNESS STATEMENT

LOCAL REPORT NUMBER	REPORTING AGENCY	DATE OF CRASH
22-14117	hear PP	M 8 1024 14 22

FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

HEREBY MAKE THIS VOLUNTARY STATEMENT TO
Officer Brooks #215 AT F. Madh St e Humms RA OFFICER'S NAME LOCATION
WHILE ON MY WAY TO WORK, I WAS
INVOLVED IN AN ACCIDENT THE SUN WAS
Still Rising and it was lot fully
day 1, to I was HEADED WEST. BONNO.
I NOW the ORDAN light. I NOT ON
MAIN STREET, TURNING /OF FON
Howning During the exurse of
my tran, I was starck by a
motor enclist. I am not soughe
that the motor cylicts head light
WHS WORKIZE, but I did Not
ele it.
ADDRESS OF WITNESS GOTTON RS. GARRETTS, 1/2, OH 4423/ PHONE
SIGNATURE OF WITNESS X OFFICER'S SIGNATURE X Drug 13 4215
HSY 7003 4/15 [760-1500]