| OFF UNION SEATURE TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPL | LEMENT REPORT | T T | OCAL REPORT NUMBE | R* |
|--|--------------------------|--|--|---|
| PHOTOS TAKEN OH-2 OH-3 LOCAL INFORMATION | | 2,0,2,2, | - 0 0 0 1 | 6600 |
| T OH-1P OTHER REPORTING AGENCY NAME* | NCIC* | HIT/SKIP | NUMBER OF UNITS | UNIT IN ERROR |
| Secondary Crash Private Property City of Kent Police | 0,6,7,0,3 | 1 - SOLVED | 0_2_ 0 | 98 - ANIMAL 199 - UNKNOWN |
| COUNTY* LOCALITY* LOCATION: CITY, VILLAGE, TOWNSHIP* | | CRASH DATE / | 1 | ASH SEVERITY - FATAL |
| 6,7 1 2-VILLAGE Kent | | 09302022 | <u>/₁2₁0₁2₁4₁</u> _5 ₂ | : - SERIOUS INJURY |
| ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST RHODES | ROAD TYPE | LATITUDE DE | | SUSPECTED S-MINOR INJURY |
| W-WEST | $R_{\perp}D_{\perp}$ | 4,1,6 | 9,0,2 | SUSPECTED |
| ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W - WEST LOOP | ROAD TYPE | LONGITUDE D | | - INJURY POSSIBLE |
| E-EAST LOOP | $R_{\perp}D$ | -8 ₁ 1 ₁ 3 ₁ 3 ₁ 3 | 6,9,9 | ONLY |
| REFERENCE POINT DIRECTION ROUTE TYPE ROAD TYPE 1-INTERSECTION NAME FERENCE IR - INTERSTATE ROUTE(TP) AL - ALLEY HW-HIGHWAY | RD - ROAD | | INTERSECTION RELATE | |
| 1 2-MILE POST 3 S-SOUTH US-FEDERAL US ROUTE AV - AVENUE LA - LANE | SQ - SQUARE | WITHIN INTE | RSECTION OR ON APPRO | ACH |
| 3-HOUSE # E-EAST W-WEST SR-STATE ROUTE BL-BOULEVARD MP-MILEPOST CR-CIRCLE OV-OVAL | ST - STREET TE - TERRACE | WITHIN INTE | RCHANGE AREA NUI | MBER OF APPROACHES |
| FROM REFERENCE UNIT OF MEASURE CR - NUMBERED COUNTY ROUTE CT - COURT PK - PARKWAY | TL - TRAIL | | ROADWAY | |
| 1 - MILES TR - NUMBERED TOWNSHIP DR - DRIVE PI - PIKE ROUTE DR - DRIVE PI - PIKE HE - HEIGHTS PL - PLACE | WA - WAY | ROADWAY DIV | IDED | |
| AND | ираот | | _ | |
| 1-ON ROADWAY 9-CROSSOVER 1-NOT COLLISION 4-REAR-TO-RE | | DIRECTION OF TRAVE N - NORTH | | AN TYPE FLUSH MEDIAN |
| 2 - ON SHOULDER 10-DRIVEWAY/ALLEY ACCESS TWO MOTOR TWO MOTOR TWO MOTOR TWO MOTOR TO SHIP OF THE PROPERTY OF TH | | S - SOUTH | (< 4 FEE | |
| 4 - ON ROADSIDE 12-SHARED USE PATHS OR TRANSPORT 7 - SIDESWIPE, | SAME DIRECTION | E - EAST W - WEST | (≥4 FEE | Τ) |
| 5-ON GORE TRAILS 2-REAR-END 8-SIDESWIPE, 6-OUTSIDE TRAFFIC WAY 13-BIKE LANE 3-HEAD-ON 9-OTHER / UNIV | OPPOSITE DIRECTION | | | DEPRESSED MEDIAN RAISED MEDIAN |
| 7 - ON RAMP 14-TOLL BOOTH | | | (ANY TYP 9 - OTHER/U | |
| U-VII NAMI | | AGNITAUD | | |
| WORK ZONE RELATED WORK ZONE TYPE LOCATION OF CRASH IN 1 - LANE CLOSURE 1 - BEFORE THE 2 | LST WORK ZONE | CONTOUR 2 | CONDITIONS 1 | SURFACE |
| WORKERS PRESENT 2 - LANE SHIFT/CROSSOVER WARNING SIG | | 1 - STRAIGHT LEVEL | 1 - DRY | 1 - CONCRETE |
| LAW ENFORCEMENT PRESENT COR MEDIAN 3-TRANSITION A | REA | 2 - STRAIGHT GRADE | 2 - WET | 2 - BLACKTOP, |
| 4 - INTERMITTENT OR MOVING WORK 4 - ACTIVITY ARE ACTIVE SCHOOL ZONE 5 - OTHER 5 - TERMINATION | | 3 - CURVE LEVEL | 3 - SNOW | BITUMINOUS, ASPHALT |
| LIGHT CONDITION WEATHER | | 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 |
| 3 - DARK - LIGHTED ROADWAY 2 - CLOUDY 7 - SEVERE CROSSWINDS 3 - FOG, SMOG, SMOKE 8 - BLOWING SAND, SOIL, E | NDT CNOW | , | 6 - WATER (STANDING, MOVING) | 5 - DIRT |
| 4 - DARK - ROADWAY NOT LIGHTED 4 - RAIN 9 - FREEZING RAIN OR FRE | | | 7 - SLUSH | 9 - OTHER/UNKNOWN |
| 5 - DARK – UNKNOWN ROADWAY LIGHTING 5 - SLEET, HAIL 99 - OTHER / UNKNOWN 9 - OTHER / UNKNOWN | | | 9 - OTHER/UNKNOWN | |
| NARRATIVE | | | | To die a health a seath |
| | | | 4 | Indicate the north direction with an "N" on the |
| 22-16600 | | | | compass diagram. |
| 10-2-22 | | | | 1 |
| | | | | |
| On Friday 9-30-22 at 2024 hours, I responded to a two | | | | |
| vehicle crash on Rhodes Rd. in front of College | | | | |
| | | Entrar Colli | ege | |
| Towers. Unit 1 was making a left into College | | Towers | s 1800 s Rd. | Not To Scale |
| Towers. Unit 1 didn't see Unit 2 coming because | | | | |
| there is a blind spot in the road to the west of the | | | Rh | odes Rd. |
| crash location. Unit 1 and 2 collided in the | | | | • |
| westbound lane of Rhodes Rd. No reported injuries. | | | | |
| Unit was cited for fail to yield | | | | |
| CRASH REPORTED DATE / TIME DISPATCH DATE / TIME ARRIV | | | | |
| GRASH REFORTED DATE / TIME DISPATOR DATE / TIME ARRIVI | í | | 1.1. | I I OLIUL MULITOT |
| TOTAL TIME OTHER TOTAL OFFICER'S NAME* | | | | MOTORIST |
| TOTAL TIME OTHER TOTAL OFFICER'S NAME* ROADWAY CLOSED INVESTIGATION TIME MINUTES | CHECKED BY OFFI | CER'S NAME* | F | SUPPLEMENT |
| OFFICER'S BADGE NUMBER* | Снескер | BY OFFICER'S BADGE I | IUMBER* | (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO COPS) |
| | 1 | 1 1 1 | 1 | |

LOCAL REPORT NUMBER

2,0,2,2,-,0,0,0,1,6,6,0,0

| | | | | | | | 0 0 1 10 6 0 0 | | | |
|----------------------------|--|--|---|--|---|---|---|--|--|--|
| | OWNER NAME: LAST, FIRS MCWHORTH | ER, OMAR, K | CHALID | OWNER PHONE: (NO. | UDE AREA CODE (X SAME AS DRIVER) | 5 | AMAGE IAGE SCALE | | | |
| OWNER AI | DDRESS: STREET, CITY, STATE | , ZIP (X SAME AS DRIVER) | 1 - NONE 3 - FUNCTIONAL DAMAGE 3 - J 2 - MINOR DAMAGE 4 - DISABLING DAMAGE | | | | | | | |
| | RHODES RD | | 1 44240 | COMMERCIAL CARRIER | PHONE: INCLUDE AREA CODE | 2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN | | | | |
| | The Control of the Co | and of the state o | | L. L. L. | I I I I I I | DAMAGED AREA(S) | | | | |
| | LICENSE PLATE # | | E IDENTIFICATION # | VEHICLE YE | | | ALL THAT APPLY | | | |
| | JGV7825 | | B ₁ H ₂ ₁ B ₁ 5 ₁ M ₂ ₁ 2 ₁ | | T. TASTICAL | 11 12 1 | 11 12 1 | | | |
| X INSURA VERIFI | NCE INSURANCE COMP ED GEICO | | NSURANCE POLICY # 59298062 | GRY | VEHICLE MODEL MAZDA 6 | 10 00 2 | 10 12 | | | |
| | TYPE OF USE | | US DOT # | TOWED BY: COMPAN | | 10 2 2 | 10,4300.2 | | | |
| COMME | RCIAL GOVERNMENT | IN EMERGENCY RESPONSE | 1. 1 . 1 . 1 . 1 | UAZADDO | US MATERIAL | 9 9 3 | 9 9 3 3 | | | |
| INTER | FOCK — | HUCCUPANIS | HICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. | | CLASS # PLACARD ID # | 7 | | | | |
| INTER DEVICE EQUIP | E HIT/SKIP UNI Ped | $\lceil \mid 0, 1, \mid \mid$ | 2 - 10,001 - 26K LBS 3 - >26K LBS. | B. PLACARD | | 6 | 12 7 6 | | | |
| | 1 - PASSENGER CAR | 7 - MOTORCYCLE 2-WHEELED | 12-GOLF CART | 18-LIMO (LIVERY VEHICLE) | 23 - PEDESTRIAN / SKATER | 6 11 | 1 6 | | | |
| [0,1] | 2 - PASSENGER VAN (MINIVAN) | | 13-SNOWMOBILE | 19-8US (16+ PASSENGERS) | 24 - WHEELCHAIR (ANYTYPE) | 10 | | | | |
| UNIT TYPE | 3 - SPORT UTILITY VEHICLE 4 - PICK UP | 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED | 14-SINGLE UNITTRUCK 15-SEMI-TRACTOR | 20-OTHER VEHICLE 21-HEAVY EQUIPMENT | 25 - OTHER NON-MOTORIST 26 - Bicycle | , — - | 9 3 3 | | | |
| | 5 - CARGO VAN | BICYCLE | 16-FARM EQUIPMENT | 22 - ANIMAL WITH RIDER OR | 27 -TRAIN | - | | | | |
| | 6 - VAN (9-15 SEATS) | 11 - ALL TERRAIN VEHICLE (ATV / UTV) | 17-MOTORHOME | ANIMAL-DRAWN VEHICLE | 99 - UNKNOWN OR HIT/SKIP | 8 | 7 6 4 | | | |
| <u> </u> | # of TRAILING UNITS | | | | | 11 12 7 | 5 12 1 | | | |
| _00_ | WAS VEHICLE OPERATING IN AU | | 0 - NO AUTOMATION | 3 - CONDITIONAL AUTOMATION | 9 - UNKNOWN | 10 12 2 | 10 12 , | | | |
| | MODE WHEN CRASH OCCURRED 1-YES 2-NO 9-OTHER/UNK | | 1 - DRIVER ASSISTANCE 2 - Partial Automation | 4 - HIGH AUTOMATION 5 - FULL AUTOMATION | • | 10 2 | | | | |
| | | MODE LEVEL | | | | 9 3 3 | 9 3 3 | | | |
| Λ 1 | | 6 - BUS - CHARTER/TOUR | 11-FIRE | 16-FARM | 21 - MAIL CARRIER | $\frac{8}{7}$ | て 計算者 7.1 | | | |
| 0.1 | 2 - TAXI 3 - ELECTRONIC RIDE SHARING | 7 - BUS - INTERCITY 8 - BUS - SHUTTLE | 12 - MILITARY 13 - POLICE | 17 - MOWING 18 - SNOW REMOVAL | 99-OTHER/UNKNOWN | | 6 | | | |
| | 4 - SCHOOL TRANSPORT | 9 - BUS - OTHER | 14-PUBLIC UTILITY | 19-TOWING | | 6 | 6 | | | |
| | 5 - BUS -TRANSIT/COMMUTER | 10-AMBULANCE | 15-CONSTRUCTION EQUIPMENT | 20 - SAFETY SERVICE PATROL | | 1 | 12 12 12 | | | |
| $0_{1}1_{1}$ | 1 - NO CARGO BODYTYPE /NOT APPLICABLE | 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE | 5 - INTERMODAL CONTAINER Chassis | 8 - POLE | 12 - CONCRETE MIXER | 12 | | | | |
| CARGO | 2 - BUS | 4 - LOGGING | 6 - CARGO VAN/ENCLOSED BOX | 9 - CARGOTANK 10-Flat bed | 13-AUTOTRANSPORTER 14-Garbage/Refuse | | | | | |
| BODY Type | | | 7 - GRAIN/CHIPS/GRAVEL | 11-DUMP | 99-OTHER/UNKNOWN | 9 () 3 9 | P [⊕] 3 9 3 3 | | | |
| 1 1 1 | 1 - TURN SIGNALS | 4 - BRAKES | 7 - WORN OR SLICK TIRES | 9 - MOTORTROUBLE | 99-OTHER/UNKNOWN | 6 | | | | |
| VEHICLE | 2 - HEAD LAMPS 3 - TAIL LAMPS | 5 - STEERING | 8 - TRAILER EQUIPMENT DEFECTIVE | 10-DISABLED FROM PRIOR ACCIDENT | | | 6 6 6 | | | |
| DEFECTS | | 6 - TIRE BLOWOUT | | | | □ - NO DAMAGE [0] | - UNDERCARRIAGE [14] | | | |
| 1 1 1 | | 3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED | 6 - BICYCLE LANE 7 - Shoulder / Roadside | 9 - MEDIAN/CROSSING ISLAND 10-DRIVEWAY ACCESS | 12-FIRST RESPONDER AT INCIDENT SCENE | □-TOP [13] | -ALL AREAS [15] | | | |
| NON-MOTORIST LOCATION | 2 - INTERSECTION - UNMARKED | CROSSWALK | 8 - SIDEWALK | 11 - SHARED USE PATHS OR | 99-OTHER/UNKNOWN | | | | | |
| AT IMPACT | CROSSWALK | 5 -TRAVEL LANE - OTHER LOCATION | | TRAILS | 1000 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | UNIT N | OT AT SCENE [16] | | | |
| | | 1 - STRAIGHT AHEAD | 7 - MAKING U-TURN | 13 - NEGOTIATING A CURVE | 18 - APPROACHING OR LEAVING VEHICLE | INITIAL P | OINT of CONTACT | | | |
| 5 | 2-NON-COLLISION 3-STRIKING 0,6 | 2 - BACKING 3 - Changing Lanes | 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE | 14 - ENTERING OR CROSSING SPECIFIED LOCATION | 19-STANDING | | 14 - UNDERCARRIAGE | | | |
| ACTION | 4 - STRUCK PRE-CRASH | 4 - OVERTAKING/PASSING | 10-PARKED | 15 - WALKING, RUNNING, Jögging, Playing | 20 - OTHER NON-MOTORIST | 1,2, 1-12 - REFERTO UNIT 15 - VEHICLE NOT AT SCENE DIAGRAM 99 - UNKNOWN | | | | |
| | 5 - BOTH STRIKING ACTIONS & STRUCK | 5 - MAKING RIGHTTURN 6 - MAKING LEFTTURN | 11 - SLOWING OR STOPPED In Traffic | 16 - WORKING | 21 - STANDING OUTSIDE DISABLED VEHICLE | 13 - TOP | 37 - OMKNOWN | | | |
| 4 | 9 - OTHER / UNKNOWN | 0 - MANING CEFT TOWN | 12-DRIVERLESS | 17 - PUSHING VEHICLE | 99-OTHER/UNKNOWN | т | RAFFIC | | | |
| | | 7 - LEFT OF CENTER | DADVED DOGITION | 17 - VISION OBSTRUCTION | 21 - LYING IN ROADWAY | TRAFFICWAY FLOW | TRAFFIC CONTROL | | | |
| | 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 | 1 - ROUNDABOUT 4 - STOP SIGN | | | |
| <u>[0,2]</u> | 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 | | | |
| CUNTRIBUTING CIRCUMSTANCES | 5 - UNSAFE SPEED | 11 - DROVE OFF ROAD | 16-WRONG WAY | SPILLING 20 - IMPROPER CROSSING | 99-OTHER IMPROPER ACTION | #ac THOOLIGH I AND | | | | |
| <u> </u> | 6-IMPROPERTURN | 12-IMPROPER BACKING | | | | # OF THROUGH LANES ON ROAD | RAIL GRADE CROSSING 1 - NOT INVOLYED | | | |
| N SEQUENCE | UF EVENIO | | NON-COLLISION | | | | 1 2 - INVOLVED-ACTIVE CROSSING | | | |
| | | 6 - EQUIPMENT FAILURE | 11 - CROSS CENTERLINE OPPOSITE DIRECTION OF | 16 - RAILWAY VEHICLE | 22 - WORK ZONE MAINTENANCE EQUIPMENT | | 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 / NON-N | OTORIST DIRECTION | | | |
| 2 | 4 - JACKKNIFE | 9 - RAN OFF ROAD LEFT | 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION | 19-ANIMAL - OTHER | SHIFTING CARGO OF ANYTHING SET IN MOTION | | 1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST | | | |
| | 5 - CARGO / EQUIPMENT Loss or shift | 10-CROSS MEDIAN | 14-PEDESTRIAN | 20 - MOTOR VEHICLE IN TRANSPORT | BY A MOTOR VEHICLE 24-OTHER MOVABLE OBJECT | FROM 4 TO 1 | 1 | | | |
| 3 | | 88117875 | 15-PEDALCYCLE | 21 - PARKED MOTOR VEHICLE | 2. VINER HOTAGE OBJECT | ,,,,,, | 4 - WEST 8 - SOUTHWEST | | | |
| | | 31 - GUARDRAIL END | N WITH FIXED OBJECT 37-Traffic sign post | F - STRUCK 43-CURB | 50 - WORK ZONE MAINTENANCE | | 9 - OTHER / UNKNOWN | | | |
| 4 | / CRASH CUSHION 26 - BRIDGE OVERHEAD | 32-PORTABLE BARRIER | 38-OVERHEAD SIGN POST | 44 - DITCH | EQUIPMENT 51 - WALL | UNIT SPEED | DETECTED SPEED | | | |
| 51 1 | STRUCTURE | 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL | 39-LIGHT/LUMINARIES SUPPORT | 45 - EMBANKMENT 46 - FENCE | 52-BUILDING | | 1 - STATED / ESTIMATED SPEED | | | |
| | 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET | BARRIER | 40 - UTILITY POLE | 47 - MAILBOX | 53 - TUNNEL | | 2 - CALCULATED / EDR | | | |
| 61 | 29 - BRIDGE RAIL | 35 - MEDIAN CONCRETE BARRIER | 41 - OTHER POST, POLE OR SUPPORT | 48-TREE 49-FIRE HYDRANT | 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN | POSTED SPEED | 3 - UNDETERMINED | | | |
| | 30 - GUARDRAIL FACE | 36-MEDIAN OTHER BARRIER | 42 - CULVERT | O THE HINDAM | | | | | | |
| | FIRST HARMFUL EVEN | T L MOST H | ARMFUL EVENT | | | | | | | |

LOCAL REPORT NUMBER

 $|2_10_12_12_1-10_10_10_11_16_16_10_10_1$

| UNIT# | OWNER NAME: LAST, FIRS | ST, MIDDLE (X SAME AS DRIVER | · · · · · · · · · · · · · · · · · · · | V1111. | | | | DAM | AGE | | |
|---------------------------|---|---|---|--|---|---|--|---------------------------|--|--|--|
| | 2 HUDSON, MARK, S | | | <u> </u> | | | DAMAGE SCALE | | | | |
| | NER ADDRESS: STREET, CITY, STATE, ZIP (MSAMEAS DRIVER) 593 ATHENA DR, Kent, OH 44240 | | | | | | 1 - NONE 3 - FUNCTIONAL DAMAGE 2 | | | | |
| | MERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP | | | | UNFOCIAL CARRIE | PHONE: INCLUDE AREA CODE | 2-WILWORD | 9 - UNKN | | | |
| O O III III Z II | | | | | I I I | I I I I I | DAMAGED AREA(S) | | | | |
| LP STATE | LICENSE PLATE # | | E IDENTIFICATION # | | VEHICLE YE | | INDICATE ALL THAT APPLY | | | | |
| $\mathbf{O}_{\mathbf{H}}$ | 286ZCM | 2 L MD J 6 J | J ₁ K ₄ 8 ₁ E ₁ B ₁ L ₁ 0 ₁ 4 ₁ | $7_{1}5_{1}1_{1}$ | 201 | 4 Lincoln-Co | ntinentak | | 12 | | |
| INSURA | | ANY | INSURANCE POLICY# | | COLOR | VEHICLE MODEL | | | 11 12 | | |
| L VERIF | | | | 1 | BLK | MKX | 10 | 2 | 10 11 1 2 | | |
| СОММЕ | TYPE OF USE RCIAL GOVERNMENT [| IN EMERGENCY RESPONSE | US DOT # | TOWE | D BY: COMPAN | IY NAME | 9 10 2 3 | 13 | | | |
| | | | HICLE WEIGHT GVWR/GCWR | <u> </u> | | OUS MATERIAL | 1 - 3 4 - | / | | | |
| INTER DEVICE EQUIP | LOCK E HIT/SKIP UNI | #OCCUPANTS V | 1 - ≤10K LBS. 2 - 10,001 - 26K LBS | | MATERIAL RELEASED | CLASS # PLACARD ID # | 8 7 6 | 4 | 8 7 5 4 | | |
| EQUIP | PED — | | 3 - >26K LBS. | | PLACARD | لل لللا لللا | 7 6 5 | 12 | 2 7 6 | | |
| | 1 - PASSENGER CAR | 7 - MOTORCYCLE 2-WHEELED | | | VERY VEHICLE) | 23-PEDESTRIAN/SKATER |] | | | | |
| [0,1] | 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE | 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE | | 19-BUS (16# 20-OTHERV | - PASSENGERS) FHICLE | 24 - WHEELCHAIR (ANY TYPE) 25 - Other Non-Motorist | 10/_ | . 11 | $\left \frac{1}{2}\right ^2$ | | |
| UNIT TYPE | 4 - PICK UP | 10 - MOPED OR MOTORIZED | | 21 - HEAVY E | | 26-BICYCLE | 9 | 9 | 3 3 | | |
| | 5 - CARGO VAN | BICYCLE | 16-FARM EQUIPMENT | | WITH RIDER OR | 27 - TRAIN | \ <u></u> | 8 | 3 4 - | | |
| 00 | 6 - VAN (9-15 SEATS) | 11 - ALL TERRAIN VEHICLE (ATV / UTV) | 17 - MOTORHOME | ANIMAL- | DRAWN VEHICLE | 99 - UNKNOWN OR HIT/SKIP | 8 | < `∐⊑ | 5 4 | | |
| 00, | # of TRAILING UNITS | | | | | | 11 12 1 | 7 | 5 11 12 | | |
| | WAS VEHICLE OPERATING IN AU | | 0 - NO AUTOMATION | 3 - CONDITIO | NAL AUTOMATION | 9 - UNKNOWN | 12 | · · | 12 | | |
| . 2 | MODE WHEN CRASH OCCURRED | | A DESCRIPTION | 4 - HIGH AUT | | | 11/10 1/2 | ١ | | | |
| | 1-YES 2-NO 9-OTHER/UNK | NOWN AUTONOMOUS Mode Level | 2 - PARTIAL AUTOMATION | 5 - FULL AU1 | IUMAI IUN | | 9 0 3 | 3 | 9 9 3 3 | | |
| | 1 - NONE | 6 - BUS - CHARTER/TOUR | 11-FIRE | 16-FARM | | 21 - MAIL CARRIER | 8 4 | / | | | |
| [0,1] | | | | 17-MOWING | | 99-OTHER/UNKNOWN | 8 7 6 5 | 4 | $8 \left \begin{array}{c} 7 \\ \hline \end{array} \right \begin{array}{c} 5 \\ \hline \end{array} \right \left \begin{array}{c} 4 \\ \hline \end{array} \right $ | | |
| SPECIAL | 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT | 8 - BUS - SHUTTLE 9 - BUS - OTHER | | 18-SNOW RE 19-TOWING | MOVAL. | | 7 6 | | 7 5 | | |
| FUNCTION | 5 - BUS -TRANSIT/COMMUTER | | 15 - CONSTRUCTION EQUIPMENT | | SERVICE PATROL | | ű | | | | |
| | 1 - NO CARGO BODYTYPE | 3 - VEHICLE TOWING ANOTHER | · | 8 - POLE | | 12-CONCRETE MIXER | | 12 8 | 12 12 | | |
| 0.1 | /NOT APPLICABLE | MOTOR VEHICLE | Attionto | 9 - CARGOTA | INK | 13-AUTOTRANSPORTER | 12 | | | | |
| BODY | 2 - BUS | 4 - LOGGING | T AD STATION FOR INDIVIDU | 10-FLAT BEG | ם | 14-GARBAGE/REFUSE | R A Re | | 3 9 3 9 8 3 | | |
| TYPE | | | 7 - GRAIN/CHIPS/GRAVEL | 11-DUMP | | 99-OTHER/UNKNOWN | | | | | |
| | 1 - TURN SIGNALS | 4 - BRAKES | | 9 - MOTORTI | | 99-OTHER/UNKNOWN | 6 | | S | | |
| VEHICLE | 2 - HEAD LAMPS 3 - TAIL LAMPS | 5 - STEERING 6 - TIRE BLOWOUT | 8 - TRAILER EQUIPMENT DEFECTIVE | 10-DISABLE ACCIDEN | D FROM PRIOR T | | | 6 | 6 6 | | |
| | d. | | | | | | - NO DAMAGE [0] - UNDERCARRIAGE [14] | | | | |
| I | 00000001111 | 3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED | | | - MEDIAN/CROSSING ISLAND 12-FIRST RESPONDER - DRIVEWAY ACCESS AT INCIDENT SCENE | | П-ТОР [13] | r | □-ALL AREAS [15] | | |
| NON-MOTORIST | 2 - INTERSECTION - UNMARKED | CROSSWALK | | 10 - DRIVEWAY ACCESS 11 - Shared Use Paths or | | 99-OTHER/UNKNOWN | | _ | | | |
| AT IMPACT | | 5 -TRAVEL LANE - OTHER LOCATIO | | TRAILS | | | - UNIT NOT AT SCENE [16] | | | | |
| | | 1 - STRAIGHT AHEAD | | | TING A CURVE | 18-APPROACHING | INITI | IAL PAINT | F OF CONTACT | | |
| 5. | | 2 - BACKING | | | IG OR CROSSING ED LOCATION | OR LEAVING VEHICLE 19-Standing | 0 - NO DAMA | | 14 - UNDERCARRIAGE | | |
| ACTION | | 3 - CHANGING LANES 4 - OVERTAKING/PASSING | 9 - LEAVING TRAFFIC LANE 10 - Parked | 15 - WALKING | | 20-OTHER NON-MOTORIST | | T 15-VEHICLE NOT AT SCENE | | | |
| | 5 - BOTH STRIKING ACTIONS | 5 - MAKING RIGHT TURN | 11-SLOWING OR STOPPED | JOGGING, PLAYING | | 21 - STANDING OUTSIDE | 13 - TOP | KAM | 99 - UNKNOWN | | |
| , | & STRUCK | 6 - MAKING LEFTTURN | IN TRAFFIC | | | DISABLED VEHICLE 99-OTHER / UNKNOWN | 13 - 104 | | | | |
| | 9-OTHER/UNKNOWN | T I BRY OF ATTION | 12-DHIVEHEEGG | | | | | TRAF | | | |
| | | 7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / ACC | DEDICED DOGITION | | BSTRUCTION NG DEFECTIVE | 21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE | TRAFFICWAY FLOW | | TRAFFIC CONTROL | | |
| .0.1. | | 9-IMPROPER LANE CHANGE | 14-STOPPED OR PARKED | EQUIPME | | 23 - OPENING DOOR INTO | 1 - ONE-WAY 2 - TWO-WAY | | 1 - ROUNDABOUT 4 - STOP SIGN 2 - Signal 5 - Yield Sign | | |
| | 4 - PAN STOP SIGN | 10-IMPROPER PASSING | ILLEGALLY 15-swerving to avoid | 19 - LOAD SHI SPILLING | IFTING/FALLING/ | ROADWAY | 2 2 - IWO-WAY | 6 | 3 - FLASHER 6 - NO CONTROL | | |
| CIRCUMSTANCES | | 11 - DROVE OFF ROAD | | SPILLING 20 - IMPROPE | | 99-OTHER IMPROPER ACTION | # of through lanes | | | | |
| CEOUCHO | | 12-IMPROPER BACKING | | | | | ON ROAD | | RAIL GRADE CROSSING 1 - NOT INVOLVED | | |
| SEQUENCE | OF EVENTS | | NON-COLLISION | | | | 2 | , 1 | 2 - INVOLVED-ACTIVE CROSSING | | |
| ₁ 2 , 0 , | | 6 - EQUIPMENT FAILURE | 11 - CROSS CENTERLINE - | 16 - RAILWAY | | 22 - WORK ZONE MAINTENANCE | | | 3 - INVOLVED-PASSIVE CROSSING | | |
| | | 7 - SEPARATION OF UNITS | TDAVEL | 17 - ANIMAL 18 - ANIMAL | | EQUIPMENT 23 - STRUCK BY FALLING, | UNIT/N | ом-мото | RIST DIRECTION | | |
| 2i | | 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT | 12 - DOWNHILL RUNAWAY | 19-ANIMAL | | SHIFTING CARGO OR | | | 1 - NORTH 5 - NORTHEAST | | |
| | 5 - CARGO / EQUIPMENT | 10-CROSS MEDIAN | 12 ATUCO NAN CALLISTAN | 20 - MOTOR V | EHICLE IN | ANYTHING SET IN MOTION By a motor vehicle | 3 | . 4 | 2 - SOUTH 6 - NORTHWEST | | |
| 3 | LOSS OR SHIFT | | | TRANSPO 21 - PARKED | IKI Motor vehicle | 24-OTHER MOVABLE OBJECT | FROM 3 TO | _4_ | 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST | | |
| | A. HISTORY | | N WITH FIXED OBJECT | - STRU | | | | | 9 - OTHER / UNKNOWN | | |
| 4 | | 31 - GUARDRAIL END 32 - PORTABLE BARRIER | | 43 - CURB | | 50-WORK ZONE MAINTENANCE EQUIPMENT | 1 | | DETECTED CREES | | |
| | 26 - BRIDGE OVERHEAD | 33 - MEDIAN CABLE BARRIER | 39 - LIGHT / LUMINARIES | 44 - DITCH 45 - EMBANKMENT | | 51 - WALL | UNIT SPEED | 1 | DETECTED SPEED 1 - STATED / ESTIMATED SPEED | | |
| 5 | STRUCTURE 27 - BRIDGE PIER OR ABUTMENT | 34-MEDIAN GUARDRAIL Barrier | AN HITTH STUDIOS C | 46 - FENCE | , | 52-BUILDING 53-TIINNEI | | | 2 - CALCULATED / EDR | | |
| | 28 - BRIDGE PARAPET | 35 - MEDIAN CONCRETE | 41 - OTHER POST, POLE | 47 - MAILBOX 48 - TREE | 7 - MAILBOX 53 - TUNNEL 8 - Tree 54 - Other fixed object | | p. A. A. M. A. | 3 - UNDETERMINED | | | |
| 6 | 29 - BRIDGE RAIL 30 - GUARDRAIL FACE | BARRIER 36-MEDIAN OTHER BARRIER | UB CHDOUBL | 49 - FIRE HYL | DRANT | 99-OTHER/UNKNOWN | POSTED SPEED | 2 - OUDET CUNTIAED | | | |
| 1 | | | ADMEIII EVENT | | | | 1 | | | | |

| Ũ | CHIO DEPARTMENT MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST | | | | | | | | LOCAL REPORT NUMBER 2 0 2 2 - 0 0 0 1 6 6 0 0 | | | | | | | |
|--------|--|--|--|-------------------------------|--|------------------------------------|--|-----------------------------|--|--|--|---|--------------------|----------------------------------|--|--|
| | UNIT# | UNIT # NAME: LAST, FIRST, MIDDLE | | | | | | | | | Z Z - | | 0 1 1 | 6 6 C | GENDER | |
| | 0.1 | MCWH | MCWHORTER, OMAR, KHALID | | | | | | | | 0,5,0,7,1,9,9,9 | | | | | |
| ORIST | | STREET, CITY, ST | S RD 116, Kent, C | NH 44240 | | | | | | CONTACT PHONE - INCLUDE AREA CODE | | | | | | |
| MOT | | INJURED | EMS AGENCY (NAME) | | | TAKEN TO | : MEDICAL FACILITY | (NAME, CITY) | SAFETY EQUIPMENT | IT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED | | | | | | |
| NON/ | 5 | TAKEN BY | | | | | | | USED 0 4 | DOT-C | IMPLIANT | | 1 | | | |
| RIST | OL STATE | OPERATOR L | ICENSE NUMBER | | 1 | SE CHAF | RGED | LOCAL CODE | OFFENSE DESC | | | | | ATION NUMBER | | |
| MOTO | O H OL CLASS | ENDORSEMENT | RESTRICTION SELECT | UPTO3 DRIV | 331.1 | | OHOL / DRUG SUSPE | IX. | Right of Way | | OHOL TEST | | 21284 DRUG TEST(S) | | | |
| | | SELECT UP TO 2 | RESTRICTION SECES | DIST | RACTED | | LCOHOL MAR | | | STATUS | | .UE ST | TATUS TY | PE RESUL | T SELECT UPTO 4 | |
| | UNIT # | NAME: LAST, I | FIRST MIRRIS | | 1 | on | THER DRUG | | 1 | 1 | DATE OF | | 1 | 1 005 | Lorupe p | |
| | .0.2 | | ON, MARK, S | | | | | | | . 1 . 1 | DATE OF 1 | | 9.5. | AGE | GENDER | |
| IST | | STREET, CITY, ST | | | | | | | | | PHONE - INCL | | | | <u> </u> | |
| OTOR | | | OH 4, OH 4, OH 4 | 4240 | | | | | | | 1 - 1 | · • - • | | | <u></u> | |
| NON-N | INJURIES 5 | INJURED TAKEN BY | EMS AGENCY (NAME) | | INJUREDT | TAKEN TO: | ; MEDICAL FACILITY | (NAME, CITY) | SAFETY EQUIPMENT USED 4 1 | DOT-C | MPLIANT | ایا | AIR BAG USA | GE EJECTION | TRAPPED | |
| ST / N | OL STATE | | ICENSE NUMBER | | OFFEN: | SE CHAF | RGED | LOCAL | OFFENSE DESC | | | | CITATION | I NUMBER | | |
| TORI | O H | | | | | | | CODE | | | | | | | | |
| Σ | OL CLASS | ENDORSEMENT SELECT UP TO 2 | RESTRICTION SELECT | DIST | ER RACTED | | DHOL / DRUG SUSPE | | CONDITION | ALI STATUS T | OHOL TEST YPE VAL | .UE ST | | RUG TEST(S 'PE RESUL | T SELECT UP TO 4 | |
| | _4 | BY ALCOHOL MARIJUANA 1 OTHER DRUG 1 | | | | | | 1 | 1 | 1 | | 1 | 1 | | | |
| | UNIT# | NAME: LAST, I | FIRST, MIDDLE | | | | | | | | DATE OF | BIRTH | | AGE | GENDER | |
| | ADDDESS. | STREET, CITY, ST | ATE 710 | | | | | | | | <u> </u> | | | | <u> </u> | |
| ORIS | ADDRESS: | 31KEE1, G11Y, S1 | ATE, ZIP | | | | | | | CONTACT | PHONE - INCL | UDE AREA COD | E | | | |
| N-MO | INJURIES | INJURED TAKEN | EMS AGENCY (NAME) | | INJUREDT | AKEN TO | : MEDICAL FACILITY | INAME, CITY) | SAFETY EQUIPMENT USED | DOT-C | MPLIANT SEATI | NG POSITION | AIR BAG USA | IGE EJECTION | TRAPPED | |
| I / NO | OL STATE | BY L | ICENSE NUMBER | | OFFEN | er cuar | | | | Шмс не | LMET | | CITATION | | الــــــــــــــــــــــــــــــــــــ | |
| ORIS | OL SIATE | OPERATOR L | ICENSE NOMBER | | UFFERS | SE CHAR | KGED | LOCAL CODE | OFFENSE DESC | KIPIIUN | N CII. | | | TATION NUMBER | | |
| 0 M | OL CLASS | ENDORSEMENT Select up to 2 | RESTRICTION SELECT | | ER RACTED | - | OHOL / DRUG SUSPE | | CONDITION | ALI STATUS T | OHOL TEST | UE ST | | RUG TEST(S | T SELECT UP 10 4 | |
| | . , | |] | BŶ | | | LCOHOL MAR THER DRUG | RIJUANA | ļ. , | | | | .,, | | | |
| | ME TO A SECURE OF STREET | RIES | SEATING POSITION | and the second second | IR BAG | | OL CLASS | | OL RESTRIC | TOILO | DRIVER D | 201-027 14 (EC.) | ON | TEST ST | ATUS | |
| 1.5 | - FATAL - Suspected : | SERIOUS INJURY | 1 FRONT - LEFT SIDE (MOTORCYCLE DRIVER) | 1 - NOT DEPL 2 - DEPLOYE | 就 密 禁止放出 | | 1 - CLASS A 2 - CLASS B | | 1 - ALCOHOL INTER 2 - CDL INTRASTATI | · 在一种 电影性 1000 1000 1000 1000 1000 1000 1000 10 | 1 - NOT DISTR 2 - Manually | M. Burney Charles | | NONE GIVEN Fest refused | | |
| | - SUSPECTED I - Possible in | とはついる。 連合 別へいた | 2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE | 3 - DEPLOYE 4 - DEPLOYE | | NT/SIDE | 3 - CLASS C 4 - REGULAR CLASS | | 3 - CORRECTIVE LE | NSES | | IC COMMUNICA Exting, Typin | | TEST GIVEN, CO Sample / Unus | | |
| 1.7 | - NO APPAREN | | 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) | 5 - NOT APPL | ICABLE | | (OHIO = D) 5 - M/C MOPED ONLY | | 5 - EXCEPT CLASS | · 有一致 1.5 化 1.5 。 | 3 - TALKING 0 | | | TEST GIVEN, RE TEST GIVEN, RE | 2-16-40 NOVEMBER 18-1 | |
| | INJURED. | the State of the State of the State of | 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE | 9-DEPLOYN | IENI UNKNO | IYN | 6 - NO VALID OL | | 6 - EXCEPT CLASS A & CLASS B BUS | | 4 - TALKING 0 | ATION DEVICE N HAND-HELD ATION DEVICE | | UNKNOWN | | |
| | - NOT TRANSPO /TREATED AT | | 7 -THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) | Andreas Salaria and a | ECTION | 5. 1, 467 C.C. (182, 183. V.C.) | OL ENDORSEM | MENT | 7 - EXCEPT TRACTO 8 - INTERMEDIATE | | 5 - OTHER ACT | IN HTIW YTIVI | N A | LCOHOL TE | ST TYPE | |
| 100 | - EMS - POLICE | | 8-THIRD-MIDDLE | 1 - NOT EJEC 2 - PARTIALL | 7 6 10 10 10 10 10 10 10 10 10 10 10 10 10 | | H - HAZMAT M - Motorcycle | | RESTRICTIONS 9 - LEARNER'S PER | MIT | 6 - PASSENGE | R | 2- | BL00D | | |
| 9 | - OTHER/UNK | NOWN | 9-THIRD - RIGHT SIDE 10-Sleeper Section | 3 - TOTALLY I 4 - NOT APPL | | | P - PASSENGER N - TANKER | | RESTRICTIONS 10 - LIMITED TO DAY | LIGHT ONLY | 7 - OTHER DIS Inside th | E VEHICLE | 4- | URINE Breath | | |
| | SAFETY EC | QUIPMENT | OF TRUCK CAB 11-Passenger in Other | Ti. | APPED | 1 | Q - MOTOR SCOOTER R - Three-Wheel Mo | TODOVCI E | 11 - LIMITED TO EMP | | THE VEHIC | | <u> </u> | OTHER | | |
| 111 | - SHOULOER B - Lap Belt on | ELT ONLY USED | ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) | 1 - NOTTRAP 2 - Extricat | | | S - SCHOOL BUS | | 13 - MECHANICAL DE (Special Braki | | 9-OTHER/U | | 2 Page 1996 | DRUG TES None | I TYPE | |
| 4 | - SHOULDER & | LAP BELT USED | 12 PASSENGER IN UNENCLOSED CARGO AREA | | ICAL MEANS | | T - DOUBLE & TRIPLE X - TANKER / HAZMAT | ずのかに違い | CONTROLS, OR O ADAPTIVE DEVI | | OON 1 - APPARENT | DITION Ly normal | 法连续的支撑的工作员 | BLOOD Urine | | |
| | FORWARD FA | detection in the first | 13-TRAILING UNIT | | HANICAL MI | EANS | GENDER | Step 1824 | 14 - MILITARY VEHICLE | 1.15本 等抗人等 行。 | 2 - PHYSICAL 3 - EMOTIONA | | | OTHER | | |
| | REAR FACING | | 14 - RIDING ON VEHICLE EXTERIOR F-FEMALE (NON-TRAILING UNIT) F-FEMALE M - MALE | | | AIR BRAKES 16 - OUTSIDE MIRRO | R | ANGRY, DISTU 4 - ILLNESS | | DR | UG TEST R Amphetamine | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | | |
| 500 | - BOOSTER SEA - Helmet use | 원하기 전 시하는 말이 있다. | 15 - NON-MOTORIST 99 - OTHER/UNKNOWN | | | | U - OTHER / UNKNOWN | | 17 - PROSTHETIC AID | j | 5- FELL ASLE Fatigued, | | . 2 | BARBITURATES | | |
| g | - PRÓTECTIVE (ELBOW, KNE | | | | | | | | 10.07IILK | | 6- UNDER THE | 重新的 经基本证 | | BENZODIAZEPII Cannabinoids | 化硫化物 化邻烷基苯 | |
| 1.7 | - REFLECTIVE - Lighting - P | 连贯 4年1月2日2日 。 | | | | | | | | | /ALCOHOL 9-OTHER/UN | | | COCAINE Opiates/Opioi | DS | |
| | /BICYCLE ON - OTHER/UNK | ll y | | | | | | | | | | 7 - OTHER 8 - Negative results | | | | |

| 0 | OCCUPANT / WITNESS ADDENDUM | | | | | | | LOCAL REPORT NUMBER | | | | | | | |
|-----------------------------------|-----------------------------------|----------------------------------|--|---------------------------|--|---|-----------------------------------|--|--|---------------|----------|----------|--|--|--|
| | | | | | | | | [2,0,2,2,-0,0,0,1,6,6,0,0,-] | | | | | | | |
| I | UNIT# | | T, FIRST, MIDDLE | | | | | DATE OF BIRTH AGE GENDER | | | | | | | |
| | <u>02</u> | | SON, JAZMIN | E, JAQUI | | | | 1 1 2 2 1 9 9 2 | | | | | | | |
| OCCUPANT | | STREET, CITY, | | NTT 44540 | | | CONTACT PHONE - INCLUDE AREA CODE | | | | | | | | |
| 99 | | | A DR ,Kent ,C |)H 4424U | | | ALEEN SAUTHERIN | l | | 1 | T = | | | | |
| | 5 . | INJURED TAKEN BY | EMIS AGENCY (NAME) | | INJURED TAKEN TO: MEDICAL FACILI | ITY (NAME, CITY) | DOT-COMPLIANT | SEATING POSITION | l . | FIFEIION | TRAPPED | | | | |
| ٥. | | | | ****** | | | 0 3 | | | | | | | | |
| | UNIT# | NAME: LAS | T, FIRST, MIDDLE | | | | | DATE OF BIRTH AGE GENDER | | | | | | | |
| 2 | ADDRESS: | STREET, CITY, | STATE, 71P | | | | **** | CONTACT PHONE | = INCLUDE AREA CO | DE L | | <u> </u> | | | |
| OCCUPAN | | , , , , | | | The state of the s | | | | | | | | | | |
| 8- | INJURIES | INJURED | EMS AGENCY (NAME) | | INJURED TAKEN TO: MEDICAL FACILI | SAFETY EQUIPMENT | DOT 0 | EJECTION | TRAPPED | | | | | | |
| | , , | TAKEN By | | | | | USED | DOT-COMPLIANT MC HELMET | 1 1 1 | 1 | ļ. , | | | | |
| | UNIT # | NAME: LAS | T, FIRST, MIDDLE | | | | | DAT | E OF BIRTH | | AGE | GENDER | | | |
| | | | | | | | | | 1 1 1 | 1 11 | 1 [] | 1 1 | | | |
| VΨ | ADDRESS: | STREET, CITY, | STATE, ZIP | | | | | CONTACT PHONE | - INCLUDE AREA CO | DE | | 1 | | | |
| CCUPAN | | | | | | | | | | | | | | | |
| | 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 | | | |
| | L | BY L | | | | | | MC HELMET | | L | | | | | |
| | UNIT# | NAME: LAS | T, FIRST, MIDDLE | | | | | DAT | E OF BIRTH | | AGE | GENDER | | | |
| 5 - | | | | | | | | | | | | | | | |
| CCUPAN | ADDRESS: | DDRESS: STREET, CITY, STATE, ZIP | | | | | | | CONTACT PHONE - INCLUDE AREA CODE | | | | | | |
| 7 -1- | INJURIES | INJURED | NJURED EMS Agency (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMEN | | | | | | SEATING POSITION | AIR PAC HEACE | EIEATION | TOADDED | | | |
| | | TAKEN BY | LING ABERCY (WAWL) | | MOUNTED PAREN 10, INCUIDAD PAGILI | USED | | DOT-COMPLIANT MC HELMET | SERTING FUSITION | AIR BAG USAGE | EVECTION | IRAPPED | | | |
| | | INJU | PRIES . | SAFETY | ' EQUIPMENT USED | | SEATING POS | ITION | | AIR BAG U | SAGE | <u> </u> | | | |
| | 1 - FATA | L | | 1 - NONE US | | | T – LEFT SIDE | | 1 - NOT DE | PLOYED | | | | | |
| I | 2 - SUSF | PECTED SE | RIOUS INJURY | he sisting | OCCUPANT | [1] [1] [1] [1] [1] [1] [1] [1] [1] [1] | ORCYCLE DRIV T – MIDDLE | /ER) 2 - DEPLOYED FRONT | | | | | | | |
| | 主動和關係的 | | NOR INJURY | 3 - LAP BELT | R BELT ONLY USED | 3-FRON | T – RIGHT SIDI | THE THEORY IN THE SECOND SECOND | 3 = DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE | | | | | | |
| I | 的特点系统 | SIBLE INJU | | | R&LAP BELT USED | | ND – LEFT SIDI Orcycle pass | | | | | | | | |
| L |) - INU A | PPARENT I | NJURY | | STRAINT SYSTEM - | [1] 16 May 5, 300 5 6. | ND – MIDDLE | | 5 - NOT APPLICABLE | | | | | | |
| | | 医网络成体成果 | TAKEN BY | 。至于各种的用 500 | FORWARD FACING 6 - SECOND - RIGHT 6 - CHILD RESTRAINT SYSTEM - 7 - THIRD - LEFT SID REAR FACING (MOTORCYCLE SI | | |)E | 9 - DEPLO | | | | | | |
| ı | | TRANSPOR ATED AT S | | | | | | CAR) | EJECTION | | | | | | |
| | 2 - EMS | | | 7 - BOOSTER | - BOOSTER SEAT 8 - THIRD – MIDDLE 9 - THIRD – RIGHT SII | | | | 1 - NOT EJECTED | | | | | | |
| ı | 3 - POLI | CE | | 8 - HELMET | USED | - 雅·· 1977年 1773年254 | PER SECTION (| | 2 - PARTIALLY EJECTED | | | | | | |
| H | 9 - OTHE | R/UNKNO | WN | | IVE PADS USED KNEES, ETC.) | | ENGER IN OTH | | 3 - TOTALLY EJECTED. | | | | | | |
| F | Sight for Si | 关于18mm 中心 (4 | IDER TANK KANDER WELLEN | | IVE CLOTHING | BUS, F | O AREA (NON-TI ICK-UP WITH CAI | P) | 4 - NOT AP | | | | | | |
| | F - FEMA M - MALE | | | | – PEDESTRIAN | | ENGER IN UNE O AREA | NCLOSED | The State of the S | | | | | | |
| | 100 | R/UNKNO\ | WN | / BICYCLI 99 - OTHER/U | 使激发的激发 医中间 医无角层层 | 化建筑数字 作用 化机械熔炼 | LING UNIT | | 1 - NOTTR | | ECUANI(| • AL | | | |
| | | | | 99-UINEKA | JINKINOWN | | IG ON VEHICLE TRAILING UNIT) | and the control of th | | | | ,AL | | | |
| | | | | | | 15 - NON-I | 法的经济 医多种性 | | | BY NON-ME | CHANIC | ΔL | | | |
| | | | | | | 99 - OTHE | R / UNKNOWN | | MEANS | | | | | | |
| ESS | NAME: LAS | T, FIRST, MIDDI | LE | | | | | DAT | E OF BIRTH | | AGE | GENDER | | | |
| MINIS | ADDRESS. | STREET, CITY | STATE, ZIP | | | | | CONTACT PHONE | * INCLUDE AREA CO | | | <u> </u> | | | |
| ADDRESS: STREET, CITY, STATE, ZIP | | | | | | | | CONTACT PHONE - INCLUDE AREA CODE | | | | | | | |
| į. | NAME: LAST, FIRST, MIDDLE | | | | | | | DATE OF BIRTH AGE GENDE | | | | | | | |
| 35 | ADDRESS: STREET, CITY, STATE, ZIP | | | | | | | | | | | | | | |
| HM | | | | | | | CONTACT PHONE | - INCLUDE AREA CO | DE | | | | | | |
| 5 | | | | | | | | <u></u> | | <u> </u> | | | | | |
| ESS | NAME: LAS | T, FIRST, MIDD | LE | | | | | DAT | E OF BIRTH | | AGE | GENDER | | | |
| MINIS | ADDRESS: | STREET, CITY, | STATE, ZIP | | | | | CONTACT PHONE - INCLUDE AREA CODE | | | | | | | |
| | s | | | | | | | | | | | | | | |



September 1 Narrative Continuation

LOCAL REPORT NUMBER

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Officer Hilbruner #237