OHIO DEPARTMENT OF PUBLIC SAFETY SAFETY - SERVICE - PROTECTION	RAFFIC CRASI	HREPORT .	*DENOTES MANDATO	ORY FIELD FOR SUPPLE	MENT REPORT	,	LOCAL REPORT NUMBER	k
PHOTOS TAKEN	OH-2 OH-3	LOCAL INFORMATION			$2 \cdot 0 \cdot 2 \cdot 3$	$-10_{1}0_{1}0_{1}1_{1}3$	3 4 9 9	
SECONDARY CRASH	OH-1P OTHE				NCIC*	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR
SECONDARY CRASH	PRIVATE PROPER	TY City of Ker	it Police	را	0,6,7,0,3	2 1- SOLVED 2- UNSOLVED	0 2 0	2 98 - ANIMAL 99 - UNKNOWN
COUNTY* LOCALITY*	CITY	CITY, VILLAGE, TOWNSHIP*	r			CRASH DATE /	_ 1.	SH SEVERITY FATAL
3-1	VILLAGE TOWNSHIP Kent					08262023	$\frac{1}{2} \frac{2}{2} \frac{2}{0} \frac{5}{2}$	SERIOUS INJURY
Ē	IMBER PREFIX N - NORT S - SOUT	н	ME		ROAD TYPE	LATITUDE DE	2	SUSPECTED MINOR INJURY
S R 59	3 E-EAST W-WES	TIVIAII			$S_{\perp}T_{\perp}$	4,1,,1,5,3	8,0,5	SUSPECTED
ROUTE TYPE ROUTE NU	IMBER PREFIX N - NORT S - SOUT	Н	NAME (ROAD, MILEP	OST, HOUSE #)	ROAD TYPE	LONGITUDE D	5 Y 5 C C C C C C C C C C C C C C C C C	INJURY POSSIBLE
SEFER	E - EAST W - WES				$S \perp T$	-8 ₁ ,3 ₅ 1	4,4,5	PROPERTY DAMAGE ONLY
REFERENCE POINT	DIRECTION FROM REFERENCE	ROUTE TYPE	E(TD) AL ALLE	ROAD TYPE	DD DOAD		INTERSECTION RELATED),
1 - INTERSECTION 2 - MILE POST	A C COUTH	IR - INTERSTATE ROUTE US - FEDERAL US ROUTE			RD - ROAD SQ - SQUARE	X WITHIN INTE	RSECTION OR ON APPROA	СH Д
☐ 3 - HOUSE #	E-EAST	SR - STATE ROUTE	BL - BOUL		ST - STREET	WITHIN INTE	RCHANGE AREA NUM	BER OF APPROACHES
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASURE	CR - NUMBERED COUNT	Y ROUTE CT - COUR		TE - TERRACE TL - TRAIL		ROADWAY	
_	1-MILES	TR - NUMBERED TOWNS ROUTE	HIP DR - DRIVE	E PI - PIKE	WA - WAY	ROADWAY DIV	/IDED	
5	2 3-YARDS		HE - HEIG	**************************************			T	
LOCATION 1 - ON ROADWA	N of FIRST HARMFUL EN Y 9 - CROSSO			F CRASH COLLISION/IMI SION 4 - REAR-TO-REAL		DIRECTION OF TRAVE		
. 0 . 1 . 2 - ON SHOULD	ER 10-DRIVEV	VAY/ALLEY ACCESS	1 BETWEEN TWO MOTO	5 - BACKING	•••	N - NORTH	(<4 FEET	
3 - IN MEDIAN 4 - ON ROADSID		D USE PATHS OR	VEHICLES TRANSPOR	IN 6-ANGLE	AME DIRECTION	E - EAST	2 - DIVIDED F (≥4 FEET	LUSH MEDIAN)
5 - ON GORE	TRAILS		2 - REAR-END	8 - SIDESWIPE, 0	PPOSITE DIRECTION	W-WEST		EPRESSED MEDIAN
6 - OUTSIDE TR 7 - ON RAMP	14-TOLL B		3 - HEAD-ON	9 - OTHER / UNKN	IOWN		(ANY TYPI	E)
8 - OFF RAMP	99-OTHER	/ UNKNOWN					9 - OTHER/UN	KNOWN
WORK ZONE RELAT	TED	WORK ZONE TYPE	L	OCATION OF CRASH IN		CONTOUR	CONDITIONS	SURFACE
WORKERS PRESEN	IT .	1 - LANE CLOSURE 2 - LANE SHIFT/CROSSO	OVER	1 - BEFORE THE 1S WARNING SIGN	l	_1_	_1_	2
LAW ENFORCEMEN	NT PRESENT	3 - WORK ON SHOULDER OR MEDIAN	R	2 - ADVANCE WARN 3 - TRANSITION AR		1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE
		4 - INTERMITTENT OR N	MOVING WORK	4 - ACTIVITY AREA		2 - STRAIGHT GRADE 3 - CURVE LEVEL	2 - WET 3 - SNOW	2 - BLACKTOP, BITUMINOUS, ASPHALT
ACTIVE SCHOOL ZO	DNE	5 - OTHER		5 - TERMINATION A	4 - CURVE GRADE 4 - ICE			
	CONDITION		WEATHER		9 - OTHER/UNKNOWN 5 - SAND, MUD, DIRT, OIL, GRAVEL 4 - 1			
1 - DAYLIGHT 2 - DAWN/DUSK		0 1 2-CLEA		NOW EVERE CROSSWINDS			6 - WATER (STANDING,	STONE 5 - DIRT
3 - DARK - LIGH		3 - FOG,			G SAND, SOIL, DIRT, SNOW NG RAIN OR FREEZING DRIZZLE 7 - SLUSH			9 - OTHER/UNKNOWN
	DWAY NOT LIGHTED NOWN ROADWAY LIGHTI	4 - RAIN ING 5 - SLEE		OTHER / UNKNOWN				
9 - OTHER / UNK	CNOWN							
NARRATIVE							A	Indicate the north
Unit One was to	raveling Westb	ound on E. Ma	ain St. in					an "N" on the compass diagram.
	ane, passing th							
		•	rscetton			a a	I E	
	ln St. Unit Two		1170				LINCOLNST	
electronic-scoo	oter, was trave	ling Northbour	nd on		E.MAIN	ST.	Z NOT TO E	CALE
Lincoln St. at	the intersection	n with E. Main	St.	_				
Unit Two impi	roperly crossed	l the road, stri	king the		(UNIT2		
side of Unit O	ne.		515,000	_		TRAFFICS	IGNAL 4	
	7757.5			_				
							OLNST.	
							SLINCOLNS	
CRASH REPORTED D	DATE / TIME	DISPATCH DATE /TI	ME	ARRIVAL DATE / TIM	ME	SCENE CLEARED		EPORT TAKEN BY
0.8,2,6,2,0,2,3	1/222908	2,6,2,0,2,3,/,	2,2,3,0,0,8	2,6,2,0,2,3,/	2,2,3,1,0	0,8,2,6,2,0,2,	3/2300	POLICE AGENCY
TOTAL TIME	OTHER T	OTAL OFFICER'S N	NAME*		CHECKED BY OFFI	CER'S NAME*		MOTORIST
ROADWAY CLOSED INVE	ESTIGATION TIME MI		n, Mary Eliz		Gaydosh,	Ryan	NUMBER*	SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO COPS)
	2 0 0	5 0 2 1	officer's badge no $1 + 9 +$	UMBEK	2 1 1	BY OFFICER'S BADGE	NUMBER	A STATE OF ANY OF ANY STATE OF ANY

30-GUARDRAIL FACE

HSY8304 OH1U 1/19 [760-0820]

LOCAL REPORT NUMBER

2 | 0 | 2 | 3 | - | 0 | 0 | 0 | 1 | 3 | 4 | 9 | 9

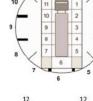
DA	M A	A G E	
DARAR	CE	CCAI	

1 - NONE

3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE

9 - UNKNOWN

DAMAGED AREA(S) INDICATE ALL THAT APPLY









*

00

- UNDERCARRIAGE [14] ☐-TOP [13] - ALL AREAS [15]

INITIAL POINT OF CONTACT

- UNIT NOT AT SCENE [16]

0 - NO DAMAGE

DIAGRAM

14 - UNDERCARRIAGE 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE

13-TOP

99 - UNKNOWN

6 - NO CONTROL

TRAFFIC

TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN 5 - YIELD SIGN 2 - SIGNAL

of THROUGH LANES ON ROAD

RAIL GRADE CROSSING 1 - NOT INVOLVED

3 - FLASHER

2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING

UNIT / NON-MOTORIST DIRECTION

1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST FROM | 3 | TO | 4 | 3 - EAST

7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN

UNIT SPEED

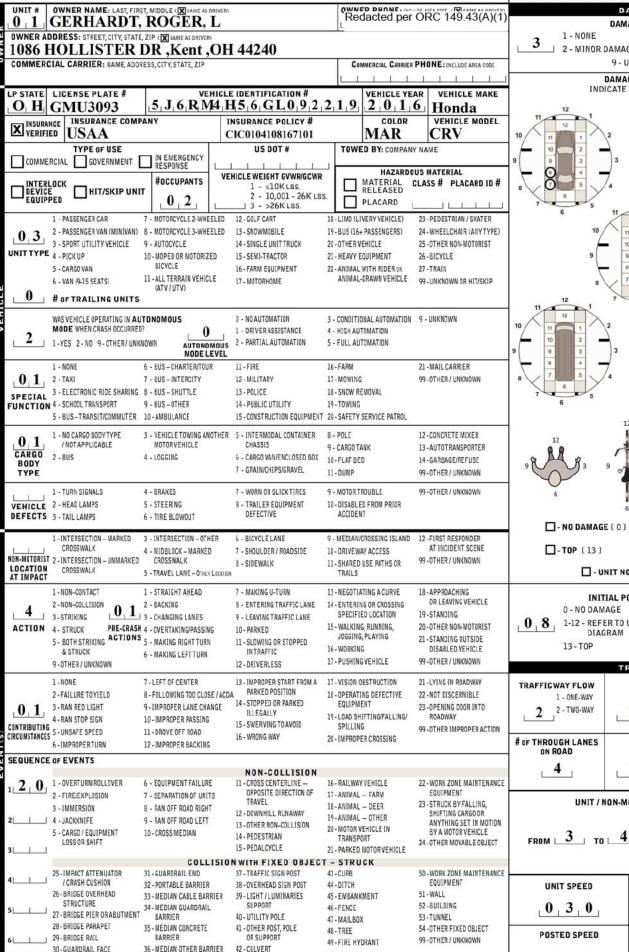
1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED

0,3,0 POSTED SPEED

3 5

DETECTED SPEED

PAGE 2 OF



42 - CULVERT

FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

							0 0 1 3 4 7 7				
$\begin{array}{c} \text{UNIT } \# \\ 0 \ \ 2 \end{array}$	OWNER NAME: LAST, FIRS	ST, MIDDLE (X) SAME AS DRIVE	(R)	OWNER PHONE: INCL	UDE AREA CODE (SAME AS DRIVER)		DAMAGE AMAGE SCALE				
OWNER A	DDRESS: STREET, CITY, STATE	, ZIP (SAME AS DRIVER)				9 1 - NONE 2 - MINOR DAN	3 - FUNCTIONAL DAMAGE MAGE 4 - DISABLING DAMAGE				
COMMERC	CIAL CARRIER: NAME, ADDR	RESS, CITY, STATE, ZIP		COMMERCIAL CARRIER	PHONE: INCLUDE AREA CODE	9 - UNKNOWN					
LP STATE	LICENSE PLATE #	VEHIC	LE IDENTIFICATION #	VEHICLE YE	AR VEHICLE MAKE	DAMAGED AREA(S) INDICATE ALL THAT APPLY					
الليا				بيني بيت	_ Other - See	Narrative	11 12 1				
INSURA VERIFI	NCE INSURANCE COMP ED	ANY	INSURANCE POLICY #	ORG	VEHICLE MODEL	10 12 1 2	10 12 1 2				
Сомме	TYPE OF USE	IN EMERGENCY	US DOT #	TOWED BY: COMPAN	YNAME	10 2	10, 2				
INTERI		#OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR		OUS MATERIAL CLASS # PLACARD ID #	8 4 7	8 4				
DEVIC	E X HIT/SKIP UNI		1 - ≤10K LBS. 2 - 10,001 - 26K LBS 3 - >26K LBS.	☐ RELEASED	CLASS # FLACARD ID #	8 7 6 5	12 7 6 5				
	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELE	D 12-GOLF CART	18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	6 11	12 6				
$\lfloor 2 \rfloor 0$	2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE 9 - AUTOCYCLE	D 13-SNOWMOBILE 14-SINGLE UNIT TRUCK	19-BUS (16+ PASSENGERS) 20-OTHER VEHICLE	24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST	10/	11 10 2				
UNIT TYPE	4 - PICK UP 5 - CARGO VAN	10 - MOPED OR MOTORIZED BICYCLE	15 - SEMI-TRACTOR 16 - FARM EQUIPMENT	21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR	26 - BICYCLE 27 - TRAIN	9	9 3 3				
9	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8	7 8 5 4				
	# of TRAILING UNITS	50000 5000	_ 5-4552PP/08/22.122PHPP			11 12 7	6 5 11 12 1				
_	WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRED		0 - NO AUTOMATION 1 - DRIVER ASSISTANCE	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION	9 - UNKNOWN	10 11 1 2	10 12 1 2				
2	1-YES 2-NO 9-OTHER/UNK	NOWN AUTONOMOU	10	5 - FULL AUTOMATION		9 9 3 3	9 9 3				
0.1	1 - NONE	6 - BUS - CHARTER/TOUR	11-FIRE	16-FARM	21 - MAIL CARRIER	8 7 5 74	8 4 7				
O 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	7 6 5	7 6 5				
FUNCTION	4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER	9 - BUS - OTHER 10 - AMBULANCE	14-PUBLIC UTILITY 15-CONSTRUCTION EQUIPMENT	19-TOWING 20-SAFETY SERVICE PATROL		6	6				
0.1	1 - NO CARGO BODYTYPE	3 - VEHICLE TOWING ANOTH	ER 5 - INTERMODAL CONTAINER	8 - POLE	12 - CONCRETE MIXER	12	12 12 12				
	/ NOT APPLICABLE 2 - BUS	MOTOR VEHICLE 4 - LOGGING	CHASSIS 6 - CARGO VAN/ENCLOSED BOX	9 - CARGO TANK 10 - FLAT BED	13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE	a Ma					
BODY TYPE	eel Steelin	ACCUPATION S PANARON	7 - GRAIN/CHIPS/GRAVEL	11-DUMP	99 - OTHER / UNKNOWN	,003	3 9 7 3 9				
WELLIOL E	1 - TURN SIGNALS 2 - HEAD LAMPS	4 - BRAKES 5 - STEERING		9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR	99 - OTHER / UNKNOWN	6					
DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT		☐ - NO DAMAGE [6 6 6 0] - UNDERCARRIAGE [14]				
1 1 1	1 - INTERSECTION - MARKED CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED		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	CROSSWALK 5 - TRAVEL LANE - OTHER LOCA	8 - SIDEWALK	11 - SHARED USE PATHS OR TRAILS	99 - OTHER / UNKNOWN		NOT AT SCENE [16]				
AT IMPACT	1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18-APPROACHING						
3	2-NON-COLLISION 3-STRIKING 0 8	2 - BACKING		14 - ENTERING OR CROSSING SPECIFIED LOCATION	OR LEAVING VEHICLE 19-STANDING	0 - NO DAMAGI	. POINT OF CONTACT E 14 - Undercarriage				
ACTION	4- STRUCK PRE-CRASH	3 - CHANGING LANES 4 - OVERTAKING/PASSING		15 - WALKING, RUNNING, JOGGING, PLAYING	20-OTHER NON-MOTORIST	1 5 1-12 - REFERT	TO UNIT 15 - VEHICLE NOT AT SCENE M 99 - UNKNOWN				
	5 - BOTH STRIKING ACTIONS & STRUCK	5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	III TRAFFIG	16-WORKING	21 - STANDING OUTSIDE DISABLED VEHICLE	13 - TOP	77 - UNKNOWN				
	9 - OTHER / UNKNOWN		12-DRIVERLESS	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN		TRAFFIC				
75270 70447	1 - NONE 2 - FAILURE TO YIELD	7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / A	CDA 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				
2 0	3 - RAN RED LIGHT 4 - RAN STOP SIGN	9-IMPROPER LANE CHANGE 10-IMPROPER PASSING	ILLEGALLY	EQUIPMENT 19-LOAD SHIFTING/FALLING/	23 - OPENING DOOR INTO ROADWAY	2 - TWO-WAY	2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL				
CONTRIBUTING CIRCUMSTANCES	5 - UNSAFE SPEED	11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY	SPILLING 20 - IMPROPER CROSSING	99 - OTHER IMPROPER ACTION	# of THROUGH LANES	RAIL GRADE CROSSING				
SEQUENCE	6-IMPROPERTURN OF EVENTS	12-IMPROPER BACKING	-) 54400004000017440000400700000		ON ROAD	1 - NOT INVOLVED				
$_{1}$ $_{2}$ $_{1}$ $_{0}$	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	NON-COLLISION 11-CROSS CENTERLINE —	16-RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE		2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING				
1 2 0	2 - FIRE/EXPLOSION 3 - IMMERSION	7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	TDAVEL	17 - ANIMAL — FARM 18 - ANIMAL — DEER	EQUIPMENT 23-STRUCK BY FALLING,	UNIT / NON	-MOTORIST DIRECTION				
2	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		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST				
21 1 1	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10-CROSS MEDIAN	14-PEDESTRIAN 15-PEDALCYCLE	TRANSPORT 21 - PARKED MOTOR VEHICLE	BY A MOTOR VEHICLE 24-OTHER MOVABLE OBJECT	FROM L2 TO L	1 3 - EAST 7 - SOUTHEAST				
3	OF THIRLD ATTENUATED		ON WITH FIXED OBJECT	- STRUCK	FA WARE TANKENS		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				
5	26 - BRIDGE OVERHEAD STRUCTURE	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL	SUPPORT	45 - EMBANKMENT 46 - FENCE	51 - WALL 52 - BUILDING	0,0,5,	1 - STATED / ESTIMATED SPEED				
	27 - BRIDGE PIER OR ABUTMENT 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	29 - BRIDGE RAIL 30 - GUARDRAIL FACE	BARRIER 36 - MEDIAN OTHER BARRIER	OR SUPPORT 42 - CULVERT	49-FIRE HYDRANT	99-OTHER/UNKNOWN	POSTED SPEED	J - VIIDET ERMINED				
1	FIRST HARMFUL EVEN	т 1 мост	HARMFUL EVENT			2 5					
HSY8304 OF	H1U 1/19 [760-0820]						PAGE 3 OF 5				

OFF PUBLIC BAFETY MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER								
SAPETY - MEN	ICE - PROTECTION	1010K131 / 140) Y = W	1010	KIS				2_0_	2,3	- 10 0	$_{\perp}0_{\perp}1$	131	4,9	9	
UNIT #	and the state of t									DATE OF BIRTH AGE GENDER						
[0,1]										1 1 1 1 2 1 9 5 4 6 8 M						
	SS: STREET, CITY, STATE, ZIP HOLLISTER DR, Kent, OH 44240									CONTACT PHONE - INCLUDE AREA CODE Redacted per ORC 149.43(A)(1						
INJURIES	INJURED	EMS AGENCY (NAME)		INJURED	TAKEN TO	MEDICAL FACILITY	(NAME, CITY)			OMBLIANT	SEATING POSITION	AIR BAG U	SAGE	EJECTION	TRAPPED	
5	TAKEN BY							USED 0 4	□ MC HE	LMET	0 1	1		1_	_1_	
OL STATE		LICENSE NUMBER	14.4 40	OFFEN:	SE CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION CI			CITATI	ON NU	MBER		
OH	REDAC	CTED PER ORC 450	71:1-12													
OL CLASS	ENDORSEMEN SELECT UP TO 2		DIS	VER ALCOHOL / DRUG SUSPECTED COND				CONDITION	STATUS 1	YPE		_	DRUG TYPE	RESULT	SELECTUPT04	
4	1 11	1, , , , , , , , ,	BY	1 ,	1 OTHER DRUG				1	1	e e e d	1	1.			
UNIT #	NAME: LAST	, FIRST, MIDDLE								DAT	E OF BIRTH		T	AGE	GENDER	
0,2										1)	1 1				19 31	
ADDRESS	STREET, CITY, S	STATE, ZIP							CONTACT	PHONE	- INCLUDE AREA C	0DE				
0108											1 1			1		
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED	TAKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED		OMPLIANT	SEATING POSITION	AIR BAG U	SAGE	EJECTION	TRAPPED	
N	BY							سا	∟ МС НЕ	LMET					لـــــا	
OL STATE	OPERATOR	LICENSE NUMBER		OFFEN	SE CHAI	RGED	CODE	OFFENSE DESC	RIPTION			CITATI	CITATION NUMBER			
OL CLASS	ENDORSEMEN SELECT UPTO 2			VER TRACTED	ALC	OHOL / DRUG SUSPI	ECTED	CONDITION	STATUS 1	COHOL			DRUG TYPE	TEST(S)	SELECTUPTO4	
	00000101102		BY	9	=		RIJUANA	9 .	1	1	17,676	1	1 .	, nesser	32220101101	
UNIT #	NAME-LAST	FIRST, MIDDLE		9	Цο	THER DRUG					E OF BIRTH		_	AGE	GENDER	
ONITY	NAME: CAST	, r IK31, MIDDLE									L OI DIKIN	25 25		AUL	GENDER	
ADDRESS	STREET, CITY, S	STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE							
ADDRESS										1	1 1		- 1	- 1	1 1	
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED	TAKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-C	OMPLIANT	SEATING POSITION	AIR BAG U	SAGE	EJECTION	TRAPPED	
ON/	BY					0320			LIMC HELMET						نــــــا	
OL STATE	OPERATOR	LICENSE NUMBER		OFFEN	OFFENSE CHARGED LOCAL OFFENSE DES			RIPTION			CITATI	ITATION NUMBER				
			1	_ _ _			Speciment State Comments in the	ALCOHOL TEST				DRUG TEST(S)				
≥ OL CLASS	SELECT UP TO 2			TRACTED	_	CHOL / DRUG SUSPI		CONDITION	STATUS						SELECTOP TO 4	
		ے بنے بنے ا				THER DRUG				.	التلت				لـــالـــالـــا	
	JRIES	SEATING POSITION		IR BAG		OL CLASS	s	OL RESTRIC			VER DISTRACT	1000		ST STA	TUS	
1 - FATAL 2 - SUSPECTED	SERIOUS INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP 2 - DEPLOYI			1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTER 2 - CDL INTRASTAT			T DISTRACTED Nually operating		- NONE	GIVEN REFUSED		
3 - SUSPECTED		2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3- DEPLOY			3 - CLASS C		3 - CORRECTIVE LE	NSES		ECTRONIC COMMUN VICE (TEXTING, TYP			GIVEN, CONT	TAMINATED	
4 - POSSIBLE IN 5 - NO APPAREN		4 - SECOND - LEFT SIDE	4 - DEPLOYI	ED BOTH FRO LICABLE	NT / SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER 5 - EXCEPT CLASS	A BUS		ALING) LKING ON HANDS-FR)EE 4			ULTS KNOWN	
		(MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE		YMENT UNKNOWN 5 - M/C MOPED ONLY 6 - EXCEPT CLASS					ASS A COMMUNICATION DEVICE 5 - TEST			-TEST G	SIVEN, RESI	ULTS		
1 - NOT TRANSP	PORTED	6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS 7 - EXCEPT TRACTO	R-TRAILER		LKING ON HAND-HEL MMUNICATION DE VI	CF	Totalisation		T TYPE	
/TREATED A	TSCENE	7 - THIRD – LEFT SIDE (MOTORCYCLE SIDE CAR)	1 NOTEJE	CTED		H - HAZMAT	MENT	8 - INTERMEDIATE RESTRICTIONS	LICENSE		HER ACTIVITY WITH ECTRONIC DEVICE	AN	- NONE		an last	
3 - POLICE		8 - THIRD - MIDDLE		LY EJECTED		M - MOTORCYCLE		9 - LEARNER'S PER	MIT		SSENGER		- BLOOD - URINE			
9 - OTHER / UNI	(NO WN	9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION	3-TOTALLY 4-NOTAPP			P - PASSENGER N - TANKER		RESTRICTIONS 10 - LIMITED TO DAY	LIGHT ONLY		HER DISTRACTION SIDE THE VEHICLE		- BREAT			
SUBSTRUCTION AND ADMINISTRATION OF STRUCTURE	QUIPMENT	OF TRUCK CAB 11 - PASSENGER IN OTHER			and .	Q - MOTOR SCOOTER		11 - LIMITED TO EM			HER DISTRACTION O E VEHICLE	UTSIDE 5	- OTHER			
1 - NONE USED 2 - SHOULDER E	BELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1- NOTTRA	PPED PPED	TE ST	R - THREE-WHEEL MO S - SCHOOL BUS	TORCYCLE	12 - LIMITED - OTHE 13 - MECHANICAL DI		9 - OT	HER/UNKNOWN			G TEST	TYPE	
3 - LAP BELT OF		PICK-UP WITH CAP)	2 - EXTRICA	TED BY		T - DOUBLE & TRIPLE	TRAILERS	(SPECIAL BRAK CONTROLS, OR O			CONDITION		- NONE - BLOOD			
	& LAP BELT USED RAINT SYSTEM –	12 - PASSENGER IN UNENCLOSED CARGO AREA	3- FREED B	ry		X - TANKER / HAZMAT		ADAPTIVE DEVI			PARENTLY NORMAL	-	- URINE			
FORWARD F		13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR	NO N-ME	CHANICAL M	EANS	GENDER		15 - MOTOR VEHICLE		3 - EM	YSICAL IMPAIRMEN OTIONAL (E.G., DEPRE	SSED,	- OTHER			
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(ELBOW, KN) 10 - REFLECTIVE											MEDICATIONS / DRU COHOL	62	- COCAII			
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UNITY NAME: LAX FIRST, MIDDLE ADDRESS. STREET, CITY, STATE, JPP ADDRESS. STREET, CITY, STATE, JPP ADDRESS. STREET, CITY, STATE, JPP CONTACT PHONE. PRODUCE NAME ONCE DATE OF BIRTH AGE CONTACT PHONE. PRODUCE NAME ONCE LOTT OF BIRTH AGE CONTACT PHONE. PRODUCE NAME ONCE CONTACT PHONE. PRODUCE NAME ONCE DATE OF BIRTH AGE CONTACT PHONE. PRODUCE NAME ONCE LOTT OF BIRTH AGE CONTACT PHONE. PRODUCE NAME ONCE LOTT OF BIRTH AGE CONTACT PHONE. PRODUCE NAME ONCE LOTT OF BIRTH AGE CONTACT PHONE. PRODUCE NAME ONCE CONTACT PHONE. PRODUCE NAME ONCE LOTT OF BIRTH AGE CONTACT PHONE. PRODUCE NAME ONCE CONTACT PHONE. PRODUCE NAME ONCE LOTT OF BIRTH AGE CONTACT PHONE. PRODUCE NAME ONCE ADDRESS. STREET, CITY, STATE, JPP CONTACT PHONE. PRODUCE NAME ONCE CONTACT PHONE. PRODUCE	Ū	OF PUBLIC SAFETY OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER								
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