OHIO DEPARTMENT TRAFFIC CRASH	LOCAL REPORT NUMBER*							
OH-2 X OH-3	2,0,2,0,-,0,0,0,1,0,6,6,8,							
X PHOTOS TAKEN OH-1P OTHER	REPORTING AGENCY NAME*		NCIC*	HIT/SKIP	UNIT IN ERROR			
SECONDARY CRASH PRIVATE PROPERTY	City of Kent Police	10,0	6,7,0,3,	1 - SOLVED	0 2 0	1 98 - ANIMAL 99 - UNKNOWN		
COUNTY* LOCALITY* LOCATION: CIT	Y, VILLAGE, TOWNSHIP*			CRASH DATE / T		ASH SEVERITY		
6 7 1 2-VILLAGE Kent				0.7.0.8.2.0.2.0./.1.3.2.8. 3 1 - FATAL 2 - SERIOUS INJURY				
ROUTE TYPE ROUTE NUMBER PREFIX 1-NORTH 2-SOUTH	LOCATION ROAD NAME	LATITUDE DE		SUSPECTED				
ROUTE TYPE ROUTE NUMBER PREFTX 1-NORTH 2-SOUTH 3-EAST 4-WEST	GOUGLER		$\mathbf{A}_{1}\mathbf{V}_{1}$	4,1,1,5,4,	- MINOR INJURY SUSPECTED			
	REFERENCE ROAD NAME (ROAD, N	AILEPOST, HOUSE #)	ROAD TYPE		LONGITUDE DECIMAL DEGREES 4 - INJURY PO			
ROUTE TYPE ROUTE NUMBER PREFIX 1-NORTH 2-SOUTH 3-EAST L	PARK		AV	-81,360	2 2 6 5	- PROPERTY DAMAGE		
REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD TYPE			INTERSECTION RELATE	ONLY		
T MONTH	- INTERSTATE ROUTE(TP) AL -	ALLEY HW-HIGHWAY R	D - ROAD	5.5	RSECTION OF ON APPROA			
3- HOUSE # 3- EAST	PI PI		Q - SQUARE T - STREET	2				
	- STATE ROUTE		E - TERRACE	WITHIN INTERCHANGE AREA NUMBER OF APPROA				
FROM REFERENCE UNIT OF MEASURE	NUMBERED TOWNSHIP		L -TRAIL	HE COURSE THE PARTY OF THE PART	ROADWAY	BY COMMON ON THE		
2-FEET 3-YARDS	ROUTE	DRIVE PI - PIKE W HEIGHTS PL - PLACE	/A - WAY	ROADWAY DIV	IDED			
LOCATION OF FIRST HARMFUL EVE	IT MANN	IER of CRASH COLLISION/IMPA(CT CT	DIRECTION OF TRAVE	MEDIA	NTYPE		
1 - ON ROADWAY 9 - CROSSOVE	ph of sub-	COLLISION 4 - REAR-TO-REAR		1 - NORTH		FLUSH MEDIAN		
	TWO	MOTOR 5-BACKING CLES IN 6-ANGLE		2-SOUTH	2 - DIVIDED	(-) FLUSH MEDIAN		
4 - ON ROADSIDE 12-SHARED U	SE PATHS OR TRAN	ISPORT 7 - SIDESWIPE, SAME		3- EAST 4- WEST	(≥4 FEE1	Γ)		
5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LAN	2 - REAR 3 - HEAD					DEPRESSED MEDIAN RAISED MEDIAN		
7 - ON RAMP 14-TOLL BOO' 8 - OFF RAMP 99-OTHER / U					9-OTHER/UI			
G-011 KAWI	WORK ZONE TYPE	LOCATION OF ORACH IN MO	DV TONE	CONTOUR				
WORK ZONE RELATED	LANE CLOSURE	LOCATION OF CRASH IN WO 1 - BEFORE THE 1ST V			CONDITIONS 1	SURFACE		
	LANE SHIFT/CROSSOVER	WARNING SIGN 2 - ADVANCE WARNIN	GARFA	1 STRAIGHT LEVEL	2			
LAW ENFORCEMENT PRESENT	OR MEDIAN	3 - TRANSITION AREA		1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE	1 - DRY 2 - WET	1 - CONCRETE 2 - BLACKTOP,		
The second control of	INTERMITTENT OR MOVING WORK OTHER	- Δ	3 - CURVE LEVEL	3 - SNOW	BITUMINOUS, ASPHALT			
	T	5 - TERMINATION ARE		4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK		
LIGHT CONDITION 1 - DAYLIGHT	1-CLEAR	.R 6-SNOW		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL	4 - SLAG, GRAVEL, STONE		
1 2-DAWN/DUSK	0,1 2-CLOUDY	7 - SEVERE CROSSWINDS			6 - WATER (STANDING,	5 - DIRT		
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	3 - FOG, SMOG, SMOKE 4 - RAIN	8 - BLOWING SAND, SOIL, DIRT, 9 - FREEZING RAIN OR FREEZI			MOVING) 7 - SLUSH	9 - OTHER/UNKNOWN		
5 - DARK – UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	5 - SLEET, HAIL	99 - OTHER / UNKNOWN			9 - OTHER/UNKNOWN			
	L							
NARRATIVE					1	Indicate the north direction with		
UNIT 2 WAS NORTHBOUN	ON GOUGLER AV	Æ.			4	an "N" on the compass diagram.		
IN THE LEFT LANE. UNIT	1 WAS							
NORTHBOUND ON GOUG	LER AVE. IN THE							
RIGHT LANE. UNIT 1 ATT	EMPTED TO MAK	EA						
LEFT TURN ONTO PARK	AVE. FROM THE			9	D,			
RIGHT LANE, CROSSING	OVER THE LEFT			- Unit 2)			
LANE IN FRONT OF UNIT	2 CAUSING UNIT	2		T				
TO STRIKE UNIT 1. UNIT	1 WAS CITED FOR	/ 李	PARKAVE	Line a	1	GONOTEE TAE		
MARKED LANES.		2	DT TO	SCALE		(2000) AND		
a a security of the security o		O Minda red seas, see the state of		3				
	ar de servanske për projektivje projektive quelë us vide anë di austrana najsanum en eus aus aus aus pa	Professional and the parameter						
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME		SCENE CLEARED	DATE / TIME	REPORT TAKEN BY		
0,7,0,8,2,0,2,0,/,1,3,2,8,0,7,0					700			
TOTAL TIME OTHER TOT ROADWAY CLOSED INVESTIGATION TIME MINU	AL OFFICER'S NAME*	C	HECKED BY OFF	ICER'S NAME*		MOTORIST		
	OFFICER'S BAI	DGE NUMBER*		George BY OFFICER'S BADGE	NUMBER*	SUPPLEMENT (CORRECTION OR ADDITION TO AM EXISTING REPORT SENT TO LOPS)		
0,3,5,0,3,0,0,0	8 2 3 8		2 4	1 3				



LOCAL REPORT NUMBER

							10,0,1,0,6,6,8,
	OWNER NAME: LAST, FIRS SAWYER, CR			NWNFP PHONE	and some section and animal		MAGE SCALE
OWNER ADD	DRESS: STREET, CITY, STATE	, ZIP (X) SAME AS DRIVER)	NIONTOWN ,	OH 44695		3 1- NONE 2- MINOR DAM	3 - FUNCTIONAL DAMAGE
	AL CARRIER: NAME, ADDR		MONTOWN,		PHONE: INCLUDE AREA CODE		AGE 4 - DISABLING DAMAGE - UNKNOWN
							IAGED AREA(S)
	LICENSE PLATE # HVJ9138	J.MI.BLI.U	IDENTIFICATION # [F.3, B.1, 4, 7, 3]	2,1,5, VEHICLE YE		12	12
INSURANCE VERIFIE			ISURANCE POLICY # 34059281	COLOR TEA	VEHICLE MODEL MAZDA 3	11 12	11 12
E-3 VERTIE	TYPE OF USE		US DOT #	TOWED BY: COMPAN		10 11 1 2	10 11 1 1 2
COMMER	CIAL GOVERNMENT	IN EMERGENCY RESPONSE	ICLE WEIGHT GVWR/GCWR	HAZARDI	IUS MATERIAL	9 9 3	9 9 3
INTERLO	HIT/SKIP UNI	T #UCCUPANTS	1 - ≤10K LBS. 2 - 10,001 - 26K LBS	L RELEASED	CLASS # PLACARD ID #	8 7 5 4	8 7 5 4
EQUIPPI		0 1	3 - >26K LBS.	PLACARD	An DEDECTRIAN LOVATED	7 6 11	12 7 6 5
	1 - PASSENGER CAR 2 - Passenger van (Minivan)		12-GOLF CART 13-SNOWMOBILE	18-LIMO (LIVERY VEHICLE) 19-BUS (16+ PASSENGERS)	23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE)	10	11 1 2
UNIT TYPE	3 - SPORT UTILITY VEHICLE 4 - PICK UP	9 - AUTOCYCLE 10 - MOPED OR MOTORIZED	14-SINGLE UNIT TRUCK 15-SEMI-TRACTOR	23 - OTHER VEHICLE 21 - HEAVY EQUIPMENT	25 - OTHER NON-MOTORIST 26 - BICYCLE	,	30 2 3
	5 - CARGO VAN	BICYCLE	16-FARM EQUIPMENT	22 - ANIMAL WITH RIDER OF	27 -TRAIN	_	s II .
	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8	7 5 4
	# OF TRAILING UNITS	TONOMORE	A. NA AUTOMATION	2 COMPLETANTA AUTOMATICA	O HANDONA	11 12 1	6 11 12
2	WAS VEHICLE OPERATING IN AU Mode when crash occurred	. 0	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION	9 - UNKNOWN	10 11 2	10 11 1 2
2	1-YES 2-NO 9-OTHER/UNK	NOWN AUTONOMOUS MODE LEVEL	2 - PARTIAL AUTOMATION	5 - FULL AUTOMATION		9 9 3 3	9 9 3
	1 - NONE	6 - BUS - CHARTER/TOUR	11-FIRE	16-FARM	21 - MAIL CARRIER	8 4 7	8 4 7
	2 - TAXI 3 - ELECTRONIC RIDE SHARING	7 - EUS - INTERCITY 8 - BUS - SHUTTLE	12-MILITARY 13-POLICE	17 - MOWING 18 - SNOW REMOVAL	99 - OTHER / UNKNOWN	7 6	
FUNCTION	4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER	9 - BUS - OTHER	14-PUBLIC UTILITY 15-CONSTRUCTION EQUIPMENT	19-TOWING		6	6
	1 - NO CARGO BODY TYPE	3 - VEHICLE TOWING ANOTHER		B - POLE	12 - CONCRETE MIXER		12 12 12
01	/ NOT APPLICABLE	NOTOR VEHICLE	CHASSIS	9 - CARGOTANK	13 - AUTOTRANSPORTER	A A (+
BODY	2 - BUS	4 - LOGGING	6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	10-FLAT BED 11-DUMP	14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN	9 ()	e 3 9 T 3 9 6 3
	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN	Ó	1
VEHICLE	2 - HEAD LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT DEFECTIVE	10 - DISABLED FROM PRIOR ACCIDENT			6 6 6
	3 - TAIL LAMPS	6 - TIRE BLOWOUT			10 FIRST PERSONNELS	- NO DAMAGE [0	J - UNDERCARRIAGE [14]
	1 - INTERSECTION - MARKED CROSSWALK	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]
LOCATION AT IMPACT	2 - INTERSECTION - UNMARKED CROSSWALK	CROSSWALK 5 -TRAVEL LANE - OTHER LOCATION	B - SIDEWALK	11 - SHARED USE PATHS OR TRAILS	99-OTHER/UNKNOWN	- UNIT	NOT AT SCENE [16]
	1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18-APPROACHING	INITIAL	POINT OF CONTACT
4	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	OR LEAVING VEHICLE 19-STANDING	0 - NO DAMAGE	
ACTION	4 - STRUCK PRE-CRASH	4 - OVERTAKING/PASSING	10-PARKED	15 - WALKING, RUNNING,	20 - OTHER NON-MOTORIST	0,8 1-12 - REFERT	O UNIT 15 - VEHICLE NOT AT SCENE
	5 - BOTH STRIKING ACTIONS & STRUCK	5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	11-SLOWING OR STOPPED In Traffic	JOGGING, PLAYING 16-WORKING	21 - STANDING OUTSIDE DISABLED VEHICLE	13 - TOP	99 - UNKNOWN
	9-OTHER/UNKHOWN	- managed Fight	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	TRAFFIC CONTROL
0.6	3 - RAN RED LIGHT	9 - IMPROPER LANE CHANGE	14-STOPPED OR PARKED ILLEGALLY	EQUIPMENT	23 - OPENING DOOR INTO	1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOUT 4 - STOP SIGN 5 - YIELD SIGN
	4 - RAN STOP SIGN 5 - UNSAFE SPEED	10 - IMPROPER PASSING 11 - DROVE OFF ROAD	15 - SWERVING TO AVOID	19-LOAD SHIFTING/FALLING/ SPILLING	ROADWAY 99 - OTHER IMPROPER ACTION		3 - FLASHER 6 - NO CONTROL
CIRCUMSTANCES	6 - IMPROPER TURN	12 - IMPROPER BACKING	16 - WRONG WAY	20 - IMPROPER CROSSING		# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING
SEQUENCE	OF EVENTS		EVENTS			2	1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING
11 4 1 V 1	1 - OVERTURN/ROLLCVER	6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE -	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE		3 - INVOLVED-PASSIVE CROSSING
	2 - FIRE/EXP_OSION 3 - IMMERSION	7 - SEPARATION OF UNITS B - RAN OFF ROAD RIGHT	OPPOSITE DIRECTION OF TRAVEL	17 - AHIMAL — 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
	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	14-PEDESTRIAN 15-PEDALCYCLE	TRANSPORT	BY A MOTOR VEHICLE 24-OTHER MOVABLE CBJECT	FROM 2 TO L	4 3-EAST 7-SOUTHEAST
3		COLLISIO	N WITH FIXED OBJEC.	21 - PARKED MOTOR VEHICLE T - STRUCK			4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN
41	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
	27 - BRIDGE PIER OR ABUTMENT	primarii	SUPPORT 40-UTILITY POLE	46 - FENCE 47 - MAILBOX	52 - BUILDING 53 - TUNNEL	0,1,5	2 - CALCULATED / EDR
	28-BRIDGE PARAPET 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
1	30-GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER		er mantumint		2,5,	
1 1 1	FIRST HARMFUL EVER	T I I MOST H	ADMEIII EVENT				



LOCAL REPORT NUMBER

2,0,2,0,-,0,0,1,0,6,6,8,

UNIT#	OWNER NAME: LAST, FIRST,	MIDDLE (SAME AS DRIVE	A)	OWNER PHONE: NO	DE AREA CORE (W SAME AS DRIVER)	DAMAGE			
0 2 1	ADKINS, APR	IL, MAE				DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE			
	KRON BLVD,		4240			3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE			
	IAL CARRIER: NAME, ADDRE			COMMERCIAL CARRIER	PHONE: INCLUDE AREA CODE	9 - UNKNOWN			
						DAMAGED AREA(S)			
	FOE 2656	KNDJ.N2.	LE IDENTIFICATION # $A_2XF_17_17_5_5$	9.1.7. 2.0.1.	- 1	INDICATE ALL THAT APPLY			
	INSURANCE COMPA		INSURANCE POLICY #	COLOR	Kia Motors VEHICLE MODEL	11 12 12 1	11 12		
INSURAN VERIFIE	TREXIS		143401103925	GRN	Soul	10 11 1 2	10		
COMME	TYPE OF USE	IN EMERGENCY RESPONSE	US DOT #	Bakers Towing	NAVE	9 9 3 3			
			VEHICLE WEIGHT GVWR/GCWR	HAZARDO	US MATERIAL	6 4			
INTERL	HIT/SKIP UNIT	#OCCUPANTS	1 - ≤10K LBS 2 - 10,001 - 26K LBS	MATERIAL (CLASS # PLACARD ID #	B 7 5 4	B 7 \$ 5 4		
EQUIPE		0,3	3 - >26K LBS	PLACARD		7 6 11	12 7 5		
		7 - MOTORCYCLE 2-WHEELED B - Motorcycle 3-Wheeled		18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS)	23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE)	10	12		
Ull	3 - SPERT LTILITY VEHICLE	9 - AUTOCYCLE		25-OTHER VEHICLE	25 - OTHER NON-WOTORIST	4	10 2 2		
UNIT TYPE		10-MOPED OR MOTORIZED BICYCLE		21 - HEAVY EQUIPMENT	26-BICYCLE	9	B 3 3		
	5 - CARGO VAN 6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE	16 - FARM EQUIPMENT 17 - MOTORHOME	22 - ANIMAL WITH RIDER OR AYIMAL-DRAWN VEHICLE	27 - TRAIN 99 - UNKNOWN OR HIT/SKIP		7 5 74		
	# OF TRAILING UNITS	(ATV / UTV)			311111111111111111111111111111111111111	12 7	5 12		
	WAS VEHICLE OPERATING IN AUT	ONOMOUS	0 - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	9 - IN CNOWN	11 12	5 11 12		
2	MODE WHEN CRASH OCCURRED?	, 0	1 - DRIVER ASSISTANCE	4 - HIGH AUTOMATION	, - 0 mmm	10 11 2	10 11 2		
2	1-YES 2-NO 9-OTHER/UNKN	OWN AUTONOMOL	13	5 - FULL AUTCMATION		9 9 3 3	9 9 3		
	1 - NONE	6 - BUS - CHARTER/TOUR		16-FARM	ZI - MAIL CARRIER	0 1	8 4		
0,1				17 - MCWING	99-OT-ER / UNKNOWN	8 7 6 5 4	B 7 5 4		
SPECIAL	SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTT FUNCTION 4 - SCHOOL TRANSPORT 9 - BUS - OTHER			19-SNGW REMOVAL 19-TOWING		7 6 5	7 5		
7 ONC 110N	5 - BUS - TRANSIT/COMMUTER		15 - CONSTRUCTION EQUIPMENT						
0,1,				8 - POLE	12-CONCRETE MIXER	12	12 12 12		
			/ 01000H14TH5 0070 00V	9 - CARGOTANK	13-AUTOTRANSPORTER	. 9.9			
BODY TYPE	1-003	20001110	2 274 IND CREICHANG	13-FLAT BED 11-DUMP	14-GARBAGE/REFLSE 99-OT-ER/LINKNOWN	9 (E E E	3 9 1 3 9 1 3		
	1 - TURA SIGNALS	4 - BRAKES		9 - MOTOR TROUBLE	99-OTHER UNKNOWN	0	0		
VEHICLE	2 - HEAD LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT	10 - DISABLEC FROM PRIGR	17-01 ILN SWANGW	6	6 6 6		
DEFECTS	3 - TATL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT		- NO DAMAGE [O			
	00000:444.44	3 - INTERSECTION - OTHER		9 - MEDIAWCROSSING ISLAND	12-FIRST RESPONDER				
NON-MOTORIST	CROSSWALK 2 - INTERSECTION - UNMARKED	4 - MIDBLOCK - MARKED CROSSWALK	7 - SHOULDER / ROADSIDE 8 - SIDEWALK	10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR	AT INCIDENT SCENE 99-OTHER/UNKNOWN	TOP [13]	-ALL AREAS [15]		
AT IMPACT	CDCCC-4/4 1/	5 -TRAVEL LANE - OTHER Loca		TRAILS		- UNIT	NOT AT SCENE [16]		
	1 - NGN-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18-APPROACHING	INITIAL	DOINT OF CONTACT		
3		2 - BACKING 3 - CHANGING LANES			OR LEAVING VEHICLE 19-STANDING	INITIAL POINT OF CONTACT 0 - NO DAMAGE 14 - UNDERCARRIAGE			
ACTION	4 - STRUCK PRE-CRASH	4 - OVERTAKING/PASSING	9 - LEAVING TRAFFIC LANE 10-PARKED	SPECIFIED LOCATION 15 - WALKING, RUNNING.	20 - OTHER NON-MOTORIST	1, 2, 1-12 - REFERT	UNIT 15 - VEHICLE NOT AT SCENE		
	5 - BOTH STRIKING ACTIONS		11-SLOWING OR STOPPED	JOGGING, PLAYING 16-WORKING	21 - STANDING OUTSIDE DISABLED VEHICLE	DIAGRA!	99 - UNKNOWN		
	& STRUCK 9 - OTHER / UNKNOWN	6 - MAKING LEFTTURN	INTRAFFIC 12-DR VERLESS	17 - PUSHING VEHICLE	99-OTHER/UNKNOWN		TDATE IC		
	1 - NONE	7-LEFT OF CENTER	T CF CENTER 13-IMPROPER START FROM A 17		21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL		
		B-FOLLOWING TOO CLOSE /	ACDA PARKED POSITION	13-OPERATING DEFECTIVE	22 - NOT DISCERNIBLE	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN		
0,1	4 - RAN STOP SIGN	9-IMPROPER LANE CHANGE 10-IMPROPER PASSING	ILLEGALLY	EQUIPMENT 19 - LCAD SHIFTING/FALLING/	23 - OPENING DOOR INTO ROADWAY	1 2 TWO-WAY	6 2 SIGNAL 5 - YIELD SIGN		
CONTRIBUTING CIRCUMSTANCE	E UNICATE COEFO	11 - DROVE OFF ROAD	15 - SWERV NG TO AVOID 16 - WRONG WAY	SPILLING 20 - IN PROPER CROSSING	99-OTHER IMPROPER ACTION		3-FLASHER 6-NO CONTROL		
Z	6 - IMPROPERTURN	12-IMPROPER BACKING		ESTRET NOTER GROSSING		# of THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED		
M SEQUENCE	E OF EVENTS		EVENTS			1,	2 - INVOLVED-ACTIVE CROSSING		
1_2_0		6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE -	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE		3 - INVOLVED-PASSIVE CROSSING		
		7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	OPPOSITE DIRECTION OF TRAVEL	17 - AHIMAL — FARM 18 - ANIMAL — DEER	EQUIPMENT 23 - STRUCK BY FALLING,	UNIT / NON	MOTORIST DIRECTION		
2[9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION	19-ANIMAL - OTHER	SHIFTING CARGO CR ANYTHING SET IN MOTION	the part of	1 - NORTH 5 - VORTHEAST		
	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	14-PEDESTRIAN	20 - MOTGR VEHICLE IN TRANSPORT	. BY A MOTOR VEHICLE	FROM 2 TO	1 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST		
3L	coad on cittle		15-PEDALCYCLE	21 - PARKED MOTOR VEHICLE	24 - OTHER MOVABLE CBJECT	FROM 10 L	4 - WEST B - SOUTHWEST		
4	25-IMPACT ATTENUATOR	COLLIS 31-GUARDRAIL END	ION WITH FIXED OBJECT 37-TRAFFIC SIGN POST	T - STRUCK 43-CURB	50 - WORK ZONE MAINTENANCE		9 - OTHER / UNKNOWN		
41	/ CRASH CUSHION 26 - BRIDGE OVERHEAD	32 - PORTABLE BARRIER	38-OVERHEAD SIGN POST	44 - DITCH	EQUIPMENT	UNIT SPEED	DETECTED SPEED		
511	STRUCTURE	RE 34-MEDIAN GUARDRAIL		45 - EMBANKMENT 46 - FENCE	51 - WALL 52 - BUILDING	0,2,5	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	53 - TUNNEL SA LOTHER SIVED OR ISCT	9 4 9	2 - CALCULATED / EDR		
61	6L 1 29-BRIDGE RAIL BARRIER		OR SUPPORT	48 - TREE 49 - FIRE HYDRANT	54-OTHER FIXED OBJECT 99-OTHER / UNKNOWN	POSTED SPEED	3 - UNDETERMINED		
. 1	30-GUARDRAIL FACE	36 - MEDIAN OTHER BARRIE				2 , 5			
Hevenera	FIRST HARMFUL EVEN	IT MOS	T HARMFUL EVENT						
110 10304 (H1U 1/19 (760-0820)						PAGE 3 OF 5		

OF PUBLIC BAFETY MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER						
1341 311	PAGE PAGETON NO.	010/131/140	714-14	1010	KIS				2.0	2.00.0	0.0.1.	0.6.6	8.	
UNIT # NAME: LAST, FIRST, MIDDLE									DATE OF BIRTH AGE GENDER					
0,1,									1,1,3,0,2,0,0,1,1,8, F					
Fig. 1	STREET, CITY, S									CONTACT PHONE - INCLUDE AREA CODE				
6			NW ,UNIONTOWN ,OH 44685											
2	INJURED TAKEN BY	EMS AGENCY (NAME)		INJUREDT	AKEN TO	: MEDICAL FACILITY	(NAME, CITY)	USED	DOT-Cor		N AIR BAG USA	GE EJECTION	TRAPPED	
5 OL STATE		LICENSE NUMBER		OFFENSE CHARGED LOCAL OFFENSE DESCRIPTIONS					MC HEL	MET 0 1	11	_ _1_	1	
O. H.	OPERATOR	LICENSE NUMBER	331.08			KGED	CODE OFFENSE DESC					NUMBER		
OL CLASS	ENDORSEMENT	RESTRICTION SELECT				OHOL / DRUG SUSPI	X	Driving in M		OHOL TEST	60913	RUG TEST(S		
	SELECT UP TO 2			TRACTED		LCOHOL MAF		COMPLITON	STATUS TY				T SELECT UP 104	
4	L1			1		THER DRUG		1	1	1	1	1 ,		
UNIT #	NAME: LAST,							100	DATE OF BIRTH		AGE	GENDER		
0,2	ADKIN	NS, APRIL, MAE							0 4 1 4 1 9 7 8 4 2 F				F	
ADDRESS:	STREET, CITY, ST		11/2						CONTACT	PHONE - INCLUDE AREA C	ODE			
o		BLVD ,Kent ,OH	44240				100		L					
INJURIES	TAKEN	EMS AGENCY (NAME)				: MEDICAL FACILITY	NAME, CITY	SAFETY EQUIPMENT	DOT-COM		N AIR BAG USA	GE EJECTION	TRAPPED	
Z 3		Kent Fire		UHP				0.4	MC HEL	MET 0 1	1	11_	_1_	
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	E CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION		CITATION	NUMBER		
OL STATE OL OL H	ENDORSEMENT	RESTRICTION SELECT	UPTO3 BRI	VED T	81.00	ALIAL CARLLE CO.				OHOL TEST				
OL OLKSS	SELECT UP TO 2	RESIRIESTON SELECT		TRACTED		DHOL / DRUG SUSPE	RUUANA	CONDITION	STATUS TY	DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4				
4	L		ب اب	1 OTHER DRUG 1			1 1 1				H H I			
UNIT#	NAME: LAST,	FIRST, MIDDLE	- Marine		- 10				DATE OF BIRTH AGE GENDER					
ADDRESS:	STREET, CITY, ST	TATE, ZIP							CONTACT F	CONTACT PHONE - INCLUDE AREA CODE				
0										1. 1	1 (1 1		
INJURIES	TAKEN	EMS AGENCY (NAME)		INJURED F	AKEN TO	MEDICAL FACILITY	NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COM		AIR BAG USA	GE EJECTION	TRAPPED	
Z	BY L							MC HEL	MET		ا			
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	E CHAF	RGED LOCAL CODE		OFFENSE DESC	RIPTION		CITATION	CITATION NUMBER		
ADDRESS: WHON INJURIES OL STATE OL CLASS	ENDORSEMENT	RESTRICTION SELECT	UPTO3 DRIV	ven I		21101 1 2 2 110 2 110 2				DHOL TEST		LO TECTIO		
ar orang	PEFFG LINE LOS	RESTRICTION SEEES.		TRACTED		DHOL / DRUG SUSPE		CONDITION	STATUS TY			PE RESULT		
					01	THER DRUG			1					
Part Start Contract	RIES	SEATING POSITION	and the second	IR BAG		OL CLASS		OL RESTRIC	TOTAL STATE OF THE PARTY OF THE	DRIVER DISTRACT	ION	TEST STA	TUS	
1 - FATAL 2 - SUSPECTED	SERIOUS INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP 2 - DEPLOYE			1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTER 2 - CDL INTRASTATI	James and the last	1 - NOT DISTRACTED 2 - MANUALLY OPERATING		IONE GIVEN		
3 - SUSPECTED		2 - FRONT - MIDDLE	3 - DEPLOYE			3 - CLASS C		3 - CORRECTIVE LE		ELECTRONIC COMMUNI DEVICE (TEXTING, TYP	ICATION 2 T	EST REFUSED Est given, con	TAMINATED	
4 - POSSIBLE IN 5 - NO APPAREN		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE	4 - DEPLOYE 5 - NOT APP	D BOTH FROM	IT / SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER		DIALING)	A T	AMPLE / UNUSA EST GIVEN, RES	The Land of	
		(MOTORCYCLE PASSENGER) 5 - SECOND – MIDDLE		JENT UNKNO	WN	5 - M/C MOPED ONLY		6 - EXCEPT CLASS A	CONTRACTOR OF THE PARTY OF THE	3 - TALKING ON HANDS-FR COMMUNICATION DEVI	CE 5-T	EST GIVEN, RES		
1-NOTTRANSP		6 - SECOND - RIGHT SIDE		6 - NO VALID OL & CLASS B BU			& CLASS B BUS 7 - EXCEPT TRACTO	D TDAN CD	4 - TALKING ON HAND-HEL COMMUNICATION DEVI	.U CF	INKNOWN			
/TREATED AT		7-THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	A Control of the Control	ECTION		OLENDORSEN	IENT	8-INTERMEDIATE		5 - OTHER ACTIVITY WITH	AL	COHOL TES	TTYPE	
2 - EMS 3 - POLICE		B-THIRD - MIDDLE	1 - NOT EJEC 2 - PARTIALI			H - HAZMAT M - MOTORCYCLE		RESTRICTIONS 9-LEARNER'S PER	MIT	6-PASSENGER		LOOD		
9-OTHER/UNK	NOWN	9-THIRD - RIGHT SIDE 10-SLEEPER SECTION	3-TOTALLY			P - PASSENGER		RESTRICTIONS		7 -OTHER DISTRACTION		IRINE		
SAFETY E	QUIPMENT	OF TRUCK CAB	4 - NOT APP	LICABLE		N - TANKER		10 - LIMITED TO DAY 11 - LIMITED TO EMP		8 - OTHER DISTRACTION O		THER		
1 - NONE USED		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	Carl Later Control	RAPPED		Q - MOTOR SCOOTER R-THREE WHEEL MOT	TORCYCLE		12 - LIMITED - OTHER THE VEHICLE			DRUG TEST	TYPE	
2 SHOULDER B 3-LAP BELT ON		(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1 - NOTTRAF 2 - EXTRICA			S - SCHOOL BUS		13 - MECHANICAL DE (SPECIAL BRAKE		9-OTHER/UNKNOWN	THE RESERVE	IONE	15.0	
4 - SHOULDER &		12 - PASSENGER IN UNENCLOSED	MECHAN	ICAL MEANS		T-DOUBLE & TRIPLE T X-TANKER / HAZMAT	RAILERS	CONTROLS, OR O' ADAPTIVE DEVI		CONDITION 1 - APPARENTLY NORMAL		LOOD		
			3 - FREED BY	Y HANICAL ME	ANS		in the	14 - MILITARY VEHIC	CLES ONLY	2 - PHYSICAL IMPAIRMENT	THE RESERVE	RINE Ther		
6 - CHILD RESTR REAR FACING		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				GENDER F-FEMALE		15 - MOTOR VEHICLE AIR BRAKES	S WITHOUT	3 - EMOTIONAL (E.G. DEPRE ANCRY DISTURBED)	SSED,	JG TEST RE	SULT(S)	
7 - BOOSTER SE		15 - NON-MOTORIST				M - MALE		16 - OUTSIDE MIRRO	OR 4- ILLNESS		1-A	MPHETAMINES		
8 - HELMET USE		99-OTHER / UNKNOWN				U - OTHER / UNKNOWN		17 - PROSTHETIC AID 18 - OTHER		5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.		ARBITURATES		
9 - PROTECTIVE (ELBOW, KNE										6 UNDER THE INFLUENCE OF MEDICATIONS / DRUG	4.0	ENZODIAZEPINE Annabinoids	E9	
10 - REFLECTIVE										/ALCOHOL	5-0	OCAINE		
11 - LIGHTING - P / BICYCLE ON	LY									9-OTHER/UNKNOWN		PIATES/OPIOID Ther	2	
99-OTHER/UNK	NOWN											EGATIVE RESUL	ZTS	

V	Service DEPART OCCUPANT / WITNESS ADDENDUM							LOCAL REPORT NUMBER						
	UNIT # NAME: LAST FIRST MIDDLE								2,0,2,0,-,0,0,1,0,6,6,8,					
No.	UNIT # NAME: LAST, FIRST, MIDDLE 02 CUNARD, BEVERLY, LYNN								DATE OF BIRTH AGE GENDER					
	ADDRESS: STREET, CITY, STATE ZIP								1,2,1,9,1,9,7,5,4,4, F					
OCCUPAN	6594 HIGH ST ,Franklin Twp ,OH 44240								CONTACT PHONE - INCLUDE AREA CODE					
000		INJURED	EMS Agency (NAME)	wp ,OII 44	INJURED TAKEN TO: MEDICAL FACIL	ten (Marie Man)	SAFETY EQUIPMENT		Destina Basician	1	T			
ij	. 3	TAKEN BY 2	Kent Fire		UHPMC	IIT (RAME, GITY)	USED 0 4	DOT-COMPLIANT		AIR BAG USAGE				
5	UNIT #		T. FIRST, MIDDLE		OHTME		0,3		_1_	1				
	02 ADKINS, ALLEN, JAMES								E OF BIRTH	0 2	AGE	GENDER		
N		STREET, CITY,		TRIVELO		(4)				0, 4, 1, 4, 2, 0, 0, 2, 1, 8, M, CONTACT PHONE - INCLUDE AREA CODE				
CUP.	723 A	KRON	BLVD ,Kent ,	OH 44240					- INCLUDE AREA CO	DE.				
9	INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPEN		
Schulle.	_5_	TAKEN					USED 0 4	DOT-COMPLIANT	0 6	. 1	1	. 1		
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
Charles								AGE GENDER						
PAN	ADDRESS:	STRFFT, CITY,	STATE ZIP	10.		-		CONTACT PHONE	- INCLUDE AREA CO	DE.				
OCCUPAN									1 1					
0	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
H,	ني	BY					USEB	MC HELMET						
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
OCCUPAN	ADDRESS:	DRESS: STREET, CITY, STATE ZIP						CONTACT PHONE - INCLUDE AREA CODE						
33	MUNITE	Tynunge							1 1					
	IMPORTES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
	Manager Ave.		IRIES	SAFETY	EQUIPMENT USED		CEATING DOC	MC HELMET			لـــــا	لـــــا		
	1 - FATA		, MILO	1 - NONE US			SEATING POS T – LEFT SIDE	IIIUN		AIR BAG US	SAGE	STATE OF THE PARTY		
ľ	2 - SUSI	PECTED SE	RIOUS INJURY		OCCUPANT				1 - NOT DEPLOYED ER) 2 - DEPLOYED FRONT					
	3 - SUSI	PECTED MI	NOR INJURY		DER BELT ONLY USED LT ONLY USED A SECOND - LEFT SIDE (MOTORCYCL F PASS			E 3 - DEPLOYED SIDE E 4 - DEPLOYED BOTH						
		SIBLE INJU												
	5 - NO A	PPARENT	NJURY		STRAINT SYSTEM -	ORCYCLE PASS ND – MIDDLE	ENGER)	FRONT/SIDE			4			
F	ACTOR OF	The second section is a second section of	TAKEN BY	FORWARI			ND - RIGHT SIC	E	5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN					
		TRANSPOR		6 - CHILD RE	STRAINT SYSTEM -		D – LEFT SIDE ORCYCLE SIDE	CAR	The state of the s					
	2 - EMS			7 - BOOSTER			D - MIDDLE	VAIL	EJECTION 1 - NOT EJECTED			7		
	3 - POLI	ICE		8 - HELMET	USED	9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION (11 - PASSENGER IN OTH CARGO AREA (NON-THE BUS, PICK UP WITH CAR			2 - PARTIALLY EJECTED					
	9 - OTHE	ER/UNKNO	WN		IVE PADS USED					Y EJECTED				
	VEQ EV	GEN	IDER		KNEES, ETC.) IVE CLOTHING			RAILING UNIT,	4 - NOT APPLICABLE TRAPPED 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS					
	F-FEMA				- PEDESTRIAN	12 - PASS	12 - PASSENGER IN UNE					TANKS.		
	M - MALE	E R/UNKNO	WN	/ BICYCLI	ONLY	CARGO AREA 13 - TRAILING UNIT 14 - RIDING ON VEHICLE (NON-TRAILING UNIT) 15 - NON-MOTORIST								
				99 - OTHER / I	JNKNOWN			EXTERIOR				AL		
									3 - FREED BY NON-MECHANICA		AL.			
							R/UNKNOWN		MEANS	And the state of t				
S	NAME: LAS	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER		
WITNESS	Annecee	: STREET, CITY,	CTATE ZID											
W	VPDUC29;	. arkt. I, UTTY,	SIMIL, ZIP					CONTACT PHONE	- INCLUDE AREA COL	DE				
2	NAME: LAST, FIRST, MIDDLE								FORESTE		465			
ESS								DAT	E OF BIRTH		AGE	GENDER		
WITNESS	ADDRESS: STREET, CITY, STATE, 71P							CONTACT PHONE - INCLUDE AREA CROE						
								L				٠, ,		
S	NAME: LAS	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER		
WITNESS	ADDRESS													
3	ADDRESS:	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA COI	DE				
LIC.	V 0055 C114	100000000												