OHIO DEPARTMENT TRAFFIC CRAS	LOCAL REPORT NUMBER*									
_ Пон-2 Пон-3	. 2 . 0 . 2 . 0	. , 0 , 0 , 0 , 0	5,5,7,7							
PHOTOS TAKEN OH-1P OTHI	REPORTING AGENCY NAME		NCIC*	HIT/SKIP	UNIT IN ERROR					
SECONDARY CRASH PRIVATE PROPER	TY City of Kent Pol	ice	0.6	7.0.3	1 - SOLVED 2 - UNSOLVED	0 1 98 - ANIMAL				
1-CITY	: CITY, VILLAGE, TOWNSHIP*				CRASH DATE / T	CRASH SEVERITY 1 - FATAL				
6 7 1 2-VILLAGE Kent			-		[0.3, 1.8, 2.0, 2.0]	21.17 5	☐ 2 - SERIOUS INJURY			
ROUTE TYPE ROUTE NUMBER PREFIX 1-NOR 2-SOU S R 5,9 3 3-EAS 3	TH LOCATION ROAD NAME			ROAD TYPE	LATITUDE DEC	SUSPECTED				
S R 59 3 3-EAS			ST	41,153	3 - MINOR INJURY SUSPECTED					
ROUTE TYPE ROUTE NUMBER PREFIX 1-NOR 2-SOU	ГН	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)			LONGITUDE DECINAL DEGREES 4 - INJURY POSS					
ROUTE TYPE ROUTE NUMBER PREFIX 1-NOR 2-SOU 3-EAS					-8,1,,3,4,1	2 4 9	5 - PROPERTY DAMAGE ONLY			
REFERENCE POINT DIRECTION 1 - INTERSECTION PROM REFERENCE	ROUTE TYPE		AD TYPE	BOLD	1	NTERSECTION REL	ATED			
2 - MILE POST 2 - SOUTH	IR - INTERSTATE ROUTE(TP) US - FEDERAL US ROUTE			- ROAD - SQUARE	WITHIN INTERSECTION OR ON APPROACH					
3- HOUSE # 3- EAST 4-WEST	SR - STATE ROUTE	BL - BOULEVARD MP-		-STREET	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES					
DISTANCE DISTANCE FROM REFERENCE UNIT OF MEASURE	CR - NUMBERED COUNTY ROUTE	CR - CIRCLE OV -		- TERRACE	ROADWAY					
1-MILES 2-FEET	TR - NUMBERED TOWNSHIP ROUTE	A - WAY	ROADWAY DIVIDED							
LOCATION OF FIRST HARMFUL E 1 - ON ROADWAY 9 - CROSS		MANNER OF CRASH COL NOT COLLISION 4 - REA		:T	DIRECTION OF TRAVEL	EDIANTYPE				
	WAY/ALLEY ACCESS	TWO MOTOR	CKING		1-NORTH 1-DIVIDED FLUSH MEDIAN (<4 FEET)					
4 - ON ROADSIDE 12-SHARI	D USE PATHS OR	VEHICLES IN 6-AND TRANSPORT 7-SID	GLE DESWIPE, SAME	DIRECTION	3- EAST 4- WEST	DED FLUSH MEDIAN FEET)				
5 - ON GORE TRAFL 6 - OUTSIDE TRAFFIC WAY 13-BIKE I	4115		DESWIPE, OPPOS HER / UNKNOW		4		DED, DEPRESSED MEDIAN DED, RAISED MEDIAN			
7 - ON RAMP 14-TOLL	300TH	7*011	TIER? DIVINOV			(ANY	TYPE) R/UNKNOWN			
8 - OFF RAMP 99-UTHE	t / UNKNOWN									
WORK ZONE RELATED	WORK ZONE TYPE 1 - LANE CLOSURE		ORE THE 1ST V		CONTOUR	CONDITIONS	SURFACE			
WORKERS PRESENT	2 - LANE SHIFT/CROSSOVER	WAF	RNING SIGN ANCE WARNIN		1	2	2			
LAW ENFORCEMENT PRESENT	3 - WORK ON SHOULDER OR MEDIAN		NSITION AREA			1 - DRY 2 - WET	1 - CONCRETE 2 - BLACKTOP,			
ACTIVE SCHOOL ZONE	IVITY AREA MINATION ARE	Α.	3 - CURVE LEVEL	3 - SNOW	BITUMINOUS, ASPHALT					
	5 - OTHER		MINATION AND		4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK			
LIGHT CONDITION 1 - DAYLIGHT	1 - CLEAR	EATHER 6 - SNOW			9 - OTHER/UNKNOWN	5 - SAND, MUD, DIR OIL, GRAVEL	T, 4 - SLAG, GRAVEL, STONE			
3 2-DAWN/DUSK	.0.4. 2-CLOUDY	7 - SEVERE CROS				6 - WATER (STANDI				
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	3 - FOG, SMOG, S 4 - RAIN	MOKE 8-BLOWING SAI 9-FREEZING RA				7 - SLUSH	9 - OTHER/UNKNOW			
5 - DARK – UNKNOWN ROADWAY LIGH 9 - OTHER / UNKNOWN	TING 5 - SLEET, HAIL	99 - OTHER / UNI	KNOWN			9 - OTHER/UNKNOW	/N			
NARRATIVE							Indicate the north			
20-5577						<	direction with an "N" on the			
							compass diagram.			
3-18-20						(Z)				
				1 ;		NOT TO SCALE				
On this date, Unit #1 wa	s traveling W/B on	E. Main				_	_			
St near Fairview Dr. Unit	#1 lost control of hi	S					62706			
vehicle and drove off the i	oad to the right. Ur	nit #1								
went over the curb and th	en struck a street si	gn.				PENCE				
Unit #1 then struck and d					7					
posts in the front yard of	J. B	PARVEWEN								
eventually came back onto	E. Main St and fle	d from			Elerni 3					
the scene.										
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME		L DATE / TIME		SCENE CLEARED		REPORT TAKEN BY POLICE AGENCY			
0,3,1,8,2,0,2,0,/,2,1,1,7,0,	3,1,8,2,0,2,0,/,2,1,: TOTAL OFFICER'S NAME*	1,8,0,5,1,8,2,0				υ _τ / ₁ 2 ₁ 2 ₁ 0 ₁ 8 ₁	MOTORIST			
	Brooks, Ma		CHECKED BY OFFICER'S NAME* Short, Jason M				SUPPLEMENT (CORRECTION OR ADDITIO			
0,0,0,0,6,0,1		R'S BADGE NUMBER*		2 CHECKET 2	BY OFFICER'S BADGE	NUMBER*	TO AN EXISTING REPORT SEY! TO IDE			
HSY7001 OH1 1/19 [760-0820]							PAGE 1 OF 4			



2,0,2,0,-,0,0,0,0,5,5,7,7, $\begin{array}{c|c} \textbf{UNIT \#} & \textbf{OWNER NAME: LAST, FIRST, MIDDLE (} \\ \textbf{SEKERAK, LORI, A} \end{array}$ NWNER PHONE- INCLINE AREA COME A TIL SAME AS HOUSE DAMAGE DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS BRIVER) 3 - FUNCTIONAL DAMAGE 1 - NONE 6615 CLEVELAND RD LOT E21 Ravenna Twp OH 44266 □ 2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE DAMAGED AREA(S) INDICATE ALL THAT APPLY LP STATE LICENSE PLATE # **VEHICLE IDENTIFICATION #** VEHICLE YEAR **VEHICLE MAKE** 2, HKRM4, H3, 0, CH6, 2, 3, 7, 3, 9, O H HSG3148 2,0,1,2 Honda **INSURANCE COMPANY** INSURANCE POLICY # COLOR VEHICLE MODEL INSURANCE VERIFIED SIL CRV TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT RESPONSE 1 1 HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS MATERIAL CLASS # PLACARD ID # 1 - <10K LBS DEVICE X HIT/SKIP UNIT 2 - 10,001 - 26K LBS 0 1 PLACARD 3 - >26K LBS 1.1 23 - PEDESTRIAN / SKATER 1 . PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12-GOLF CART 18-1 IMO (LIVERY VEHICLE) 13-SNOWMOBILE 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 19-BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 0 1 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14-SINGLE UNIT TRUCK 25 - OTHER NON-MOTORIST 20-OTHER VEHICLE UNIT TYPE 4 - PICK UP 10 - MOPED OR MOTORIZED 15-SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE BICYCLE 5 - CARGO VAN 16-FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 27 - TRAIN 11 - ALL TERRAIN VEHICLE ANIMAL-DRAWN VEHICLE 6 - VAN (9-15 SEATS) 17. MOTORHOME 99 - UNKNOWN OR HIT/SKIP (ATV / BTV) # OF TRAILING UNITS 12 WAS VEHICLE OPERATING IN AUTONOMOUS O - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION 0 2 1 1-YES 2-NO 9-OTHER/UNKNOWN 2 - PARTIAL AUTOMATION 5 - FRILL AUTOMATION AUTONOMOUS MODE LEVEL 6 - BUS - CHARTER/TOUR 16-FARM 21 - MAIL CARRIER 1 - NONE 11-FIRE 0 1 2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99-OTHER/UNKNOWN SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13-POLICE 18-SNOW REMOVAL FUNCTION 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY 19-TOWING 5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15-CONSTRUCTION EQUIPMENT 20-SAFETY SERVICE PATROL 17 1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER B - POLE 12 - CONCRETE MIXER O 1 /NOT CARGO 2 - BUS I NOT APPLICABLE MOTOR VEHICLE CHASSIS 13-AUTOTRANSPORTER 9 - CARGOTANK 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10-FLAT BED 14-GARBAGE/REFUSE 0 BODY 7 - GRAIN/CHIPS/GRAVEL 11 - DUMP 99-OTHER/UNKNOWN TYPE • 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN VEHICLE 2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT 10 - DISABLED FROM PRIOR DEFECTIVE ACCIDENT DEFECTS 3 - TAIL LAMPS 6 - TIRE BLOWOUT -NO DAMAGE [0] - UNDERCARRIAGE [14] 1 - INTERSECTION - MARKED 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12 - FIRST RESPONDER CROSSWALK AT INCIDENT SCENE 4 - MIDBLOCK - MARKED ☐-TOP [13] - ALL AREAS [15] 7 - SHOULDER / ROADSIDE 10-DRIVEWAY ACCESS KON-MOTORIST 2-INTERSECTION - UNMARKED CROSSWALK 99-OTHER/HINKNOWN 8 - SIDEWALK 11 - SHARED USE PATHS OR LOCATION AT IMPACT CROSSWALK - UNIT NOT AT SCENE [16] 5 - TRAVEL LANE - OTHER LOCATION TRAILS 1 - STRAIGHT AHEAD 7 - MAXING U-TURN 13 - NEGOTIATING A CURVE 18-APPROACHING 1 - NON-CONTACT INITIAL POINT OF CONTACT OR LEAVING VEHICLE 2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING 0 - NO DAMAGE 14 - UNDERCARRIAGE 0, 1, 3 - CHANGING LANES 3 3-STRIKING 19-STANDING 9 - LEAVING TRAFFIC LANE SPECIFIED LOCATION 1 2 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE ACTION 4- STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST 10 - PARKED DIAGRAM JOGGING, PLAYING 99 - UNKNOWN 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN 21 - STANDING OUTSIDE 11-SLOWING OR STOPPED 13 - TOP 16-WORKING DISABLED VEHICLE & STRUCK IN TRAFFIC 6 - MAKING LEFT TURN 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN 9 - OTHER / UNKNOWN 12-DRIVERLESS TRAFFIC 1.NONE 7-LEFT OF CENTER 13-IMPROPER START FROM A 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY TRAFFICWAY FLOW TRAFFIC CONTROL PARKED POSITION 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA 18 - OPERATING DEFECTIVE 22 - NOT DISCERNIBLE 1 - ROUNDABOUT 4 - STOP SIGN 1 - ONE-WAY 9 9 3-RAN RED LIGHT 14-STOPPED OR PARKED EQUIPMENT 23 - OPENING DOOR INTO 9-IMPROPER LANE CHANGE 2 - TWO-WAY 2 - SIGNAL 5 - YIELD SIGN ILLEGALLY 19-LOAD SHIFTING/FALLING/ ROADWAY 4 - RAN STOP SIGN 10. IMPROPER PASSING 3 - FLASHER 6 - NO CONTROL 15 - SWERVING TO AVOID CONTRIBUTING 5 - UNSAFE SPEED SPILLING 99 - OTHER IMPROPER ACTION 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IMPROPER CROSSING # OF THROUGH LANES RAIL GRADE CROSSING 6 - IMPROPER TURN 12-IMPROPER BACKING ON ROAD 1 - NOT INVOLVED SEQUENCE OF EVENTS 2 - INVOLVED-ACTIVE CROSSING 4 EVENTS 1 0 8 1 - OVERTURN/ROLLCYER 3 - INVOLVED-PASSIVE CROSSING 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE -16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE OPPOSITE DIRECTION OF 17 - AHIMAL - FARM EQU!PMENT 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS TRAVEL UNIT / NON-MOTORIST DIRECTION 23 - STRUCK BY FALLING, 18-ANIMAL - DEER 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 12 - DOWNHILL RUNAWAY SHIFTING CARGO OR 1 - NORTH 5 - NORTHEAST 2 4 3 4 JACKKNIFE 19-ANIMAL - OTHER 9 - RAN OFF ROAD LEFT ANYTHING SET IN MOTION 13 OTHER NON-COLLISION 2 - SOUTH 6 - NORTHWEST 20 - MOTOR VEHICLE IN 5 - CARGO / EQUIPMENT 10-CROSS MEDIAN BY A MOTOR VEHICLE 14-PEDESTRIAN FROM 3 TO 4 TRANSPORT 3 - EAST 7 - SOUTHEAST 24 - OTHER MOVABLE OBJECT LOSS OR SHIFT 3 3 7 15-PEDALCYCLE 21 - PARKED MOTOR VEHICLE 4 - WEST 8 - SOUTHWEST COLLISION WITH FIXED OBJECT - STRUCK 9 - OTHER / UNKNOWN 4 4 6 25-IMPACT ATTENUATOR 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB 50 - WORK ZONE MAINTENANCE / CRASH CUSHION 32 - PORTABLE BARRIER 38-OVERHEAD SIGN POST 44 - DITCH EQUIPMENT UNIT SPEED DETECTED SPEED 26-BRIDGE OVERHEAD 51 - WALL 33 - MEDIAN CABLE BARRIER 39-LIGHT/LUMINARIES 45 - EMBANKMENT 1 - STATED / ESTIMATED SPEED STRUCTURE SUPPORT 52 - BUILDING 5 1 3 34 - MEDIAN GUARDRAIL 46-FENCE 0,3,5 27 - BRIDGE PIER OR ABUTMENT 2 - CALCULATED / EDR 40 - UTILITY POLE 53-TUNNEL 47 - MAILBOX 28 - BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 54 - OTHER FIXED OBJECT 48 - TREE 3 - UNDETERMINED POSTED SPEED BARRIER 29-BRIDGE RAIL OR SUPPORT 99-OTHER / UNKNOWN 49 - FIRE HYDRANT 36-MEDIAN OTHER BARRIER 30 - GUARDRAIL FACE 42 - CULVERT 3 5 FIRST HARMFUL EVENT 4 MOST HARMFUL EVENT

LOCAL REPORT NUMBER

OHIO DE	COND DEPARTMENT MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER							
STATES MEN	~ THE TRUE TO BE IN THE TOTAL OF THE TOTAL O								2,0,2,0,-,0,0,0,5,5,7,7						
UNIT#									DATE OF BIRTH AGE GENDER						
0,1	_ DEBONIS, SEAN, M									0 4 0 1 1 9 8 9 3 0 M					
	STREET, CITY, STA	TE, ZIP VIEW RD 303 ,Sa	anama	ro Hil	le O	H 44067			CONTAC	CT PHONE - 18	CLIME AREA OF	ne			
		MS AGENCY (NAME)				CAS:	MANG CITYS	SAFETY EQUIPMENT	L	lec.	TINC DACITION	AID DEC	HEADE LEIERTH	AN TRANSPO	
, and on the	TAKEN BY			IN TOKED IA	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED				DOT-COMPLIANT SEATING POSITION AIR E			AIR BAG	BAG USAGE EJECTION TRAPPED		
OL STATE	OPERATOR LI	CENSE NUMBER	OFFENSE CHARG			ED	LOCAL	OFFENSE DESC		0,1		CITATION NUMBER			
O. H.	SY0371	78	331.34				CODE	Failure to Co	Failure to Control;		607				
OL CLASS			RESTRICTION SELECT UP TO 3 DRIV		NER ALCOHOL / DRUG SUSPECTE			CONDITION	A	ALCOHOL TEST STATUS TYPE VALUE S		DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4			
4	SELECT DE 102		BA	CALIED	ALC	COHOL MAR	ANAULIS		STATUS	TAPE	ALUE	STATUS	TYPE RESU	JLI SELECTUPTO 4	
4					OTI	HER DRUG				ے۔			الليا		
UNIT #	NAME: LAST, FI	RST, MIDDLE								DATE 0	F BIRTH		AGE	GENDER	
ADDDESS	STREET, CITY, STA	TE 710													
ADDRESS	:: STREET, GTTY, STA	11,217							CONTAC	CT PHONE - I	ICLUDE AREA CO	DDE			
INJURIES	INJURED E	MS AGENCY (NAME)	1	INTUREDTA	KEN TO- I	MEDICAL FACILITY (NAME CITY) SAFETY EQUIPMENT			T SEATING POSITION AN			A SO BAC	IR BAG USAGE EJECTION TRAPPED		
	TAKEN BY			INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)			USED	DOT-COMPLIANT MC HELMET		AIR BAG GOAGE ESECTION TRAFFED					
OL STATE	OPERATOR LI	CENSE NUMBER		OFFENSE	CHAR	GED	LOCAL	OFFENSE DESC	RIPTION		CITATION NUMBER				
							CODE								
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT U		ER RACTED	ALCO	HOL / DRUG SUSPI	ECTED	CONDITION	A STATUS	LCOHOL TE		STATUS	DRUG TEST	(S) ULT selectorio	
			BY	MOTED			RUUANA		311103	1112	ACUE	314103	TITE KES	OLI SELEUI VIIIO	
UNIT#	NAME: LAST, F	IDET MIDDLE			OTI	HER DRUG					<u> </u>				
OMI #	HAME: LASI, F	iksi, MIDDLE								DATE	F BIRTH		AGE	GENDER	
ADDRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE							
							THE STATE OF THE S								
INJURIES		MS AGENCY (NAME)		INJUREDTA	KEN TO:	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT		SE	ATING POSITION	AIR BAG	USAGE EJECTI	ON TRAPPED	
100	TAKEN USED USED					USED		-COMPLIANT				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
OL STATE	OL STATE OPERATOR LICENSE NUMBER OFFENSE C			E CHAR	RGED LOCAL OFFENSE DESC			RIPTION CITA			CITAT	ION NUMBER	1		
	1														
OL CLASS	SELECT UP TO 2	RESTRICTION SELECT U	DIST	ER RACTED		HOL / DRUG SUSP		CONDITION	STATUS	TYPE TYPE		STATUS	DRUG TEST	(S) ULT SELECT UP TO	
	1		BY			COHOL MAI HER DRUG	RIJUANA								
INJ	URIES	SEATING POSITION	Al	IR BAG		OL CLAS	S	OL RESTRIC	TION(S)		DISTRAC		TEST S	TATUS	
1 - FATAL	D PERIOUP IN HIRY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEPL	THE RESERVE OF THE PERSON NAMED IN COLUMN		1 - CLASS A		1 - ALCOHOL INTER			MATERIAL PROPERTY OF		1 - NONE GIVEN		
	D SERIOUS INJURY D MINOR INJURY	2-FRONT-MIDDLE	3 - DEPLOYE	'ED FRONT 2 CLASS B 'ED SIDE 3 - CLASS C			2 - CDL INTRASTATE ONLY 3 - CORRECTIVE LENSES		ELECT	2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION		2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED			
Section 18 Control	OSSIBLE INJURY 3 FRONT - RIGHT SIDE 4 DEPL		100	LOYED BOTH FRONT / SIDE 4 - REGULAR CLASS			4 - FARM WAIVER			DEVICE (TEXTING, TYPING, DIALING)		SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN			
5 - NO APPARE	(MOTORCYCLE PASSENGER)		9 - DEPLOYMENT UNKNOWN 5 - MAC MOPED ONLY			5 - EXCEPT CLASS 6 - EXCEPT CLASS			G ON HANDS-FR		5 - TEST GIVEN, RESULTS				
INJURED	TAKEN BY	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS 7 - EXCEPT TRACT	Owner, American		G ON HAND-HEI INICATION DEVI		UNKNOWN		
/TREATED		7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	A TOWNSHIPS	ECTION		OL ENDORSE	MENT	8 - INTERMEDIATE	LICENSE	5-OTHER	ACTIVITY, WITH	THE REAL PROPERTY.	ALCOHOL 1-NONE	TEST TYPE	
2 - EMS 3 - POLICE		8 - THIRD - MIDDLE	1 - NOT EJEC 2 - PARTIALI			H - HAZMAT M - MOTORCYCLE		RESTRICTIONS 9 - LEARNER'S PE		6 - PASSE	RONIC DEVICE NGER		2 - BL00D		
9 - OTHER / UNKNOWN		9-THIRD - RIGHT SIDE	3 - TOTALLY EJECTED			P - PASSENGER		RESTRICTIONS		****	OTHER DISTRACTION INSIDE THE VEHICLE		3-URINE		
SAFETY	EQUIPMENT	10 - SLEEPER SECTION OF TRUCK CAB	4 NOT APPL	LICABLE		N - TANKER Q - MOTOR SCOOTER		10 - LIMITED TO DA	THE RESERVE	7 (1 7 . Thinks	DISTRACTION	UTSIDE	4 - BREATH 5 - OTHER		
1 - NONE USE		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	c etteproteinen ett v	RAPPED		R THREE-WHEEL M	OTORCYCLE	12 - LIMITED - OTH		THE VE	HICLE /UNKNOWN		DRUG TE	STTYPE	
3 - LAP BELT (R BELT ONLY USED Only USED	(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1 - NOTTRAF 2 - EXTRICA			S - SCHOOL BUS	TO AM FOR	13 - MECHANICAL D (SPECIAL BRAI	CES, HAND		200		1 - NONE		
4 - SHOULDER & LAP BELT USED 5 - CHILD RESTRAINT SYSTEM -		12 - PASSENGER IN UNENCLOSED CARGO AREA	MECHANICAL MEANS 3 - FREED BY		* A	T DOUBLE & TRIPLE TRAILERS X-TANKER/HAZMAT		CONTROLS, OR OTHER ADAPTIVE DEVICES)		The second contract of	CONDITION 1 - APPARENTLY NORMAL		2-BLOOD 3-Urine		
5 - CHILD RES FORWARD		13-TRAILING UNIT		HANICAL ME	ANS	GENDEF	?	14 - MILITARY VEH	7/5 THE TOTAL	A STATE OF THE REAL PROPERTY.	AL IMPAIRMEN		4-OTHER		
6 - CHILD RES	STRAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				F-FEMALE		AIR BRAKES		3 - LINOIT	INAL (E.G. DEPR IST RBED)		DRUG TEST	RESULT(S)	
7 - BOOSTER SEAT		15 - NON-MOTORIST				M - MALE U - OTHER / UNKNOWN		16 - OUTSIDE MIRROR 17 - Prosthetic aid		4- ILLNESS 5- FELL ASLEEP, FAINTED,			1 - AMPHETAMINES 2 - BARBITURATES		
8 - HELMET U	USED Ve pads used	99-OTHER/UNKNOWN				a -vinex / unknowl		18 - OTHER	4.	FATIGU	ED, ETC.		3 - BENZODIAZE		
(ELBOW, K	NEES, ETC.)		1.0							OF MED	THE INFLUENC ICATIONS / DRU		4 - CANNABINOT	Electric Telectric Inc.	
10 - REFLECTO 11 - LIGHTING	VE CLOTHING – PEDESTRIAN									9 - OTHER	OL / Unknown		5-COCAINE 6-OPIATES/OP	PIOIDS	
/ BICYCLE	ONLY		i i	34			0			Jinen			7-OTHER		
99 - OTHER/U	NAMOWN	Manager Age Science Control			I COLOR	ARTHUR THE TAX							B - NEGATIVE R	ESULTS	



LOCAL REPORT NUMBER

2 0 2 0 - 0 0 0 0 5 5 7 7

Unit #1 and the driver were found a short time later in a parking lot on Kent State Campus. The driver of Unit #1 claimed that the left tie rod on Unit #1 when out and that is what caused him to lose control.

Home owner of 1235:

- Deborah Paisley
- -3307148156

Officer Brooks 215