ESS 1-25-19

COO DEPARTMENT TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT								LOCAL REPORT NUMBER *					
PHOTOS TAKEN	<b>X</b> o	H-2	]он-з	LOCAL INFORM	ATION				19MPD1660				
SECONDARY CR		H-1P [	10111511	REPORTING AG	ENCY NAME *			HIT/SKIP 1 - SOLVED	NUMBER OF	INITS	UNIT IN ERROR 98 - ANIMAL		
	PR	IVATE PRO		Millersburg			<u> </u>	03801	2 - UNSOLVED	99 - UNKNOWN			
COUNTY* LOCAL	ITY* 1 - CITY 2 - VILLAGE	1		r. VILLAGE. TOWNS	HIP*				CRASH DATE / TIME* CRASH SEVERITY  1 - FATAL  09/24/2019 16:12   3   2   STRENG NAME  CRASH DATE / TIME*				
38 2	3 - TOWNSI	1112	lersburg						09/24/201	- SERIOUS INJURY SUSPECTED			
ROUTE TYPE ROL	JTE NUMBER	2	- SOUTH	LOCATION ROA	ID NAME			ROAD TYPE		- MINOR INJURY			
			- EAST - WEST	Jackson Str	eet			ST	40.554	SUSPECTED			
ROUTE TYPE ROU	TE NUMBER		- NORTH - SOUTH	REFERENCE RO	AD NAME (ROAD, N	MILEPOST, HOU	JSE #)	ROAD TYPE	LONGITUDE	ECIMAL DEGREES		- INJURY POSSIBLE - PROPERTY DAMAGE	
REFEREN		- 3 4	- EAST - WEST	Crawford S	treet			ST	-81.915	061		ONLY	
REFERENCE POIN	FRO	DIRECTION OM REFERENCE	E S	ROUTE	5.510.53		ROAD TYPE			INTERSECT			
1 - INTERSECT	i	1 - NO , 2 - SOL	ITH I	NTERSTATE RO	AV.		HW - HIGHWA LA - LANE	Y RD ROAD SQ SQUARE	X WITHIN INTE	RSECTION OR C	n approa	CH   4	
3 - HOUSE #		3 - EAS 4 - WE	ST .	FEDERAL US RO STATE ROUTE	BL-	1000000	MP - MILEPOS	T ST STREET.	WITHIN INTE	RCHANGE ARE	NUI	MBER OF APPROACHES	
DISTANCE FROM REFERENCE	UNI	DISTANCE T OF MEASU		NUMBERED CO	UNTY ROUTE CT	- COURT	OV - OVAL PK - PARKWA	· · · · · · · · · · · · · · · · · · ·		ROA	DWAY		
ı		1 - MII	ES T TR-	NUMBERED TO	DR.	4 4 4 4 4	PI - PIKE PL - PLACE	WA WAY	ROADWAY	DIVIDED			
		3 - YA		ROUTE		· · · · · · · · · · · · · · · · · · ·							
1 - ON RO			rossover <sub>,</sub>	ſ	1 - NOT	NER OF CRASH COLLISION 4 -			DIRECTION OF TRA	i		AN TYPE LUSH MEDIAN	
2 - ON SI 3 - IN MEI				ALLEY ACCESS RADE CROSSING	BETWO	MOTOR	BACKING		2 - SOUTH		( <4 FEET )  - DIVIDED FLUSH MEDIAN ( ≥4 FEET )		
4 - ON RC		12 -	SHARED USE		VEHI	CLES IN	- ANGLE - SIDESWIPE, s.	AME DIRECTION	4 - WEST				
5 - ON GO 6 - OUTSI	DE TRAFFIC V		FRAILS BIKE LANE		2 ~ REAF	o	· SIDESWIPE, a	PPOSITE DIRECTION		1		DEPRESSED MEDIAN RAISED MEDIAN	
7 - ON RA 8 - OFF RA			TOLL BOOTH		3 - HEAL	D-ON 9 -	OTHER / UNK	NOWN		9	(ANY TYPE		
			OTTICK/ ON						CONTOUR	CONDI		SURFACE	
WORK ZONE RE		l	1 -	WORK ZONI LANE CLOSURI				N WORK ZONE ST WORK ZONE	11	1	,	12	
WORKERS PRES	ENT			LANE SHIFT/C			WARNING SIG	N	1 - STRAIGHT	1- DRY		1 - CONCRETE	
LAW ENFORCEN	MENT PRESEN	т	3-	WORK ON SHO	ULDER	1	TRANSITION		LEVEL	2 - WET		2 - BLACKTOP,	
D ACTIVE SCHOOL	LZONE		4 -		OR MOVING WORK	1	ACTIVITY ARE		2 - STRAIGHT GRADE	3 - SNOW 4 - ICE		BITUMINOUS, ASPHALT	
ACTIVE SCHOO	L ZONE		5 -	OTHER		3-	TERMINATION	AKEA	3 - CURVE LEVEL	S - SAND, MI OIL, GRA		3 - BRICK/BLOCK 4 - SLAG , GRAVEL,	
LI 1 - DAYLIO	GHT CONDI	TION		1 .	CLEAR	WEATHER 6 - SNOW			4 - CURVE GRADE 9 - OTHER	6 - WATER (S		STONE	
1 2 - DAWN				i	CLOUDY	7 - SEVERE CR	OSSWINDS		JUNKNOWN	7 - SLUSH		5 - DIRT 9 - OTHER	
	- Lighted RC - Roadway		TED	l .	FOG, SMOG, SMOKE			IRT, SNOW ZING DRIZZLE		9 - OTHER /	INKNOWN	/ UNKNOWN	
	- UNKNOWN			. 1	SLEET, HAIL	99 - OTHER /		ZING DRIZZLE		l			
	( / UNKNOW	<b>N</b>			`					ļ			
NARRATIVE	io une Sou	hhaund	on Crowf	ard etraat an	d after stopping i	fortho							
					ross the intersec								
Southbound bu Eastbound on Ja			passengei	rs side by uni	t number two, wł	ho was			1 1	8			
Eastboulid Oil A	ackson stre	et.								N Crawford St		(F)	
,								E Jackson St	الع	\$\$			
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							******		<u>(文</u> ) 分 "1	(a) Tile			
									#2 #3				
								T					
									S Crawford Si				
									ວິຣ				
	*												
CRASH REPOR	TED DATE / 1	TIME	1	DISPATCH DA	re/TIME T	ARR	IVAL DATE /	TIME	SCENE CLEARED	DATE / TIME	I	REPORT TAKEN BY	
	2019 16:44			09/24/201			/24/2019 1		09/24/20		X	POLICE AGENCY	
TOTAL TIME	ОТЪ				R'S NAME*	U3/		CHECKED BY OFFI		.5 11.50	$\dashv \sqcap$	MOTORIST	
ROADWAY CLOSED			TOTA MINUT		es name* an, Kim			onconcu at OFFIC	-Lit o HAME"			SUPPLEMENT	
	_				OFFICER'S BAD	OGE NUMBER*		Снескер	BY OFFICER'S BADGE	NUMBER*	(C	ORRECTION OR ADDITION OF AN EXISTING REPORT SENT TO	
40 30 82 101					(Seco					DPS)			



## 19MPD1660 DAMAGE OWNER PHONE:INCLUDE AREA CODE ( SAME AS DRIVER) OWNER NAME: LAST, FIRST, MIDDLE ( SAME AS DRIVER) UNIT# NOFSINGER, PATRICIA, L 330-231-2011 DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE OWNER ADDRESS: STREET, CITY, STATE, ZIP ( ) SAME AS DRIVER 2 - MINOR DAMAGE 4 - DISABLING DAMAGE 101 LAKEVIEW DRIVE APT 6, MILLERSBURG, OH, 44654 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 CHRYSLER GLW7755 1C3LC46K57N515436 2007 INSURANCE INSURANCE COMPANY INSURANCE POLICY # VEHICLE MODEL COLOR VERIFIED **GEICO** GRY SEBRING TOWED BY: COMPANY NAME TYPE OF USE US DOT# COMMERCIAL GOVERNMENT RESPONSE HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR # OCCUPANTS INTERLOCK 1 - ≤10K LBS. 2 - 10.001 - 26K LBS. PLACARD ID # CLASS# DEVICE EQUIPPED HIT/SKIP UNIT RELEASED 3 - > 26K LBS. 1 - PASSENGER CAR 12 - GOLF CART 6 - VAN (9-15 SEATS) 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN/SKATER 2 - PASSENGER VAN 7 - MOTORCYCLE 2-WHEELED 13 - SNOWMOBILE 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 1 (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 14 - SINGLE UNIT 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST UNIT TYPE 3 - SPORT UTILITY 9 - AUTOCYCLE TRUCK 21 - HEAVY EQUIPMENT 26 - BICYCLE VEHICLE 15 - SEMI-TRACTOR 10 - MOPED OR MOTORIZED 22 - ANIMAL WITH RIDER OR 27 - TRAIN 4 - PICK UP 16 - FARM EQUIPMENT ANIMAL-DRAWN VEHICLE 99 - UNKNOWN OR HIT/SKIP 5 - CARGO VAN 11 - ALL TERRAIN VEHICLE 17 - MOTORHOME # of TRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION 2 1 - YES 2 - NO 9 - OTHER / UNKNOWN AUTONOMOUS 2 - PARTIAL AUTOMATION S - FULL AUTOMATION MODE LEVEL 1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE 16 - FARM 21 - MAIL CARRIER 2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99 - OTHER / UNKNOWN 1 3 - ELECTRONIC RIDE 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL SHARING SPECIAL 9 - BUS - OTHER 14 - PUBLIC UTILITY 19 - TOWING FUNCTION 4 - SCHOOL TRANSPORT 10 - AMBULANCE 15 - CONSTRUCTION FOUIP. 20 - SAFETY SERVICE 5 - BUS - TRANSIT/COMMUTER 1 - NO CARGO BODY TYPE 11 - DUMP 4 - LOGGING 7 - GRAIN/CHIPS/GRAVEL 99 - OTHER / UNKNOWN 1 / NOT APPLICABLE 5 - INTERMODAL B - POLE 12 - CONCRETE MIXER 2 - BUS CARGO CONTAINER CHASSIS 9 - CARGO TANK 13 - AUTO TRANSPORTER \* 3 - VEHICLE TOWING 6 - CARGOVAN BODY 10 - FLAT BED 14 - GARBAGE/REFUSE <u>@</u> ANOTHER MOTOR VEHICLE /ENCLOSED BOX TYPE 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN 2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT 10 - DISABLED FROM PRIOR VEHICLE DEFECTIVE ACCIDENT 3 - TAIL LAMPS 6 - TIRE BLOWOUT **DEFECTS** - NO DAMAGE[0] \_\_\_- UNDERCARRIAGE [ 14 ] 1 - INTERSECTION -MARKED CROSSWALK 4 - MIDBLOCK -MARKED CROSSWALK 7 - SHOULDER/ROADSIDE 10 - DRIVEWAY ACCESS 99 - OTHER / UNKNOWN \_\_\_ - TOP [ 13 ] - ALL AREAS [ 15 ] 11 - SHARED USE PATHS 8 - SIDEWALK N-MOTORIST 2 - INTERSECTION -TRAVELLANE OR TRAILS 9 - MEDIAN/CROSSING UNMARKED CROSSWALK OTHER LOCATION 12 - FIRST RESPONDER - UNIT NOT AT SCENE [ 16 ] ISLAND 3 - INTERSECTION - OTHER 6 - BICYCLE LANE AT INCIDENT SCENE 9 - LEAVING TRAFFIC 1 - STRAIGHT AHEAD 15 - WALKING, RUNNING, 21 - STANDING OUTSIDE 1 - NON-CONTACT INITIAL POINT OF CONTACT 2 - BACKING LANE JOGGING, PLAYING DISABLED VEHICLE 2 - NON-COLLISION 0 - NO DAMAGE 14 - UNDERCARRIAGE 16 - WORKING 3 - CHANGING LANES 10 - PARKED 99 - OTHER / LINKNOWN 1 4 4 - OVERTAKING/PASSING 11 - SLOWING OR STOPPED 17 - PUSHING VEHICLE 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE 3 - STRIKING 18 - APPROACHING OR PRE-CRASH S - MAKING RIGHT TURN IN TRAFFIC DIAGRAM ACTION 4 - STRUCK ACTIONS 6 - MAKING LEFT TURN LEAVING VEHICLE 99 - UNKNOWN 12 - DRIVERIESS 5 - BOTH STRIKING 13 - TOP MAKING U-TURN 13 - NEGOTIATING A CURVE 19 - STANDING & STRUCK 8 - ENTERING TRAFFIC 14 - ENTERING OR CROSSING SPECIFIED LOCATION 20 - OTHER NON-MOTORIST 9 - OTHER / UNKNOWN LANE TRAFFIC - IMPROPER START FROM A PARKED POSITION 1 - NONE 8 - FOLLOWING TOO CLOSE 13 18 - OPERATING DEFECTIVE 23 - OPENING DOOR INTO TRAFFICWAY FLOW TRAFFIC CONTROL 2 - FAILURE TO YIELD /ACDA EQUIPMENT ROADWAY 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 3 - RAN RED LIGHT 9 - IMPROPER LANE 14 - STOPPED OR PARKED 19 - LOAD SHIFTING 99 - OTHER IMPROPER 2 - TWO-WAY 2 - SIGNAL S - YIELD SIGN 4 - RAN STOP SIGN CHANGE ILLEGALLY /FALLING/SPILLING ACTION 2 10 - IMPROPER PASSING 15 - SWERVING TO AVOID 20 - IMPROPER CROSSING 3 - FLASHER S - UNSAFE SPEED 6 - NO CONTROL CONTRIBUTING 6 - IMPROPER TURN 11 - DROVE OFF ROAD 16 - WRONG WAY 21 - LYING IN RÖADWAY CIRCUMSTANCES 7 - LEFT OF CENTER 12 - IMPROPER BACKING 17 - VISION OBSTRUCTION 22 - NOT DISCERNIBLE # OF THROUGH LANES RAIL GRADE CROSSING ON ROAD 1 - NOT INVLOVED SEQUENCE OF EVENTS 2 - INVOLVED-ACTIVE CROSSING 2 | **EVENTS** 3 - INVOLVED-PASSIVE CROSSING 1 - OVERTURN/ROLLOVER 7 - SEPARATION OF UNITS 23 - STRUCK BY FALLING, 12 - DOWNHILL RUNAWAY 19 - ANIMAL -OTHER - MOTOR VEHICLE IN 2 - FIRE/EXPLOSION 8 - RAN OFF ROAD RIGHT 13 - OTHER NON-COLLISION SHIFTING CARGO OR **UNIT / NON-MOTORIST DIRECTION** 3 - IMMERSION TRANSPORT 9 - RAN OFF ROAD LEFT 14 - PEDESTRIAN JACKKNIFE - CROSS MEDIAN 15 - PEDALCYCLE 21 - PARKED MOTOR MOTION BY A MOTOR 1 - NORTH S - NORTHEAST VEHICLE OTHER MOVABLE 5 - CARGO / EQUIPMENT 11 - CROSS CENTERLINE -16 - RAILWAY VEHICLE VEHICLE z - SOUTH 6 - NORTHWEST 17 - ANIMAL - FARM 22 - WORK ZONE OBJECT 3 - EAST 7 - SOUTHEAST OF TRAVEL MAINTENANCE 1 6 - EQUIPMENT FAILURE 18 - ANIMAL - DEER TO 2 4 - WEST 8 - SOUTHWEST EQUIPMENT 9 - OTHER / UNKNOWN COLLISION WITH FIXED OBJECT - STRUCK 25 - IMPACT ATTENUATOR 31 - GUARDRAIL END 38 - OVERHEAD SIGN POST 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX S2 - BUILDING / CRASH CUSHION BRIDGE OVERHEAD 32 - PORTABLE BARRIER 39 - LIGHT / LUMINARIES S3 - TUNNEL 54 - OTHER FIXED LINIT SPEED DETECTED SPEED MEDIAN CABLE BARRIER SUPPORT STRUCTURE 34 - MEDIAN GUARDRAIL 40 - UTILITY POLE 4B - TREE OBJECT 99 - OTHER / UNKNOWN - FIRE HYDRANT - WORK ZONE 1 - STATED / ESTIMATED SPEED - BRIDGE PIER OR 41 - OTHER POST, POLE 5 ABUTMENT 35 - MEDIAN CONCRETE OR SUPPORT MAINTENANCE 28 - BRIDGE PARAPET 42 - CULVERT 1 | 2 - CALCULATED / EDR EQUIPMENT 29 - BRIDGE RAII 36 - MEDIAN OTHER BARRIER 43 - CURR POSTED SPEED 30 - GUARDRAIL FACE 37 - TRAFFIC SIGN POST S1 - WALL 3 - UNDETERMINED 25 FIRST HARMFUL EVENT

1

MOST HARMFUL EVENT

LOCAL REPORT NUMBER

ONO DEPARTMENT OF PUBLIC SAPETY	U	IN	IT
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## LOCAL REPORT NUMBER

## 19MPD1660

UNIT # OWNER NAME: LAST, FIRST, MIDDLE (   SAME AS DRIVER)					PHONE:INCLUDE AR	EA CODE ( SAME AS DRIVER)	D A M A G E					
	MILLS, WENDELL, R	MIDDLE (III SAME AS BAITER)			681-220		DAMAGE SCALE					
:	DRESS: STREET, CITY, STATE, Z	IP (   SAME AS DRIVER)			001-220	7-4003	1 - NONE 3 - FUNCTIONAL DAMAGE					
4	ERSBURG STREET, H		44633				3 2 - MINOR DAMAGE 4 - DISABLING DAMAGE					
•	IAL CARRIER; NAME, ADDRES		44033	<b></b>	attender Commen DU	ONE: INCLUDE AREA CODE	9 - UNKNOWN					
COMMERC	IAL CARRIER; NAME, ADDRES	S, CITY, STATE, ZIP		CON	AMERCIAL CARRIER PT	OINE: INCLUDE AREA CODE	DAMAGED AREA(S)					
			_			,		ICATE ALL T				
LP STATE	LICENSE PLATE #	VEHICL	E IDENTIFICATION #		VEHICLE YEAR	VEHICLE MAKE						
WV	G4W862	1HQ1	FVC20KB653057		2019	HARLEY DAVIDSON	12		12			
INSURAL	NCE INSURANCE COMPAI	NY I	NSURANCE POLICY #		COLOR	VEHICLE MODEL	11 12		" "			
VERIFIED	STATE FARM	12	261229D2948		BLK	ELECTRA GLIDE ULTRA	10	,2	10 11 1 2			
	TYPE OF USE		US DOT#	TOW	ED BY: COMPANY N	AME	10 2 -	7	/ 10/22/V2 -			
СОММЕЯ	RCIAL GOVERNMENT	IN EMERGENCY L		RIGZ	TOWING		9 3	3	8 8 3			
INTERLO	·rv	# OCCUPANTS	CLE WEIGHT GVWR/GCWI	٠ ا ـــــــــــــــــــــــــــــــــــ		S MATERIAL	B 4 500	7				
DEVICE	HIT/SKIP UNIT	* * * * * * * * * * * * * * * * * * *	1 - ≤10K LBS. 2 - 10.001 - 26K LBS.		ELEASED	SS # PLACARD ID #	8 7 5	4	8 7 7 6 4			
EQUIPPE	D	1 1	3 - > 26K LBS.		ACARD		7	12	7			
	1 - PASSENGER CAR 6 - VA	N (9-15 SEATS)	12 - GOLF CART 18 - 1	IMO (LIVE	RY VEHICLE) 23 -	PEDESTRIAN/SKATER	6 ,	11	1			
		DTORCYCLE 2-WHEELED			-	WHEELCHAIR (ANY TYPE)	10 /		1. 2			
	(MINIVAN) 8 - MO	DTORCYCLE 3-WHEELED	14 - SINGLE UNIT 20 - 0	OTHER VEH		OTHER NON-MOTORIST		- 10	+ <del>;</del>   \( \( \sum_{\text{1}} \)			
UNIT TYPE	WEIDOLF	TOCYCLE	TRUCK 15 - SEMI-TRACTOR 21 - 1	HEAVY EQU	JIPMENT 26 -	BICYCLE	9	8	13 3			
	10 - 14	OPED OR MOTORIZED	16 EXPLACOUNDATE 22 - 4			TRAIN	<u></u>	8 11	<del> </del>			
		LL TERRAIN VEHICLE	17 - MOTORHOME	NIMAL-DE	RAWN VEHICLE 99	UNKNOWN OR HIT/SKIP	/a	シ河間	13 /4			
11	# of TRAILING UNITS						<b>u</b> .	VI.				
							11 12	6	5 11 12			
T.	WAS VEHICLE OPERATING IN AL		0 - NO AUTOMATION 3	- CONDITI	ONAL AUTOMATION	9 - UNKNOWN		•				
> .	MODE WHEN CRASH OCCURRE	or   0	1 - DRIVER ASSISTANCE 4	- HIGH AU	TOMATION		"/ ` "[[]' ' \"	ĺ	"/ ` <u>   @   </u>			
2	1-YES 2-NO 9-OTHER/L	JNKNOWN AUTONOMOL	JS 2 - PARTIAL AUTOMATION 5				10 2 2	٦,				
		MODE LEVEL						J°				
	1 - NONE	6 - BUS - CHARTER/TOUR	R 11 - FIRE	16 - FA	RM	21 - MAIL CARRIER		7,	て、損り損して 1			
. 1 .	2 - TAXI	7 - BUS - INTERCITY	12 - MILITARY		OWING	99 - OTHER / UNKNOWN		•	* <			
SPECIAL	3 - ELECTRONIC RIDE SHARING	8 - BUS - SHUTTLE	13 - POLICE		NOW REMOVAL		7		7			
FUNCTION	4 - SCHOOL TRANSPORT	9 - BUS - OTHER 10 - AMBLILANCE	14 - PUBLIC UTILITY  1S - CONSTRUCTION EQUI	19 - TC	OWING AFETY SERVICE		•		•			
	S - BUS - TRANSIT/COMMUTER	l Amobbase	is construction equi		TROL			12	12 12			
_	1 - NO CARGO BODY TYPE	4 - LOGGING	7 - GRAIN/CHIPS/GRAVEL	11 - DI	IMP	99 - OTHER / UNKNOWN	12	å				
1 1	/ NOT APPLICABLE	5 - INTERMODAL	B - POLE		ONCRETE MIXER	33 - OTHER / BARAGHA	ด็ด	<b>८</b> *\				
CARGO	2 - BUS	CONTAINER CHASSIS	9 - CARGO TANK		JTO TRANSPORTER		R A R.		9 🕶 3			
BODY	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	6 - CARGOVAN /ENCLOSED BOX	10 ~ FLAT BED		ARBAGE/REFUSE		, CVD,					
TYPE	ANOTHER MOTOR VEHICLE	VENCTORED BOX			·		-	T	<b>(</b>			
1	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES		TOR TROUBLE	99 - OTHER / UNKNOWN	6	g				
VEHICLE	2 - HEAD LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT DEFECTIVE		Sabled from Prior Cident			6	6 6			
DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	Ac	CIDENT		П		П.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	4 DIFFERENCE OF						☐- NO DAMA	GE[U]	L- UNDERCARRIAGE [ 14 ]			
	1 - INTERSECTION - MARKED CROSSWALK	4 - MIDBLOCK - MARKED CROSSWALI	7 - SHOULDER/ROADSIDE  K 8 - SIDEWALK		RIVEWAY ACCESS HARED USE PATHS	99 - OTHER / UNKNOWN	TOP[13]		X- ALL AREAS [ 15 ]			
	2 - INTERSECTION -	S - TRAVEL LANE -	6 - SIDEWALK	OF	R TRAILS							
LOCATION AT IMPACT	UNMARKED CROSSWALK 3 - INTERSECTION - OTHER	OTHER LOCATION 6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND		RST RESPONDER		L	- UNIT NOT	AT SCENE[16]			
ALIMITAGE			9 - LEAVING TRAFFIC		INCIDENT SCENE	NA CTANDING OUTCOM		····				
	1 - NON-CONTACT	1 - STRAIGHT AHEAD 2 - BACKING	LANE		'ALKING, RUNNING, IGGING, PLAYING	21 - STANDING OUTSIDE DISABLED VEHICLE			FCONTACT			
, 3 ,	2 - NON-COLLISION 1	3 - CHANGING LANES	10 - PARKED	16 - W	ORKING	99 - OTHER / UNKNOWN	0 - NO DA		14 - UNDERCARRIAGE			
	3 - STRIKING	4 - OVERTAKING/PASSING			JSHING VEHICLE		,		15 - VEHICLE NOT AT SCENE			
ACTION		5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	IN TRAFFIC 12 - DRIVERLESS		PPROACHING OR AVING VEHICLE		DIA	GRAM	99 - UNKNOWN			
	S - BOTH STRIKING	7 - MAKING U-TURN	13 - NEGOTIATING A CURVI				13 - TOP					
	& STRUCK	8 - ENTERING TRAFFIC	14 - ENTERING OR CROSSIN			т		7.0				
	9 - OTHER / UNKNOWN	LANE	SPECIFIED LOCATION		TO A TILL OF THE T	22 Agrania # 22		TRAF				
	1 - NONE 2 - FAILURE TO YIELD	ACDA /ACDA	SE 13 - IMPROPER START FROM A PARKED POSITION		ERATING DEFECTIVE	23 - OPENING DOOR INTO ROADWAY	TRAFFICWAY FLOW		TRAFFIC CONTROL			
	3 - RAN RED LIGHT	9 - IMPROPER LANE	14 - STOPPED OR PARKED		AD SHIFTING	99 - OTHER IMPROPER	1 - ONE-WAY		1 - ROUNDABOUT 4 - STOP SIGN			
1 1	4 - RAN STOP SIGN	CHANGE	ILLEGALLY		alling/spilling	ACTION	2 - TWO-WAY	, h	2 - SIGNAL 5 - YIELD SIGN			
CONTRIBUTE	S - UNSAFE SPEED  NG 6 - IMPROPER TURN	10 - IMPROPER PASSING 11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY		PROPER CROSSING ING IN ROADWAY				3 - FLASHER 6 - NO CONTROL			
O CONTRIBUTE CIRCUMSTAN	CES 7 - LEFT OF CENTER	12 - IMPROPER BACKING	17 - VISION OBSTRUCTION		OT DISCERNIBLE		# OF THROUGH LANES	R	AIL GRADE CROSSING			
SEQUENCE							ON ROAD	1	- NOT INVLOVED			
SEOUENCE	OF EVENTS		and the second of the second o		· · · · · · · · · · · · · · · · · · ·	MEMORY MESS SEASON ON THE ASSESSMENT CONSIDER THE CONTRACT	, 2 ,	, , 2	- INVOLVED-ACTIVE CROSSING			
320021101	1 - OVERTURN/ROLLOVER	7 - CEDADATION OF THETE	EVENTS	40 *-	JIMA) OTHER	32 STRING ON CALLER	<u></u>	з	- INVOLVED-PASSIVE CROSSING			
1 20	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS B - RAN OFF ROAD RIGHT	12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLUSIO			23 - STRUCK BY FALLING, SHIFTING CARGO OR						
	3 - IMMERSION	9 - RAN OFF ROAD LEFT	14 - PEDESTRIAN	TR	ANSPORT	ANYTHING SET IN	UNIT / I	OTOM-NOP	RIST DIRECTION			
2	4 - JACKKNIFE	10 - CROSS MEDIAN	15 - PEDALCYCLE		ARKED MOTOR	MOTION BY A MOTOR VEHICLE			NORTH S - NORTHEAST			
	↓ 5 - CARGO / EQUIPMENT LOSS OR SHIFT	11 - CROSS CENTERLINE - OPPOSITÉ DIRECTION	16 - RAILWAY VEHICLE 17 - ANIMAL - FARM		HICLE ORK ZONE	24 - OTHER MOVABLE			SOUTH 6 - NORTHWEST			
1	6 - EQUIPMENT FAILURE	OF TRAVEL	18 - ANIMAL - DEER	M	AINTENANCE	OBJECT	FROM 4 TO		EAST 7 - SOUTHEAST WEST B - SOUTHWEST			
3	The reserve of the second of t	en programme and the contract of the contract		DOCUMENT OF ME	UIPMENT	deren men um derkendeline eile	- rnom 10	4 -	9 - OTHER / UNKNOWN			
	25 - IMPACT ATTENUATOR		SION WITH FIXED OBJECT : 38 - OVERHEAD SIGN POST			52 - BUILDING			2 0.11/ 011010411			
4	/ CRASH CUSHION	32 - PORTABLE BARRIER	39 - LIGHT / LUMINARIES	46 - FE	NCE	53 - TUNNEL	UNIT SPEED		DETECTED SPEED			
	26 - BRIDGE OVERHEAD STRUCTURE	33 - MEDIAN CABLE BARRI 34 - MEDIAN GUARDRAIL	ER SUPPORT 40 - UTILITY POLE	47 - M 48 - TR		54 - OTHER FIXED OBJECT						
5	27 - BRIDGE PIER OR	BARRIER	41 - OTHER POST, POLE	49 - FIF	RE HYDRANT	99 - OTHER / UNKNOWN	. 20		1 - STATED / ESTIMATED SPEED			
	ABUTMENT	35 - MEDIAN CONCRETE	OR SUPPORT		ORK ZONE AINTENANCE							
6	28 - BRIDGE PARAPET 29 - BRIDGE RAIL	BARRIER 36 - MEDIAN OTHER BARR	42 - CULVERT IER 43 - CURB		UIPMENT	ĺ	POSTED SPEED		2 - CALCULATED / EDR			
	30 - GUARDRAIL FACE	37 - TRAFFIC SIGN POST	44 - DITCH	51 - W					2 (14)0777044470			
							25		3 - UNDETERMINED			

C	Some Day		IOTORIST / No	I-NC	VΙο	TOR	IST					LOCAL RE	PORT NU				
	UNIT #		T, FIRST, MIDDLE				-			┼		DATE OF BIRTH	100	T	AGE	GENDER	
	1		BEACHY, MICHAEL, E									08/19/2002 17					
1S		STREET, CITY	·							CONT		ONE - INCLUDE A	REA CODE			М	
TOR	101 LAKI	EVIEW DR	IVE APT 6, MILLERSBURG, C	)H, 4465	34					330-	275-61	79					
N-M	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED	TAKEN TO: N	REDICAL FACILITY (NAME,	CITY)	SAFETY EQUIPMENT USED	po	Т-Сомрыа	SEATING INT POSITION	AIR BA	S USAGE	EJECTION	TRAPPED	
NO/		BY 1							4	МС	HELMET	1 1	. 1		1	1	
SRIST	OL STATE	OPERATOR	LICENSE NUMBER		OFFEN	SE CHARG	ED	LOCAL	OFFENSE DESCRI	PTION	CITAT	ION NU	MBER				
MOT	OH	UW74946			4511.	43			RIGHT-OF-W		.,,		_	1F8YS8U			
	OL CLASS	ENDORSEM	DIST			i	HOL / DRUG SUSP		CONDITION	STATUS	TYPE	VALUE	STATUS	DRUG	RESULTS	SELECT UP TO 4	
	4		3	ВУ	1	OTHE	R DRUG		1	1	1		1	1			
ľ	UNIT #	NAME: LAST, FIRST, MIDDLE									ı	DATE OF BIRTH			AGE	GENDER	
	2										(	07/19/1983			36	М	
RIST	ADDRESS: STREET, CITY, STATE, ZIP  302 MILLERSBURG STREET, HOLMESVILLE, OH, 44633								1		ONE - INCLUDE A	REA CODE					
MOTOR	302 MILL		STREET, HOLMESVILLE, OF	1, 44633		TAKEN TO.	REDICAL FACILITY (NAME,	c:20	SAFETY EQUIPMENT	681-	220-40	65 SEATING	AIR GA	3 USAGE	EJECTION	TRAPPED	
M-NON/	3	TAKEN	HOLMES FIRE #1		MANUNED	TAKEN TO:N	TEDILAL FALILIT (NAME,	UIT)	USED		T-COMPLIA	NOT POSITION					
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DTORIST	wv	F138831			O TEN	JE CHANG		CODE	OFFERSE DESCRI	717011			Cita	1014 140	MIDER		
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ı					RACTED	1—				STATUS	TYPE	VALUE	STATUS	TYPE	RESULTS	SELECT UP TO 4	
4	4	M			1	OTHE	R DRUG		1	1	1		1	1	1		
	UNIT #	NAME: LAS	T, FIRST, MIDDLE								•	DATE OF BIRTH			AGE	GENDER	
5	ADDRESS:	STREET, CITY	STATE, ZIP							CONT	ACT PHO	ONE - INCLUDE A	PEA CODE				
TOR												7110000					
N-MC	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED	TAKEN TO: R	MEDICAL FACILITY (NAME,	CITY)	SAFETY EQUIPMENT	po	T-Complia	SEATING INT POSITION	AIR BA	G USAGE	EJECTION	TRAPPED	
ON/		ву								Шмс	HELMET						
ORIST	OL STATE	OPERATOR	LICENSE NUMBER		OFFEN:	SE CHARG	ED	LOCAL CODE	OFFENSE DESCRI	PTION CITATION NUMBER							
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1	INJU	JRIES	SEATING POSITION	The NOT DE	AIR BAC	5	OL CLA	SS				VER DISTRA	1 100 100 100 100		STSTA	TUS	
2 -	SUSPECTED	***	(MOTORCYCLE DRIVER)	2 DEPLOY	ED FRON	т"	1 - CLASS A. 2 - CLASS B.		1 - ALCOHOL INTER DEVICE 2 - CDL INTRASTATE	1 1	2 - N	IANUALLY OPERAT			REFUSED		
3 -	SUSPECTED		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE	4 - DEPLOY			3 - CLASS C	e, ''	3 - CORRECTIVE LEN		, c	OMMUNICATION I	DEVICE	CON		D SAMPLE	
1	INJURY POSSIBLE IN		(MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE	5 - NOT AP 9 - DEPLOY			(OHIO = D)	SS .	S - EXCEPT CLASS A		3 T	IALING) ALKING ON HAND		4 - TEST		ŽN:	
5 -	NO APPAREI	nt injury *	6 - SECOND - RIGHT SIDE	, . E	JECTIO	N.	5 - M/C MOPED		8. CLASS B BUS 7 - EXCEPT TRACTO 8 - INTERMEDIATE L		4 - T	OMMUNICATION I ALKING ON HAND OMMUNICATION I	-HELD	S - TEST			
	<i>b</i> ,	TAKEN B	B - THIRD - MIDDLE	1 - NOT EI	ECTED	* .,*.	6 - NO VALID OL		RESTRICTIONS 9 - LEARNER'S PERM	٠.	,5-0	THER ACTIVITY W	THAN			ST TYPE	
	/TREATED		10 - SLEEPER SECTION	2 - PARTIAL 3 - TOTALL 4 - NOT AF	Y EJECTED	) ji +	OL ENDORS	EWIEN	RESTRICTIONS 10 - LIMITED TO DA		6 - P.	ASSENGER THER DISTRACTIO	N	1 - NON 2 - BLOC	D ·	*,	
15	POLICE *		11 - PASSENGER IN		RAPPE		M - MOTORCYCI	.E.,	ONLY 11 - LIMITED TO EM		n 8-0	ISIDE THE VEHICLE THER DISTRACTIO	N ·	3 - URIN 4 - BREA	тн 🦠		
	OTHER / LI	NKNOWN	OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)		P - PASSENGER 2 - EXTRICATED BY			12 - UMITED - OTHE 13 - MECHANICAL D	9 OTHER / UNKNOWN			S- OTHER					
5	AFETY E	QUIPMEN	TO DACCENICED IN	MECHA	NICAL ME		Q - MOTOR SCO		(SPECIAL BRAKE CONTROLS, OR ADAPTIVE DEVI				DRUG TEST TYPE 1 - NONE 2 - BLOOD				
2 -	NONE USED SHOULDER		13 TRAILING UNIT 14 RIDING ON VEHICLE			AL MEANS	R - THREE-WHEE MOTORCYCL	E	14 - MILITARY VEHICL	CLES ONL	y 2 - PI 3 - EI	HYSICAL IMPAIRM MOTIONAL (E.G.,	ENT	3 - URIN 4 - OTHE	E 🦠		
3 -	USED LAP BELT ON		EXTERIOR (NON-TRAILING UNIT)				T - DOUBLE & TE	5.29	WITHOUT AIR B	WITHOUT AIR BRAKES DEPRESSED, ANGRY, (6 - OUTSIDE MIRROR DISTURBED)				DRUG TEST RESULT(S)			
	SHOULDER (	,	15 - NON-MOTORIST 99 - OTHER / UNKNOWN				TRAILERS		17 - PROSTHETIC AID 4 ILLNESS 18 - OTHER 5 - FELL ASL			LL ASLEEP, FAINTE	1 - AMPHETAMINES  EEP, FAINTED, 2 - BARBITURATES				
	- FORWARD				, .	1.,*		•	* * * * * * *	FATIGUED, ETC. 6 - UNDER THE INFLUENCE (			3 - BENZODIAZEPINES OF 4 - CANNABINOIDS				
	- REAR, FACI BOOSTER SE						GEND!	:R			, Al	EDICATIONS / DRU LCOHOL THER / HINKNING			res / Opio	ilDS	
8 -	HELMET USE				**		M - MALE	Morris	1			THER / UNKNOWN	1	7 - OTHE 8 - NEGA	R TIVE RESU	LTS	
	(ELBOWS, KI - REFLECTIVE	NEES, ETC)				A STATE OF THE STA	U - OTHER / UNK	NWOWN						3	4	* * *	
		PEDESTRIAN			en en en est		4			\$ 5		4 4		Ŷ <b>\</b>		a C	
Iqq	- OTHER / UI		主体部の観点化 マー・直接側	State of		WELFT.	Alex sines	4.	the state of the		** # 13 13 m	3". "	1 Dog	2.2	3	82 3.	

WHITE   WANTE LATE, FREST, MIDGLE	OHIO DEPARTMENT	OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER						
WENGERD, JOE C			na na		D 1660	AGE	AGE CONTRACT							
MODRES   SPECT CITY STATE   200   MARKET PRISONS   MARK														
SAME STREET, FOUNDED   SAME ASSESSMENT STREET, HOUSE   SAME STREET, HOUSE STREET, HO											I M			
INJURIES				4					EA CODE					
Mark				INJURED TAKEN TO: MEDICAL FACILITY (N	IAME, CITY)	SAFETY EQUIPMENT	350 213 0503		AIR BAG USA	GE EJECTIO	N TRAPPE			
DATE OF BIRTH	TAKEN				•				,		١.			
2 MILLS, KATIE_J  10006855 STREET, TOT, YITATE, 2P  10006855 STREET, TOT, YITATE, 2P  10006855 STREET, TOT, WITATE, 2P  10006855 STREET, CITY, WITATE, 2P  100068655 STREET, CITY, WITATE, 2P  10006855 STREET, CITY, WITATE, 2P  100068655 STREET, CITY, WITATE, 2P  100068655 STREET, CITY, WITATE, 2P  100068655 S						4								
DOPMERS PRETCHY CHARLES  DATE OF BETTH  AGE OFFI  DATE OFF														
102 MILLERSBURG STREET, HOLMESVILLE, OH, 44633   100410 TAINT NOMES AND POWER POWE										35	F			
INJURIES PROJECT (TAXAS FREE, ORDER)  NUMBES PROJECT (TAXAS FREE,			- OU 44633					- INCLUDE ARI	EA CODE					
JOEL POMERNE HOSPITAL  JOEL POMERNE HOSPITAL  JOEL POMERNE HOSPITAL  DATE OF BIRTH  AGE  GENT  AND MAKE LAST, FRIST, MIDDLE  NAME LAST, FRIST, MIDDL			2, Or1, 44033		IAME CITY)	SAFETY FOUIDMENT	304-931-2931	SEATING	AIR RAG USA	GE FIECTIO	N TRAPP			
UNIT # NAME LAST FRIST, MIDGLE  **POPURES STREET, CITY, STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE - VICLIDS AND USED   MARKETY POWER, CITY STATE, 2P**  **CONTACT PHONE -	TAKEN	i .		·				POSITION	l .					
INJURIES INJURID  INJURIES INJURIES INJURINS  INJ				JOEL POMERENE HOSPIT	AL	]			1		1			
INJURIES INJURED DATE AGENCY INAME!  UNIT A NAME LAST, REST, MIDDLE  AND BEAST STREET, CITY, STATE, 2IP  CONTACT PHONE - INJURIS SATELY EQUIPMENT USED  SATELY E	UNIT #   NAME D	AST, FIRST, MIDDLE					DA	TE OF BIRTH		AGE	GENDE			
UNIT # NAME LAST, FRST, MIDDLE  NUMBES STREET, CITY, STATE ZIP  CONTACT PHONE - MIGLIGE AREA CODE  NUMBES STREET, CITY, STATE ZIP  CONTACT PHONE - MIGLIGE AREA CODE  NUMBES STREET, CITY, STATE ZIP  CONTACT PHONE - MIGLIGE AREA CODE  SEATING POSITION  ARE RAG USAGE LICETON   TRANSPORTED    PER AGENCY INAMED  INJURIES  INJURIES  NUMBES   SAFETY EQUIPMENT USED    SEATING POSITION   ARE RAG USAGE LICETON   TRANSPORTED    PER AGENCY INAMED    1	ADDRESS: STREET, CIT	TY, STATE, ZIP					CONTACT PHONE	- INCLUDE AR	EA CODE		<u> </u>			
UNIT # NAME LAST, FRST, MIDDLE  NUMBES STREET, CITY, STATE ZIP  CONTACT PHONE - MIGLIGE AREA CODE  NUMBES STREET, CITY, STATE ZIP  CONTACT PHONE - MIGLIGE AREA CODE  NUMBES STREET, CITY, STATE ZIP  CONTACT PHONE - MIGLIGE AREA CODE  SEATING POSITION  ARE RAG USAGE LICETON   TRANSPORTED    PER AGENCY INAMED  INJURIES  INJURIES  NUMBES   SAFETY EQUIPMENT USED    SEATING POSITION   ARE RAG USAGE LICETON   TRANSPORTED    PER AGENCY INAMED    1														
UNIT P NAME LAST, FRST, MIDDLE  NAME LAST, FRS	INJURIES INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (N	VAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT		AIR BAG USA	GE EJECTIO	N TRAPP			
INJURIES INJURED EMS AGENCY (VAMED)  INJURIES INJURED EMS ELT ONLY USED INJURY INJURED EMS ELT ONLY USED INJURED EAST INJURY INJURY INJURY INJURED EMS ELT ONLY USED INJURED EMBORIA E						<u>.</u>	MC HELMET		,					
INJURIES INJURIES SATETY EQUIPMENT USED  1. FATAL  2. SUSPECTED SERIOUS INJURY 2. SHOULDER BELT ONLY USED 3. SUSPECTED SERIOUS INJURY 3. LAP BELT ONLY USED 4. SPONDLER BELT ONLY USED 5. NO. APPARENT INJURY 5. NO. APPARENT INJURY 6. SCONDLER'S BELT ONLY USED 6. SECOND MIDDLE 7. FRONT LET'S IDE 7. SECOND MIDDLE 7. SECOND MIDDLE 8. SECOND LET'S IDE 7. SECOND MIDDLE 8. SECOND LET'S IDE 7. SHOULDER BELT ONLY USED 8. SECOND LET'S IDE 8. SECOND MIDDLE 9. FRONT RIGHT SIDE 9. OFTENANDORIED 1. NOTTRANSPORTED 1. NOTRANSPORTED 1. NOTTRANSPORTED 1. NOTTRANSPORTED 1. NOTTRANSPORTED 1. NOTTRANSPO	UNIT # NAME: L	AST, FIRST, MIDDLE		,			DA	TE OF BIRTH		AGE	GENDE			
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INJURIES  SAFETY EQUIPMENT USED  SEATING POSITION  AIR BAG USAGE  1 - FATAL  1 - NONE USED  1 - FRONT - LEFT SIDE	ADDRESS: STREET, CI	TY, STATE, ZIP					CONTACT PHONE	- INCLUDE ARE	A CODE					
INJURIES  SAFETY EQUIPMENT USED  SEATING POSITION  AIR BAG USAGE  1 - FATAL  1 - NONE USED  1 - FRONT - LEFT SIDE	IN HIDITE IN HIDED	Tette to an annual and an		INIO IDEN TARENT TO BETWEEN PROCESSO		CAPETY FOLUDATAIT		SEATING	AID FAC US	SE FIECNIO	N TRADE			
INJURIES  SAFETY EQUIPMENT USED  1 - FATAL  1 - NONE USED  VEHICLE OCCUPANT  SUSPECTED SERIOUS, INJURY  3 - SUSPECTED SERIOUS, INJURY  3 - SUSPECTED MINOR INJURY  3 - SUSPECTED MINOR INJURY  3 - LAP BELT ONLY USED  4 - POSSIBLE INJURY  5 - NO. APPARENT INJURY  5 - NO. APPARENT INJURY  5 - NO. APPARENT INJURY  5 - CHILD RESTRAINT SYSTEM  FORWARD FACING  1 - FRONT - LEFT SIDE  MOTORCYCLE SIDE DELY - DEPLOYED SIDE  4 - DEPLOYED BOTH  FRONT/SIDE  5 - SECOND - RIGHT SIDE  6 - SECOND - RIGHT SIDE  7 - HIRD - LEFT SIDE  MOTORCYCLE SIDE CAR)  MOTORCYCLE SIDE CAR)  MOTORCYCLE SIDE CAR)  FORWARD FACING  7 - HIRD - LEFT SIDE  MOTORCYCLE SIDE CAR)  MOTORCYCLE SIDE CAR)  MOTORCYCLE SIDE CAR)  FORWARD FACING  8 - HELMET USED  9 - OTHER / UNKNOWN  9 - PROTECTIVE PADS USED  (ELBOWS, KNEES, ETC)  CARGO AREA MONTRAUMS UNIT  10 - REFLECTIVE COTHING  11 - PASSENGER IN OTHER RELOSED  12 - PASSINGER IN OTHER RELOSED  13 - SECOND - RIGHT SIDE  4 - DEPLOYED BOTH  FRONT/SIDE  5 - NOT APPLICABLE  1 - FORM T SIDE  4 - DEPLOYED BOTH  FRONT/SIDE  5 - NOT APPLICABLE  5 - NOT APPLICABLE  1 - NOT APPLICABLE  1 - FRONT - LEFT SIDE  MOTORCYCLE SIDE CAR)  MOTORCYCLE SIDE  4 - DEPLOYED BOTH  FRONT/SIDE  5 - NOT APPLICABLE  5 - NOT APPLICABLE  5 - NOT APPLICABLE  1 - NOT EJECTED  1 - NOT EJECTED  2 - PARTIALLY EJECTED  1 - NOT EJECTED  1 - NOT EJECTED  2 - PARTIALLY EJECTED  1 - NOT APPLICABLE  1 - NOT MADDIAL MEANS  1 - RIGHT OF BIRTH  AGE  GEN  ADDRESS STREET, CITY, STAT. ZIP  ADDRESS STREET, C	TAKEN	EMS AGENCY INAME		INDURED PACIFIC TO MEDICAL PACIFITY (N	inme, city	SAFETT EQUIPMENT			AIR BAG 03	or Beeno	I I I I			
1 - FATAL 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 3 - LAP BELT ONLY USED 4 - POSSIBLE INJURY 5 - NO. APPARENT INJURY 6 - CHILD RESTRAINT SYSTEM - FORWARD FACING - SECOND MIDDLE - SECOND MIDDL	) <sup>87</sup> L													
NAME: LAST, FIRST, MIDDLE  CARTER, CLAYTON, C  ADDRESS: STREET, CITY, STATE, ZIP  CONTACT PHONE - INCLUDE AREA CODE  4354 CR 50, GLENMONT, OH, 44628  NAME: LAST, FIRST, MIDDLE  DATE OF BIRTH  AGE  GENI  YODER, TAYLOR, B  ADDRESS: STREET, CITY, STATE, ZIP  CONTACT PHONE - INCLUDE AREA CODE  1607 STRAUSBURG BOLIVAR ROAD, BOLIVAR, OH, 44612  NAME: LAST, FIRST, MIDDLE  DATE OF BIRTH  AGE  GENI  CONTACT PHONE - INCLUDE AREA CODE  330-275-4741  NAME: LAST, FIRST, MIDDLE  DATE OF BIRTH  AGE  GENI  CONTACT PHONE - INCLUDE AREA CODE  330-275-4741	4 - POSSIBLE IN 5 - NO APPAREI INJURE 1 - NOT TRANSI TREATED AT 2 - EMS 3 - POLICE 9 - OTHER / UN  G F - FEMALE M - MALE	JURY  NTINJURY  D TAKEN BY  PORTED: / SCENE  KNOWN  ENDER	4 - SHOULD 5 - CHILD F FORWA 6 - CHILD F REAR F 7 - BOOSTE 8 - HELMET 9 - PROTEC (ELBOW 10 - REFLEC 11 - LIGHTI	DER & LAP BELT USED ESTRAINT SYSTEM RD FACING ESTRAINT SYSTEM ACING R SEAT USED TIVE PADS USED TIVE CLOTHING NG - PEDESTRIAN LE ONLY	4 - SECO (MOT 5 - SECO 7 - THIRI 9 - THIRI 10 - SLEI 11 - PAS CAR 12 - PAS 13 - TRA 14 - RIDI 15 - NOI	ND - LEFT SIDE ORCYCLE PASSE ND - MIDDLE IND - RIGHT SIDE ORCYCLE SIDE O O- MIDDLE OF RIGHT SIDE OF RIGHT OF	E- AR) F TRUCK CAB ER ENCLOSED RAILING UNIT P WITH CAP) ENCLOSED  EXTERIOR	4DEPLI FRON 5 - NOT 9 - DEPLI 1 - NOT 2:-PART 3TOTA 4 - NOT 1 - NOT 2 - EXTRI MECH 3 - FREEL	DYED BOT TYSIDE APPLICABI DYMENT I  EJECT EJECTED ALLY EJECT APPLICABI TRAP TRAPPED CATED BY IANICAL-N D BY	H  INKNOW  ION  ITED  ED  LE  PED  MEANS				
ADDRESS: STREET, CITY, STATE, ZIP  4354 CR 50, GLENMONT, OH, 44628  NAME: LAST, FIRST, MIDDLE  DATE OF BIRTH  AGE  GENI  YODER. TAYLOR, B  ADDRESS: STREET, CITY, STATE, ZIP  CONTACT PHONE - INCLUDE AREA CODE  330-275-4741  AGE  GENI  AGE  GENI  AGE  GENI  AGE  GENI  AGE  AGE  AGE  AGE  AGE  AGE  AGE  AG	NAME: LAST, FIRST, N	MIDDLE	Maria de la Constancia	a anto a mentra de la distribución de la contra del la contra	Sec. communication		ele morre, si alla elevativa della della della elevativa della elevativa della elevativa della elevativa della	TE OF BIRTH	A Control of the Cont	AGE	GENDE			
4354 CR 50, GLENMONT, OH, 44628  NAME: LAST, FIRST, MIDDLE  YODER, TAYLOR, B  ADDRESS: STREET, CITY, STATE, ZIP  11607 STRAUSBURG BOLIVAR ROAD, BOLIVAR, OH, 44612  NAME: LAST, FIRST, MIDDLE  DATE OF BIRTH  AGE  GENI  AGE  AGE  AGE  AGE  AGE  AGE  AGE  AG										19	М			
NAME: LAST, FIRST, MIDDLE  YODER, TAYLOR, B  ADDRESS: STREET, CITY, STATE, ZIP  11607 STRAUSBURG BOLIVAR ROAD, BOLIVAR, OH, 44612  NAME: LAST, FIRST, MIDDLE  DATE OF BIRTH  AGE  GENI  CONTACT PHONE - INCLUDE AREA CODE  330-275-4741  DATE OF BIRTH  AGE  GENI  AGE  GENI									EA CODE					
YODER, TAYLOR, B  08/06/2003 16 M  ADDRESS: STREET, CITY, STATE, ZIP  11607 STRAUSBURG BOLIVAR ROAD, BOLIVAR, OH, 44612  NAME: LAST, FIRST, MIDDLE  08/06/2003 16 M  CONTACT PHONE - INCLUDE AREA CODE  330-275-4741  DATE OF BIRTH AGE GENI										AGE	GENDI			
ADDRESS: STREET, CITY, STATE, ZIP  11607 STRAUSBURG BOLIVAR ROAD, BOLIVAR, OH, 44612  NAME: LAST, FIRST, MIDDLE  CONTACT PHONE - INCLUDE AREA CODE  330-275-4741  DATE OF BIRTH  AGE  GENI											М			
NAME: LAST, FIRST, MIDDLE DATE OF BIRTH AGE GENI		·							EA CODE		1 141			
	11607 STRAUSBI	URG BOLIVAR ROAD, BO	LIVAR, OH,	14612			330-275-4741							
ADDRESS, CIDET CITY CITY CITY III	NAME: LAST, FIRST, N	MIDDLE		-			DA	TE OF BIRTH		AGE	GENDE			
											<u> </u>			