UHO LIEPARTIO	err 🛖	_		D										12520		
TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT LOCAL REPORT NUMBER * 20MPD0135											•					
	`	=		REPORTING AGE	NCY NAME *		_		N	CIC *	,	NUMBER OF L		UNIT IN ERROR		
SECONDARY CI		VATE PROP	ERTY N	Millersburg					03	3801	1 - SOLVED 2 - UNSOLVED	2	1	98 - ANIMAL 99 - UNKNOWN		
COUNTY* LOCAL	1 - CITY	11-15-15-15-16-16-16-16-16-16-16-16-16-16-16-16-16-		V. VILLAGE. TOWNSH	ρ*						CRASH DATE	TIME*	1 -	SH SEVERITY FATAL		
38 2 2 - VILLAGE Millersburg											02/02/2020 10:10 5 2 - SERIOUS INJU					
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 2 - SOUTH 2 - SAST 4 - WEST WEST										ROAD TYPE		LATITUDE DECIMAL DEGREES SUSPECTED 3 - MINOR INJUR				
		4 -	AAE21	Washington					4	ST	40.5355		4 -	SUSPECTED INJURY POSSIBLE		
ROUTE TYPE RO	UTE NUMBER	2	SOUTH EAST	REFERENCE ROA		AD, MILEPO	ST, HO	USE #)		ROAD TYPE	LONGITUDE DE			PROPERTY DAMAGE		
- I	D		WEST	1532 S Wash							-81.9167	INTERSECTI	ON DELATE	ONLY		
1 - INTERSECT	FRO	M REFERENCE	TH IR-I	ROUTE TY NTERSTATE ROU		AL - ALLEY		HW - HIGHWA	AY R	D - ROAD	WITHIN INTER					
3 - HOUSE #	·	2 - SOUT 3 - EAST	н	FEDERAL US ROL		AV - AVEN		LA - LANE MP - MILEPOS		Q - SQUARE T - STREET						
DISTANCE		4 - WEST	SR -	STATE ROUTE		CR - CIRCL	.E	OV - OVAL	T	E - TERRACE	WITHIN INTER		NUM DWAY	BER OF APPROACHES		
FROM REFERENCE	UNI	OF MEASURI	S	NUMBERED COU		CT - COUR DR - DRIVI	Ε	PK - PARKWAY		L - TRAIL VA - WAY	TV DO A DIVINO		JVVAY			
		2 - FEET 3 - YARI	1000	ROUTE	N2HIP	HE - HEIGH	HTS	PL - PLACE		TERMS !	X ROADWAY D	IVIDED				
1 - ON RC	CATION OF FIF DADWAY		UL EVENT		1 -			H COLLISION/I		ст	DIRECTION OF TRAV		MEDIA	01 D-90000000		
1 2 - ON SI				ALLEY ACCESS	2	BETWEEN TWO MOTO	5	- BACKING			1 - NORTH 2 - SOUTH	9 .	(<4 FEET)	JSH MEDIAN		
4 - ON RC	DADSIDE	12 - SH	HARED USE	PATHS OR		VEHICLES IN	٥ /	- ANGLE - SIDESWIPE, SA	AME DI	IRECTION	3 - EAST 4 - WEST	2 -	DIVIDED FLU (≥4 FEET)	JSH MEDIAN		
5 - ON GO 6 - OUTSI	DRE IDE TRAFFIC W		KE LAN E			REAR-END		- SIDESWIPE, O	PPOSIT	TE DIRECTION				PRESSED MEDIAN		
7 - ON RA B - OFF R			OLL BOOTH THER / UNI		3 -	HEAD-ON	9	- OTHER / UNK	NOW	IN		9.	(ANY TYPE)	IKNOWN		
WORK ZONE RE	LATED			WORK ZONE		1	OCATIO	ON OF CRASH I	N WC	ORK ZONE	CONTOUR	CONDI	TIONS	SURFACE		
WORKERS PRES			1 -	LANE CLOSURE				- BEFORE THE 1	ST W		11	1	1	2		
LAW ENFORCEM		.			ANE SHIFT/ CROSSOVER WARNING SIGN 2 - ADVANCE WARNING AREA VORK ON SHOULDER						1 - STRAIGHT	1 - DRY	_	1 - CONCRETE		
	WEITH TRESERV			OR MEDIAN	R MEDIAN 3 - IKANSTION AREA						LEVEL 2 - STRAIGHT	2 - WET 3 - SNOW		2 - BLACKTOP, BITUMINOUS,		
ACTIVE SCHOO	L ZONE			OTHER	OR MOVING W	ORK		- TERMINATION		A	GRADE 3 - CURVE LEVEL	4 - ICE 5 - SAND, MI	JD. DIRT.	ASPHALT 3 - BRICK/BLOCK		
L	IGHT CONDIT	ION				WEA	THER		4 - CURVE GRADE OIL, GRAVEL 4 - SLAG, GRAVEL							
1 - DAYLII				_	LEAR LOUDY	6 - SI		ROSSWINDS			9 - OTHER /UNKNOWN	MOVING		5 - DIRT		
3 - DARK	- LIGHTED RO			-				SAND, SOIL, D	IRT, S	NOW		7 - SLUSH 9 - OTHER / I	JNKNOWN	9 - OTHER / UNKNOWN		
D 1000	 ROADWAY I UNKNOWN 				4 - RAIN 9 - FREEZING RAIN OR FREEZING DRIZZLE 5 - SLEET, HAIL 99 - OTHER / UNKNOWN											
	R / UNKNOWN	I			2.13 *C. 10.27 * 10.27 * 10.27 * 10.27 * 10.27 * 10.27 * 10.27 * 10.27 * 10.27 * 10.27 * 10.27 * 10.27 * 10.27	787345		1								
Unit one was tr	avolina Sou	thhound	on C 14/2	shinatan St	lait one are	scaadad				1	1	1 1				
through the int	ersection at	S. Washi	ngton St	. and Walmart	Dr. and rea		nit				100	i l		$\stackrel{\frown}{\sim}$		
two who was st	ationary de	lievering	mail at 1	532 S. Washin	gton St.					J		l (2		
									Jnit o			8		_		
									Jine C	5116 <u> </u>		(A) E (A)	B —	_		
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										=		i l	ington			
								Ur	nit tw	°		l l	Washington St			
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											1	. !				
CRASH REPOR	RTED DATE / T	IME		DISPATCH DAT	E / TIME		AR	RIVAL DATE /	TIME		SCENE CLEARED	DATE / TIME		REPORT TAKEN BY		
02/02/2	2020 10:10			02/02/2020				/02/2020 10			02/02/202		X	POLICE AGENCY		
TOTAL TIME	ОТН		TOTA		S NAME*		CHECKED BY OFFICE				W10111111 W 1 1 1 1 1 1 1 1 1 1 1 1 1 1		<u> </u>	MOTORIST		
ROADWAY CLOSED	INVESTIGAT	ION TIME	MINUT											UPPLEMENT RRECTION OR ADDITION		
0	0		39		OFFICER'S	BADGE NU	UMBER'	·		CHECKED BY	IN EXISTING REPORT SENT TO					

111



LOCAL REPORT NUMBER

DI PUBLI	UNU						20	OMPD0135					
UNIT # OV	VNER NAME: LAST, FIRST, M	IIDDLE (SAME AS DRIVER	5 G	WNER	PHONE: INCLUDE ARE	A CODE (SAME AS DRIVER)	DAMAGE						
					234-635	-0034	DAMAGE SCALE						
							1 - NONE	3 - FUNCTIONAL DAMAGE					
			7										
LOMMERCIA	L CARRIER: NAME, ADDRESS	, CITY, STATE, ZIP		COM	IMERCIAL CARRIER PM	JNE: INCLUDE AREA CODE							
PSTATE	CENSE PLATE #	VEHI	CLE IDENTIFICATION #		VEHICLE VEAR	VEHICLE MAKE	INDIC	ATE ALL THAT APPLY					
1					2012	CHEVROLET		.12					
INSURANC	-=		INSURANCE POLICY #		COLOR	VEHICLE MODEL	" -"E O	1 2					
VERIFIED		CE	FPKNBAN 30-5-6619970		SIL	SONIC	10/11/2	10 11 1 2					
		IN EMERGENCY	US DOT #	TOW	ED BY: COMPANY NA	AME		3 9 3					
hamod	Liming Liming	RESPONSE VE	HICLE WEIGHT GVWR/GCWR					- ESSE -					
DEVICE	HIT/SKIP UNIT	# OCCUPANTS	1 - ≤10K LBS. 2 - 10.001 - 26K tBS.			S# PLACARD ID#	8 / 1 - 5 / 4	* \ ' ' ' ' ' ' ' ' ' '					
EQUIPPED] 2 L	3 - > 26K LBS.	PL	ACARO L			12					
	DAMAGE SOLIT Comment of the Comm												
	(MINIVAN) 8 - MC	TORCYCLE 3-WHEELED	14 - SINGLE UNIT 20 - OT			1	house	ito 2					
UNIT TYPE	VEHICLE 9 - AU'		IS - SEMI-TRACTOR 21 - HE			}	9 (9 3 3					
			16 - FARM EQUIPMENT AN			1	hma						
	WHITE PAID MOVE CONTROL CONT												
							11 12	6 11					
						a - nuknomu	10	10					
2 .	VEE 3 NO 0 OTHER ALL						A 10 2 -						
	- 112 2 - 110 3 - OTHER / U			OLL AUI	- WINTER		9 3	3 9 3					
						1	[] [] [] []	■ ▼ → → → → → → → → → →					
						99 - OTHER / UNKNOWN							
SPECIAL FUNCTION 4							8	8					
		10 - AMBULANCE	15 - CONSTRUCTION EQUIP.					12 12 12					
1 1		4 - LOGGING	7 - GRAIN/CHIPS/GRAVEL	11 - DI	UMP	99 - OTHER / UNKNOWN	12						
CARGO 2			cic				o M o						
BODY 3		6 - CARGOVAN	9 - CARGO TANK				, (V), ,						
TYPE							6	Ŭ .					
						99 - OTHER / UNKNOWN		6 6 6					
VEHICLE ,	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	AC	CIDENT								
	LINTEDCECTION	4 NIDDLOCK	7 SHOWING MOADONS	10 00	TOURING ACCESC	OR OTHER CURINIONS	∐- NO DAMAGE	[[0] LJ- UNDERCARRIAGE[14]					
	MARKED CROSSWALK	MARKED CROSSV	MALK	11 - SH	HARED USE PATHS	33 - OTHER / GINKNOWIN	TOP [13]	- ALL AREAS (15)					
NON- 2 MOTORIST			•				П	UNIT NOT AT SCENE 16 1					
, 3 ,	. 1					99 - OTHER / UNKNOWN		-					
	PRE-CRASH		IRN IN TRAFFIC	18 - AF	PPROACHING OR		DIAGRAM						
5	5 - BOTH STRIKING						13 - TOP	33					
ç				20 - O	THER NON-MOTORIST	r		TRAFFIC					
	1 - NONE		CLOSE 13 - IMPROPER START FROM				TRAFFICWAY FLOW						
							1						
8						ACTION		h					
CONTRIBUTING	C INDRODED TURN	11 - DROVE OFF ROAL	D 16 - WRONG WAY	21 - LYI	ING IN ROADWAY								
CINCOINS FAIRCE	7 - LEFT OF CENTER	12 - IMPROPER BACKI	ING 17 - VISION OBSTRUCTION	22 - NC	OT DISCERNIBLE		1						
SEOUENCE C	OF EVENTS						_						
. + 20 +	1 - OVERTURN/ROLLOVER	7 - SEPARATION OF UN		19 - AN	NIMAL -OTHER .	23 - STRUCK BY FALLING,	<u>-</u>	3 - INVOLVED-PASSIVE CROSSING					
1 20	2 - FIRE/EXPLOSION	B - RAN OFF ROAD RIG	HT 13 - OTHER NON-COLUSION	20 - MI	OTOR VEHICLE IN	SHIFTING CARGO OR	UNIT / NO	N-MOTORIST DIRECTION					
)	4 - JACKKNIFE	10 - CROSS MEDIAN	15 - PEDALCYCLE	21 - PA	ARKED MOTOR	MOTION BY A MOTOR		1 - NORTH S - NORTHEAST					
•		OPPOSITE DIRECTI				24 - OTHER MOVABLE		3 . SAST 7 CONTINCACT					
3	6 - EQUIPMENT FAILURE	OF TRAVEL	18 - ANIMAL - DEER			307.2.	FROM 1 TO	2 4 - WEST 8 - SOUTHWEST					
	36 (MARKET ATTENDED			STRUCK	t	ra auguste		9 - OTHER / UNKNOWN					
4	/ CRASH CUSHION	32 - PORTABLE BARRIE	R 39 - LIGHT / LUMINARIES	46 - FE	NCE	53 - TUNNEL	UNIT SPEED	DETECTED SPEED					
- 1			AIL 40 - UTILITY POLE	48 - TR	EΕ	OBJECT							
5		BARRIER	41 - OTHER POST, POLE	50 - W	ORK ZONE		10	1 - STATED / ESTIMATED SPEED					
6	28 - SRIDGE PARAPET	BARRIER	42 - CULVERT	MA	AINTENANCE		BUCLEU COLEU	1 2 - CALCULATED / EDR					
·								3 - UNDETERMINED					
1	FIRST HARMFUL EVEN	т 1 м	OST HARMFUL EVENT				35	- managemental					



LOCAL REPORT NUMBER

DAMAGE SCALE	
DAMAGE	
20MPD0135	

10 12 12 12 19 9 6 5 5	2 3 9 10 11 11 12 12 12 14 15 16 17 16 17 18 18 19 19 19 19 19 19 19 19 19 19 19 19 19						
10 9 11 12 10 11 12 10 11 12 1 10 1 1 1 1 1	11 1 2 2 9 3 3 4 7 6 5 5 11 12 1 12 1 12 2 1 10 1 12 1 12 1						
9 6	9 6 3 9 6 3						
□- NO DAMA	GE[0] - UNDERCARRIAGE[14]						
TOP [13]	- ALL AREAS [15)						
	- UNIT NOT AT SCENE(16)						
0 - NO DA	TIAL POINT OF CONTACT AMAGE 14 - UNDERCARRIAGE FER TO UNIT 15 - VEHICLE NOT AT SCENE IGRAM 99 - UNKNOWN						
	TRAFFIC						
TRAFFICWAY FLOW	TRAFFIC CONTROL						
1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL S - YIELD SIGN						
2	6 3 - FLASHER 6 - NO CONTROL						
# OF THROUGH LANES	RAIL GRADE CROSSING						

UNIT# OV	VNER NAME: LAST, FIRST, M	IDDLE (SAME AS DRIVER)		OWNER	PHONE:INCLUDE AR	EA CODE (SAME AS DRIVER)		DAMAGE				
2 13	S POST OFFICE.				330-674	1-5846	DAMAGE SCALE					
	RESS: STREET, CITY, STATE, ZIP	(SAME AS DRIVER)					1 - NONE	3 - FUNCTIONAL DAMAGE				
56 S WASH	HINGTON ST. MILLE	RSBURG, OH, 44654					2 - MINOR DA	MAGE 4 - DISABLING DAMAGE				
Negrosa and an analysis of the second	L CARRIER: NAME, ADDRESS,			Con	MERCIAL CARRIER PH	ONE; INCLUDE AREA CODE		9 - UNKNOWN				
					THE COLUMN TO TH	Transcoot was coot		AMAGED AREA(S)				
ID STATE II	CENCE DI ATE #											
	CENSE PLATE #				10 10 KENNE	2014 100 A 1						
	315282						11	11 12				
INSURANC	SELF INSURED	ins.	URANCE PULICY #			157	12	12				
				7014	S. 505,000		10	2 10 11 1 2				
	TYPE OF USE	IIN EMERGENCY	US DOT #	IOW	ED BY: COMPANY N	IAME	2 -	\				
COMMERCI	AL X GOVERNMENT	RESPONSE	MEIGHT GVAND (GCM)		HAZARDOU	SMATERIAL	"_ HIII _					
INTERLOCK		# OCCUPANTS			ATERIAL CLAS		7 5 7	, , , , , , , , , , , , , , , , , , , 				
DEVICE EQUIPPED	HIT/SKIP UNIT	1 1	2 - 10.001 - 26K LBS.			1 1 1	, X	• 🗸 🚦				
,				١٢	LACARD		6 5	12 7 6				
								12				
20	(MINIVAN) 8 - MO		CINICICIINIT		THE RESERVE TO SHARE THE PARTY OF THE PARTY	NET EXPLORES SELECTION OF THE SELECTION	10/	" 1 2				
UNIT TYPE 3	- SPORT UTILITY 9 - AUT	OCYCLE	TRUCK 21 - H				· —					
	10 - MC	DI ED GIT ING TOTALED	- SEMI-TRACTOR			1000	3					
			- FARM EQUIPMENT		******		7.	7 5 7				
. 0 .	(ATV/L		- MOTORAOME				8 \	<				
	DF TRAILING UNITS						12 1	5 12				
	AS VEHICLE OPERATING IN AU		- NO AUTOMATION 3 -	CONDIT	ONAL AUTOMATION	9 - UNKNOWN	12	12				
	ODE WHEN CRASH OCCURRED	?				The constraint Constraint	10	2 10 11 1 2				
2 1	- YES 2 - NO 9 - OTHER / LIF						10 2 -	10 2				
		MODE LEVEL	TAKINAL AUTOMATION 3	TOLL AU			9 9 3	3 9 9 3				
1	- NONE	6 - BUS - CHARTER/TOUR	11 - FIRE	16 - FA	21 - MAIL CARRIER							
1 1 1	- TAXI	7 - BUS - INTERCITY	12 - MILITARY	17 - M	OWING	99 - OTHER / UNKNOWN	8	4 8				
	- ELECTRONIC RIDE SHARING		13 - POLICE				7 5	7 5				
SPECIAL FUNCTION 4	- SCHOOL TRANSPORT						0	6				
S	- BUS - TRANSIT/COMMUTER	IU - AMBULANCE	15 - CONSTRUCTION EQUIP.					12 12 12				
	- NO CARGO BODY TYPE	4 LOCGING	7 CDAIN/CHIOS/CDAVE	11 0	IMP	00 OTHER / INVIONAL	12	a t 🦳				
1 1 1	/ NOT APPLICABLE					39 - OTHER / UNKNOWN	0.0					
CAILOO	- BUS	CONTAINER CHASSIS					R. R.	9 3 9 1 1 3 9 10 3				
5001	- VEHICLE TOWING ANOTHER MOTOR VEHICLE		10 - FLAT BED									
TYPE	AROTHER MOTOR VEHICLE						Ó	• •				
	- TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES			99 - OTHER / UNKNOWN	0.					
VEHICLE	: - HEAD LAMPS TAIL LAMPS							6 6				
DEFECTS	- TAIL CAIVIES	U- TIRE BEOWOOT					O. NO DAMA	GE [0] - UNDERCARRIAGE [14]				
	· INTERSECTION -	4 - MIDBLOCK -	7 - SHOULDER/ROADSIDE	10 - Di	RIVEWAY ACCESS	99 - OTHER / LINKNOWN						
	MARKED CROSSWALK	MARKED CROSSWALK				yy omeny ommown	TOP [13]	- ALL AREAS [15]				
NON- 2 MOTORIST	- INTERSECTION - UNMARKED CROSSWALK	S - TRAVEL LANE -						UNIT NOT AT CCENE (16)				
	- INTERSECTION - OTHER	6 - BICYCLE LANE	ISLAND					UNIT NOT AT SCENE [16]				
1	- NON-CONTACT	1 - STRAIGHT AHEAD	9 - LEAVING TRAFFIC	15 - W	ALKING, RUNNING,	21 - STANDING OUTSIDE	INITI	AL POINT OF CONTACT				
2	- NON-COLLISION	2 - BACKING	LANE			DISABLED VEHICLE						
. 4	1 11					99 - OTHER / UNKNOWN	1 10 1 10 10 10 10 10 10 10 10 10 10 10					
	S STRIKING PRE-CRASH	TORRESTORMANY INSURANCE PROJECT TOWN BY COURSE TO										
	- STRUCK ACTIONS						12 100	99 - UNKNOWN				
•	& STRUCK					т	13 - 107					
g	- OTHER / UNKNOWN			20.0	THE RIVER WISHOUT			TRAFFIC				
	1 - NONE						TRAFFICWAY FLOW	TRAFFIC CONTROL				
	2 - FAILURE TO YIELD 3 - RAN RED LIGHT					The state of the s	1 - ONE-WAY					
. 1 .	4 - RAN STOP SIGN							6 2 - SIGNAL S - YIELD SIGN				
	S - UNSAFE SPEED							3 - FLASHER 6 - NO CONTROL				
CIRCUMSTANCE	6 - IMPROPER TURN 5 7 - LEFT OF CENTER			N=200 (=000	State and the state of the stat		# of TUROUGH LANGS	DAIL CRADE CROSSING				
	/ - LEFT OF CENTER	12 - IMPROPER BACKING	17 - VISION OBSTRUCTION	22 - NC) DISCERNIBLE		COLER GRADE ALEXA SERVICIONE					
SEQUENCE O	F EVENTS						2=1	2 - INVOLVED-ACTIVE CROSSING				
								3 - INVOLVED-PASSIVE CROSSING				
1 20								The Total Control of State Control Production National				
	3 - IMMERSION			TR	ANSPORT	ANYTHING SET IN	UNIT / N	ON-MOTORIST DIRECTION				
2												
	S - CARGO / EQUIPMENT LOSS OR SHIFT					24 - OTHER MOVABLE						
	6 - EQUIPMENT FAILURE			M	AINTENANCE	OBJECT	FROM 1 1 TO	2 3 - EAST 7 - SOUTHEAST				
3		ra application against	N www. Fiven en rec-			1.00	FROM 10 _					
31 1	25 - IMPACT ATTENUATOR											
4	4.J711.H212.J7111111.						UNIT SPEED	DETECTED SPEED				
						OBJECT						
5	27 - BRIDGE PIER OR	BARRIER	41 - OTHER POST, POLE	49 - FII	RE HYDRANT		0 1	1 - STATED / ESTIMATED SPEED				
9	ABUTMENT 28 - BRIDGE PARAPET							1 12 CALCHIAYED (500				
6	29 - BRIDGE RAIL	AL 36 - MEDIAN OTHER BARRIER 43 - CURB					POSTED SPEED	2 - CALCULATED / EDR				
~	30 - GUARDRAIL FACE	37 - TRAFFIC SIGN POST	44 - DITCH	51 - W	ALL		5-	3 - UNDETERMINED				
1	FIRST HARMFUL EVEN	t 1 Most i	HARMFUL EVENT				35					

OHEO DEEP	Motorist / Non-Motorist									LOCAL REPORT NUMBER 20MPD0135							
UNIT #	NAME: LAST, FIRST, MIDDLE										DATE OF BIRTH AGE GENDER						
1	O'CONNER, ELIZABETH, M										11/06/1960 59 F						
ADDRESS:	STREET, CITY	STATE, ZIP			-				CONT		ONE - INCLUE		EA CODE		-		
735 N R	AILROAD :	ST, KILLBUCK, OH, 44637							234-	635-00)34						
INJURIES 5	INJURED TAKEN	EDICAL FACILITY (NAME, O	city)	SAFETY EQUIPMENT	Про	DOT-COMPLIANT POSITION				USAGE	EJECTION	TRAPPED					
ON 5	ву 1							2	Шмо	HELME	1		1	Ĺ	1	1	
OL STATE	OPERATOR	LICENSE NUMBER		OFFENS	E CHARG	ED	LOCAL	OFFENSE DESCRI	PTION				CITAT	ION NL	MBER		
он	RL609447																
OL CLASS	ENDORSEM	RESTRICTION SELECT UP TO 3	DRIV			OL / DRUG SUSPE		CONDITION		T	OL TEST		DRUG TEST(S)				
4		3	BY .	RACTED		HOL MARIJU R DRUG	JANA	1	STATUS 1	TYPE 1	VALUE	1	STATUS 1	TYPE 1	RESULTS	SELECT UP TO 4	
UNIT #	NAME: LAS	T, FIRST, MIDDLE			Шоіны	-					DATE OF BIR	TH	,	Ť	AGE	GENDER	
2	100 - 200 - 10 - 12 - 12 - 12 - 12 - 12	RENEEN, DIAN									09/29/196				57	F	
	STREET, CITY								CONT		ONE - INCLUE		FA CODE		57	F	
₹		TE 206, WALHONDING, OH	, 43843							317-00		24 200	LA CODE				
		EMS AGENCY (NAME)		INJURED	TAKEN TO: N	SEDICAL FACILITY (NAME.	CITY)	SAFETY EQUIPMENT			SEATIN		AIR BA	G USAGE	EJECTION	TRAPPED	
5 5	TAKEN BY 1							USED 2	11 1	T-COMPLE HELME		DN	١,	ſ	1	1	
		LICENSE NUMBER		OFFENS	E CHARG	ED .	LOCAL	OFFENSE DESCRI	PTION				-	ION NU	JMBER		
OL STATE OH	RG03194	2		100 100000			CODE					Cirki					
OL CLASS	ENDORSEM		DRIV	/ED	ALCOH	IOL / DRUG SUSPE		CONDITION	А	ALCOHOL TEST				DRUG TEST(S)			
0.100		NESTRICITOR SELECT OF 10 9	DIST	RACTED				CONSTITUTION	STATUS	TYPE	VALUE	- [STATUS	TYPE		SELECT UP TO 4	
4			ВУ	1	OTHE	R DRUG		1	1	1			1	1			
UNIT #	NAME: LAS	T, FIRST, MIDDLE									DATE OF BIR	тн			AGE	GENDER	
4	STREET, CITY	, STATE, ZIP							CON	ACT PH	ONE - INCLUS	DE ARE	EA CODE				
Š —————				T				I			SEATIR				T	. [
INJURIES	INJURED TAKEN TO: M					REDICAL FACILITY (NAME,	CiTY)	SAFETY EQUIPMENT USED				ON	AIR BA	G USAGE	EJECTION	TRAPPED	
Ž	BY						LOCAL		13.000	<u>' </u>		ļ					
S OF STATE	OPERATOR	LICENSE NUMBER		OFFENS	SE CHARG	RGED LOCAL OFFENSE DESCRI				TION				ION NU	JMBER		
-	ENDORSEM	TAIT				ALCOHOL / DRUG SUSPECTED CONDITION				ALCOHOL TEST				DRIJE	TEST(C)	
OL CLASS	ENDORSEM	RESTRICTION SELECT UP TO 3	DRIV	VER FRACTED				CONDITION	STATUS	TYPE	VALUE	T	STATUS	TYPE		SELECT UP TO 4	
			BY		OTHE	R DRUG					36						
ונאו	URIES	SEATING POSITION		AIR BAC	3	OL CLA	ss	OL RESTRIC	TION(S) DR	IVER DIST	RAC	TION	Ţ	EST ST	ATUS	
1 - FATAL			1 - NOT DE 2 - DEPLOY		Т	1 - CLASS A		1 - ALCOHOL INTER	LOCK		NOT DISTRACT		NG AN		E GIVEN		
2 - SUSPECTED INJURY		2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3 - DEPLOY			2 - CLASS B		2 - CDL INTRASTATI 3 - CORRECTIVE LEN		El	LECTRONIC			3 - TEST	GIVEN,	D SAMPLE	
- SUSPECTED INJURY	MINOR	4 - SECOND - LEFT SIDE	FRONT	/SIDE		3 - CLASS C	SS	4 - FARM WAIVER		(COMMUNICATION DEV (TEXTING, TYPING,			/UN	USABLE	DIANTE	
- POSSIBLE IN		(MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE		- NOT APPLICABLE 4 - REGULAR CLASS 5 - EXCEPT CL - DEPLOYMENT UNKNOWN (OHIO = D) 6 - EXCEPT CL						3 - 1	3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE			4 - TEST GIVEN, RESULTS KNOWN			
- NO APPARE	NT INJURY	6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	E	5 - M/C MOPED ONLY 7 - EXCEPT TRACT 8 - INTERMEDIATI						OR-TRAILER 4 - TALKING ON HAND-HELD					5 - TEST GIVEN, RESULTS UNKNOWN		
INJURIES	TAKEN B	(MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE		OT EJECTED RESTRICTIO						5-0	THER ACTIVIT	Y WIT	HAM I	ALCO	HOL TE	ST TYPE	
TREATED		3 - INIKO - KIGHT SIDE		PARTIALLY EJECTED OL ENDORSEMENT 9 - LEARN RESTRI						6 - F	PASSENGER OTHER DISTRA			1 - NON 2 - BLO			
- EMS	AT SCEIVE	OF TRUCK CAB	4 - NOT AF	PPLICABLE	Marie .	H - HAZMAT M - MOTORCYCL	F	10 - LIMITED TO DA		11	NSIDE THE VEH	IICLE		3 - URIN	ΙE		
- POLICE		11 - PASSENGER IN OTHER ENCLOSED CARGO	1 - NOT TR	RAPPE	D	P - PASSENGER		11 - LIMITED TO EM 12 - LIMITED - OTH	ER		OTHER DISTRA	EHICL	E	4 - BREA 5 - OTH			
9 - OTHER / U	JNKNOWN	AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	2 - EXTRIC	ATED BY	****	N - TANKER		13 - MECHANICAL I (SPECIAL BRAK	ES, HAND	- 1	OTHER / UNKN			DRUG TEST TYPE			
of Street, or other trees, in	QUIPMEN	UNENCLOSED CARGO AREA	3 - FREED			Q - MOTOR SCOOR - THREE-WHEE		CONTROLS, OR ADAPTIVE DEV	ICES)	7000	APPARENTLY N		AL	2 - BLO	OC		
2 - SHOULDER	- NONE USED 13 - TRAILING UNIT - SHOULDER BELT ONLY 14 - RIDING ON VEHICLE		NON-M	1ECHANIC	AL MEANS	MOTORCYCLI		14 - MILITARY VEHI 15 - MOTOR VEHIC	LES	ES ONLY 2 - PHYSICAL IMPAIRME 3 - EMOTIONAL (E.G.,				NT 3 - URINE 4 - OTHER			
USED 3 - LAP BELT O		EXTERIOR (NON-TRAILING UNIT)				S - SCHOOL BUS T - DOUBLE & TR	IPLE	WITHOUT AIR I	OR	D	EPRESSED, ANG	KY,				ESULT(S	
- SHOULDER USED	& LAP BELT	15 - NON-MOTORIST 99 - OTHER / UNKNOWN				TRAILERS X - TANKER / HA		17 - PROSTHETIC A 18 - OTHER	IU	4 - ILLNESS 5 - FELL ASLEEP, FAINTED,					HETAMINE SITURATES		
- FORWARD						A - IANKER / HA	LIVIAT				FATIGUED, ETC.			3 - BENZ	ODIAZEPII	NES	
6 - CHILD REST	RAINT SYSTEM					GENDE	R				MEDICATIONS A		GS/	5 - COC			
7 - BOOSTER S 8 - HELMET US	EAT					F - FEMALE M - MALE					OTHER / UNKN	OWN		7 - OTHE	R		
9 - PROTECTIV	E PADS USED					U - OTHER / UNK	NOWN						11.3	o - NEGA	ATIVE RESU	L13	
(ELBOWS, K	E CLOTHING					MATERIAL SERVICE		The state of									
11 - LIGHTING / BICYCLE	ONLY																
99 - OTHER / U	INKNOWN	A RESIDENCE OF STREET		THE VAL		the sales of	HPIL SO	THE REAL PROPERTY.	1-1-1	25/1				1	Lucy To	CENTER!	

OCCUPANT / WITNESS ADDENDUM								LOCAL REPORT NUMBER 20MPD0135						
UNIT #		AST, FIRST, MIDDLE		DATE OF BIRTH AGE GEN										
01111 #		AND AND THE PARTY OF THE PARTY					01/21/1943 77							
ADDRESS	FRIES, N	Y, STATE, ZIP					01/21/1943 77 F CONTACT PHONE - INCLUDE AREA CODE							
<u>a</u>		, ROGERSVILLE, TN, 3	7857				423-754-2016							
	INJURED	EMS AGENCY (NAME)	-	INJURED TAKEN TO: MEDICAL FACILITY (N	IAME, CITY)	SAFETY EQUIPMENT	423 734 2010	SEATING	AIR BAG USAGE	EJECTION	TRAPPED			
5	TAKEN			**************************************		2	MC HELMET	POSITION 3	The same of the sa	1				
UNIT #		AST, FIRST, MIDDLE					DA		1		1 GENDER			
01111 #			DATE OF BIRTH AGE											
2 ADDRESS		EAN, JENNIFER, A Y, STATE, ZIP	03/13/1981 38 F											
<u>a</u>		TE 83, MILLERSBURG,	CONTACT PHONE - INCLUDE AREA CODE 330-231-0134											
	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (N	AME, CITY)	SAFETY EQUIPMENT	330 231 0131	SEATING	AIR BAG USAGE	E EJECTION TRAPPED				
5	TAKEN					2	MC HELMET	POSITION 6	1	1	1			
UNIT #	NAME: 14	AST, FIRST, MIDDLE				2	, DA	TE OF BIRTH	' '	AGE	GENDER			
OIVII W	NAME. D	ASI, FIRSI, MIDDLE						IE OF BIKIN		AGE	GENDER			
ADDRESS	: STREET, CIT	Y, STATE, ZIP					CONTACT PHONE	- INCLUDE ARE	A CODE	·				
INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (N	IAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED			
2	TAKEN BY	ı					MC HELMET	. 551,1014						
UNIT #	NAME: U	AST, FIRST, MIDDLE					DA	TE OF BIRTH		AGE	GENDER			
ADDRESS	: STREET, CIT	Y, STATE, ZIP			_		CONTACT PHONE - INCLUDE AREA CODE							
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED YAKEN TO: MEDICAL FACILITY (N	AME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED			
_	BY	J					MC HELMET							
	IN	JURIES	P. SECTION AND DESCRIPTION	Y EQUIPMENT USED	H WINGS WAR	SEATING POS	SITION		AIR BAG U	SAGE				
1 - FAT	Williams Inc.		1 - NONE	USED - E OCCUPANT		NT - LEFT SIDE TORCYCLE DRIVI	FR)	1 - NOT !	DEPLOYED					
		SERIOUS INJURY		DER BELT ONLY USED	2 - FRON	2 - DEPLOYED FRONT 3 - DEPLOYED SIDE								
		MINOR INJURY		T ONLY USED										
	SSIBLE IN	NT INJURY	4 - SHOUL	DER & LAP BELT USED	OND - LEFT SIDE ORCYCLE PASSE	NGER)	DYED BOTH T/SIDE							
				RESTRAINT SYSTEM -	ND - MIDDLE ND - RIGHT SID		5 - NOT .	APPLICABLE						
1 110		D TAKEN BY		ARD FACING		NU THAMYC	UNKNOWN							
DOMESTIC OF THE PARTY OF THE PA	ATED AT	PORTED / SCENE	REAR F	RESTRAINT SYSTEM - ACING	(МОТ	D - LEFT SIDE ORCYCLE SIDE (CAR)	EJECTIC	JECTION					
2 - EM			7 - BOOST			D - MIDDLE D - RIGHT SIDE		1 - NOT	EJECTED	S ive				
3 - PO	LICE		8 - HELME	T USED		EPER SECTION C	F TRUCK CAB	IALLY EJECT	CTED					
9 - OT	HER / UN	KNOWN	9 - PROTEC	CTIVE PADS USED	11 - PAS	SENGER IN OTH	ER ENCLOSED							
SECOND				VS, KNEES, ETC)		GO AREA (NON-T		APPLICABLE	LE					
F FF.	THE WEST	ENDER		CTIVE CLOTHING ING - PEDESTRIAN	12 - PAS	ENCLOSED		TRAPP	ED					
F - FEN				CLE ONLY	CAR 13 - TRA	1 - NOT TRAPPI			D					
M - M			99 - OTHE	R / UNKNOWN		ING ON VEHICLE								
0 - 01	THER / UN	IKNOWN				N-TRAILING UNIT)			IANICAL ME	ANS				
						N-MOTORIST HER / UNKNOW!	٧		S - FREED BY NON-MECHANICAL MEA					
NAME: L	AST, FIRST, M	IIDDLE					DA	TE OF BIRTH		AGE	GENDER			
ADDRESS	S: STREET, C	TY, STATE, ZIP					CONTACT PHONE	E - INCLUDE AR	EA CODE					
NAME: L	AST, FIRST, N	NIDDLE					DA	TE OF BIRTH		AGE	GENDER			
ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONI	E - INCLUDE AR	EA CODE					
											GENDER			
NAME: L	AST, FIRST, N	MIDDLE					DATE OF BIRTH AGE							
ADDRES	S: STREET, CI	TY, STATE, ZIP	-		-		CONTACT PHONE - INCLUDE AREA CODE							