

OHIO

# TRAFFIC CRASH REPORT

Traffic Crash Report

CRASH REPORT # <b>10MPD 0232</b>	CRASH SEVERITY <b>3</b> 1 FATAL ERROR 2 DRO 3 MINOR UNKNOWN	PRIVATE PROPERTY <input type="checkbox"/> YES	HITSKIP <b>2</b> 1 NOT HITSKIP 2 SOLVED 3 UNSOLVED	PHOTOS TAKEN <input type="checkbox"/> YES	OH-2 OH-3 OH-1P OTHER <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
N.C.I.C. # <b>03801</b>	REPORTING AGENCY <b>MILLERSBURG POLICE DEPARTMENT</b>	# UNITS <b>1</b>	UNIT ERROR <b>01</b> 1 ANIMAL 2 UNKNOWN	DATE OF CRASH <b>02/07/2010</b>	

TIME OF CRASH <b>02:15</b>	DAY OF WEEK <b>SUN</b>	CITY/VILLAGE/TOWNSHIP <b>VILLAGE</b>	NAME (OF CITY, VILLAGE OR TOWNSHIP) <b>MILLERSBURG</b>	COUNTY # <b>38</b>	LATITUDE <b>40330008</b>	LONGITUDE <b>081553006</b>
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PREFIX <b>S</b>	CRASH LOCATION <b>CLAY STREET</b>	TYPE LOC <b>1</b>	TYPE LOCATION POINT USED 1 NAMED STREET 2 NO NUMBERED STREET 3 UNNUMBERED HIGHWAY	LOCAL INFORMATION
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DIST. REF.	DR	PREFIX <b>S</b>	REFERENCE <b>000443 S CLAY STREET</b>	REF POINT <b>04</b>	REFERENCE POINT USED 01 STATE LINE 02 INTERSECTION OF TWO STRIKES 03 CORPORATION LIMIT 04 COUNTY LINE 05 HIGHWAY NUMBER	06 TOWNSHIP BOUNDARY 07 MILE POST 08 CORPORATION LIMIT 09 PLACE NAME WITHOUT REFERENCE 10 DRIVEWAY 11 STREET OR ROUTE WITHOUT REFERENCE
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UNIT # <b>01</b>	# OF OCC <b>1</b>	NAME (LAST, FIRST, MIDDLE) <b>MILLER ALLEN A</b>	ADDRESS (STREET, CITY, STATE, ZIP-CODE) <b>3185 CR 70 SUGARCREEK OH 44681</b>
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SOCIAL SECURITY NUMBER	DATE OF BIRTH <b>02/01/1985</b>	AGE <b>25</b>	SEX <b>M</b>	HOME PHONE # <b>(330)231-8456</b>	WORK PHONE # <b>(330)359-5028</b>
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DL STATE <b>OH</b>	DL # <b>SQ857626</b>	LP STATE <b>OH</b>	LP # <b>EDB3595</b>	INJURED TAKEN BY <b>1</b> 1 NONE 2 OTHER 3 EMS 4 UNKNOWN 5 POLICE	TRANSPORTED BY	INJURED TAKEN TO
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OWNER NAME (IF SAME, WRITE 'SAME') <b>MILLER, ALLEN A</b>	OWNER ADDRESS (STREET, CITY, STATE, ZIP-CODE) <b>3185 CR 70 SUGARCREEK OH 44681</b>
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YEAR <b>1989</b>	MAKE <b>DODGE</b>	MODEL <b>DAKOTA</b>	COLOR <b>RED</b>	INSURANCE COMPANY <b>STATE FARM</b>	TOWING SERVICE <b>K &amp; N TOWING</b>	OWNER PHONE #
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OFFENSE CHARGED <b>331.34A</b>	OFFENSE DESCRIPTION <b>FAILURE TO CONTROL</b>	CITATION # <b>9768</b>	LOCAL CODE <input checked="" type="checkbox"/> YES
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UNIT #	# OF OCC	NAME (LAST, FIRST, MIDDLE)	ADDRESS (STREET, CITY, STATE, ZIP-CODE)
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SOCIAL SECURITY NUMBER	DATE OF BIRTH	AGE	SEX	HOME PHONE #	WORK PHONE #
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DL STATE	DL #	LP STATE	LP #	INJURED TAKEN BY	TRANSPORTED BY	INJURED TAKEN TO
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OWNER NAME (IF SAME, WRITE 'SAME')	OWNER ADDRESS (STREET, CITY, STATE, ZIP-CODE)
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YEAR	MAKE	MODEL	COLOR	INSURANCE COMPANY	TOWING SERVICE	OWNER PHONE #
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OFFENSE CHARGED	OFFENSE DESCRIPTION	CITATION #	LOCAL CODE <input type="checkbox"/> YES
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UNIT #	NAME (LAST, FIRST, MIDDLE)	HOME PHONE #	DATE OF BIRTH	AGE	SEX
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ADDRESS (STREET, CITY, STATE, ZIP-CODE)	INJURED TAKEN BY	TRANSPORTED BY	INJURED TAKEN TO
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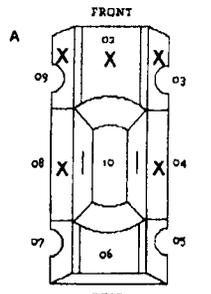
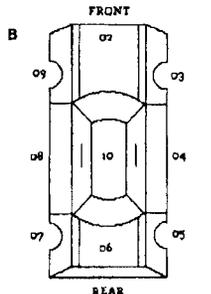
UNIT #	NAME (LAST, FIRST, MIDDLE)	HOME PHONE #	DATE OF BIRTH	AGE	SEX
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ADDRESS (STREET, CITY, STATE, ZIP-CODE)	INJURED TAKEN BY	TRANSPORTED BY	INJURED TAKEN TO
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MOTORIST / NON-MOTORIST

OCCUPANT

SEATING POSITION A <b>01</b> B C D BLANK FOR MOTORIST	SAFETY EQUIPMENT A <b>04</b> B C D	AIR BAG A <b>4</b> B C D	AIR BAG SWITCH A <b>2</b> B C D	EJECTION A <b>1</b> B C D	TRAPPED A <b>1</b> B C D	INJURIES A <b>1</b> B C D SUPPLEMENT 'X' IF YES
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<b>UNIT NUMBERS</b> A <input type="text" value="01"/> B <input type="text"/>	<b>DAMAGE AREA</b> 	<b>PRE-CRASH ACTIONS</b> A <input type="text" value="01"/> B <input type="text"/>	<b>SEQUENCE OF EVENTS</b> <table border="1"> <tr> <td>A</td> <td>B</td> </tr> <tr> <td>1 <input type="text" value="44"/></td> <td>1 <input type="text"/></td> </tr> <tr> <td>2 <input type="text" value="36"/></td> <td>2 <input type="text"/></td> </tr> <tr> <td>3 <input type="text" value="23"/></td> <td>3 <input type="text"/></td> </tr> <tr> <td>4 <input type="text" value="44"/></td> <td>4 <input type="text"/></td> </tr> </table>	A	B	1 <input type="text" value="44"/>	1 <input type="text"/>	2 <input type="text" value="36"/>	2 <input type="text"/>	3 <input type="text" value="23"/>	3 <input type="text"/>	4 <input type="text" value="44"/>	4 <input type="text"/>	<b>POSTED SPEED</b> A <input type="text" value="25"/> B <input type="text"/>	<b>DRUG TEST STATUS</b> A <input type="text" value="1"/> B <input type="text"/>
A	B														
1 <input type="text" value="44"/>	1 <input type="text"/>														
2 <input type="text" value="36"/>	2 <input type="text"/>														
3 <input type="text" value="23"/>	3 <input type="text"/>														
4 <input type="text" value="44"/>	4 <input type="text"/>														
<b>NON-MOTORIST LOCATION</b> A <input type="text"/> B <input type="text"/>		<b>CONTRIBUTING CIRCUMSTANCES</b> A <input type="text" value="15"/> B <input type="text"/>	<b>TRAFFIC CONTROL</b> A <input type="text" value="12"/> B <input type="text"/>	<b>DIRECTION</b> FROM TO FROM TO A <input type="text" value="1"/> <input type="text" value="2"/> B <input type="text"/> <input type="text"/>	<b>DRUG TEST TYPE</b> A <input type="text" value="1"/> B <input type="text"/>										
<b>TYPE OF UNIT</b> A <input type="text" value="07"/> B <input type="text"/>	<b>MOST DAMAGED AREA</b> A <input type="text" value="02"/> B <input type="text"/>	<b>VEHICLE DEFECT CODE ONLY IF 'N' SELECTED ABOVE</b> A <input type="text"/> B <input type="text"/>	<b>FIRST HARMFUL EVENT</b> A <input type="text" value="1"/> B <input type="text"/>	<b>CONDITION</b> A <input type="text" value="8"/> B <input type="text"/>	<b>DRUG TEST 1 &amp; 2 RESULT</b> <table border="1"> <tr> <td>1</td> <td>2</td> <td>1</td> <td>2</td> </tr> <tr> <td>A <input type="text" value="1"/></td> <td>A <input type="text" value="1"/></td> <td>B <input type="text"/></td> <td>B <input type="text"/></td> </tr> </table>	1	2	1	2	A <input type="text" value="1"/>	A <input type="text" value="1"/>	B <input type="text"/>	B <input type="text"/>		
1	2	1	2												
A <input type="text" value="1"/>	A <input type="text" value="1"/>	B <input type="text"/>	B <input type="text"/>												
<b>IN EMERGENCY RESPONSE</b> A <input type="text" value="1"/> B <input type="text"/>	<b>POINT OF IMPACT</b> A <input type="text" value="09"/> B <input type="text"/>	<b>VEHICLE DEFECT CODE ONLY IF 'N' SELECTED ABOVE</b> A <input type="text"/> B <input type="text"/>	<b>MOST HARMFUL EVENT</b> A <input type="text" value="1"/> B <input type="text"/>	<b>ALCOHOL/DRUG SUSPECTED</b> A <input type="text" value="1"/> B <input type="text"/>	<b>TYPE OF INTERSECTION</b> <input type="text" value="01"/>										
<b>DAMAGE SCALE</b> A <input type="text" value="4"/> B <input type="text"/>	<b>ACTION</b> A <input type="text" value="3"/> B <input type="text"/>	<b>VEHICLE DEFECT CODE ONLY IF 'N' SELECTED ABOVE</b> A <input type="text"/> B <input type="text"/>	<b>ALCOHOL TEST STATUS</b> A <input type="text" value="1"/> B <input type="text"/>	<b>ALCOHOL TEST TYPE</b> A <input type="text" value="1"/> B <input type="text"/>	<b>ROAD CONTOUR</b> <input type="text" value="4"/>										
<b>DAMAGE SCALE</b> A <input type="text" value="4"/> B <input type="text"/>	<b>STRIKING VEHICLE OVERRIDE/UNDERIDE</b> A <input type="text" value="1"/> B <input type="text"/>	<b>VEHICLE DEFECT CODE ONLY IF 'N' SELECTED ABOVE</b> A <input type="text"/> B <input type="text"/>	<b>SPEED DETECTED</b> A <input type="text" value="1"/> B <input type="text"/>	<b>ALCOHOL TEST TYPE</b> A <input type="text" value="1"/> B <input type="text"/>	<b>ROAD CONDITIONS</b> <table border="1"> <tr> <td>PRIMARY</td> <td>SECONDARY</td> </tr> <tr> <td><input type="text" value="01"/></td> <td><input type="text"/></td> </tr> </table>	PRIMARY	SECONDARY	<input type="text" value="01"/>	<input type="text"/>						
PRIMARY	SECONDARY														
<input type="text" value="01"/>	<input type="text"/>														
<b>DAMAGE SCALE</b> A <input type="text" value="4"/> B <input type="text"/>	<b>STRIKING VEHICLE OVERRIDE/UNDERIDE</b> A <input type="text" value="1"/> B <input type="text"/>	<b>VEHICLE DEFECT CODE ONLY IF 'N' SELECTED ABOVE</b> A <input type="text"/> B <input type="text"/>	<b>SPEED</b> A <input type="text" value="25"/> B <input type="text"/>	<b>ALCOHOL TEST RESULT</b> A <input type="text"/> B <input type="text"/>	<b>LOCAL REPORT #</b> <b>10MPD 0232</b>										

**NARRATIVE**

UNIT NUMBER ONE WAS SOUTHBOUND ON SOUTH CLAY STREET WHEN HE LEFT THE EAST SIDE OF THE ROADWAY CLIPPING A TREE AND A UTILITY POLE WITH A SUPPORT WIRE. HE THEN STRUCK PRIVATE LAWN PROPERTY BEFORE HITTING ANOTHER TREE HEAD ON.

<p><b>MANNER OF COLLISION OR IMPACT</b></p> <p><b>1</b></p> <p>1 FRONT COLLISION BETWEEN TWO VEHICLES IN TRANSPORT 2 REAR END 3 HEAD-ON 4 REAR TO REAR 5 BACKING 6 ANGLE 7 SIDEWIPPE SAME DIRECTION 8 SIDEWIPPE OPPOSITE DIRECTION 9 UNKNOWN</p>	<p><b>SCHOOL BUS RELATED</b></p> <p><b>1</b></p> <p>1 NO 2 YES - DIRECTLY INVOLVED 3 YES - INDIRECTLY INVOLVED 4 UNKNOWN</p> <p><b>WORK ZONE RELATED</b></p> <p><b>1</b></p> <p>1 NO 2 YES 3 UNKNOWN</p>	<p><b>DIAGRAM</b></p> <p>Labels in diagram: #1 (truck), Tree, Utility Pole &amp; support wire, Down Grade, Private Driveway, Bench / landscaping, Tree, South Clay Street, North arrow.</p>
<p><b>WEATHER</b></p> <p><b>02</b></p> <p>01 CLEAR 02 CLOUDY 03 FOG/SMOG/SMOKE 04 RAIN 05 SLEET/HAZ/SPRINKLING 06 SNOW/DRIZZLE 06 SNOW 07 SEVERE CROSSWINDS 08 HOWLING SAND/BLIZZARD/SNOW 09 OTHER 10 UNKNOWN</p>	<p><b>TYPE OF WORK ZONE</b></p> <p><input type="checkbox"/></p> <p>1 LANE CLOSURE 2 LANE SHUT-CROSSOVER 3 WORK ON SHOULDER OR MEDIAN 4 INTERMITTENT STOPPING WORK 5 OTHER</p>	
<p><b>LIGHT CONDITIONS</b></p> <p><b>PRIMARY</b> <b>SECONDARY</b></p> <p><b>4</b> <input type="checkbox"/></p> <p>1 DAYLIGHT 2 DARK 3 DUSK 4 DARK - LIGHTED ROADWAY 5 DARK - ROADWAY NOT LIGHTED 6 DARK - UNKNOWN ROADWAY LIGHTING 7 OTHER 8 OTHER 9 UNKNOWN</p>	<p><b>LOCATION OF CRASH IN WORK ZONE</b></p> <p><input type="checkbox"/></p> <p>1 BEFORE THE FIRST WORK ZONE WARNING SIGN 2 ADVANCE WARNING AREA 3 TRANSITION AREA 4 ACTIVITY AREA</p> <p><b>WORKERS PRESENT</b></p> <p><input type="checkbox"/></p> <p>1 NO 2 YES 3 UNKNOWN</p>	

<p><b>TRUCK BUS UNIT #</b></p> <p><input type="text"/></p>	<p>THE CRASH INVOLVED ONE OR MORE OF THE FOLLOWING: A TRUCK (MOTOR VEHICLE) WITH A GVWR MORE THAN 10,000 POUNDS OR A TRUCK (MOTOR VEHICLE) WITH A HAZARDOUS MATERIALS PLACARD OR A HAZARDOUS MATERIALS PLACARD FOR AT LEAST 8 PERSONS, INCLUDING DRIVER</p>	<p>THE CRASH RESULTED IN ONE OF THE FOLLOWING: A FATALITY OR AN INJURY REQUIRING TRANSPORTATION OR IMMEDIATE MEDICAL TREATMENT OR A FLAT-TOPped VEHICLE WAS TOWED DUE TO DISABLING DAMAGE OR REQUIRED INTERFERING ASSISTANCE BEFORE PROCEEDING UNDER ITS OWN POWER</p> <p><b>A</b> <b>N</b> <b>D</b></p>
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**COMPANY (FROM SHIPPING PAPERS)**

**ADDRESS (STREET, CITY, ST, ZIP CODE)**

<p><b>US DOT</b></p> <p><input type="text"/></p>	<p><b>ICC MC</b></p> <p><input type="text"/></p>	<p><b>PUCO</b></p> <p><input type="text"/></p>	<p><b>TRAILER LP ST.</b></p> <p><input type="text"/></p>	<p><b>TRAILER LP YEAR</b></p> <p><input type="text"/></p>	<p><b>TRAILER LP #</b></p> <p><input type="text"/></p>	<p><b>PLACARD #</b></p> <p><input type="text"/></p>	<p><b># DIA</b></p> <p><input type="text"/></p>
<p><b>CARGO BODY TYPE</b></p> <p><input type="text"/></p> <p>01 NOT APPLICABLE 02 BOX (INCLUDING DRIVER) 03 VAN/ENCLOSED BOX 04 GRAIN CHIPS/CRATES</p>	<p>05 PUP 06 CARGO TANK 07 FLATBED 08 DUMP 09 CONCRETE MIXER</p>	<p>10 AUTO TRANSPORTER 11 GARBAGE REFRIG 12 OTHER 13 UNKNOWN</p>	<p><b>WEIGHT (GVWR)</b></p> <p><input type="text"/></p> <p>1 LESS THAN 10,000 2 10,001 - 14,999 3 MORE THAN 15,000</p>	<p><b>CDL CLASS</b></p> <p><input type="text"/></p> <p>1 CLASS A 2 CLASS B 3 CLASS C 4 CLASS D 5 CLASS E</p>	<p><b>HAZARDOUS MATERIAL R</b></p> <p><input type="checkbox"/></p> <p>1 NO 2 YES 3 UNKNOWN</p>	<p><b>HAZARDOUS MATERIAL R REI FAREP</b></p> <p><input type="checkbox"/></p> <p>1 NO 2 YES 3 NOT APPLICABLE</p>	

<p><b>POLICE ACTION</b></p>						
<p><b>DATE CRASH REPORTED</b></p> <p>02/07/2010</p>	<p><b>TIME REC CALL</b></p> <p>03:11</p>	<p><b>DISPATCH</b></p> <p>03:11</p>	<p><b>ARRIVED</b></p> <p>03:11</p>	<p><b>CLEARED</b></p> <p>03:57</p>	<p><b>OTHER</b></p> <p>30</p>	<p><b>TOTAL MINUTES</b></p> <p>76</p>
<p><b>OFFICER'S NAME</b></p> <p>PTL. KIM HERMAN</p>			<p><b>BADGE #</b></p> <p>101</p>	<p><b>CHECKED BY</b></p>		<p><b>DATE REPORT FILED</b></p> <p>02/07/2010</p>
<p><b>REPORT TAKEN BY</b></p> <p>1 POLICE AGENCY 2 MOTORIST</p> <p><b>1</b></p>	<p><b>REPORT TAKEN AT</b></p> <p>1 SCENE 2 STATION 3 OTHER</p> <p><b>1</b></p>	<p><input type="checkbox"/> <b>SUPPLEMENT</b> X IF YES</p>	<p><b>LOCAL REPORT #</b></p> <p>10MPD 0232</p>			

## PUBLIC RECORDS REQUEST RESPONSE WORKSHEET

Some or all of the information you have requested has not been provided or has been intentionally obscured or deleted (redacted) because the information is exempt from the duty to permit public inspection or copying from an item that otherwise meets the definition of "record" in Section 149.011. In other words, it does not meet the definition of "public record" found in section 149.43(A) (1). The subsection of 149.43(A) (1) that applies is designated:

\_\_\_\_\_ (a) "Medical records" defined as any document or combination of documents, except births, deaths, and the fact of admission to or discharge from a hospital, that pertains to the medical history, diagnosis, prognosis, or medical condition of a patient and that is generated and maintained in the process of medical treatment.

Records that pertain to a patient's medical history, diagnosis, prognosis or medical condition and that were generated and maintained in the process of medical treatment are not subject to disclosure under the Public Records Act.<sup>152</sup> The record must have both of these characteristics to be exempt from public disclosure.<sup>153</sup> Birth records, death records, and the fact of admission to or discharge from a hospital are not "medical records,"<sup>154</sup> so they must be disclosed. The report of a medical professional that is generated for employment or litigation purposes, rather than in the process of medical treatment, is not a "medical record." For instance, a psychological report made as part of the hiring process was generated for employment purposes, not for medical treatment and is not a "medical record" for purposes of this exemption.<sup>155</sup> Similarly, when a run sheet created and maintained by a county emergency medical services (EMS) organization documents treatment of a living patient, the EMS organization may redact information that pertains to the patient's medical history, diagnosis, prognosis or medical condition.<sup>156</sup> The medical records exemption does not permit, however, the redaction of names, addresses or other non-medical personal information.<sup>157</sup> Such information may, at first blush, appear to be protected by the Health Insurance Portability And Accountability Act (HIPAA); however, a recent Ohio Supreme Court decision clarified that HIPAA is not available as a catch-all exemption under Ohio's Public Records Act.

<sup>151</sup> Ohio Rev. Code Ann. §149.43(A)(1)(a) and (A)(3).

<sup>152</sup> Ohio Rev. Code Ann. §149.43(A)(1)(a) and (A)(3); *Bartley v. Little* (Dec. 28, 2000), Muskingum App. No. CT99-16, 2000 Ohio App. LEXIS 6238.

<sup>153</sup> Ohio Rev. Code Ann. §149.43(A)(3); State ex rel. *Strothers v. Wertheim* (1997), 80 Ohio St.3d 155, 1997 Ohio 349, 684 N.E.2d 1239.

<sup>154</sup> Ohio Rev. Code Ann. §149.43(A)(1)(a) and (A)(3).

<sup>155</sup> State ex rel. *Multimedia, Inc. v. Snowden* (1995), 72 Ohio St.3d 141, 144-45, 1995 Ohio 248, 647 N.E.2d 1374, 1379; State v. *Hall* (2001), 141 Ohio App.3d 561, Lawrence App. No. 00CA23, 2001 Ohio 4059, 752 N.E.2d 318 (psychiatric reports compiled solely to assist court with competency to stand trial determination are not medical records); State ex rel. *DeRemer v. Waller* (Mar. 17, 1997), 5th Dist. No. 1997CA00055, 1997 Ohio App. LEXIS 1909. See, also, State ex rel. *Richard v. Cleveland Metro Health Ctr.* (1992), 84 Ohio App.3d 142, 616 N.E.2d 549; State ex rel. *National Broadcasting Co. v. Cleveland* (1992), 82 Ohio App.3d 202, Cuyahoga App. No. 52337, 611 N.E.2d 838; State ex rel. *Toledo Blade Co. v. Telb* (1990), 50 Ohio Misc. 2d 1, 552 N.E.2d 243. But, see, *Sheely v. Norris* (Oct. 7, 1993), 11th Dist. No. 92-P-0027, No. 92-P-0028, 1993 Ohio App. LEXIS 5205 (emergency room records in custody of prosecutor are not public records). (Note other statutes such as the federal Americans with Disabilities Act (see 29 U.S.C. §2601, et seq. (1993))).

<sup>158</sup> State ex rel. *Enquirer v. Daniels* (2006), \_\_\_Ohio St. 3d\_\_\_, 2006 Ohio 1215

**X** (h) "Confidential law enforcement investigatory records" defined in Section 149.43 (A)(2) as any record that pertains to a law enforcement matter of a criminal, quasi-criminal, civil, or administrative nature, but only to the extent that the release of the record would create a high probability of disclosure of any of the following (check all that apply):

In determining whether a record constitutes a confidential law enforcement investigatory record, the courts use a two-step test.<sup>181</sup> The record must both (a) pertain to a criminal, quasi-criminal, civil or administrative law enforcement matter, and (b) create a high probability of disclosing at least one of the five types of information highlighted above.<sup>182</sup> If information does not meet the test, the information may not be withheld under CLEIRs. Note, however, release of the information may still be restricted under any of the other express exemptions or the catch-all exemption.<sup>183</sup>

<sup>181</sup> State ex rel. Musial v. City of N. Olmsted (2005), 106 Ohio St.3d 459, 2005 Ohio 5521, 835 N.E.2d 1243; State ex rel. Beacon Journal Publ. Co. v. Maurer (2001), 91 Ohio St.3d 54, 2001 Ohio 282, 741 N.E.2d 511; State ex rel. Polovischak v. Mayfield (1990), 50 Ohio St.3d 51, 52, 552 N.E.2d 635, 636-37.

<sup>182</sup> State ex rel. Multimedia, Inc. v. Snowden (1995), 72 Ohio St.3d 141, 1995 Ohio 248, 647 N.E.2d 1374; State ex rel. Polovischak v. Mayfield (1990), 50 Ohio St.3d 51, 552 N.E.2d 635.

<sup>183</sup> State ex rel. Beacon Journal Publ. Co. v. City of Akron (2004), 104 Ohio St.3d 399, 2004 Ohio 6557, overruling State ex rel. Beacon Journal Publ. Co. v. City of Akron (Apr. 12, 2004), 9th Dist. No. 21116, 2004 Ohio App. LEXIS 1814 (although incident reports are not exempt under CLEIRs, abuse reports from children services agencies incorporated therein are exempt from disclosure under a separate catch-all statute).

\_\_\_\_\_ (v) Records the release of which is prohibited by state or federal law as follows (check all that apply):

\_\_\_\_\_ Social Security numbers

Protecting (SSNs) is based on a federal constitutional right to privacy.<sup>357</sup> Although the federal Privacy Act (5 U.S.C. §552a) does not expressly prohibit the release of SSNs by state and local public offices, it does create an individual expectation of privacy.<sup>358</sup> Any federal, state, or local government agency that asks individuals to disclose their SSNs must state 1) whether that disclosure is mandatory or voluntary, and if mandatory under what authority the SSN is solicited, and 2) what use will be made of it.<sup>359</sup> Therefore, a SSN can only be disclosed after individuals have been given prior notice that their SSNs will be publicly available. However, the Ohio Supreme Court has ruled that 911 tapes are always a public record which must be made immediately available. This is the case even if the tapes contain SSNs. The court found that there is no expectation of privacy when a person makes a 911 call. Instead, there is an expectation that the information will be recorded and disclosed to the public.<sup>360</sup>

<sup>357</sup> State ex rel. Beacon Journal Publ. Co. v. City of Akron (1994), 70 Ohio St.3d 605, 1994 Ohio 6, 640 N.E.2d 164. See, also, State ex rel. Beacon