PARTIC CRASH REPORT	LOCAL REPORT NUME	ER*	CRASH SE	EVERITY HIT/SKIP
EDICATION - SERVICE - PROTECTION LOCAL INFORMATION	L <sub>1</sub> P <sub>1</sub> 1 <sub>1</sub> 7	10 <sub>1</sub> 5 <sub>1</sub> 1 <sub>1</sub> 7 <sub>1</sub> 0 <sub>1</sub> 0 <sub>1</sub>	2,0 9 4 <sub> </sub>   2  <sub>2</sub>	FATAL 1 - SOLVED 2 - UNSOLVED - PDO
	vp. Police Departme	nt	NUMBER OF UNITS	UNIT IM ERROR 98 - ANIMAL 99 - UNIKNOWN
COUNTY*		0 5 1 7 2 0	117 117 0	0 DAY OF WEEK WEEK
DEGREES / MINUTES / SECONDS LATITUDE  O / // LONGITUDE  O / //	DECIMAL DEGREES	5 <sub> </sub> 4 <sub> </sub> 6 <sub> </sub> 8 <sub> </sub> 0 <sub> </sub> 8 <sub> </sub>	-18   4   1   9	141911101
N-HORTHBOUND E-EASTBOUND S-SOUTHBOUND W-V/KSTBOUND W-V/KS	AD TYPES OR MILEPOST <sup>2</sup> -ALLEY CR -CIRCLE -AVENUE CT -COURT -BOULEVARD DR - DRIVE	HE-HEIGHTS AIP-MAEPO HY-HIGHWAY PK-PARKW LA-LAHE PI-PIKE		RACE
LOCATION ROUTE NUMBER ROUTE NUMBER ROUTE TYPE I LOCATION ROUTE NUMBER E,W Bunnell Hill	R D	ROUTE TYPES TROUTE TYPES TO US. US ROUTE SR. STATE ROUTE SR. STATE ROUTE		NUMBERED COUNTY ROUTE
YARDS E,W F TYPE! [13]	REFIX REFERENCË NAME (ROAD N, S, E, VI	, M4LEPOST, HOUSE #)		REFERENCE ROAD TYPE <sup>2</sup>
CASH LOCATION   CASH LOCATIO	11 - RAILWAY GRADE CROSSING 12 - SHARED-USE PATHS OR TRAIL 99 - UNKNOWN	I INTERSECTION I	1 - ON ROADWAY 2 - ON SHOULDER 3 - IN MEDIAN 4 - ON ROADSIDE	VENT 5 - ON GORE 6 - OUTSIDE TRAFFICWAY 9 - URKNOWN
2 - STRAIGHT LEVEL 4 - CURVE GRADE PRIMARY SECONDARY 02 2 - STRAIGHT GRADE 9 - UNKNOWN 03 3 - CURVE LEVEL 03	- DRY 05 - SAND, MUD, - WET 06 - WATER (STAN - SNOW 07 - SLUSH - ICE 08 - DEBRIS*			
MANNER OF CRASH COLLISIONAMPACT  1 -NOT COLLISIONAMPACT  1 -NOT COLLISIONAMPACT  2 - REAR-END  5 - BACKING  8 - SIDESWIPE, OPPOSIT  TWO LIOTOR VEHICLES  3 - HEAD-ON  6 - ANGLE  DIRECTION  9 - UNKNOWN	1 2 - CLOUD	4 - RAIN Y 5 - SLEET, HAI MOG, SMOKE 6 - SNOW	7 - SEVERE CROSSWIN L 8- BLOWING SAND, SOIL 9 - OTHERJUNKNOWN	
ROAD SURFACE  1 - CONCRETE 2 - GLACKTOP, BITUMINOUS, STONE ASPHALT 3 - BRICK/BBLOCK 4 - SLAG, GRAVEL 5 - DIRT 5 - DIRT 5 - DIRT 4 - SLAG, GRAVEL 1 PRIMARY SECONDARY 1 - DAYLIG 2 - DAWN 3 - DISK 4 - DARK -		OADWAY NOT LIGHTED  NKNOWN ROADWAY LIGHTING  * SECONDARY C	- UNKNOWN SCHOOL ZONE RELATED ONDITION ONLY	SCHOOL BUS RELATED  YES, SCHOOL BUS DIRECTLY RAYOLVED  YES, SCHOOL BUS INDIRECTLY INVOLVED
WORKERS PRESENT  WORK ZONE COFFDERMENT PRESENT COFFDERMENT COF	RMITTENT OR MOVING WORK IR	LOCATION OF CRASH IN WORK ZON	E York zone warning sign	4 - ACTIVITY AREA 5 - TERMINATION AREA
Traffic Unit # 1 was traveling South on Bunnell Hill Rd preparing to make the left hand turn onto E SR 73. Traffic Unit # 2 was traveling North on Bunnell Hill Rd. Traffic Unit # 1 failed to yield right of way when turning left and was struck by Traffic Unit # 2. Traffic Unit # 2 fell of his motorcycle and slid into Traffic Unit # 3 which was stopped in traffic in the Southbound lane of Bunnell Hill Rd.  REPORT TAKEN BY    Supplement (Correction Graddition to All Education of Correction of Raddition to All Education Report Sent to GDPs)		Bunne  By St Rt 73  By St Rt 73		31R173
DATE CRASH REPORTED   TIME CRASH REPORTED   DISPATCH TIME   1   7   0   0   1   1   7   0   2	ARRIVAL TIME 11,7,0,4,	TIME CLEARED	OTHER INVESTIGATION TIME	TOTAL MINUTES
OFFICER'S NAME · Sweet, Charles - LP	OFFICER'S BADGE NUMBER  1 L 3 0	1 8 4 5 CH530	3 0	Page 1 of 7

06 - SCHOOL ZONE

12 - PAVEMENT MARKINGS

Page 3 of 7

OHIO STANDARD MOTORIST / NON-MOTORIST / OCCUPANT LL P 1 7 0 5 1 1 7 0 0 1 2 1 0 1 9 1 4 1																
	UNIT NUMBER   NAME: LAST, FIRST, MIDDLE   Leen, Carol S								DATE OF BIRTH							
1	ADDRESS, CITY, STATE, ZIP  7683 Horizon Hill DR, Springboro, Ohio 45066-8733							<u>  [                                   </u>	CONTACT PHONE-INCLUDE AREA CODE							
INJURIES INJURIED TAKEN BY EMS AGENCY MEDICAL FACHLITY						FACILITY I	CILITY INJURED TAKEN TO SAFETY EQUIPMENT USED DOT CO									
TORIST/NO	2	OPERATOR LICENSE NUMBER	OL.C	CLASS	No		CONDITION	i ALCOHOL/DRUG	<u> </u>	0 4	MOTORCY HELMET  S ALCOHOLTEST		0 1	UE DRUGTEST	STATUS DRUGTE	1
MO		RQ770172	4		OI.	END.	1	1	1.	1	1	=		1	1	
Ļ	offense charged (☐ Local code)  4511.42  offense Charged (☐ Local code)  offense Charged (☐ Local code)							6568	HANDS-FREE DRIVER DISTRACTED BY DEVICE USED 1.1							
	0 <sub>2</sub>	Brusaw, Shawn Davi	d								DATE OF BIRTH	0 5 1 1 9 9 5 22 M F- FEMALE M-MALE				
<u>.</u> 1	nddress, chy 9685 Spi	ringwater LN, Miamisb	urg, Ohi	io 45	342							CONTACT PHONE- INCLUDE AREA CODE (937)469-2163				
STMON-MO	I-	JURED TAKEN BY EMS AGENCY	//EDIC22	2		MEDIGAL F		NURED TAKEN TO		ETY EQUIPMENT USE	DOT COM MOTORCY HELMET	L FINAN I	0 1	AIR BAG USA	GE EJECTION 1	RAPPED
MOTOR		OPERATOR LICENSE NUMBER TW747538	OL CL	I	NO VALID OL	M/G G	омонном	ALCOHOL/DRUG SI	USPECTED	ALCOHOL TEST STATUS	ALCOHOL TEST	TYPE ALC	OHOL TEST VALU	IE ORUG TEST	STATUS DRUGTE	STTYPE
	OFFENSE CHA	ARGED ( LOCAL CODE)		OFFERSE	EDESCRIPTM				Ci	TATION NUMBER	ات.	- <u> </u>	HANDS	FREE DRA	ER DISTRACTED B	γ
ŀ	INJURIES 1 - NO INJURY	INJURED TAKEN  Y / NONE REPORTED 1 - NOT TRAN		Co. 100	AFETY EQL	JPMENT USE	≅D .	99	- UNKNOWN S	SAFETY EQUIPMENT			USED	<u>  L</u>	<u> </u>	
	2 - POSSIBLE 3 - NON-INGA 4 - INCAPACIT 5 - FATAL	TREATED A PACITATING 2-EMS TATING 3-POLICE	医乳化尿管 经收益 阿里里克克姆克尔		01 - NONE 02 - SHOUL 03 - LAP BE	USEO - VEHIO DER BELT ON ELT ONLY USE	ILY USED ED	06 07	- CHILD REST - BOOSTER 5	医喉部 医邻氏管 化氯化二苯基苯乙酰胺基苯基苯酚		09 - N 10 - H	OTORIST ONE USED ELMET USED ROTECTIVE PAD	13	- REFLECTIVE GL I-LIGHTING - OTHER	OTHING
-	SEATING POSI	4 - OTHER 9 - UNKNOWN	le sa		04 - SHOUL	DER AND LAF	. RECLUSE	EU 08	- HELMET US	∃D		(€	LBOWS, KNEES, E	TC)		
	02 - FRONT - I 03 - FRONT - F			08 - TH 09 - TH	IRD MIDDLE IRD - RIGHT	SIDE		E CAR)	13 - TI 14 - R	ASSENGER IN UNENCL RAILING UNIT IDING ON VEHICLE EXT			1 2	- NOT DEPLOYE - DEPLOYED FRO - DEPLOYED SID	DNT E	
	05 - SECOND - 06 - SECOND -	- MIDDLE RIGHT SIDE	<del></del> -	11 - PA: (NO	SSENGER IN DN-TRAILING I	ON OF CAB (I OTHER ENCI NIT SUCH AS A	LOSED CA		16 - 0	OH-MOTORIST THER NXNGWN			t t	- DEPLOYED BO - NOT APPLICAB - DEPLOYMENT	LE	
	EJECTION  1 - NOT EJECT  2 - TOTALLY E  3 - PARTIALLY	SJECTED 2 - EXTRICATED BY		OPERAT 1 - CLA 2 - CLA 3 - CLA	SS B	SE CLASS		ONDITION 1 - APPARENTLY NO 2 - PHYSICAL IMPAL 3 - EMOTIONAL (DEP	RMENT	C	- FELL ASLEEP, F. - UNDER THE INFI MEDICATIONS, D	JENCE OF	ngued 1	COHOLIDRUG SI - NONE - YES - ALCOHOL	SUSPECTED	
400	4 - NOT APPLI	NON-MECHANICAL N		4 - REG 5 - MC/	SULAR CLAS MOPEO ON		r   	4-ILINESS		7	-OTHER	THER 4-YES - DRIUGS SUSPECTED 5-YES - ALCOHOL AND DRUGS SUSPECTED				ество
3 4 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	1 - NONE GIVE 2 - TEST REFU	EN	1 - NO 2 - BLC 3 - UR	doc		RUG TEST SI 1 - NONE GIVI 2 - TEST REFI 3 - TEST GIVE	EN USED	MINATED SAMPLEA	JNUSABLE	DRUG TEST TYPE  1 - NONE 2 - BLOOD 3 - URINE	DRIVER DISTR 1 - NO DISTR 2 - PHONE 3 - TEXTINGA	ACTION REI	-०सम्ब	Artist August Million Artists	R INSIDE THE VEHI RNAL DISTRACTION	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	4 - TEST GIVEN, RESULTS KNOWN 4 - BREATH 4 - TEST GIVEN, RESULTS KNOWN 4 - OTHER 5 - TEST GIVEN, RESULTS UNKNOWN 5 - OTHER 5 - TEST GIVEN, RESULTS UNKNOWN 5 - OTHER 6 - TEST GIVEN, RESULTS UNKNOWN 6 - 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0								4 - ELECTRON 5 - OTHER EL	4 - ELECTRONIC COMMUNICATION DEVICE 5 - OTHER ELECTRONIC DEVICE (MANGATION DEVICE, RADIO, DVD)						
	0   3	Thompson, D Lynn									1 2 0	9 <sub> </sub> 1 <sub> </sub>	9 4 3	73	GENOER F-FEM M-MAL	
35 Kesling DR, Springboro, Ohio 45066									CONTACT PHONE-INCLUDE AREA CODE  (937)609-5562							
18		URED TAKEN BY EMS AGENCY				MEDICALF	ACHLITY IN	JURED TAKEN TO	I	ETY EQUIPMENT USED	DOT COME MOTORCYC HELMET	LIGHT I F	ATING POSITION	AIR BAG USAG	E EJECTION TO	RAPPED 1
V	NIT NUMBER	NAME: LAST, FIRST, MIDDLE Wills, Adam H					-	<del></del>			DATE OF BIRTH	2,1,	9,8,n.	AGE	GENDER F - FEM M - MAL	
3	DDRESS, CITY,	J	Ohio 45	005									HONE-INCLUDE A		<u>                                     </u>	
<b>Ĺ</b>		URED TAKEN 8Y EMS AGENCY			<del></del>	MEDICAL FA	CILITY IN.	JURED TAKEN TO	SAF	ETY EQUIPMENT USED	DOT COMP			3)465-71'		RAPPED
		M (REV 01/12)									HELMET	L			Page 5 o	f 7

OHIO OPARIST / I	Non-Motorist / Oc	CUPANT LUCAL REPA	ORT HUMBER  1 7 0 5 1 7 0 0 2 0 9 4
UNIT NUMBER   NAME: LAST, FIRST, MIDDLE  10131   Sizemore, Barbara F		DATE OF BIRTH	AGE GENDER
ADDRESS, CITY, STATE, ZIP		[U   3   2	211941 76 F M-MALE
781 Highpoint DR, Springboro, Ohio 45			(937)350-5696
1		SAFETY EQUIPMENT USED DOT COMMOTORCY HELMET	APLIANT SEATING POSITION ARE BAG USAGE EJECTION TRAPPED 1
OL CL CL OPERATOR LICENSE NUMBER OL CL OL	ASS NO OL MAC CONDITION ALCOHOLORUG SUSPECTED 1	ALCOHOL TEST STATUS ALCOHOL TEST	TYPE ALCOHOL TEST VALUE DRUG TEST STATUS DRUG TEST TYPE
	FFENSE OESCRIPTION	CITATION HUMBER	INANDS-FREE DRIVER DISTRACTED BY DEVICE USED
UNIT HUMBER NAME: LAST, FIRST, MIDDLE		DATE OF BIRTH	AGE GENDER F-FEMALE M-MALE
ADDRESS, GITY, STATE, ZIP			CONTACT PHONE- INCLUDE AREA CODE
INJURIES INJURED TAXEN BY EMS AGENCY	MEDICAL FACILITY PUURED YAKEN TO	DOT COM MOTORCY HELMET	
OL STATE OPERATOR LICENSE NUMBER OL CU	SS NO NO NALID MAC END. CONDITION ALCOHOLDRUG SUSPECTED	ALCOHOL TEST STATUS ALCOHOL TEST	TYPE ALCOHOL TEST VALUE DRUG TEST STATUS DRUG TEST TYPE
OFFENSE CHARGED ( ☐ LOCAL CODE)	FFENSE DESCRIPTION	CITATION NUMBER	HANDS-FREE DRIVER DISTRACTED BY DEVICE USED
INJURIES  1. NO INJURY / NONE REPORTED  1. NO TRANSPORTED / 1. NOT TRANSPORTED / TREATED AT SCENE 3. NON-INCAPACITATING  2. EMS  2. EMS	MOTORIST  01 - NONE USED - VEHICLE OCCUPANT 05 - CHILD RE	N SAFETY EQUIPMENT STRAINT SYSTEM - FORWARD FACING	HON-MOTORIST  09 - NONE USED  12 - REFLECTIVE CLOTHING
4 - INCAPACITATING 3 - POLICE 6 - FATAL 4 - OTHER B - UNKNOWN	02 - SHOULDER BELT ONLY USED 06 - CHILD RE 03 - LAP BELT ONLY USED 07 - BOOSTER 04 - SHOULDER AND LAP BELT USED 08 - HELMET (		10 - HELMET USED 13 - LIGHTING 11 - PROTECTIVE PADS USED 14 - OTHER (ELBOWS, MIEES, ETC)
02 - FRONT - MIDDLE	09 - THIRD MIDDLE         13           09 - THIRD - RIGHT SIDE         14           10 - SLEEPER SECTION OF CAB (TRUCK)         15           11 - PASSENGER IN OTHER ENCLOSED CARGO AREA         16	PASSENGER IN UNENCLOSED CARGO ARI TRAILING UNIT RIDING ON VEHICLE EXTERIOR (NON-TRAIL NON-MOTORIST OTHER UNIXNOWN	2 - DEPLOYED FRONT
EJECTION TRAPPED O  1 NOT EJECTED 1 NOT TRAPPED  2 TOTALLY EJECTED 2 - EXTRICATED BY MCGIANICAL MEANS  4 NOT APPLICABLE 3 EXTRICATED BY NOT MECHANICAL MEANS	PERATOR LICENSE CLASS 1. CLASS A 2. CLASS B 3. CLASS C 4. REGULAR CLASS (OHO IS T/) 5. MCMOPED ONLY  CONDITION 1. APPARENTLY NORMAL 2. PINYSICAL IMPARMENT 3 EMOTIONAL (DEPRESSED, A 4. REGULAR CLASS (OHO IS T/) 5. MCMOPED ONLY	6 - UNDER THE INF	ALCOHOL/DRUG SUSPECTED  1. HONE 1. HONE 2. YES ALCOHOL SUSPECTED  1. YES PRIOS SUSPECTED  1. YES PRIOS SUSPECTED  5. YES ALCOHOL AND DRUGS SUSPECTED
1 - NONE GIVEN 1 - NON 2 - TEST REFUSED 2 - BLOC 3 - TEST GIVEN, CONTAMINATED SAMPLEUNUSABLE 3 - URIN 4 - TEST GIVEN, RESULTS KNOWN 4 - BRE/ 5 - TEST GIVEN, RESULTS UNKNOWN 5 - OTHE	D 2 TEST REFUSED E 3 TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE ITH 4 TEST GIVEN, RESULTS KNOWN	2 · BLOOD 2 · PHONE 3 · URINE 3 · TEXTINGA 4 · OTHER 4 · ELECTRO 5 · OTHER EL	ACTION REPORTED 5 - OTHER INSIDE THE VEHICLE 7 - EXTERNAL DISTRACTION
UNIT NUMBER NAME: LAST, FIRST, MIDDLE		DATE OF BIRTH	AGE GENDER F - FEMALE M - MALE
ADDRESS, CITY, STATE, ZIP			CONTACT PHONE- INCLUDE AREA CODE
INJURES INJURED TAKEN BY EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO S	AFETY EQUIPMENT USED DOT COM MOTORCYC HELMET	
UNIT NUMBER NAME: LAST, FIRST, MIDDLE		DATE OF BIRTH	AGE GENDER F - FEMALE M - MALE
ADDRESS, GITY, STATE, ZIP			CONTACT PHONE: INCLUDE AREA CODE
INJURIES INJURED TAKEN BY EMS AGENCY	MEDICAL FACILITY INJURED TAKEN 70 S	AFETY EQUIPMENT USED OOT COM  MOTORCYC  HELMEY	

HSY8306 OH1M (REV 01/12)



## CHIO OFFICE TRAFFIC ACCIDENT - DIAGRAM/NARRATIVE CONTINUATION

OH-2 (REV 1/82)

EDUCATION - SERVICE - PROTECTION			OH"Z (NEV. 1/0Z)
LOCAL REPORT NUMBER	LP170517002094	REPORTING AGENCY Clearcreek Twp. Police Department	DATE OF ACCIDENT 05/17/2017
IN COUNTY OF	Warren	ACCIDENT LOCATION Bunnell Hill	

Unit # 1 advised that there was a vehicle in front of the motorcycle that was preparing to turn left onto E SR 73. Unit # 1 advised that she could not see the motorcycle because of this vehicle. Unit # 1 advised that she saw the motorcycle at the last minute, however it was too late to be able to stop.

The vehicle in front of the motorcycle did not stop. No information is available regarding this vehicle.

OFFICERS SIGNATURE

BADGE NO.

1L30