TRAFFIC CRASH REPORT	LOCAL REPORT NUMBER * CRASH SEVERITY HIT/SKIP				
SAFETY EXOCATION - SERVICE - PROTECTION  LOCAL INFORMATION	L <sub>1</sub> P <sub>1</sub> 1 <sub>1</sub> 8 <sub>1</sub> 0 <sub>1</sub> 5 <sub>1</sub> 0 <sub>1</sub> 5 <sub>1</sub> 0 <sub>1</sub> 0 <sub>1</sub> 2 <sub>1</sub> 1 <sub>1</sub> 9 <sub>1</sub> 4 <sub>1</sub> 3 1-FAIAL 2- PINJURY 2- PINJURY 2- PINJURY 3- PIO				
PHOTOS TAKEN PPO UNDER PRIVATE REPORTING AGENCY NOIC * REPORTING AGENCY NAME *	NUMBER OF UNIT IN ERROR UNITS				
□ O1+2 □ O1+1P STATE REPORTABLE DOLLAR AUGUNT PROPERTY 0 8 1 3 1 6 Clearcreek Twp. 1	Police Department $0 1$ 99 - UNIKNOWN				
COUNTY* CITY, VILLAGE, TOWNSHIP*	CRASH DATE 1 TIME OF CRASH DAY OF WEEK   S   A   T				
O O TOWNSHIP					
DEGREES / MINUTES / SECONDS LATITUDE O / // // O / //	DECIMAL DEGREES  LATITUDE  LONGITUDE				
	$\begin{bmatrix} 3 & 3 & 9 & 4 & 9 & 1 & 0 & 6 \end{bmatrix}$ $\begin{bmatrix} -18 & 4 & 2 & 5 & 1 & 9 & 4 & 7 \end{bmatrix}$				
ROADWAY DIVISION  DIVIDED LANE DIRECTION OF TRAVEL  N- NORTHBOUND E- EASTBOUND S- SOUTHBOUND W- WESTBOUND  DIVIDED  N- NORTHBOUND W- WESTBOUND	E CT-COURT HW-HIGHWAY PK-PARKWAY RD-ROAD TE-TERRACE				
S R ROUTE 1 2 2 LOCATION ROUTE NUMBER N, S, E, W	ROUTE TYPES 1 IR - INTERSTATE ROUTE (INC. TURNPIKE) CR - NUMBERED COUNTY ROUTE US - US ROUTE TR - NUMBERED TOWNSHIP ROUTE SR - STATE ROUTE				
DISTANCE FROM REFERENCE    MILLES   DIR FROM REF   O   S   R   REFERENCE ROUTE NUMBER   REF PREFIX ROUTE   N. S.   C. W   F   F   F   F   F   F   F   F   F	REFERENCE NAME (ROAD, MILEPOST, HOUSE #)  REFERENCE ROAD TYPE 2				
1 - INTERSECTION 07 - ON RAMP 12 - MILE POST 02 - FOUR-WAY INTERSECTION 07 - ON RAMP 12 -	RAILWAY GRADE CROSSING HARED-USE PATHS OR TRAILS INTERSECTION RELATED  LOCATION OF FIRST HARMFUL EVENT 1 - ON ROADWAY 5 - ON GORE 2 - ON SHOULDER 6 - OUTSIDE TRAFFICWAY 3 - IN MEDIAN 9 - UNKNOWN 4 - ON ROADSIDE				
ROAD CONTOUR	06 - WATER (STANDING, MOVING) 10 - OTHER				
MANNER OF CRASH COLLISIONIMPACT  1 - NOT COLLISION BETWEEN 2 - REAR-END 5 - BACKING 8 - SIDESWIPE, OPPOSITE  1 - NOT COLLISION BETWEEN 2 - REAR-END 5 - BACKING 0 DIRECTION  1 - NOT COLLISION BETWEEN 2 - REAR-END 5 - BACKING 0 DIRECTION  1 - NOT COLLISION BETWEEN 2 - REAR-END 7 - SIDESWIPE, SAME DIRECTION 9 - UNKNOWN	WEATHER				
ROAD SURFACE LIGHT CONDITIONS	SCHOOL BUS RELATED				
1 - CONCRETE 4 - SLAG, GRAVEL, 2 - BLACKTOP, BITUMINOUS, STONE 2 - BLACKTOP, BITUMINOUS, ASPHALT 5 - DURK 3 - DUSK	5 - DARK - ROADWAY NOT LIGHTED 9 - UNKNOWN SCHOOL YES, SCHOOL BUS 6 - DARK - UNKNOWN ROADWAY LIGHTING 7 - GLARE*				
3 - BRICK/BLOCK 6 - OTHER 4 - DARK - LIGH	ED ROADWAY 8 - OTHER *SECONDARY CONDITION ONLY INDIRECTLY INVOLVED				
WORKERS PRESENT  WORK  LAW ENFORCEMENT PRESENT  (OFFICER/MEICLE)  RELATED  LAW ENFORCEMENT PRESENT  (OFFICER/MEICLE)  LAW ENFORCEMENT PRESENT  (OFFICER/MEICLE)  1 - LANE CLOSURE  2 - LANE SHIFT/CROSSOVER  3 - WORK ON SHOULDER OR MEDIAN  (OFFICER/MEICLE)  3 - WORK ON SHOULDER OR MEDIAN	LOCATION OF CRASH IN WORK ZONE  1 - BEFORE THE FIRST WORK ZONE WARNING SIGN 4 - ACTIVITY AREA 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA  3 - TRANSITION AREA				
NARRATIVE	Diagram				
Unit 1 was leaving UDF to continue northbound on N SR 123. Unit 2 was traveling eastbound on W SR 122. The driver of Unit 1 was					
distracted by something inside the vehicle, ran the red light, and was struck by Unit 2.	NOT TO SCALE				
Struck by Onit 2.	NOT TO SCALE				
*					
	→ <u>ŷ</u>				
	Unit 2				
	WSR 122				
	ACCESS TO UDF				
REPORT TAKEN BY  SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODDPS)	<u> </u>				
	RIVAL TIME				
OFFICER'S NAME • OF	ICER'S BADGE NUMBER CHECKED BY Page 1 of 6				
Ney, Eric - LP	L 2 5   WES189				

OPHIC DOWNERS OF PRINCE SAFETY ADDRESS OF PRIN		LOCAL REPORT NUM	8 <sub> </sub> 0 <sub> </sub> 5 <sub> </sub> 0 <sub> </sub> 5 <sub> </sub> 0 <sub> </sub> 5 <sub> </sub> 0 <sub> </sub> 0 <sub> </sub> 2 <sub> </sub> 1 <sub> </sub> 9 <sub> </sub> 4 <sub> </sub>			
OWNER NAME: LAST, FIRST, MIDDLE ( SAME AS DRIVER)  Neal, Robert A	IBER - INC. AREA CODE ( SAME AS DRIVER)	DAMAGE SCALE DAMAGED AREA FRONT				
OWNER ADDRESS: CITY, STATE, ZIP ( SAME AS DRIVER)		1- NONE 09 09 03				
1016 Primrose DR, West Carrollton, Ohio 4544	VEHICLE IDENTIFICATION HUMBER	#OCCUPANTS	2 - MINOR			
O[H] GSH1350	2 G 1 W X 1 5 K 4 2 9		3-FUNCTIONAL 08 1 10 04			
VEHICLE YEAR  [2]0]0]2]  VEHICLE MAKE  CHEV	VEHICLE MODEL Monte Carlo	VEHICLE COLOR YEL	4 - DISABLING 07 06 05			
PROOF OF INSURANCE COMPANY American Family	1850-8660-05-77	Sandys	9 - UNKNOWN REAR			
CARRIER NAME, ADDRESS, CITY, STATE, ZIP			CARRIER PHONE- INCLUDE AREA CODE			
VEHICLE WEIGHT GWR/GCWR  1 - LESS THAN OR EQUAL TO 10K LBS. 2 - 10,001 TO 26,000 LBS. 3 - MORE THAN 26,000 LBS.  HM CLASS HNZARDOUS MATERIAL RELEASED	CARGO BODY TYPE  01 - NO CARGO BODY TYPENOT APPLICABLE 02 - BUSA/AN (9-15 SEATS, INC DRIVER) 03 - BUS (16+ SEATS, INC DRIVER) 04 - VEHICLE TOWING ANOTHER VEHICLE 05 - LOGGING 06 - INTERMODAL CONTAINER CHASSIS 07 - CARGO VANIENCLOSED BOX	09 - POLE 10 - CARGO TANK 11 - FLAT BEB 12 - DUMP 13 - CONGRETE MIXER 14 - AUTO TRANSPORTER 15 - GARBAGE/REFUSE				
NON-MOTORIST LOCATION PRIOR TO IMPACT TYPE OF USE	08 - GRAIN, CHIPS, GRAVEL  UNIT TYPE PASSENGER VEHICLES (LESS THAN 9 PASSENGE	99 - OTHERJUNKNOWN				
01 - INTERSECTION - MARKEO CROSSWALK 02 - INTERSECTION - O CROSSWALK 03 - INTERSECTION - O THER 04 - MIDBLOCK - MARKED CROSSWALK 05 - TRAVEL LANE - OTHER LOCATION 06 - BICYCLE LANE 07 - SHOULDERROADSIDE 08 - SIOEWALK 09 - MEDIANCROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED-USE PATH OR TRAIL 12 - MON-TRASPECWAY ANEA 99 - OTHERUNKNOWN	0 3 PASSENGER VEHICLES (LESS FRAM 9 PASSENCE 01 - SUB-COMPACT 02 - COMPACT 02 - COMPACT 03 - MID SIZE 05 - MINIVAN 06 - SPORT UTILITY VEHICLE 07 - PICKUP 08 - VAN 09 - MOTORCYCLE 10 - MOTORCYCLE 11 - SNOWMOBILE/ATV 12 - OTHER PASSENGER VEHICLE	13. SINGLE UNIT TRUCK OR VAN 2 AGLE 14. SINGLE UNIT TRUCK; 3+ AXLES 15. SINGLE UNIT TRUCK; 3+ AXLES 15. SINGLE UNIT TRUCK; TRAILER 15. TRUCK/TRACTOR (BOBTAL) 17. TRACTOR/SEM:-TRAILER 19. TRACTOR/DOUBLE 19. TRACTOR/THES 20. OTHER MED/HEAVY VEHICLE  HAS HM PLACARD	·			
SPECIAL FUNCTION   01 - NONE   09 - AMBULANCE   10 - FIRE   10 -	18 - FARM EQUIPMENT TENANCE 19 - MOTORHOME 20 - GOLF CART 21 - TRAIN Y 22 - OTHER (EXPLAIN IN NARRATIVE) MENT	O3 - RIGHT FRONT 10 - TOP AND WINDO  A 04 - RIGHT SIDE 11 - UNDERCARRIAGI	4 - STRUCK 5 - STRIKING/STRUCK			
PRE-CRASH ACTIONS    0	N 13 - NEGOTIATING A CURVE FIG LANE 14 - OTHER MOTORIST ACTION IC LANE	NON-MOTORIST  15 - ENTERING OR CROSSING SPECIFIED LOCATION.  16 - WALKING, RUNNING, JOGGING, PLAYING, CYC.  17 - WORKING  18 - FUSHING VEHICLE  19 - APPROACHING OR LEAVING VEHICLE  20 - STANDING				
0   3   02 - FAILURE TO YIELD   12 - IMPI   03 - RAN RED LIGHT   13 - STO   14 - RAN STOP SIGN   14 - OPE   14 - OPE   15 - SWE   15 - SWE   16 - UNSAFE SPEED   16 - WR   17 - FAIL   17 - FAIL   18 - VISI   19 - UNIKNOWN   09 - FOLLOWED TOO CLOSELY/ACDA   19 - OPE   19 - OPE   10 - IMPROPER LANG CHANGE   20 - LOA	ROPER BACKING 22  ROPER START FROM PARKED POSITION 23  PPED OR PARKED ILLEGALLY 24  RATINO VEHICLE IN NEGLIGENT MANNER 25  RVING TO AVOID (UNE TO EXTERNAL CONDITIONS) 26  DOIS SIDEWRONG WAY 27  URE TO CONTROL 28  DIO OSSTRUCTION 29  RATING DEPECTIVE EQUIPMENT 30  DISHIFTINGFALLING/SPILLING 30	N-MOTORIST  - NONE  - IMPROPER CROSSING  - DARTING  - LYING AND/OR ILLEGALLY IN ROADWAY  - FALLURE TO YIELD RIGHT OF WAY  - NOT VISIBLE (DARK CLOTHING)  - INATTENTIVE  - FALLURE TO OBEY TRAFFIC SIGNS  /SIGNALS/OFFICER  - WRONG SIDE OF THE ROAD  - OTHER NON-MOTORIST AGTION	VEHICLE DEFECTS  01 - TURN SIGNALS 02 - HEAD LAMPS 03 - TAIL LAMPS 04 - BRAKES 05 - STEERING 06 - TIRE BLOWOUT 07 - WORN OR SLICK TIRES 08 - TRAILER EQUIPMENT DEFECTIVE 09 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT			
SEQUENCE OF EVENTS  1 2 0 2 3 4 5 99 - UNKNOWN ARMFUL 1 PERSON VEHICLE OR OBJECT NOT FIXED.  14 - PEDESTRIAN 21 - PARKED MOTOR VEHICLE 15 - PEDALCYCLE 22 - WORK ZONE MAINTENAN 16 - RAILWAY VEHICLE (TRAIN, ENGINE) 17 - ANIMAL - PARM OR ANYTHING SET IN MOTOR VEHICLE 19 - ANIMAL - OTHER 24 - OTHER MOVABLE OBJECT 20 - MOTOR VEHICLE IN TRANSPORT	05 - CARGO/EQUIPMENT LOSS OR SHIFT  COLLISION WITH FIXED OBJECT 25 - IMPACT ATTENUATOR/CRASH CUSHION E 26 - BRIDGE OVERHEAD STRUCTURE CE EQUIPMENT 27 - BRIDGE PIER OR ABUTMENT FTING CARGO 28 - BRIDGE PARAPET	(8LOWNTIRE, BRAKE FAILURE, ETC)  07 - SEPARATION OF UNITS  08 - RAN OFF ROAD RIGHT  12 - DO  09 - RAN OFF ROAD LEFT  13 - OTI  13 - OTI  14 - 33 - MEDIAN CABLE BARRIER  34 - MEDIAN GUARDRAIL BARRIER  35 - MEDIAN GONORETE BARRIER  35 - MEDIAN ONTHER BARRIER  37 - TRAFFIC SIGN POST  38 - OVERHEAD SIGN FOST  39 - LIGHTALUMINARIES SUPPORT  46 -	COSS MEDIAN COSS CENTER LINE POSITE DIRECTION OF TRAVEL WINHILL RUNAWAY HER NON-COLLISION  OTHER POST, POLE OF SUPPORT CULVERT CULVERT S0 - WORK ZONE MAINTENANCE EQUIPMENT DITCH 51 - WALL, BUILDING, TUNNEL EMBANKMENT 52 - OTHER FIXED OBJECT FENCE MAILBOX			
UNIT SPEED    8	08 - RAILROAD FI.ASHERS	SSWALK LINES KADONT WALK ER IREPORTED	1 - NORTH 5 - NORTHEAST 9 - UNKNOWN 2 - SOUTH 6 - NORTI WEST 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST			

OHIO OFFICIAL STATE OF THE STAT					LOCAL REPORT		<sub> </sub> 0 <sub> </sub> 0 <sub> </sub> 2 <sub> </sub> 1 <sub> </sub> 9 <sub> </sub> 4 <sub> </sub>				
UNIT NUMBER OWNER NAME: LAST, FIRST, MIDDLE (	SAMÉ AS DRIVER)		OWNER PHONE NUM	IBER - INC. AREA CODE	E ( SAME AS DRIVER)		AMAGED AREA FRONT				
012 Ranck, Brandon M  OWNER ADDRESS: CITY, STATE, ZIP(☐ SAME AS DRIVER						_[3]					
2137 Columbine DR, Lebanon, Or						1 - NONE 04	'PHOME				
LICENSE PLATE HUMBER    O   H   HJN3312		HICLE IDENTIFICATION NUMBER  5 Y J S A 1 C	P 0 4 3 2	2 9   0 6		3 10 10 04					
VEHICLE YEAR  2 0 1 1 3 VEHICLE MAKE  Tesl	а	VEHICLE MODEL	НВ	VEH(CLE C	GRY	4 - DISABLING 07	06 05				
PROOF OF INSURANCE COMPANY INSURANCE SHOWN Allstate		9927001	TOWED BY		a - nuknomu	REAR					
CARRIER NAME, ADDRESS, CITY, STATE, ZIP						CARRIER PHONE- IN	CLUDE AREA CODE				
HM PLAGARD ID No. 2 - 10,001 TO 26, 3 - MORE THAN :	DOU LRS.	30 BODY TYPE  01 - NO CARGO BODY T  02 - BUSWAN (9-15 SEAT  03 - BUS (16 - SEATS, IN  04 - VEHICLE TOWNO A  05 - LOGGING  06 - INTERMODAL CON	IS, INC DRIVER) C DRIVER) ANOTHER VEHICLE	E 09 - POLE 10 - CARGO TANK 11 - FLAT BED 12 - DUMP 13 - CONCRETE MIL 14 - AUTO TRANSPO	2 - TWO- 3 - TWO- 4 - TWO-	-WAY, NOT DIVIDED -WAY, NOT DIVIDED, CONTINUC	(PAINTED OR GRASS>4 FT.) MEDIAN				
HM CLASS TUZNICLOS MAIR NUMBER RELEASED		07 - CARGO VANÆNCLO 08 - GRAIN, CHIPS, GRA		15 - GARBAGEÆREF 99 - OTHERÆUNKNO	USE HITT SKIP L	HIT/ SKIP UNIT					
NOH-MOTORIST LOCATION PRIOR TO IMPROT  01 - IMPERSECTION - MARKED CROSSWALK 02 - INTERSECTION - NO CROSSWALK 03 - INTERSECTION - OTHER 04 - MIDELOCK - MARKED CROSSWALK 05 - TRAVEL LANE - OTHER LOCATION 06 - BICYCLE LANE 07 - SHOULDERROADSIDE 08 - SIDEWALK 09 - MEDIANOROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED-USE PATH OR TRAIL 12 - NON-TRAFFICWAY AREA 99 - OTHERUNKNOWN	1. PERSONAL 95	NOT   NOT	MEDAHEAVY 1: 13 - SINGLE 14 - SINGLE 15 - SINGLE 16 - TRUCKT 17 - TRACTO 19 - TRACTO 20 - OTHER	D (9 OR MORE INCLUDING DIRIVER) N (9-15 SEATS, INC DRIVER) 1- SEATS, INC DRIVER) RIST L. WITH RIDER L WITH BUGGY, WAGON, SURREY LEFEDACYCLIST TIRIAN/SKATER R NON-MOTORIST							
SPECIAL FUNCTION 01 - NONE   02 - TAXI   03 - RENTAL TRUCK (OVER 10K LBS)   04 - BUS - SCHOOL (PUBLIC OR PRIVATE)   05 - BUS - TRANSIT   06 - BUS - SHITTLE   07 - BUS - SHITTLE   08 - BUS - OTHER	09 - AMBULANCE 10 - FIRE 11 - HIGHWAYMAINTENAN 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - OTHER GOVERNMENT 16 - CONSTRUCTION EQUIF	20 - GOLF CART 21 - TRAIN 22 - OTHER (EXPLAIN IN NAR	0 3	03 - RIGHT FROM	IT 10 - TOP AND WIL 11 - UNDERCARA I 12 - LOAD/TRAIL	NDOWS RAGE ER	ACTION  1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - STRIKING/STRUCK 9 - UNKNOWN				
PRE-CRASH ACTIONS	07 - MAKING U-TURN 08 - ENTERING TRAFFIC LA 09 - LEAVING TRAFFIC LA 10 - PARKED 11 - SLOWING OR STOPPED 12 - DRIVERLESS	NE .					ON-MOTORIST ACTION				
CONTRIBUTING CIRCUMSTANCES  PRIMARY  01 - NONE 02 - FAILURE TO YIELD 03 - RAN RED LIGHT 04 - RAN STOP SIGN SECONDARY 05 - EXCREDEG SPEED LIMIT 06 - UNSAFE SPEED 07 - IMPROPER TURN 09 - LEFT OF CENTER 99 - UNKNOWN 10 - IMPROPER LANE CHANGE (PASSING/OFF ROAD	13 - STOPPEO ( 14 - OPERATIN 15 - SWERVING 16 - WRONG S 17 - FAILURE TI 18 - VISION OB 19 - OPERATIN 20 - LOAD SHIF	START FROM PARKED POSITION OR PARKED ILLEGALLY IG VEHICLE IN NEGLIGENT MANN IS TO AVOID (QUE TO EXTERNAL CO INDEWRONG WAY O CONTROL	22 23 24 ER 28 NOTIONS) 28 27 28 28	IN-MOTORIST  2- NONE  3- IMPROPER CROSSII  3- DARTING  5- LYING ANDXOR ILLEG.  5- PAILURE TO YIELD R  - NOT VISIBLE (DARK C  3- INATTENTIVE  3- FAILURE TO OBEY THE  - SHOND SIDE OF THE  - OTHER NON-MOTORI	ALLY IN ROADWAY IGHT OF WAY SLOTHING) LAFFIC SIGNS FROAD	02 - F 03 - T 04 - E 05 - S 00 - T 07 - W 08 - Ti 09 - M	URN SIGNALS  IEAD LAMPS  TAILLAMPS  TRAKES  ITEERING  ITEE BLOWOUT  FORN OR SLICK TIRES  RAILER EQUIPMENT DEFECTIVE  OTHOR TROUBLE  ISABLED FROM PRIOR ACCIDENT  THER DEFECTS				
15 - PEDALCYCLE 22 - WO 16 - RAILWAY VEHICLE (TRAIN, ENGINE) 23 - STT- 17 - ANIMAL - FARM OR, 18 - ANIMAL - DEER MO	99 - UNKNOWN  RKED MOTOR VEHICLE RR ZONE MAINTENANCE EQ UCK BY FALLING, SII FTING MYTHING SET IN MOTION B TOR VEHICLE ER MOVABLE OBJECT	25 - IMPACT ATTENU 26 - BRIGGE OVERHE 27 - SRIGGE PIER OF CARGO 28 - BRIGGE PARAPE	LOVER IN I	06 - EQUIPMENT FA (LOWATTRE, BR 07 - SEPARATION OF 08 - RAN OFF ROAD 09 - RAN OFF ROAD 13 - MEDIAN CABL 34 - MEDIAN GON 35 - MEDIAN CON 36 - MEDIAN OTH 37 - TRAFFIC SIGN 38 - OVERHEAD S 39 - LIGHT/LUMIN. 40 - UTILITY POL	KE FAILURE, ETC) 11  UNITS  FURGI IT 12  LEFT 13  E BARRIER  ROPAIL BARRIER  RETE BARRIER  FR BARRIER  FOST  GIN POST  ARIES SUPPORT	OR SUPPORT 42 - CULVERT 43 - CURB 44 - DITCH	TRAVEL  48 - TREE  49 - FIRE HYDRANT  50 - WORK ZONE MAINTENANCE EQUIPMENT  51 - WALL, BUILDING, TUNNEL  52 - OTHER FIXED OBJECT				
UNIT SPEED  4 0  4 0  5 151MATED	01 - NO CONTROLS	07 - RAILROAD CROSSBUC 08 - RAILROAD FLASHERS 09 - RAILROAD GATES 10 - CONSTRUCTION BAR 5 11 - PERSON (FLAGGER, OF 12 - PAVEMENT MARKINGS	14 - WAL 15 - OTH RICADE 16 - NOT FRICER)	SSWALK LINES K/DON'T WALK IER REPORTED	FROM 4	3 2-SOUTH 6	- NORTHEAST 9 - UNKNOWN - NORTHWEST - SOUTHEAST - SOUTHWEST				

ĺ		OHIO OF PUBLIC SAFETY	OTORIST	/ No	N-NC	<u>/lo</u>	ΓORΙ	st / <b>O</b> c	C	JPANT	LOCAL REPOR		0 <sub>1</sub> 5 <sub>1</sub> 0 <sub>1</sub> 5	0 0 2	2,1,9,4,	
	UNIT NUMBER	NAME: LAST, FIF	FIRST, MIDDLE DATE								DATE OF BIRTH		2,0,0,0	AGE 18	GENDER F-FEMALE M-MALE	
RIST		Oness, City, State, ZIP O16 Primrose DR, West Carrollton, Ohio 45449										CONTACT PHONE- INCLUDE AREA CODE (937)774-4731				
ST/NON-MOTO	OL STATE OPERATOR LICENSE NUMBER OL CLASS NO C					DICAL FACILITY INJURED TAKEN TO SAFETY EQUIPMENT USED 0 4			DOT COME MOTORCYC HELMET	- COMMON	SEATING POSITION	AIR BAG USAG	E EJECTION TRAPPED			
MOTORI						J M/C END.	CONDITION 1	ALCOHOLADRUG SUSPECTE	S SUSPECTED ALCOHOL TEST STATUS ALCOHOL T			TYPE AL	LCOHOL TEST VALUE	DRUGTEST S	TATUS DRUG TEST TYPE	
	offense ch <b>4511.12</b>	FENSE CHARGED (							O16792				DRIVER DISTRACTED BY  DEVICE USED  DRIVER DISTRACTED BY			
ľ	инт номвек   <b>0</b>  2	IT NUMBER NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH				7 1 9 6 3 54 F F. FEMALE M. MALE			
. I	ADDRESS, CIT		R, Lebanon, Ohi	o 45036		···· ··· ·					<u> </u>		PHONE-INCLUDE AF	EA CODE 3)532-57	58	
TON-WON-KIST	NJURIES IN	JURED TAKEN BY	EMS AGENCY			MEDICAL	FACILITY INJU	ured taken to	SAFE	4	DOT COME  MOTORCYC  HELMET	L, DALLY I	SEATING POSITION	AIR BAG USAG	E EJECTION TRAPPED	
MOTOM	OLSTATE	OPERATOR LICENSE	NUMBER	OL CLASS	NO □valid [ OL	J M/C END.	CONDITION 1	ALCOHOL/DRUG SUSPECTED		LCOHOL TEST STATUS	ALCOHOL TEST	IYPE AL	COHOL TEST VALUE	DRUG TEST S	TATUS DRUG TEST TYPE	
	OFFENSE CH	IARGED ( LOCA	CODE)	OFFEN	SE DESCRIPTIO	14		·	CITA	TION NUMBER			HANDS-F DEVICE USED	REE DRIVE	ER DISTRACTED BY	
	2-POSSIBL	APACITATING	INJURED TAKEN BY  1 - NOT TRANSPORT TREATED AT SCE 2 - EMS 3 - POLICE 4 - OTHER 9 - UNKNOWN	red/	02 - SHOUL 03 - LAP BE	JSED - VE) DER BELT ( LT ONLY U	IIGLE OCCUPY	NNT 05 - CHILD I 06 - CHILD I 07 - BOOST	RESTR RESTR ER SE			09 - 10 - 11 -	MOTORIST NONE USED HELMET USED PROTECTIVE PADS (ELBOWS, KNEES, ET	13 USED 14	-reflective Clothing -lighting -other	
	02 - FRONT 03 - FRONT 04 - SECON 05 - SECON	- LEFT SIDE (MOTORO - MIDDLE - RIGHT SIDE 3 - LEFT SIDE (MOTOR		08 - 09 - 10 - t1 -	THIRD - LEFT S THIRD MIDDLE THIRD - RIGHT SLEEPER SECT PASSENGER IN TION-TRAILING L	SIDE ON OF CAL OTHER EN	S (TRUCK) ICLOSED CAR	GO AREA	AIR BAG USAGE  12 - PASSENGER IN UNENCLOSED CARGO AREA  13 - TRAILING UNIT  14 - RIDING ON VEHICLE EXTERIOR (KON TRAILING UNIT)  15 - NON MOTORIST  16 - OTHER  59 - UNKNOWN  AIR BAG USAGE  1 - NOT DEPLOYED  1 - NOT DEPLOYED FRONT  4 - DEPLOYED SIDE  5 - NOT APPLICABLE  99 - UNKNOWN  9 - DEPLOYMENT UNIX				NT E H FRONT/SIDE E			
	EJECTION  1 - NOT EJE  2 - TOTALLY  3 - PARTIALI  4 - NOT APP	CTED 2 (EJECTED 2	APPED - NOT TRAPPED - EXTRICATED BY MECHANICAL MEANS - EXTRICATED BY NON-MECHANICAL MEANS	1 - 0 2 - 0 3 - 0 4 - 5	ATOR LICENS ELASS A ELASS C ELASS C EGULAR CLAS ECMOPED ON	s (OHIO IS °	1 2 3	NOMON  - APPARENTLY MORMAL  - PHYSICAL IMPAIRMENT  - EMOTIONAL (DEPRESSEC  - JILLNESS	L IMPAIRMENT 6 - UNDER THE INFLUE IAL (DEPRESSED, AHGRY, DISTURBED) MEDICATIONS, DRU				LUENCE OF 2 - YES - ALCOHOL SUSPECTED			
	ALCOHOL TEST STATUS  1 - NONE GIVEN  2 - TEST REFUSED  3 - TEST GIVEN, CONTAMINATED SAMPLEAUNUSABLE  4 - TEST GIVEN, RESULTS KNOWN  5 - TEST GIVEN, RESULTS UNKNOWN  6 - TEST GIVEN, RESULTS UNKNOWN									DRUGTESTTYPE  1 - NONE  2 - BLOOD  3 - URINE  4 - OTHER	5 - OTHER EL	ACTION F MAILING (IC COMM ECTRON)	REPORTED 3 JUNIOATION DEVICE		R INSIDE THE VEHICLE RMAL DISTRACTION	
UNIT NUMBER NAME: LAST, FIRST, MIDDLE  O 1 1 Moore, Tabatha Faith  ADDRESS, CITY, STATE, ZIP  DATE OF BIRTH  O 1 5 1 2 1 3 1 2 1 0 1 0 1 0 1 17  CONTACT PHONE-INCLIDE AREA CODE									F.FEMALE							
808 Union RD, Franklin, Ohio 45005    NJURIES   INJURED TAKEN BY   EMS AGENCY   MEDICAL PACILITY INJURED TAKEN TO   SAFETY COUR MEDIT USED   DOT COMPLIANT   SEATING POSITION   AIR BAG USAGE   INJURED TAKEN TO   DOT COMPLIANT   SEATING POSITION   AIR BAG USAGE   INJURED TAKEN TO   DOT COMPLIANT   SEATING POSITION   AIR BAG USAGE   INJURED TAKEN TO   DOT COMPLIANT   DOT COMPLIANT								E EJECTION TRAPPED								
	0 2	Ranck, E									0 4 2	9 1	19619	^GE 49	GENDER F - FEMALE M - MALE	
ž	ADDRESS, CIT 2137 CC		₹, Lebanon, Ohi	o 45036	<b>.</b>							CONTAC	T PHONE- INCLUDE AT	EA CODE		
INJURIES INJURED TAKEN BY EMS AGENCY MEDICAL FACILITY HAJURED TAKEN TO S								SAFE	TY EQUIPMENT USED	DOT COME MOTORCYC HELMET		0 5	AIR BAG USAG	E EJECTION TRAPPED		

		OHIO DEPARTMENT OF PURICE SAFETY PROTECTION	CCUPANT	LOCAL REPORT NUMBER L   P   1   8   0   5   0   5   0   0   2   1   9   4								
	UNIT NUMBER	Ranck,				·	DATE OF BIRTH	1 <sub>1</sub> 8 <sub>1</sub> 2 <sub>1</sub> 0 <sub>1</sub> 0 <sub>1</sub> 3	AGE 14	GENDER F-FEN M-MAI		
<u>.</u>		TY, STATE, ZIP						CONTACT PRONE-INCLUD				
3	2137 C	2137 Columbine CT, Lebanon, Ohio 45036										
	1	NJURED TAKEN BY	EMS AGENCY		MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USES	DOT COM MOTORCY HELMET		AIR BAG USA	SE EJECTION TO	RAPPED 1	
ľ	<sub>1</sub> 0 <sub>1</sub> 2 <sub>1</sub>	Ranck, T		<del></del>			DATE OF BIRTH	3 <sub>1</sub> 1 <sub>1</sub> 2 <sub>1</sub> 0 <sub>1</sub> 0 <sub>1</sub> 0	AGE 17	GENDER F - FEA		
ŀ		TY, STATE, ZIP						CONTACT PHONE - INCLUE	<del></del>			
2000	2137 Columbine CT, Lebanon, Ohio 45036											
	NJURIES 1	NJURED TAKEN BY	EMS AGENCY		MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED	DOT COM MOTORCY HELMET		AIR BAG USA		RAPPED	
Ì	UNIT NUMBER	R NAME: LAST, FE	RST, MIDDLE				DATE OF BIRTH	I	AGE	GENDER		
	02	Ranck, E	Emily				0 1 0	0 <sub>1</sub> 6 <sub>1</sub> 2 <sub>1</sub> 0 <sub>1</sub> 0 <sub>1</sub> 5	13	F F- FEA		
		TY, STATE, ZIP	T. I					CONTACT PHONE-INCLUE	E AREA CODE			
`ŀ			T, Lebanon, Ohio 450	J36 ————————————————————————————————————	MEDICAL FACILITY INJURED TAKEN TO			Lacronia nasiva		I I-		
	1	NJORED FAKEN BY	EMS AGENCY		MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USEI	DOT COM MOTORCY HELMET	YCLE 0 6	AIR BAG USA		TAPPED 1	
ſ	оміт мимвеі . <b>Л</b> . <b>Э</b> .						DATE OF BIRTH		AGE	GENDER E - FEI M - MA		
	02	Ranck, C	Jonathan				1 2 0	0 8 2 0 0 6		IVI M-MA	IIE .	
			T, Lebanon, Ohio 456	036				CONIACI PHONE: MGEOL	EARCH GODE			
<u>`</u>		HJURED TAKEN BY			MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USE	DOT COM	YCLE 0	AIR BAG USA	F	RAPPED	
ŀ	UNIT NUMBER	NAME: LAST, FI	RST. MIDDLE			DATE OF BIRTH		AGE	GENDER			
-	ADDRESS OF	Sloan, Jo	ohn Thomas				1	CONTACT PHONE- INCLU	24	M F-FEA		
			/AY, Mason, Ohio 450	040-2152				I	513) <b>284-8</b> 7	94		
	INJURIES	NJURED TAKEN BY	EMS AGENCY		MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USE	DOT COM MOTORCY HELMET	YCLE	ON AIR BAG USA	GE EJECTION T	RAPPED	
İ	UNIT NUMBEI	NAME: LAST, FI	RST, MIDDILE			•	DATE OF BIRTH AGE GENDER				MALE:	
l	Ш							11111		M - MAI		
	ADDRESS, C	TY, STATE, ZIP						CONTACT PHONE- INCLUD	E AREA CODE			
	INJURIES	NJURED TAKEN BY	EMS AGENCY		MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USE	D DOT COM MOTORCY HELMET	YCLE	AIR BAG USA	GE EJECTION Y	IRAPPED	
-	2 - POSSIE	CAPACITATING	INJURED TAKEN BY  I. NOT TRANSPORTED / TREATED AT SCENE  2. EMS  3. POLICE  4. OTHER  8. UNKNOWN	02 - SHOULE 03 - LAP B⊟	ISED - VEHICLE OCCUPANT 05 DER BELT ONLY USED 06 LT ONLY USED 07	- UNKNOWN SAFETY EQUIPMENT - CHILD RESTRAINT SYSTEM - FORV - CHILD RESTRAINT SYSTEM - REAI - BOOSTER SEAT - HELMET USED	and the formation of the state of the first of the state	MON-MOTORIST  09 - MONE USED  10 - HELMET USED  11 - PROTECTIVE P  (ELDOWS, NICE)	1 NDS USED 1	2-REFLECTIVE CL 3-LIGHTING 4-OTHER	ONHTO	
	02 - FRON 03 - FRON 04 - SECON 05 - SECON 06 - SECON 07 - THIRD 09 - THIRD	I - LEFT SIDE (MOTOR I - MIDDLE I - RIGHT SIDE ID - LEFT SIDE (MOTOI ID - MIDDLE ID - RIGHT SIDE - LEFT SIDE (MOTOR)	RCYCLE FASSENGER) CYCLE SIDE CAR)	(NON-TRAILING UN 12 - PASSENGER IN U 13 - TRAILING UNIT	THER ENCLOSED CARGO AREA T SUCHAS ABUS, PICKLIP WITH CAP) NEROLOSED CARGO AREA LE EXTERIOR (NON-TRAILING UNIT)	AIR BAG USAGE  1 - NOT DEPLOYED  2 - DEPLOYED FRONT  3 - DEPLOYED SIDE  4 - DEPLOYED BOTH FR  5 - NOT APPLICABLE  9 - DEPLOYMENT UNKN		EJECTION  1 - NOT EJECTED  2 - TOTALLY EJECTED  3 - PARTIALLY EJECTED  4 - NOT APPLICABLE	2-EXTI MEC 3-EXTI	D TRAPPED RICATED BY SHANICAL MEANS RICATED BY MECHANICAL MEA	<sub>NS</sub>	