TRAFFIC CRASH REPORT	LOCAL REPORT NUMBE	R*	CRASH SEVI	The second secon
EXOCATION - SURVICE - PROTECTION LOCAL INFORMATION	L <sub>1</sub> P <sub>1</sub> 1 <sub>1</sub> 7 <sub>1</sub>	1 0 2 5 0 0 5	5 <sub>1</sub> 1 <sub>1</sub> 3 <sub>1</sub> 3 <sub>1</sub> 2 2 2 2 2 3 2 4 3 2 9	UURY 2 - UNSOLVED
Botts (vision)	p. Police Departmer	nt	NUMBER OF UNITS	UNIT IN ERROR 98 - ANIMAL 99 - UNKNOWN
COUNTY* CITY VILLAGE, TOWNSHIP*    8   3		1 0 2 5 2 0	117 114 5	0 W E D
DEGREES / MINUTES / SECONDS  LATITUDE  O / // LONGITUDE  O / //	// O DECIMAL DEGREES LATITUDE 3 9 1 3	3 <sub>1</sub> 1 <sub>1</sub> 7 <sub>1</sub> 5 <sub>1</sub> 0 <sub>1</sub> 4 <sub>1</sub>	LONGITUDE - 8   4   1   3	7 <sub>1</sub> 2 <sub>1</sub> 3 <sub>1</sub> 9 <sub>1</sub>
□ DIVIDED	D TYPES OR MILEPOST <sup>2</sup> ALLEY GR-CIRCLE AVENUE GT-COURT BOULEVARD DR-DRIVE	HE - HEIGHTS MP - MILEPOS HW - HIGHWAY PK - PARKWA LA - LANE PI - PIKE		MCE
LOCATION ROUTE NUMBER   LOC PREFIX   LOCATION ROAD NAME   N, S, E, W   Red Lion-5 Points	R D	ROAD TYPE 2  ROUTE TYPES 1 IR - INTERSTATE I US - US ROUTE SR - STATE ROUTE		NUMBERED COUNTY ROUTE
	REFIX REFERENCE NAME (ROAD, N, S, E, W 5911	, MILEPOST, HOUSE #)		REFERENCE ROAD TYPE 2
REFERENCE POINT USED   CRASH LOCATION   01 - NOT AN INTERSECTION   05 - FIVE-POINT, OR MORE   02 - FOUR-WAY INTERSECTION   07 - ON RAMP   03 - T-INTERSECTION   05 - OF FRAMP   04 - Y-INTERSECTION   09 - CROSSOVER   05 - TRAFFIC CIRCLE/ROUNDABOUT   10 - DRIVEWAY/ALLEY ACCESS   10 - DR	11 - RAILWAY GRADE CROSSING 12 - SHARED-USE PATHS OR TRAIL: 99 - UNKNOWN	s INTERSECTION RELATED	6 2 - ON SHOULDER	ENT 5 - ON GORE 6 - OUTSIDE TRAFFICWAY 9 - UNIKNOWN
1 - STRAIGHT LEVEL 4 - CURVE GRADE PRIMARY SECONDARY 02 - STRAIGHT GRADE 9 - UNKNOWN 03 - CURVE LEVEL 04 - CURVE GRADE 9 - UNKNOWN 03 - CURVE LEVEL 04 - CURVE GRADE 9 - UNKNOWN 03 - CURVE LEVEL 05 - CURVE GRADE 9 - UNKNOWN 05 - CURVE GRADE 9 - C	- DRY 05 - SAND, MUD, I - WET 06 - WATER (STAND - SNOW 07 - SLUSH - ICE 08 - DEBRIS*			MENT *  * SECONDARY CONDITION ONLY
MANNER OF CRASH COLLISION/IMPACT  1 -NOT COLLISION BETWEEN 2 - REAR-END 5 - BACKING 8 - SIDESWIPE, OPPOSITE TWO MOTOR VEHICLES 3 - HEAD-ON 6 - ANGLE DIRECTION 9 - UNKNOWN	1 2 - CLOUD	4 - RAIN Y 5 - SLEET, HA MOG, SMOKE 6 - SNOW	7 - SEVERE CROSSWINE 8 - BLOWING SAND, SOIL, 9 - OTHERJUNKNOWN	
ROAD SURFACE  1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, 5 - DIRT 5 - DIRT 4 - DAYLIGI 1 PRIMARY SECONDARY 1 - DAYLIGI 2 - DAWN 3 - DUSK 4 - DARK - I		NKNOWN ROADWAY LIGHTING	9 - UNKNOWN SCHOOL ZONE RELATED	SCHOOL BUS RELATED  YES, SCHOOL BUS DIRECTLY INVOLVED  YES, SCHOOL BUS INDIRECTLY INVOLVED
WORKERS PRESENT  WORK ZONE COFFICEN/MENCLE)  RELATED  WORK LAW ENFORCEMENT PRESENT (OFFICEN/MENCLE)  LAW ENFORCEMENT PRESENT (VEHICLE ONLY)  TYPE OF WORK ZONE  1 - LANE CLOSURE 2 - LANE SHIFT/CROSSOVER 5 - OTHER 3 - WORK ON SHOULDER OR MEDIAN	RMITTENT OR MOVING WORK R	1 - BEFORE THE FIRST V 2 - ADVANCE WARNING 3 - TRANSITION AREA	WORK ZONE WARNING SIGN	4 - ACTIVITY AREA 5 - TERMINATION AREA
Unit 1 was traveling northbound on Red Lion-5 Points Road. Unit 1 was traveling too fast to negotiate the curve at 5911. Unit 1 crossed the centerline and went off the roadway left. Unit 1 then drove throug a wooden fence and into a deep ditch.  Property owner at 5911 Red Lion-5 Points Road: Dale Adkins (937)554-9100	ph 5911			
REPORT TAKEN BY SUPPLEMENT (CORRECTION OR ADDITION TO			N N SCAL	-
DATE CRASH REPORTED  MOTORIST  AN EXISTING REPORT SENT TO ODPS)  DISPATCH TIME	ARRIVAL TIME	TIME CLEARED	OTHER INVESTIGATION TIME	TOTAL MINUTES
1 0 2 5 2 0 1 7   1 4 5 4   1 4 5 5   0   0   0   0   0   0   0   0   0	1 L 2 5	1 6 3 0 CHECKED BY	3 0	0 1 0 5 Page 1 of 3
110J) =110 E1		0011000		

OHIO OCHIENANO OF PUBLIC SAFETY -	Unit							LOCAL REPO			5 <sub>1</sub> 0 <sub>1</sub> 0 <sub>1</sub> 5 <sub>1</sub> 1 <sub>1</sub> 3 <sub>1</sub> 3 <sub>1</sub>	
104	ndo, Freddy Mae	( SAME AS DRIVER)			OWNER PHONE NUMBER - INC. AREA CODE ( SAME AS DRIVER) (907)301-9735					DAMAGE SCALE	DAMAGED AREA FROHT	
	state, zip (□ sameas driv 'ook DR, Centervi		3							1-NONE	09 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
LP STATE LICENSE PL	BPW8657	,	LE IDENTIFICATION NUMBER  H	6 <sub>1</sub> 6 <sub>1</sub> 0 <sub>1</sub> 9 <sub>1</sub> C <sub>1</sub> 0 <sub>1</sub> 3 <sub>1</sub> 5 <sub>1</sub> 1 <sub>1</sub> 3 <sub>1</sub> 8 <sub>1</sub> 0 <sub>1</sub> 2 <sub>1</sub>					2 - MINOR 3 - FUNCTIONAL	08   10   04		
2 0 0 9	VEHICLE MAKE AC	UR	<u> </u>	SX	VEHICLE COLOR WHI				4 - DISABLING	07 06 05		
PROOF OF INSURA INSURANCE SHOWN  CARRIER NAME, ADDRESS, C	ANCE COMPANY Geic	40323600	110	TOWED BY	Sai	ndys		9 - UNKNOWN REAR CARRIER PHONE- INCLUDE AREA CODE				
US DOT VEHICLE WEIGHT GWRUGGWR CARGO BODY TYPE TRAFFICWAY DESCRIPTION												
HM PLACARD ID No.  HM CLASS		0,000 LBS. 0,000 LBS. N 26,000 LBS.		01 - NO CARGO BODY T 02 - BUSAVAN (9-15 SEAT 03 - BUS (16 - SEATS, IN 04 - VEHICLE TOWING A 05 - LOGGING 06 - INTERMODAL, CON 07 - CARGO VANAENCIC	S, ING DRIVER) G DRIVER) ANOTHER VEHICLE TRAINER CHASSIS	10 - CAR 11 - FLA 12 - ĐUA 13 - GON	IGO TANK IT BED	1 1-TV 2-TV 3-TM 4-1V 5-ON	VO-WAY, VO-WAY, VO-WAY, VO-WAY, VE-WAY T	NOT DIVIDED NOT DIVIDED, CONTR	NUOUS LEFT TURN LANE TED (PAINTED OR GRASS>4 FT.) MEDIAN KEDIAN BARRIER	
NON-MOTORIST LOCATION		TYPE OF USE	UNIT	08 - GRAIN, CHIPS, GRA			IER/UNKNOV					
02 - INTER: 03 - INTER: 04 - MIGBL: 05 - TRAVE 06 - BICYY 07 - SHOUL 08 - SICEY 09 - MEDIA 10 - DRIVE 11 - SHARR 12 - NON-T	DER/ROADSIDE			01 - SUB-COMP 02 - COMPACT 03 - MID SIZE 17 / SKIP 04 - FULL SIZE 05 - MINVAN 06 - SPORT UTI 07 - PICKUP 08 - VAN 09 - MOTORCYC 10 - MOTORIZE 11 - SNOWMOE	ILITY VEHICLE  CLE O BICYCLE GILEZATV SSENIGER VEHICLE	11 11 14 17 18 18 20	3 - SINGLE U 4 - SINGLE U 5 - SINGLE U 6 - TRUCKTE 7 - TRACTOR 8 - TRACTOR 9 - TRACTOR 0 - OTHER M		2 AXI.E, I ES ER	6 TIRES 21 - BUS 22 - BUS NON-MO 23 - AN 24 - ANI 25 - BIO 26 - PEI	IMAL WITH RIDER MAL WITH BUGGY, WAGON, SURREY YCLEPEDACYCLIST DESTRIAMSKATER HER NON-MOTORIST	
04 - 64 05 - 61 06 - 81 07 - 61 08 - 61		17 - FARM VEHICLE 18 - FARM EQUIPMENT NOE 19 - MOTORHOME 20 - GOLF CART 21 - TRAIN 22 - OTHER (EXPLAIN IN NARRATIVE) P. MOST DAMAGED AREA  01 - MONE 01 - MONE 02 - CENTER FRONT 03 - RIGHT FRONT 04 - RIGHT SIDE 05 - RIGHT REAR 06 - REAR CENTER 07 - LEFT REAR				T 10 - TOP AND I 11 - UNDERCA 12 - LOAD/TRA	ONT WINDOW IRRIAGE AILER		ACTION 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - STRIKING/STRUCK 9 - UNKNOWN			
99 - UNKNOWN	IOTORIST D1 - STRAIGHT AHEAD D2 - BACKING D3 - CHANGING LANES D4 - OVERTAKINGPASSING D5 - MAKING RIGHT TURN D6 - MAKING LEFT TURN	07 - MAKING U-TURN 08 - ENTERING TRAFF 09 - LEAVING TRAFF 10 - PARKED 11 - SLOWING OR STO 12 - DRIVERLESS			16 - WALKI 17 - WORI 18 - PUSH	RING OR CRO ING, RUNNIN KING IING VEHICL DACHING OR	ISSING SPECIFIED LOI 16, JOGGING, PLAYIF LE LEAMING VEHICLE			R NON-MOTORIST ACTION		
CONTRIBUTING CIRCUMSTON PRIMARY  117  SECONDARY  90 - UNKNOWN	MOTORIST  01 - NONE 02 - FAILURE TO YIELD 03 - RAN RED LIGHT 04 - RAN STOP SIGN 05 - EXCEEDED SPEED LIMIT 06 - UNSAFE SPEED 07 - IMPROPER TURN 08 - LEFT OF CENTER 09 - FOLLOWED TOO CLOSEL 10 - IMPROPER LANE CHANGI /PASSING/OFF ROAD	OPER ST PEO OR RATING V RVING TO NG SIDI IRE TO ( IN OBST RATING D SHIFTI	R BACKING 22- R START FROM PARKED POSITION 23- OR PARKED ILLEGALLY 24- VG VEHICLE IN NEGLIGENT MANNER 25- STO AVOID (DUE TO EXTERNAL CONDITIONS) 26- SIDE/WRONG WAY 27- TO CONTROL 28- SISTRUCTION 29- SISTRUCTION 30- FFTINGFALLING/SPILLING 30-			NON MOTORIST  22 - NONE  23 - IMPROPER CROSSING  24 - DARTING  25 - LYING ANDOR ILLEGALLY IN ROADWAY  25 - FAILURE TO VIELD RIGHT OF WAY  27 - NOT VISIBLE (DARK CLOTHING)  29 - INATTENTIVE  29 - FAILURE TO OBEY TRAFFIC SIGNS  //SIGNALS/OFFICER  30 - WRONG SIDE OF THE ROAD  31 - OTHER NON-MOTORIST ACTION			VEHICLE DEFECTS  01 - TURN SIGNALS 02 - HEAD LAMPS 03 - TAIL LAMPS 04 - BRAKES 05 - STEERING 06 - TIRE BLOWOUT 07 - WONN OR SLICK TRES 09 - TRAILER EQUIPMENT DEFECTIVE 09 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT			
SEQUENCE OF EVENTS  1 1 1 2 0  EIRST HARMFUL 3	SEQUENCE OF EVENTS    1											
	22 - W (TRAIN, ENGINE) 23 - S O M 24 - O	ED  ARKED MOTOR VEHICLE OTRICZONE MAINTENANC ITRUCK BY FALLING, SHIF RANYTHING SET IN MOTI OTOR VEHICLE THER MOVABLE OBJECT	E EQUI	26 - BRIDGE OVERHE PMENT 27 - BRIDGE PIER OF IRGO 28 - BRIDGE PARAPE	ATOR/CRASH CUSHION EAD STRUCTURE RABUTMENT T CE D	34 - ME 35 - ME 36 - ME 37 - TRA 38 - OV 39 - LIG	DIAN CONCE DIAN OTHER AFFIC SIGN I ERHEAD SIG	DRAIL BARRIER RETE BARRIER R BARRIER POST GN POST RIES SUPPORT	42 - C 43 - C 44 - D 45 - E 46 - F		48 - TREE 49 - FIRE HYDRANT 50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL, BUILDING, TUNNEL 52 - OTHER FIXED OBJECT	
UNIT SPEED  4 0  STATED  STATED  ESTIMATED	POSTED SPEED TRAFFIC	2 CONTROL 01 - NO CONTROL 02 - STOP SIGN 03 - YIELD SIGN 04 - TRAFFIC SIGN 05 - TRAFFIC FLAS 06 - SCHOOL ZON	NAL SHERS	07 - RAILROAD CROSSBUC 08 - RAILROAD FLASHERS 09 - RAILROAD GATES 10 - CONSTRUCTION BARI 11 - PERSON (FLAGGER, OF 12 - PAVEMENT MARKINGS	14 - WAL 15 - OTH RICADE 16 - NOT FICER)	SSWALK LIN KÆDON'T WA ER REPORTEE	/LK	UNIT DIRECTION FROM 2	1	1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	5 - NORTHEAST 9 - UNKNOWN 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST	

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DESIGNATION OF THE PROPERTY AND THE PROPERTY OF THE PROPERTY AND THE PROPE
MUNICES   MAJERED TAKEN BY   EMS AGENCY   MEDICAL FACELITY INJURED TAKEN TO   SAFETY EQUIPMENT USED   DOT COUPS LIGHT STATUS   SEATING POSTICION   ARE BARG USAGE   ELECTICAL THANK   LOCAL TEST VALUE   OTHER STATUS
OL STATE OPERATOR LICEUSE NAMBER  OL STA
A Z D09418676  4 DVALD DOLD DISCRIPTION DI
4511.202  Operation Without Reasonable Control  O16778  Operation Without Reasonable Control  Operation Without Reasonable Con
ADDRESS, CITY, STATE, ZIP    CONTACT PHONE-INCLUDE AREA CODE   M. M. MALE
HIJURED TAKEN BY   EMS AGENCY   MEDICAL FACILITY IMJURED TAKEN TO   SAFETY EQUIPMENT USED   DOT COMPLIANT   SEATING POSITION   ARR BAG USAGE   EJECTION   TRAPI   MOTORIST   MUNICAPORTED   OLI STATE   OPERATOR LICEVISE NUMBER   CL CLASS   NO   MACCONDITION   ALCOHOLORIUG SUSPECTED   ALCOHOL TEST STATUS   DRUG TEST TO CONDITION   ALCOHOLORIUG SUSPECTED   ALCOHOL TEST STATUS   DRUG TEST TO CONDITION   ALCOHOLORIUG SUSPECTED   ALCOHOL TEST TYPE   ALCOHOL TEST VALUE   ORIGINATED BY   MATCONDITION   OLI STATE   DRIVER DISTRACTED BY      INJURIES   INJURED TAKEN BY   SAFETY EQUIPMENT USED   99 - UNKNOWN SAFETY EQUIPMENT   NOT TRANSPORTED   1 - NOT TRANSPORTED   2 - REFLECTIVE CLOTH   3 - RICHARD TAKEN BY   2 - SHOULDER BELT ONLY USED   06 - CHILD RESTRAINT SYSTEM - REAR FACING   10 - HELMET USED   13 - LIGHTING   1 - PROTECTIVE PADS USED   1 - OTHER   1 - OTHER   1 - OTHER   1 - OTHER
DOT COMPLIANT  ARE BAG USAGE EJECTION TRAP  MEDICAL FACILITY INJURED TAKEN TO  SAFETY EQUIPMENT USED  DOT COMPLIANT  MEDICAL FACILITY INJURED TAKEN TO  SAFETY EQUIPMENT USED  DOT COMPLIANT  MEDICAL FACILITY INJURED TAKEN TO  SAFETY EQUIPMENT USED  DOT COMPLIANT  MEDICAL FACILITY INJURED TAKEN TO  DOT COMPLIANT  ARE BAG USAGE EJECTION TRAP  MEDICAL FACILITY INJURED TAKEN TO  SAFETY EQUIPMENT USED  DOT COMPLIANT  ARE DAY  LICOHOL TEST VALUE  ORIGITEST STATUS  DOT COMPLIANT  ARE DAY  LICOHOL TEST VALUE  ORIGITEST TYPE  ALCOHOL TEST VALUE  ORIGITEST STATUS  DORVER DISTRACTED BY  DEVACE  USED  1. NOT TRAP  DEVACE
OFFENSE CHARGED (   LOCAL CODE)  OFFENSE DESCRIPTION  OFFENSE CHARGED (   LOCAL CODE)  OFFENSE DESCRIPTION  OFFENSE CHARGED (   LOCAL CODE)  OFFENSE DESCRIPTION  OFFENSE CHARGED (   DRAWCH DESCRIPTION  OFFENSE DESCRIPTION  OFFENSE CHARGED (   DRAWCH DESCRIPTION  OFFENSE CHARGED (   DRAWCH DESCRIPTION  OFFENSE CHARGED (   DRAWCH DESCRIPTION  OFFENSE DESCRIPTION  OFFENSE CHARGED (   DRAWCH DESCRIPTION  OFFE
OFFENSE CHARGED (
INJURIES INJURED TAKEN BY SAFETY EQUIPMENT USED 99 - UNKNOWN SAFETY EQUIPMENT  1 - NO INJURY / NONE REPORTED 1 - NOT TRANSPORTED / MOTORIST 2 - POSSIBLE TREATED AT SCENE 01 - NONE USED - VEHICLE DCCUPANT 05 - CHILD RESTRAINT SYSTEM - FORWARD FACING 09 - NONE USED 12 - REPLECTIVE CLOTH 3 - NONHICAPACITATING 2 - EMS 02 - SHOULDER BELT ONLY USED 06 - CHILD RESTRAINT SYSTEM - REAR FACING 19 - HELMET USED 13 - LIGHTING 4 - RICAPACITATING 3 - POLICE 03 - LAP BELT ONLY USED 07 - BOOSTER SEAT 11 - PROTECTIVE FADS USED 14 - OTHER 5 - FAIAL 4 - OTHER 04 - SHOULDER AND LAP BELT USED 08 - HELMET USED (ELBOWS, KNEES, ETC)
2 - POSSIBLE TREATED AT SCENE 01 - NONE USED - VEHICLE DCCUPANT 05 - CHILD RESTRAINT SYSTEM - FORWARD FACING 09 - NONE USED 12 - REFLECTIVE OLOTH 3 - NON-INCAPACITATING 2 - EMS 02 - SHOULDER BELT ONLY USED 06 - CHILD RESTRAINT SYSTEM - REAR FACING 10 - HELMET USED 13 - LIGHTING 4 - IRCAPACITATING 3 - POLICE 03 - LAP BELT ONLY USED 07 - BOOSTER SEAT 11 - PROTECTIVE PADS USED 14 - OTHER 5 - FAIAL 4 - OTHER 04 - SHOULDER AND LAP BELT USED 06 - HELMET USED (ELBOWS, KNEES, ETC)
9- UNKNOWN SEATING POSITION AIR BAG USAGE
01 - FRONT - LEFT SIDE (MOTORCYCLE ORIVER) 07 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 12 - PASSENGER IN UNENCLOSED CARGO AREA 1 - NOT DEPLOYED CONT 02 - FRONT - MIDDLE 13 - TRAILING UNIT 2 - DEPLOYED FRONT 03 - FRONT - RIGHT SIDE 05 - THIRD - RIGHT SIDE 14 - RIDBNG ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 3 - DEPLOYED SIDE 04 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 10 - SLEEPER SECTION OF CAB (TRUCK) 15 - NOH-MOTORIST 4 - DEPLOYED BOTH FRONT/SIDE
65 - SECOND - MICROLE 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA 16 - OTHER 5 - NOT APPLICABLE 66 - SECOND - RIGHT SIDE (NON-TRALING UNIT SUCHAS A BUS, PICK-UP WITH CAP) 99 - UNKNOWN 9 - DEPLOYMENT UNKNOWN  E-JECTION TRAPPED OPERATOR LICENSE CLASS CONDITION ALCOHOLORUG SUSPECTED
1 - NOT EJECTED 2 - TOTALLY EJECTED 3 - FARTIALLY EJECTED 4 - NOT APPLICABLE 3 - EXTRICATED BY NOT APPLICABLE 5 - FELL ASLEEP, FAINTED, FATIGUED 5 - VRD ATTHEMPT FOR A SUSPECTED 6 - VRD ATTHEMPT FOR A SUSPECTED 7 - OTHER 7 - OTHER 5 - FELL ASLEEP, FAINTED, FATIGUED 7 - VRD ATTHEMPT FOR A SUSPECTED 7 - OTHER 5 - VRD ATTHEMPT FOR A SUSPECTED 6 - VRS - ALCOHOL AND DRUGS SUSPECTED
ALCOHOL TEST STATUS ALCOHOL TEST TYPE DRUG TEST STATUS DRUG TEST TYPE DRIVER DISTRACTED BY  1 - NONE GIVEN 1 - NONE GIVEN 1 - NO DISTRACTION REPORTED 6 - OTHER INSIDE THE VEHICLE 2 - TEST REFUSED 2 - BLOOD 2 - TEST REFUSED 2 - BLOOD 2 - PHONE 7 - EXTERNAL DISTRACTION
3 - TEST GIVEN, CONTAMINATED SAMPLEAULUS ABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS WINKNOWN 5 - TEST GIVEN, RESULTS
UNIT HUMBER NAME: LAST, FIRST, MIDDLE    0   1   Henry, Sasha   DATE OF BIRTH   AGE   GENDER   F-FEMALE      1   1   1   9   2   0   0   2   14   F   M-MALE
ADDRESS, CITY, STATE, ZIP  CONTACT PHONE-INCLUDE AREA CODE  1783 Harlan RD, Waynesville, Ohio 45068  (513)330-3214
INJURIES INJURED TAKEN BY ENSINGENCY MEDICAL FACILITY INJURED TAKEN TO SAFETY EQUIPMENT USED DOT COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAP
UNIT NUMBER NAME: LAST, FIRST, MIDDLE  DATE OF BIRTH  AGE GENOER  F - FEMALI
ADDRESS, CITY, STATE, ZIP  CONTACT PHONE- INCLUDE AREA CODE
MEDICAL FACILITY INJUREO TAKEN BY   EMS AGENCY   MEDICAL FACILITY INJUREO TAKEN TO   SAFETY EQUIPMENT USED   DOT COMPLIANT   SEATING POSITION   AIR BAG USAGE   EJECTION TRAF
L MOTORCYCLE HELMET L MOTORCYCLE

TRAFFIC CRASH REPORT	LOCAL REPORT HUMBER *		CRASH SEVERITY HIT/SKIP
ESOCATION - MATICAL - PROJECT - PROJ	L <sub>1</sub> P <sub>1</sub> 1 <sub>1</sub> 7 <sub>1</sub> 1	0 2 5 0 0 5 1 3	3 2 1. FATAL 2 - RAJURY 3 - PDO 2 - UNISOLVED 2
PHOTOS TAKEN	o. Police Department	1011	NUMBER OF UNIT IN ERROR UNITS 98 - ANIMAL 99 - UNKNOWN
COUNTY* CITY. VILLAGE, TOWNSHIP*			TIME OF CRASH DAY OF WEEK
DEGREES / MINUTES / SECONDS	DECIMAL DEGREES		
O / // CONGITUDE O /	// R 3 9 1 3	1 <sub>1</sub> 7 <sub>1</sub> 5 <sub>1</sub> 0 <sub>1</sub> 4 <sub>1</sub> -8	4,113,7,2,3,9
DIVIDED   N-NORTHBOUND E-EASTBOUND   0 2   0 2   0 2   0 2	VENUE CT+COURT	HE HEIGHTS MP-MALEPOST PL-PL HW-HEGHWAY PK PAYKWAY RO-RO LA-LANE PI-PIKE SQ-SQ	AD TE-TERRACE
LOCATION ROUTE NUMBER  LOCATION ROUTE  TYPE:  LOCATION ROUTE NUMBER  LOCATION ROAD NAME  LOCATION ROAD NAME  N. S.  E.W  Red Lion-5 Points	R   D   i	ROUTE TYPES 1 IR - INTERSTATE ROUTE (INC. TUR TYPE 2 US-TUS ROUTE SR - STATE ROUTE	WIPIKE) CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE
	REFERENCE NAME (ROAD, MI U.S. E.W 5911	ILEPOST, HOUSE #)	REFERENCE ROAD TYPE-2
3 1 - INTERSECTION 02 - FOUR-WAY INTERSECTION 07 - ON RAMP	11 - RAILWAY GRADE CROSSING 12 - SHARED-USE PATHS OR TRAILS 99 - UNKNOWN	THITERSECTION RELATED 6 3-1	FIRST HARMFUL EVENT IN ROADWAY 5 - ON GORE IN SHOULDER 6 - OUTSIDE TRAFFICWAY IN MEDIAN 9 - URKKRAYM IN ROADSIDE
1 - STRAIGHT LEVEL 4 - CURVE GRADE PRIMARY SECONDARY 02 - STRAIGHT GRADE 9 - UNKNOWN 03 - 03 - 03 - 03 - 03 - 03 - 03 - 03	DRY 05 - SAND, MUD, DIF WET 06 - WATER (STANDIN SNOW 07 - SLUSH ICE 08 - DEBRIS*		S, UNEVEN PAVEMENT *  * SECONDARY CONDITION ONLY
MANNER OF CRASH COLLISION/MPACT  1 -NOT COLLISION BETWEEN 2 - REAR-END 5 - BACKING 8 - SIDESWIPE, OPPOSIT  1 -NOT COLLISION BETWEEN 2 - REAR-END 5 - BACKING 8 - SIDESWIPE, OPPOSIT  1 -NOT COLLISION BETWEEN 2 - REAR-END 5 - BACKING 8 - SIDESWIPE, OPPOSIT  1 -NOT COLLISION BETWEEN 2 - REAR-END 5 - BACKING 8 - SIDESWIPE, OPPOSIT  1 -NOT COLLISION BETWEEN 2 - REAR-END 5 - BACKING 9 - SIDESWIPE, SAME DIRECTION 9 - UNKNOWN	WEATHER  1 - CLEAR 2 - CLOUDY 3 - FOG, SMC	5 - SLEET, HAIL 8 - BLO	VERE CROSSWINDS WING SAND, SOIL, DIRT, SNOW HERJUNKNOWN
ROAD SURFACE  1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, 5 - DIRT 3 - BRICK/BLOCK 5 - OTHER  UIGHT CONDITIONS  SECONDARY 1 - DAYLIGH 2 - CAWN 3 - DUSK 4 - DARK - L		ADWAY NOT LIGHTED 9 - UNKNOWN KNOWN ROADWAY LIGHTING * SECONDARY CONDITION ONLY	ZONE DIRECTLY INVOLVED RELATED YES, SCHOOL BUS
WORKERS PRESENT  WORK  LAW ENFORCEMENT PRESENT ZONE  RELATED  LAW ENFORCEMENT PRESENT VERROLE ORLY)  LAW ENFORCEMENT PRESENT VERROLE ORLY)  A**- INTER 2 - LANE SHIFTIC/ROSSOVER 3 - WORK ON SHOULDER OR MEDIAN VERROLE ORLY)	MITTENT OR MOVING WORK	OCATION OF CRASH HI WORK ZONE  1 - BEFORE THE FIRST WORK ZONE W/ 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA	ARNING SIGN 4 - ACTIVITY AREA 5 - TERMINATION AREA
Unit 1 was traveling northbound on Red Lion-5 Points Road. Unit 1 was traveling too fast to negotiate the curve at 5911. Unit 1 crossed the centerline and went off the roadway left. Unit 1 then drove throug a wooden fence and into a deep ditch.	Diagram  5911		
Property owner at 5911 Red Lion-5 Points Road: Dale Adkins (937)554-9100			
		RED LION-5 PO	DR STAIK
		$N_{h}$	
			<del>}</del>
REPORT TAKEN BY		NOT TO	SCALE
REPORT TAKEN BY  SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)  DATE CRASH REPORTED  TIME CRASH REPORTED  DISPATCH TRIME	ARRIVALTIME T		STIGATION TIME TOTAL MINUTES
$\begin{bmatrix} 1_1 0_1 2_1 5_1 2_1 0_1 1_1 7_1 & \begin{bmatrix} 1_1 4_1 5_1 4_1 & \begin{bmatrix} 1_1 4_1 5_1 5_1 \end{bmatrix} \end{bmatrix}$	115115	$1_16_13_10_1$ $3_10_1$	[0 <sub>1</sub> 1 <sub>1</sub> 0 <sub>1</sub> 5 <sub>1</sub>
Ney, Eric - LP		COH530	Page 1 of 3

COAL REPORT HUMBER  LP 1 7 1 0 2 5 0 0 5 1 3 3													
UNIT NUMBER OWNER NAME: LAST, FIRST, MIDDLE ( SAME AS DRIVER)  OWNER PHONE NUMBER - INC, AREA CODE ( SAME AS DRIVER)  Rolando, Freddy Mae  (907)301-9735										DAMAGE SCALE	DAMAGED A	FRONT	
OWNER ADDRESS: CITY, 9628 Linden Bi	STATE, ZIP ( SAME	AS DRIVER)	45458		(***)**********************************					1 · NONE	09 💆		03
L	ATE HUMBER BPW8		VEH	IICLE IDENTIFICATION NUMBER J 1 H 1 4 C U 1 2 1 6	NUMBER 7000 PAULT   1000 PAULT					2 - MINOR	08	10	04
	/EHICLE MAKE	ACUR		VEHICLE MODEL	SX	<u> </u>	VEHICLE CO		-	3 - FUNCTIONAL 4 - DISABILING	07		05
	ANCE COMPANY	Geico			LICY NUMBER 4032360010			TOWED BY Sandys				06 REAR	
CARRIER HAME, ADDRESS, CITY, STATE, ZIP  CARRIER PHONE. INCLUDE AREA GODE												,,	
US DOT  HM PLACARD ID No.	1 - LES: 2 - 10,0	HT GWWR/GCWR S THAN OR EQUAL TO 101 TO 26,000 LBS. RE THAN 26,000 LBS.	10K LBS.	PARGO BODY TYPE  01 - NO CARGO BODY TYPENOT APPLICABLE  02 - BUSANAN (9-15 SEATS, INC DRIVER)  03 - BUS (16 • SEATS, INC DRIVER)  04 - VEHICLE TOWING ANOTHER VEHICLE  05 - LOGGING  12 - DUMP  13 - COORRETE MIXER				1 · TV 2 · TV 3 - TV 4 - TV	TRAFFICWAY DESCRIPTION  1 - TWO-WAY, NOT DIVIDED 2 - TWO-WAY, NOT DIVIDED, CONTINUOUS LEFT TURN LANE 3 - TWO-WAY, DIVIDED, UNPROTECTED (PAINTED OR GRASS>4 FT.) MEDIAN 4 - TWO-WAY, DIVIDED, POSITIVE MEDIAN BARRIER 5 - ONE-WAY TRAFFICWAY				
HM CLASS NUMBER	RELEA	DOUS MATERIAL SED		06 - INTERMODAL CON 07 - CARGO VANÆNCLO 08 - GRAIN, CHIPS, GRA	SED BOX	15 - GAR	O TRANSPOR BAGE/REFL IER/UNKNO	ISE I		TIOUTIDANT			
NON-MOTORIST LOCATION PRIOR TO IMPACT  O1 - INTERSECTION - MARKED CROSSWALK O2 - INTERSECTION - OTHER O4 - MIDBLOCK - MARKED CROSSWALK O5 - TRAVEL LANE - OTHER LOCATION O6 - BICLYCLE LANE O7 - SHOULDER/ROADSIDE O8 - SIDEWALK O9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED-USE PATH OR TRAIL 12 - INON-TRAFFICWAY AREA 99 - OTHER/UNKNOWN				PASSENGER VEHICLES (LESS THAN 9 PASSENGE)  99 - UNIKNOWN 03 - MID SIZE  of HIT / SKIP 04 - FULL SIZE 05 - MINIVAN 09 - SPORT UTILITY VEHICLE 07 - PICKUP 08 - VAN 09 - MOTORCYCLE 11 - SNOWMOBILE/ATV 12 - OTHER PASSENGER VEHICLE			NORRS)  MEDMEAVY TRUCKS OR COMBO UNITS > 13 - SINGLE UNIT TRUCK; 3+ AXLES 14 - SINGLE UNIT TRUCK; 3+ AXLES 15 - SINGLE UNIT TRUCK/ TRALER 16 - TRUCK/TRACTOR (808TAIL) 17 - TRACTOR/SEMI-TRALER 18 - TRACTOR/SEMI-TRALER 20 - OTHER MED/HEAVY VEHICLE  HAS HM PLACARD			KLE, 6 TIRES 21 - BUSWAN (9-15 SEATS, INC DRIVE 22 - BUS (16 * SEATS, INC DRIVER) NON-MOTORIST 23 - ANIMAL WITH RIDER 24 - ANIMAL WITH BUGGY, WAGON, 25 - BECYCLE/PEDACYCLIST 26 - PEDESTRIAN/SKATER 27 - OTHER NON-MOTORIST			
04 - 9 05 - 9 06 - 9 07 - 8 08 - 8		R PRIVATE) 12 - MILITA 13 - POLI 14 - PUBL 15 - OTHE	: WAY/MAINTENA! [ARY					T 10 - TOP AND 11 - UNDERCA 12 - LOAD/TR	ONT WINDOY ARRIAGE AILER		3 ACTIO	1 - NON-CONTACT 2 - NON-COLLISIC 3 - STRIKING 4 - STRUCK 5 - STRIKING/STR 9 - UNKNOWN	ON
PRE-CRASH ACTIONS  MOTORIST 01 - STRANGHT ANEAD 02 - BACKING 03 - CHANGING LANES 03 - CHANGING LANES 04 - LEAVING TRAFFIC LANE 04 - CVESTAKINGAPASSING 05 - MAKING LEFT TURN 06 - MAKING LEFT TURN 07 - MAKING LEFT TURN 08 - MAKING LEFT TURN 08 - MAKING LEFT TURN 09 - LINENOWN 09 - LI													
CONTRIBUTING CIRCUMST PRIMARY  11 7  SECONDARY  99 - UNKNOWN	ANCES  MOTORIST  01 - NONE  02 - FAILURE TO YIEI  03 - RAN RED LIGHT  04 - RAN STOP SIGN  05 - EXCEEDED SPEI  06 - UNSAFE SPEED  07 - IMPROPER TURN  08 - LEFT OF CENTER  09 - FOLLOWED TOO  10 - IMPROPER LANE /PASSING/OFF	ED LIMIT  R  R  C  CLOSELY/ACDA  CHANGE	13 - STOPPED ( 14 - OPERATIN 15 - SWERVING 16 - WRONG S 17 - FAILURE 10 18 - VISION OB 19 - OPERATIN 20 - LOAD SHIF	PER BACKING  22 PER START FROM PARKED POSITION  23 PER START FROM PARKED POSITION  24 PER START FROM PARKED ILLEGALLY  25 PER START FROM PARKED ILLEGALLY  26 PER START FROM PARKED ILLEGALLY  26 PER START PARKED ILLEGALLY  27 PER TO CONTROL  28 PER START PARKED PARKED  29 PER START PARKED PARKED  29 PER START PARKED PARKED  30 PER START PARKED			NON-MOTORIST  22 - NONE  23 - IMPROPER CROSSING  24 - DANTING  25 - LYNING ANDOR ILLEGALLY IN ROADWAY  26 - FAILURE TO YIELD RIGHT OF WAY  27 - NOT VISIBLE (DARK CLOTHING)  28 - INATTENTIVE  29 - FAILURE TO OBEY TRAFFIC SIGNS  /SIGNALS/OFFICER  30 - WRONG SIDE OF THE ROAD  31 - OTHER NON-MOTORIST ACTION			02 03 04 05 06 07 08 09	- TURN SIGN - HEAD LAM - TAIL LAMI - BRAKES - STEERING - TIRE BLOW - WORN OR S - TRAILER EC	PS  YOUT SLICK TIRES KUPMENT DEFECTIVE DUBLE ROM PRIOR ACCIDE	
SEQUENCE OF EVENTS	9 ³4 6	4 <b>4 1</b> 5	6	NON COLLISION EVEN 01 - OVERTURN/ROLL 02 - FIRE/EXPLOSIO	LOVER		PMENT FAIL			DSS MEDIAN			
FIRST HARMFUL 3	MOST 3	99	э - имкиоми	03 - IMMERSION 04 - JACKKNIFE	IENT LOSS OR SHIFT	07 - SEPA 08 - RAN	OFF ROAD	UNITS RIGHT	OPF 12 - DOV	POSITE DIRECTION O WINHILL RUNAWAY HER NON-COLLISION			
COLLISION WITH PERSO 14 - PEDESTRIAN 15 - PEDALCYCLE 16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE II	TRAIN, ENGINE) I TRANSPORT	21 - PARKED MOTO 22 - WORK ZONE M 23 - STRUCK BY FAI OR ANYTHING S MOTOR VEHICU 24 - OTHER MOVABL	IAINTENANCE EG LLING, SHIFTING SET IN MOTION B E	26 - BRIDGE OVERHE RUIPMENT 27 - BRIDGE PIER OF CARGO 28 - BRIDGE PARAPE	ATORYCRASH CUSHION EAD STRUCTURE RABUTMENT T CE	34 - ME 35 - ME 36 - ME 37 - TR 38 - OV 39 - LIG	DIAN CONCI DIAN OTHE AFFIC SIGN ERHEAD SIG	DRAIL BARRIER RETE BARRIER R BARRIER POST GN POST RIES SUPPORT	42 - 0 43 - 0 44 - 0 45 - 6 46 - 6	OTHER POST, POLE OR SUPPORT CULVERT CURB DITCH EMBANKMENT FENCE MAILBOX	60 - WOR EQUI 51 - WAL	: HYDRANT K ZONE MAINTENAN PMENT L, BUILDING, TUNNE R FIXED OBJECT	
UNIT SPEED  4 0  stated  stated  stated	РОSTED SPEED [4 <sub>1</sub> 5 <sub>1</sub>	02 - ST 03 - Y4 04 - TR 05 - TR	O CONTROLS TOP SIGN IELD SIGN RAFFIC SIGNAL RAFFIC FLASHER: CHOOL ZONE	07 - RAILROAD CROSSBUC: 08 - RAILROAD FLASHERS 09 - RAILROAD GATES 10 - CONSTRUCTION BARR 5 13 - PERSON (FLAGSER, OF	14 - WAL 15 - OYF RICADE 16 - NOT FRICER)	SSWALK LIN KÆDON'T WÆ IËR REPORTEL	\LK	FROM 2	10	1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	5 - NORTH 6 - NORTH 7 - SOUTH 8 - SOUTH	WEST FAST	WN

		OHIO MOPPUBLIC SAFETY	OTORIST	<u>/ N</u>	<mark>Л-</mark> ИС	<b>No</b>	ΓORI	st / <b>O</b> c	C	UPANT	LOCAL REPO		1 <sub>0</sub> 2 <sub>1</sub> 5	5.0.0.5	.1.3.3	3,	
ĺ	UNIT HUMBE		RST MIDDLE a, Chantille Mae								DATE OF BIRTH			AGE	GENDER F-F	EMALE.	
	ADDRESS, C	EITY, STATE, ZIP									CONTACT PHONE-INCLUDE AREA CODE						
MOTORIST		INDRED TAKEN BY	k DR, Centerville	, Ohio	45458	MEDICAL	FACILITY INJ	URED TAKEN TO	SAF	ETY EQUIPMENT USED	BOT COM	OLIANIT	(90 SEATING POSITION	17)267-96	.,	TRAPPED :	
RIST/NON-N	4	2	MEDIC21		Fran	klin Urg	gent Care	0 4			MOTORCYCLE HELMET  01			4 1 1			
MOTO	OL STATE	D0941867		d CLASS	OL NO	END. CONDITION ALCOHOLORUG SUSPECTED ALCOHOL TEST STATUS					US ALCOHOL TEST TYPE ALCOHOL TEST VALUE DRUG TEST STA					IEST TYPE	
Ì		OFFENSE CHARGED ( ☐ LOCAL CODE)  OFFENSE DESCRIPTION  OPERATION WIthout Reasonable Control  O											016778 Device				
ŀ	UNIT HUMBER NAME: LAST, FIRST, MIDDLE DATE OF BIRTH											AGE GENDER GENDER					
												CONTACT PHONE: INCLUDE AREA CODE					
ST/NON-MOTORIST	INJURIES I	INJURED TAKEN BY	EMS AGENCY			Lucroson	CA CILITY IN I	URED TAKEN TO		ETY EQUIPMENT USED					-1		
RIST/NON-1			ENGNOCKO			MEDICAL	CACILLI I INSI	JAED TAKEN TO	SAFE	TY EQUIMENT USED	DOT COME MOTORCYC HELMET	- LOUII	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
MOTO	OLSTATE	OPERATOR LICENSE	NUMBER	OL CLASS	NO □VALID [	J <sup>M/C</sup> END.	CONDITION	ALCOHOLDRUG SUSPECTED	,	LCOHOL TEST STATUS	ALCOHOL TEST	TYPE AL	COHOL TEST VALUE	DRUG TEST ST	ATUS DRUGT	EST TYPE	
	OFFENSE C	HARGED ( LOCA	L CODE)	OFFER	ISE DESCRIPTIO	DIA			CIT	ATION NUMBER			HANDS-I	REE DRIVE	RDISTRACTED	BY	
ŀ	(NJURIES	URY/NONE REPORTE	INJURED TAKEN BY	Actual Property of the	SAFETY EQU	IPMENT US	i <b>E</b> D	99 - UNKNO	WN S	AFETY EQUIPMENT		λυν	USED				
	2 - POSSIB	RE CAPACITATING	TREATED AT SCEN 2 - EMS 3 - POLIGE		医多形成性 化氯基酚苯基酚甲酚	DER BELT C	40.781172234	<ul> <li>6.760111769-1-49-41-61 (1957) 6.5 (1778) 6.5 (1978)</li> </ul>	RESTR	AINT SYSTEM - FORWAI AINT SYSTEM - REAR F AT		09 - 10 -	NONE USED HELMET USED PROTECTIVE PADS	13.	REFLECTIVE C LIGHTING OTHER	LOTHING	
	6 - FATAL		4 - OTHER 9 - UNKNOWN		04-SHOUL	DERANO LA	P BELT USED	08 - HELME	I USE	9			FLBOWS, KNEES, ET	O)			
	02-FRONT	F-LEFT SIDE (MOTORC	YCLE DRIVER)	08-	CHIRD - LEFT S THIRD MIDDLE THIRD - RIGHT		CYCLE SIDE		3 - TR	SSENGER IN UNENCLO AILING UNIT DING ON VEHICLE EXTER			1- 2-	BAG USAGE NOT DEPLOYED DEPLOYED FRON DEPLOYED SIDE	T		
	04 - SECON 05 - SECON	IO - LEFT SIDE (MOTOR ND - MIDOLE ID - RIGHT SIDE	CYCLE PASSENGER)	10-1 11-1	SLEEPER SECT PASSENGER IN NON-TRAILING (	ION OF CAB OTHER EN	CLOSED CAR	GDAREA 1	5 - NC 6 - OI	N-MOTORIST	SON (NOW) RAID	KG DWIT	4 - 5 -	DEPLOYED BOTH NOT APPLICABLE DEPLOYMENT UN			
Ī	EJECTION 1 - NOT EJI	ECTED	RAPPED  1 - NOT TRAPPED  2 - EXTRIGATED BY	1-C	ATOR LICENS LASS A LASS B	E CLASS	,	NOITION - APPARENTLY NORMAL			FELL ASLEEP, FA	s, kai ilisaa dii 16 k	ATIGUED (.	OHOLIDRUG SUS NONE			
		LLY EJECTED	MECHANICAL MEANS  1 - EXTRICATED BY NON-MECHANICAL MEANS	9-C 4-R	LASS C EGULAR CLAS: ICALOPED <u>ON</u> I		. 3	- PHYSICAL IMPAIRMENT - EMOTIONAL (GEPRESSED - HLINESS	ANGE	CY, DISTURBED)	UNDER THE INFO MEDICATIONS, D OTHER		3 - 4 -	YES - ALCOHOLS YES - HBD NOT II YES - DRUGS SUS YES - ALCOHOLA	APAIRED SPECTED	SPECTED	
İ	1 - NONE G			LCOHOL TES 1 - NONE		RUG TEST : I - NONE GI	VEN			DRUG TEST TYPE 1-NONE	ORIVER DISTR			6-OTHER	NSIDE THE VE	HICLE	
١	4 - TEST G	EFUSED IVEN, CONTAMINATED IVEN, RESULTS UNKN IVEN, RESULTS UNKN	SAMPLE/UNUSABLE IN	2 - BLOOD 3 - URINE 4 - BREATH 5 - OTHER		4 - TEST GN			E	2 - BLOOD 3 - URINE 4 - OTHER	2 - PHONE 3 - TEXTING/E 4 - ELECTRON 5 - OTHER ELI	IIC COMM	UNICATION DEVICE		AL DISTRACTA	эн	
ŀ	UNIT NUMBER	R NAME LAST, FIF									(NAMEATIO	N DEVICE, I	RADIO, GVD)	AGE	GENDER	MALE	
F%-	ADDRESS, CI	Henry, S	asha								<sub>ا</sub> 1 <sub>ا</sub> 1ر1 <sub>ا</sub> ا		10   0   2   PHONE-INCLUDE AR	14 EACODE	<b>F</b> M-N		
OCCUP		·	aynesville, Ohio	45068		LHEDICAL	EACH ITY IN I	JRED TAKEN TO	CACE	TY EQUIPMENT USED		I,		3)330-321		TO AND DE	
	1	1	··					The second 19	0	1.7	DOT COME MOTORGYCE HELMET	CIMICI	0 3	2	1	1 1	
	NNIT NUMBER	R NAME: LAST, FIR	ST, MIDDLE							Ε	PATE OF BIRTH	 I I		AGE	GENDER F · FE M · M	MALE ALE	
COPANT	ADDRESS, CI	TY, STATE, ZIP								1		CONTACT	PHONE- INGLUDE AR	EA CODE			
ř	INJURIES I	INJURED TAKEN BY	EMS AGENCY			MEDICAL	FACILITY INJU	JRED TAKEN TO	SAFE	TY EQUIPMENT USED	DOT COMP	LIANT	EAYING POSITION	AIR BAG USAGE	EJECTION	YRAPPED	
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