OHIO DEPARTMENT TRAFFIC CRASH REPORT  *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT									LOCAL REPORT NUMBER *					
☐ PHOTOS TAKEN	■ OH-2	OH-3	2 0 2 3	2   7   1   0										
SECONDARY CRASH		OTHER REI	ORTING AGENCY	NAME *			NCIC *	HIT/SKIP 1 - Solved	NI IMPED OF LINITS	1 0 1 1 98 - ANIMAL				
	GARFIELD HEIGHTS							2 - Unsolved  CRASH DA		0 1 99 - UNKNOWN  CRASH SEVERITY				
1 1 8 1 1	1 - CITY * 2 - VILLAGE *	GARFIELD				10006202	5 1- FATAL 2- SERIOUS INJURY							
ROUTE TYPE	ROUTE NUMBER		1 - NORTH 2 - SOUTH	LOCATION ROAD	NAME		ROAD TYPE	I ATITITE DECIM	SUSPECTED  3 - MINOR INJURY					
Госатю			3 - EAST 4 - WEST	Vista			W A	4 1 . 4 0	9   5   1   6	SUSPECTED 4 - INJURY POSSIBLE				
ROUTE TYPE	ROUTE NUMBER	1	1 - NORTH 2 - SOUTH	REFERENCE R	OAD NAME (ROAD, MILEPOST,	HOUSE #)	ROAD TYPE	LONGITUDE DECIMAL	5 - PROPERTY DAMAGE ONLY					
REFEREN			3 - EAST 4 - WEST	9791				8 1 1 6 1	<sub> </sub> 6 <sub> </sub> 1 <sub> </sub> 1 <sub> </sub> 7 <sub> </sub>					
REFERENCE POINT  1 - INTERSECTION	DIRECTION  DEEEDEMAN  1 - NORTH	ID INTERCT	TE ROUTE (TP)	AL		NAN TYPE V - HIGHWAY	RD - ROAD	WITHIN INTERSE	INTERSECTION RELATE	D				
2 - MILE POST 3 - HOUSE #	2 - SOUTH 3 - EAST 4 - WEST	US - FEDERAL SR - STATE R	US ROUTE	AV-	AVENUE LA BOULEVARD MP	- LANE - MILEPOST	SQ - SQUARE ST - STREET TE - TERRACE			_ 3 _				
DISTANCE	DISTANCE		ED COUNTY ROUT ED TOWNSHIP	TE CT DR	COURT PK - DRIVE PI	- PARKWAY	TL - TRAIL WA - WAY	WITHIN INTERCH	ANGE AREA ROADWAY	NUMBER OF APPROACHES				
EDOM DECEDENCE	1 - Miles 2 - Feet 3 - Yards	NOOTE		112	TEOMS 12	-T ENOE		☐ ROADWAY DIVID						
	CATION OF EIDST HADMEIII			MAN	NER OF CRASH COLLIS	ION/IMPACT		DIRECTION OF TRAVEL		MEDIAN TYPE				
0 1 1-ON ROAD 2-ON SHOU	JLDER 10 - DRIVEWA N ACCESS	Y / ALLEY	6 .	1 - NOT COLLISION BETWEEN TWO MOTOR	4 - REAR-TO-I 5 - BACKING	REAR		1 - NORTH		DED FLUSH MEDIAN				
4 - ON ROAE 5 - ON GORE 6 - OUTSIDE	CROSSING 12 - SHARED I	G USE PATHS		VEHICLES IN TRANSPORT		E, SAME DIRECTION E, OPPOSITE DIRECTION		2 - SOUTH 3 - EAST 4 - WEST	(≥4 F	DED FLUSH MEDIAN				
TRAFFICI 7 - ON RAMP 8 - OFF RAM	13 - BIKE LANE IP 14 - TOLL BOO	E DTH		2 - REAR-END 3 - HEAD-ON	9 - OTHER / U			4-11201	4 - DIVIE (ANY	DED, RAISED MEDIAN TYPE)				
	99 - OTHER / L	JNKNOWN							9-010	ER / UNKNOWN				
☐ WORK ZONE RELATED		WORK ZONE T	/PE		LOCATION OF	CRASH IN WORK ZO	NE	CONTOUR	CONDITIONS	SURFACE				
WORKERS PRESENT LAW ENFORCEMENT	2-	LANE CLOSURE LANE SHIFT/CROSSOVE WORK ON SHOULDER	R		WARNI 2 - ADVAN	RE THE 1ST WORK ZON NG SIGN ICE WARNING AREA	NE	1 1	<sub>1</sub> 1 <sub>1</sub>	_ 2 _				
PRESENT		OR MEDIAN INTERMITTENT OR MOV OTHER	NG WORK		4 - ACTIVI	ITION AREA TY AREA NATION AREA		1 - STRAIGHT LEVEL 2 - STRAIGHT	1 - DRY 2 - WET	1 - CONCRETE 2 - BLACKTOP,				
ACTIVE SCHOOL ZONE		OTHER						GRADE 3 - CURVE LEVEL 4 - CURVE GRADE	3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT,	BITUMINOUS, ASPHALT 3 - BRICK/BLOCK				
1 - DAYLIGHT	CONDITION		1 - CLEAR		VEATHER 6 - SNOW			9 - OTHER /UNKNOWN	OIL, GRAVEL 6 - WATER (STANDING, MOVING)	4 - SLAG, GRAVEL, STONE 5 - DIRT				
	WAY NOT LIGHTED	12	4 - RAIN	MOG, SMOKE		SOIL, DIRT, SNOW OR FREEZING DRIZZLE	Ē		7 - SLUSH 9 - OTHER/UNKNOWN	9 - OTHER /UNKNOWN				
5 - DARK - UNKNO 9 - OTHER / UNKN	OWN ROADWAY LIGHTING NOWN		5 - SLEET,	HAIL	99 - OTHER / UNKNO	WN								
NARRATI\/F							1 1	<u> </u>		Indicate the north direction with				
UNIT # 1 WAS										an "N" on the compass diagram.				
DRIVE NEAR	9791 VISTA W	VAY. UNIT	# 2 WA	S			North គ្							
TRAVELING V	VEST NEAR T	HE DRIVE	WAY O	F 9791		No	ot To Scale							
VISTA WAY. U	NIT#1ENTE	RED THE	LANES	OF TRAV	EL	si								
AS A RESUL	T, THE FRON	T.O.FUNI.	#. 1. C.C	LLIDED					\\v_v	sta Way				
WITH THE RIGHT SIDE OF UNIT # 2. BOTH UNITS LEFT														
THE SCENE A	ND REPORT	TAKEN IN	A PARI	KING LOT.										
NOTE: SEE OH-2								ı Lot						
							3		4					
	9791													
								. 77						
CRASH REPORTED		   1101016	DISPATCH DATE   2   0   2   3	/TIME 	1 101016	ARRIVAL DATE/TIME		SCENE CLEAF	RED DATE/TIME 2 3   1 4 3 9	REPORT TAKEN BY POLICE AGENCY				
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S	NAME *			CHECKED BY OF	FFICER'S NAME*		MOTORIST				
_			R. Cra		BADGE NUMBER*		N. Rossi	CHECKED BY OFFICER'S BADGE	NUMBER*	SUPPLEMENT (CORRECTION on ADDITION 10 on Sizelline Select Each 1% octors				
0	3 0	0		$0 \mid 3 \mid$	7			S   1   3						

	OH OF MAPET	IO DEPARTMENT PUBLIC SAFETY TY - BERVICE - PROTECTION						2,0,2,3,2	LOCAL REPORT NUMBER		
	UNIT#	OWNER NAME: LAST, FIRST, MIDDLE	· (■ Sam :NCE EMERSON	ne As Driver)	OWNER P	HONE: INCLUDE AREA CODE	( Same As Driver)		DAMAGE DAMAGE SCALE		
ER		SS: STREET, CITY, STATE, ZIP	( Same As Dr					1 - NONE	3 - FUNCTIONAL DAMAGE		
NMO	3652	E 65TH ST		CLEVELA		OH	44105	9 2 - MINOR DAMAGE	4 - DISABLING DAMAGE 9 - UNKNOWN		
	COMMERCIAL CA	RRIER: NAME, ADDRESS, CITY, STATE, ZIP		AREA CODE							
Ħ	LP STATE	LICENSE PLATE #	VE	EHICLE IDENTIFICATION #		VEHICLE YEAR	VEHICLE MAKE		DAMAGED AREA(S) INDICATE ALL THAT APPLY		
	OH	HPD4928		8   K   6   7   W   5   3   3   6   1   1   1   1   1   1   1   1   1	8,6,0	2 0 0 7	Dodge	11 12	11 12		
		JRANCE INSURANCE COMPANY RIFIED		INSURANCE POLICY #		VEHICLE COLOR  BLK	Other/Unknow	10 11 1	2 10 11 1 2		
	П	TYPE OF USE	IN EMERGENCY	US DOT#	TOWED	BY: COMPANY NAME		9 9 3	3 9 9 3 3		
	COMMERC		RESPONSE # OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR	HAZARDO		MATERIAL	7 7 9 5	7 5 74		
	DEVICE EQUIPPE	☐ HIT/SKIP UNIT	0 1	1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.		MATERIAL RELEASED PLACARD	CLASS# PLACARD ID #	7 6 5	11 7 6 5		
		1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	12 - GOLF CART	18 - LIMO (L		23 - PEDESTRIAN/SKATER 24 - WHEELCHAIR (ANY TYPE)	10/	12 1 2		
	0 3	2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP	8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED	13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR	20 - OTHER 21 - HEAVY	VEHICLE EQUIPMENT	25 - OTHER NON- MOTORIST 26 - BICYCLE	9 (	9 3 3		
	UNIT TYPE	5 - CARGO VAN 6 - VAN (9-15 SEATS)	BICYCLE 11 - ALL TERRAIN VEHICLE	16 - FARM EQUIPMENT 17 - MOTORHOME			27 - TRAIN 99 - UNKNOWN OR HIT/SKIP	8	8 4 7		
/EHICLE			(ATV / UTV)					11 12 1	7 6 5 11 12		
VEH		# OF TRAILING UNITS						10 12 1	2 10 11 1 2		
	_	WAS VEHICLE OPERATING IN AUTONO WHEN CRASH OCCURED?	MOUS MODE 9	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE	AUTO	DMATION	9 - UNKNOWN	9 10 2 3	3 9 9 3 3		
	9	1 - YES 2 - NO 9 - OTHER / UNKNOW	VN AUTONOMOUS MODE LEVEL	2 - PARTIAL AUTOMATION				8 4 5	8 4 7		
	0 1	1 - NONE 2 - TAXI	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY	11 - FIRE 12 - MILITARY	16 - FAF 17 - MO	WING	21 - MAIL CARRIER 99 - OTHER /UNKNOWN	7 6 5	7 6		
	SPECIAL	4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY  ECIAL 5 - BUS-TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT			18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL		6	12 12 12			
		UNCTION  1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER MOTOR VEHICLE CHASSIS			8 - POLF 12 - CONCRETE MIXER			12			
	0 1			CHASSIS 6 - CARGO VAN/ENCLOSED BOX	10 - FLA	RGO TANK AT BED	3 - AUTO TRANSPORTER 4 - GARBAGE/REFUSE 9 - OTHER / UNKNOWN	9 3 9 3 9 3 9			
				7 - GRAIN/CHIPS/GRAVEL	11 - DU	MP S	9-OTHER/UNKNOWN	0	⊕		
	VE11101 E	1 - TURN SIGNALS		7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE	9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN 10 - DISABLED FROM PRIOR ACCIDENT		9 - OTHER / UNKNOWN	6	6 6 6		
	DEFECTS	1 - INTERSECTION -	3 - INTERSECTION - OTHER	6 - BICYCLE LANE			12 - FIRST RESPONDER	- NO DAMAGE [0]	UNDERCARRIAGE [14]		
	NON-MOTORIST LOCATION AT	MARKED CROSSWALK 2 - INTERSECTION -	4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE-OTHER LOCATION	7 - SHOULDER/ROADSIDE 8 - SIDEWALK		KED USE PATHS UK	AT INCIDENT SCENE 99 - OTHER / UNKNOWN	- TOP [13]	- ALL AREAS [15]		
ı	IMPACT	UNMARKED CROSSWALK 1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEC	GOTIATING A CURVE	18 - APPROACHING	_	IT NOT AT SCENE [16]		
	_	2 - NON-COLLISION 3 - STRIKING 0 8	2 - BACKING 3 - CHANGING LANES	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE	14 - ENT	ERING OR CROSSING CIFIED LOCATION	OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST	in in	ITTAL POINT OF CONTACT		
ı		4 - STRUCK PRE-CRASH 5 - BOTH STRIKING ACTION	4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN	10 - PARKED 11 - SLOWING OR STOPPED	15 - WALKING, RUNNING, JOGGING, PLAYING		21 - STANDING OUTSIDE DISABLED VEHICLE	1 2 0 - NO DAMAGE			
		& STRUCK 9 - OTHER / UNKNOWN	6 - MAKING LEFT TURN	IN TRAFFIC 12 - DRIVERLESS	The state of the s		99 - OTHER / UNKNOWN	DIAGRAM 13 - TOP	99 - UNKNOWN		
									TRAFFIC		
		1 - NONE 2 - FAILURE TO YIELD	7 - LEFT OF CENTER 8 - FOLLOWING TOO	13 - IMPROPER START FROM A PARKED POSITION	18 - OPE	RATING DEFECTIVE	21 - LYING IN ROADWAY 22 - NOT DISCERNABLE	TRAFFICWAY FLOW	TRAFFIC CONTROL		
		3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED	CLOSE/ACDA 9 - IMPROPER LANE CHANGING	14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID	19 - LOA	D SHIFTING/	23 - OPENING DOOR INTO ROADWAY	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN		
	0 2	6 - IMPROPER TURN	10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING	16 - WRONG WAY	20 - IMPROPER CROSSING 99 - OTHER IMPROPER ACTION			2 2 - TWO-WAY	3 - FLASHER 6 - NO CONTROL		
	CONTRIBUTING CIRCUMSTANCES							# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING  1 - NOT INVOLVED		
NT(S)	SEQUENCE OF	EVENTS							2 - INVOLVED - ACTIVE CROSSING		
EVE		1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	EVENTS  11 - CROSS CENTERLINE -	16 - RAII	WAY VEHICLE	22 - WORK ZONE	2	3 - INVOLVED - PASSIVE CROSSING		
	1 2 0	2 - FIRE/EXPLOSION 3 - IMMERSION	7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF TRAVEL	17 - ANIN 18 - ANIN	MAL - FARM MAL - DEER	MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING,	UN	IIT / NON-MOTORIST DIRECTION		
		4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN	19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT		SHIFTING CARGO OR ANYTHING SET IN		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST		
	-	ESSO ON OTHER	STOOG MEDINIY	15 - PEDALCYCLE		KED MOTOR VEHICLE	MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE	rnow 1	3 - EAST 7 - SOUTHEAST		
	3			COLLISION WITH FIXED OBJECT	- STRUCK		OBJECT	FROM 1 TO	2 4-WEST 8-SOUTHWEST		
	,	25 - IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END 32 - PORTABLE BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST	43 - CUF 44 - DITC	н	50 -WORKZONE MAINTENANCE EQUIPMENT	UNIT SPEED	9 - OTHER / UNKNOWN		
		26 - BRIDGE OVERHEAD STRUCTURE	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL	39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE	45 - EMB 46 - FEN	ANKMENT CE	51 - WALL 52 - BUILDING 53 - TUNNEL	Jilli Gi LLD	DETECTED SPEED		
	5	27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL	BARRIER 35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	47 - MAIL 48 - TREI	BUX	53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	0	3 1 - STATED/ESTIMATED SPEED		
		30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	-2-OULYEIN	49 - HRE	III DRANI			2 - CALCULATED / EDR 3 - UNDETERMINED		
	6							POSTED SPEED			
	1 1 .		. 1	OOT HADNEL!				2   5			
HS	Y8304 OH1U 1/19 [	FIRST HARMFUL EVENT	MC	OST HARMFUL EVENT					PAGE OF		

	OH OF MAPET	DIO DEPARTMENT PUBLIC SAFETY TY - BERVICE - PROTECTION						2,0,2,3,2	LOCAL REPORT NUMBER		
	UNIT#	OWNER NAME: LAST, FIRST, MIDDLE OLMEDA CA	· (■ Sam AROLINE MONTA	ne As Driver) ANEZ	OWNER P	HONE: INCLUDE AREA CODE	( Same As Driver)		DAMAGE  DAMAGE SCALE		
ER		SS: STREET, CITY, STATE, ZIP	( Same As Dr	river)				1 - NONE 2 - MINOR DAMAGE	3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE		
OW	14567	JANICE DR		MAPLE H		OH  IAL CARRIER PHONE: INCLUDE	44137	4 2- MINOR DAMAGE	9 - UNKNOWN		
	COMMERCIAL CA	IRRIER: NAME, ADDRESS, CITT, STATE, ZIP		AREA CODE		DAMAGED AREA(S)					
Ī	LP STATE	LICENSE PLATE #		EHICLE IDENTIFICATION #		VEHICLE YEAR	VEHICLE MAKE		INDICATE ALL THAT APPLY		
	OH	HZP9411  JRANCE INSURANCE COMPANY		G D 0 H U D 0 3 3  INSURANCE POLICY#	3 0 6	2 0 1 7	Ford VEHICLE MODEL	11 12 1	11 12 1		
		RIFIED			1	GRY	Escape	10 11 1 2	2 10 11 1 2		
	☐ COMMERC	TYPE OF USE  CIAL GOVERNMENT	IN EMERGENCY RESPONSE	US DOT#	TOWED BY: COMPANY NAME			9 9 3	), , , , , , , , ,		
	INTERLO DEVICE EQUIPPE	☐ HIT/SKIP UNIT	# OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR  1 - ≤10K LBS. 2 - 10,001 - 26K LBS.	MATERIAL RELEASED		MATERIAL  CLASS# PLACARD ID#	8 7 6 5 5	4 8 7 5 4		
	EQUIPPE	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	3 - >26K LBS. 12 - GOLF CART	18 - LIMO (L		23 - PEDESTRIAN/SKATER	5 10 /	1 1 2 6		
	10131	2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE	8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE	13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK	20 - OTHER	VEHICLE	24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON- MOTORIST 26 - BICYCLE	9	10 2 3		
	UNIT TYPE	4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)	10 - MOPED OR MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE	15 - SEMI-TRACTOR 16 - FARM EQUIPMENT 17 - MOTORHOME	22 - ANIMAL	WITH RIDER OR	27 - TRAIN 99 - UNKNOWN OR HIT/SKIP				
J.E		(2 32.110)	(ATV / UTV)					12	6 5 12		
VEHICLE		# OF TRAILING UNITS						10 12 1	2 10 11 1 2		
		WAS VEHICLE OPERATING IN AUTONO WHEN CRASH OCCURED?	MOUS MODE 0	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE	AUTO	OMATION	9 - UNKNOWN	9 10 2 3	3 9 10 2 3 3		
		1-YES 2-NO 9-OTHER/UNKNOW	WN AUTONOMOUS MODE LEVEL	2 - PARTIAL AUTOMATION		AUTOMATION AUTOMATION		8 7 5	8 4 7		
	0 1	1 - NONE 2 - TAXI	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY	11 - FIRE 12 - MILITARY	16 - FARM 21 - MAIL CARRIER 17 - MOWING 99 - OTHER JUNKNOWN 18 - SNOW REMOVAL			7 6 5	7 6		
		4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY  SPECIAL 5 - BUS-TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPME				WING FETY SERVICE PATROL		· ·	12 12 12		
		O 1 1 1 NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER CHASE ARGO BODY TYPE 4 - LOGGING 5 - INTERMODAL CONTAINE ARGO BODY TYPE 7 - GRAINCHIPSIGRAVEL		5 - INTERMODAL CONTAINER	8 - POLE 12 - CONCRETE MIXER			12	<b>1 1 1</b>		
	1011			CHASSIS 6 - CARGO VAN/ENCLOSED BOX		RGO TANK AT BED	13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN	9 3 9 3 9 3 9 3 9			
								6			
	VEHIOLE	1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS	4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT	7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE	10 - DIS	ABLED FROM PRIOR IDENT	99 - OTHER / UNKNOWN		6 6 6		
		1 - INTERSECTION - MARKED CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED	6 - BICYCLE LANE 7 - SHOULDER/ROADSIDE	10 - DRI	IAN/CROSSING ISLAND VEWAY ACCESS	12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN	- NO DAMAGE [0]	- UNDERCARRIAGE [14]		
	NON-MOTORIST LOCATION AT IMPACT	2 - INTERSECTION - UNMARKED CROSSWALK	CROSSWALK 5 - TRAVEL LANE-OTHER LOCATION	8 - SIDEWALK	11 - SHA TRA	ARED USE PATHS OR ULS	oo oniin onii oo	- TOP [13]	☐ - ALL AREAS [15] IT NOT AT SCENE [16]		
		1 - NON-CONTACT	1 - STRAIGHT AHEAD 2 - BACKING	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE		GOTIATING A CURVE TERING OR CROSSING	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING	IN	IITIAL POINT OF CONTACT		
		3 - STRIKING 4 - STRUCK  PRE-CRASH	3 - CHANGING LANES 4 - OVERTAKING/PASSING	9 - LEAVING TRAFFIC LANE 10 - PARKED	15 - WAI	CIFIED LOCATION LKING, RUNNING,	20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE	0 4 0-NO DAMAGE	14 - UNDERCARRIAGE		
	ACTION	5 - BOTH STRIKING & STRUCK	5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	IN TRAFFIC 16 - WOF		JOGGING, PLAYING DISABLED VEHICI 16 - WORKING 99 - OTHER / UNKNOW 17 - PUSHING VEHICLE		1-12 - REFER TO DIAGRAM	UNIT 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN		
		9 - OTHER / UNKNOWN		IZ - DRIVERLESS	17 - PUS	SHING VEHICLE		13 - TOP			
		1 - NONE	7 - LEFT OF CENTER	13 - IMPROPER START FROM			21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL		
		2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN	8 - FOLLOWING TOO CLOSE/ACDA 9 - IMPROPER LANE	A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY	EQL 19 - LOA	ERATING DEFECTIVE JIPMENT ND SHIFTING/	22 - NOT DISCERNABLE 23 - OPENING DOOR INTO ROADWAY	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN		
	10111	5 - UNSAFE SPEED 6 - IMPROPER TURN	CHANGING 10 - IMPROPER PASSING 11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY		LING/SPILLING ROPER CROSSING	99 - OTHER IMPROPER ACTION	2 - TWO-WAY	6 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL		
	CONTRIBUTING CIRCUMSTANCES		12 - IMPROPER BACKING					# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING		
T(S)	SEQUENCE OF	EVENTS							1 - NOT INVOLVED  2 - INVOLVED - ACTIVE CROSSING		
EVEN			C. FOURDMENT STREET	EVENTS	46 D#"	WAY VEHIC! E	22 . WODE 70NE	2	3 - INVOLVED - PASSIVE CROSSING		
	1 2 0	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION	- EQUIPMENT FAILURE     - SEPARATION OF     UNITS	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL	17 - ANII	.WAY VEHICLE MAL - FARM MAL - DEER	22 - WORK ZONE MAINTENANCE EQUIPMENT	UN	IIT / NON-MOTORIST DIRECTION		
		4 - JACKKNIFE 5 - CARGO / EQUIPMENT	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN	18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN 20 - MOTOR VEHICLE IN 21 - ANYTHING SET IN			1 - NORTH 5 - NORTHEAST			
	<b>'</b>	LOSS OR SHIFT	10 - CROSS MEDIAN	15 - PEDALCYCLE		NSPORT KED MOTOR VEHICLE	MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE		2 - SOUTH 6 - NORTHWEST  3 - EAST 7 - SOUTHEAST		
	3			COLLISION WITH FIXED OBJECT	- STRUCK		OBJECT	FROM 3 TO	4 - WEST 8 - SOUTHWEST		
	4.	25 - IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END 32 - PORTABLE BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST	43 - CUF 44 - DITC	эн	50 -WORKZONE MAINTENANCE EQUIPMENT	UNIT SPEED	9 - OTHER / UNKNOWN  DETECTED SPEED		
	-	26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL	39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE	45 - EMB 46 - FEN	ANKMENT CE	51 - WALL 52 - BUILDING 53 - TUNNEL		DETECTED SPEED		
	5	28 - BRIDGE PARAPET 29 - BRIDGE RAIL	BARRIER 35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	47 - MAIL 48 - TREI 49 - FIRE	E	54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	2 0	1 - STATED/ESTIMATED SPEED		
		30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER					POSTED SPEED	2 - CALCULATED / EDR 3 - UNDETERMINED		
	6							LOSIED SPEED			
	_ 1	FIRST HARMFUL EVENT	1 <sub></sub>	OST HARMFUL EVENT				2   5			
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OHIO DEPARTMENT	MOTORIST / NO	N MOTODI	ет				L	OCAL REPORT NU	JMBER	
OF PUBLIC SAFETY SAFETY - SERVICE - PROTECTION	WICTORIST / NC	JN-IVIO I ORI	31			2	0 2 3 2	2   7   1	0	
M UNIT# NAME: LAST, FIRST	T, MIDDLE									GENDER
$\begin{bmatrix} 0 & 1 \\ RAY \end{bmatrix}$		LAWRENCE	EMER	SON		_	2   2   1   9	9   9   6		<b>」</b>
ADDRESS: STREET, CITY, STATE, ZIP  S 2652 F 65TH	LOT	01	EVELAND	011 4	4405	CONTACT	PHONE - INCLUDE AREA CODE			
<sub>1</sub> 3032 L 0311	IS AGENCY (NAME)		LEVELAND CAL FACILITY (NAME, CITY)	OH 44			SEATING POSITION	I AIR BAG	G USAGE EJECTI	ION TRAPPED
5 BY				USED	9 9 1	DOT-COMPLIAN MC HELMET	<sup>-</sup>	_  _ 1	_1	1
- OL STATE OPERATOR LICE	INSE NUMBER	OFFENSE	CHARGED	LOCAL OF	FFENSE DESCRIPTION			CITATIO	N NUMBER	
М О										
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTE		CONDITION	ALCOHO TYPE		STATUS	DRUG TEST(S) TYPE RE	ESULT SELECT UP TO 4
s 4		8	ALCOHOL MAF	RIJUANA	9 1	ا1		1	1	
M UNIT# NAME: LAST, FIRST	T, MIDDLE	l	П				DATE OF BIRTH		AGE	GENDER
0 2 OLME	EDA	CAROLINE	MONT	ANEZ		[0   4	·   2   6   1   9	9   9   6		」 F
ADDRESS: STREET, CITY, STATE, ZIP			-			CONTACT	PHONE - INCLUDE AREA CODE			
s 14567 JANICE			APLE HTS		4137					
N BY	MS AGENCY (NAME)	INJURED TAKEN TO: MED	ICAL FACILITY (NAME, CITY)	SAFETY EQUIP USED		DOT-COMPLIANT		AIR BAG		
OL STATE OPERATOR LICE	INSE NUMBER	OFFENSE (	CHARGED	LOCAL OF	FENSE DESCRIPTION	— mc relmer	0 1	CITATIO	N NUMBER	_ 1
M O	HOE HOMBER			CODE						
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED	ALCOHOL / DRUG SUSPECTE		CONDITION	ALCOHO	L TEST		DRUG TEST(S)	
R		BY 1	ALCOHOL MAR	RUUANA	1 status	TYPE 1	VALUE		TYPE RES	SULT SELECT UP TO 4
			OTHER DRUG				DATE OF BIRTH		AGE	GENDER
M UNIT# NAME: LAST, FIRST	r, MIDDLE					l	DATE OF BIRTH		AGE	GENDER
R ADDRESS: STREET, CITY, STATE, ZIP						CONTACT	PHONE - INCLUDE AREA CODE			1
ADDRESS. STREET, CITY, STATE, ZIP						CONTACT	PHONE - INCLUDE AREA CODE	1 1	1 1	1 1 1
T INJURIES INJURED EI	MS AGENCY (NAME)	INJURED TAKEN TO: MEDI	CAL FACILITY (NAME, CITY)	SAFETY EQUIP	MENT		SEATING POSITION	AIR BAG	G USAGE EJECTION	ON TRAPPED
N						MC HELMET	· L			
OL STATE OPERATOR LICE	NSE NUMBER	OFFENSE	CHARGED	LOCAL OF	FFENSE DESCRIPTION		<b>'</b>	CITATIO	N NUMBER	
O OL CLASS ENDORSEMENT										
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTE  ALCOHOL MAR	ED RUUANA	CONDITION	ALCOHO TYPE		STATUS	DRUG TEST(S)  TYPE RE	SULT SELECT UP TO 4
S L L L L L			OTHER DRUG					L		
INJURIES	SEATING POSITION  1 - FRONT - LEFT SIDE	AIR BAG	OL CL	ASS	OL RESTRICTI		DRIVER DISTRAC	TION	1 - NONE GIVEN	STATUS
1 - FATAL 2 - SUSPECTED SERIOUS INJURY	(MOTORCYCLE DRIVER)	2 - DEPLOYED FRONT	1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTERLOCK DEVICE		1 - NOT DISTRACTED 2 - MANUALLY OPERATING AN		2 - TEST REFUSED	
3 - SUSPECTED MINOR INJURY	2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3 - DEPLOYED SIDE	3 - CLASS C		2 - CDL INTRASTATE ONL 3 - CORRECTIVE LENSES		ELECTRONIC COMMUNICAT DEVICE (TEXTING, TYPING.	TION	3 - TEST GIVEN, CONT	
4 - POSSIBLE INJURY 5 - NO APPARENT INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT	SIDE 4 - REGULAR CLASS (OF	HIO = D)	4 - FARM WAIVER 5 - EXCEPT CLASS A BUS		DIALING)		SAMPLE / UNUSABI 4 - TEST GIVEN, RESU	
5 - NO ALL ANCENT INSURT	5 - SECOND - MIDDLE	5 - NOT APPLICABLE	5 - M / C MOPED ONLY		6 - EXCEPT CLASS A		3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE		5 - TEST GIVEN, RESU	
INJURED TAKEN BY	6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	9 - DEPLOYMENT UNKNOWN	6 - NO VALID OL		& CLASS B BUS 7 - EXCEPT TRACTOR-TR	AILER	4 - TALKING ON HAND-HELD COMMUNICATION DEVICE			
1 - NOT TRANSPORTED /TREATED AT SCENE	(MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE				8 - INTERMEDIATE LICEN RESTRICTIONS	SE	5 - OTHER ACTIVITY WITH AN			
2 - EMS	9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF	EJECTION	OL ENDOR	SEMENT	9 - LEARNER'S PERMIT RESTRICTIONS		6 - PASSENGER			OL TEST TYPE
3 - POLICE	TRUCK CAB	1 - NOT EJECTED	H - HAZMAT  M - MOTORCYCLE		10 - LIMITED TO DAYLIGH	т	7 - OTHER DISTRACTION INSIE	DE	1 - NONE 2 - BLOOD	
9 - OTHER / UNKNOWN	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	2 - PARTIALLY EJECTED  3 - TOTALLY EJECTED	P - PASSENGER		ONLY  11 - LIMITED TO EMPLOY	MENT	THE VEHICLE  8 - OTHER DISTRACTIONS OUT	TSIDE	3 - URINE	
	(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	4 - NOT APPLICABLE	N - TANKER		12 - LIMITED - OTHER 13 - MECHANICAL DEVICE	=q	THE VEHICLE 9 - OTHER / UNKNOWN		4 - BREATH	
SAFETY EQUIPMENT  1 - NONE USED	12 - PASSENGER IN UNENCLOSED		Q - MOTOR SCOOTER		(SPECIAL BRAKES, HAN CONTROLS, OR OTHER	ID	o omenomi		5 - OTHER	
2 - SHOULDER BELT ONLY USED	CARGO AREA	TRAPPED  1 - NOT TRAPPED	R - THREE-WHEEL MOTO	ORCYCLE	ADAPTIVE DEVICES)					
3 - LAP BELT ONLY USED 4 - SHOULDER & LAP BELT USED	13 - TRAILING UNIT 14 - RIDING ON VEHICLE	2 - EXTRICATED BY	S - SCHOOL BUS		14 - MILITARY VEHICLES 15 - MOTOR VEHICLES	ONLY			DRUG 1 - NONE	TEST TYPE
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING	EXTERIOR (NON-TRAILING UNIT)	MECHANICAL MEANS	T - DOUBLE & TRIPLE TF  X - TANKER / HAZMAT	RAILERS	WITHOUT AIR BRAKE 16 - OUTSIDE MIRROR	S			2 - BLOOD	
6 - CHILD RESTRAINT SYSTEM - REAR FACING	15 - NON-MOTORIST 99 - OTHER / UNKNOWN	3 - FREED BY NON-MECHANICAL MEANS			17 - PROSTHETIC AID		1 - APPARENTLY NORMAL		3 - URINE	
7 - BOOSTER SEAT	55 - OTHER/ DIRRIGOWN				18 - OTHER		2 - PHYSICAL IMPAIRMENT		4 - OTHER	
8 - HELMET USED 9 - PROTECTIVE PADS USED							3 - EMOTIONAL (E.G. DEPRESS ANGRY, DISTURBED)	ED,		
(ELBOWS, KNEES, ETC.)  10 - REFLECTIVE CLOTHING			GEND	ER			ANGRY, DISTURBED)  4 - ILLNESS		1 - AMPHETAMINES	ST RESULT(S)
11 - LIGHTING - PEDESTRIAN			F - FEMALE M - MALE				5 - FELL ASLEEP, FAINTED,		2 - BARBITURATES	
/ BICYCLE ONLY 99 - OTHER / UNKNOWN			M - MALE U - OTHER/UNKNOWN				FATIGUED, ETC.		3 - BENZODIAZEPINES 4 - CANNABINOIDS	5
							6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS		5 - COCAINE	
							/ ALCOHOL		6 - OPIATES / OPIOIDS 7 - OTHER	j
							9 - OTHER / UNKNOWN		8 - NEGATIVE RESULT	rs

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OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER								
							2   0   2   3   2	7   1	0					
UNIT:		NAME: LAST, FIR		AMI		DATE OF BIRTH AGE GENDER 1 8 F								
		T, CITY, STATE, ZIP			CONTACT PHONE - INCLUDE AREA	CODE								
ਭੂ 110	14 F	PARKED	GE CLEVELAND OF	1 99999					<u></u>					
INJURII	- 1	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 0 4	DOT-COMPLIANT	NG POSITION	AIR BAG USAGE	EJECTION 1	TRAPPED 1			
UNIT	#	NAME: LAST, FIR	ST, MIDDLE				DATE OF E	BIRTH		AGE	GENDER			
L	$\Box$									ШШ				
ADDRESS	S: STREET	T, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE							
INJURII		INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	NG POSITION	AIR BAG USAGE	EJECTION	TRAPPED			
UNIT	#	NAME: LAST, FIR	IST, MIDDLE				DATE OF E	BIRTH		AGE	GENDER			
ADDRESS	S: STREE	T, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA	CODE	,					
					_	_				<u> </u>				
INJURII		INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	NG POSITION	AIR BAG USAGE	EJECTION	TRAPPED			
UNIT	#	NAME: LAST, FIR	ST, MIDDLE				DATE OF E	BIRTH		AGE	GENDER			
L											<u> </u>			
ADDRESS	S: STREET	T, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA	CODE						
INJURII	IFS	INJURED	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)  SAFETY EQUIPMEN			SEATI	NG POSITION	AIR BAG USAGE	EJECTION	TRAPPED			
ı		TAKEN BY	Line Adelto I (IVAIIIE)		INCORED PARENTO. INEDIOAE PROJETT (NOME, CITY)	USED	DOT-COMPLIANT MC HELMET	l l	AIR BAG GOAGE		1.00.125			
		IN.	IURIES		SAFETY EQUIPMENT USED	SEATI	NG POSITION		AIR BA	G USAGE				
1 - FATAL 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY  INJURED TAKEN BY  1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN			O TAKEN BY	3 - LAP BELT OF 4 - SHOULDER OF 5 - CHILD REST FORWARD FA	BELT ONLY USED  NLY USED  & LAP BELT USED  RAINT SYSTEM -  ACKNOS  RAINT SYSTEM -  G  EAT  ED  EPADS USED  HEES, ETC.)  TE CLOTHING  PEDESTRIAN  NLY  NLY  NLY  NLY  NLY  NLY  NLY  N	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE (MOTORCYCL 8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK (MON-TRALING UNIT, BUS, PICK-U)	SECOND - HIDTLE SECOND - MIDDLE SECOND - MIGHT SIDE HIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) THIRD - MIDDLE SLEEPER SECTION OF TRUCK CAB PASSENGER IN OTHER ENCLOSED CARGO AREA NON-TRALING UNIT, BUS, PICK-UP WITH CAP) PASSENGER IN UNENCLOSED CARGO AREA TRALING UNIT RIDING ON VEHICLE EXTERIOR (NON-TRALING UNIT) NON-MOTORIST			2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN  EUSCHION 1 - NOT EJECTED 2 - PARTIALLY EJECTED 4 - NOT APPLICABLE				
		GE	ENDER											
F - FEMAL M - MALE									TD	ADDED				
u - OTHERUNKNOWN							2 - EXTRIC	TRAPPED  1 - NOT TRAPPED  2 - EXTRICATED BY MECHANICAL MEANS  3 - FREED BY NON-MECHANICAL MEANS						
NAME: LAS	T, FIRST, N	MIDDLE					DATE OF E	прти		AGE	GENDER			
2	,, "						DATE OF E	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP							AREA CODE		<u></u>				
NAME: LAST	NAME: LAST, FIRST, MIDDLE							BIRTH		AGE	GENDER			
ADDRESS:	STREET,	CITY, STATE, ZIP					CONTACT PHONE - INCLUDE	AREA CODE	_ <del>'</del>	<u> </u>				
NAME: LAST	T, FIRST, N	MIDDLE	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER				
H					CONTACT PHONE - INCLUDE AREA CODE									
ADDRESS:	STREET,	CITY, STATE, ZIP					CONTACT PHONE - INCLUDE	AREA CODE						

HSY 8355 OHIP 1/19 [760-1500]



## OHIO TRAFFIC CRASH REPORT DIAGRAM / NARRATIVE CONTINUATION

LOCAL REPORT NUMBER	REPORTING AGENCY  DATE OF CRASH  M. 10 D. 06 LV. 202								
20232710	GARFIELD HEIGHTS M 10 D 06 Y 2023								
IN COUNTY OF 18	CRASH LOCATION	1 1 1							
All information provided by	driver of Unit # 2.								
Drivers exchanged information	tion after crash. Driver of Unit # 2 discovered her	vehicle							
was disabled and need a re	eport for the Foster Care Agency.								
At time of report, this officer	was not able to speak to the driver of Unit # 1.								
	OFFICER'S SIGNATURE	BADGE NUMBER							