OHIO DEPARTME OF PUBLIC SAFI SAFETY - SERVICE - PROTE	TRAFFIC	CRASH	EMENT REPORT	REPORT LOCAL REPORT NUMBER*								
PHOTOS TAKEN	OH-2	OH-3	AL INFORMATION				M-P2502091					
	OH-1P	OTHER REPO	ORTING AGENCY NAME*			NCIC*	HIT/SKIP	NUMBER OF UN	TS L	JNIT IN ERROR		
SECONDARY CR	PRIVATE PR	·	Vernon Police Depa	rtment		04201	1 - SOLVED 2 - UNSOLVED CRASH DATE/		CRAS	98 - ANIMAL 99 - UNKNOWN H SEVERITY		
42 1	1 - CITY 2 - VILLAGE MO	unt Vernon					06/25/2025 11	_	1 -	FATAL SERIOUS INJURY		
	TE NUMBER PREFIX 1	- NORTH LOCA	ATION ROAD NAME			ROAD TYPE		5		SUSPECTED MINOR INJURY		
осатіс	4 3	- SOUTH - EAST VIN	F			ST	40.392741		4 -	SUSPECTED INJURY POSSIBLE		
B ROUTE TYPE ROUT	E NUMBER PREFIX 1	- NORTH REFE	RENCE ROAD NAME (ROA	D, MILEPOST,	HOUSE #)	ROAD TYPE				PROPERTY DAMAGE ONLY		
FEREN	2 3	- SOUTH - EAST - WEST MU	LBERRY			ST	-82.486911					
REFERENCE POIN		F	ROUTE TYPE		ROAD TYPE			INTERSECTION RE	LATED	ı		
1 - INTERSECT 2 - MILE POST	TION 1 - NOF	RTH IR - INTEI	RAL US ROUTE AV	- ALLEY - AVENUE	HW-HIGHWAY LA - LANE	SQ - SQUARE	WITHIN INTER	SECTION OR ON A	APPROA	ACH		
3 - HOUSE #	3 - EAS 4 - WES	ST SR - STAT CR - NUMI	BERED COUNTY CR	- BOULEVARD - CIRCLE - COURT	MP - MILEPOST OV - OVAL PK - PARKWAY	TE - TERRACE	WITHIN INTER	CHANGE AREA				
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASUR		BERED TOWNSHIP DR	- DRIVE - HEIGHTS	PI - PIKE PL - PLACE	WA - WAY		ROADWA		R OF APPROACHES		
40	1 - MILE 2 - FEE 3 - YAR	S ROUT	E				ROADWAY DI	VIDED				
	TION OF FIRST HARM				H COLLISION/IM		DIRECTION OF TRAVE		MEDIAN			
1 - ON ROA 2 - ON SHO 3 - IN MEDIA	ULDER 10 - D	ROSSOVER RIVEWAY/ALLE	Y ACCESS 7 BET	TWEEN 5	4 - REAR-TO-REA 5 - BACKING 6 - ANGLE	AR	1 - NORTH 2 - SOUTH 3 - EAST	(< 4	FEET)	LUSH MEDIAN LUSH MEDIAN		
4 - ON ROA 5 - ON GOR	DSIDE C	RAILWAY GRADE ROSSING BHARED USE PA	AME	4 - WEST	(>= 4	4 FEET)	EPRESSED MEDIAN					
	TRAFFIC WAY T	RAILS SIKE LANE	PPOSITE		4 - DIV		AISE MEDIAN					
7 - ON RAMP 13 - BIKE LANE 3 - HEAD-ON DIRECTION (ANY TYPE) 8 - OFF RAMP 14 - TOLL BOOTH 9 - OTHER/UNKNOWN 9 - OTHER/UNKNOWN												
				_								
WORK ZONE	RELATED		RK ZONE TYPE CLOSURE		ON OF CRASH IN BEFORE THE 1S		CONTOUR	CONDITION	S	SURFACE		
WORKERS PF	RESENT	2 - LANE	SHFT/CROSSOVER ON SHOULDER	١ ١	WARNING SIGN ADVANCE WARN		1	1		2		
LAW ENFORC	EMENT PRESENT		MITTENT OR MOVING	4 - 4	TRANSITION AR ACTIVITY AREA							
ACTIVE SCHO	OOL ZONE	WORK 5 - OTHE		5-	TERMINATION A	REA	1 - STRAIGHT LEVEL	1 - DRY 2 - WET		1 - CONCRETE 2 - BLACKTOP,		
	HT CONDITION			WEATHER			2 - STRAIGHT GRADE	3 - SNOW 4 - ICE	NDT	BITUMINOUS, ASPHALT		
1 - DAYLIG	HT		1 - CLEAR	6 - SNOV			3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER/	5 - SAND, MUD, I OIL, GRAVEL 6 - WATER (STAN		3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE		
	DUSK LIGHTED ROADWAY ROADWAY NOT LIGHT		2 - CLOUDY 3 - FOG, SMOG, SMO 4 - RAIN	KE 8 - BLOV	ERE CROSSWINI VING SAND, SOI EZING RAIN OR F	L, DIRT, SNOW	UNKNOWN	MOVING) 7 - SLUSH	VDIIVO,	5 - DIRT 9 - OTHER/		
	UNKNOWN ROADWAY		5 - SLEET, HAIL	DRIZ		KLLZING		9 - OTHER/UNKN	IOWN	UNKNOWN		
NARRATIVE					DIAGRAM							
Unit 1 was exi			ing lot westbound o									
			d on West Vine Stre ear corner while ente									
roadway.	andorrod trailor		oar corrier write cris	omig mo					C.			
									Not To	Scale		
					103 Wes	ybucket's st Vine Street non, Ohio 43050		U	Ker nit 1			
							Unit 1		nit 2	07 Chrysler Town & Country		
								71		2019 Freightliner M2		
						Unit 2	- 	Unit		1996 Hackney & Son's Trailer		
								_		= Direction of travel		
										= Building		
						† West Vine						
						Street						
CRASH REPOR	TED DATE/TIME	DISP	ATCH DATE/TIME	AR	RIVAL DATE/TIN	ΛE	SCENE CLEARED	DATE/TIME	RE	PORT TAKEN BY		
06/25/2025 11	06/25/202	25 11:43	lo	6/25/2025 12:02	2		POLICE AGENCY					
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	officer's name* Trowbridge, Justin	1		CHECKED BY C	OFFICER'S NAME*		H	MOTORIST		
Trowbridge, Justin							CHECKED BY OFFICER'S BADGE NUMBER* SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTIN					
1				REPORT SENT TO ODPS)								

	F PUBLIC SAFETY UNIT						AL REPORT NUMBER*
UNIT #	OWNER NAME: LAST,	, FIRST, MIDDLE ([SAME AS DRIVER)	OWNER PHONE: INC.	LUDE AREA CODE DRIVER	M-P2502091	DAMAGE
1	DURBIN, MICHA	AEL ALOYSIŪ	ĪS	OWNER THORE: III	DRIVER	1 - NONE	DAMAGE SCALE 3 - FUNCTIONAL DAMAGE
	EWARK RD, MOU					2 - MINOR D	
COMME	RCIAL CARRIER: NAME, A	DDRESS, CITY, STA	ATE, ZIP	COMMERICAL CARR	RIER PHONE: INCLUDE AREA CODE		9 - UNKNOWN AMAGED AREA(S)
LP STATI			HICLE IDENTIFICATION #	VEHICLE Y	1	INDI	CATE ALL THAT APPLY
ОН	S230	2A4GP54L2	27R278937 INSURANCE POLICY #	2007 COLOR	Chrysler R VEHICLE MODEL	12	11 12
VERIF	PROGRESSIVE INSU		991463757	Red	Town &	10 11 1	2 10 11 1 2
СОМ	TYPE OF USE MERCIAL GOVERNMENT	IN EMERGENCY RESPONSE	US DOT #	TOWED BY: COM	MPANY NAME	9 9 2	3 9 9 3
INTE	ERLOCK	# OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR 1 - <= 10K LBS.	MATERIAL	OOUS MATERIAL CLASS # PLACARD ID #	8 4 7 5	8 4 7
L DEV	/ICE HIT/SKIP UN JIPPED	ll ^π 1	2 - 10,001 - 26K LBS. 3 ->= 26K LBS.	RELEASED PLACARD		6 5	12 7 6 5
	2 - PASSENGER VAN	7 - MOTORCYCLE 2-WHEELED	13 - SNOWMOBILE	- LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN/ SKATER	6	11 12 6
2 UNIT TYP	3 - SPORT UTILITY	8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE	14 - SINGLE UNIT TRUCK 19 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT 20	- BUS (16+ PASSENGERS) - OTHER VEHICLE	24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-	_	10 2
	4 - PICK UP 1 5 - CARGO VAN	0 - MOPED OR MOTORIZED BICY	17 - MOTORHOME 21	- HEAVY EQUIPMEN - ANIMAL WITH RIDE	T MOTORIST ER 26 - BICYCLE	9	8 4 -
0	# OF TRAILING UNITS	1 - ALL TERRAIN VEHICLE (ATV/UT	V)	OR ANIMAL-DRAWN VEHICLE	N 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP	8 \	7 6 5
VEHICLE		10.111	0 - NO AUTOMATION	3 - CONDITIONAL	9 - UNKNOWN	11 12 1	5 12 1
	WAS VEHICLE OPERATIN AUTONOMOUS MODE WHEN CRASH OCCURED	? 0	1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	AUTOMATION 4 - HIGH AUTOMATION	ON	10 11 1	10 11 1 2
	1 - YES 2 - NO 9 - OTHER/U	WIODE LE	EVEL	5 - FULL AUTOMATIO	-	9 9 3	9 9 3
1	1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE	6 - BUS - CHARTER 7 - BUS - INTERCIT 8 - BUS - SHUTTLE	Y 12 - MILITARY 17	- FARM - MOWING - SNOW REMOVAL	21 - MAIL CARRIER 99 - OTHER/UNKNOWN	8 7 5	4 8 7 5 4
SPECIA	SHADING	9 - BUS - OTHER	14 - PUBLIC UTILITY 19 15 - CONSTRUCTION 20	- TOWING - SAFETY SERVICE		7 6 5	7 6 5
1 0110110	/COMMUTER		EQUIPMENT	PATROL			12 12
1	1 - NO CARGO BODY TYPE / NOT	3 - VEHICLE TOWIN	OR CONTAINER CHASSIS 9		12 - CONCRETE MIXER 13 - AUTO TRANSPORTER	12	
CARGO BODY	APPLICABLE 2 - BUS	VEHICLE 4 - LOGGING		- FLAT BED - DUMP	14 - GARBAGE/REFUSE 99 - OTHER/UNKNOWN	9 3	3 9 3 3
TYPE	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK 9	- MOTOR TROUBLE	99 - OTHER/UNKNOWN	6	
VEHICL	2 - HEAD LAMPS	5 - STEERING 6 - TIRE BLOWOUT	TIRES 10 8 - TRAILER	- DISABLED FROM PRIOR ACCIDENT			6 6
DEFECT	'S	3 - INTERSECTION -	EQUIPMENT DEFECTIVE 6 - BICYCLE LANE 9	MEDIAN/CROSSING	3 12 - FIRST RESPONDER	NO DAMAG	E[0] - UNDERCARRIAGE[14]
NON MOTOR	MARKED CROSSWALK	OTHER 4 - MIDBLOCK -	7 - SHOULDER/ ROADSIDE 10	ISLAND - DRIVEWAY ACCESS	AT INCIDENT SCENE S 99 - OTHER/UNKNOWN	TOP [13]	ALL AREAS [15]
LOCATION AT IMPACT	IST 2 - INTERSECTION - UNMARKED CROSSWALK	5 - TRAVEL LANE - OTHER LOCATION		- SHARED USE PATH OR TRAILS	15	UN	IIT NOT AT SCENE [16]
	2 - NON-COLLISION	1 - STRAIGHT AHEAI 2 - BACKING	LANE	CURVE	18 - APPROACHING OR LEAVING VEHICLE	INITIA	L POINT OF CONTACT
3		3 - CHANGING LANE4 - OVERTAKING/ PASSING	LANE	ENTERING OR CROSSING SPECIFIED LOCATIOI	19 - STANDING 20 - OTHER NON- N MOTORIST	0 - NO DAN 1-12 - REFER	
ACTION		6 - MAKING LEFT TU	URN 11 - SLOWING OR 15 - IRN STOPPED IN	JOGGING, PLAYING	, 21 - STANDING OUTSIDE DISABLED VEHICLE	3 DIAGRA	
	9 - OTHER/UNKNOWN	7 - WAKING U-TURN		WORKING PUSHING VEHICLE	99 - OTHER/UNKNOWN		TRAFFIC
	1 - NONE 2 - FAILURE TO YIELD	7 - LEFT OF CENTE 8 - FOLLOWING TO		- OPERATING	ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL
6	3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED	CLOSE/ACDA 9 - IMPROPER LANI CHANGE	POSITION	DEFECTIVE EQUIPMENT	22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY	1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOUT4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTRO
CONTRIBUT	TING 6 - IMPROPER TURN NCES	10 - IMPROPER PASS 11 - DROVE OFF RO	SING 15 - SWERVING TO AD AVOID 20	FALLING/SPILLING - IMPROPER	99 - OTHER IMPROPER ACTION		
(s)		12 - IMPROPER BAC	KING 16 - WRONG WAY	CROSSING		# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED
	CE OF EVENTS 1 - OVERTURN/	6 - EQUIPMENT	EVENTS 11 - CROSS CENTERLINE 16	6 - RAILWAY VEHICL	E 22 - WORK ZONE	2	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
1 21	ROLLOVER 2 - FIRE/EXPLOSION	FAILURE 7 - SEPARATION OF	OPPOSITE 17 F DIRECTION OF 18	7 - ANIMAL - FARM 8 - ANIMAL - DEER	MAINTENANCE EQUIPMENT	UNIT / N	ON-MOTORIST DIRECTION
2	3 - IMMERSION 4 - JACKKNIFE 5 - CARGO/EQUIPMENT	UNITS 8 - RAN OFF ROAD RIGHT	12 - DOWNHILL RUNAWAY20 13 - OTHER NON-	IN TRANSPORT	FALLING, SHIFTING CARGO OR ANYTHING	5 / 14	1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST
] 3 [LOSS OR SHIFT	9 - RAN OFF ROAD 10 - CROSS MEDIAN	LEFT COLLISION 2	1 - PARKED MOTOR VEHICLE	SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE	гом 1 то	3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST
			LISION WITH FIXED OBJECT - S		OBJECT		9 - OTHER/UNKNOWI
4	ATTENUATOR/	31 - GUARDRAIL END 32 - PORTABLE BAR 33 - MEDIAN CABLE	RIER 38 - OVERHEAD SIGN 4-	3 - CURB 4 - DITCH 5 - EMBANKMENT	50 - WORK ZONE MAINTENANCE EQUIPMENT	UNIT SPEED	DETECTED SPEED
5	26 - BRIDGE OVERHEAD STRUCTURE	BARRIER 34 - MEDIAN GUARD	39 - LIGHT/LUMINARIES 46 RAIL SUPPORT 43	6 - FENCE 7 - MAILBOX	51 - WALL 52 - BUILDING		3 1 - STATED/ESTIMATED SPEED
	27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET	BARRIER 35 - MEDIAN CONCR BARRIER	40 - UTILITY POLE 49 EETE 41 - OTHER POST, POLE 49 OR SUPPORT	8 - TREE 9 - FIRE HYDRANT	53 - TUNNEL 54 - OTHER FIXED OBJECT	POSTED SPEED	2 - CALCULATED/EDR 3 - UNDETERMINED
1 • \square		36 - MEDIAN OTHER BARRIER			99 - OTHER/UNKNOWN	25	
1	FIRST HARMFUL EVEN	т 1 моя	ST HARMFUL EVENT				
no y 8304	OH1 1/19 [760-0820]						

OHIO DEPARTMENT				100	L DEDOCT WHILE DA					
OF PUBLIC SAFETY UNIT		M-P2502091	AL REPORT NUMBER*							
UNIT# OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER)										
2 RENTAL, RYDER TRUCK LT	- Cunt	K T HONE. INGESSE 7	DRIVER		DAMAGE DAMAGE SCALE					
OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER) 11250 BROOKPARK RD, CLEVELAND, OH 44130				1 - NONE 2 - MINOR DA	3 - FUNCTIONAL DAMAGE MAGE 4 - DISABLING DAMAGE					
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP	СОММ	ERICAL CARRIER PI	HONE: INCLUDE AREA CODE		9 - UNKNOWN					
MATESICH DISTRIBUTING CO., 1190 E MAIN ST, NEWARK, OH 43055 LP STATE LICENSE PLATE # VEHICLE IDENTIFICATION #		VELIOLE VEAD		D. INDI	AMAGED AREA(S) CATE ALL THAT APPLY					
OH PKG4139 3AKBCXFE8KDKU8933		VEHICLE YEAR 2019	VEHICLE MAKE Freightliner	12	12					
INSURANCE COMPANY THE CINCINNATI INSURANCE CO VERIFIED THE CINCINNATI INSURANCE CO THE		color White	VEHICLE MODEL M2	11 12	11 12 1					
TYPE OF USE US DOT#	TOWE	D BY: COMPAN		10 11 1 2	10 11 1 2					
commercial government in Emergency response 093045		HAZARDOUS	MATERIAL	9 9 3	3 9 9 3					
INTERLOCK DEVICE HIT/SKIP UNIT # OCCUPANTS VEHICLE WEIGHT GWWR/GCWR 1 - <= 10K LBS.			SS# PLACARD ID#	7 5	4 8 7 5 4					
EQUIPPED 3 2 - 10,001 - 26K LBS. 3 ->= 26K LBS.		PLACARD		7 6 5	11 12 7 6 5					
2 - PASSENGER VAN 2-WHEELED 13 - SNOWMOBILE	18 - LIMO VEHIC	LE)	- PEDESTRIAN/ SKATER	10 /	12 2					
15 (MINIVAN) 8 - MOTORCYCLE 14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR UNIT TYPE VEHICLE 9 - AUTOCYCLE 16 - FARM EQUIPMENT 2	PASS	ENGERS)	- WHEELCHAIR (ANY TYPE) - OTHER NON-	<u> </u>	10 2					
4 - PICK UP 10 - MOPED OR 17 - MOTORHOME	21 - HEAV	Y EQUIPMENT AL WITH RIDER 26	MOTORIST	9	8 4					
11 - ALL TERRAIN VEHICLE (ATV/UTV)	OR AN VEHIC		- TRAIN - UNKNOWN OR	8	7 5 4					
# OF TRAILING UNITS			HIT/SKIP	11 12 1	7 6 11 12 1					
WAS VEHICLE OPERATING IN 0 - NO AUTOMATION 1 - DRIVER ASSISTANCE	AUTO	DMATION	- UNKNOWN	10 11 1 2	10 11 12 2					
2 WHEN CRASH OCCURED? 2 - PARTIAL AUTOMATION		H AUTOMATION L AUTOMATION		10 2	3 9 9 3					
1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE	16 - FARM		MAIL CARRIER	8 4 7	8 4 —					
3 - ELECTRONIC RIDE 8 - BUS - SHUTTLE 13 - POLICE		/ REMOVAL	OTHER/UNKNOWN	8 7 6	4 8 7 6 4					
SPECIAL 4 - SCHOOL TRANSPORT10 - AMBULANCE 15 - CONSTRUCTION 25 - BUS - TRANSIT EQUIPMENT	19 - TOWII 20 - SAFE PATR	TY SERVICE		7 6	7 6					
/COMMUTER					12 12					
1 - NO CARGO BODY 3 - VEHICLE TOWING 5 - INTERMODAL CONTAINER CHASSIS		O TANK 13 -	CONCRETE MIXER AUTO TRANSPORTER	12						
	10 - FLAT 11 - DUMF		GARBAGE/REFUSE OTHER/UNKNOWN		3 9 3 9 3					
TYPE					4 -					
	10 - DISAE	BLED FROM	OTHER/UNKNOWN	6	[6] [6] [6]					
VEHICLE 3 - TAIL LAMPS 6 - TIRE BLOWOUT 8 - TRAILER EQUIPMENT DEFECTIVE	PRIOR	RACCIDENT		- NO DAMAGE						
	9 - MEDIA ISLAN		- FIRST RESPONDER AT INCIDENT SCENE	_						
NON-MOTORIST 2 - INTERSECTION - MARKED CROSSWALK 8 - SIDEWALK 1	10 - DRIVE 11 - SHARI	WAY ACCESS 99 ED USE PATHS	- OTHER/UNKNOWN	TOP [13]	ALL AREAS [15]					
AT IMPACT UNMARKED 5 - I RAVEL LANE - CROSSWALK OTHER LOCATION	OR TR			UN	IT NOT AT SCENE [16]					
1 - NON-CONTACT 1 - STRAIGHT AHEAD 8 - ENTERING TRAFFIC 13 2 - NON-COLLISION 2 - BACKING LANE	CURVE		- APPROACHING OR LEAVING VEHICLE	INITIA	L POINT OF CONTACT					
3 - STRIKING 4 - STRUCK 5 - BOTH 4 - STRUCK 5 - BOTH 9 - LEAVING TRAFFIC 14 4 - OVERTAKING/ LANE 10 - PARKED	CROSSI		- STANDING - OTHER NON- MOTORIST	0 - NO DAM						
	- WALKIN		- STANDING OUTSIDE DISABLED VEHICLE	6 DIAGRAI						
	6 - WORKII 7 - PUSHIN	NG 99 IG VEHICLE	- OTHER/UNKNOWN							
1 - NONE 7 - LEFT OF CENTER 13 - IMPROPER START 1				TRAFFICWAY FLOW	TRAFFIC TRAFFIC CONTROL					
3 - RAN RED LIGHT CLOSE/ACDA POSITION	18 - OPER	CTIVE 2	ROADWAY 2 - NOT DISCERNIBLE 3 - OPENING DOOR	1 - ONE-WAY	1 - ROUNDABOUT4 - STOP SIGN					
1 4 - RAN STOP SIGN 9 - IMPROPER LANE 14 - STOPPED OR 5 - UNSAFE SPEED CHANGE PARKED ILLEGALLY 1 CONTRIBUTING 6 - IMPROPER TURN 10 - IMPROPER PASSING 15 - SWERVING TO		SHIFTING/	INTO ROADWAY OTHER IMPROPER	2 - TWO-WAY	6 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL					
CIRCUMSTANCES 11 - DROVE OFF ROAD AVOID 2 12 - IMPROPER BACKING 16 - WRONG WAY	20 - IMPRO CROS	PER	ACTION	# OF THROUGH LANES	RAIL GRADE CROSSING					
SEQUENCE OF EVENTS				ON ROAD	1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING					
EVENTS 1 - OVERTURN/ 6 - EQUIPMENT 11 - CROSS CENTERLINE OPPOSITE OPPOSITE OPPOSITE				2	1 3 - INVOLVED-PASSIVE CROSSING					
1 ZU ROLLOVER FAILURE OPPOSITE 2 - FIRE/EXPLOSION 7 - SEPARATION OF DIRECTION OF 3 - IMMERSION UNITS TRAVEL	18 - ANIN	MAL - FARM MAL - DEER MAL - OTHER 23	MAINTENANCE EQUIPMENT - STRUCK BY	UNIT / NO	DN-MOTORIST DIRECTION					
2 4 - JACKKNIFE 8 - RAN OFF ROAD 12 - DOWNHILL RUNAWA\ 5 - CARGO/EQUIPMENT RIGHT 13 - OTHER NON-	Y20 - MOT IN TF	OR VEHICLE RANSPORT	FALLING, SHIFTING CARGO OR ANYTHING		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST					
LOSS OR SHIFT 9 - RAN OFF ROAD LEFT COLLISION 10 - CROSS MEDIAN 14 - PEDESTRIAN 10 - CROSS MEDIAN 14 - PEDESTRIAN 15 - PEDESTR	21 - PARI VEHI	CLE	SET IN MOTION BY A MOTOR VEHICLE	FROM 3 TO	3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST					
15 - PEDALCYCLE COLLISION WITH FIXED OBJECT	- STRUCK		- OTHER MOVABLE OBJECT		9 - OTHER/UNKNOWN					
25 - IMPACT 31 - GUARDRAIL END 37 - TRAFFIC SIGN SIGN ATTENUATOR/ 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN		B 50	- WORK ZONE MAINTENANCE	,						
CRASH CUSHION 33 - MEDIAN CABLE POST 26 - BRIDGE OVERHEAD BARRIER 39 - LIGHT/LUMINARIES		ANKMENT	EQUIPMENT - WALL	UNIT SPEED	DETECTED SPEED 1 - STATED/ESTIMATED					
5 STRUCTURE 34 - MEDIAN GUARDRAIL SUPPORT 27 - BRIDGE PIER OR BARRIER 40 - UTILITY POLE	47 - MAIL 48 - TREI	BOX 52 53	- BUILDING - TUNNEL	0	SPEED 2 - CALCULATED/EDR					
ABUTMENT 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 28 - BRIDGE PARAPET BARRIER OR SUPPORT 29 - BRIDGE RAIL 36 - MEDIAN OTHER 42 - CULVERT	49 - FIRE		- OTHER FIXED OBJECT - OTHER/UNKNOWN	POSTED SPEED	3 - UNDETERMINED					
30 - GUARDRAIL FACE BARRIER		99	O I I ILIV OINNINOVVIN	25						
1 FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT HSY8304 OH1 1/19 [760-0820]										

~ 1 / Ouro	DEPARTMENT													
OF PU	SERVICE - PROTECTION	OTORIST / NOI	N-MO	TORIS	ST				M Dose		OCAL REPO	ORT NUMB	ER*	
LINUT #	L NAME: LACT	FIDOT MIDDLE							M-P250		DIDTU		1 405	LOFNER
UNIT#		, FIRST, MIDDLE	10						04/40/4	DATE OF	- ВІКІН		AGE	GENDER
1	DURBIN,	, MICHAEL ALOYSIL	JS						01/19/1	95Z PHONE - INC	CLUBE ABEA CO	DF.	73	М
	, -), MOUNT VERNON,	, OH 430	050					CONTACT	PHONE - INC	LUDE AREA CO	DE		
INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAK	KEN TO: M	IEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED 4	DOT-C	OMPLIANT	NG POSITION	AIR BAG USA	GE EJECTION	TRAPPED 1
	E OPERATOR L	ICENSE NUMBER		OFFENSE	E CHAR	GED	LOCAL	OFFENSE DESC	RIPTION	l	<u> </u>	CITATION	N NUMBER	<u> </u>
OL STATE	RF88873	3		MTV 3	31.34	1	CODE	Failure To	Control/V	Veaving	Course	MVP42	20125000	000280
OL CLASS	S ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED		HOL / DRUG SUSF	PECTED RIJUANA	CONDITION		YPE VA			RUG TEST(S	T SELECT UP TO 4
4				1	=	HER DRUG	NIJOANA	1	1	1 .		1		
UNIT #	NAME: LAST	, FIRST, MIDDLE								DATE OF	BIRTH		AGE	GENDER
ADDRES INJURIES	SS: STREET, CIT	Y, STATE, ZIP							CONTACT	PHONE - INC	CLUDE AREA CO	DE		
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAK	KEN TO: M	IEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	□ DOT-C		NG POSITION	AIR BAG USA	GE EJECTION	TRAPPED
	BY							USED	MC HE					
OL STATE	E OPERATOR L	LICENSE NUMBER		OFFENSE	E CHAR	GED	LOCAL	OFFENSE DESC	CRIPTION			CITATION	NUMBER	
OL CLASS	S ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED	ALCOI	HOL / DRUG SUSF	ECTED	CONDITION		OHOL TES			RUG TEST(S	T SELECT UP TO 4
			BY		=	COHOL MA HER DRUG	RIJUANA			٦١. "				
UNIT #	NAME: LAST	, FIRST, MIDDLE				HER DRUG				DATE OF	BIRTH		── ── AGE	GENDER
ADDRES	SS: STREET, CIT	Y, STATE, ZIP							CONTACT	PHONE - INC	CLUDE AREA CO	DE		
OT STATE WHO TO STATE WHO STATE W	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED					DOT-C	OMPLIANT	NG POSITION	AIR BAG USA	GE EJECTION	TRAPPED
g OL STATE	E OPERATOR L	ICENSE NUMBER		OFFENSE CHARGED LOCAL CODE CODE					ESCRIPTION CITATION NUMBER					
									ALCOHOL TEST					
OL CLASS	S ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		RIVER ALCOHOL / DRUG SUSPECTED CONDITION ALCOHOL MARIJUANA ALCOHOL MARIJUANA				CONDITION					PE RESUL	SELECT UP TO 4
					=	HER DRUG				.				
1 - FATAL	JURIES	SEATING POSITION 1 - FRONT - LEFT SIDE	1 - NOT D	AIR BAG		OL CLASS 1 - CLASS A		OL RESTRICT		1 - NOT DI	DISTRACTION STRACTED		TEST STAT	
2 - SUSPEC INJURY	CTED SERIOUS	(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	2 - DEPLO 3 - DEPLO	OYED FRONT OYED SIDE	г	2 - CLASS B 3 - CLASS C		DEVICE 2 - CDL INTRAS	TATE ONLY	2 - MANUA AN ELE	LLY OPERAT CTRONIC	TING 2 - 3 -	TEST REFUS TEST GIVEN,	ED
INJURY	CTED MINOR	3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCYCLE	FRON	OYED BOTH		4 - REGULAR CLA (OHIO = D)		3 - CORRECTIVI	R	DEVICE	INICATION (TEXTING,		CONTAMINAT	USABLE
4 - POSSIBL 5 - NO APPA	ARENT INJURY	PASSENGER) 5 - SECOND - MIDDLE	9 - DEPLO			5 - M/C MOPED OF 6 - NO VALID OL	NLT	5 - EXCEPT CLA 6 - EXCEPT CLA CLASS B BUS	SS A &	3 - TALKIN HANDS			TEST GIVEN, KNOWN TEST GIVEN,	
INJUREI	D TAKEN BY	6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE						7 - EXCEPT TRACTOR-TE	RAILER	COMMU DEVICE	JNICATION		UNKNOWN	
	ANSPORTED /	(MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE		EJECTION		OL ENDORSEM	ENT	8 - INTERMEDIA RESTRICTIO 9 - LEARNER'S F	NS		G ON HAND- JNICATION	-HELD	ALCOHOL TES	ST TYPE
2 - EMS 3 - POLICE	D AT COLINE	9 - THIRD - RIGHT 10 - SLEEPER SECTION OF	1 - NOT E	JECTED		H - HAZMAT		RESTRICTIO 10 - LIMITED TO I	NS	5 - OTHER	ACTIVITY W CTRONIC DE	EVICE 2-	NONE BLOOD	
9 - OTHER /	/ UNKNOWN	TRUCK CAB 11 - PASSENGER IN OTHER	3 - TOTAL	ALLY EJECT LY EJECTEI PPLICABLE		M - MOTORCYCLE P - PASSENGER N - TANKER		ONLY 11 - LIMITED TO		6 - PASSEI		ON 3-	URINE BREATH	
		ENCLOSED CARGO AREA (NON-TRAILING				Q - MOTOR SCOOR - THREE-WHEEL		EMPLOYMEN 12 - LIMITED - OT	HER	8 - OTHER	THE VEHICL	NC	OTHER	
1 - NONE US	SED	UNIT, BUS, PICK-UP WITH CAP) 12 - PASSENGER IN		TRAPPED		MOTORCYCLE S - SCHOOL BUS T - DOUBLE & TRI		13 - MECHANICA (SPECIAL BR HAND CONTI	AKES,		/ UNKNOWN			
2 - SHOULD USED	DER BELT ONLY	UNENCLOSED CARGO AREA	1 - NOT T 2 - EXTRI			TRAILERS X - TANKER / HAZI		OTHER ADAM DEVICES)					DRUG TEST NONE	TYPE
4 - SHOULD	T ONLY USED DER & LAP BELT	13 - TRAILING UNIT 14 - RIDING ON VEHICLE	MECHA 3 - FREED	ANICAL MEA DBY				14 - MILITARY VE ONLY 15 - MOTOR VEH			ONDITION ENTLY NORM	3 -	BLOOD URINE OTHER	
5 - CHILD R	SED EXTERIOR (NON-TRAILING UNIT) YSTEM - FORWARD 15 - NON-MOTORIST				-	GENDER F - FEMALE		WITHOUT AIR	R BRAKES		AL IMPAIRM		OTHER	
	ACING 99 - OTHER / UNKNOWN CHILD RESTRAINT					M - MALE U - OTHER / UNKN	OWN	17 - PROSTHETIO 18 - OTHER	CAID	DISTUR		RY,	DRUG TEST RE	SULT(S)
7 - BOOSTE 8 - HELMET											SLEEP, FAIN		AMPHETAMIN BARBITURAT	
9 - PROTEC								6 - UNDER THE INFLUENCE 3 - BEN			BENZODIAZE CANNABINOI	PINES		
ETC.) 10 - REFLEC	TIVE CLOTHING										/ ALCOHOL / UNKNOWN	۱ 6-	COCAINE OPIATES / OF	PIOIDS
11 - LIGHTIN PEDEST ONLY	RIAN / BICYCLE												OTHER NEGATIVE RI	ESULTS
99 - OTHER /	/ UNKNOWN													

OHIO DEPARTMENT OF PUBLIC SAFETY SAFETY - SERVICE - PROTECTION	TRAFFIC	CRASH	EMENT REPORT	REPORT LOCAL REPORT NUMBER*								
PHOTOS TAKEN	OH-2	OH-3	AL INFORMATION				M-P2502093					
SECONDARY CRASH	OH-1P	OTHER REPO	ORTING AGENCY NAME*			NCIC*	HIT/SKIP	NUMBER OF	UNITS	JNIT IN ERROR		
COUNTY* LOCALITY	PRIVATE PRO		Vernon Police Depa	rtment		04201	1 - SOLVED 2 - UNSOLVED CRASH DATE/		CRAS	98 - ANIMAL 99 - UNKNOWN H SEVERITY		
$\begin{bmatrix} 42 & 1 & 1 & 2 \\ 1 & 2 & 1 & 2 \end{bmatrix}$	I - CITY 2 - VILLAGE M OI	unt Vernon					06/25/2025 13		1.	FATAL SERIOUS INJURY		
3	NUMBER PREFIX 1	- NORTH LOCA	ATION ROAD NAME			ROAD TYPE			4	SUSPECTED MINOR INJURY		
ОСАТІС	3 -	- SOUTH - EAST - WEST CO	SHOCTON			AV	40.402584			SUSPECTED INJURY POSSIBLE		
ROUTE TYPE ROUTE N	NUMBER PREFIX 1	NORTH REFE	RENCE ROAD NAME (ROA	D, MILEPOST,	HOUSE #)	ROAD TYPE	LONGITUDE		5.	PROPERTY DAMAGE ONLY		
EFER ER	3 -	- SOUTH - EAST - WEST UPF	PER GILCHRIST			RD	-82.438699					
REFERENCE POINT	DIRECTION FROM REFERENCE	F	ROUTE TYPE		ROAD TYPE			INTERSECTION	RELATED)		
1 - INTERSECTION 2 - MILE POST	1 - NOR 2 - SOU	TH US - INTER	RAL US ROUTE AV	- ALLEY - AVENUE	HW - HIGHWAY LA - LANE	SQ - SQUARE	WITHIN INTER	SECTION OR C	ON APPRO	ACH		
3 - HOUSE #	3 - EAS 4 - WES		BERED COUNTY CR	- CIRCLE - COURT	MP - MILEPOST OV - OVAL PK - PARKWAY	TE - TERRACE	WITHIN INTER	CHANGE AREA		R OF APPROACHES		
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASUR	TR - NUME	BERED TOWNSHIP	- DRIVE - HEIGHTS	PI - PIKE PL - PLACE	WA - WAY		ROADV		K OF AFT KOAOFILO		
0.08	1 - MILE 2 - FEET 3 - YARI	S -					ROADWAY DI	VIDED				
LOCATIO 1 - ON ROADW	ON OF FIRST HARM	IFUL EVENT ROSSOVER			H COLLISION/IM		DIRECTION OF TRAVEL	- I	MEDIAN	I TYPE LUSH MEDIAN		
1 - ON ROADW 2 - ON SHOULD 3 - IN MEDIAN	DER 10 - D	RIVEWAY/ALLEY AILWAY GRADE	Y ACCESS 6 BET	WEEN 5	5 - REAK-10-REA 5 - BACKING 5 - ANGLE	ıĸ	2 - SOUTH 3 - EAST		(< 4 FEET)	LUSH MEDIAN		
4 - ON ROADSI 5 - ON GORE	SIDE C	ROSSING HARED USE PAT	THS OR VEH	IICLES IN 7 NSPORT	' - SIDESWIPE, S DIRECTION	AME	4 - WEST	3 -		EPRESSED MEDIAN		
6 - OUTSIDE TE 7 - ON RAMP	13 - B	RAILS IKE LANE	2 - REA 3 - HEA	AD-ON	3 - SIDESWIPE, C DIRECTION				DIVIDED, F (ANY TYPE OTHER/UN			
8 - OFF RAMP		OLL BOOTH THER/UNKNOW	N	×) - OTHER/UNKN	OWN			OTTIETOON	I I I I I I I I I I I I I I I I I I I		
		WOI	RK ZONE TYPE	LOCATIO	ON OF CRASH IN	I WORK ZONE	CONTOUR	CONDITI	ONS	SURFACE		
WORK ZONE REL			CLOSURE SHFT/CROSSOVER		BEFORE THE 1S WARNING SIGN	T WORK ZONE	2	1]	2		
WORKERS PRES	l r		ON SHOULDER	2 - /	ADVANCE WARN				J			
LAW ENFORCEM	JENI PRESENT	WORK			ACTIVITY AREA TERMINATION A	REA	1 - STRAIGHT	1 - DRY		1 - CONCRETE		
ACTIVE SCHOOL	ZONE	5 - OTHE	к				LEVEL 2 - STRAIGHT	2 - WET 3 - SNOW 4 - ICE		2 - BLACKTOP, BITUMINOUS, ASPHALT		
	CONDITION		1 CLEAR	WEATHER 6 - SNOV	Δ/		GRADE 3 - CURVE LEVEL 4 - CURVE GRADE	5 - SAND, MU OIL, GRAV		3 - BRICK/BLOCK 4 - SLAG, GRAVEL,		
1 - DAYLIGHT 2 - DAWN/DUS 3 - DARK - LIG		lr	1 - CLEAR 2 - CLOUDY 3 - FOG, SMOG, SMO	7 - SEVE	RE CROSSWINE		9 - OTHER/ UNKNOWN	6 - WATER (S MOVING)		STONE 5 - DIRT		
4 - DARK - RO	ADWAY NOT LIGHT KNOWN ROADWAY	ED L	4 - RAIN 5 - SLEET, HAIL	9 - FREE	REZING RAIN OR FREEZING RIZZLE 7 - SLUSH 9 - OTHER/UNKNOWN UNKN					9 - OTHER/ UNKNOWN		
9 - OTHER/UNI	IKNOWN			99- OTHE	ER/UNKNOWN							
Unit 1 was stopp	ed northboun	d at the exit	of the Verizon park	ing lot for	DIAGRAM							
			eastbound on Cosho attempted to turn w									
onto Coshcoton	Avenue. Unit	1 crossed th	ne outside eastboun	nd lane of								
travel and was st		2 was attem	pting to cross the in	side						(A)		
Casiboana lane (or traver.						— — ——		N	ot To Scale		
					Unit 2			?	Unit 1	= 2012 Chevrolet Equinax		
						Witness 1			Witness	= 2024 Lincoln Naufilus		
					Coshocton Avenue		The state of the s		Witne	s 2		
	Vertices FranceCold FranceCo											
	Western WSGS Concloser-Nerme Monat Veneza, Chin (SSSS) = Building											
CRASH REPORTE	ED DATE/TIME	DISPA	ATCH DATE/TIME	AR	RIVAL DATE/TIN	ME	SCENE CLEARED	DATE/TIME	l —	PORT TAKEN BY		
06/25/2025 13:4	06/25/202	25 13:44	0	6/25/2025 14:33	3		POLICE AGENCY MOTORIST					
TOTAL TIME ROADWAY CLOSED IN			CHECKED BY C	FFICER'S NAME*		⊢	SUPPLEMENT					
0	BER*	CHECKED BY OFFICER'S BADGE NUMBER* CHECKED BY OFFICER'S BADGE NUMBER*										
i 1			292-23									

Y8304 OH1 1/19 [760-0820]

OHIO D	DEPARTMENT													
OF PUE	BLIC SAFETY MISSING PROTECTION	OTORIST / NO	N-MO	TORI	ST				M DOE		LOCAL REP	ORT NUMB	ER*	
UNIT#	I NAME: LAST	, FIRST, MIDDLE							M-P25		OF BIRTH		AGE	GENDER
1		ASHTON ALYSSE							10/08/ ⁻		OI BIINTI		32	F
	S:STREET, CIT										INCLUDE AREA CO	ODE	32	'
103 RC	OSEVELT	AVE, MOUNT VER	NON, O	H 4305	0									
INJURIES 4	TAKEN	EMS AGENCY(NAME) MOUNT VERNON F	IRE DE	KNOX CO	OMMUNI	MEDICAL FACILITY ITY HOSPITAL, MC		SAFETY EQUIPMENT USED 4		COMPLIANT ELMET	ATING POSITION	AIR BAG USA	EJECTION 4	TRAPPED 1
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	SE CHAF	RGED	LOCAL	OFFENSE DESC	RIPTION			CITATIO	NUMBER	
OL STATE	TK00707	RESTRICTION SELECTION SELE	- un -a a I DBI	1	331.2	2 DHOL / DRUG SUSI		Drive Onto		uty To \			20125000 RUG TEST(S	
	SELECT UP TO 2	KESTKIOTION SELEC		TRACTED			RIJUANA	CONDITION	STATUS			STATUS T	PE RESUL	T SELECT UP TO 4
4					O1	THER DRUG		1		<u>1 .</u>			<u> </u>	<u> </u>
UNIT #		, FIRST, MIDDLE							00/04/		OF BIRTH		AGE	GENDER
2	BERNAR S:STREET, CIT	RD, TIMOTHY ALAN							09/21/		INCLUDE AREA CO		60	М
22	•	IEY CMPBL CSWY 3	854 TAN	/PA FI	3360	7			CONTAC	I PHONE -	INCLUDE AREA CO	DDE		
7616 W		EMS AGENCY (NAME)	, 17 th			MEDICAL FACILITY	(NAME, CITY)	SAFETY		SE	ATING POSITION	AIR BAG USA	GE EJECTION	TRAPPED
NON 4	TAKEN 1	,		IIIOOKES II			. (,,	USED 4		COMPLIANT ELMET	1	4	4	1
	OPERATOR L	ICENSE NUMBER		OFFENS	SE CHAF	RGED	LOCAL	OFFENSE DESC	RIPTION			CITATIO	N NUMBER	
OL STATE	B6568016	643410					CODE							
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECTION		VER TRACTED	ALCO	HOL / DRUG SUSI	PECTED	CONDITION		COHOL TE			RUG TEST(S	T SELECT UP TO 4
			BY	$\lceil 1 \rceil \mid$	=		RIJUANA	1		1 .		1		
UNIT #	NAME: LAST	FIRST, MIDDLE		<u> </u>		THER DRUG				DATE	OF BIRTH	<u> </u>	── ── L AGE	
		, - ,												
ADDRESS	S:STREET, CIT	Y, STATE, ZIP							CONTAC	T PHONE -	INCLUDE AREA CO	DDE	ı	
INJURIES														
INJURIES	TAKEN	EMS AGENCY (NAME)		INJURED TA	AKEN TO: N	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT		COMPLIANT	ATING POSITION	AIR BAG USA	GE EJECTION	TRAPPED
	ВУ			USED					MC HELMET					
OL STATE	OPERATOR L	LICENSE NUMBER		OFFENSE CHARGED LOCAL CODE			ESCRIPTION CIT				N NUMBER			
OL CLASS		RESTRICTION SELECTION SELE	T UP TO 3 DRI	VER	ALCO	HOL / DRUG SUSI	PECTED	CONDITION	AL	COHOL TE	ST	D	RUG TEST(S	3)
	SELECT UP TO 2		DIS'	RIVER ALCOHOL / DRUG SUSPECTED CONDITION Y ALCOHOL MARIJUANA				STATUS	TYPE	VALUE	STATUS T	PE RESUL	T SELECT UP TO 4	
					01	THER DRUG				_ •				
1 - FATAL	URIES	SEATING POSITION 1 - FRONT - LEFT SIDE	1 - NOT D	AIR BAG EPLOYED		OL CLASS 1 - CLASS A		OL RESTRICT 1 - ALCOHOL IN			ER DISTRACTION DISTRACTED		NONE GIVEN	
INJURY	TED SERIOUS	(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	3 - DEPLO	YED FROM		2 - CLASS B 3 - CLASS C		DEVICE 2 - CDL INTRAS		AN E	JALLY OPERA LECTRONIC		TEST REFUS TEST GIVEN,	
3 - SUSPECT INJURY 4 - POSSIBLE		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCYCLE	FRON	OYED BOTH T / SIDE PPLICABLE		4 - REGULAR CLA (OHIO = D) 5 - M/C MOPED O		3 - CORRECTIVI 4 - FARM WAIVE 5 - EXCEPT CLA	R	DEVI	MUNICATION CE (TEXTING, NG, DIALING)	1-	CONTAMINAT SAMPLE / UN TEST GIVEN,	USABLE
	RENT INJURY	PASSENGER) 5 - SECOND - MIDDLE	9 - DEPLO UNKNO	YMENT	-	6 - NO VALID OL		6 - EXCEPT CLA CLASS B BUS	SS A &	3 - TALK			KNOWN TEST GIVEN,	
INJURED	TAKEN BY	6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE						7 - EXCEPT TRACTOR-TR		DEVI			UNKNOWN	
	NSPORTED / O AT SCENE	(MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE		EJECTION		OL ENDORSEM	MENT	8 - INTERMEDIA RESTRICTIO 9 - LEARNER'S F	NS		ING ON HAND MUNICATION CE)-HELD	ALCOHOL TES	ST TYPE
2 - EMS 3 - POLICE	THE COLINE	9 - THIRD - RIGHT 10 - SLEEPER SECTION OF	1 - NOT E		TED	H - HAZMAT		RESTRICTIO 10 - LIMITED TO I	NS	5 - OTHE	ER ACTIVITY V LECTRONIC D	EVICE 2-	NONE BLOOD	
9 - OTHER / I	UNKNOWN	TRUCK CAB 11 - PASSENGER IN OTHER	3 - TOTAL	LY EJECTE PPLICABLE	ED	M - MOTORCYCLE P - PASSENGER N - TANKER		ONLY 11 - LIMITED TO		6 - PASS 7 - OTHE	SENGER ER DISTRACTI	ON 4-	URINE BREATH	
		ENCLOSED CARGO AREA (NON-TRAILING				Q - MOTOR SCOO R - THREE-WHEE		EMPLOYMEN 12 - LIMITED - OT	HER	8 - OTHE	E THE VEHIC	ON	OTHER	
1 - NONE US	EQUIPMENT	UNIT, BUS, PICK-UP WITH CAP) 12 - PASSENGER IN		TRAPPED		MOTORCYCLE S - SCHOOL BUS		13 - MECHANICA (SPECIAL BR HAND CONTI	AKES,		SIDE THE VEH ER / UNKNOWI			
	ER BELT ONLY	1 - NOT T 2 - EXTRI	RAPPED		T - DOUBLE & TRI TRAILERS X - TANKER / HAZ		OTHER ADAM DEVICES)	PTIVE			1 -	DRUG TEST NONE	TYPE	
4 - SHOULDE	FONLY USED ER & LAP BELT		ANICAL ME	ANS			14 - MILITARY VE ONLY			CONDITION	3 -	BLOOD URINE		
USED 5 - CHILD RE		NON-M MEANS	MECHANIC <i>A</i> S	AL	GENDER		15 - MOTOR VEH WITHOUT AII 16 - OUTSIDE MIR	R BRAKES	2 - PHYS	RENTLY NOR SICAL IMPAIRN TIONAL (E.G.,		OTHER		
FACING 6 - CHILD RE	M - FORWARD 15 - NON-MOTORIST 99 - OTHER / UNKNOWN RESTRAINT					F - FEMALE M - MALE U - OTHER / UNKN	IOWN	17 - PROSTHETIO		DEPF	RESSED, ANGI URBED)	RY,	DRUG TEST RE	SULT(S)
SYSTEM - 7 - BOOSTER	RESTRAINT M - REAR FACING ER SEAT					J JIIILIT ONN				4 - ILLNE 5 - FELL	SS ASLEEP, FAIN		AMPHETAMIN	NES
8 - HELMET I 9 - PROTECT	TIVE PADS									6 - UNDE	GUED, ETC. ER THE INFLU EDICATIONS /	ENCE 3-	BARBITURAT BENZODIAZE CANNABINOI	PINES
ETC.)	BOW, KNEES, IVE CLOTHING									DRUG	SS / ALCOHOL R / UNKNOWI	. 5-	COCAINE OPIATES / OF	
11 - LIGHTING PEDESTR												7 -	OTHER NEGATIVE RI	
ONLY 99 - OTHER / I	UNKNOWN													

OF SAFET	OCCUPANT / WITNESS ADDENDUM							LOCAL REPORT NUMBER* M-P2502093				
UNIT #	NAME: LA	ST, FIRST, MIDDLE						E OF BIRTH		AGE	GENDER	
1	MASSE	EY, AVERY J					09/14/2021			3	F	
ADDRE	SS: STREET, C	ITY, STATE, ZIP					CONTACT PHONE	E - INCLUDE AREA C	ODE	<u> </u>	<u> </u>	
ŏ		DRIVE, MOUNT V	ERNON, OI	H 43050								
INJURIE 4	S INJURED TAKEN 2	EMS AGENCY (NAME) MOUNT VERNO	N EIDE DE	INJURED TAKEN TO: MEDICAL FACIL KNOX COMMUNITY HOSPITAL,		SAFETY EQUIPMENT USED 5	DOT-COMPLIANT	SEATING POSITION	AIR BAG USA	GE EJECTION	TRAPPED	
UNIT #		ST, FIRST, MIDDLE	INTINC DE	VERNON		ا ا		E OF BIRTH	<u>ٿ</u>	AGE	GENDER	
1	MASSE	EY, MALCOLM JM					11/07/2022			2	М	
ADDRE	ESS: STREET, C	ITY, STATE, ZIP					CONTACT PHONE	E - INCLUDE AREA C	ODE			
ŏ		DRIVE, MOUNT V	ERNON, OI	H 43050							_	
INJURIE 4	TAKEN 2	EMS AGENCY (NAME) MOUNT VERNO	N FIRE DE	INJURED TAKEN TO: MEDICAL FACIL KNOX COMMUNITY HOSPITAL, VERNON		SAFETY EQUIPMENT USED 5	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USA	ge EJECTION	TRAPPED 1	
UNIT #		ST, FIRST, MIDDLE						E OF BIRTH		AGE	GENDER	
1 ADDRE		TY, GABRIELLA L					05/04/2018	- INCLUDE AREA C	ODE	7	F	
<u>A</u>	•	NSFIELD RD, BELI	LVILLE, OH	44813			CONTACT FILONI	INCLUDE AREA C	ODE			
ō	S INJURED	EMS AGENCY (NAME)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USA	GE EJECTION	TRAPPED				
4	ву 2	MOUNT VERNO	N FIRE DE	KNOX COMMUNITY HOSPITAL, VERNON	MOUNT	USED 4	MC HELMET	5	5	4	1	
UNIT #		ST, FIRST, MIDDLE						E OF BIRTH		AGE	GENDER	
2 ADDRE		ARD, DAWN MARIE	Ε			11/11/1970 CONTACT PHONE	- INCLUDE AREA C	ODE	54	F		
<u>a</u>		NEY CMBLL CSW	/Y 354, TAM	1PA, FL 33607			CONTACT FILONI	_ = INGLODE AREA G	ODL			
INJURIE	S INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL		SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USA	GE EJECTION	TRAPPED	
4	ву 2	MOUNT VERNO	N FIRE DE	KNOX COMMUNITY HOSPITAL, VERNON	MOUNT	USED 4	MC HELMET	3	1	4	1	
1 - FA		URY	1 - NONE USE	TY EQUIPMENT USED	1 - FRONT	- LEFT SIDE	1 - NOT DEPLOYED					
	SPECTED SER	IOUS INJURY	VEHICLE C		(MOTOI 2 - FRONT	RCYCLE DRIVER - MIDDLE	/ER) 2 - DEPLOYED FRONT					
3 - SU	SPECTED MINO	OR INJURY	2 - SHOULDER 3 - LAP BELT (R BELT ONLY USED	4 - SECON	- RIGHT SIDE ID - LEFT SIDE	ICED)	3 - DEPLOYI	ED SIDE			
4 - PO	SSIBLE INJURY	•		R & LAP BELT USED	5 - SECON	RCYCLE PASSEN ID - MIDDLE ID - RIGHT SIDE	igen)	4 - DEPLOYE FRONT /				
5 - NO	APPARENT IN			TRAINT SYSTEM -	(MOTOI	- LEFT SIDE RCYCLE SIDE CA	ıR)	5 - NOT APP	LICABLE			
1 - NO		TAKEN BY ED / TREATED AT SCENE	FORWARD	FACING STRAINT SYSTEM -	8 - THIRD - 9 - THIRD - 10 - SI FEPI		TRUCK CAB	9 - DEPLOYI	MENT UNKN	IOWN		
2 - EM			REAR FAC		11 - PASSEI	NGER IN OTHER	ENCLOSED CARGO NIT, BUS, PICK-UP		EJECT	ΓΙΟΝ		
3 - PO	LICE		7 - BOOSTER			NGÉR IN UNENCI	LOSED	1 - NOT EJE		2		
9 - OT	HER / UNKNOW	/N	8 - HELMET U:	VE PADS USED	CARGO 13 - TRAILIN 14 - RIDING		TERIOR	3 - TOTALLY		,		
	GEI	NDER	, ,	NEES, ETC.)	(NON-T 15 - NON-M	RAILING UNIT) OTORIST		4 - NOT APP	LICABLE			
F - FE			10 - REFLECTIV		99 - OTHER	/ UNKNOWN			TRAP	PED		
M - MA	ILE HER / UNKNOW	/N	/ BICYCLE	ONLY				1 - NOT TRA 2 - EXTRICA		CHANICAL		
			99 - OTHER / U	NKNOWN				MEANS	IED BT ME	CHANICAL		
								3 - FREED B MEANS	Y NON-MEC	CHANICAL		
	LAST, FIRST, M							E OF BIRTH		AGE	GENDER	
2	CK, KENNE SS:STREET, C	TH LEE ITY, STATE, ZIP					02/24/1980 CONTACT PHONI	E - INCLUDE AREA C	ODE	45	M	
>		ST LOUISVILLE, C)H 43071									
	LAST, FIRST, M							E OF BIRTH		AGE	GENDER	
2	BERT, BRA	NDA L					02/16/1985 CONTACT PHONE	= INCLUDE AREA CO	ODE	40	F	
>	•	ST LOUISVILLE, C)H 43071				JOHN FILONI	SLODE AREA C				
	LAST, FIRST, N						DATE OF BIRTH AGE GEN				GENDER	
<u> </u>	<i>'</i>	N ELIZABETH					08/30/1986 38 F					
>		ITY, STATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE								
1281 :	o LOWER (GREEN VALLEY R	NUUNT, MUUNT									

OHIO DEPARTMENT OF PUBLIC SAFETY RAFETY - BENYICE - PROTECTION TRAFFIC	CRASH	EMENT REPORT	REPORT LOCAL REPORT NUMBER*									
OH-2	OH-3 LOCA		M-P2502094									
PHOTOS TAKEN OH-1P	OTHER REPO	ORTING AGENCY NAME*			NCIC*	HIT/SKIP	NUMBER OF	UNITS	UNIT IN ERROR			
SECONDARY CRASH PRIVATE PRO	OPERTY Mt	Vernon Police Depa	artment		04201	1 - SOLVED 2 - UNSOLVED	4		98 - ANIMAL 99 - UNKNOWN			
COUNTY* LOCALITY* LOCALITY	ATION: CITY, VI	ILLAGE, TOWNSHIP*				CRASH DATE/	IME*		SH SEVERITY			
	unt Vernon					06/25/2025 14:	:20		FATAL SERIOUS INJURY			
ROUTE TYPE ROUTE NUMBER PREFIX 1	- NORTH LOCA	ATION ROAD NAME			ROAD TYPE	LATITUDE			SUSPECTED MINOR INJURY SUSPECTED			
3		PER GILCHRIST			RD	40.402777			· INJURY POSSIBLE · PROPERTY			
ROUTE TYPE ROUTE NUMBER PREFIX 1	- NORTH REFE	ERENCE ROAD NAME (ROA	D, MILEPOST, H	IOUSE #)	ROAD TYPE	LONGITUDE		5	DAMAGE ONLY			
₩ 3 ·	- SOUTH - EAST - WEST CO	SHOCTON			AV	-82.437181						
REFERENCE POINT DIRECTION		ROUTE TYPE		ROAD TYPE			INTERSECTION	N RELATED)			
1 - INTERSECTION FROM REFERENCE 1 - NOR 2 - SOU	RTH IR - INTE			HW - HIGHWAY LA - LANE	RD - ROAD SQ - SQUARE	WITHIN INTER	SECTION OR (ON APPRO	ACH			
1 2 - MILE POST 2 - SOU 3 - EAS 4 - WES	SR - STAT	TE ROUTE BL BERED COUNTY CR		OV - OVAL	TE - TERRACE	WITHIN INTER	CHANGE AREA	Ą	2			
DISTANCE DISTANCE	ROUT TR - NUM	TE DR	R - DRIVE	PI - PIKE	TL - TRAIL WA - WAY		ROAD		R OF APPROACHES			
FROM REFERENCE UNIT OF MEASUR 1 - MILE	s Roo	TE	- HEIGHTS	PL - PLACE								
5 2 2 FEET 3 - YARI			ROADWAY DI	VIDED								
LOCATION OF FIRST HARM			COLLISION/IMF		DIRECTION OF TRAVEL		MEDIAN					
2 - ON SHOULDER 10 - D	ROSSOVER RIVEWAY/ALLE	Y ACCESS 2 BET		BACKING	R	1 - NORTH 2 - SOUTH		(< 4 FEET)	LUSH MEDIAN			
4 - ON ROADSIDE C	AILWAY GRADE ROSSING	· LJ '''	HICLES IN 7 -	· ANGLE · SIDESWIPE, SA	AME	3 - EAST 4 - WEST	U	>= 4 FEET)	LUSH MEDIAN DEPRESSED MEDIAN			
6 - OUTSIDE TRAFFIC WAY T	HARED USE PA' RAILS IKE LANE	2 - RE	AR-END 8 -	DIRECTION - SIDESWIPE, OF DIRECTION	PPOSITE		4 -		RAISE MEDIAN			
8 - OFF RAMP 14 - T	OLL BOOTH OTHER/UNKNOW			OTHER/UNKNO	OWN			OTHER/UN				
33.0	THEROUNKINOW											
WORK ZONE RELATED	WO	RK ZONE TYPE	LOCATION	N OF CRASH IN	WORK ZONE	CONTOUR	CONDIT	IONS	SURFACE			
WORKERS PRESENT	2 - LANE	CLOSURE SHFT/CROSSOVER	W	EFORE THE 1ST ARNING SIGN		1	1]	2			
LAW ENFORCEMENT PRESENT	OR MI	K ON SHOULDER EDIAN	3 - TI	DVANCE WARN RANSITION ARE			_	J				
LAW ENTORGEMENT PRESENT	WOR			CTIVITY AREA ERMINATION AF	REA	1 - STRAIGHT	1 - DRY		1 - CONCRETE			
ACTIVE SCHOOL ZONE	5 - OTHE	:R				LEVEL 2 - STRAIGHT	2 - WET 3 - SNOW		2 - BLACKTOP, BITUMINOUS,			
LIGHT CONDITION			WEATHER			GRADE 3 - CURVE LEVEL	4 - ICE 5 - SAND, MU		ASPHALT 3 - BRICK/BLOCK			
1 - DAYLIGHT 2 - DAWN/DUSK		1 - CLEAR 2 - CLOUDY		RE CROSSWIND		4 - CURVE GRADE 9 - OTHER/ UNKNOWN	OIL, GRAV 6 - WATER (S MOVING)		4 - SLAG, GRAVEL, STONE 5 - DIRT			
1 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHT	ED L	2 3 - FOG, SMOG, SMC 4 - RAIN	9 - FREEZ	ING RAIN OR FI		UNKNOWN	7 - SLUSH 9 - OTHER/UI	NKNOWN	9 - OTHER/ UNKNOWN			
5 - DARK - UNKNOWN ROADWAY 9 - OTHER/UNKNOWN	LIGHTING	5 - SLEET, HAIL	DRIZZI 99- OTHER	LE R/UNKNOWN			o omeron		on no			
NARRATIVE	<u> </u>			DIAGRAM								
Unit 1 was traveling northbour experienced a brake failure. U						1	1 (P)					
Gilchrist Road and then hit Un							N No	To Scale				
southbound on Upper Gilchris	t Road from	Coshocton Avenue										
was pushed into the rear of Ur	nit 4 on Upp	er Gilchrist Road.		_								
				-								
				-			G					
								_				
					unit 3	\$						
					†	E 6 4						
					Coshocton Ave	15 - C	✓ Upper Gilcl	hrist Rd				
						1 H						
CRASH REPORTED DATE/TIME	DISP	ATCH DATE/TIME	ARR	RIVAL DATE/TIM	E	SCENE CLEARED	DATE/TIME	· I —	POLICE AGENCY			
06/25/2025 14:20	06/25/2025	5 14:26	00	6/25/2025 14:50)		POLICE AGENCY MOTORIST					
TOTAL TIME OTHER ROADWAY CLOSED INVESTIGATION TIME	TOTAL MINUTES	officer's NAME* McDonald, Matthe			CHECKED BY O	FFICER'S NAME*		\vdash	SUPPLEMENT			
0 30	59	OFFICER'S BADGE NUMBER		(CORRECTION C			(CORRECTION OR ADDITION TO AN EXISTING					
		292-30			2.22	2 = 12 22 110	-		REPORT SENT TO ODPS)			

Y8304 OH1 1/19 [760-0820]

	F PUBLIC SAFETY UNIT					LOCA	AL REPORT NUMBER*
~						M-P2502094	
UNIT#	OWNER NAME: LAST LEWIS, WILLIAI		SAME AS DRIVER)	OWNER PHONE: INC.	UDE AREA CODE SAME AS DRIVER		DAMAGE DAMAGE SCALE
	ADDRESS: STREET, CIT			L		1 - NONE 2 - MINOR DA	3 - FUNCTIONAL DAMAGE MAGE 4 - DISABLING DAMAGE
M	RCIAL CARRIER: NAME, A	· · · · · · · · · · · · · · · · · · ·		COMMERICAL CARR	IER PHONE: INCLUDE AREA CODE		9 - UNKNOWN
LP STATI	LICENSE PLATE #	VEI	HICLE IDENTIFICATION #	VEHICLE Y	EAR VEHICLE MAKE		AMAGED AREA(S) CATE ALL THAT APPLY
ОН	JRQ8401		30HA191202	2017	Mercedes Be	11 12 1	11 12
VERIF			INSURANCE POLICY # 4228609-SFP-35	Gray	E300	10 11 1	2 10 11 12 2
СОМІ	TYPE OF USE MERCIAL GOVERNMENT	IN EMERGENCY RESPONSE	US DOT#	TOWED BY: COM		9 10 2 3	3 9 9 3
	ERLOCK HIT/SKIP UN	# OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR 1 - <= 10K LBS.		OUS MATERIAL CLASS # PLACARD ID #	8 4 5	8 4 7 5 4
L DEV	JIPPED	" 1	2 - 10,001 - 26K LBS. 3 ->= 26K LBS.	PLACARD		7 6 5	11 7 6 5
	2 - PASSENGER VAN	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE	12 - GOLF CART 13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK	18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+	23 - PEDESTRIAN/ SKATER 24 - WHEELCHAIR (ANY	10 /	12 1 2
UNIT TYP	3 - SPORT UTILITY PE VEHICLE	3-WHEELED 9 - AUTOCYCLE 0 - MOPED OR	15 - SEMI-TRACTOR 16 - FARM EQUIPMENT	PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMEN	TYPE) 25 - OTHER NON-	9	9 3 3
	5 - CARGO VAN	MOTORIZED BICY 1 - ALL TERRAIN	CLE	22 - ANIMAL WITH RIDE OR ANIMAL-DRAWI	R 26 - BICYCLE N 27 - TRAIN	8	8 4 7 5 4
0	# OF TRAILING UNITS	VEHICLE (ATV/UT)	v)	VEHICLE	99 - UNKNOWN OR HIT/SKIP	11 12 1	7 6 5 11 12 1
VEHICLE	WAS VEHICLE OPERATIN	IG IN	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE	3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	10 11 1	2 10 11 1 2
2	WHEN CRASH OCCURED 1-YES 2-NO 9-OTHER/L	?		N 4 - HIGH AUTOMATION 5 - FULL AUTOMATION		9 10 2 3	3 9 9 3
	1 - NONE 2 - TAXI	6 - BUS - CHARTER 7 - BUS - INTERCITY	/TOUR 11 - FIRE	16 - FARM 17 - MOWING	21 - MAIL CARRIER 99 - OTHER/UNKNOWN	8 7 5	8 7 5 4
SPECIA	3 - ELECTRONIC RIDE SHARING L 4 - SCHOOL TRANSPORT	8 - BUS - SHUTTLE 9 - BUS - OTHER		18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE		7 6 5	7 6 5
FUNCTIO	4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT /COMMUTER	TO - AINBOLAINGE	EQUIPMENT	PATROL		6	12 12 12
1	1 - NO CARGO BODY TYPE / NOT	3 - VEHICLE TOWIN ANOTHER MOTO		8 - POLE 9 - CARGO TANK	12 - CONCRETE MIXER 13 - AUTO TRANSPORTER	12	
CARGO	APPLICABLE 2 - BUS	VEHICLE 4 - LOGGING		10 - FLAT BED 11 - DUMP	14 - GARBAGE/REFUSE 99 - OTHER/UNKNOWN		3 9 3 9 3
TYPE	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK	9 - MOTOR TROUBLE	99 - OTHER/UNKNOWN	6	
VEHICL	2 - HEAD LAMPS	5 - STEERING 6 - TIRE BLOWOUT	TIRES 8 - TRAILER	10 - DISABLED FROM PRIOR ACCIDENT			6 6
DEFECT		3 - INTERSECTION -	EQUIPMENT DEFECTIVE 6 - BICYCLE LANE	9 - MEDIAN/CROSSING	3 12 - FIRST RESPONDER	NO DAMAGI	E[0] - UNDERCARRIAGE[14]
NON-MOTOR	MARKED CROSSWALK	OTHER 4 - MIDBLOCK -	7 - SHOULDER/ ROADSIDE	ISLAND	AT INCIDENT SCENE S 99 - OTHER/UNKNOWN	TOP [13]	ALL AREAS [15]
AT IMPACT	UNMARKED 5 CROSSWALK	5 - TRAVEL LANE - OTHER LOCATION		OR TRAILS		UN	IT NOT AT SCENE [16]
	2 - NON-COLLISION	1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANE	LANE	CURVE	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING	INITIA	L POINT OF CONTACT
4	4 - STRUCK 5 - BOTH	4 - OVERTAKING/ PASSING	LANE 10 - PARKED	CROSSING SPECIFIED LOCATIO	20 - OTHER NON-	0 - NO DAN 1-12 - REFER DIAGRA	TO UNIT 15 - VEHICLE NOT AT SCENE
ACTION	& STRUCK ACTIONS 9 - OTHER/UNKNOWN	6 - MAKING LEFT TU	RN STOPPED IN TRAFFIC 16	JOGGING, PLAYING - WORKING	DISABLED VEHICLE 99 - OTHER/UNKNOWN	13 - TOP	W 35 - ONNINOWN
	4. NONE	7 LEET OF OFNITE		7 - PUSHING VEHICLE	IONI 04 - L VINO IN		TRAFFIC
	1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT	7 - LEFT OF CENTE 8 - FOLLOWING TO CLOSE/ACDA	O FROM A PARKED POSITION	18 - OPERATING DEFECTIVE	ROADWAY 22 - NOT DISCERNIBLE	TRAFFICWAY FLOW 1 - ONE-WAY	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN
CONTRIBUT	4 - RAN STOP SIGN 5 - UNSAFE SPEED ING 6 - IMPROPER TURN	9 - IMPROPER LANE CHANGE 10 - IMPROPER PASS	5 14 - STOPPED OR PARKED ILLEGALLY SING 15 - SWERVING TO	EQUIPMENT 19 - LOAD SHIFTING/ FALLING/SPILLING	23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER	2 2 - TWO-WAY	2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
CIRCUMSTAI		11 - DROVE OFF ROA		20 - IMPROPER CROSSING	ACTION	# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING
SEQUEN	CE OF EVENTS		EVENTS			2	1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE
1 20	1 - OVERTURN/ ROLLOVER 2 - FIRE/EXPLOSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF	11 - CROSS CENTERLINE OPPOSITE DIRECTION OF	16 - RAILWAY VEHICL 17 - ANIMAL - FARM 18 - ANIMAL - DEER	E 22 - WORK ZONE MAINTENANCE EQUIPMENT		CROSSING
2	3 - IMMERSION 4 - JACKKNIFE	UNITS 8 - RAN OFF ROAD	TRAVEL 12 - DOWNHILL RUNAWA	19 - ANIMAL - OTHER Y20 - MOTOR VEHICLE	23 - STRUCK BY FALLING, SHIFTING	UNIT / NO	ON-MOTORIST DIRECTION 1 - NORTH 5 - NORTHEAST
	5 - CARGO/EQUIPMENT LOSS OR SHIFT	RIGHT 9 - RAN OFF ROAD 10 - CROSS MEDIAN	14 - PEDESTRIAN	IN TRANSPORT 21 - PARKED MOTOR VEHICLE	CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE	FROM 2 TO	2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST
3 <u> </u>		COL	15 - PEDALCYCLE LISION WITH FIXED OBJECT	- STRUCK	24 - OTHER MOVABLE OBJECT	, ,	9 - OTHER/UNKNOWN
4	ATTENUATOR/	31 - GUARDRAIL END 32 - PORTABLE BARI	37 - TRAFFIC SIGN POST RIER 38 - OVERHEAD SIGN	43 - CURB 44 - DITCH	50 - WORK ZONE MAINTENANCE	UNIT SPEED	DETECTED SPEED
5	26 - BRIDGE OVERHEAD STRUCTURE	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARD		45 - EMBANKMENT 46 - FENCE 47 - MAILBOX	EQUIPMENT 51 - WALL 52 - BUILDING	5	1 - STATED/ESTIMATED SPEED
6	28 - BRIDGE PARAPET	BARRIER 35 - MEDIAN CONCR BARRIER	OR SUPPORT	48 - TREE 49 - FIRE HYDRANT	53 - TUNNEL 54 - OTHER FIXED OBJECT	POSTED SPEED	2 - CALCULATED/EDR 3 - UNDETERMINED
■ " ∐	29 - BRIDGE RAIL 30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT		99 - OTHER/UNKNOWN	25	
1 HSY8304	FIRST HARMFUL EVEN OH1 1/19 [760-0820]	т 1 моз	ST HARMFUL EVENT				

OHIO D	EPARTMENT													
OF PUE	BLIC SAFETY MERVICE - PROTECTION	OTORIST /	NON-MC	DTOR	IST				LOCAL REPORT NUMBER* M-P2502094					
UNIT#	NAME: LAST	, FIRST, MIDDLE							IVI-P25		OF BIRTH		AGE	GENDER
1		, RICKY L							09/30/				31	M
	S:STREET, CIT										INCLUDE AREA CO	DDE	1 .	
26599 E	BOESHAR	T RD, DANVILL	E, OH 430	14										
INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED	TAKEN TO:	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED 4		SE. COMPLIANT ELMET	ATING POSITION	AIR BAG USA	GE EJECTION	TRAPPED 1
	OPERATOR L	ICENSE NUMBER		OFFEN	NSE CHA	RGED	LOCAL	OFFENSE DESC	RIPTION			CITATION	N NUMBER	<u> </u>
OH OH	UA27249	9		MTV	337.0)1A	CODE	Drive Unsa	fe Vehic	cle		MVP4	2012500	002194
OL CLASS	SELECT UP TO 2	RESTRICTIO	DN SELECT UP TO 3 D	ISTRACTED	1—	OHOL / DRUG SUS	PECTED ARIJUANA	CONDITION		COHOL TE			PE RESUL	T SELECT UP TO 4
4				1		THER DRUG	INIJUANA	1	1	1 .		1		
UNIT#	NAME: LAST	, FIRST, MIDDLE								DATE	OF BIRTH		AGE	GENDER
2	,	BRIDGET ANN							12/17/	1983			41	F
≅	S:STREET, CIT	, - ,	LI 42020						CONTAC	T PHONE -	INCLUDE AREA CO	DDE		
842 FA INJURIES 5		R, HOWARD, O EMS AGENCY (NAME)		LINIUDED	TAKENTO	MEDICAL FACILIT	//NAME CITY	SAFETY		SE	ATING POSITION	AIR BAG USA	GE EJECTION	TRAPPED
5	TAKEN BY	ZINO AOZITOT (TV WIL)		INJURED	TAKEN TO:	MEDICAL FACILIT	(NAME, CITT)	EQUIPMENT 4		COMPLIANT ELMET	1	1	4	1
	OPERATOR L	ICENSE NUMBER		OFFEN	NSE CHA	RGED	LOCAL	OFFENSE DESC	RIPTION			CITATION	N NUMBER	<u> </u>
OH OH	RV48652	8					CODE							
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTIO	D	RIVER ISTRACTED	1—	OHOL / DRUG SUS		CONDITION		COHOL TE			RUG TEST(S	T SELECT UP TO 4
4				^Y 1	1=	LCOHOL MA	RIJUANA	1		1 .		$\lceil 1 \rceil \lceil \lceil$	╗╟╓┎	
UNIT #	NAME: LAST	, FIRST, MIDDLE		<u> </u>	<u> </u>					DATE	OF BIRTH	<u> </u>	AGE	GENDER
3	LOUDER	RMILK, PATRIC	ΚA						09/19/	1967			57	М
	S:STREET, CIT	Y, STATE, ZIP							CONTAC	T PHONE -	INCLUDE AREA CO	DDE		1
1 5		, CENTERBUR		1										
INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED 4				DOT-Compliant SEATING POSITION AIR I				GE EJECTION	TRAPPED 1	
Ø OL STATE	OPERATOR L	ICENSE NUMBER		OFFENSE CHARGED LOCAL CODE CODE				<u> </u>				NUMBER	. —	
OH OH	RK64613													
OL CLASS	SELECT UP TO 2	RESTRICTIO		RIVER ISTRACTED Y				STATUS	TYPE			PE RESUL	T SELECT UP TO 4	
	$ \bigsqcup \bigsqcup$			1		THER DRUG		1		1 .			1 🗆 [
1 - FATAL	JRIES	SEATING POSITION 1 - FRONT - LEFT SID		AIR BAG		OL CLASS 1 - CLASS A	;	OL RESTRIC			ER DISTRACTION		TEST STA	
2 - SUSPECT INJURY	ED SERIOUS	(MOTORCYCLE D 2 - FRONT - MIDDLE	RIVER) 2 - DEP	LOYED FRO	TNC	2 - CLASS B 3 - CLASS C		DEVICE 2 - CDL INTRAS		2 - MANI	JALLY OPERA LECTRONIC	TING 2-	TEST REFUS TEST GIVEN,	
3 - SUSPECT INJURY		3 - FRONT - RIGHT S 4 - SECOND - LEFT S (MOTORCYCLE	IDE FRO	NT / SIDE		4 - REGULAR CLA (OHIO = D)		3 - CORRECTIVI	R	DEVI	MUNICATION CE (TEXTING,		CONTAMINATED OF CONTAMINATED	USABLE
4 - POSSIBLE 5 - NO APPAI	RENT INJURY	PASSENGER) 5 - SECOND - MIDDLI	9 - DEP	APPLICABI LOYMENT NOWN	LE	5 - M/C MOPED O 6 - NO VALID OL	INLT	5 - EXCEPT CLA 6 - EXCEPT CLA CLASS B BU	SS A &	3 - TALK	NG, DIALING) ING ON DS-FREE		TEST GIVEN, KNOWN TEST GIVEN,	
INJURED	TAKEN BY	6 - SECOND - RIGHT 7 - THIRD - LEFT SIDI						7 - EXCEPT TRACTOR-TE	RAILER	COMI DEVI	MUNICATION CE		UNKNOWN	
1 - NOT TRAI TREATED	NSPORTED / O AT SCENE	(MOTORCYCLE SI CAR) 8 - THIRD - MIDDLE	DE	EJECTION		OL ENDORSEI	MENT	8 - INTERMEDIA RESTRICTIO 9 - LEARNER'S I	NS		ING ON HAND MUNICATION CE	-HELD	ALCOHOL TES	ST TYPE
2 - EMS 3 - POLICE		9 - THIRD - RIGHT 10 - SLEEPER SECTIO		EJECTED	CTED	H - HAZMAT M - MOTORCYCLE		RESTRICTIO 10 - LIMITED TO	NS	5 - OTHE AN EI	R ACTIVITY V LECTRONIC D	EVICE 2-	NONE BLOOD	
9 - OTHER / L	UNKNOWN	TRUCK CAB 11 - PASSENGER IN O ENCLOSED CARG	THER 3 - TOT	ALLY EJEC	TED	P - PASSENGER N - TANKER		ONLY 11 - LIMITED TO EMPLOYMEN	ıT		ENGER ER DISTRACTI E THE VEHIC	ON 4-	URINE BREATH OTHER	
OAFETY F	EQUIPMENT	AREA (NON-TRAIL UNIT, BUS, PICK-L	ING			Q - MOTOR SCOO R - THREE-WHEE MOTORCYCLE	L	12 - LIMITED - OT 13 - MECHANICA	HER	8 - OTHE	R DISTRACTI	ON		
1 - NONE US	ED	WITH CAP) 12 - PASSENGER IN	D00	TRAPPED		S - SCHOOL BUS T - DOUBLE & TR		(SPECIAL BR	ROLS, OR	9 - OTHE	R / UNKNOWI	N	DRUG TEST	TYPE
USED	ONLY USED	UNENCLOSED CA AREA 13 - TRAILING UNIT	2 - EXT	TRAPPED RICATED B		TRAILERS X - TANKER / HAZ	MAT	OTHER ADAI DEVICES) 14 - MILITARY VE					NONE BLOOD	
USED	DER & LAP BELT 14 - RIDING ON VEHICLE EXTERIOR NON 15 - IRAILING UNIT MEC 3 - FREI NON					GENDER		ONLY 15 - MOTOR VEH		1 - APPA	CONDITION RENTLY NOR	3 - MAL 4 -	URINE OTHER	
5 - CHILD RE SYSTEM - FACING						F - FEMALE M - MALE		WITHOUT AII 16 - OUTSIDE MII 17 - PROSTHETIO	RROR	3 - EMO	IICAL IMPAIRN TIONAL (E.G., RESSED, ANGI			
6 - CHILD RE	99 - OTHER / UNKNOWN LESTRAINT 1 - REAR FACING					U - OTHER / UNK	NOWN	18 - OTHER	,,,,,		JRBED)		DRUG TEST RE	ESULT(S)
7 - BOOSTER 8 - HELMET U	USED									FATIO	ASLEEP, FAIN SUED, ETC.	2 -	AMPHETAMII BARBITURAT	ES
9 - PROTECT USED (EL ETC.)	BOW, KNEES,									OF M	R THE INFLU EDICATIONS / SS / ALCOHOL	4 -	BENZODIAZE CANNABINOI COCAINE	
10 - REFLECT 11 - LIGHTING	FLECTIVE CLOTHING HTING -										R / UNKNOWI	N 6 - 7 -	OPIATES / OF OTHER	
ONLY 99 - OTHER / L	UNKNOWN											8 -	NEGATIVE R	ESULIS

-	✓ Outo D	DEPARTMENT													
	OF PUE	BLIC SAFETY MERVICE - PROTECTION	OTORIST / NOI	N-MO	TORIST	-			M Doco		L REPORT N	UMBER*			
	UNIT #	I NAME LAST	, FIRST, MIDDLE						M-P250	DATE OF BII	OTU .	AGE	GENDER		
	4								00/00/4		ХIП		F		
Į	ADDRESS	S: STREET, CITY	, JOHN MATTHEW						08/08/1	PHONE - INCLUDE	ARFA CODE	63	I.		
	4	,	CT, PLYMOUTH, MI	48170											
	48439 10 10 10 10 10 10 10 1	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN	TO: MEDICAL FACILIT	Y (NAME, CITY)	SAFETY EQUIPMENT USED 4	DOT-Co		OSITION AIR BA	1 4	ON TRAPPED		
		OPERATOR L	ICENSE NUMBER		OFFENSE CI	HARGED	LOCAL	OFFENSE DESC	RIPTION		L CITA	TION NUMBER	<u> </u>		
	OL STATE	G536429	589620				CODE								
	OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER AL	LCOHOL / DRUG SUS	PECTED	CONDITION		COHOL TEST YPE VALUE	STATUS	DRUG TES	I(S) ULT SELECT UP TO 4		
				BY		ALCOHOL MA OTHER DRUG	ARIJUANA	1		1] . T	1				
I	UNIT #	NAME: LAST	, FIRST, MIDDLE			OTHER DRUG				DATE OF BII	RTH	AGE	GENDER		
	ADDRESS	S:STREET, CITY	Y, STATE, ZIP						CONTACT	PHONE - INCLUDE	AREA CODE				
	M INJURIES														
	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN	TO: MEDICAL FACILITY	Y (NAME, CITY)	SAFETY EQUIPMENT	DOT-C	SEATING PO	OSITION AIR BA	G USAGE EJECTI	ON TRAPPED		
		BY						USED	└─ МС НЕ	LMET	<u> </u>	<u> </u>			
	OL STATE	OPERATOR L	ICENSE NUMBER		OFFENSE CI	HARGED	LOCAL CODE	OFFENSE DESC	RIPTION		CITA	TION NUMBER	2		
	OL CLASS	ENDORSEMENT	RESTRICTION SELECT	UP TO 3 DRIV	VED LAI	LCOHOL / DRUG SUS	DECTED		AL C	COHOL TEST		DRUG TES	r/S)		
	OL CLASS	SELECT UP TO 2	RESTRICTION SELECT		TRACTED AL		ARIJUANA	CONDITION		YPE VALUE	STATUS		ULT SELECT UP TO 4		
						OTHER DRUG				_ ⋅					
İ	UNIT #	NAME: LAST	, FIRST, MIDDLE	<u> </u>	•		'			DATE OF BII	RTH	AGE	GENDER		
	ADDRESS	S:STREET, CIT	Y. STATE. ZIP						CONTACT	PHONE - INCLUDE	AREA CODE				
	INJURIES OL STATE	•													
	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED					SEATING PO	OSITION AIR BA	G USAGE EJECTI	ON TRAPPED		
	OL STATE	OPERATOR L	ICENSE NUMBER		OFFENSE CHARGED LOCAL OFFENSE DES					SCRIPTION CITATION NUMBER					
	OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		RIVER ALCOHOL / DRUG SUSPECTED CONDITION					COHOL TEST YPE VALUE	STATUS	DRUG TES	(S) ULT SELECT UP TO 4		
				BY						$\exists 1.$					
	INJU	URIES	SEATING POSITION		AIR BAG	OL CLASS		OL RESTRICT	TION(S)	DRIVER DIST	RACTION	TEST S	TATUS		
	1 - FATAL 2 - SUSPECT	TED SERIOUS	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DI 2 - DEPLO	EPLOYED OYED FRONT	1 - CLASS A 2 - CLASS B		1 - ALCOHOL IN DEVICE	TERLOCK	1 - NOT DISTRA 2 - MANUALLY		1 - NONE GIV 2 - TEST REF			
	INJURY 3 - SUSPECT	TED MINOR	2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE		YED BOTH	3 - CLASS C 4 - REGULAR CLA	ASS	2 - CDL INTRAS 3 - CORRECTIVI	ELENSES	AN ELECTR COMMUNIC	ATION	3 - TEST GIVE CONTAMIN	NATED		
	INJURY 4 - POSSIBLE 5 - NO APPA	E INJURY RENT INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)		F / SIDE PPLICABLE DYMENT	(OHIO = D) 5 - M/C MOPED C 6 - NO VALID OL	NLY	4 - FARM WAIVE 5 - EXCEPT CLA 6 - EXCEPT CLA	SS A BUS	DEVICE (TE TYPING, DIA 3 - TALKING OI	ALING)	4 - TEST GIVE KNOWN	UNUSABLE EN, RESULTS		
-	3 - NO ALLA	INCINT INSORT	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE	UNKNO		0 - NO VALID OL		CLASS B BUS		HANDS-FRE	E	5 - TEST GIVE UNKNOWN			
ı		TAKEN BY	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE					TRACTOR-TE 8 - INTERMEDIA	TE LICENSE	DEVICE 4 - TALKING OI					
		NSPORTED / O AT SCENE	CAR) 8 - THIRD - MIDDLE 9 - THIRD - RIGHT		EJECTION	OL ENDORSE	MENT	9 - LEARNER'S F RESTRICTIO	PERMIT	COMMUNIC DEVICE 5 - OTHER ACT		1 - NONE	TEST TYPE		
1	3 - POLICE 9 - OTHER / I	UNKNOWN	10 - SLEEPER SECTION OF TRUCK CAB		JECTED ALLY EJECTED LY EJECTED	H - HAZMAT M - MOTORCYCLE P - PASSENGER		10 - LIMITED TO I			ONIC DEVICE	2 - BLOOD 3 - URINE			
1			11 - PASSENGER IN OTHER ENCLOSED CARGO		PPLICABLE	N - TANKER Q - MOTOR SCOO	TER	11 - LIMITED TO EMPLOYMEN		7 - OTHER DIS	VEHICLE	4 - BREATH 5 - OTHER			
ı	SAFETY E	EQUIPMENT	AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)			R - THREE-WHEE MOTORCYCLE	L	12 - LIMITED - OT 13 - MECHANICA (SPECIAL BR	L DEVICES	8 - OTHER DIS OUTSIDE TI 9 - OTHER / UN	HE VEHICLE				
ſ	1 - NONE US 2 - SHOULDE	SED ER BELT ONLY	12 - PASSENGER IN UNENCLOSED CARGO	1 - NOT TE	RAPPED	S - SCHOOL BUS T - DOUBLE & TR TRAILERS	IPLE	HAND CONTI	ROLS, OR	9 - OTTILITY OF	IKINOWIN	DRUG TE	ST TYPE		
-		TONLY USED	AREA 13 - TRAILING UNIT	2 - EXTRIC		X - TANKER / HAZ	MAT	DEVICES) 14 - MILITARY VE	HICLES	CONDI	TION	1 - NONE 2 - BLOOD			
1	4 - SHOULDE USED 5 - CHILD RE	ER & LAP BELT	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	3 - FREED NON-M	BY IECHANICAL	GENDER		ONLY 15 - MOTOR VEH WITHOUT AII		1 - APPARENTI 2 - PHYSICAL I	LY NORMAL	3 - URINE 4 - OTHER			
-		- FORWARD	15 - NON-MOTORIST 99 - OTHER / UNKNOWN	MEANS	5	F - FEMALE M - MALE		16 - OUTSIDE MIF 17 - PROSTHETIC	RROR	3 - EMOTIONAL DEPRESSE	_ (E.G.,				
	6 - CHILD RE SYSTEM -	- REAR FACING				U - OTHER / UNK	NOWN	18 - OTHER		DISTURBED 4 - ILLNESS))	DRUG TEST			
-	7 - BOOSTER 8 - HELMET I	USED								5 - FELL ASLEE FATIGUED,	ETC.	1 - AMPHETA 2 - BARBITUR	ATES		
	9 - PROTECT USED (EL ETC.)	BOW, KNEES,								6 - UNDER THE OF MEDICA DRUGS / AL	TIONS /	3 - BENZODIA 4 - CANNABIN 5 - COCAINE			
	10 - REFLECT 11 - LIGHTING									9 - OTHER / UN		6 - OPIATES / 7 - OTHER			
	PEDESTR ONLY 99 - OTHER / I	RIAN / BICYCLE								8 - NEGATIVE RESULTS					
	55 STIER/	S. HATOWN													
- 1															

		HIO D	DEPARTMENT UBLIC SADDENDUM WITNESS ADDENDUM								LOCAL REPORT NUMBER*						
~	,	AFETY - SE	ERVICE - PROTE	CTION	7000171117	VVIIIVEO	O NODEINOON				 M-P2502094	L					
	UNIT	Γ#	NAM	E: LAS	ST, FIRST, MIDDLE								BIRTH			AGE	GENDER
	1		FOI	_EY	, TRAVIS LEE						02/25/1992				3	33	М
ANT	ADDF	RESS			ITY, STATE, ZIP						CONTACT PHON	E - INC	LUDE AREA	A CODE			1
CCUP	211	00 \$	SCHE	ENC	K CREEK RD, HO	WARD, OH	43028										
Ĭ	INJUR	RIES	INJURE TAKEN		EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	LITY (NAME, CITY)	SAFETY EQUIPME	NT	DOT-COMPLIANT	SEATIN	IG POSITIO	N AIR BAG	G USAGE	EJECTION	TRAPPED
	5		BY	\bigsqcup					USED	4	MC HELMET		3		1	4	1
ľ	UNIT	Г#	NAM	E: LAS	ST, FIRST, MIDDLE						DAT	E OF	BIRTH			AGE	GENDER
ı																	
UPANT	ADDF	RESS	S:STRE	ET, C	ITY, STATE, ZIP						CONTACT PHONI	E - INC	LUDE AREA	A CODE			
၁၁၀	IN II IR	PIFS	INJURE	:D	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITV avers out to	SAFETY			SEATIN	IG POSITIO	N TAIRBA	G USAGE	EJECTION	TRAPPED
		٦	TAKEN BY		LING AGENOT ()		INJURED TAKEN TO: MEDICAL FACIL	LIII (NAME, CIII)	EQUIPME USED	мт [DOT-COMPLIANT MC HELMET	OLA III					
2	UNIT	_ <u>_</u> [#	NAM	E: LAS	ST, FIRST, MIDDLE						DAT	E OF	BIRTH		十	AGE	GENDER
ANT	ADDF	RESS	S:STRE	ET, C	ITY, STATE, ZIP						CONTACT PHON	E - INC	LUDE AREA	A CODE			
OCCUP																	
Ĭ	INJUR	RIES	INJURE TAKEN		EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	LITY (NAME, CITY)	SAFETY EQUIPME	NT	DOT-COMPLIANT	SEATIN	IG POSITIO	N AIR BAG	G USAGE	EJECTION	TRAPPED
	L	<u> </u>	BY						USED		☐ MC HELMET						
	UNIT	Γ#	NAM	E: LAS	ST, FIRST, MIDDLE						DAT	E OF	BIRTH			AGE	GENDER
Ļ	4000			F.F. 0	ITY OTATE TIP												
CUPANT	ADDI	RESS	S:SIRE	EI, C	ITY, STATE, ZIP						CONTACT PHONI	E - INC	LUDE AREA	A CODE			
8	INJUR	RIES	INJURE	D	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	L ITY (NAME, CITY)	SAFETY			SEATIN	IG POSITIO	N AIR BAG	G USAGE	EJECTION	TRAPPED
	Г		TAKEN BY			EQUIPMEI USED	NT \square	DOT-COMPLIANT MC HELMET									
i				INJ	IURY	SAFE	I TY EQUIPMENT USED		SEATIN	IG POS	TION			AIR E	BAG US	SAGE	
ı	1 - F	ATAI	L			1 - NONE USEI VEHICLE O		1 - FRONT (MOTO)	- LEFT SI)		
ı	2 - 8	SUSP	ECTED	SERI	IOUS INJURY		R BELT ONLY USED	2 - FRONT 3 - FRONT	- MIDDLE	· '	2 - DEPLOYED FRONT						
ı					OR INJURY	3 - LAP BELT C	ONLY USED		RCYCLE F	PASSEN	GER)						
ı			SIBLE IN			4 - SHOULDER	R & LAP BELT USED	5 - SECON 6 - SECON 7 - THIRD	D - RIGHT	T SIDE		4 - DEPLOYED BOTH FRONT / SIDE					
L	5 - N	NO AI			TAKEN BY	5 - CHILD RES FORWARD	TRAINT SYSTEM -		RCYCLE S		R)	5 -	NOT A	PPLICABL	.E		
	1 - N	T TO			ED / TREATED AT SCENE		TRAINT SYSTEM -	9 - THIRD	RIGHT	ON OF 1	RUCK CAB	9 -	DEPLO	YMENT U	INKNO	WN	
ı	2 - E	EMS				REAR FACI		AREA (NON-TRA		ENCLOSED CARGO NIT, BUS, PICK-UP				JECTIC	N	
ı	3 - F	POLIC	CE			7 - BOOSTER		WITH C	NGÉR IN I	UNENCI	OSED			JECTED ALLY EJEC	CTED		
ı	9 - C	OTHE	R / UNI	KNOW	/N	8 - HELMET US	/E PADS USED	CARGO 13 - TRAILIN 14 - RIDING	IG UNIT	CI E EV	TEDIOD			LY EJECT			
ı				GEN	NDER		NEES, ETC.)		RAILING I	UNIT)	ILMON			PPLICABL			
ı	F - F	EMA	LE			10 - REFLECTIV		99 - OTHER						T	RAPPE	D	
ı	M - N					11 - LIGHTING - / BICYCLE (1 -	NOT TE	RAPPED			
ı	U - C	OTHE	R / UNI	KNOW	/N	99 - OTHER / UN	NKNOWN					2 -	EXTRIC MEANS	CATED BY	/ MECH	IANICAL	
ı												3 -		BY NON-	MECH.	ANICAL	
ı													MEANS	5			
	NAMI	E: LA	ST, FIR	ST, N	MIDDLE						DAT	E OF	BIRTH			AGE	GENDER
TNESS	ADD	2566	. CTDE	ET C	ITY, STATE, ZIP						CONTACT PHON	E 1110	LUDE ADE				
×	ADDI	KESS	SIKE	E1, C	ITT, STATE, ZIP						CONTACT PHONE	E - INC	LUDE AKEA	A CODE			
2	NAMI	E: LA	ST, FIR	ST, M	IIDDLE						DATE OF BIRTH AGE GENDE					GENDER	
ESS																	
WITN	ADDF	RESS	S:STRE	ET, C	ITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE						
	MATE	-	OT 5"	07 :	MDDI F								DIDE:			405	OF:
S	NAME: LAST, FIRST, MIDDLE										DAT	DATE OF BIRTH AGE GENDE					GENDER
VITINES	ADDF	DDRESS: STREET, CITY, STATE, ZIP									CONTACT PHONE	E - INC	LUDE AREA	A CODE			
_			ESS: STREET, CITY, STATE, ZIP														

OHIO DEPARTMENT OF PUBLIC SAFETY NAFETY - MENTICE - PROTECTION TRAFFIC	CRASH	LOCAL REPORT NUMBER*									
OH-2	OH-3 LOCA	M-P2502098									
PHOTOS TAKEN OH-1P	OTHER REPO	ORTING AGENCY NAME*		HIT/SKIP NUMBER OF UNITS UNIT IN ERROR							
SECONDARY CRASH PRIVATE PRO	PERTY Mt	Vernon Police Depa	artment	04201	1 - SOLVED 2 - UNSOLVED	1 98 - ANIMAL 99 - UNKNOWN					
	ATION: CITY, VI	ILLAGE, TOWNSHIP*		CRASH DATE/I	E/TIME* CRASH SEVERITY 1 - FATAL						
42 1 - CITY 2 - VILLAGE 3 - TOWNSHIP MOU	unt Vernon		06/25/2025 20:06 1 - FATAL 2 - SERIOUS IN SUSPECTED								
ROUTE TYPE ROUTE NUMBER PREFIX 1	NORTH LOCA	ATION ROAD NAME		ROAD TYPE	LATITUDE	ت ا	3 - MINOR INJURY SUSPECTED				
3 -	F 4 0 T	SHOCTON AVE		AL	40.402945		4 - INJURY POSSIBLE 5 - PROPERTY				
ROUTE TYPE ROUTE NUMBER PREFIX 1		RENCE ROAD NAME (ROA	AD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE		DAMAGE ONLY				
<u>й</u> 3 -	FACT	er Gilchrist		RD	-82.437149						
REFERENCE POINT DIRECTION FROM REFERENCE		ROUTE TYPE	ROAD TYPE		1	NTERSECTION REL	ATED				
1 - NOR	TH IR - INTE	RAL US ROUTE AV	/-AVENUE LA-LANE S	RD - ROAD SQ - SQUARE	WITHIN INTERSECTION OR ON APPROACH						
1 2 - MILE POST 3 - EAS' 4 - WES	T SR - STAT	BERED COUNTY CR		E - TERRACE	E WITHIN INTERCHANGE AREA						
DISTANCE DISTANCE FROM REFERENCE UNIT OF MEASUR	TR - NUMI	BERED TOWNSHIP		L - TRAIL VA - WAY	NUMBER OF APPROACHES ROADWAY						
1 - MILE	s Root	TE I''	TEIGHTO TE TEIGE		ROADWAY DIVIDED						
50 2 2 - FEET 3 - YARI					ROADWAY DI	VIDED					
LOCATION OF FIRST HARM 1 - ON ROADWAY 9 - C	FUL EVENT ROSSOVER		NER OF CRASH COLLISION/IMPA T COLLISION 4 - REAR-TO-REAR	CT	DIRECTION OF TRAVEL 1 - NORTH	1	EDIAN TYPE DED FLUSH MEDIAN				
2 - ON SHOULDER 10 - D	RIVEWAY/ALLE` AILWAY GRADE	Y ACCESS 6 BET	TWEEN 5 - BACKING O MOTOR 6 - ANGLE		2 - SOUTH (< 4 FEET) 3 - EAST 2 - DIVIDED FLUSH MEDIAN						
4 - ON ROADSIDE C	ROSSING HARED USE PA	└ ∨E⊦	HICLES IN 7 - SIDESWIPE, SAN ANSPORT DIRECTION	ИΕ	4 - WEST (>= 4 FEET) 3 - DIVIDED, DEPRESSED MED						
6 - OUTSIDE TRAFFIC WAY TI	RAILS IKE LANE	2 - RE	AR-END 8 - SIDESWIPE, OPI AD-ON DIRECTION	POSITE		4 - DIVID	ED, RAISE MEDIAN TYPE)				
	OLL BOOTH THER/UNKNOW	'N	9 - OTHER/UNKNOV	VN		9 - OTHE	ER/UNKNOWN				
WORK ZONE RELATED		RK ZONE TYPE CLOSURE	LOCATION OF CRASH IN W		CONTOUR	CONDITIONS SURFACE					
WORKERS PRESENT	2 - LANE	SHFT/CROSSOVER CON SHOULDER	WARNING SIGN 2 - ADVANCE WARNIN								
LAW ENFORCEMENT PRESENT	OR ME	EDIAN RMITTENT OR MOVING	3 - TRANSITION AREA 4 - ACTIVITY AREA								
ACTIVE SCHOOL ZONE	WORK 5 - OTHE	<	5 - TERMINATION ARE	A	1 - STRAIGHT LEVEL	1 - DRY 2 - WET	1 - CONCRETE 2 - BLACKTOP,				
					2 - STRAIGHT 3 - SNOW BITUM GRADE 4 - ICE ASPH/						
LIGHT CONDITION 1 - DAYLIGHT		1 - CLEAR	WEATHER 6 - SNOW		3 - CURVE LEVEL						
2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY	lг	2 - CLOUDY	7 - SEVERE CROSSWINDS DKE 8 - BLOWING SAND, SOIL,		NOW UNKNOWN MOVING) 5-E						
4 - DARK - ROADWAY NOT LIGHT 5 - DARK - UNKNOWN ROADWAY	ED L	4 - RAIN 5 - SLEET, HAIL	9 - FREEZING RAIN OR FRI DRIZZLE	EEZING		9 - OTHER/ UNKNOWN					
9 - OTHER/UNKNOWN			99- OTHER/UNKNOWN								
			Т								
NARRATIVE Unit 1 attempted to execute a	left hand tu	rn onto Upper Gilch	DIAGRAM DIST Road								
from Coshocton Avenue. Unit											
struck Unit 2				Aver	iue						
				Coshocton Aven	- A	& 100 m					
					San Contraction of the Contracti						
						N					
				N		(N					
					Unit 1	Not To Scale					
					7	<u>C</u>					
						pper Gi					
Upper Gilchrist Road											
			Road								
CRASH REPORTED DATE/TIME	DISP	ATCH DATE/TIME	ARRIVAL DATE/TIME	<u> </u>	SCENE CLEARED	DATE/TIME	REPORT TAKEN BY				
06/25/2025 20:06	06/25/2025	5 20:07	06/25/2025 20:11	0	6/25/2025 20:31	 	POLICE AGENCY				
TOTAL TIME OTHER	TOTAL	OFFICER'S NAME*			FFICER'S NAME*	MOTORIST					
ROADWAY CLOSED INVESTIGATION TIME	MINUTES	Fike, Benjamin					SUPPLEMENT (CORRECTION OR				
0 0	24	OFFICER'S BADGE NUMB 292-18	BER* CI	HECKED BY O	DFFICER'S BADGE NUMBER* ADDITION TO AN EXISTIN REPORT SENT TO ODPS;						

Y8304 OH1 1/19 [760-0820]

	F PUBLIC SAFETY UNIT		LOCAL REPORT NUMBER*					
	ETY - MENVICE - PROTECTION					M-P2502098		
UNIT #	OWNER NAME: LAST,			OWNER PHONE: INC.	LUDE AREA CODE DSAME AS		DAMAGE	
2 OWNER	NEIGHBARGER ADDRESS: STREET, CIT				1 - NONE	DAMAGE SCALE 3 - FUNCTIONAL DAMAGE		
	NGVIEW DR, HO		2 - MINOR DA					
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE							9 - UNKNOWN	
LP STATI	E LICENSE PLATE #	VEI	HICLE IDENTIFICATION #	VEHICLE Y	EAR VEHICLE MAKE		AMAGED AREA(S) CATE ALL THAT APPLY	
ОН	NETTER	2T3DFREV		2015	Toyota	12	12	
INSU	RANCE INSURANCE COMF STATE FARM INS - T		INSURANCE POLICY # 2544160-SFP-35	COLOF Silver	R VEHICLE MODEL RAV4	10 12	2 10 12	
	TYPE OF USE		US DOT #	TOWED BY: COM	MPANY NAME	10 2	10, 2	
СОМ	MERCIAL GOVERNMENT	IN EMERGENCY RESPONSE	VEHICLE WEIGHT GVWR/GCWR	HAZARD	OOUS MATERIAL	9 9 3	9 9 3	
INTI	ERLOCK VICE HIT/SKIP UN	# OCCUPANTS	1 - <= 10K LBS.	MATERIAL RELEASED	CLASS # PLACARD ID #	8 7 5	4 8 7 5 4	
EQU	JIPPED	1	2 - 10,001 - 26K LBS. 3 - >= 26K LBS.	PLACARD		7 6 5	12 7 6	
3	2 - PASSENGER VAN	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE	12 - GOLF CART 13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK	18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN/ SKATER 24 - WHEELCHAIR (ANY	10 /	11 1 2	
UNIT TY	3 - SPORT UTILITY	3-WHEELED 9 - AUTOCYCLE	15 - SEMI-TRACTOR	PASSENGERS) 20 - OTHER VEHICLE	TYPE) 25 - OTHER NON-	_	10 2	
	5 - CARGO VAN	0 - MOPED OR MOTORIZED BICY	17 - MOTORHOME CLE	21 - HEAVY EQUIPMEN 22 - ANIMAL WITH RIDE	ER 26 - BICYCLE	_	8 4	
0		1 - ALL TERRAIN VEHICLE (ATV/UT)	V)	OR ANIMAL-DRAW	N 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP	8	7 6 5 4	
	# OF TRAILING UNITS				HII/SNIP	11 12	5 12 1	
VEHICLE	WAS VEHICLE OPERATIN AUTONOMOUS MODE	G IN	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE		9 - UNKNOWN	10 11 1	2 10 11 1 2	
2	WHEN CRASH OCCURED 1 - YES 2 - NO 9 - OTHER/U	AUTONON		5 - FULL AUTOMATI		9 10 2 3	3 9 10 2 3	
	1 - NONE	6 - BUS - CHARTER	/TOUR 11 - FIRE	16 - FARM	21 - MAIL CARRIER	8 4 -	8 4 -	
1	2 - TAXI 3 - ELECTRONIC RIDE	7 - BUS - INTERCITY 8 - BUS - SHUTTLE	13 - POLICE	17 - MOWING 18 - SNOW REMOVAL	99 - OTHER/UNKNOWN	8 7 6	4 8 7 6 5 4	
SPECIA FUNCTIO	L SHARING 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT	9 - BUS - OTHER 10 - AMBULANCE		19 - TOWING 20 - SAFETY SERVICE PATROL		7 6	7 6	
	/COMMUTER						12 12 12	
1	1 - NO CARGO BODY TYPE / NOT	3 - VEHICLE TOWIN ANOTHER MOTO	OR CONTAINER CHASSIS		12 - CONCRETE MIXER 13 - AUTO TRANSPORTER	12		
CARGO	APPLICABLE 2 - BUS	VEHICLE 4 - LOGGING	6 - CARGO VAN/ ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	10 - FLAT BED 11 - DUMP	14 - GARBAGE/REFUSE 99 - OTHER/UNKNOWN	[[[[[]]] [] [] []	3 9 3 9 3	
TYPE							4	
	1 - TURN SIGNALS 2 - HEAD LAMPS	4 - BRAKES 5 - STEERING	7 - WORN OR SLICK TIRES	9 - MOTOR TROUBLE 10 - DISABLED FROM	99 - OTHER/UNKNOWN	6	6 6 6	
VEHICL DEFECT		6 - TIRE BLOWOUT	8 - TRAILER EQUIPMENT DEFECTIVE	PRIOR ACCIDENT		- NO DAMAG		
	1 - INTERSECTION - 3 MARKED	- INTERSECTION - OTHER	6 - BICYCLE LANE 7 - SHOULDER/	9 - MEDIAN/CROSSING	3 12 - FIRST RESPONDER AT INCIDENT SCENE			
NON-MOTOR	CROSSWALK 4	- MIDBLOCK - MARKED CROSSW	ROADSIDE	10 - DRIVEWAY ACCES 11 - SHARED USE PATH	S 99 - OTHER/UNKNOWN	TOP [13]	ALL AREAS [15]	
AT IMPAC	T UNMARKED 5 CROSSWALK	- TRAVEL LANE - OTHER LOCATION		OR TRAILS		UN	IIT NOT AT SCENE [16]	
	2 - NON-COLLISION	1 - STRAIGHT AHEAD 2 - BACKING	LANE	CURVE	18 - APPROACHING OR LEAVING VEHICLE	INITIA	L POINT OF CONTACT	
4		3 - CHANGING LANE4 - OVERTAKING/ PASSING	S 9 - LEAVING TRAFFIC 1: LANE 10 - PARKED	4 - ENTERING OR CROSSING SPECIFIED LOCATIO	19 - STANDING 20 - OTHER NON- N MOTORIST	0 - NO DAN		
ACTION		5 - MAKING RIGHT T	URN 11 - SLOWING OR 1:		, 21 - STANDING OUTSIDE DISABLED VEHICLE	DIAGRA		
	9 - OTHER/UNKNOWN	7 - MAKING U-TURN		6 - WORKING 7 - PUSHING VEHICLE	99 - OTHER/UNKNOWN			
	1 - NONE	7 - LEFT OF CENTE				TRAFFICWAY FLOW	TRAFFIC TRAFFIC CONTROL	
	2 - FAILURE TO YIELD 3 - RAN RED LIGHT	8 - FOLLOWING TO CLOSE/ACDA	POSITION	18 - OPERATING DEFECTIVE	ROADWAY 22 - NOT DISCERNIBLE	1 - ONE-WAY	1 - ROUNDABOUT4 - STOP SIGN	
	4 - RAN STOP SIGN 5 - UNSAFE SPEED TING 6 - IMPROPER TURN	9 - IMPROPER LANG CHANGE		EQUIPMENT 19 - LOAD SHIFTING/ FALLING/SPILLING	23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER	2 - TWO-WAY	2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL	
CIRCUMSTA	NCES	11 - DROVE OFF ROA		20 - IMPROPER CROSSING	ACTION	# OF THROUGH LANES	RAIL GRADE CROSSING	
စ္ SEQUEN	CE OF EVENTS					ON ROAD	1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING	
	1 - OVERTURN/	6 - EQUIPMENT	EVENTS 11 - CROSS CENTERLINE	E 16 - RAILWAY VEHICL	E 22 - WORK ZONE	1	1 3 - INVOLVED-PASSIVE CROSSING	
1 20	ROLLOVER 2 - FIRE/EXPLOSION	FAILURE 7 - SEPARATION OF		17 - ANIMAL - FARM 18 - ANIMAL - DEER	MAINTENANCE EQUIPMENT	LINIT / NO	ON-MOTORIST DIRECTION	
2	3 - IMMERSION 4 - JACKKNIFE 5 - CARGO/EQUIPMENT	UNITS 8 - RAN OFF ROAD RIGHT	TRAVEL 12 - DOWNHILL RUNAWA 13 - OTHER NON-	19 - ANIMAL - OTHER XY20 - MOTOR VEHICLE IN TRANSPORT	23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING	ONIT / NO	1 - NORTH 5 - NORTHEAST	
	LOSS OR SHIFT	9 - RAN OFF ROAD 10 - CROSS MEDIAN	LEFT COLLISION	21 - PARKED MOTOR VEHICLE	SET IN MOTION BY A MOTOR VEHICLE	FROM 3 TO	2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST	
3			15 - PEDALCYCLE		24 - OTHER MOVABLE OBJECT	'	9 - OTHER/UNKNOWN	
4		31 - GUARDRAIL END		43 - CURB	50 - WORK ZONE		T	
		32 - PORTABLE BARI 33 - MEDIAN CABLE BARRIER	RIER 38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES	44 - DITCH 45 - EMBANKMENT 46 - FENCE	MAINTENANCE EQUIPMENT 51 - WALL	UNIT SPEED	DETECTED SPEED 1 - STATED/ESTIMATED	
5	STRUCTURE 27 - BRIDGE PIER OR	34 - MEDIAN GUARD BARRIER	RAIL SUPPORT 40 - UTILITY POLE	47 - MAILBOX 48 - TREE	52 - BUILDING 53 - TUNNEL		3 SPEED 2 - CALCULATED/EDR	
6	ABUTMENT 28 - BRIDGE PARAPET	35 - MEDIAN CONCR BARRIER	ETE 41 - OTHER POST, POLE OR SUPPORT		54 - OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED	
	29 - BRIDGE RAIL 30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT		99 - OTHER/UNKNOWN	35		
1	FIRST HARMFUL EVEN	т 1 моз	ST HARMFUL EVENT					
HSY8304	OH1 1/19 [760-0820]							

OHIO D	DEDARTMENT														
OF PUE	OHIO DEPARTMENT OFF PUBLIC SAFETY MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER* M-P2502098						
UNIT#	NAME: LAST, FIRST, MIDDLE									DATE OF BIRTH AGE GENDER					
1	TOLBERT, IAN ANTHONY								07/17/2006				18	M	
•	SS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE						
5404 W	VINCHEST	ER CATHEDRAL DI	R, CANA	L WINC	CHESTE,	OH 4311	0								
INJURIES	TAKEN TO THE STATE OF THE STATE								DOT-0	SE	ATING POSITION	AIR BAG USA	GE EJECTION	TRAPPED	
NON 5	BY								MC HELMET 1			1			
OH OH	VR45206	LICENSE NUMBER		CODE			OFFENSE DESC					ATION NUMBER IVP4201250000249			
OL CLASS	ENDORSEMENT			VER	/ER ALCOHOL / DRUG SUSPECTED CONF			_	Right Of Way When Turning Left ALCOHOL TEST			DI	RUG TEST(S	3)	
4	SELECT UP TO 2		DIS BY	TRACTED	ALCOH	IOL MA	ARIJUANA			TYPE	VALUE S	TATUS TY		T SELECT UP TO 4	
UNIT#	NAME: LAST	, FIRST, MIDDLE		1	OTHER	RDRUG		1		<u> </u>	OE BIRTH	اإلـٰــا	1 L L	GENDER	
2		ARGER, ANNETTE	MADIE						DATE OF BIRTH					F	
ADDRESS		,	IVIAINIL						08/25/1957 67 F					!	
~															
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TA	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMEN				□ DOT-0		ATING POSITION	AIR BAG USA	GE EJECTION	TRAPPED	
NON 5	BY							USED 4	DOT-COMPLIANT 1					1	
OL STATE		LICENSE NUMBER		OFFENS	SE CHARGED)	LOCAL CODE	OFFENSE DESC	RIPTION	•		CITATION	NUMBER		
OH OH	RR80179									COLIOL TO	-0.		DUO TEOT/O		
OL CLASS	SELECT UP TO 2	RESTRICTION SELEC		VER TRACTED	ALCOHOL	/ DRUG SUS	PECTED ARIJUANA	CONDITION		COHOL TE		TATUS TY	PE RESUL	T SELECT UP TO 4	
4	ШШ	$ \;\sqcup\;\;\sqcup\;\;$ $ \;$			OTHER	ш	111100711171	1		1 .		1 [1100		
UNIT#	NAME: LAST	, FIRST, MIDDLE	ı	I						DATE	OF BIRTH		AGE	GENDER	
ADDRESS	S:STREET, CIT	Y, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE							
0	LIN HIDED I	FMO A OFNOY (NAME)						CAFFTY		1		T		T	
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TA	AKEN TO: MEDI	CAL FACILIT	Y (NAME, CITY)	SAFETY EQUIPMENT USED		COMPLIANT ELMET	ATING POSITION	AIR BAG USA	GE EJECTION	TRAPPED	
INJURIES OL STATE	OPERATOR I	LICENSE NUMBER					OFFENSE DESC	<u> </u>							
					CODE										
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELEC		VER TRACTED		/ DRUG SUS		CONDITION		COHOL TE		D STATUS TY	RUG TEST(S	T SELECT UP TO 4	
			BY		\equiv	IOL MA	ARIJUANA			اَث	VALUE				
INJU	URIES	SEATING POSITION		AIR BAG	OTHER	OL CLASS	5	OL RESTRIC	TION(S)	DRIV	ER DISTRACTION		TEST STAT	 TUS	
1 - FATAL 2 - SUSPECT	TED SERIOUS	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)		EPLOYED		CLASS A CLASS B		1 - ALCOHOL IN DEVICE			DISTRACTED JALLY OPERA		NONE GIVEN TEST REFUS		
INJURY 3 - SUSPECT				YED SIDE 3 - CLASS C 2 - CDL IN YED BOTH 4 - REGULAR CLASS 3 - CORRE			2 - CDL INTRAS 3 - CORRECTIV	CTIVE LENSES COMMUNICATION				3 - TEST GIVEN, CONTAMINATED			
4 - POSSIBLE	INJURY 4 - SECOND - LEFT SIDE FRONT 4 - POSSIBLE INJURY (MOTORCYCLE 5 - NOT AF			PPLICABLE 5 - M/C MOPED ONLY 5 - EXCE				RM WAIVER CEPT CLASS A BUS CEPT CLASS A & DEVICE (TEXTING) TYPING, DIALING) 3 - TALKING ON			SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN				
5 - NO APPA	5 - NO APPARENT INJURY PASSENGER) 9 - DEPLO 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE			DWN CLAS			CLASS B BUS	ASS B BUS HANDS-FREE COMMUNICATION			5 -	5 - TEST GIVEN, RESULTS UNKNOWN			
	TAKEN BY	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE						TRACTOR-TE 8 - INTERMEDIA	TE LICENSE		ING ON HAND	-HELD			
	NSPORTED / O AT SCENE	CAR) 8 - THIRD - MIDDLE 9 - THIRD - RIGHT		EJECTION		OL ENDORSE	MENT	RESTRICTIO 9 - LEARNER'S I RESTRICTIO	PERMIT	DEVI	MUNICATION CE ER ACTIVITY V	/ITH 1-	ALCOHOL TES	T TYPE	
3 - POLICE	3 - POLICE 10 - SLEEPER SECTION OF 2 - PARTIA				JECTED			D DAYLIGHT AN ELECTRONIC DEVICE 2 - BLOOD 3 - URINE 3 - URINE							
	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP				N -	TANKER MOTOR SCOO	TER	11 - LIMITED TO EMPLOYMEN		7 - OTHER DISTRACTION INSIDE THE VEHICLE			BREATH OTHER		
SAFETY E					R - THREE-WHEEL 12 - LIMITE 13 - MECH			13 - MECHANICA	2 - LIMITED - OTHER 3 - MECHANICAL DEVICES (SPECIAL BRAKES,		ER DISTRACTI SIDE THE VEH	ICLE			
	WITH CAP)					S - SCHOOL BUS (SPECIAL E HAND COM T - DOUBLE & TRIPLE			ROLS, OR	9 - OTHER / UNKNOWN			DRUG TEST	TYPE	
	USED AREA 2 - EXTRIC 3 - LAP BELT ONLY USED 13 - TRAILING UNIT 2 - EXTRIC			CATED BY ANICAL MEANS TRAILERS DEV 14 - MILIT				DEVICES) 14 - MILITARY VEHICLES		S					
USED	4 - SHOULDER & LAP BELT USED USED EXTERIOR NON-N		D BY MECHANICAL GENDER			ONLY 15 - MOTOR VEHICLES WITHOUT AIR BRAKES		1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT		MAL 4-	URINE OTHER				
SYSTEM - FACING	- FORWARD	15 - NON-MOTORIST 99 - OTHER / UNKNOWN	MEAN	S		FEMALE MALE		16 - OUTSIDE MII 17 - PROSTHETIO	RROR	3 - EMO	TIONAL (E.G., RESSED, ANGI				
	- REAR FACING					OTHER / UNK	NOWN	18 - OTHER		4 - ILLNI		1750	DRUG TEST RE		
7 - BOOSTEF 8 - HELMET U 9 - PROTECT	USED								5 - FELL ASLEEP, FA FATIGUED, ETC. 6 - LINDER THE INFI		GUED, ETC.	2 -	AMPHETAMIN BARBITURAT BENZODIAZE	ES	
USED (EL ETC.)	BOW, KNEES,									6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL			CANNABINOI COCAINE	DS	
11 - LIGHTING											ER / UNKNOWI	IOWN 6 - OPIATES 7 - OTHER			
ONLY 99 - OTHER / I	UNKNOWN												NEGATIVE RI	-3UL15	
			1												



Mount Vernon Police Department

Office of the Chief of Police 5 North Gay Street Mount Vernon, Ohio 43050



Basic Accident Report

Printed on June 30, 2025

Agency Mt Vernon Police Department

Accident Date 06/26/25 12:11 Accident # M-25-2106 Case # M-P2502106

Unit 1

Name

Name DEEM, DEBRA J Address 245 ADAMSON ST

MT VERNON, OH 43050

 DOB
 3/18/55

 Sex
 Female

 OLN
 RP410896

OLN State OH
OLN Class Class D
OLN Exp. Year 2029

Vehicle

Plate OH DTA9083 Passenger Car expires 2026

VIN 2FMPK4J91MBA06323

Vehicle Model 2021 Ford

Vehicle Style Gray Stationwagon

Vehicle Features

Owner 1 DEEM, DEBRA J

Owner 2

Unit 2

Name

Name COCHRAN, ROBERT T
Address 3310 COUNTY ROAD 172

CARDINGTON, OH 43315

 DOB
 7/1/57

 Sex
 Male

 OLN
 RX870945

 OLN State
 OH

 OLN Class
 Class D

Vehicle

Plate OH GZM5012 expires 2025 VIN 1GCVKREC2HZ281104

2030

Vehicle Model 2017 Chevrolet

Vehicle Style White

Vehicle Features

OLN Exp. Year

Owner 1 COCHRAN, ROBERT T

Owner 2

Other Information

UNIT 1 INSURANCE: ENCOVA MUTUAL POLICY NUMBER: 5002738995

UNIT 2 INSURANCE: NATIONWIDE POLICY NUMBER: 9234J126215



Mount Vernon Police Department

Office of the Chief of Police 5 North Gay Street Mount Vernon, Ohio 43050



Basic Accident Report

Printed on June 30, 2025

Agency Mt Vernon Police Department

Accident Date 06/26/25 12:15 Accident # M-25-2107 Case # M-P2502107

Unit 1

Name

Name BRYANT, AMY I Address 100 TERYL DR

MOUNT VERNON, OH 43050

 DOB
 12/23/77

 Sex
 Female

 OLN
 SR788075

OLN State OH
OLN Class Class D
OLN Exp. Year 2026

Unit 2

Name

Name KLINTWORTH, TIMBERLY MARIE
Address 100 MCGIBNEY RD APT E4

MOUNT VERNON, OH 43050

 DOB
 10/4/93

 Sex
 Female

 OLN
 TZ207551

 OLN State
 OH

 OLN Class
 Class D

OLN Exp. Year 2031

Vehicle

Plate OH KIJ2918 Passenger Car expires 2025

VIN 1N4AL3AP0DC103373 Vehicle Model 2013 Nissan Unknown

Vehicle Style Silver

Vehicle Features

Owner 1 DOUP, SHERI J

Owner 2

Other Information

Unit 1 was in the drive thru of McDonald's. Unit 2 was driving in the parking lot area. Unit 1 left the drive thru line and hit Unit 2. Both driver's exchanged information. Unit 2 then reported the crash to their insurance and insurance requested a police report. Unit 2 was unable to provide vehicle / license plate information of unit 1. Unit 1's vehicle information will not be collected due to this being a private property crash and unit 1 is not the reporting unit.

Unit 1 insurance: The General Insurance, policy number 92OH7110067

Unit 2 insurance: Griffin Insurance, policy number NSA119506300