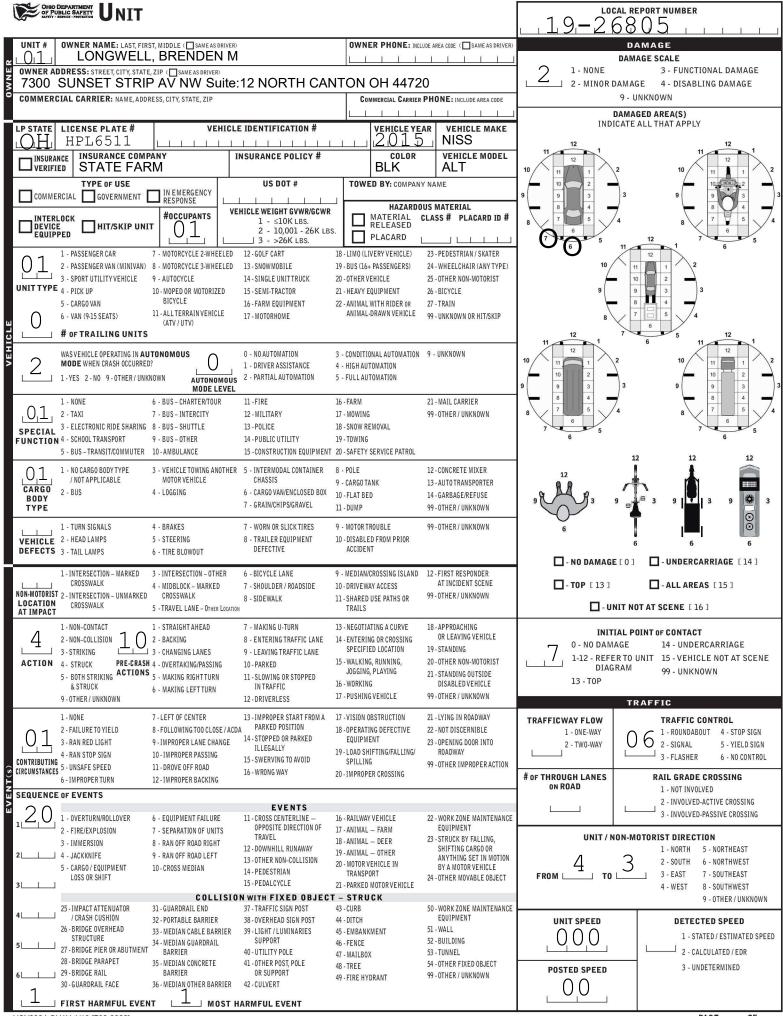
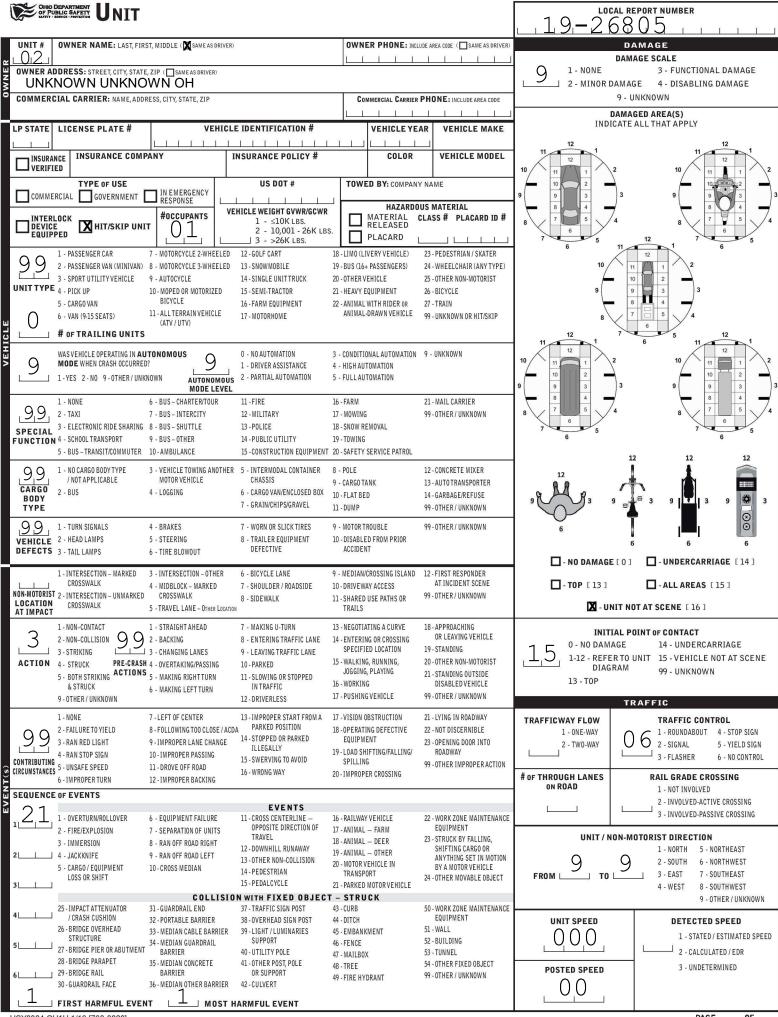
*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT										LOCAL REPORT NUMBER*								
PHOTOS TAKEN OH-2 OH-3																		
SECONDARY CRASH	OH-1P		REPORTING AGENCY NAME* NCIC*							2	2 1-SOLVED () 2 () 2 98-					<b>IT IN ERR(</b> 98 - AN]	IMAL	
COUNTY* LOCALITY* LOCATION: CITY, VILLAGE, TOWNSHIP*											2 - UNSOL		F*		CRASH	99 - UN	KNOWN	
$76 3^{1-\text{CITY}}_{2-\text{VILLAGE}}$ lackson (Township of)										06082019 1112 5 1-FATAL 2-SERIOUS INJU								
											LATITUDE					RIOUS INJ SPECTED	URY	
	3	- SOUTH - EAST - WEST	and a second s						ĄV						3 - MINOR INJURY SUSPECTED			
	MBER PREFIX 1	- NORTH R							AD TYPE		LONGITUD	E DECIM		4 - INJURY POSSIBLE				
		#12)				L		5 - PROPERTY DAMAGE										
REFERENCE POINT			ТҮРЕ					INT	ERSECTI	ON RELA	TED							
3 <sup>1-INTERSECTION</sup> 2-MILE POST		- ALLEY - AVENUE	HW-H	IGHWAY ANE	RD - 1 SQ - 5	ROAD SQUARE	WITHIN INTERSECTION OR ON APPROACH											
└───┘ 3 - HOUSE #	- BOULEVARD	DULEVARD MP-MILEPOST ST-STREET WITHIN INTERCHA								IANGE AREA NUMBER OF APPROACHES								
DISTANCE DISTANCE CR - NUMBERED COUNTY ROUTE CR - CIRCLE OV - OVAL TE - TER FROM REFERENCE UNIT OF MEASURE TR NUMBERED TO NUMB										1			ROAI	WAY				
1 - MILES TR - NUMBERED TOWNSHIP DR - DRIVE PI - PIKE WA - WAY   2 - FEET ROUTE HE - HEIGHTS PL - PLACE																		
LOCATION OF FIRST HARMFUL EVENT MANNER OF CRASH COLLISION/IMPACT											DIRECTION OF TRAVEL MEDIAN TYPE							
		OLLISION 4 - REAR-TO-REAR						1-NORTH				1 - DIVIDED FLUSH MEDIAN ( <4 FEET )						
3 - IN MEDIAN	11-1	RAILWAY GRA	LLEY ACCESS	VEHI	MOTOR ICLESIN 6	5 - ANG	LE			2 - SOUTH 3 - EAST			2	2 - DIVIDED FLUSH MEDIAN			N	
4 - ON ROADSIDI 5 - ON GORE		SHARED USE TRAILS	PATHS OR	TRAN 2 - REAF			SWIPE, SWIPE,		ECTION DIRECTION	4-WEST				(≥4 FEET) 3 - DIVIDED, DEPRESSED MEDIAN				
6 - OUTSIDE TRA	ATTIC WAT	BIKE LANE		3 - HEAD			ER/UNK					4	- DIVIDE (ANY T		ED MEDIA	٨N		
7 - ON RAMP 14-TOLL BOOTH 8 - OFF RAMP 99-OTHER / UNKNOWN												9 - OTHER/UNKNOWN						
WORK ZONE RELATI	ED		WORK ZONE TYP	E	401119-470-40040-0-000001010	CATION OF CRASH IN WORK ZONE					CONTOUR			CONDITIONS			CE	
WORKERS PRESENT	т		ANE CLOSURE ANE SHIFT/CROSS	SOVER	1 - BEFORE THE 1ST WORK ZONE WARNING SIGN										9			
LAW ENFORCEMEN	TPRESENT L		ORK ON SHOULDE MEDIAN	ER	2 - ADVANCE WARNING AREA						1 - STRAIGHT LEVEL 1 - DRY					1 - CONCRETE		
		4 - IN	TERMITTENT OR	MOVING WORK	4 -	4 - ACTIVITY AREA						2 - STRAIGHT GRADE 2 - WET 3 - CURVE LEVEL 3 - SNOW			2 - BLACKTOP, BITUMINOUS,		OUS,	
ACTIVE SCHOOL ZOI	NE	5 - 0	THER		5 - TERMINATION AREA						4 - CURVE GRADE 4 - ICE				ASPHALT 3 - BRICK/BLOCK			
	ONDITION		a a 1-CLE	WEATHE	<b>R</b> 6 - SNOW						9 - OTHER/UNKNOWN 5 - SAND, MU OIL, GRAV			JD, DIRT, 4 - SLAG, GRAVEL,				
9 2 - DAWN/DUSK			992-CL0	UDY	7 - SEVERE CROSSWINDS						6 - WATER			(STANDING, 5 - DIRT				
3 - DARK – LIGHT 4 - DARK – ROAD	8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - FREEZING RAIN OR FREEZING DRIZZLE						7 - SLUSH			9 - OTHER/UNKNOW			1KN0WN					
5 - DARK – UNKN 9 - OTHER / UNKN		LIGHTING	5 - SLE	ET, HAIL	99 - 0THER	OTHER / UNKNOWN									UNKNOWN			
NARRATIVE						L.	1			L	1 1		I .		~	Indicate th	ha nauth	
UNIT #1 WAS PAR				ΟΓΑΤΙΟΝ Ε					_					-4	1	direction v an "N" on	with	
EAST AND WAS ST	TRUCK ON T	HE DRIVE	ER'S SIDE RE	AR CORNE	R BY AN	-			_							compass d		
UNKNOWN VEHICL		-											-					
SCENE.						_											-	
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CRASH REPORTED DA	RIVAL	DATE / T	E/TIME SCENE CLEARED DATE / TIME REPORT					RT TAKEN	I BY									
06082019	1112				TTTT	1.1	1 1			1 1		1 1	т. т. т.	_ <u> </u>	<b>X</b> P01	LICE AGE	ICY	
TOTAL TIME					D BY OFFI	CER'S	ER'S NAME*					MOTORIST						
								CO	LLINS, JASON CHECKED BY OFFICER'S BADGE NUMBER*						RECTION OR	ADDITION		
									CHECKED I	BY OFF	ICER'S BAD(		-	7	TO AN	EAISTING REPORT	SENT (U ODPS)	





			DTORIST / NO	19-26805													
	UNIT #	NAME: LAST, FIRST, MIDDLE									DATE OF BIRTH AGE GEN						
	01	PARKE	D, UNOCCUPIED														
RIST	ADDRESS:	STREET, CITY, ST	ATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE												
0 T 0				-		с г г	I I	1 1									
/ NON-MOTORIS	INJURIES	INJURED I TAKEN BY	EMS AGENCY (NAME)						SAFETY EQUIPMENT USED		AIR BAG USAN	ge ejection	TRAPPED				
<b>DRIST</b>	OL STATE	OPERATOR L	ICENSE NUMBER	OFFENSE CHARGED LOCAL CODE				OFFENSE DESC	RIPTION		CITATION	NUMBER					
0 W	OL CLASS	ENDORSEMENT SELECT UP TO 2	DISTRACTED				/ DRUG SUSPECTED OL MARIJUANA		ALCOH STATUS TYPE	OHOL TEST PE VALUE STATU		DRUG TEST(S)					
1			OTHER DRUG					•[][									
		NAME: LAST, F								DATE OF BIRTH AGE GI							
	UZ	UNKNO	WN, UNKNOWN														
TORIST		STREET, CITY, ST.	ate, zip IKNOWN				CONTACT PHO	NE - INCLUDE AREA CO		1 1	1 1						
NON-MOTOR	injuries 5	INJURED TAKEN BY		INJUREDT	AKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT SEATING POSITION AIR			BAG USAGE EJECTION TRAPPED					
-	OL STATE	OPERATOR L	ICENSE NUMBER		OFFENSE CHARGED				OFFENSE DESC	RIPTION		CITATION	NUMBER				
$\Theta^{\perp}$	OL CLASS	ENDORSEMENT SELECT UP TO 2	DIS	IVER STRACTED		DHOL / DRUG SUSP	ECTED	CONDITION	ALCOH STATUS TYPE			UG TEST(S PE RESUL	) T select up to 4				
1			BY	9	$\equiv$	THER DRUG	RIJUANA	9									
	UNIT #	NAME: LAST, F	TRST, MIDDLE							D	ATE OF BIRTH		AGE	GENDER			
1 L		STREET, CITY, ST	ATF. 7IP					NE - INCLUDE AREA CO									
OTORIS	ADDILEGO.	STREET, STRI, STR	ης, επ														
M-NON	INJURIES	JRIES INJURED EMS AGENCY (NAME) TAKEN BY				AKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT			AIR BAG USA	GEEEJECTION	TRAPPED			
ORIST /	OL STATE	OPERATOR L	ICENSE NUMBER	OFFENSE CHAR			RGED LOCAL CODE		OFFENSE DESC	RIPTION			ATION NUMBER				
TOM	OL CLASS ENDORSEMENT SELECT UP TO 2		<b>RESTRICTION</b> SELECT	IVER STRACTED		DHOL / DRUG SUSPECTED		CONDITION	ALCOH STATUS TYPE		DRUG TEST(S) TUS TYPE RESULT SELECT UPT						
1	Ĩ			BY			THER DRUG				•						
		RIES	SEATING POSITION		AIR BAG		OL CLAS	s	OL RESTRIC		RIVER DISTRACT		TEST STA	TUS			
1 - FATAL 2 - SUSPECTED SERIOUS INJURY		SERIOUS INJURY	1 - FRONT – LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DE 2 - DEPLOY			1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTER 2 - CDL INTRASTAT			1 - NONE GIVEN 2 - TEST REFUSED					
3 - SUSPECTED MINOR INJURY			2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	2 EDONT DICHTCIDE			3 - CLASS C		3 - CORRECTIVE LE		ELECTRONIC COMMUNI DEVICE (TEXTING, TYP	TNC 2-1	3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE				
4 - POSSIBLE INJURY 5 - NO APPARENT INJURY			4 - SECOND – LEFT SIDE	ED BOTH FRONT / SIDE 4 - REGULAR CLASS OLICABLE (OHIO = D)				4 - FARM WAIVER 5 - EXCEPT CLASS A		DIALING) TALKING ON HANDS-FR	4 - T	4 - TEST GIVEN, RESULTS KNOWN					
INJURED TAKEN BY		TAKEN BY	(MOTORCYCLE PASSENGER) 5 - SECOND – MIDDLE 9 - DEPLOYM			WN	5 - M/C MOPED ONLY 6 - NO VALID OL		6 - EXCEPT CLASS A & CLASS B BUS	4	COMMUNICATION DEVI	CE 5-T	5 - TEST GIVEN, RESULTS UNKNOWN				
1 - NOT TRANSPORTED		ORTED	6 - SECOND - RIGHT SIDE						7 - EXCEPT TRACTO		TALKING ON HAND-HEL COMMUNICATION DEVI	CE	ALCOHOL TEST TYPE				
/TREATED AT SCENE 2 - EMS		SCENE	7 - THIRD - LEFT SIDE EJ (MOTORCYCLE SIDE CAR) 1 - NOT EJE(			IECTION OL ENDORSEMENT CTED H - HAZMAT					OTHER ACTIVITY WITH ELECTRONIC DEVICE	ΔN	1-NONE				
3 - POLICE			8 - THIRD - MIDDLE 2 - PARTIAL			LY EJECTED M - MOTORCYCLE					PASSENGER		2 - BLOOD 3 - URINE				
9 - OTHER / UNKNOWN		NOWN	10 - SLEEPER SECTION 4 - NOT APPLI						RESTRICTIONS 10 - LIMITED TO DAY		OTHER DISTRACTION INSIDE THE VEHICLE		4 - BREATH				
SAFEITEQUIPMENT			OF TRUCK CAB 11 - PASSENGER IN OTHER	TRAPPED			Q - MOTOR SCOOTER		11 - LIMITED TO EMP	LUTIMENT	YMENT 8 - OTHER DISTRACTION OUTSIDE THE VEHICLE		5 - OTHER				
	2 - SHOULDER BELT ONLY USED		ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,		R - THREE-WHEEL MC S - SCHOOL BUS	TORCYCLE	12 - LIMITED – OTHE 13 - MECHANICAL DE	EVICES 9 - OTHER / UNKNOWN			DRUG TEST TYPE 1 - NONE						
	3 - LAP BELT ONLY USED 4 - SHOULDER & LAP BELT USED		PICK-UP WITH CAP) 2 - EXTRICATED BY 12 - PASSENGER IN UNENCLOSED MECHANICAL MEANS				T - DOUBLE & TRIPLE	TRAILERS	(SPECIAL BRAKE CONTROLS, OR O	THER	CONDITION		2 - BLOOD				
5 - CHILD RESTRAINT SYSTEM -		RAINT SYSTEM -	CARGO AREA	Y - TANKER / HAZMAT			ADAPTIVE DEVI	-	1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT		3 - URINE 4 - OTHER						
6	FORWARD FACING 6 - CHILD RESTRAINT SYSTEM –		13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR	F - FEMALE			15 - MOTOR VEHICLE AIR BRAKES	SWITHOUT 3.	EMOTIONAL (E.G., DEPRE ANGRY, DISTURBED)	SSED,	DRUG TEST RESULT(S)						
REAR FACING 7 - BOOSTER SEAT			(NON-TRAILING UNIT) 15 - NON-MOTORIST			F - FEMALE M - MALE			16 - OUTSIDE MIRRO			1 - AMPHETAMINES					
8 - HELMET USED			99 - OTHER / UNKNOWN			U - OTHER / UNKNOWN			17 - PROSTHETIC AID 18 - OTHER	5	5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.			2 - BARBITURATES 3 - BENZODIAZEPINES			
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)									10- UTILI	6 -	UNDER THE INFLUENCE		4 - CANNABINOIDS				
10 - REFLECTIVE CLOTHING		CLOTHING									ALCOHOL	5 - C	5 - COCAINE				
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY										9- OTHER / UNKNOWN			6 - OPIATES / OPIOIDS 7 - OTHER				
	- OTHER / UNK	NOWN										8 - N	IEGATIVE RESU	LTS			

HSY8306 OH1M 1/19 [760-1500]