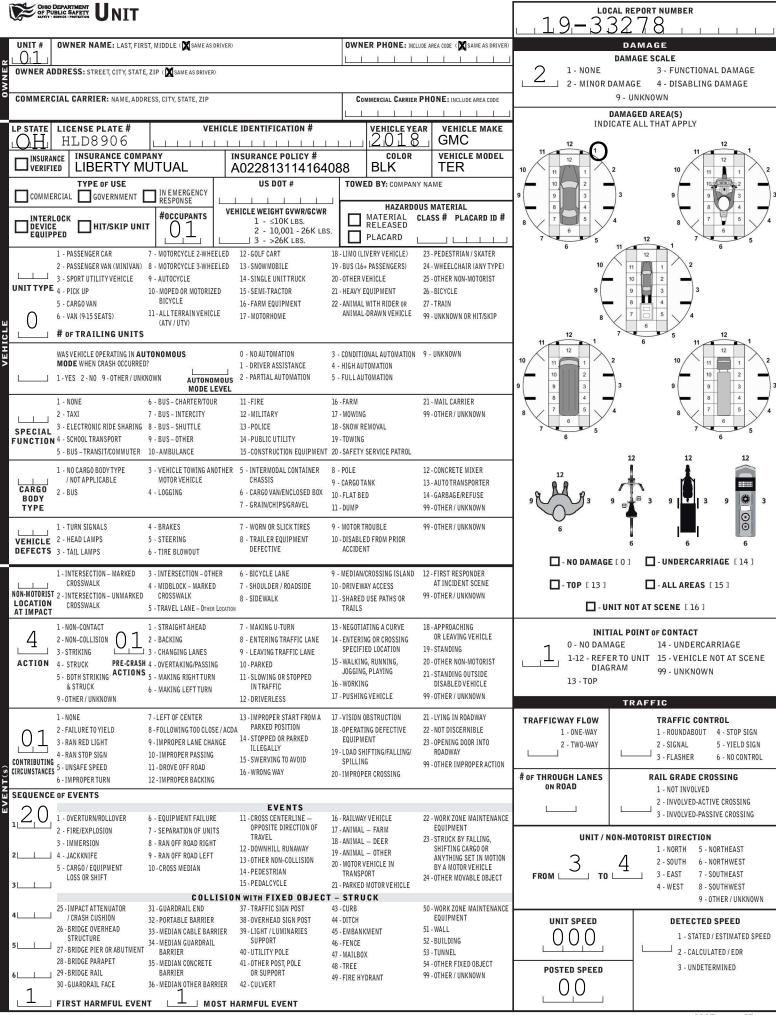
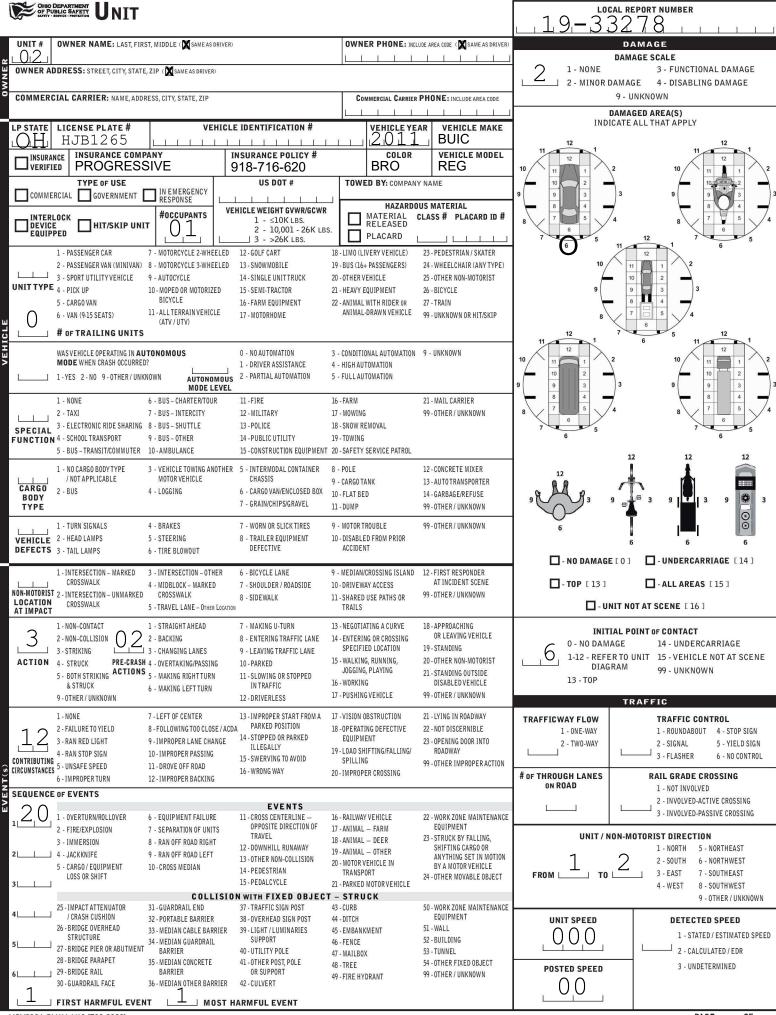
CHIO DEPARTMENT TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT										19-33278									
D PHOTOSTAKEN OH-2 OH-3 LOCAL INFORMATION												<u> </u>	1 1	T T	1		<u> </u>		
$\square \text{ Secondary Crash} \square \text{ OH-IP} \square \text{ OTHER} \text{ Reporting agency name*} \text{ NCIC*} \\ \textbf{X} \text{ PRIVATE PROPERTY} \text{ JACKSON TWP POLICE DEPARTME} \begin{array}{c} 0, 7, 6, 2, 4 \\ 0, 7, 6, 2, 4 \end{array}$										I F	HIT/SKI 1 - SOL 2 - UN	VED		2 of UNITS	0		RROR ANIMAL UNKNOWN		
COUNTY* LOCALITY* LOCATION: CITY, VILLAGE, TOWNSHIP*											CRASH DATE / TIME* CRASH SEVERITY								
$\begin{bmatrix} 1/6 \\ 2 - VILLAGE \\ 3 - TOWNSHIP \end{bmatrix}$ Jackson (Township of)											07202019 1413 2 - SERIOUS INJURY								
											LATITUDE DECIMAL DEGREES SUSPECTED 3 - MINOR INJURY								
											3 - MINOR SUSPEC								
ROUTE TYPE ROUTE NU	D, MILEPOST, HOUSE #) ROAD TYPE						LONGI	TUDE DEC	4 - INJURY POSSIBLE										
	2 - SOU 3 - EAS 4 - WE				1	I	- 5 - PROPERTY DAMAGE J L J												
REFERENCE POINT			DTYPE					I	NTERSE	CTION RE	LATED								
3 ^{1-INTERSECTION} 2-MILE POST	AL - ALLEY AV - AVENUE	HW-F	IIGHWAY .ANE		ROAD SQUARE	WITHIN INTERSECTION OR ON APPROACH													
└───┘ 3 - HOUSE #	BL - BOULEVARD	MP - N	AILEPOS	T ST - S	STREET		WITHI	NINTER	CHANGE	AREA	NUMB	ER OF AP	PROACHES						
4 - WEST SR - STATE ROUTE DE - DOCELVARO INF - MILET OFF OFF OFF OFF OFF DISTANCE FROM REFERENCE DISTANCE UNIT OF MEASURE CR - NUMBERED COUNTY ROUTE CR - CIRCLE OV - OVAL TE - TERR										ROADWAY									
1 - MILES TR - NUMBERED TOWNSHIP 2 - FEET ROUTE DR - DRIVE PI - PIKE WA - WAY ROADWAY DIVIDED																			
HE - HEIGHTS PL - PLACE																			
LOCATION OF FIRST HARMFUL EVENT MANNER OF CRASH COLLISION/IMPACT 1 - ON ROADWAY 9 - CROSSOVER 1 - NOT COLLISION 4 - REAR-TO-REAR										DIRECTION OF TRAVEL MEDIAN TYPE 1 - NORTH 1 - DIVIDED FLUSH MEDIAN									
$0.62 \cdot 00$ Shoulder 10-driveway/alley access 5 · Between 5 - Backing										1 - NORTH 2 - SOUTH				(<4 FEET)					
4 - ON ROADSID	E 12-SHAR	ED USE PA	DUCAL STORE OF CONSIDER		LINGLES IN	5 - ANG 7 - SIDI		, SAME DIR	ECTION	Ľ	3 - E. 4 - W			2 - DIVIDED FLUSH MEDIAN (≥4 FEET)					
5 - ON GORE	TRAIL AFFIC WAY 13-BIKE							, OPPOSITE	DIRECTION		3 - DIVIDED, DEPRESSED ME 4 - DIVIDED, RAISED MEDIAN								
6 - OUTSIDE TRAFFIC WAY 13 - BIKE LANE 3 - HEAD-ON 9 - OTHER / UNKNOWN 7 - ON RAMP 14 - TOLL BOOTH 8 - OEE PAMP 99 - OTHER / UNKNOWN										(ANY TYPE) 9 - OTHER/UNKNOWN									
8 - OFF RAMP	99-0THE									<u> </u>									
WORK ZONE RELAT	ED		RK ZONE TYI E CLOSURE	PE				N WORK		°	CONTOUR CONDITIONS SUF					RFACE			
WORKERS PRESEN	2	WARNING SIGN 2 - ADVANCE WARNING AREA						1 - STRAIGHT LEVEL 1 - DRY											
LAW ENFORCEMEN	IT PRESENT		K ON SHOULD EDIAN	DER	└ <u></u> 3	3 - TRANSITION AREA						2 - STRAIGHT GRADE 2 - WET				1 - CONCRETE 2 - BLACKTOP,			
ACTIVE SCHOOL ZO	INE	4 - INTE 5 - OTHE		R MOVING WO	0008/05	4 - ACTIVITY AREA 5 - TERMINATION AREA						3 - CURVE LEVEL 3 - SNOW				BITUMINOUS, ASPHALT			
	ONDITION			WEAT							4 - CURVE GRADE 4 - ICE					3 - BRICK/BLOCK			
1 - DAYLIGHT	ONDITION		1 - CL		6 - SNOW				9 - OTHER/UNKNOWN 5 - SAND, MUD, DIRT, OIL, GRAVEL						4 - SLAG, STON	GRAVEL, E			
2 - DAWN/DUSK 2 - CLOUDY 7 -							7 - SEVERE CROSSWINDS 3 - BLOWING SAND, SOIL, DIRT, SNOW						6 - WATE MOVI				R (STANDING, NG) 5 - DIRT		
4 - DARK – ROAD	9 - FREEZI	9 - FREEZING RAIN OR FREEZING DRIZZLE 99 - OTHER / UNKNOWN						7 - SLUSH				9 - OTHER/UNKNOWI							
5 - DARK – UNKI 9 - OTHER / UNK	NOWN ROADWAY LIGH NOWN	TING	5 - SL	EET, HAIL	99 - OTHER	/ UNKM	IOWN					3	9 - OTHER/UNKNOWN						
NARRATIVE		3				_ 1	Į.			1.	L	1 1	L.	1	\wedge	Indicat	te the north		
UNIT #1 WAS TRA			ARKINGI		ANT FAGLE				_			_		<		, directi	on with ' on the		
6493 STRIP AVE N	W. UNIT #2 WAS	S IN THE	PARKIN	G SPOT A	ND				_			_			\checkmark	compa	ss diagram.		
STARTED BACKIN				= .		-											-		
VEHICLES. DRIVE	er of unit #1 ai	ND UNIT	#2 DID N	OT COMP	LAIN OF	-											-		
						_											-		
GM									-				_		_				
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CRASH REPORTED D		חזכם	ATCH DATE /	TIME	AP		DATE / 1			12	ENECLI				PE	PORT TAI			
07202019	and a second		2019		0720				1		2020			668100	1000000	POLICEA			
		7 2 0 2 TOTAL	OFFICER'S			<u> </u>	Τι		<u></u> :D ву OFF]			ŤÍ	<u>r t t</u>	Тĭ		NOTORIS	г		
ROADWAY CLOSED INVESTIGATION TIME MINUTES VOVK, YURI COPF								PPO	CK, J	JASO						MENT N OR ADDITION			
0 0 33 OFFICER'S BADGE NUMBER*								1	CHECKED	BY OFF	ICER'S E	adge n 1					IN OR ADDITION EPORT SENT TO ODPS)		
						ר י		л <u> </u>	1	1	1	<u> </u>	U I	0,					





	Sound department MOTORIST / NON-MOTORIST										19 - 33278							
	UNIT #	NAME: LAST, FIRST, MIDDLE									DATE OF BIRTH AGE GEN							
	01	KEEVER, JOYCE A									04221943 76 F							
2		STREET, CITY, ST	,	CONTACT PHONE - INCLUDE AREA CODE														
0	6370 C		NOAH AVE NW CA EMS AGENCY (NAME)															
/ NON-MC		TAKEN BY	mooned		: MEDICAL FACILITY	inalit, or r	SAFETY EQUIPMENT					1						
	OL STATE	OPERATOR L	VERATOR LICENSE NUMBER				RGED	LOCAL CODE	OFFENSE DESC	RIPTION		CITATI	CITATION NUMBER					
0	OL CLASS	ENDORSEMENT SELECT UP TO 2	NT RESTRICTION SELECT UP TO 3 DR			LIVER ALCOHOL / DRUG SUSPECTED			CONDITION		YPE VALUE		DRUG TEST(S) ATUS TYPE RESULT SELECT UP TO 4					
	т	SELECTOPIO2								1 10			в в т					
-		NAME: LAST, F	FIRST, MIDDLE				3430390700018504-0000002500794		<u> </u>		DATE OF BIRTH		AGE	GENDER				
	02	2 GREATHOUSE, NANCY A								02201997 <u>22</u>								
2		SS: street, city, state, zip DELHI DR NEW FRANKLIN OH 44216									PHONE - INCLUDE AREA CO	DDE						
/ NON-MON	INJURIES	INJURED I TAKEN		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY USED					$\begin{bmatrix} \Box & \Box $									
	OL STATE	BY			OFFEN	SE CHAF	RGED	LOCAL	OFFENSE DESC									
MOTORIST	**	*******																
Z	OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		IVER Stracted		DHOL / DRUG SUSPE	E CTED RIJUANA	CONDITION		YPE VALUE		DRUG TEST(S TYPE RESULT) I select up to 4				
1						0	THER DRUG		رــــــــــــــــــــــــــــــــــــ									
	UNIT #	NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH AGE GENDER								
IST	ADDRESS:	STREET, CITY, ST	ATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE													
OTOR																		
NON-N	INJURIES	TAKEN BY				TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	Прот-со Мс не		AIR BAG U	JSAGE EJECTION	TRAPPED				
RIST /	OL STATE					OFFENSE CHARGED LOCAL OF CODE				RIPTION CITATION NUME								
MOTO	OL CLASS	ENDORSEMENT SELECT UP TO 2				B DRIVER ALCOHOL / DRUG SUSPECTED				ALC STATUS T) SELECT UP TO 4							
	1			BY			LCOHOL 🔲 MAF THER DRUG	RIJUANA				STATUS						
Ľ	INJU	RIES	SEATING POSITION		AIR BAG	L °	OL CLASS	5	OL RESTRIC	TION(S)	DRIVER DISTRACT	TION	TEST STA					
	- FATAL		1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	PLOYED 1 - CLASS A ED FRONT 2 - CLASS B				1 - ALCOHOL INTER 2 - CDL INTRASTAT				L - NONE GIVEN 2 - TEST REFUSED						
	2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY		2 - FRONT - MIDDLE	ED SIDE 3 - CLASS C				3 - CORRECTIVE LE		ELECTRONIC COMMUNI DEVICE (TEXTING, TYP	ICATION 2	3 - TEST GIVEN, CONTAMINATED						
4 - POSSIBLE INJURY			3 - FRONT – RIGHT SIDE 4 - SECOND – LEFT SIDE	YED BOTH FRONT / SIDE 4 - REGULAR CLASS (0HI0 = D)				4 - FARM WAIVER		DIALING)		SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN						
5	- NO APPAREN	TINJURY	(MOTORCYCLE PASSENGER)	PLICABLE (MINO = D) (MENT UNKNOWN 5 - M/C MOPED ONLY				5 - EXCEPT CLASS / 6 - EXCEPT CLASS /		3 - TALKING ON HANDS-FR COMMUNICATION DEVI	EE _	5 - TEST GIVEN, RESULTS						
INJURED TAKEN BY			5 - SECOND – MIDDLE 6 - SECOND – RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS		4 - TALKING ON HAND-HEL COMMUNICATION DEVI		UNKNOWN					
	1 - NOT TRANSPORTED /TREATED AT SCENE		7 - THIRD – LEFT SIDE	JECTION OL ENDORSEMENT				7 - EXCEPT TRACTO 8 - INTERMEDIATE		5 - OTHER ACTIVITY WITH	ΔN	ALCOHOL TEST TYPE 1-NONE						
	2 - EMS 3 - POLICE		(MOTORCYCLE SIDE CAR) 8 - THIRD – MIDDLE	ECTED H - HAZMAT				RESTRICTIONS		ELECTRONIC DEVICE 6 - PASSENGER		2 - BLOOD						
	- POLICE - OTHER / UNK	NOWN	9 - THIRD – RIGHT SIDE	LY EJECTED M - MOTORCYCLE EJECTED P - PASSENGER				9 - LEARNER'S PER RESTRICTIONS	11/11	7 - OTHER DISTRACTION		3 - URINE						
10 - SLEEPER SECTION OF TRUCK CAB				4 - NOT AP	PLICABLE		N - TANKER		10 - LIMITED TO DAY				4 - BREATH E 5 - OTHER					
1 - NONE LISED 11 - PASSENGER IN OTHER					RAPPED		Q - MOTOR SCOOTER R - THREE-WHEEL MO		11 - LIMITED TO EMP 12 - LIMITED – OTHE		THE VEHICLE							
2	2 - SHOULDER BELT ONLY USED ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, DISCONTRAILING UNIT, BU			1 - NOTTR	APPED		S - SCHOOL BUS	12 MECHANICAL D						DRUG TEST TYPE 1-NONE				
	- LAP BELT ON	LY USED LAP BELT USED	PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED	ATED BY NICAL MEAN	VICAL MEANS			CONTROLS, OR O	THER	CONDITION	2	2 - BLOOD						
	- CHILD REST	AINT SYSTEM -	CARGO AREA	3 - FREED	ECHANICAL MEANS				ADAPTIVE DEVI 14 - MILITARY VEHI		1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMEN	_	3 - URINE 4 - OTHER					
6	FORWARD FA - CHILD RESTF	CING RAINT SYSTEM –	13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR	10010-1011	GENDER F - FEMALE				15 - MOTOR VEHICLE AIR BRAKES	S WITHOUT	3 - EMOTIONAL (E.G., DEPRE ANGRY, DISTURBED)	SSED,	DRUG TEST RESULT(S)					
	REAR FACING		(NON-TRAILING UNIT) 15 - NON-MOTORIST	F-FEMALE M-MALE				16 - OUTSIDE MIRRO	R	4 - ILLNESS	1 - AMPHETAMINES							
	7 - BOOSTER SEAT 8 - HELMET USED		99 - OTHER / UNKNOWN	U - OTHER / UNKNOWN				17 - PROSTHETIC AIL	5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.			2 - BARBITURATES						
	9 - PROTECTIVE PADS USED								18 - OTHER		6 - UNDER THE INFLUENCE	E	3 - BENZODIAZEPINES 4 - CANNABINOIDS					
10	(ELBOW, KNEES, ETC.) 10 - REFLECTIVE CLOTHING										OF MEDICATIONS / DRU / ALCOHOL	63	5 - COCAINE					
	- LIGHTING – F / BICYCLE ON	PEDESTRIAN									9-OTHER/UNKNOWN		6 - OPIATES / OPIOIDS					
99	- OTHER / UNK											7 - OTHER 8 - NEGATIVE RESULTS						