OHIO DEPARTMENT TRAFFIC CRASH		LOCAL REPORT NUMBER*											
PHOTOSTAKEN N OH-2 N OH-3	LOCAL INFORMATION			19-36290									
SECONDARY CRASH    OH-1P   OTHER    X PRIVATE PROPERTY	REPORTING AGENCY NAME*  JACKSON TWP POL	ICE DEPA	ARTME	HIT/SKIP NUMBER OF UNITS  1 - SOLVED  1 - SOLVED									
COUNTY* LOCALITY* LOCATION: CITY	CRASH DATE / TIME*  CRASH DATE / TIME*  CRASH SEVERITY												
$\begin{bmatrix} 7.6 \end{bmatrix} \begin{bmatrix} 3 \end{bmatrix}_{3-\text{TOWNSHIP}}^{1-\text{CITY}}$ Jackson (	08082019 1350 5 1- FATAL 2- SERIOUS INJURY												
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH	ROAD TYPE	LATITUDE DECIMAL DEGREES SUSPECTED											
3 - EAST   3 - EAST   4 - WEST		RD		3 - MINOR INJURY SUSPECTED									
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	MILEPOST, HOU	ISE #)	ROAD TYPE	LONGITUDE DECIMAL DEGREES 4 - INJURY POS									
3 - EAST 4 - WEST	4725						5 - PROPERTY DAMAGE ONLY						
REFERENCE POINT DIRECTION  1 - INTERSECTION FROM REFERENCE IN INTERSECTION IN	ROUTE TYPE INTERSTATE ROUTE(TP) AL		ROAD TYPE W - HIGHWAY	RD - ROAD	INTERSECTION RELATED								
→ 2-MILE POST 2 COUTU	FEDERAL US ROUTE AV	- AVENUE LA	A - LANE	SQ - SQUARE	WITHIN INTERSECTION OR ON APPROACH								
4 - WEST SR -	STATE ROUTE CR		IP - MILEPOST V - OVAL	ST - STREET TE - TERRACE									
FROM REFERENCE UNIT OF MEASURE	NUMBERED TOWNSHIP		K - PARKWAY	TL - TRAIL	ROADWAY								
2 - FEET	ROUTE		I - PIKE L - PLACE	WA - WAY	ROADWAY DIVIDED								
LOCATION OF FIRST HARMFUL EVEN		INER OF CRASH C			DIRECTION OF TRAVEL MEDIAN TYPE								
1 - ON ROADWAY 9 - CROSSOVER 2 - ON SHOULDER 10 - DRIVEWAY/	COLLISION 4-1 WEEN 5-1	REAR-TO-REA BACKING	AR	1 - NORTH		- DIVIDED FLUSH MEDIAN ( <4 FEET )							
3 - IN MEDIAN 11 - RAILWAY G 4 - ON ROADSIDE 12 - SHARED US	RADE CROSSING L VEH	IICLES IN 6-	ANGLE SIDESWIPE	SAME DIRECTION	3 - EAST		2 - DIVIDED FLUSH MEDIAN (≥4 FEET)						
5 - ON GORE TRAILS	2 - REA	R-END 8-	SIDESWIPE,	PPOSITE DIRECTION	4 - WEST	VIDED, DEPRESSED MEDIAN VIDED, RAISED MEDIAN							
7 - ON RAMP 14-TOLL BOOTI	н	.D-UN 9-1	OTHER/UNK	NOWN	4 - DIVIDED, KAISED MEDIAI (ANY TYPE) 9 - OTHER/UNKNOWN								
8 - OFF RAMP 99-OTHER / UN							Ī						
WORK ZONE RELATED	WORK ZONE TYPE LANE CLOSURE			WORK ZONE ST WORK ZONE	CONTOUR	CONDITION	NS SURFACE						
WORKERS PRESENT 2-		VARNING SIG DVANCE WAR		1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE							
LAW ENFORCEMENT PRESENT	WORK ON SHOULDER OR MEDIAN		RANSITION A		2 - STRAIGHT GRADE		2 - BLACKTOP,						
	INTERMITTENT OR MOVING WORK OTHER	88	CTIVITY ARE. ERMINATION		3 - CURVE LEVEL	3 - SNOW	BITUMINOUS, ASPHALT						
LIGHT CONDITION	WEATH	ER			4 - CURVE GRADE 9 - OTHER/UNKNOWN	4 - ICE 5 - SAND, MUD, D	3 - BRICK/BLOCK IRT, 4 - SLAG, GRAVEL,						
1 - DAYLIGHT	1 - CLEAR 2 - CLOUDY	6 - SNOW 7 - SEVERE CF	DOCCIMINIDO		OIL, GRAVEL								
2 - DAWN/DUSK  3 - DARK – LIGHTED ROADWAY	SAND, SOIL, D	IRT, SNOW		6 - WATER (STAN MOVING)	5 - DIRT 9 - OTHER/UNKNOWN								
4 - DARK - ROADWAY NOT LIGHTED 4 - RAIN 9 - FREEZING 5 - DARK - UNKNOWN ROADWAY LIGHTING 5 - SLEET, HAIL 99 - OTHER /				EZING DRIZZLE		7 - SLUSH 9 - OTHER/UNKNO							
9 - OTHER / UNKNOWN						, omenomin							
NARRATIVE		F	1   1	1   1   1			Indicate the north						
UNIT #1 WAS TRAVELING THROUGH L FROM WEST TO EAST. UNIT #1 STATE		_					an "N" on the compass diagram.						
CAR AND STRUCK A LIGHT POLE IN LO	OT. UNIT #1 WAS DISABL	_ED AND _											
MINOR DAMAGE WAS DONE TO LIGHT POLE. NO CCTV IN LOT FOR VIDEO OF ACCIDENT.													
SEE STATEMENT / BODY WORN CAME	ERA / PHOTOS / OH 2												
GM	-												
		-											
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME		VAL DATE / TI	45.000450	SCENE CLEARED	DATE / TIME	REPORT TAKEN BY						
08082019 1351 080	82019   1351	08082	019,1	.35,9,   (	08082019	1500	X POLICE AGENCY						
TOTAL TIME OTHER TOTAL ROADWAY CLOSED INVESTIGATION TIME MINUT	The state of the s			FICER'S NAME*									
	BADER, CHRIST			SON, STEVEN  SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO GOODS  TO AN EXISTING REPORT SENT TO GOODS									
0 0 6	officer's BA	2_	- I	2 2									

OF PUBLIC SAFETY MOTORIST / NON-MOTORIST							19-36290										
0,1	NAME: LAST, FIRST, MIDDLE  MINNE, BROC ASHTON								05041998 AGE GENDER 21 M								
Address 460 S	ADDRESS: STREET, CITY, STATE, ZIP  460 STONEWOOD ST CANAL FULTON OH 44614									CONTACT PHONE - INCLUDE AREA CODE							
O ▼ INJURIES	INJURED	EMS AGENCY (NAME)				: MEDICAL FACILITY	(NAME, CITY)		DOT (		SEATING POSITION	AIR BAG U	SAGE E	EJECTION	TRAPPED		
NON /	TAKEN BY					USED 99			COMPLIANT	01	_1		_1_	_1_			
ADDRESS ADDRES					RGED	LOCAL CODE	OFFENSE DESC	RIPTION			CITATION NUMBER						
OL CLASS				IVER ALCOHOL / DRUG SUSPECTED TRACTED ALCOHOL MARIJUANA			CONDITION	STATUS TYPE VALUE			DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4						
						THER DRUG									لــالــالــا		
UNIT #	# NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH			OF BIRTH	r	1	AGE	GENDER			
ADDRESS	S: STREET, CITY, ST.	ATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE								
INJURIES	INJURED	EMS AGENCY (NAME)		INJURED	TAKENTO	· MEDICAL FACILITY	(NAME CITY)	SAFETY FOUIPMENT	NT SEATING POSITION   AIR BAG USAGE   EJECTION   TRAPPED								
ADDRESS INJURIES	TAKEN BY	TAKEN			INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUI				DOT-COMPLIANT MC HELMET			AIK BAU O	JAUL I	1	I I		
OL STATE	OPERATOR L	ATOR LICENSE NUMBER OFFENSE CHA			SE CHAF	RGED	LOCAL CODE	OFFENSE DESC	CRIPTION			CITATION NUMBER					
5	□ r r r r r		DIS	DISTRACTED				CONDITION	ALCOHOL TEST STATUS TYPE VALUE				DRUG TYPE	TEST(S) RESULT	SELECT UP TO 4		
			BY			THER DRUG	NIJUANA										
UNIT #	T # NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GE						GENDER			
ADDRESS	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE									
0108											1 1	1 1					
ADDRESS INJURIES	URIES INJURED EMS AGENCY (NAME) INJUREDT			TAKEN TO	AKENTO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED				COMPLIANT IELMET	SEATING POSITION	AIR BAG U	SAGE	EJECTION	TRAPPED			
OL STATE	OPERATOR L	DPERATOR LICENSE NUMBER OFFENSE CHAI			RGED	LOCAL CODE	OFFENSE DESC	RIPTION			CITATION NUMBER						
© OL CLASS	ENDORSEMENT SELECT UP TO 2			VER TRACTED	ACTED -		CONDITION	ALCOHOL TEST STATUS TYPE VALUE			DRUG TEST(S) STATUS TYPE RESULT SELECT UP			SELECT UP TO 4			
<b>I</b>			ВУ			LCOHOL MAF THER DRUG	RIJUANA			Secretary Secretary Sec			90000 100	200000000000000000000000000000000000000			
INJ	URIES	SEATING POSITION	<u> </u>	AIR BAG		OL CLASS	5	OL RESTRIC	TION(S)		ER DISTRACT	ION	TE	ST STA	TUS		
1 - FATAL		1 - FRONT - LEFT SIDE	1 - NOT DEF	2,000		1 - CLASS A 1 - ALCOHOL INTER			RLOCK DEVICE 1 - NOT DISTRACTED				1 - NONE GIVEN				
	D SERIOUS INJURY	(MOTORCYCLE DRIVER)  2 - FRONT – MIDDLE	2 - DEPLOY				2 - CDL INTRASTAT			2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION			2 - TEST REFUSED				
	D MINOR INJURY	3 - FRONT - RIGHT SIDE		DYED SIDE 3 - CLASS C			3 - CORRECTIVE LE	NSES	DEVICE (TEXTING, TYPING,			3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE					
4 - POSSIBLE I		4 - SECOND – LEFT SIDE	5 - NOT APF	OYED BOTH FRONT / SIDE 4 - REGULAR CLASS (OHIO = D)			4 - FARM WAIVER 5 - EXCEPT CLASS	A DIIC	DIALING)			4 - TEST GIVEN, RESULTS KNOWN					
J- NO ALLAND	(MOTORCYCLE PASSENGER)			E M/C MODED ONLY			6 - EXCEPT CLASS						ST GIVEN, RESULTS				
INJURED	TAKEN BY 5 - SECOND - MIDDLE 6 - NO VALID OL & CLASS B					& CLASS B BUS	US 4 - TALKING ON HAND-HELD UNKNOWN										
1 - NOT TRANS /TREATED/		6 - SECOND – RIGHT SIDE 7 - THIRD – LEFT SIDE	E	JECTION		OL ENDORSE	MENT	7 - EXCEPT TRACTO			MUNICATION DEVIO ER ACTIVITY WITH		ALCOP	IOL TES	T TYPE		
2 - EMS	(MOTORCYCLE SIDE CAR) 1 - NOT EJECTED				H - HAZMAT RESTRICTIONS			LICENSE FI FOFFORMS DEVICE			1 - NONE						
3 - POLICE		8 - THIRD - MIDDLE 2 - PARTIALLY EJECTED			M - MOTORCYCLE	M - MOTORCYCLE 9 - LEARNER'S PER			RMIT 6 - PASSENGER			2 - BL00D					
9 - OTHER / UN	9 - OTHER / UNKNOWN 9 - THIRD - RIGHT SIDE 3 - TOTALLY EJECTED				P - PASSENGER				7 - OTHER DISTRACTION VIIGHT ONLY INSIDE THE VEHICLE			3 - URINE 4 - BREATH					
SAFETY	SAFETY EQUIPMENT  10 - SLEEPER SECTION 0FTRUCK CAB  4 - NOT APPLICABLE			N - TANKER		10 - LIMITED TO DAY		8 - OTHER DISTRACTION OUTSIDE									
	1 - NONE USED 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA			Q - MOTOR SCOOTER  R - THREE-WHEEL MO	TORCYCLE	12 - LIMITED – OTHE		THE VEHICLE			DRUG TEST TYPE						
2 - SHOULDER	2 - SHOULDER BELT ONLY USED (NON-TRAILING UNIT, BUS, 1 - NOTTRAPPED			S - SCHOOL BUS 13 - MECHANICAL DI						,	1-NONE						
	3 - LAP BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRICATED BY  4 - CHOULDED * LAD BELT USED 12 - PASSENGER IN LINENCLOSED MECHANICAL MEA				:	T - DOUBLE & TRIPLE TRAILERS CONTROLS, OR (							2 - BL00D				
	CARGO ARFA 2 EDEED O		X - TANKER / HAZMAT			ADAPTIVE DEVICES)			1 - APPARENTLY NORMAL		3 - URINE						
				N-MECHANICAL MEANS  GENDER			14 - MILITARY VEHICLES ONLY 15 - MOTOR VEHICLES WITHOUT		2 - PHYSICAL IMPAIRMENT			4 - OTHER					
	6 - CHILD RESTRAINT SYSTEM – 14 - RIDING ON VEHICLE EXTERIOR			F-FEMALE			AIR BRAKES		<ul> <li>3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)</li> </ul>			DRUG TEST RESULT(S)					
REAR FACING (NON-TRAILING UNIT) 7 - BOOSTER SEAT 15 - NON-MOTORIST			M - MALE			16 - OUTSIDE MIRRO		4- ILLNESS			1 - AMPHETAMINES						
	7 - BOOSTER SEAT 15 - NON-MOTORIST 8 - HELMET USED 99 - OTHER / UNKNOWN			U - OTHER / UNKNOWN						5 - FELL ASLEEP, FAINTED,			2 - BARBITURATES				
9 - PROTECTIV	9 - PROTECTIVE PADS USED						18 - OTHER		FATIGUED, ETC.  6 - UNDER THE INFLUENCE			3 - BENZODIAZEPINES					
	(ELBOW, KNEES, ETC.)								OF MI	OF MEDICATIONS / DRUGS			4 - CANNABINOIDS				
	10 - REFLECTIVE CLOTHING								/ ALCOHOL 9 - OTHER / UNKNOWN			5 - COCAINE 6 - OPIATES / OPIOIDS					
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY										7- 01116	O THE OWN		- OTHER				
99 - OTHER / UN	IKNOWN													IVE RESUL	TS		

HSY8306 OH1M 1/19 [760-1500] PAGE 3 0F 3