OHIO DEPARTMENT TRAFFIC CRASH		20-42458									
PHOTOSTAKEN OH-2 OH-3	LOCAL INFORMATION										
SECONDARY CRASH OH-1P OTHER PRIVATE PROPERTY	TREPORTING AGENCY NAME* NCIC* HIT/SKIP NUMBER OF UNITS O 7 6 2 4 1 2 - UNSOLVED O 2 98 - A 99 - UNIT IN ER 1 - SOLVED 1 - SOLVED 1 - SOLVED O 2 99 - UNIT IN ER										
COUNTY* LOCALITY* LOCATION: CITY		crash date/time* crash severity 06242020 1053 5 1- FATAL									
76 3 2-VILLAGE Jackson (2 - SERIOUS INJURY										
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST	ROAD TYPE RD	LATITUDE DECIMAL DEGREES SUSPECTED 3 - MINOR INJURY									
2 4-WEST	DRESSLER REFERENCE ROAD NAME (ROAD.	MILEPOST HOUSE #1	ROAD TYPE	LONGITUDE DE	SUSPECTED 4 - INJURY POSSIBLE						
2 - SOUTH	5544	, mile 1 00 1, 110002 #/	NOAD TITE	_	COMME DEGREES	5 - PROPERTY DAMAGE					
REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD TYP	<u> </u>		INTERSECTION RELA	ONLY					
2 MILE POST 2 COUTU	AV	L - ALLEY HW - HIGHWA V - AVENUE LA - LANE	RD - ROAD SQ - SQUARE	WITHIN INTERSECTION OR ON APPROACH							
3- HOUSE # 3- EAST	STATE ROUTE BL	L - BOULEVARD MP - MILEPO	ST ST - STREET	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES							
DISTANCE DISTANCE CR -	NUMBERED COUNTY ROUTE I	R - CIRCLE OV - OVAL T - COURT PK - PARKW	TE - TERRACE AY TL - TRAIL	ROADWAY							
1 - MILES TR - 2 - FEET 3 - YARDS	ROUTE	NUMBERED TOWNSHIP DR - DRIVE PI - PIKE WA - WAY									
LOCATION OF FIRST HARMFUL EVEN		NNER OF CRASH COLLISION		DIRECTION OF TRAVEL MEDIAN TYPE							
1 - ON ROADWAY 9 - CROSSOVER 2 - ON SHOULDER 10 - DRIVEWAY/	ALLEY ACCESS 6 BET	T COLLISION 4 - REAR-TO-I TWEEN 5 - BACKING 'O MOTOR	REAR	1 - NORTH , 2 - SOUTH	ED FLUSH MEDIAN EET)						
3 - IN MEDIAN 11 - RAILWAY G 4 - ON ROADSIDE 12 - SHARED US	RADE CROSSING L VEH	HICLES IN 6 - ANGLE	E, SAME DIRECTION	3 - EAST		2 - DIVIDED FLUSH MEDIAN (≥4 FEET)					
5 - ON GORE TRAILS	2 - REA	AR-END 8 - SIDESWIF	E, OPPOSITE DIRECTION	4 - WEST	ED, DEPRESSED MEDIAN ED, RAISED MEDIAN						
7 - ON RAMP 14-TOLL BOOTI		AD-ON 9-OTHER/U	NKNOWN	(ANYTYPE) 9 - OTHER/UNKNOWN							
8 - OFF RAMP 99-OTHER/UN		L COATION OF ORACI	TH WORK ZONE	CONTOUR	CONDITIONS	SURFACE					
	WORK ZONE TYPE LANE CLOSURE		E 1ST WORK ZONE	J	CONDITIONS	JOHNAGE					
3-1	LANE SHIFT/CROSSOVER WORK ON SHOULDER	WARNING S 2 - ADVANCE W	ARNING AREA	1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE					
	OR MEDIAN INTERMITTENT OR MOVING WORK	3 - TRANSITION 4 - ACTIVITY A		2 - STRAIGHT GRADE	2 - WET 3 - SNOW	2 - BLACKTOP, BITUMINOUS,					
	OTHER	5 - TERMINATI		3 - CURVE LEVEL 4 - CURVE GRADE	ASPHALT						
LIGHT CONDITION	WEATH	HER		9 - OTHER/UNKNOWN	4 - ICE 5 - SAND, MUD, DIRT,	3 - BRICK/BLOCK 4 - SLAG, GRAVEL,					
1 - DAYLIGHT 2 - DAWN/DUSK	1 - CLEAR 2 - CLOUDY	6 - SNOW 7 - SEVERE CROSSWIND	S		OIL, GRAVEL 6 - WATER (STANDING	STONE DING, 5 - DIRT					
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	3 - FOG, SMOG, SMOKE 4 - RAIN	E 8-BLOWING SAND, SOIL 9-FREEZING RAIN OR F			MOVING) 7 - SLUSH	9 - OTHER/UNKNOWN					
5 - DARK – UNKNOWN ROADWAY LIGHTING	5 - SLEET, HAIL	99 - OTHER / UNKNOWN			ſ						
9-OTHER/UNKNOWN NARRATIVE						^ *-E-1-1111-					
UNIT #1 WAS PARKED UNOCCUPIED F	FACING EAST IN A MARK	(ED			4	Indicate the north direction with an "N" on the					
PARKING SPACE IN THE DICK'S SPOR	TING GOODS PARKING L	LOT (5544				compass diagram.					
DRESSLER RD NW). UNIT #2 WAS PAI (DRIVER SIDE OF UNIT #1-NORTH) IN A	A MARKED PARKING SPA	ACE AT				_					
DICK'S SPORTING GOODS. UNIT #2 BI PARKING SPACE TO TURN RIGHT (SO											
THE SPACE TOO TIGHT, STRIKING UN FENDER WITH HER PASSENGER SIDE	IT #1 IN THE FRONT DRIV										
		TIONS									
SEE OH3 STATEMENT/NO INJURIES R CAUSED CRASH	EFURTED/UNIT #2'S ACT	HONS				1 1-					
MD		_				 					
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE	TIME	SCENE CLEARED I	DATE / TIME	REPORT TAKEN BY					
Participation Access to the Commence of the Co	42020 1100	06242020	D WIDOUD COM	0,62,42020	NOTICE AND ADDRESS OF THE PARTY	POLICE AGENCY					
TOTAL TIME OTHER TOTAL	L OFFICER'S NAME*		CHECKED BY OFFI			MOTORIST					
ROADWAY CLOSED INVESTIGATION TIME MINUT	WCDANNOLD, L		ON, STEVEN SUPPLEMENT (CORRECTION OR ADDIT								
0 0 4	E 2 OFFICER'S BA	$\stackrel{ADGE}{1} \stackrel{NUMBER^*}{1} \stackrel{Z}{1}$	LHECKED	D BY OFFICER'S BADGE NUMBER* 1 2 2							

PAGE

OHIO DEL OF PUBLI MAZITY - SERV	SOURCE SAFETY MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST							20-42458								
UNIT #	NAME: LAST, FIRST, MIDDLE								DAT	E OF BIRTH			AGE	GENDER		
$\overline{\Omega^{T}}$	PARKED, UNOCCUPIED									1 1		1 1				
ADDRESS:	RESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE								
O INJURIES	INJURED	EMS AGENCY (NAME)		INTURED	TAKENTO	: MEDICAL FACILITY	(NAME CITY)	SAFETY FAILIPMENT		<u> </u>	SEATING POSITIO	IN ATP DA	G USAGE	EJECTION	TRAPPED	
NON	TAKEN BY	LIIIS AGENT (NAME)		INSORED	IAKLITO	. MEDIONE I NOTEIT I	(IVAMIL, CITT)	USED	□ MC H	OMPLIANT E LMET	J. I	AIK DA	1	EJECTION	INAFFED	
OL STATE	OPERATOR L	OR LICENSE NUMBER OFFENSE CHAI			RGED	LOCAL	OFFENSE DESC	RIPTION			CITA	TION N	UMBER			
ADDRESS:							CODE									
≥ OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DIS	VER TRACTED		OHOL / DRUG SUSPI		CONDITION		COHOL TYPE	TEST VALUE	STATUS		RESULT	SELECT UP TO 4	
			ВУ		=	LCOHOL MAI	RIJUANA	ļ. ,				r ·			11: 11: 1	
UNIT #	NAME: LAST,	FIRST, MIDDLE			_	<u>(1,344,300)</u> (19-4) (19-4) (19-4) (19-4) (19-4)				DAT	E OF BIRTH			AGE	GENDER	
02	WAGGONER, LAUREN C							01302001			1 1		19	F.		
ADDRESS:	STREET, CITY, ST								CONTACT	PHONE	- INCLUDE AREA	CODE				
6159		CIR NW CANAL FU	LTON						ш		1 1	1	1	<u> </u>		
6159 SINJURIES	INJURED TAKEN BY	EMS AGENCY (NAME) INJURED TAKEN TO:			: MEDICAL FACILITY	MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED ()			DOT-COMPLIANT SEATING POSITION			g usage 1	EJECTION	TRAPPED		
		ICENSE NUMBER		OFFEN:	SE CHA	RGED	LOCAL	OFFENSE DESC		LLIVILI	<u> </u>	CITA	TION N	UMBER		
OL STATE	TE OF ENATOR EIGENSE NOMBER			o_		CODE	01121102020	OFFERSE DESCRIPTION			01.7					
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED	ALC	OHOL / DRUG SUSPI	ECTED	CONDITION		COHOL TYPE	TEST VALUE	STATUS		G TEST(S	SELECT UP TO 4	
	32220101102		BY	IRACTED		LCOHOL MAI	RIJUANA		OTATOO		***************************************	OTATOO		NEODE!	32220101104	
UNIT #	NAME: LAST, I	FIRST MIDDLE				THER DRUG				● I	E OF BIRTH			AGE	GENDER	
OMI #	NAME: CASI,	i inoi, middee							ļ. ,					AGE	GENDER	
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE								
TOR										I	1 1	1	1		1	
ADDRESS:	TAKEN	EMS AGENCY (NAME)		INJURED	TAKENTO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED		OMPLIANT	SEATING POSITIO	ON AIR BA	G USAGE	EJECTION	TRAPPED	
	BY				DOED	LOCAL	OFFENSE DESC		ELMET			TION N	ILLIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	L		
OL STATE	OPERATOR L	R LICENSE NUMBER OFFENSE CHAF			KULD	CODE	OFFENSE DESC	SCRIPTION			CITA	CITATION NUMBER				
OL CLASS				DRIVER ALCOHOL / DRUG SUSPECTED CON			CONDITION	ALCOHOL TEST STATUS TYPE VALUE S			STATUS	DRUG TEST(S) TATUS TYPE RESULT SELECT UP TO 4				
	SELECT UP TO 2		BY	IKACIED			RIJUANA		SIAIOS		VALUE	STATUS	Life	KESOLI	SELECT OF TO 4	
INJU	IRIES	SEATING POSITION		IR BAG		THER DRUG OL CLAS	s	OL RESTRIC	TION(S)		ER DISTRAC	TION		TEST STA	TUS	
1 - FATAL		1 - FRONT - LEFT SIDE	1 - NOT DEP	7.00		1 - CLASS A		1 - ALCOHOL INTER			DISTRACTED			IE GIVEN		
	2 EDONT MIDDLE		2 - DEPLOYI 3 - DEPLOYI				2 - CDL INTRASTAT 3 - CORRECTIVE LE	2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION			2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED					
	POSSIBLE INJURY 3 - FRONT - RIGHT SIDE 4 - DE			LOYED BOTH FRONT / SIDE 4 - REGULAR CLASS			4 - FARM WAIVER			DEVICE (TEXTING, TYPING, DIALING)		SAMPLE / UNUSABLE				
5 - NO APPAREN	IT INJURY	4 - SECOND – LEFT SIDE (MOTORCYCLE PASSENGER)	5 - NOT APP	E M/C MODED ONLY				5 - EXCEPT CLASS A BUS 6 - EXCEPT CLASS A		3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE		4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS				
	INJURED TAKEN BY 5- SECOND - MIDDLE			WENT UNKNO	6 - NO VALID OL & CLASS B BUS			4 - TALKING ON HAND-HELD			LD	UNKNOWN				
1 - NOT TRANSP /TREATED A	ED AT SCENE 7-THIRD – LEFT SIDE		LECTION OF ENDORGEMENT			7 - EXCEPT TRACTO 8 - INTERMEDIATE	E LICENSE 5 - OTHER ACTIVITY WITH A				ALCOHOL TEST TYPE					
2 - EMS	(MOTORCYCLE SIDE CAR) 1 - NOT EJECTED 8 - THIRD - MIDDLE 2 - DARTIALLY EJECTED			H - HAZMAT RESTRICTIONS M - MOTORCYCLE 9 - LEARNER'S PEI							1 - NONE 2 - BLOOD					
3 - POLICE 9 - OTHER / UNK	KNOWN 9-THIRD-RIGHT SIDE 3-TOTALLY EJECTED		P - PASSENGER RESTRICTIONS		7 - OTHER DISTRACTION			3 - URINE								
SAFETY E	10 - SLEEPER SECTION 4 - NOT APPLICABLE OF TRUCK CAB			N - TANKER 10 - LIMITED TO DA		0. 071150 01070 1071011 01			4 - BREATH JTSIDE 5 - OTHER							
1 - NONE USED	ONE USED 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA		R-THREE-WHEEL MOTORCYCLE 12-LIMITED - OTHI		THE VEHICLE 9 - OTHER / LINKNOWN				DRUG TEST TYPE							
	- SHOULDER BELT ONLY USED (NON-TRAILING UNIT, BUS, 1 - NOTTRAPPED - LAP BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRICATED B			D BY SOURCE DOS (SPECI			(SPECIAL BRAK	PECIAL BRAKES, HAND				1 - NONE				
	CARGO ARFA			MECHANICAL MEANS FREED BY T - DOUBLE & TRIPLE TRAILERS X - TANKER / HAZMAT			CONTROLS, OR OTHER ADAPTIVE DEVICES)		CONDITION 1 - APPARENTLY NORMAL		2 - BL00D 3 - URINE					
	FORWARD FACING 13-TRAILING UNIT			VON-MECHANICAL MEANS GENDER			14 - MILITARY VEHICLES ONLY 15 - MOTOR VEHICLES WITHOUT		2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (E.G., DEPRESSED,			4 - OTHER				
	CHILD RESTRAINT SYSTEM – 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)			F-FEMALE			AIR BRAKES		ANGRY, DISTURBED)		LOJEU,	DRUG TEST RESULT(S)				
	- BOOSTER SEAT 15 - NON-MOTORIST			M - MALE U - OTHER / UNKNOWN			16 - OUTSIDE MIRROR 17 - PROSTHETIC AID		4 - ILLNESS 5 - FELL ASLEEP, FAINTED,		D,	1 - AMPHETAMINES 2 - BARBITURATES				
	8 - HELMET USED 99 - OTHER/ UNKNOWN 9 - PROTECTIVE PADS USED							18 - OTHER		FATIGUED, ETC. 6- UNDER THE INFLUENCE			3 - BENZODIAZEPINES			
	(ELBOW, KNEES, ETC.) 10 - REFLECTIVE CLOTHING								OF MEDICATIONS / DRUGS /ALCOHOL			4 - CANNABINOIDS 5 - COCAINE				
11 - LIGHTING -	1 - LIGHTING - PEDESTRIAN										9 - OTHER / UNKNOWN			6 - OPIATES / OPIOIDS		
99 - OTHER / UNK	CYCLE ONLY IER/UNKNOWN											- OTHER - NEGATIVE RESULTS				

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