OHIO DEPARTMENT TRAFFIC CRASH		LOCAL REPORT NUMBER*									
PHOTOS TAKEN OH-2 OH-3											
SECONDARY CRASH OH-1P OTHER PRIVATE PROPERTY											
COUNTY* LOCALITY* LOCATION: CITY		CRASH DATE / TIME* 07112020 1823 5 1 - FATAL									
76 3 2-VILLAGE Jackson (E LATITUDE DECIMAL DEGREES SUSPECTED										
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST	3 - MINOR INJURY										
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH	ROAD TYPE	SUSPECTED LONGITUDE DECIMAL DEGREES 4- INJURY POSSIBLE									
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	6687			<u>.</u>		5 - PROPERTY DAMAGE ONLY					
REFERENCE POINT DIRECTION FROM REFERENCE	ROUTE TYPE	ROAD TYF	E		INTERSECTION RELA	Mark Control					
3 1-INTERSECTION 1-NORTH IR -	INTERSTATE ROUTE(TP) AL FEDERAL US ROUTE AV	AY RD - ROAD SQ - SQUARE	WITHIN INTERSECTION OR ON APPROACH								
3- HOUSE # 3- EAST	STATE ROUTE BL	OST ST - STREET	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES								
FROM REFERENCE UNIT OF MEASURE	NUMBERED COUNTY ROUTE CT	- CIRCLE OV - OVAL - COURT PK - PARKV	TE - TERRACE AY TL - TRAIL	ROADWAY							
1-MILES TR- 2-FEET 	NUMBERED TOWNSHIP ROUTE PI - PIKE WA - WAY HE - HEIGHTS PL - PLACE ROADWAY DIVIDED										
LOCATION OF FIRST HARMFUL EVEN	I	INER OF CRASH COLLISIO		DIRECTION OF TRAVEL MEDIAN TYPE							
0 6 2 - ON SHOULDER 10-DRIVEWAY	ALLEY ACCESS 9 BET	COLLISION 4-REAR-TO- WEEN 5-BACKING D MOTOR	KEAK	1 - NORTH 2 - SOUTH	(<4 FE	VIDED FLUSH MEDIAN <4 FEET)					
4 - ON ROADSIDE 12-SHARED US	RADE CROSSING L VEH	HICLES IN 6 - ANGLE	PE, SAME DIRECTION	3 - EAST 4 - WEST	(≥4 FE	2 - DIVIDED FLUSH MEDIAN (≥4 FEET)					
5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	2 - REAI 3 - HEA		PE, OPPOSITE DIRECTION	3 - DIVIDED, DEPRESSED MEDIA 4 - DIVIDED, RAISED MEDIAN							
7 - ON RAMP 14-TOLL BOOT 8 - OFF RAMP 99-OTHER / UN				(ANY TYPE) 9 - OTHER/UNKNOWN							
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRAS	I IN WORK ZONE	CONTOUR	CONDITIONS	SURFACE					
WORKERS PRESENT	LANE CLOSURE LANE SHIFT/CROSSOVER	1 - BEFORE TI WARNING	E 1ST WORK ZONE SIGN			L					
T LAW ENFORCEMENT PRECENT 3-	WORK ON SHOULDER OR MEDIAN	2 - ADVANCE V	VARNING AREA N AREA	1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE					
4-	INTERMITTENT OR MOVING WORK OTHER	Table Print See See	REA	2 - STRAIGHT GRADE 3 - CURVE LEVEL	2 - WET 3 - SNOW	2 - BLACKTOP, BITUMINOUS, ASPHALT					
	1		TOWARLA	4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK					
LIGHT CONDITION 1 - DAYLIGHT	1 - CLEAR	6 - SNOW		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL	4 - SLAG, GRAVEL, STONE					
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	2 - CLOUDY 3 - FOG, SMOG, SMOKE	7 - SEVERE CROSSWIN E 8 - BLOWING SAND, SOI		SNOW 6 - WATER (STANDING, MOVING) 5 - DIR							
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING	4 - RAIN 5 - SLEET, HAIL	9 - FREEZING RAIN OR 99 - OTHER / UNKNOWN	REEZING DRIZZLE		7 - SLUSH	9 - OTHER/UNKNOWN					
9 - OTHER / UNKNOWN	3 3 5 5 5 5 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	,, , , , , , , , , , , , , , , , , , , ,			9 - OTHER/UNKNOWN						
NARRATIVE						Indicate the north direction with					
UNIT #1 WAS PARKED IN A PARKING S AVE NW) FACING NORTH. THE DRIVE					A	an "N" on the compass diagram.					
AND UNIT #1 WAS OCCUPIED BY HER UNIT #1 RETURNED TO THE VEHICLE,	SON. WHEN THE DRIVE	R OF									
LONG SCRATCHES ON HER RIGHT RE	AR FENDER. OPERATOR	R OF UNIT				_					
#1'S SON DID NOT OBSERVE THE CRA	NOTI. INU KINUWIN UNI I #2	Z IINFU.									
MD		_									
and process	DVCDATOU DATE (TVC	<u> </u>	/ / / /	COENT OF THE	DATE (TYPE	PEDOD					
Personal Commercial Co	12020 2007	ARRIVAL DATE 07112020	The Company of the Co	scene cleared	TOTAL TEL COLUMN CONTROL CONTR	REPORT TAKEN BY POLICE AGENCY					
TOTAL TIME OTHER TOTAL		<u> </u>	CHECKED BY OFF)			MOTORIST					
ROADWAY CLOSED INVESTIGATION TIME MINUT	SANDERBECK,	MCCULL	LOUGH, TIMOTHY SUPPLEMENT								
0 0 6	O 69 OFFICER'S BADGE NUMBER* 5					BY OFFICER'S BADGE NUMBER* 10 AN EXISTING REPORT SENT TO GOIPS					

OHIO DE OF PUBL MAZETI - MERO	OHIO DEPARTMENT OF PUBLIC SAFETY MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST						20-46116								
0.1	NAME: LAST, FIRST, MIDDLE , HILSON, J ELIZABETH						DATE OF BIRTH AGE GENDE 44 F								
ADDRESS	S: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE							
2906	06 SHEILA ST NW MASSILLON OH 44646								I I I	i i	Î	ï	1 1		
ADDRESS 2906 INJURIES	INJURED TAKEN BY				: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-CO		AIR BAG I	JSAGE	EJECTION	TRAPPED 1		
OL CLASS	OPERATOR L	PERATOR LICENSE NUMBER OFFENSE CHAF			RGED	LOCAL CODE	OFFENSE DESC	RIPTION	CITATION NUMBER						
OL CLASS	ENDORSEMENT				ALC	OHOL / DRUG SUSPI	LLL ECTED	CONDITION		COHOL TEST		DRUG TEST(S)			
	SELECT UP TO 2	DIST BY			ALCOHOL MARIJUANA OTHER DRUG				STATUS T	STATUS	TATUS TYPE RESULT SELECT UP TO				
UNIT #	NAME: LAST, F	: LAST, FIRST, MIDDLE								DATE OF BIRTH		T	AGE	GENDER	
02	UNKNO	WN, UNKNOWN												M	
=	STREET, CITY, ST	ATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
INJURIES		EMS AGENCY (NAME)		INJURED	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-C	SEATING POSITIO	IN AIR BAG I	JSAGE	EJECTION	TRAPPED	
NON L	TAKEN BY								MC HE		<u> </u>				
OL STATE	OPERATOR L	LICENSE NUMBER OFFENS			SE CHAI	RGED LOCAL OFFENSE DESC			RIPTION	CITATI	CITATION NUMBER				
OL CLASS	SELECT UP TO 2		DIS	IVER STRACTED	_		OL / DRUG SUSPECTED CONDITION OHOL MARIJUANA		STATUS T		DRUG TYPE	TEST(S RESULT) SELECT UP TO 4		
			BY ∟	1		THER DRUG	KIJUANA								
UNIT#	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE							
ADDRESS: STREET, CITY, STATE, ZIP CONTACT PHONE - INCLUDE AREA CODE										1					
TORI										1 1	1	1	1 1		
ADDRESS INJURIES	TAKEN	EMS AGENCY (NAME)		INJURED 1	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-C		IN AIR BAG I	JSAGE	EJECTION	TRAPPED	
	BY	BY			or ou .			MC HE	1	CITATION NUMBER					
OL STATE	UPERATUR L	R LICENSE NUMBER OFFENSE CHA			SE UNAI	KGED	CODE	OFFENSE DESC	KIPIIUN		CITATION NUMBER				
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DRIVER DISTRACT			OHOL / DRUG SUSPI	ECTED Rijuana	CONDITION		YPE VALUE		DRUG TYPE	TEST(S RESULT	SELECT UP TO 4	
				1	=	THER DRUG		ıi		•[ا لــــــــــــــــــــــــــــــــــــ]			
2500	JRIES	SEATING POSITION	200	AIR BAG		OL CLAS	s	OL RESTRIC		DRIVER DISTRACT 1 - NOT DISTRACTED			ST STA	TUS	
1 - FATAL 2 - SUSPECTED	1 - FRONT - LEFT SIDE 1 - NOT DEPLOYED (MOTORCYCLE DRIVER) 2 - DEPLOYED FROI							1 - ALCOHOL INTER 2 - CDL INTRASTAT			1 - NONE GIVEN AN 2 - TEST REFUSED				
	MINOR INJURY	2 - FRONT - MIDDLE	3 - DEPLO					3 - CORRECTIVE LENSES		ELECTRONIC COMMUNICAT		ATION 3 - TEST GIVEN, CONTAMINATED			
4 - POSSIBLE IN				(AUTO D)			4 - FARM WAIVER		DIALING)						
5 - NO APPAREN	PARENT INJURY 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 5 - NOT APPLICABLE				NAM	(OHIO = D) 5 - EXCEPT CLASS 5 - M/C MOPED ONLY 6 - EXCEPT CLASS				KEE	E TEAT ANIEN BEAUTA				
INJURED	TAKEN BY 5 - SECOND - MIDDLE 9 - DEPLOYMENT UNKNOWN			6 - NO VALID OL		& CLASS B BUS	4	LD	_D UNKNOWN						
1 - NOT TRANSF /TREATED A					OL ENDORSE	OL ENDORSEMENT 9 INTERMEDIATE						ALCOHOL TEST TYPE			
2 - EMS		(MOTORCYCLE SIDE CAR) 1 - NOT EJECTED		H - HAZMAT	0 - INTERWEDIATE			ELECTRONIC DEVICE			1 - NONE 2 - BLOOD				
3 - POLICE		8 - THIRD - MIDDLE 2 - PARTIALLY EJECTED 9 - THIRD - RIGHT SIDE 2 - TOTALLY EJECTED		M - MOTORCYCLE	DECEDICATIONS						3 - URINE				
9-OTHER/UNI	OTHER/UNKNOWN 3-ININD-RIGHT SIDE 3-TOTALLY EJECTE 10 - SLEEPER SECTION 4- NOT APPLICABLE				P - PASSENGER		10 - LIMITED TO DAY	THE THE VEHICLE			4 - BREATH				
	AFETY EQUIPMENT OFTRUCK CAB			Q - MOTOR SCOOTER		11 - LIMITED TO EM	THE VEHICLE			SIDE 5-OTHER					
1 - NONE USED	E USED ENCLOSED CARGO AREA ULDER BELT ONLY USED (NON-TRAILING UNIT, BUS, 1 - NOTTRAPPED			R - THREE-WHEEL MOTORCYCLE 12 - LIMITED - OTHI			ER 9 - OTHER / LINKNOWN			DRUG TEST TYPE					
	P BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRICATED BY			T - DOUBLE & TRIPLETRAILERS		(SPECIAL BRAKES, HAND CONTROLS, OR OTHER		CONDITION		1 - NONE 2 - BLOOD					
	CARGO ARFA 2 EDEED DV		NICAL MEANS	X - TANKER / HAZMAT			ADAPTIVE DEVICES)		1 - APPARENTLY NORMAL		3 - URINE				
	CHILD RESTRAINT SYSTEM -			ANICAL WEARS		14 - MILITARY VEHICLES ONLY 15 - MOTOR VEHICLES WITHOUT		2 - PHYSICAL IMPAIRMENT		4 - OTHER					
	RESTRAINT SYSTEM – 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				F-FEMALE		AIR BRAKES		3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)		DRUG TEST RESULT(S)				
REAR FACIN 7 - BOOSTER SE	N I AUTO I I I I I I I I I I I I I I I I I I I			M - MALE		16 - OUTSIDE MIRROR		4 - ILLNESS		1 - AMPHETAMINES					
8 - HELMET US					U - OTHER / UNKNOWN	17 - PROSTHETIC AID 18 - OTHER		5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.		2 - BARBITURATES 3 - BENZODIAZEPINES					
	- PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)									6- UNDER THE INFLUENCE OF MEDICATIONS / DRUGS		4 - CANNABINOIDS			
	LECTIVE CLOTHING								/ALCOHOL 5 - COC						
	1 - LIGHTING – PEDESTRIAN / BICYCLE ONLY									9 - OTHER / UNKNOWN	OWN 6 - OPIATES / OPIOIDS 7 - OTHER			S	
	9 - OTHER / UNKNOWN									8 - NEGATIVE RESULTS					

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