OHIO DEPARTMENT TRAFFIC CRASH	20-59058															
PHOTOSTAKEN OH-2 NOH-3	LOCAL INFORMATION		IC*													
SECONDARY CRASH OH-1P OTHER PRIVATE PROPERTY	JACKSON TWP POL	LICE DEPART	HIT/SKII 1 - SOL' L 2 - UNS	/ED	NUMBER OF	UNITS	98 - ANIM	ΛAL								
COUNTY* LOCALITY* LOCATION: CITY		CRASH DATE / TIME * CRASH SEVERITY 09212020 1135 5 1 - FATAL														
76 3 2-VILLAGE Jackson (2 - SERIOUS INJURY															
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST	AV	LATITUDE DECIMAL DEGREES SUSPECTED 3 - MINOR INJURY														
4-WEST	, MILEPOST, HOUSE #)	L R0	AD TYPE	LONGIT	UDE DECI	4 -	SUSPECTED 4 - INJURY POSSIBLE									
2 - SOUTH 3 - EAST	,,,			_ 5 - PROPERTY D.												
REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD 1		INTERSECTION RELATED												
3 1-INTERSECTION 1-NORTH IR -	ROAD SQUARE	WITHIN INTERSECTION OR ON APPROACH														
3- HOUSE # 2- SOUTH US-	STREET	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES														
FROM REFERENCE UNIT OF MEASURE	DISTANCE FROM REFERENCE UNIT OF MEASURE CR - NUMBERED COUNTY ROUTE CT - COURT PK - PARKWAY TL - TRAIL								ROADWAY							
1 - MILES TR - 2 - FEET 3 - YARDS	TR - NUMBERED TOWNSHIP ROUTE DR - DRIVE PI - PIKE WA - WAY HE - HEIGHTS PL - PLACE ROADWAY DIVIDED															
LOCATION OF FIRST HARMFUL EVEN		INER OF CRASH COLLIS			DIRECTION OF TRAVEL MEDIAN TYPE											
9 - CROSSOVER 2 - ON SHOULDER 10- DRIVEWAY	COLLISION 4-REAR- TWEEN 5-BACKI 0 MOTOR	NG		1 - NO		(<4 FEET	DIVIDED FLUSH MEDIAN (<4 FEET)									
3 - IN MEDIAN 11-RAILWAY G 4 - ON ROADSIDE 12-SHARED US	HICLES IN 6 - ANGLE ANSPORT 7 - SIDES	3 - EA 4 - WE		2	2 - DIVIDED FLUSH MEDIAN (≥4 FEET)											
5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	2 - REA 3 - HEA		WIPE, OPPOSITE R / UNKNOWN	DIRECTION	3 - DIVIDED, DEPRESSED MEDIAN 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 CR	ASH IN WORK	ZONE	CONTOUR		TIONS	SURFACE	E							
1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -		1 - BEFORE THE 1ST WORK ZONE WARNING SIGN														
LAW ENFORCEMENT PRESENT	2 - ADVANO 3 - TRANSI	1 - STRAIGHT LEVEL 1 - DRY 2 - STRAIGHT GRADE 2 - WET				1 - CONCRETE 2 - BLACKTOP,										
	INTERMITTENT OR MOVING WORK OTHER	98	4 - ACTIVITY AREA 5 - TERMINATION AREA				3 - CURVE LEVEL 3 - SNOW									
LIGHT CONDITION	WEATH				4 - CURVE GRADE 4 - ICE 3 - BRICK/BLOCK 9 - OTHER/UNKNOWN 5 - SAND, MUD, DIRT, 4 - SLAC CRAVEL											
1 - DAYLIGHT	1 - CLEAR 2 - CLOUDY	6 - SNOW			9 - UTHER/UNK	3-21	ÆL	4 - SLAG, GRAVEL, STONE								
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY		SEVERE CROSSWINDS BLOWING SAND, SOIL, DIRT, SNOW				MOVING)	TANDING,	3-BIK1								
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING	9 - FREEZING RAIN (99 - OTHER / UNKNO		DRIZZLE			- SLUSH - OTHER/U	NKNOWN	9 - OTHER/UNKNOWN								
9 - OTHER / UNKNOWN	5 - SLEET, HAIL						- 011121701	VICTO VIV								
NARRATIVE		- '	1 1 1		1 1		1 ,		Indicate the direction wit	th						
UNIT #1 WAS BACKING FROM A MARK ESTABLISHED OWNERSHIP AND RIGH		D HAD							an "N" on th compass dia							
THOROUGHFARE. UNIT #2 WAS TURN THOROUGHFARE AND DID NOT YIELD		1 STRUCK								-						
UNIT #2. NEITHER DRIVER COMPLAIN VIDEO CONFIRMED UNIT #2 AT FAULT	IED OF INJURY. A REVIE															
MD		-								_						
- IVIL		-								7-						
		-								-						
									-							
									-							
									_							
									-							
										-						
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DA	TE/TIME	\Box	SCENE CLE	ARED DA	TE/TIME	RI	EPORT TAKEN E	BY						
Participation Audient Control	12020 1136	0921202		2, 10	92120		121		POLICE AGENC							
TOTAL TIME OTHER TOTA ROADWAY CLOSED INVESTIGATION TIME MINIT	The state of the s	200		FICER'S NAME*												
	RISHER, KTAN		A, JOSH BY OFFICER'S BADGE NUMBER* SUPPLEMENT (CORRECTION OR ADDITION TO MUSTAME REPORT SET TO GOOPS)													
	e 3		1,2,4,													

/ CRASH CUSHION 38 - OVERHEAD SIGN POST EQUIPMENT 32 - PORTABLE BARRIER 44 - DITCH UNIT SPEED DETECTED SPEED 26 - BRIDGE OVERHEAD 51 - WALL 33 - MEDIAN CABLE BARRIER 39 - LIGHT / LUMINARIES 45 - EMBANKMENT 1 - STATED / ESTIMATED SPEED STRUCTURE SUPPORT 52 - BUILDING 34 - MEDIAN GUARDRAIL 46 - FENCE 27 - BRIDGE PIER OR ABUTMENT 40 - UTILITY POLE 2 - CALCULATED / EDR BARRIER 53 - TUNNEL 47 - MAILBOX 28 - BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 54 - OTHER FIXED OBJECT 48 - TRFF 3 - UNDETERMINED POSTED SPEED 29 - BRIDGE RAIL BARRIER OR SUPPORT 99 - OTHER / UNKNOWN 49 - FIRE HYDRANT 30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT **J FIRST HARMFUL EVENT** HSY8304 OH1U 1/19 [760-0820] PAGE 3 OF

OHIO DES	SONO DEPARTMENT MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST									20-59058								
UNIT # 0 1	NAME: LAST, FIRST, MIDDLE MCKAY, MARIE T								C	06141939 AGE GENDER F								
ADDRESS:	ESS: STREET, CITY, STATE, ZIP									CONTACT PHONE - INCLUDE AREA CODE								
535 SI	35 SUNSET BLVD SW NORTH CANTON OH 44720																	
INJURIES	ITES INJURED EMS AGENCY (NAME) TAKEN BY L			INJURED	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED O 4				T DOT-COMPLIANT SEATING POSITION OF THE COMPLIANT				AGE EJECTI	$\lfloor \frac{1}{2} \rfloor$				
ADDRESS: ADDRES					OFFENSE CHARGED LOCAL OFFENSE DE			SCRIP	CRIPTION				CITATION NUMBER					
OL CLASS	ENDORSEMENT SELECT UP TO 2				IVER ALCOHOL / DRUG SUSPECTED TRACTED ALCOHOL MARIJUANA			CONDITION	STA		YPE VALUE S			RUG TEST YPE RESI	(S) JLT SELECT UP TO 4			
					OTHER DRUG			L	_ _									
02	NAME: LAST, FIRST, MIDDLE MUSSER, KRISTINA VASILYEVNA								33	DATE OF B			37	GENDER F				
ADDRESS: 7699																		
7699 E INJURIES		EMS AGENCY (NAME)				: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPM	ENT _	NT DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION								
	ВУ								니	MC HELMET U			CITATION NUMBER					
OL STATE	******				CODE			OIT ENGL DI	OFFENSE DESCRIPTION						OTATION NOMBER			
OL CLASS ENDORSEMENT SELECT UP TO 2				DISTRACTED		OHOL / DRUG SUSPI LCOHOL MAI		CONDITION	STA		YPE VALU	JE S		RUG TEST YPE RESI	S) ILT SELECT UP TO 4			
UNIT #	NAMELIAST	FIRST MIDDLE	OTHER DRUG					_ _	DATE OF BIRTH AGE									
U.I.	# NAME: LAST, FIRST, MIDDLE									DATE OF BIRTH AGE GEN								
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP							co	CONTACT PHONE - INCLUDE AREA CODE									
ADDRESS:	INJURIES INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMEN						ENT	DOT-Co	SEATING	POSITION	AIR BAG US	AGE EJECTI	N TRAPPED					
OL STATE	TAKEN BY L TE OPERATOR LICENSE NUMBER			USED USED LOCAL OFFENSE				_ _	CCIPTION				N NUMBER					
OL STATE	OF EXATOR E	ATUR LICENSE NUMBER			CODE			OTT ENGL D	INSERESORITION				OTTATION NOMBER					
≥ OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		IVER STRACTED	ALCOHOL / DRUG SUS		ECTED RIJUANA	CONDITION	STA	STATUS TYPE VALUE		JE S		YPE RESI	(S) ILT SELECT UP TO 4			
				1	0.	THER DRUG								الـــا لــــــ				
****	IRIES	SEATING POSITION		AIR BAG		OL CLASS	S	OL RESTI	77.00		DRIVER DI			TEST S	TATUS			
1 - FATAL 2 - SUSPECTED	1 - FRONT - LEFT SIDE 1 - NOT DEF CCTED SERIOUS INJURY (MOTORCYCLE DRIVER) 2 - DEPLOY							1 - ALCOHOL IN 2 - CDL INTRAS		ONLY 2 - MANUALLY OPERATING								
3 - SUSPECTED	SPECTED MINOR INJURY 2 - FRONT - MIDDLE 3 - DEPLO							3 - CORRECTIV	E LENSES		ELECTRONIC COMMUNIC DEVICE (TEXTING, TYPIN			INC 3-1E31 GIVEN, CUNTAWINATED				
4 - POSSIBLE IN	4 CECOND LEFT CIDE			(0110 B)				4 - FARM WAIVER 5 - EXCEPT CLASS A BUS			DIALING)	4 -TEST CIVEN RESULTS KNOWN						
5 - NU APPAREN	(MOTORCYCLE PASSENGER) 9 - DEPLOY			/MENT UNKNOWN 5 - M/C MOPED ONLY 6 - EXCEPT CLA							3 - TALKING ON COMMUNICA		VICE 5 - TEST GIVEN, RESULTS					
INJURED 1-NOTTRANSP	4 CECOND DICHTCIDE					& CLASS B I		4 - TALKING ON HAND-HEL R-TRAILER COMMUNICATION DEVI			ICE							
/TREATED AT		CENE 7-THIRD-LEFT SIDE EJECTION				OL ENDORSEMENT 7 - EXCEPT TRACTOR				E LICENSE 5 - OTHER ACTIVITY WITH				ALCOHOL TEST TYPE				
2 - EMS 3 - POLICE		(MOTORCYCLE SIDE CAR) 1 - NOT EJECTED 8 - THIRD – MIDDLE 2 - DARTIALLY EJECTED				H - HAZMAT RESTRICTIONS M - MOTORCYCLE 9 - LEARNER'S PEI								2 - BLOOD				
9 - OTHER / UNK	0 THIRD DICHT CIDE				P - PASSENGER RESTRICTIONS				7 - OTHER DISTRACTION				3 - URINE					
SAFETY F	10 - SLEEPER SECTION 4 - NOT APPLICABL OF TRUCK CAB 4 - NOT APPLICABL			PLICABLE	BLE N - TANKER 10 - LIMITED TO					0. 071150 01070 1071011				4 - BREATH OUTSIDE 5 - OTHER				
1 - NONE USED	11 - PASSENGER IN OTHER TRADER				Q - MOTOR SCOOTER	R SCOOTER 11 - LIMITED TO EM E-WHEEL MOTORCYCLE 12 - LIMITED - OTHI			ER THE VEHICLE									
	OULDER BELT ONLY USED (NON-TRAILING UNIT, BUS, 1 - NOT TRAPPED				S - SCHOOL BUS 13 - MECHANICAL I							DRUG TEST TYPE 1-NONE						
	LAP BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRIC. SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED MECHAI		NICAL MEANS			(SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)			CONDITION			2 - BL00D						
5 - CHILD RESTI	5 - CHILD RESTRAINT SYSTEM - CARGO AREA 3 - FREED		3 - FREED NON-ME	CHANICAL MEANS			14 - MILITARY VEHICLES ONLY			1 - APPARENTLY 2 - PHYSICAL IN		3 - URINE 4 - OTHER						
	HILD RESTRAINT SYSTEM – 14 - RIDING ON VEHICLE EXTERIOR			GENDER			15 - MOTOR VEH AIR BRAKES											
REAR FACIN	REAR FACING (NON-TRAILING UNIT)			F - FEMALE M - MALE			16 - OUTSIDE MIRROR			4- ILLNESS			1 - AMPHETAMINES					
	- BOOSTER SEAT 15 - NON-MOTORIST - HELMET USED 99 - OTHER / UNKNOWN			U - OTHER / UNKNOWN				17 - PROSTHETIC AID			5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.			2 - BARBITURATES				
9 - PROTECTIVE	9 - PROTECTIVE PADS USED						18 - OTHER			6 - UNDER THE INFLUENCE			3 - BENZODIAZEPINES 4 - CANNABINOIDS					
	(ELBOW, KNEES, ETC.) - REFLECTIVE CLOTHING									OF MEDICATIONS / DRUGS /ALCOHOL			5 - COCAINE					
	1 - LIGHTING - PEDESTRIAN / BICYCLE ONLY									9 - OTHER / UNKNOWN			6 - OPIATES / OPIOIDS 7 - OTHER					
	99 - OTHER / UNKNOWN											- OTHER - NEGATIVE RE	SULTS					

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