OHIO DEPARTMENT TRAFFIC CRASH	22-44935											
PHOTOSTAKEN CON-2												
SECONDARY CRASH OH-1P OTHER PRIVATE PROPERTY	OH-1P OTHER REPORTING AGENCY NAME* NCIC* HIT/SKIP NUMBER OF UNITS UNIT IN ERROR											
COUNTY* LOCALITY* 76 3 1-CITY 2-VILLAGE 2-VILLAGE 3-TOWNSHIP Jackson (Township of) CRASH DATE / TIME* 09102022 1030 5 1-FATAL												
3-TOWNSHIP Jackson (LATITUDE DE		2 - SERIOUS INJURY SUSPECTED									
2 - SOUTH 3 - EAST	LATITUDE DE	Olimac Dedices	3 - MINOR INJURY									
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH	LONGITUDE DECIMAL DEGREES 4-INJURY POSSIBLE											
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST			5 - PROPERTY DAMAGE ONLY									
REFERENCE POINT DIRECTION		INTERSECTION RE	×									
2 MILE POST 2 COUTU	INTERSTATE ROUTE(TP) AL	RD - ROAD SQ - SQUARE	WITHIN INTE	RSECTION OR ON AF	PROACH							
3- HOUSE # 3- EAST	FEDERAL US ROUTE BL	ST - STREET	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES									
	NUMBERED COUNTY ROUTE CT	TE - TERRACE TL - TRAIL	ROADWAY									
FROM REFERENCE UNIT OF MEASURE 1 - MILES 2 - FEET ROUTE TR - NUMBERED TOWNSHIP ROUTE TR - NUMBERED TOWNSHIP ROUTE TR - PK - PARKWAY TL - TRAIL DR - DRIVE PI - PIKE WA - WAY HE - HEIGHTS PL - PLACE ROADWAY DIVIDED												
LOCATION OF FIRST HARMFUL EVEN	T MAI	NNER OF CRASH C	OLLISION/IM	PACT	DIRECTION OF TRAVE	L M	IEDIAN TYPE					
1 - ON ROADWAY 9 - CROSSOVER 2 - ON SHOULDER 10 - DRIVEWAY	ALLEY ACCESS C BET	T COLLISION 4-F TWEEN 5-E	REAR-TO-REA BACKING	R	1 - NORTH		DED FLUSH MEDIAN FEET)					
3 - IN MEDIAN 11 - RAILWAY G 4 - ON ROADSIDE 12 - SHARED US	RADE CROSSING L VEI	IIICEES IN	ANGLE SIDESWIPE, S	AME DIDECTION	2 - SOUTH 3 - EAST		2 - DIVIDED FLUSH MEDIAN (≥4 FEET)					
5 - ON GORE TRAILS	2 - REA	AR-END 8-S	SIDESWIPE, 0	PPOSITE DIRECTION	4-WEST	3 - DIVI	3 - DIVIDED, DEPRESSED MEDIAN					
7 - ON RAMP 14-TOLL BOOT	Н	AD-ON 9 - 0	THER / UNK	IOWN	4 - DIVIDED, RAISED MEDIAN (ANY TYPE)							
8 - OFF RAMP 99-OTHER / UN	KNOWN			1			ER/UNKNOWN					
WORK ZONE RELATED	WORK ZONE TYPE LANE CLOSURE		OF CRASH IN EFORE THE 19	WORK ZONE ST WORK ZONE	CONTOUR	CONDITIONS	SURFACE					
_	LANE SHIFT/CROSSOVER WORK ON SHOULDER		ARNING SIGN		1 - STRAIGHT LEVEL	1 - CONCRETE						
LAW ENFORCEMENT PRESENT	OR MEDIAN		3-TRANSITION AREA 4-ACTIVITY AREA			1 - DRY 2 - WET	2 - BLACKTOP,					
	INTERMITTENT OR MOVING WORI OTHER	9/25	ERMINATION		3 - CURVE LEVEL	3 - SNOW	BITUMINOUS, ASPHALT					
LIGHT CONDITION	WEATH	IER			4 - CURVE GRADE 4 - ICE 3 - BRICK/BLOCK 9 - OTHER/UNKNOWN 5 - SAND, MUD, DIRT, 4 - SLAC CRAVEL							
1 - DAYLIGHT 2 - DAWN/DUSK	1 - CLEAR 2 - CLOUDY	6 - SNOW 7 - SEVERE CR	OCCMINIDO		S 6 8040)A)	OIL, GRAVEL	STONE					
3 - DARK – LIGHTED ROADWAY	3 - FOG, SMOG, SMOK	E 8-BLOWING S	8 - BLOWING SAND, SOIL, DIRT, SNOW			6 - WATER (STAND) MOVING)	5 - DIRT 9 - OTHER/UNKNOWN					
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING	4 - RAIN 5 - SLEET, HAIL	9 - FREEZING RAIN OR FREEZING DRIZZLE 99 - OTHER / UNKNOWN				7 - SLUSH 9 - OTHER/UNKNOV						
9 - OTHER / UNKNOWN												
NARRATIVE		-					Indicate the north direction with					
UNIT #1 STATES THE VEHICLE WAS P. BETWEEN 1030-1120 HOURS AT 4345		_					an "N" on the compass diagram.					
STATES AN UNKONOWN VEHICLE STE SCENE WITHOUT LEAVING ANY PERS												
CONTACTED THE BUSINESS AND THE		-										
SEE STATEMENT		_					-					
U-382												
JA		=					_					
		-										
		_					1 -					
							1 -					
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIV	AL DATE / TII	ИE	SCENE CLEARED	DATE/TIME	REPORT TAKEN BY					
	02022 1147	09102		3300-30	9102022	POLICE AGENCY						
TOTAL TIME OTHER TOTAL			CHECKED BY OFFI	MOTORIST								
ROADWAY CLOSED INVESTIGATION TIME MINUT		OCK, JASON By OFFICER'S BADGE NUMBER* SUPPLEMENT CORRECTION OR ADDITI DO A SUSTING REPORT SENT OR OFFICER'S BADGE NUMBER SUPPLEMENT										
0 0 3	O O 38 OFFICER'S BADGE NUMBER* 4											

21 - PARKED MOTOR VEHICLE 8 - SOUTHWEST COLLISION WITH FIXED OBJECT - STRUCK 9 - OTHER / LINKNOWN 25 - IMPACT ATTENUATOR 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB 50 - WORK ZONE MAINTENANCE / CRASH CUSHION 38 - OVERHEAD SIGN POST EQUIPMENT 32 - PORTABLE BARRIER UNIT SPEED 44 - DITCH 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 - TREE 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**

PAGE

LOCAL REPORT NUMBER

22-44935

DAMAGE

DAMAGE SCALE

# TINU 	OWNER NAME: LAST, FIRS	ST, MIDDLE (SAME AS DRIVER , UNKNOWN	0	OWNER PHONE: INCL	UDE AREA CODE (SAME AS DRIVER)	DAMAGE DAMAGE SCALE						
1	DDRESS: STREET, CITY, STATE					DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE						
	DINEOUT OTREET, OTT I, OTRICE	, ZII I SAME AS DIEVERO				L 2 - MINOR DAMAGE 4 - DISABLING DAMAGE						
COMMERC	CIAL CARRIER: NAME, ADDR	RESS, CITY, STATE, ZIP		COMMERCIAL CARRIER	PHONE: INCLUDE AREA CODE	9 - UNKNOWN						
						DAMAGED AREA(S)						
LP STATE	LICENSE PLATE#	VEHIC	E IDENTIFICATION #	VEHICLE YE	AR VEHICLE MAKE	IND	CATE ALL THAT APPLY					
لللا						12 1	11 12 1					
INSURA VERIFI		PANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL	12	12					
VEKIFI	TYPE OF USE		US DOT #	TOWED BY: COMPAN	/ NAME	10 11 1	2 10 11 1 2					
СОММЕ		IN EMERGENCY	03 001 #	TOWED BY: COMPANY NAME		9 9 3	3 9 9 3 3					
		RESPONSE V	EHICLE WEIGHT GVWR/GCWR		US MATERIAL	8 4 -	8 4					
INTER	E X HIT/SKIP UNI	T #OCCUPANTS Y	1 - ≤10K LBS. 2 - 10,001 - 26K LBS.	MATERIAL RELEASED	CLASS # PLACARD ID #	8 7 5	4 8 7 5 4					
- EQUIP	PED		3 - >26K LBS.	PLACARD		7 6 5	12 7 6					
0.1		7 - MOTORCYCLE 2-WHEELED	12 - GOLF CART	18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	6	12					
$\cap T'$	2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE	8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE		19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE	24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST	10/	11 1 2					
UNIT TYPE	4 - PICK UP	10 - MOPED OR MOTORIZED		20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT	26 - BICYCLE	9 10 2 3 3						
	5 - CARGO VAN	BICYCLE		22 - ANIMAL WITH RIDER OR	27 - TRAIN	_	8 1 4					
\cap	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8	7 5 4					
	# OF TRAILING UNITS	3				12	7 5 12					
	WAS VEHICLE OPERATING IN AU	TONOMOUS	0 - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	11 12	6 11 12					
5	MODE WHEN CRASH OCCURRED		1 - DRIVER ASSISTANCE	4 - HIGH AUTOMATION	and a state of the	10 11 1	2 10 11 1 2					
1	1-YES 2-NO 9-OTHER/UNK	AUTUNUMUU		5 - FULL AUTOMATION		9 9 3	3 9 10 2					
	1 - NONE	MODE LEVEL 6 - BUS - CHARTER/TOUR		16 - FARM	21 - MAIL CARRIER	8 4 -	8 4 —					
6 1 1		7 - BUS - INTERCITY		17 - MOWING	99 - OTHER / UNKNOWN	8 7 5	7 5 4					
SPECIAL	3 - ELECTRONIC RIDE SHARING	8 - BUS - SHUTTLE	13 - POLICE	18 - SNOW REMOVAL		7 6 5	7 6 5					
FUNCTION	FUNCTION 4 - SCHOOL TRANSPORT 9 - BUS - OTHER			19 - TOWING		6	6					
	5 - BUS - TRANSIT/COMMUTER	10-AMBULANCE	15 - CONSTRUCTION EQUIPMENT	20 - SAFETY SERVICE PATROL			12 12 12					
	1 - NO CARGO BODYTYPE / NOT APPLICABLE	3 - VEHICLE TOWING ANOTHE MOTOR VEHICLE	01140010	8 - POLE	12 - CONCRETE MIXER	12						
CARGO 2 - BUS 4 - LOGGING 6 - CA		/ CARCOVANIENCI COER ROY	9 - CARGO TANK 10 - FLAT BED	13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE	~ M ~							
BODY Type			T CDAIN/OUTDO/CDAVE	11 - DUMP	99 - OTHER / UNKNOWN	9 () 3	9 😅 🗗 3 9 🥵 3					
19191	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN							
VEHICLE		5 - STEERING		10 - DISABLED FROM PRIOR	77-OTTER/ ONKNOWN	6						
	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT		_	_					
	1 - INTERSECTION - MARKED	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12 - FIRST RESPONDER	- NO DAMAGE	[0] - UNDERCARRIAGE [14]					
	CROSSWALK	4 - MIDBLOCK - MARKED		10 - DRIVEWAY ACCESS	AT INCIDENT SCENE	☐-TOP [13]	- ALL AREAS [15]					
NON-MOTORIST LOCATION	IN-MOTORIST 2 - INTERSECTION - UNMARKED CROSSWALK 8 - SIDE					N91	NIT NOT AT SCENE [16]					
AT IMPACT	UNUUUNAEN	5 - TRAVEL LANE - OTHER LOCATI	ON	TRAILS		IA - 01	VII NOI AI SCENE [16]					
2		1 - STRAIGHT AHEAD		13 - NEGOTIATING A CURVE	18 - APPROACHING OR LEAVING VEHICLE	INIT	IAL POINT OF CONTACT					
, 3				14 - ENTERING OR CROSSING SPECIFIED LOCATION	19 - STANDING	1 5 0-N0 DAM						
ACTION	4 - STRUCK PRE-CRASH	ICK PRE-CRASH 4 - OVERTAKING/PASSING 10 - PARKED		15 - WALKING, RUNNING,	20-OTHER NON-MOTORIST	1-12 - REFE	R TO UNIT 15 - VEHICLE NOT AT SCENE					
	5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN 11 - SLOWING OR STOP		11-SLOWING OR STOPPED	JOGGING, PLAYING 16 - WORKING	21 - STANDING OUTSIDE DISABLED VEHICLE	13 - TOP	99 - UNKNOWN					
& STRUCK 6 - MAKING LEFT TURN 9 - OTHER / UNKNOWN		IN TIMETITO	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN								
		7 LEET OF CENTER		17 VICION OPERALICATION	21 IVINC IN DOADWAY		TRAFFIC					
		7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / AC	DADKED DOCITION	17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE	TRAFFICWAY FLOW	TRAFFIC CONTROL					
		9 - IMPROPER LANE CHANGE	14 - STOPPED OR PARKED	EQUIPMENT	23 - OPENING DOOR INTO	1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN					
CONTRIBUTING	4 - RAN STOP SIGN	10-IMPROPER PASSING	ILLEGALLY 15 - SWERVING TO AVOID	19-LOAD SHIFTING/FALLING/ SPILLING	ROADWAY		3 - FLASHER 6 - NO CONTROL					
CIRCUMSTANCES	5 - UNSAFE SPEED	11 - DROVE OFF ROAD 16 - WRONG WAY		20 - IMPROPER CROSSING	99 - OTHER IMPROPER ACTION	# of THROUGH LANES	RAIL GRADE CROSSING					
SEQUENCE	6-IMPROPERTURN FOF EVENTS	12 - IMPROPER BACKING	,			ON ROAD	1 - NOT INVOLVED					
O O	ULEAEMIS						2 - INVOLVED-ACTIVE CROSSING					
			EVENTS									
		6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE —	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE		3 - INVOLVED-PASSIVE CROSSING					
	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS	11 - CROSS CENTERLINE — OPPOSITE DIRECTION OF	17 - ANIMAL — FARM	EQUIPMENT	UNIT/N	3 - INVOLVED-PASSIVE CROSSING ON-MOTORIST DIRECTION					
2	2 - FIRE/EXPLOSION 3 - IMMERSION	7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	11 - CROSS CENTERLINE — OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY		EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR	UNIT / N						
	2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE	7 - SEPARATION OF UNITS	11 - CROSS CENTERLINE — OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION	17 - ANIMAL — FARM 18 - ANIMAL — DEER 19 - ANIMAL — OTHER 20 - MOTOR VEHICLE IN	EQUIPMENT 23 - STRUCK BY FALLING,		ON-MOTORIST DIRECTION 1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST					
2 3	2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE	7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	11 - CROSS CENTERLINE — OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN	17 - ANIMAL — FARM 18 - ANIMAL — DEER 19 - ANIMAL — OTHER	EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION	UNIT/N	ON-MOTORIST DIRECTION 1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST					
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Q	OHIO DEI	OHIO DEPARTMENT MOTORIST / NON-MOTORIST / NON-MOTORIST								22-44935						1 1 1	
	UNIT #	NAME: LAST, FIRST, MIDDLE														GENDER	
	0.1	PARKED, UNOCCUPIED															
FORIS	NDDKESS:	STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE							
ω I	NJURIES		EMS AGENCY (NAME)		INJURED	TAKENTO	: MEDICAL FACILITY	(NAME, CITY)		- DOT-C	OMPLIANT	SEATING POSITI	ON AIR BA	AG USAGE	EJECTION	TRAPPED	
NO /	I	TAKEN BY							USED	Шмс н			_	1	1.1.	1	
MOTORIST / NON-MOTORIST	L STATE	OPERATOR LICENSE NUMBER OFFENSE CHA				RGED	LOCAL CODE	OFFENSE DESC	RIPTION			CITA	CITATION NUMBER				
0 Z	L CLASS	ENDORSEMENT SELECT UP TO 2	JPT02 DISTRACTED -				OHOL / DRUG SUSPECTED CONDITION LCOHOL MARIJUANA			STATUS TYPE VALUE S			STATUS	DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4			
L						THER DRUG			•	لللا		1					
	# TINU	NAME: LAST,	771-4-04-25-4-7-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-							DATE OF BIRTH					AGE	GENDER	
1	U Z		WN, UNKNOWN														
/ NON-MOTORIST	ADDRESS:	STREET, CITY, ST	FATE, ZIP							CONTAC	T PHONE	- INCLUDE AREA	CODE	1	1 1	1	
NON-M	NJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED	TAKENTO	S MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET		ON AIR B	AIR BAG USAGE EJECT		TRAPPED		
	L STATE	OPERATOR L	OPERATOR LICENSE NUMBER			SE CHA	RGED	LOCAL CODE	OFFENSE DESC	RIPTION			CITA	CITATION NUMBER			
0 ¥ 0	L CLASS ENDORSEMENT SELECT UPTO 2 RESTRICTION SELECT UPTO 3 DRIVER BY		VER TRACTED		ALCOHOL / DRUG SUSPECTED CONDIT				COHOL TYPE	TEST VALUE	STATUS		G TEST(S E RESUL) Γ select up to 4			
L						0	THER DRUG							1	عالـــا إلــــ		
١,	UNIT#	NAME: LAST,	FIRST, MIDDLE							DATE OF BIRTH				r F	AGE	GENDER	
RIST	ADDRESS: STREET, CITY, STATE, ZIP									CONTACT	T PHONE	- INCLUDE AREA	CODE			1	
D T	NJURIES	INJURED	EMS AGENCY (NAME)		INJURED	TAKENTO	: MEDICAL FACILITY	(NAME CITY)	SAFFTY FOUIDMENT			SEATING POSITI	ON ATP R	AC IISACE	E EJECTION	TRAPPED	
/ NON-MOTORIST		TAKEN BY				TAKLITT	. WEDICAL FACILITY	(IVAMIL) OTTI	USED		OMPLIANT ELMET	LL		nu USAUI		L	
	L STATE	OPERATOR L	PERATOR LICENSE NUMBER OFFENSE CHAR			RGED	LOCAL CODE	OFFENSE DESC	RIPTION			CITA	CITATION NUMBER				
ω ₀	L CLASS	SELECT UP TO 2 DIS		RIVER ALCOHOL / DRUG SUSPECTED STRACTED ALCOHOL MARIJUANA			CONDITION	STATUS TYPE VALUE S		STATUS	DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4						
ı	I			BY	ī		THER DRUG	MIDUANA					ŭ	1 1	عات ا		
		RIES	SEATING POSITION		AIR BAG		OL CLAS	s	OL RESTRIC		DRI	VER DISTRAC	CTION		TEST STA		
	FATAL SUSPECTED	SERIOUS INJURY	1 - FRONT – LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEF 2 - DEPLOY			1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTERI 2 - CDL INTRASTATE			T DISTRACTED INUALLY OPERATI	NG AN	1 - NONE GIVEN GAN 2 - TEST REFUSED			
		MINOR INJURY	2 - FRONT – MIDDLE	3 - DEPLOY			3 - CLASS C		3 - CORRECTIVE LE	ELECTRONIC COMMUN		NICATION	IICATION 3 - TEST GIVEN, CONTAMINATED				
4 -	4 - POSSIBLE INJURY		3 - FRONT - RIGHT SIDE	4 - DEPLOYED BOTH FRONT / SIDE			4 - REGULAR CLASS 4 - FARM WAIVER (OHIO = D) 5 - EVERT CLASS			DIALING)			rPING,	SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN			
5 -	5 - NO APPARENT INJURY 4 - SECOND - LEFT SIDI (MOTORCYCLE PASS		(MOTORCYCLE PASSENGER)	5 - NUT APPLICABLE			5 - M/C MOPED ONLY	3 - EXCEPT CLASS			J TAERING ON TIANDOTT			REE . TEGT ON EN DEGINES			
I	INJURED TAKEN BY 5 - SECOND - MIDDLE			7- DEPLOT	6 - NO VALID OL & CLASS E					BUS 4 - TALKING ON HAND-HEI			ELD				
	1 - NOT TRANSPORTED 6 - SECOND - RIGHT SIDE /TREATED AT SCENE 7 - THIRD - LEFT SIDE			E.	7 - EXCEPT TRA EJECTION OL ENDORSEMENT 8 - INTERMEDIA									ALCOHOL TEST TYPE			
	2 - EMS (MOTORCYCLE SIDE CAR)			1 - NOT EJECTED H - HAZMAT				RESTRICTIONS	ELECTRONIC DEVICE			1 - NONE 2 - BLOOD					
	Q THIRD DICHT SIDE							9 - LEARNER'S PERMIT RESTRICTIONS		6 - PASSENGER 7 - OTHER DISTRACTION			3 - URINE				
9-	7-UTHER/UNKNOWN 3-10				3 - TOTALLY EJECTED P - PASSENGER 4 - NOT APPLICABLE N - TANKER ¹			10 - LIMITED TO DAYLIGHT ONLY		INSIDE THE VEHICLE			4 - BREATH				
	SAFETY EQUIPMENT OF TRUCK CAB			Q - MOTOR SCOOTER 11 - LIMITED T				MITED TO EMPLOYMENT 8 - OTHER DISTRACTION O			OUTSIDE	OUTSIDE 5-OTHER					
	ENCLOSED CARGO AREA			1 - NOTTRA	DADDED 13 MECHANICA			12 - LIMITED - OTHE 13 - MECHANICAL DI	9 - OTHER / LINKNOWN				DRUG TEST TYPE				
	tion that the daily body		2 - EXTRICATED BY T - DOUBLE & TRIPLE TRAILERS			(SPECIAL BRAKES, HAND CONTROLS, OR OTHER		CONDITION		1 - NONE 2 - BLOOD							
	1 OHOOLDER & EAR DEEL OOLD		12 - PASSENGER IN UNENCLOSED CARGO AREA	MECHANICAL MEANS 3 - FREED BY			X - TANKER / HAZMAT ADAP		ADAPTIVE DEVICES)		1 - APPARENTLY NORMAL			3 - URINE			
	5 - CHILD RESTRAINT SYSTEM - FORWARD FACING 13		13 - TRAILING UNIT	NON-MECHANICAL MEANS			ARMARA		14 - MILITARY VEHICLES ONLY 15 - MOTOR VEHICLES WITHOUT		2 - PHYSICAL IMPAIRMENT			4 - OTHER			
0.70	6 - CHILD RESTRAINT SYSTEM - 14 - RIDING ON VEHICLE EXTER		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	OR .					AIR BRAKES	AIR BRAKES		3 - EMOTIONAL (E.G., DEPRESSI ANGRY, DISTURBED)		DRUG TEST RESULT(S)			
	REARTAGING		15 - NON-MOTORIST				M - MALE		16 - OUTSIDE MIRROR		4- ILLNESS			1 - AMPHETAMINES			
5.00	7 50001211 52111		99 - OTHER / UNKNOWN			o omen omnoun		17 - PROSTHETIC AID 18 - OTHER		5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.		D,	2 - BARBITURATES 3 - BENZODIAZEPINES				
		PADS USED EES, ETC.)									6- UNDER THE INFLUENCE OF MEDICATIONS / DRUGS			3 - BENZODIAZEPINES 4 - CANNABINOIDS			
	(ELBOW, KNEES, ETC.) 10 - REFLECTIVE CLOTHING									/ALCOHOL			5 - COCAINE				
	LIGHTING – I BICYCLE ON	PEDESTRIAN NLY								9- OTI	HER / UNKNOWN			IATES / OPIOII	OS .		
	99 - OTHER / UNKNOWN													7 - OTHER 8 - NEGATIVE RESULTS			

HSY8306 OH1M 1/19 [760-1500] PAGE 4 0F 4