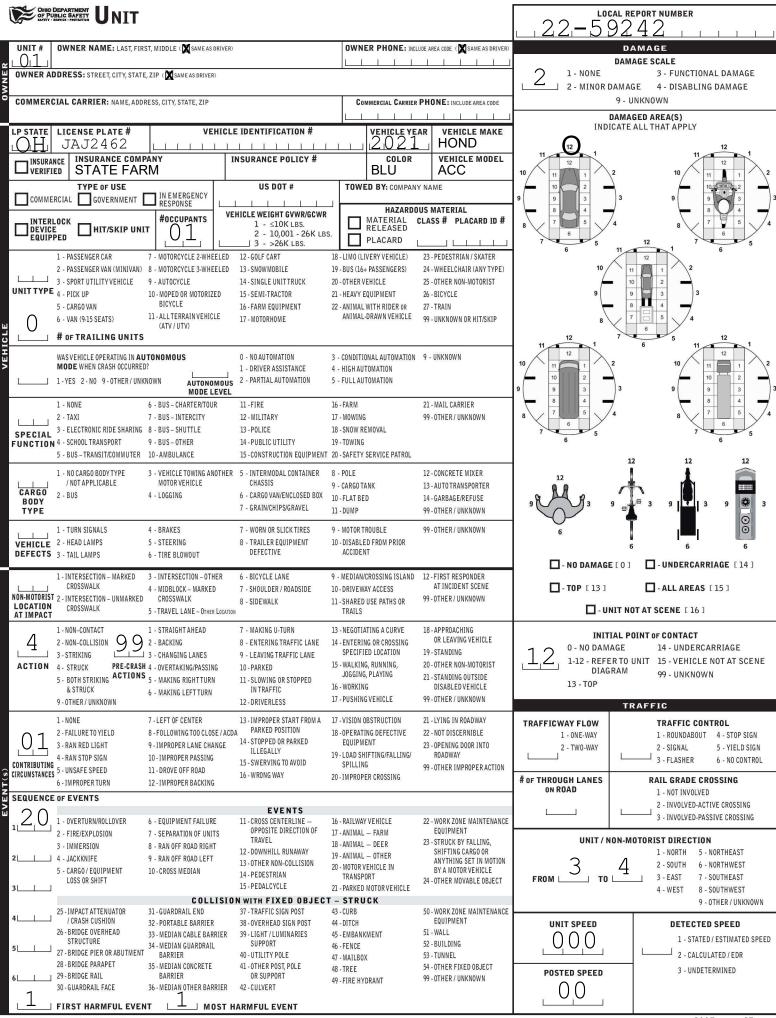
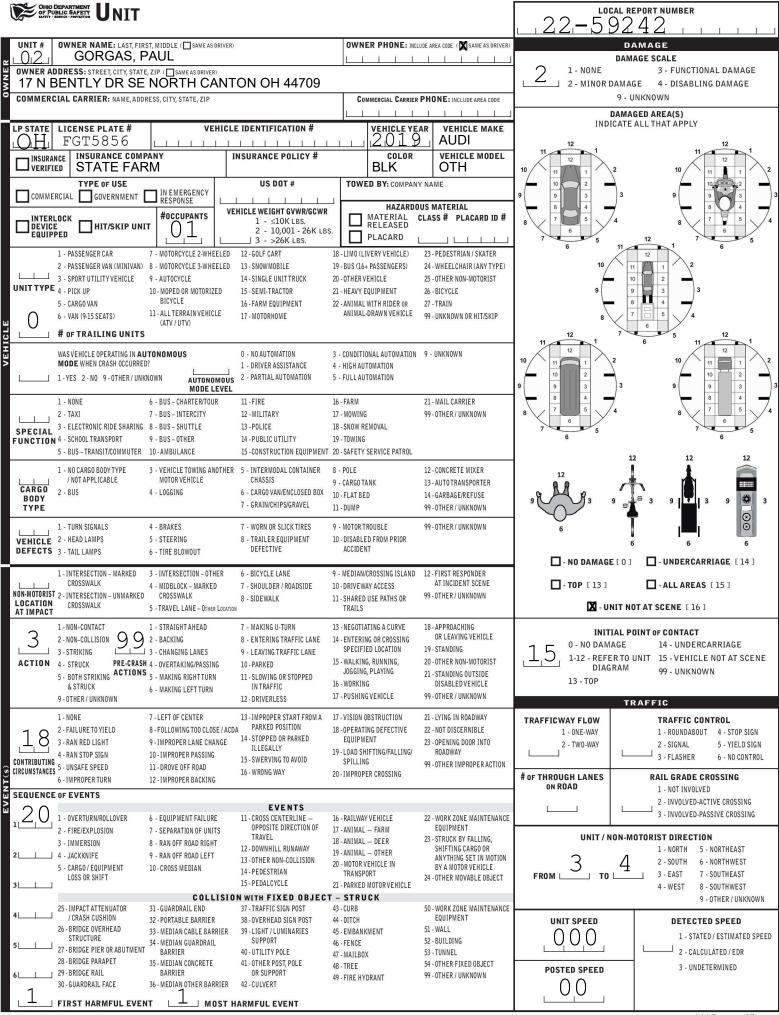
CONSIGNED DEPARTMENT TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT										LOCAL REPORT NUMBER* 22 - 59242									
PHOTOS TAKEN																1 1			
SECONDARY CRASH	OH-1P OTHER REPORTING AGENCY NAME* NCIC*									1	1 - SO				0	1.	E <b>RROR</b> - ANIM - UNKN	AL	
COUNTY* LOCALITY* LOCATION: CITY, VILLAGE, TOWNSHIP*										ŀ		DATE / 1	IME*		CRAS	SH SEVE			
$76 \begin{bmatrix} 3 \\ 2 \end{bmatrix}$ VILLAGE   Jackson (Township of)											2920		093	0  5	/	FATAL			
									AD TYPE	╞──			CIMAL DEGRE	ES		SERIOUS		ł۲	
	3	- SOUTH - EAST - WEST	EVERHARD						RD						3 - MINOR INJURY SUSPECTED				
	JMBER PREFIX 1	- NORTH	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)						AD TYPE							INJURY I		3LE	
	3	- SOUTH - EAST - WEST	4922							5 - PROPERTY DA							TY DAM	√IAGE	
		ROAD	TYPE	[L															
3 <sup>1-INTERSECTION</sup> 2-MILE POST	- ALLEY	HW-HIGHWAY RD - ROAD WITHIN INTERSECTION OR ON APPRO																	
3- HOUSE #	- AVENUE - BOULEVARD	LA - LANE SQ - SQUARE										CHES							
DISTANCE	- CIRCLE	0V - 0	VAL	TE - 1	TERRACE									UNES					
FROM REFERENCE UNIT OF MEASURE 1 - MILES TR - NUMBERED TOWNSHIP DR - DRIVE PL - PIKE									FRAIL NAY		1			JADWAI		<u>.</u>			
2-FEET     ROUTE     Disconstruction     Disconstruction     ROADWAY DIVIDED       L     3-YARDS     HE - HEIGHTS     PL - PLACE     ROADWAY DIVIDED																			
LOCATION OF FIRST HARMFUL EVENT MANNER OF CRASH COLLISION/IMPACT											DIRECTION OF TRAVEL MEDIAN TYPE								
$0.6^{1-\text{ON ROADWA}}$		LISION 4 - REAR-TO-REAR 5 - BACKING											IVIDED FLUSH MEDIAN <4 FEET )						
3 - IN MEDIAN	11-	RAILWAY GR	ALLEY ACCESS ADE CROSSING		ICLES IN	MOTOR						OUTH AST	L	2 - DIV	2 - DIVIDED FLUSH MEDIAN				
4 - ON ROADSII 5 - ON GORE		SHARED USE TRAILS	. PATHS OR	TRA 2 - REA			SAME DIR OPPOSITE	ECTION DIRECTION		4 - W	EST			(≥4 FEET) 3 - DIVIDED, DEPRESSED MEDIAN					
6 - OUTSIDE TR	ALL TO WAT	BIKE LANE		3 - HEA			ER/UNI				4 - DIVIDED, RAISED MEDIA (ANY TYPE)							J	
7 - ON RAMP 14-TOLL BOOTH 8 - OFF RAMP 99-OTHER / UNKNOWN											9 - OTHER/UNKNOWN								
WORK ZONE RELA	TED		WORK ZONE TY	PE	LOCATIO	N OF C	RASH II	WORK	ZONE	0	СОNТОЦ	R	CO	NDITION	5	SURFACE		5	
WORKERS PRESEN		ANE CLOSURE 1 - BEFORE THE 1S WARNING SIGN						K ZONE	JNE				r 1			т	1		
			ANE SHIFT/CROSSOVER WARNING SGR VORK ON SHOULDER 2 - ADVANCE WAR					RNING A	REA	1 - ST	RAIGHT	LEVEL	1 - DRY	1 - DRY 1 - CONCRETE					
	NTPRESENT	R MEDIAN ITERMITTENT OR MOVING WORK 4 - ACTIVITY AREA							2 - ST	RAIGHT	GRADE	2 - WET	ET 2 - BLACKTOP, BITUMINOUS,			19			
ACTIVE SCHOOL Z	ONE		THER 5 - TERMINATION AREA							3 - CURVE LEVEL 3 - SNOW					ASPHALT		5,		
LIGHT	CONDITION			WEATHER						4 - CURVE GRADE 4 - ICE 9 - OTHER/UNKNOWN 5 - SAND, MUD,					3 - BRICK/BLOCK				
1 - DAYLIGHT			1 - CL		6 - SNOW						OIL, GRAVEL					4 - SLAG, GRAVEL, STONE			
2 - DAWN/DUSK 3 - DARK – LIGH		2 - CLOUDY 7 - SEVERE CROSSWINDS 3 - FOG, SMOG, SMOKE 8 - BLOWING SAND, SOIL, DIRT						0W				6 - WATE MOVI							
	DWAY NOT LIGHT	- NO DE CONTRACTO EN ENTRE	4 - RAIN 9 - FREEZING RAIN OR FREEZIN 5 - SLEET, HAIL 99 - OTHER / UNKNOWN						DRIZZLE				7 - SLUS		9 - OTHER/UNKNOW!			NOWN	
9 - 0THER / UNK	NOWN ROADWAY KNOWN	LIGHTING	5 - 3L	5-SLEET, MALL 99-UTHER/UNKNOWN						9 - OTHER/UNKNOWN									
NARRATIVE						_ 1	l		l	L	L	1 1	1	,		Indica	te the	north	
UNIT #1 WAS FAC				Y'S CAR W	ASH				_				_	<			ion wit " on the		
GOING THROUGH	HANICAL				_				_		~~	compa	ass diag	Jram.					
MALFUNCTION IN REPEATEDLY BUI						-												-	
REPEATEDLY BUMP UNIT #1, CAUSING VISIBLE DAMAGE TO THE GRILI OF THE VEHICLE. I DID GET UNIT #2'S DRIVER'S INFORMATION AND CALLED HER. FROGGY'S CAR WASH GAVE ME SOME OF HER																		-	
INFORMATION NE		_									_			_					
ACCIDENT. UNIT	#2 HAD NO I	DAMAGE.							_			_	_		_	_			
_GM									_							_			
		-												-					
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CRASH REPORTED		2000	ISPATCH DATE /	armonautori on	2010/00/2		DATE / T						DATE / TII			PORTTA			
11292022	1303	112	92022 .	1304	1129	202	22	1,3,1 <sub>,</sub>	8	112	292	022	13	352		POLICE		Y	
									D BY OFFI	FICER'S NAME*									
								JO							SUPPLE (CORRECTI) TO AN EXISTING	ON OR ADI	DITION T TO ODPS)		
	0	4																30000000000000000000000000000000000000	





	E OFFURIE SAFETY MOTORIST / NON-MOTORIST										22 - 59242								
UNIT #	UNIT # NAME: LAST, FIRST, MIDDLE										DATE OF BIRTH AGE GENDER								
01	HAYMOND, MATTIE LYNNE										07281992 30 F								
2	ADDRESS: STREET, CITY, STATE, ZIP 46 VICTORIA AVE NW CANTON OH 44708											CONTACT PHONE - INCLUDE AREA CODE							
												SEATING POSITION AIR BAG USAGE EJECTION TRAPPED							
NON/											OMPLIANT C				1				
	OPERATOR L	ICENSE NUMBER		OFFENSE CHARGED LOCAL O CODE					ISE DESC	CRIPTION CITATION NUM									
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	IRACTED ALCOHOL / DRUG SUSPECTED ALCOHOL MARIJUANA				CON	DITION		YPE VALUE STATUS			DRUG TEST(S) TYPE RESULT SELECT UP TO 4						
<u> </u>											•								
<u>02</u>	NAME: LAST, FIRST, MIDDLE GORGAS, ELIZABETH C										ате оf 2919			age 46	gender F				
	STREET, CITY, ST.		CONTACT PHONE - INCLUDE AREA CODE																
OW INJURIES	S INJURED EMSAGENCY (NAME) TAKEN BY				INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY E							AIR BAG USA	BAG USAGE EJECTION TRAPPED						
	OPERATOR L	ERATOR LICENSE NUMBER				OFFENSE CHARGED LOCAL CODE				RIPTION	CITAT								
OL CLASS	ENDORSEMENT SELECT UP TO 2	<b>RESTRICTION</b> SELECT	UPT03 DRI DIST BY	/ER (racted		DHOL / DRUG SUSPE	CTED Rijuana	CON	DITION		COHOL TEST			RUG TEST(S PE RESUL	) T select up to 4				
	டாட		цL		0	THER DRUG		L	]	L	•								
UNIT #	NAME: LAST, FIRST, MIDDLE										DATE OF BIRTH AGE GENDE								
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP										CONTACT PHONE - INCLUDE AREA CODE								
010R												1							
V INJURIES	INJURED EMS AGENCY (NAME) TAKEN BY			INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) S					EQUIPMENT	Прот-с мс ні	OMPLIANT	ING POSITION	AIR BAG USA	GE EJECTION	TRAPPED				
LS OL STATE	OPERATOR L	OFFENSE CHARGED LOCAL CODE				OFFEN	ISE DESC	RIPTION CITATION NU				NUMBER							
OL CLASS	ENDORSEMENT SELECT UP TO 2	<b>RESTRICTION</b> SELECT	RACTED ALCOHOL / DRUG SUSPECTED ALCOHOL / DRUG SUSPECTED ALCOHOL MARIJUAN/				CON	DITION		COHOL TEST		DRUG TEST(S) TYPE RESULT SELECT UP TO 4							
1 <u> </u>	டாட				0	THER DRUG		<u> </u>	]	L									
	IRIES	SEATING POSITION	10.0	IR BAG		OL CLASS	5		RESTRIC						TUS				
1 - FATAL 2 - SUSPECTED	SERIOUS INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)								LOCK DEVICE	LOCK DEVICE 1 - NOT DISTRACTED E ONLY 2 - MANUALLY OPERATING AN			1 - NONE GIVEN 2 - TEST REFUSED					
3 - SUSPECTED	MINOR INJURY	2 - FRONT - MIDDLE	3 - DEPLOYE	ED SIDE 3 - CLASS C					RECTIVE LE		ELECTROM	NIC COMMUNIC TEXTING, TYPII	CATION 3-	TEST GIVEN, COM					
4 - POSSIBLE IN	POSSIBLE INJURY 3 - FRONT – RIGHT SIDE		4 - DEPLOYED BOTH FRONT / SIDE			4 - REGULAR CLASS (OHIO = D)	4 - FAR	M WAIVER	DIALING)			SAMPLET UNUSABLE							
5 - NO APPAREN	NO APPARENT INJURY 4 - SECOND – LEFT SIDE (MOTORCYCLE PASSENGER)		5 - NOT APPLICABLE			5 - M/C MOPED ONLY		EPT CLASS			ON HANDS-FRE								
INJURED	URED TAKEN BY 5- SECOND - MIDDLE			OYMENT UNKNOWN 5 - W/C WOPED ONLY 6 - NO VALID OL					EPT CLASS / LASS B BUS	<b>Α</b>	4 - TALKING ON HAND-HELD			UNKNOWN					
1 - NOT TRANSP				EJECTION OL ENDORSEMENT					EPTTRACTO	R-TRAILER		CATION DEVIC	A	LCOHOL TE	ST TYPE				
2 - EMS	(MOTORCYCLE SIDE CAR)		1 - NOT EJE		H - HAZMAT			ERMEDIATE TRICTIONS				AN 1-	NONE						
3 - POLICE			2 - PARTIAL			M - MOTORCYCLE	9 - LEA	RNER'S PER	MIT 6 - PASSENGER				2 - BLOOD						
9-OTHER/UNK	10 SI FEDER SECTION			3 - TOTALLY EJECTED P - PASSENGER				RESTRICTIONS 10 - LIMITED TO DAY			7 - OTHER DISTRACTION INSIDE THE VEHICLE			3 - URINE 4 - BREATH					
SAFETY E	SAFETY EQUIPMENT 0F TRUCK CAB 4- NOT A			PPLICABLE N - TANKER					ITED TO DAT		OYMENT 8 - OTHER DISTRACTION OUTSIDE			5 - OTHER					
1 - NONE USED	11 DASSENCED IN OTHER					Q - MOTOR SCOOTER R - THREE-WHEEL MOTORCYCLE				R	THE VEHICLE			DRUG TEST TYPE					
2 - SHOULDER B	2 - SHOULDER BELT ONLY USED (NON-TRAILING UNIT, BUS, 1 - NOT			IOTTRAPPED S - SCHOOL BUS					CHANICAL DI				1 -	1-NONE					
	3 - LAP BELT ONLY USED     PICK-UP WITH CAP)       4 - SHOULDER & LAP BELT USED     12 - PASSENGER IN UNENCLOSED		2 - EXTRICATED BY MECHANICAL MEANS			T - DOUBLE & TRIPLE	(SPECIAL BRAKE CONTROLS, OR O ADAPTIVE DEVI(		THER CONDI		DITION	2 - BLOOD							
	RAINT SYSTEM -	CARGO AREA	Y		X - TANKER / HAZMAT	X - TANKER / HAZMAT						5 Onine							
FORWARD FA	ACING	13 - TRAILING UNIT	NON-MEC	CHANICAL MEANS GENDER					TOR VEHICLE	E THIODICAL INFAILURED									
6 - CHILD RESTI REAR FACIN	RAINT SYSTEM – G	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	F - FEMALE						ANGRY, DISTURBED)			DRUG TEST RESULT(S)							
7 - BOOSTER SE		15 - NON-MOTORIST		M - MALE					- OUTSIDE MIRROR - PROSTHETIC AID		4 - ILLNESS 5 - FFLL ASLEEP FAINTED			1 - AMPHETAMINES					
8 - HELMET USED		99 - OTHER / UNKNOWN		U - OTHER / UNKNOWN				17 - PRU 18 - OTH			5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.			2 - BARBITURATES 3 - BENZODIAZEPINES					
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)											6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS			4 - CANNABINOIDS					
10 - REFLECTIVE CLOTHING											/ ALCOHOL	2	5 - COCAINE						
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY										9- OTHER / UNKNOWN			6 - OPIATES / OPIOIDS 7 - OTHER						
99 - OTHER / UNK											7 - OTHER 8 - NEGATIVE RESULTS								
													, i i						