OHIO DEPARTMENT TRAFFIC CRASH		NDATORY FIELD FOR SUPPLEME	22-59981C							
PHOTOSTAKEN X 0H-2 X 0H-3	LOCAL INFORMATION									
SECONDARY CRASH OH-1P OTHER	REPORTING AGENCY NAME* JACKSON TWP POL	ncic* 7,6,2,4,	HIT/SKIP 1 - SOLVED 1 - SOLVED 1 - UNSOLVED 1 - UNSOLVED 1 - UNSOLVED 1 - UNSOLVED 1 - UNSOLVED							
1 7 C 1 - CITY	Y, VILLAGE, TOWNSHIP*		9	CRASH DATE / TIME * CRASH SEVERITY 12032022 2232 5 1 - FATAL						
J NORTH	(Township of)		ROAD TYPE	LATITUDE DECIMAL DEGREES 2 - SERIOUS INJURY SUSPECTED						
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	FULTON	DR	40 852145 3-MINOR INJURY SUSPECTED							
	REFERENCE ROAD NAME (ROAD,	MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DE		- INJURY POSSIBLE				
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	5350			-81, 449955 5-PROPERTY I						
REFERENCE POINT DIRECTION FROM REFERENCE 1 - NORTH IR	ROUTE TYPE - INTERSTATE ROUTE(TP) AL	ROAD TYPE - ALLEY HW- HIGHWAY R	D - ROAD		INTERSECTION RELATE					
2 MILE POST 2 COUTU	- FEDERAL US ROUTE AV	- AVENUE LA - LANE S	Q - SQUARE T - STREET							
DISTANCE DISTANCE CR	- STATE ROUTE - NUMBERED COUNTY ROUTE	- CIRCLE OV - OVAL T	E - TERRACE	THE REPORT OF THE PARTY OF THE						
FROM REFERENCE UNIT OF MEASURE 1 - MILES 2 - FEET	NUMBERER TOWNSHIP		L - TRAIL 'A - WAY	ROADWAY DIV						
	HE	- HEIGHTS PL - PLACE		KOADWAT DIV	1060					
LOCATION OF FIRST HARMFUL EVEN 1 - ON ROADWAY 9 - CROSSOVER	1 - NOT	NER OF CRASH COLLISION/IMPA(COLLISION 4-REAR-TO-REAR	T	DIRECTION OF TRAVE	9000000000000000	MEDIAN TYPE 1 - DIVIDED FLUSH MEDIAN				
1. 0. 0	TWO	WEEN 5-BACKING MOTOR 5-ANGLE ICLES IN 6-ANGLE		2 - SOUTH	(<4 FEET					
4 - ON ROADSIDE 12-SHARED U 5 - ON GORE TRAILS		NSPORT 7 - SIDESWIPE, SAME		4 - WEST (≥4 FEET)						
6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	3 - HEAI	1 10 10 10 10	5 60 60			RAISED MEDIAN				
7 - 0N RAMP 14-10LL BOOT 8 - 0FF RAMP 99-0THER / UN					9 - OTHER/UN					
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH IN WO		CONTOUR 1	CONDITIONS	SURFACE				
WORKERS PRESENT 2 -	LANE CLOSURE LANE SHIFT/CROSSOVER	1 - BEFORE THE 1ST V WARNING SIGN								
LAW ENFORCEMENT PRESENT 3-	WORK ON SHOULDER OR MEDIAN	2 - ADVANCE WARNIN 3 - TRANSITION AREA	GAREA		1 - DRY 2 - WET	1 - CONCRETE 2 - BLACKTOP,				
	INTERMITTENT OR MOVING WORK OTHER	4 - ACTIVITY AREA 5 - TERMINATION ARE	Α	3 - CURVE LEVEL	3 - SNOW	BITUMINOUS, ASPHALT				
LIGHT CONDITION	WEATHE	ER		4 - CURVE GRADE 9 - OTHER/UNKNOWN	4 - ICE 5 - SAND, MUD, DIRT,	3 - BRICK/BLOCK				
3 1-DAYLIGHT 2-DAWN/DUSK	1 - CLEAR 2 - CLOUDY	6 - SNOW 7 - SEVERE CROSSWINDS			OIL, GRAVEL 6 - WATER (STANDING,	4 - SLAG, GRAVEL, STONE				
3 - DARK - LIGHTED ROADWAY 3 - FOG, SMOG, SMOKE 8 - BLOWING SAND, SOIL, DIRT, S					5 - DIRT 9 - OTHER/UNKNOWN					
TO THE REPORT OF THE PROPERTY	4 - DARK – ROADWAY NOT LIGHTED 4 - RAIN 9 - FREEZING RAIN OR FREEZING DRI 5 - DARK – UNKNOWN ROADWAY LIGHTING 5 - SLEET, HAIL 99 - OTHER / UNKNOWN				7 - SLUSH 9 - OTHER/UNKNOWN					
9 - OTHER / UNKNOWN		1 1 1 1 1 1				990 999 In 2000 1000				
NARRATIVE UNIT #1 WAS PARKED, UNOCCUPIED,		PACE				Indicate the north direction with an "N" on the				
ON THE NORTH SIDE OF THE BUSINE	SS (5350 FULTON DR NW)	FACING ACING			1	compass diagram.				
NORTHEAST. UNIT #2 WAS BACKING MARKED PARKING SPACE ACROSS F	ROM UNIT #1. UNIT #2				- 4					
IMPROPERLY BACKED AND STRUCK REAR BUMPER. NO INJURIES REPOR		TH IT'S								
LAW #208)				
AW	Unit 2	Unit 1 Not To Sca	le							
		-								
		-	_							
	,									
	F15350									
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME		SCENE CLEARED	STATES AND DESCRIPTION OF THE	REPORT TAKEN BY				
12032022 2234 120	32022 2236	12032022 22	42 1	12032022	2334					
TOTAL TIME OTHER TOTAL ROADWAY CLOSED INVESTIGATION TIME MINUT		CER'S NAME*		MOTORIST SUPPLEMENT						
		S, JASON D BY OFFICER'S BADGE NUMBER* SUPPLEMENT (CORRECTION on ADDITION) TO AN EXEMBLE REPORT SENT TO GORPS)								
	OFFICER'S BAI	<u> 1,4,4,</u>	1	<u>, , 1,</u>	5,0,					

LP STATE LICENSE PLATE # HGL6473 INSURANCE COMPANY VERIFIED GEICO TYPE OF USE COMMERCIAL GOVERNMENT RESPONSE INTERLOCK DEVICE HIT/SKIP UNIT EQUIPPED 1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE UNIT TYPE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS) WAS VEHICLE OPERATING IN AUTONOMOUS 2 MODE WHEN CRASH OCCURRED? I 1-YES 2-NO 9-OTHER/UNKNOWN 1 - NONE $0_{1}1_{1}$ 2 - TAXI 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE SPECIAL FUNCTION 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER 1 - NO CARGO BODY TYPE 0.1 / NOT APPLICABLE CARGO 2 - BUS BODY TYPE 1 - TURN SIGNALS VEHICLE 2 - HEAD LAMPS **DEFECTS** 3 - TAIL LAMPS 1 - INTERSECTION - MARKED CROSSWALK NON-MOTORIST 2 - INTERSECTION - UNMARKED LOCATION CROSSWALK 1 - NON-CONTACT 4 2 - NON-COLLISION 3-STRIKING 3 - CHANGING LANES ACTION 4 - STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN & STRUCK 9 - OTHER / UNKNOWN 1-NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN CONTRIBUTING CIRCUMSTANCES 5 - UNSAFE SPEED 6 - IMPROPER TIIRN SEQUENCE OF EVENTS 1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION J 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT 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 - 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** PAGE

24 - OTHER MOVABLE OBJECT 15 - PEDALCYCLE 21 - PARKED MOTOR VEHICLE 4 - WEST 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 UNIT SPEED 32 - PORTABLE BARRIER 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 2 - CALCULATED / EDR BARRIER 40 - UTILITY POLE 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 DEPARTMENT OF PUBLIC SAFETY MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST					22-59981C												
UNIT #									DAT	E OF BIRTH			AGE	GENDER			
0^{T}	PARKED, UNOCCUPIED							N						_N			
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE											
5 ▼ INJURIES	INJURED	EMS AGENCY (NAME)		INJURED	TAKENTO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT			SEATING POSITION	N AIR BA	G USAGE	EJECTION	TRAPPED		
5	TAKEN BY			100000000000000000000000000000000000000			DENOTE OF THE STATE OF THE STAT	USED 99		OMPLIANT ELMET	15		1	11	1		
OL STATE	OPERATOR L	ICENSE NUMBER		OFFEN	SE CHA	RGED	LOCAL CODE	OFFENSE DESC	RIPTION			CITA	TION N	IUMBER	h		
INJURIES OL STATE																	
0L 0LA33	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED		OHOL / DRUG SUSPI		CONDITION		TYPE TYPE	TEST VALUE	STATUS	TYPE	G TEST(S RESULT	SELECT UP TO 4		
4			".	1	=	THER DRUG	HOUAITA	<u> </u>									
UNIT #	NAME: LAST, F	315-0-04.1.3-10.3-10.3-10.10.10.10.10.10.10.10.10.10.10.10.10.1							0.4		E OF BIRTH			AGE	GENDER		
\cup		ESS, MAKAYLA E							042	461	99,9		_ _	23	F		
ADDRESS:	STREET, CITY, ST	TATE, ZIP MAGNOLIA OH 4	1612						CONTACT	T PHONE	- INCLUDE AREA	CODE					
5		EMS AGENCY (NAME)	+043	TIN HIDEN	TAKENTO	: MEDICAL FACILITY	(NAME CITY)	SAFETY EQUIPMENT			SEATING POSITION	N ATD DA	CHEVCE	EJECTION	TRAPPED		
5	TAKEN BY	EMS AGENOT (NAME)		INSUKED	IAKLIVIO	. MEDICAL PACIEIT	(NAME, CITT)	USED 99		OMPLIANT ELMET	01	AIR DA	1 03405	1 1	1 1		
OL STATE	OPERATOR L	ICENSE NUMBER		OFFEN:	SE CHA	RGED	LOCAL	OFFENSE DESC	RIPTION	Λ Γ:		CITA	TION N	IUMBER]		
	* * *******			4510.16A CODE Operating			Operating	Under .	A FIN	anciai	11	1192796					
OL OLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DIS	VER TRACTED		OHOL / DRUG SUSPI		CONDITION		TYPE	TEST VALUE	STATUS		G TEST(S RESULT) Γselect up to 4		
6			BY	9		LCOHOL MAI	RIJUANA	ļ I ,	 	1		, I	<u> </u>	111 11	п п т		
UNIT #							DATE OF BIRTH AGE GEN					GENDER					
										1 1	1 1	1 1	_				
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP						CONTACT	T PHONE	- INCLUDE AREA	CODE							
O THUMBYER	I	-MC 405NOV		T		MERICAL FACTORY		LOAFETY FOUNDMENT			I I		1	<u> </u>	1 1		
ADDRESS:	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED	IAKENIO	: MEDICAL FACILITY	(NAME, CITY)	USED		OMPLIANT ELMET	SEATING POSITIO	N AIR BA	IG USAGE	EJECTION	TRAPPED		
	STATE OPERATOR LICENSE NUMBER OFFENSE CHAR			RGED	LOCAL	OFFENSE DESC	RIPTION	N CITAT			TION N	TION NUMBER					
OL STATE						CODE											
≥ OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DIS	VER TRACTED		OHOL / DRUG SUSPI		CONDITION	STATUS TYPE VALUE STA		STATUS	DRUG TEST(S) TUS TYPE RESULT SELECT UP TO 4					
1 1			BY	1		LCOHOL MAI THER DRUG	RIJUANA	ļ, ,	l ile			i i		11 II			
-	IRIES	SEATING POSITION	Α	IR BAG		OL CLAS	5	OL RESTRIC		DRIV	ER DISTRAC	TION		TEST STA			
1 - FATAL 2 - SUSPECTED	SERIOUS INJURY	1 - FRONT – LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEF 2 - DEPLOY			1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTER 2 - CDL INTRASTAT			T DISTRACTED NUALLY OPERATIN	IG AN		NE GIVEN ST REFUSED			
3 - SUSPECTED		2 - FRONT - MIDDLE	3 - DEPLOY				3 - CORRECTIVE LENSES		ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING,		NICATION	N 3 - TEST GIVEN, CONTAMINATED					
4 - POSSIBLE IN		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE		(OHIO = D)			4 - FARM WAIVER	4 - FARM WAIVER 5 - EXCEPT CLASS A BUS		DIALING)			SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN				
	5 - NO APPARENT INJURY (MOTORCYCLE PASSENGER) 9 - DEPLOYM			MENT UNKNOWN 5 - M/C MOPED ONLY 6 - EXCEPT CLAS			A COMMUNICATION DEVI										
1- NOT TRANSP	4 CECOND DICHT CIDE				6 - NO VALID OL & CLASS B BUS 7 - EXCEPT TRACTO			1 1/12/11/10 01/11/11/10 11/220									
/TREATED AT 2 - EMS	T SCENE	E 7-THIRD-LEFT SIDE EJECTION OL ENDORSEMEI (MOTORCYCLE SIDE CAR) 1-NOT EJECTED H-HAZMAT		MENT	8 - INTERMEDIATE LICENSE RESTRICTIONS		5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE			1-NONE							
3 - POLICE		8 - THIRD - MIDDLE	2 - PARTIALLY EJECTED M - MOTORCYCLE 9 - LEARN		9 - LEARNER'S PER	EARNER'S PERMIT		6 - PASSENGER			2 - BL00D						
9 - OTHER / UNK	9 - OTHER / UNKNOWN 9 - THIRD - RIGHT SIDE 3 - TOTALLY EJEC 10 - SLEEPER SECTION 4 NOT ARRUNA			DECIED F-PASSENGER			RESTRICTIONS 10 - LIMITED TO DAYLIGHT ONLY		7 - OTHER DISTRACTION INSIDE THE VEHICLE			3 - URINE 4 - BREATH					
	TY EQUIPMENT 11 - PASSENGER IN OTHER 12 - ANOTAPPLICABLE N - TANKER Q - MOTOR SCOOTER 12 - PASSENGER IN OTHER			11 - LIMITED TO EMPLOYMENT		8 - OTHER DISTRACTION OUTSIDE THE VEHICLE			E 5-OTHER								
1 - NONE USED 2 - SHOULDER B	ENCLOSED CARGO AREA (NOT TO MAKE A PROPERTY ONLY MISED) R-THREE		R - THREE-WHEEL MO S - SCHOOL BUS	TORCYCLE	12 - LIMITED - OTHE 13 - MECHANICAL DI	9 - OTHER / IINKNOWN			DRUG TEST TYPE								
	3 - LAP BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRICA				(SPECIAL BRAKES, HAND CONTROLS, OR OTHER		CONDITION			1 - NONE 2 - BLOOD							
	5 - CHILD RESTRAINT SYSTEM – CARGO AREA 3 - FI		3 - FREED B	ED BY X - TANKER / HAZMAT			ADAPTIVE DEVICES) 14 - MILITARY VEHICLES ONLY		1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT			3 - URINE 4 - OTHER					
	6 - CHILD RESTRAINT SYSTEM – 14 - RIDING ON VEHICLE EXTERIOR		NUN-WE	ON-MECHANICAL MEANS GENDER			15 - MOTOR VEHICLES WITHOUT AIR BRAKES		3 - EMOTIONAL (E.G., DEPRESSED,								
REAR FACIN	REAR FACING (NON-TRAILING UNIT)			F - FEMALE M - MALE			16 - OUTSIDE MIRROR		ANGRY, DISTURBED) 4- ILLNESS			1 - AMPHETAMINES					
	7 - BOOSTER SEAT 15 - NON-MOTORIST 8 - HELMET USED 99 - OTHER / UNKNOWN				U - OTHER / UNKNOWN	17 - PROSTHETIC AID		5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.		0,	2 - BARBITURATES						
	9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)							18 - OTHER		6 - UNDER THE INFLUENCE			3 - BENZODIAZEPINES 4 - CANNABINOIDS				
10 - REFLECTIVE	10 - REFLECTIVE CLOTHING								/AL	OF MEDICATIONS / DRUGS /ALCOHOL			5 - COCAINE				
	11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY								9			9 - OTHER / UNKNOWN			6 - OPIATES / OPIOIDS 7 - OTHER		
99 - OTHER / UNK	(NOWN													GATIVE RESUI	LTS		

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OHIO TRAFFIC CRASH REPORT DIAGRAM/NARRATIVE CONTINUATION

LOCAL REPORT NUMBER 22-59981C	REPORTING AGENCY JACKSON TWP POLICE DEPARTMENT	DATE OF CRASH 12 D 03 Y 2022				
IN COUNTY OF	CRASH LOCATION	M 12 D 03 Y 2022				
Stark	FULTON DR					
CASE NUMBER:						
22-59981						
NATURE OF CASE:						
ACCIDENT - PRIVATE PROPERTY DUS CITATION						
REMARKS:						
	T APPROXIMATELY 2242 HRS OFFICERS WERE DISPATCHED					
	PROPERTY ACCIDENT. DURING THE INVESTIGATION, THE RE A E. LOVELESS, LEFT THE SCENE IN HER VEHICLE AFTER ON					
	STATEMENT FORM. MAKAYLA WAS NEVER ADVISED BY OFFIC AT ANY POINT IN TIME AND MAKAYLA ALSO HAS A SUSPENDE					
LICENSE.						
	08) CALLED MAKAYLA AND LEFT HER A VOICEMAIL TO COME VIDE A FULL WRITTEN STATEMENT AND HER INSURANCE INF					
OFFICER ALSO ATTEMPTED TO S	END MAGNOLIA POLICE OUT TO MAKAYLA'S ADDRESS BUT TI ATED THAT THEY WOULD TRY TO SEND A DAY SHIFT UNIT O	HEY DID NOT HAVE				
	BE ISSUING A CITATION TO MAKAYLA FOR DRIVING UNDER S					
	AKAYLA DID COME TO STATION AND PROVIDE A WRITTEN OF					
NOTHING FURTHER AT THIS TIME						
SEE 208 AND 379 BODYCAM FOOT						
LAW #208	AGE / GTATEMENTO.					
AW #208						
	OFFICER'S SIGNATURE Y WISEMAN LIKE	BADGE NUMBER				