OHIO DEPARTMENT TRAFFIC CRASH		MANDATORY FIELD FO	23-38096									
PHOTOSTAKEN OH-2 OH-3	LOCAL INFORMATION											
SECONDARY CRASH    OH-1P   OTHER     PRIVATE PROPERTY	0.76004											
COUNTY* LOCALITY* LOCATION: CITY		CRASH DATE / TIME *   CRASH SEVERITY   06292023   2053   5   1 - FATAL										
7.6 3 2-VILLAGE Jackson (	2 - SERIOUS INJURY											
2 - SOUTH 3 - EAST	CR	3 - MINOR INJURY										
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH	D, MILEPOST, HOUSE	#)	ROAD TYPE	LONGITUDE	SUSPECTED 4 - INJURY POSSIBLE							
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	4110						5 - PROPERTY DAMAGE ONLY					
REFERENCE POINT DIRECTION FROM REFERENCE	ROUTE TYPE		D TYPE			INTERSECTION RI						
3 2- MILE POST 2- SOUTH US-		AL - ALLEY HW-1 AV - AVENUE LA - I	HIGHWAY LANE	RD - ROAD SQ - SQUARE	WITHIN INTERSECTION OR ON APPROACH							
10 directoral (10 directoral)	STATE ROUTE	BL - BOULEVARD MP - I	MILEPOST OVAL	ST - STREET TE - TERRACE	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES							
FROM REFERENCE UNIT OF MEASURE	NUMBERED COUNTY ROUTE C	T - COURT PK - I	PARKWAY	TL - TRAIL WA - WAY	ROADWAY							
2 - FEET	ROUTE	OR - DRIVE PI - I HE - HEIGHTS PL - I	ROADWAY DIVIDED									
LOCATION OF FIRST HARMFUL EVEN	ACT	DIRECTION OF TRAVEL MEDIAN TYPE										
0 6 2 - ON SHOULDER 10-DRIVEWAY	ALLEY ACCESS 9 BE	T COLLISION 4 - REA ETWEEN 5 - BAC VO MOTOR	CKING		1 - NORTH   2 - SOUTH	( < 4	DIVIDED FLUSH MEDIAN ( <4 FEET )					
4 - ON ROADSIDE 12 - SHARED US	RADE CROSSING L VE	HICLES IN 6-AND		ME DIRECTION	3 - EAST 4 - WEST	( ≥4	2 - DIVIDED FLUSH MEDIAN (≥4 FEET)					
5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	0		ESWIPE, 0P	POSITE 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	CRASH IN W	ORK ZONE	CONTOUR	CONDITION	S SURFACE					
1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -	Annual Manager Control of the Contro	RETHE 181 NING SIGN	T WORK ZONE		<b>ـــــ</b> ـــــــــــــــــــــــــــــــ							
— JAW ENFORCEMENT PRESENT   3-	WORK ON SHOULDER OR MEDIAN	S 500 March 2000 March	NCE WARN		1 - STRAIGHT LEVEL	1 - DRY 2 - WET	1 - CONCRETE					
4-	INTERMITTENT OR MOVING WOR	509/35	VITY AREA MINATION A	RFΔ	2 - STRAIGHT GRADE 3 - CURVE LEVEL	2 - BLACKTOP, BITUMINOUS, ASPHALT						
LIGHT CONDITION	WEATI		MINATION A	NLA	4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK					
1 - DAYLIGHT	1 - CLEAR	6 - SNOW			9 - OTHER/UNKNOWN	5 - SAND, MUD, DI OIL, GRAVEL	4 - SLAG, GRAVEL, STONE					
2 - DAWN/DUSK  3 - DARK – LIGHTED ROADWAY	7 - SEVERE CROS KE 8 - BLOWING SAN		T, SNOW		6-WATER (STAND MOVING)	. 3-0161						
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING	4 - RAIN 5 - SLEET, HAIL	9 - FREEZING RAI 99 - OTHER / UNK		ZING DRIZZLE		7 - SLUSH 9 - OTHER/UNKNO	9 - OTHER/UNKNOWN					
9 - OTHER / UNKNOWN						7 - OTHER/ONKINO	VVIV					
NARRATIVE		- '	1 ,	, ,			Indicate the north direction with					
UNIT #1 WAS PARKED AT THE LISTED #2 (HIT/SKIP UNIT) TRAVELED FROM E	EAST TO WEST AND DID	HIT UNIT					an "N" on the compass diagram.					
#1 ON IT'S DRIVER SIDE BUMPER, CA (FRONT BUMPER OFF). NO VIDEO EV												
AVAILABLE.		-					-					
GM		_					-					
		-					-					
		-					1   1					
		_					-     -					
							-					
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL	DATE / TIM	E	SCENE CLEARED	DATE / TIME	REPORT TAKEN BY					
	92023 2055	062920	23,2	1,0,3,  ,(	06292023	3   2121	M POLICE AGENCY					
							MOTORIST					
	YAN, JUN SPROV						SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)					
0 0 2		BY OFFICER'S BADGE NUMBER*  1 1 2 5										

J FIRST HARMFUL EVENT

**■ MOST HARMFUL EVENT** 

PAGE

OHIO DE	SOURCE SAFETY MOTORIST / NON-MOTORIST  MOTORIST / NON-MOTORIST							23-38096								
UNIT #	T # NAME: LAST, FIRST, MIDDLE								DAT	E OF BIRTH			AGE	GENDER		
$\overline{\Omega}$	PARKED, UNOCCUPIED							N								
ADDRESS:  NON / INJURIES  OL STATE	IRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE								
INJURIES	INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMEN						SAFETY EQUIPMENT		<u> </u>	SEATING POSITION	ON ATR BA	I AG USAGE	EJECTION	TRAPPED		
NON	TAKEN BY		T (MAINE)					USED	MC HE	OMPLIANT E <b>LMET</b>	1 1	I I	iu oonul		I I I I I I	
OL STATE	OPERATOR L	PERATOR LICENSE NUMBER OFFENSE CHAP				RGED	LOCAL CODE	OFFENSE DESC	RIPTION			CITA	TION N	UMBER	Į.	
010R		_														
≥ OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED		OHOL / DRUG SUSPI		CONDITION		COHOL TYPE	VALUE	STATUS		G TEST(S RESULT	) T SELECT UP TO 4	
			".		=	THER DRUG	HOOANA							عاليا ال		
UNIT #	NAME: LAST,	9719-004.5AO • 71-719-003-004-001							DATE OF BIRTH					AGE	GENDER	
$\cup$	UNKNO	WN, UNKNOWN													N	
ADDRESS:	STREET, CITY, ST	ΓΑΤΕ, ZIP							CONTACT PHONE - INCLUDE AREA CODE							
O UNIT		EMS AGENCY (NAME)		TINHIBEDT	TAVENTO	- MEDICAL FACILITY	(NAME CITY)	SAFETY FOILIDMENT			SEATING POSITIO	N ATD DA	C HEACE	EJECTION	TRAPPED	
NON INCOMINE	TAKEN BY	EMS AGENOT (NAME)		INJUNEDI	IAKLN 10	O: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED O			DOT-COMPLIANT SEATING POSITION O			AIR BA	IU USAUE	EJECTION	IKAFFED	
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	SE CHAI	RGED	LOCAL	OFFENSE DESCRIPTION			CITA			ATION NUMBER		
ADDRESS: UNKI UNUVI INJURIES OL STATE						CODE										
≥ OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DIS	VER TRACTED		OHOL / DRUG SUSPI		CONDITION		COHOL TYPE	TEST VALUE	STATUS		G TEST(S RESULT	) Γselect up to 4	
1 1	1 11		BY	1	=	THER DRUG	MIJUANA	ļ. ,	l dr	11-		r i		11 11	п п	
UNIT#								DATE OF BIRTH AGE G						GENDER		
ADDRESS	STREET, CITY, ST	TATE, ZIP							CONTACT	PHONE	- INCLUDE AREA	CODE				
ADDRESS:	INJURED	EMS AGENCY (NAME)		Linimpena	FALCENTO	: MEDICAL FACILITY		CAFETY FOUIDMENT			SEATING POSITION	NI AVO DA	1	Leienzion	LEDARDER	
NO N	TAKEN BY	EMS AGENCT (NAME)		INJURED	IAKEN 10	MEDICAL PACILITY	(NAME, CITY)	USED	□ ВОТ-С	OMPLIANT E <b>LMET</b>	SEATING POSITIO	JN AIR BA	IG USAGE	EJECTION	TRAPPED	
	OPERATOR L	R LICENSE NUMBER OFFENSE CHA			RGED	LOCAL	OFFENSE DESC	RIPTION			CITA	TION N	UMBER			
OL STATE						CODE										
≥ OL CLASS	L CLASS ENDORSEMENT RESTRICTS		DISTRACTED			DHOL / DRUG SUSPECTED  LCOHOL MARIJUANA		CONDITION	STATUS TYPE VALUE S		STATUS	DRUG TEST(S) STATUS TYPE RESULT SELECT				
1 1	шт		BY	1		THER DRUG	NIJUANA	l <sub>r 1</sub>	1 11			i i	11	11 11		
	JRIES	SEATING POSITION	А	IR BAG		OL CLASS	5	OL RESTRIC		DRI	VER DISTRAC	TION		TEST STA		
****	1 - FATAL 1 - FRONT – LEFT SIDE 1 - NOT 2 - SUSPECTED SERIOUS INJURY (MOTORCYCLE DRIVER) 2 - DEP			EPLOYED 1 - CLASS A YED FRONT 2 - CLASS B			1 - ALCOHOL INTER 2 - CDL INTRASTAT	1 - NOT DISTRACTED 2 - MANUALLY OPERATING AN			1 - NONE GIVEN 2 - TEST REFUSED					
	2 FRONT DICHTCIDE			- DEPLOYED SIDE 3 - CLASS C				3 - CORRECTIVE LENSES 4 - FARM WAIVER			DEVICE (TEXTING, TYPING,			3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE		
	4- PE			F- DEPLOYED BOTH FRONT / SIDE 4 - REGULAR CLASS  (OHIO = D)  The management of the m			5 - EXCEPT CLASS	A BUS	DIALING) 3 - TALKING ON HANDS-FREE			4 - TEST GIVEN, RESULTS KNOWN				
INJURED	JURED TAKEN BY  5 - SECOND - MIDDLE  9 - DEPLOYMENT UNKI			MENT UNKNO	NKNOWN 5 - M/C MOPED ONLY 6 - EXCEPT CLASS 6 - NO VALID OL & CLASS B BUS								UNKNOWN			
1 - NOT TRANSP /TREATED A				7 - EXCEPT TRACT  OL ENDORSEMENT 8 - INTERMEDIATE							/ICE	ALCOHOL TEST TYPE				
2 - EMS	(MOTORCYCLE SIDE CAR) 1 - NOT EJECTED  8 - THIRD - MIDDLE 2 PROTIALLY EJECTED			H - HAZMAT RESTRICTIONS			ELECTRONIC DEVICE				1 - NONE 2 - BLOOD					
3 - POLICE 9 - OTHER/UNK	OWN 9-THIRD - RIGHT SIDE 3-TOTALLY EJECTED		M - MOTORCYCLE 9 - LEARNER'S PEF P - PASSENGER RESTRICTIONS			7 - OTHER DISTRACTION				3 - URINE						
SAFETY E	10 - SLEEPER SECTION 4 - NOT APPLICABLE  SAFETY EQUIPMENT  10 - SLEEPER SECTION 4 - NOT APPLICABLE				N - TANKER 10 - LIMITED TO DAY Q - MOTOR SCOOTER 11 - LIMITED TO EMI			PLOYMENT 8 - OTHER DISTRACTION OUTS				4 - BREATH SIDE 5 - OTHER				
1 - NONE USED	ENCLOSED CARGO AREA			R - THREE-WHEEL MOTORCYCLE 12 - LIMITED - OTHE			9 - OTHER / IINKNOWN				DRUG TEST TYPE					
	- LAP BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRICATED BY		TED BY	T - DOUBLE & TRIPLETRAILERS			13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER			CONDITION		1 - NONE 2 - BLOOD				
	4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED CARGO AREA		MECHANICAL MEANS  3 - FREED BY  X - TANKER / HAZMAT				ADAPTIVE DEVI	1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT			3 - URINE					
FORWARD FA	FORWARD FACING 13 - TRAILING UNIT - CHILD RESTRAINT SYSTEM – 14 - RIDING ON VEHICLE EXTERIOR		NON-ME	NON-MECHANICAL MEANS  GENDER			15 - MOTOR VEHICLE		3 - EM	3 - EMOTIONAL (E.G., DEPRESSED,		4-OTHER				
REAR FACIN	REAR FACING (NON-TRAILING UNIT)			F - FEMALE M - MALE			AIR BRAKES  16 - OUTSIDE MIRROR		ANGRY, DISTURBED) 4- ILLNESS			1 - AMPHETAMINES				
8 - HELMET US	00 45055 (1000000)			U - OTHER / UNKNOWN			17 - PROSTHETIC AID 18 - OTHER		5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.		D,	2 - BARBITURATES				
	9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)						10 UTILIX	6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS			3 - BENZODIAZEPINES 4 - CANNABINOIDS					
	0 - REFLECTIVE CLOTHING									/ALCOHOL 9- OTHER / UNKNOWN			5 - COCAINE 6 - OPIATES / OPIOIDS			
/ BICYCLE 0	LIGHTING - PEDESTRIAN / BICYCLE ONLY									7- 011	.Z.K. OWKING WIN		7 - 0TH	IER		
99 - OTHER / UNK	CNOWN												8 - NE(	GATIVE RESU	LTS	

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