OHIO DEPAR OF PUBLIC S	TRAFFIC	CRASH	REPORT	*DENOTES	AAND ATODA	FIELD FOR		ITHE DEPOSIT		LOCAL REPO	T NUMBE	R*		
	OH-2	X 0H-3	<b>KEPURT</b> *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPOR- LOCAL INFORMATION					19-000001						
X PHOTOS TA	KEN OH-1P	OTHER	REPORTING AGI	REPORTING AGENCY NAME* NCIC*										
SECONDAR	Y CRASH PRIVAT	E PROPERTY	Bellbrook Police Department 0,2,9,0,5					1 - SOLVED 0 98 - ANIMA						
	CALITY*	LOCATION: CIT	Y, VILLAGE, TOWNSH						L 2 - UNSOLV  CRASH DATE		CR	ASH SEVERITY		
[2,9]	2 1/71 1 4 0 0	Bellbrook							01142019	1042		L - FATAL		
ROUTE TYPE	ROUTE NUMBER PREFI	X 1 - NORTH 2 - SOUTH	LOCATION ROAD	NAME				ROAD TYPE	LATITUDE	DECIMAL DEGREES	2	SUSPECTED SUSPECTED		
LOCAT		3-EAST 4-WEST	Franklin					ST	139 63	6227	3	- MINOR INJURY		
ROUTE TYPE R	OUTE NUMBER PREFI	x 1 - NORTH	REFERENCE ROA	D NAME (ROAL	, MILEPOST,	HOUSE #)		ROAD TYPE	LONGITUDE	DECINAL DEGREES	4	SUSPECTED - INJURY POSSIBLE		
ROUTE TYPE R		2 - SOUTH 3 - EAST	Little Sugar	rcreek				RD	-84,07	4905		- PROPERTY DAMAG		
REFERENCE P	OINT DIRECTIO	1 4 - WEST	ROUTE TYP	F		ROAD TY	/DE	<u> </u>	I M I V I	1744		ONLY		
2 1-INTERS	-/ 1"N	IORTH IR -	INTERSTATE ROU		- ALLEY	HW- HIGH		D - ROAD	WITHIN INT	INTERSECTION OR (				
3- HOUSE	# 3-E	ASI	FEDERAL US ROU		/ - AVENUE BOULEVARI	LA - LANE MP - MILE		Q - SQUARE T - STREET				_3		
DISTANCE			STATE ROUTE NUMBERED COUN	CE	- CIRCLE	OV - OVAL		E - TERRACE	WITHIN IN	ERCHANGE ARE		MBER OF APPROACHES		
FROM REFERE	1 - M	ILES TR-	NUMBERED TOWN	CI	- COURT	PK - PARK PI - PIKE		L - TRAIL A - WAY		ROAD	VAY			
	2-Fl		ROUTE		- HEIGHTS	PL - PLAC		A-WAI	ROADWAY D	IVIDED				
	DCATION OF FIRST HAI			MAN	INER OF CRAS	H COLLISI	) N/IMPAC	Т	DIRECTION OF TRAV	EL	MEDIA	N TYPE		
1 // 1		- CROSSOVER 0-DRIVEWAY/	ALLEY ACCESS		COLLISION	4 - REAR-TO			1-NORTH	1-	DIVIDED F	LUSH MEDIAN		
3-IN M	IEDIAN 11	I-RAILWAY GF	ADE CROSSING		MOTOR	6-ANGLE	3		2 - SOUTH 3 - EAST	L J <sub>2</sub> -	( <4 FEET Divided f	) LUSH MEDIAN		
4 - QN R 5 - QN G		2-SHARED US TRAILS	E PATHS OR	TRA 2 - REA		7 - SIDESW			4-WEST	1	(≥4 FEET	) DEPRESSED MEDIAN		
6 - OUTS	SIDE TRAFFIC WAY 13	B-BIKE LANE		3 - HEA		9-0THER/		ITE DIRECTION N		4 -	DIVIDED, R	RAISED MEDIAN		
7 - ON R 8 - OFF		I-TOLL BOOTH I-OTHER/UNI	Nown								(ANY TYPE OTHER/UNI			
WORK ZONE	PELATED		WORK ZONE TYP	E	LOCATIO	IN OF CRAS	H TAI WOD	V ZONE	CONTOUR	CONDITI	ONC	SURFACE		
			ANE CLOSURE		1	- BEFORE T	HE 1ST W		1	2		SURPACE		
WORKERS			ANE SHIFT/CROSS ORK ON SHOULDE		2	WARNING - ADVANCE		AREA	1 - STRAIGHT LEVEL	1-DRY	_	1 - CONCRETE		
LAW ENFOR	CEMENT PRESENT	0	R MEDIAN		1	-TRANSITIO			2 - STRAIGHT GRADE	2-WET		2 - BLACKTOP,		
ACTIVE SCH	IOOL ZONE		VTERMITTENT OR THER	WUVING WURK	1	- ACTIVITY . - TERMINAT		.	3 - CURVE LEVEL	3-SNOW		BITUMINOUS, ASPHALT		
L	LIGHT CONDITION WEATHER					4 - CURVE GRADE	4 - ICE		3 - BRICK/BLOCK					
1 1-DAYLI	GHT		O 1-CLE		6 - SNOW				9 - OTHER/UNKNOWN	5 - SAND, MUD, OIL, GRAVEI		4 - SLAG, GRAVEL, STONE		
				7 - SEVERE					6 - WATER (STA MOVING)	NDING,	5 - DIRT			
a provide a depart			9-FREEZIN					7 - SLUSH		9 - OTHER/UNKNOWN				
	– UNKNOWN ROADWAY R / UNKNOWN	Y LIGHTING	5 - SLEI	ET, HAIL	99 - OTHER	UNKNOWN		- 1		9 - OTHER/UNK	NOWN			
NARRATIVE														
	9, UNIT#2 ( OH I	BEC COE	4753 \ 1848.0.6	TOBBER II				Married Marrie		1	AP	Indicate the north  direction with		
FRONT OF DO	OT'S MARKET ( V	VESTBOU	ND ) FOR TRA	FFIC. UNIT	N T#1 (			1			4	an "N" on the compass diagram.		
OH REG. EST	Γ2526 ) WAS TRA INIT #2 FAILED T	VELING W	ESTBOUND (	ON WEST										
STOPPING BE	EHIND UNIT #2. 1	UNIT #1 HI	T THE REAR	OF UNIT#2.						-		+		
VEHICLES WI	ERE REMOVED F RE REPORTED.	ROM THE	ROADWAY C	NCE NO								\$		
		2001 0/1										=		
SEE ATTACHI	ED DRAWING		Perdena			7.								
												Was .		
		ber var	norman starge											
						Ē								
					-	-			\$	ma-				
										š				
	TED DATE / TIME	DIS	PATCH DATE / TIN	1E	ARRI	VAL DATE /	TIME		SCENE CLEARED D	ATE/TIME	REP	ORT TAKEN BY		
0114201	1042	0114	2019 1	042   (	71,4,2	019	104	6,  , 0;	1142019	1119	<b>▼</b> Pt	OLICE AGENCY		
TOTAL TIME	OTHER INVESTIGATION TIME	TOTAL	OFFICER'S NA			<del></del>	Снескі	ED BY OFFICE	R'S NAME*	<del></del>	-	OTORIST		
Ruble, Anthony Jones, Jackie					CORRECTION OF ADDIT									
	60	97	01	FICER'S BADG	E NUMBER*	, 3	1.	CHECKED BY	OFFICER'S BADGE NU	IMBER*	TO A	AN EXISTING REPORT SENT TO CUPS)		
SY7001 OH1 1/19 [7	60-08201						11				4	GE 1 OF 5		

H

Case Number:   9- 00 0 1	Date:	1-14-19		
Location: 118 W. Fr.	anklin	Sh		
Description:				
Little Sugarcreek Rd.	) (	DOT'S MARKET (118 W. Franklin St.)	) (	N
W. Franklin St.		Unit #2	Unit #1	
	NOT	TO SCALE		

28-BRIDGE PARAPET

30 - GUARDRAIL FACE

FIRST HARMFUL EVENT

29 - BRIDGE RAIL

BARRIER

RARRIER

35 - MEDIAN CONCRETE

36 - MEDIAN OTHER BARRIER

40 - UTILITY POLE

OR SUPPORT

42 - CULVERT

MOST HARMFUL EVENT

41 - OTHER POST, POLE

47 - MAILBOX

49 - FIRE HYDRANT

48 - TREE

53 - TUNNEL

54 - OTHER FIXED OBJECT

99 - OTHER / UNKNOWN

POSTED SPEED

2 - CALCULATED / EDR

3 - UNDETERMINED

CHE DEPARTMENT MOTORIST / NON-MOTORIST							1	19-000001							
UNIT# NAME: LAST, FIRST, MIDDLE GRESHAM, STEPHANIE J							11	DATE OF BIRTH AGE GE 54 1							
ADDRESS: STREET, CITY, STATE, ZIP 2119 KYLEMORE DR XENIA OH 45385 3935								CONTA	CONTACT PHONE - INCLUDE AREA CODE 937, 716-4589						
	INJURIES INJURED EMS AGENCY (NAME)  INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED OF A							DOT	DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TR						
周七七									NSE DESCRIPTION			CITATION NUMBER			
	NDORSEMEN' SELECT UP TO 2	RIVER STRACTED	TRACTED ALCOHOL MARIJUANA 1			CONDITION	STATUS TYPE VALUE STAT			DRUG TEST(S) TUS TYPE RESULT SELECT UP TO 4					
	-	FIRST, MIDDLE  FIROTHY			_	OTHER DRUG			.06	DATE OF BIRTH 091981			AGE 3 7	GENDER M	
ADDRESS: STE		rate, ZIP aple PL Bellbrook (	OH 4530	)5						937 360-1					
INJURIES IN	KEN	EMS AGENCY (NAME)		INJURED	TAKENT	TO: MEDICAL FACILITY	(NAME, CITY	SAFETY EQUIPMENT USED 04	DOT-				R BAG USAGE EJECTION TRAPPED		
** ,	******			OFFEN:	SE CH/	ARGED	LOCAL CODE	OFFENSE DESC	RIPTION		CI	CITATION NUMBER			
	DORSEMENT ELECT UPTO 2	RESTRICTION SELE		TRACTED 1		COHOL / DRUG SUSPI ALCOHOL MAP OTHER DRUG		CONDITION 1		TYPE VALUE	STATU	DRUGT TYPE		SELECT UP TO 4	
UNIT# NA								DATE OF BIRTH AGE GENDER							
ADDRESS: STR	EET, CITY, ST	ATE, ZIP							CONTACT	PHONE - INCLUDE AREA	CODE			102 10	
TAK BY	ŒN	EMS AGENCY (NAME)		INJURED T	AKEN TO	D: MEDICAL FACILITY (	NAME, CITY)	SAFETY EQUIPMENT USED	DOT-C		ON AIR I	BAG USAGE EJ	JECTION	TRAPPED	
OTORIS	OL STATE OPERATOR LICENSE NUMBER OFFEN				FFENSE CHARGED LOCAL OFFENSE DESCR			RIPTION	IPTION CITATION NUMBER						
	DRSEMENT LECT UP TO 2	RESTRICTION SELEC	DIST	ER RACTED		_	CTED IJUANA	CONDITION	STATUS   T	COHOL TEST TYPE VALUE	STATUS	DRUG TE S TYPE F	EST(S) RESULT SE	ELECT UP TO 4	
INJURIES	S	SEATING POSITION		IR BAG		THER DRUG OL CLASS	Dales.	OL RESTRICT	LUN(S)	DRIVER DISTRAC	TION	TES	TSTATU		
1 - FATAL 2 - SUSPECTED SERIOR 3 - SUSPECTED MINOR 4 - POSSIBLE INJURY 5 - NO APPARENT INJU 1N JURED TAKE 1 - NOTTRANSPORTED	R INJURY  URY  EN BY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE	5-NOTAPPL 9-DEPLOYM	D FRONT D SIDE D BOTH FRON' ICABLE ENT UNKNOW		1 - CLASS A 2 - CLASS B 3 - CLASS C 4 - REGULAR CLASS (OHIO = D) 5 - M/C MOPED ONLY 6 - NO VALID OL		1 - ALCOHOL INTERL 2 - CDL INTRASTATE 3 - CORRECTIVE LEN 4 - FARM WAIVER 5 - EXCEPT CLASS A 6 - EXCEPT CLASS A 8 CLASS B BUS 7 - EXCEPT TRACTOR	OCK DEVICE ONLY SES BUS	1 - NOT DISTRACTED 2 - MANUALLY OPERATIF ELECTRONIC COMMU DEVICE (TEXTING, TY DIALING) 3 - TALKING ON HANDS-F COMMUNICATION DEV 4 - TALKING ON HAND-HE COMMUNICATION TO THE	NG AN NICATION PING, REE VICE	1 - NONE GIV 2 - TEST REF 3 - TEST GIV SAMPLE / 4 - TEST GIVI 5 - TEST GIVI UNKNOWN	VEN FUSED YEN, CONTAN / UNUSABLE YEN, RESULT YEN, RESULT N	MINATED E TS KNOWN TS	
7-REATED AT SCENI 2-EMS 3-POLICE 9-OTHER / UNKNOWN  SAFETY EQUIP 1-NONE USED 2-SHOULDER BELT ONLY 3-LAP BELT ONLY USE 4-SHOULDER & LAP BE 5-CHILD RESTRAINT S' REAR FACING 7-BOOSTER SEAT 8-HELMET USED 9-PROTECTIVE PADS U (ELBOW, KNEES, ETC 10-REFLECTIVE CLOTHIL 11-LIGHTING - PEDESTR / BICYCLE ONLY 99-OTHER / UNKNOWN	MENT  ILY USED ED ELT USED SYSTEM - 11 SYSTEM - 12 SYS	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)  8 - THIRD - MIDDLE  9 - THIRD - RIGHT SIDE  10 - SLEEPER SECTION OF TRUCK CAB  11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (MON-TRAILING UNIT, BUS, PICK-UP WITH CAP)  12 - PASSENGER IN UNENCLOSED CARGO AREA 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (MON-TRAILING UNIT) 15 - NON-MOTORIST 19 - OTHER / UNKNOWN	1 - NOT EJECT 2 - PARTIALLY 3 - TOTALLY E 4 - NOT APPLI  1 - NOT TRAPP 2 - EXTRICATE MECHANIC 3 - FREED BY	Y EJECTED  JECTED  JECABLE  APPED  PED	ws	H-HAZMAT M-MOTORCYCLE P-PASSENGER N-TANKER Q-MOTOR SCOOTER R-THREE-WHEEL MOTO S-SCHOOL BUS T-DOUBLE & TRIPLE TR X-TANKER / HAZMAT  GENDER F-FEMALE M-MALE U-OTHER / UNKNOWN	RCYCLE	8 - INTERMEDIATE L RESTRICTIONS 9 - LEARNER'S PERM RESTRICTIONS 10 - LIMITED TO DAYLI 11 - LIMITED TO EMPL 12 - LIMITED - OTHER 13 - MECHANICAL DEV (SPECIAL BRAKES CONTROLS, OR OTH ADAPTIVE DEVICE 14 - MILITARY VEHICLI 15 - MOTOR VEHICLES AIR BRAKES 16 - OUTSIDE MIRROR 17 - PROSTHETIC AID 18 - OTHER	GHT ONLY OYMENT ICES HAND ER S) ES ONLY	5 - OTHER ACTIVITY WITE ELECTRONIC DEVICE 6 - PASSENGER 7 - OTHER DISTRACTION INSIDE THE VEHICLE 8 - OTHER DISTRACTION OF THE VEHICLE 9 - OTHER / UNKNOWN  CONDITION 1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMEN 3 - EMOTIONAL (E.G., DEPRE ANRY, DISTURBED) 4 - ILLNESS 5 - FELL ASLEEP, FAINTED, FATIGUED, ETC. 6 - UNDER THE INFL UENCE OF MEDICATIONS / DRUG / ALCOHOL 9 - OTHER / UNKNOWN	DUTSIDE T :SSED,	ALCOHO 1-NOME 2-BLOOD 3-URINE 4-BREATH 5-OTHER  DRUG 1 1-NONE 2-BLOOD 3-URINE 4-OTHER  DRUG TES 1-AMPHETAN 3-BENZODIA: 4-CANNABINI 6-OPIATES/C 7-OTHER 8-NEGATIVE	ST RESU MINES ATES ZEPINES 101DS	PE	

OF PUBLIC SAFETY UCCUPA	NT / WITNESS	ADDENDU	JM		19-	0000	O 1	R _T_F	7 - 7
NAME: LAST, FIRST, MIDDLE TUTTLE, SAMUE	ΞL				- 0.25	2011		AGE 7	GEN!
ADDRESS: STREET, CITY, STATE, ZIP 1791 SUGAR MAPLE PI	Bellbrook OH 453	05			CONTACT PHON	E - INCLUDE AREA	CODE		10
INJURIES INJURED EMS AGENCY (N	AME) IN	JURED TAKEN TO: MEDICAL	FACELITY (NAME, CITY	SAFETY EQUIPMENT OF T	DOT-COMPLIAN MC HELMET		N AIR BAG USAG	E EJECTIO	N TRAP
UNIT # NAME: LAST, FIRST, MIDDLE					DA	TE OF BIRTH		AGE	GENI
<u> </u>									_
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHON	E - INCLUDE AREA C	ODE	41 41	
INJURIES INJURED EMS AGENCY (N. BY	AME) IN.	JURED TAKEN TO: MEDICAL F	SAFETY EQUIPMEN	DOT-COMPLIAN MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAP	
UNIT # NAME: LAST, FIRST, MIDDLE					DA	TE OF BIRTH		AGE	GENE
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHON	E - INCLUDE AREA CO	DDE		<u> </u>
INJURIES INJURED EMS AGENCY (NA	ME) INJ	URED TAKEN TO: MEDICAL F	ACILITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPI
UNIT # NAME: LAST, FIRST, MIDDLE			en en e la proposición pro-		DAT	TE OF BIRTH		AGE	GEND
ADDDECC AVOCCY OVER THE TOTAL									
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE		
INJURIES INJURED EMS AGENCY (NA TAKEN BY	ME) INJU	JREDTAKENTO: MEDICAL FA	ACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DGT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPE
INJURIES	SAFETY EQ	UIPMENT USED	4	SEATING POS		The state of	AIR BAG U	SAGE	
I - FATAL	1 - NONE USED -	HPANT		T - LEFT SIDE	CD)	1 - NOT DE	PLOYED		
2 - SUSPECTED SERIOUS INJURY		VEHICLE OCCUPANT (MOTORCYCLE DRIV 2 - SHOULDER BELT ONLY USED 2 - FRONT – MIDDLE				2 - DEPLOY	PLOYED FRONT		
3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY		3 - LAP BELT ONLY USED 4 - SHOULDER & LAP BELT USED 5 - CHILD RESTRAINT SYSTEM – 3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCYCLE PASS) 5 - SECOND - MIDDLE				ED SIDE			
5 - NO APPARENT INJURY	4 - SHOULDER &					YED BOTH /SIDE			
						5 - NOT AP	APPLICABLE		
INJURED TAKEN BY	FORWARD FAC			VD - RIGHT SID	E 9 - DEPLOY		MENT UNKNOWN		
1 - NOT TRANSPORTED /TREATED AT SCENE	6 - CHILD RESTRA			) – LEFT SIDE )RCYCLE SIDE	CAR)		EJECT10	N	10.00
2 - EMS	7 - BOOSTER SEA	Ī		- MIDDLE		1 - NOT EJE		N	110
3 - POLICE	8 - HELMET USE			RIGHT SIDE PER SECTION O	E TRUCK CAR		2 - PARTIALLY EJECTED		
9 - OTHER / UNKNOWN	9 - PROTECTIVE I		11 - PASSE	NGER IN OTHE	R ENCLOSED	3 - TOTALLY EJECTED 4 - NOT APPLICABLE TRAPPED			
GENDER	(ELBOW, KNEE			AREA (NON-TR					
-FEMALE	11 - LIGHTING - PE			NGER IN UNEN					
W - MALE  J - OTHER / UNKNOWN  A BICYCLE ONLY			CARGO 13 - TRAIL	AREA	1 - NOT TRAPPED				
	99 - OTHER / UNKN	own		G ON VEHICLE I	EXTERIOR		ATED BY ME	CHANIC	AL
			15 - NON-N	RAILING UNIT) HOTORIST I/UNKNOWN		MEANS 3 - FREED E MEANS	Y NON-MEC	HANICA	L
IAME: LAST, FIRST, MIDDLE					DATE	OF BIRTH		AGE	GENDE
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE -	INCLUDE AREA CODE		اللل	
IAME: LAST, FIRST, MIDDLE					DATE	OF BIRTH		AGE	GENDE
DDRESS: STREET, CITY, STATE, ZIP				1	CONTACT PHONE -	INCLUDE AREA CODE			
AME: LAST, FIRST, MIDDLE	3 0 mm - 1 mm		77* to 12/4 * (	Ĺ	-	DE RESE	1 -1		
THE PARTY I WAS IN MILITIAL TO					DATE	OF BIRTH		AGE (	GENDER
DDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE -	INCLUDE AREA CODE			
3355 OH1P 1/19 [760-1500]				L			DA	CF.	05

LOCAL
REPORT
NUMBER

BELLBROOK

DATE OF CRASH 10/4/Y

FOR LOCAL USE ONLY DO NOT SUBMIT TO THE STATE EXCEPT FOR PATAL CHASHES
T. Tul
I, HEREBY MAKE THIS VOLUNTARY STATEMENT TO
HEREBY MAKE THIS VOLUNTARY STATEMENT TO  (PRINTED)  AT TA Front of Dot's (LOCATION)
I was traveling west on W. Franklin when I stopped
in front of Dot's behind a line of traffic. I was
then struck in the rear. My son and I were both
wearing seat belfs and my airbag did not deploy.
I then called 911 and waited for police/EMS to arrive.
ADDRESS OF PHONE
OFFICERS SIGNATURE OF CALLE