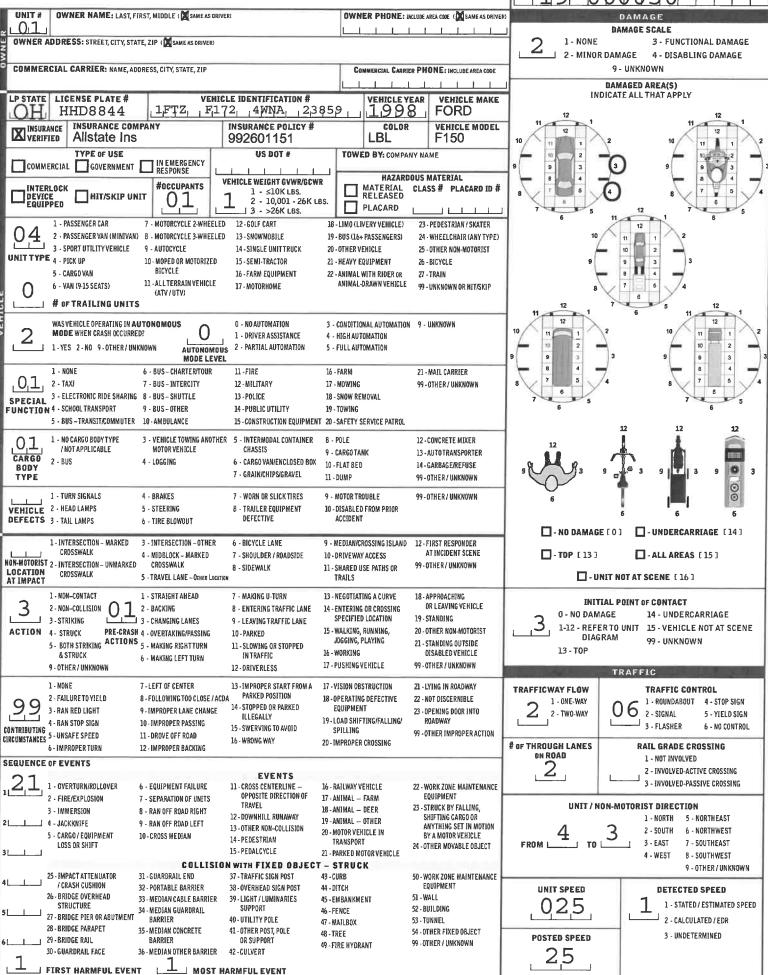
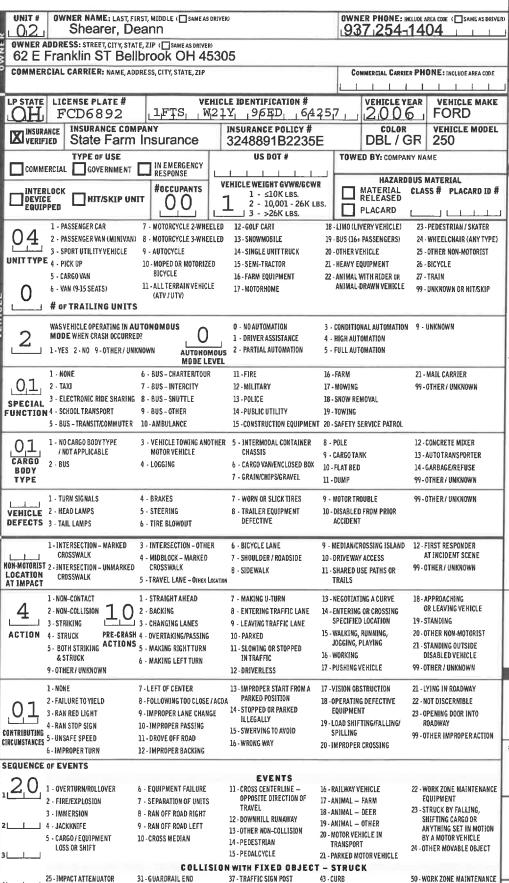
| OHD DEPARTMENT<br>OF PUBLIC SAPETY<br>SAPET - OWNER - PROFESSION          | TRAFFIC   | CRASH                     | REPORT                              | *DENOTE          | ES MANDATORY   | FIELD F        | OR SUPPL              | EMENT      | REPORT                          |                            | _                               | LO          | CAL REPOR   |                     | R*                              |                                  |  |
|---|---|---------------------------|-------------------------------------|------------------|--|----------------|-----------------------|------------|---------------------------------|----------------------------|---------------------------------|-------------|---|---------------------|---------------------------------|----------------------------------|--|
| M PHOTOS TAKEN  | OH-2  | <b>X</b> 0H-3             | LOCAL INFORMA                       |                  |  |                |                       |            |                                 | 1 7                        | 9-                              | 0,0         | 003   | 3 O Ț               | 1 1                             | 1 1                              |  |
| SECONDARY CRA   |   |                           | NCI                                 |                  |  | T/SKIP         | - 1                   | UMBER OF U | NITS                            |                            | ERROR                           |             |   |                     |                                 |                                  |  |
|   | t   | L                         | 0,2,9                               | 9,0,5            |  | - SOLVE        |                       | 02         | . (                             | /                          | 8 - ANIMAL<br>9 - UNKNO\        |             |   |                     |                                 |                                  |  |
| COUNTY* LOCALIT   | I - CITY  | ocation: cit<br>Bellbrook | Y, VILLAGE, TOWNSH                  | IIb*             |  |                |                       |            |                                 |                            | ASH DA                          |             | ME*<br>0845   | 100000              | R <b>ASH SEV</b> I<br>1 - FATAL | ERITY                            |  |
|   |   |                           |                                     |                  |  |                |                       |            | 2 - SERIOU                      | IS INJURY                  |                                 |             |   |                     |                                 |                                  |  |
| ROUTE TYPE ROUTE  |   |                           | - 1                                 | AD TYPE          | l  | -              |                       | 158        | ,                               | SUSPE(<br>3 - MINOR        |                                 |             |   |                     |                                 |                                  |  |
|   |   |                           |                                     | ST               | 39   |                |                       | التنا      | -                               | SUSPE                      |                                 |             |   |                     |                                 |                                  |  |
| ROUTE TYPE ROUTE  | HOUSE   | #)                        | ROA                                 | AD TYPE          | l  | _              |                       | AL DEGREES |                                 |                            | POSSIBLE                        |             |   |                     |                                 |                                  |  |
| Badil.  |   |                           | _                                   |                  | -84  | 06             | 58!                   | 7 + 4      |                                 | ONLY                       | RTY DAMA                        |             |   |                     |                                 |                                  |  |
| REFERENCE POINT  1-INTERSECTION   |   | D TYPE                    | RD - R                              | OAD              |  |                | INT                   | ERSECTIO   | RELATE                          | .D                         |                                 |             |   |                     |                                 |                                  |  |
| 3 2-MILE POST 2-SOUTH US-FEDERAL IIS ROUTE AV - AVENUE                    |   |                           |                                     |                  |  |                | ANE                   | SQ - SC    |                                 | │ LJ ¼                     | ITHIN II                        | NTERSE      | ECTION OR O   | N APPRO             | ACH .                           |                                  |  |
|   | 3 - HOUSE # 3 - EAST<br>4 - WEST SR - STATE ROUTE BL - BOULEVA        |                           |                                     |                  |  |                |                       | ST - ST    | TREET                           |                            | ITHIN II                        | NTERC       | HANGE ARE   | A NUA               | ABER OF A                       | PPROACH                          |  |
| FROM REFERENCE  | DISTANCE DISTANCE I'VE MIMPEDED COUNTY DOUTE                          |                           |                                     |                  |  |                |                       |            | RAIL                            |                            |                                 |             | ROADV   | /AY                 |                                 | n hil                            |  |
|   | PI - F  |                           | WA - W                              | AY               | R  | DADWAY         | DIVIDE                | ED         |                                 |                            |                                 |             |   |                     |                                 |                                  |  |
| LOCATION OF FIRST HARMFUL EVENT MANNER OF CRASH COLLISION/IMPACT          |   |                           |                                     |                  |  |                |                       |            |                                 |                            | DIRECTION OF TRAVEL MEDIAN TYPE |             |   |                     |                                 |                                  |  |
| 1 - ON ROAD   | WAY 9-  | CROSSOVER                 |                                     | 7 1-1            | NOT COLLISION  | 4 - REA        | R-TO-REA              |            |                                 |                            | L - NORT                        | - 1         | 1.  |                     | . <b>n type</b><br>Flush me     | DIAN                             |  |
| 2 - ON SHOUL  |   |                           | ALLEY ACCESS RADE CROSSING          |                  | BETWEEN<br>TWO MOTOR<br>VEHICLES IN                                | 5-BAC<br>6-ANG |                       |            | 2-SOUTH                         |                            |                                 |             | ( <4 FEET ) 2 - DIVIDED FLUSH MEDIAN                        |                     |                                 |                                  |  |
| 4 - ON ROADS<br>5 - ON GORE   | SIDE 12   | -SHARED US                | E PATHS OR                          | -                | TRANSPORT  | 7 - SIDE       | SWIPE, S              |            | 3 - EAST<br>4 - WEST            |                            |                                 | ( ≥4 FEET ) |   |                     |                                 |                                  |  |
| 1   | INALLIC HAL   | -BIKE LANE                |                                     |                  | REAR-END<br>HEAD-ON  |                | ESWIPE, 01<br>ER/UNKN |            | RECTION                         |                            |                                 |             | 3 - DIVIDED, DEPRESSED MEDIAN<br>4 - DIVIDED, RAISED MEDIAN |                     |                                 |                                  |  |
| 7 - ON RAMP<br>8 - OFF RAME   |   | -TOLL BOOTI<br>-OTHER/UN  |                                     |                  |  |                |                       |            | - 1                             |                            |                                 |             | (ANYTYPE) 9 - OTHER/UNKNOWN                                 |                     |                                 |                                  |  |
|   |   |                           | WORK ZONE TYP                       | F                | LOCATI   | ONOFC          | RASH IN V             | VADV 70    | ME                              | CON                        | TOUR                            | $\top$      | CONDITI   | nns                 | SI                              | RFACE                            |  |
| WORK ZONE REL   |   |                           | ANE CLOSURE                         |                  |  | - BEFOR        | RETHE 1S              |            | - 1                             | 11.                        |                                 |             | . 1   |                     | ,2                              |                                  |  |
| WORKERS PRESI   |   |                           | .ANE SHIFT/CROS:<br>VORK ON SHOULD! |                  | 2  |                | IING SIGN<br>NCE WARN | ING ARE    | EA                              | 1 - STRAIGHT LEVEL 1 - DRY |                                 |             | DRY   | 1 - CONCRETE        |                                 |                                  |  |
| LAW ENFORCEM  | ENI PRESENT   |                           | OR MEDIAN<br>NTERMITTENT OR         | MOVING W         |  |                | SITION ARI            | EA         | - 1                             | 2 - STRAIGHT GRADE 2 - WET |                                 |             | WET   | 2 - BLACKTOP,       |                                 |                                  |  |
| ACTIVE SCHOOL   | ZONE  |                           | THER                                | . WID # 114G ##C | 1  |                | INATION A             | REA        | - 1                             | 3 - CURVE LEVEL 3 - SNOW   |                                 |             |   |                     | ASPH                            | MINOUS,<br>IALT                  |  |
| LIGHT   | CONDITION   |                           |                                     | WEA              | THER   |                |                       |            | O STHEDWINGHAM E CAND MILD DEDT |                            |                                 |             |   | 3 - BRICI           |                                 |                                  |  |
| 1 1-DAYLIGHT 2-DAWN/DUS   | v   |                           | 1 · CLE                             |                  | 6 - SNOW   | 00000          |                       |            | OIL, GRAVEL                     |                            |                                 |             | STONE   |                     |                                 |                                  |  |
| 3-DARK-LIG  | 2-CLOUDY 7-SEVERE CROSSWING<br>3-FOG, SMOG, SMOKE 8-BLOWING SAND, SOI |                           |                                     |                  |  | T, SNOW        | ,                     | MOVING)    |                                 |                            |                                 | 5 - DIRT    |   |                     |                                 |                                  |  |
|   | 4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING    |                           |                                     |                  | 4 - RAIN 9 - FREEZING RAIN (<br>5 - SLEET, HAIL 99 - OTHER / UNKNO |                |                       |            |                                 |                            | 7 -                             |             |   |                     | 9 - OTHE                        | 9 - OTHER/UNKNOWN                |  |
| 9-OTHER/UN  |   |                           | 5 522                               | L1, 11A1L        | 77 - VIII EN   | 7 0141(14      | 0 44 14               |            |                                 |                            |                                 | 9-(         | THER/UNK  | IOWN                |                                 |                                  |  |
| NARRATIVE   |   |                           |                                     |                  |  | - "            | 0 1 1                 | 1 .        |                                 | J.   E                     |                                 | 1           | 1. 1. 1   | $\overline{\wedge}$ |                                 | te the norti                     |  |
| Unit #2 was legally   | y parked on the   | e south sid               | le of E. Frank                      | lin St. in       | a marked   |                |                       |            |                                 | -                          |                                 | -           |   |                     | an "N"                          | on with<br>'an the               |  |
| spot from west to e<br>Unit #1 driver state                               | east. Unit #1 v   | was traveli<br>a water bo | ng eastbound                        | on E. Fra        | nklin St.  |                | _                     | +          |                                 | -                          |                                 | -           |   | $\overset{v}{-}$    | compa                           | ss diagram.                      |  |
| the truck veered sl   | lightly and side  | swiped U                  | nit #2.                             | odorning i       | or it willow   |                |                       |            |                                 |                            |                                 |             |   |                     |                                 |                                  |  |
| BC on   |   |                           |                                     |                  |  |                |                       |            |                                 |                            |                                 |             |   |                     |                                 |                                  |  |
| SEE ATTACHED I  | DRAWING   |                           |                                     |                  |  | -              |                       |            |                                 |                            |                                 |             |   |                     |                                 |                                  |  |
|   | - VIIII   |                           |                                     |                  |  |                |                       |            |                                 |                            |                                 |             |   |                     |                                 |                                  |  |
|   |   |                           |                                     |                  |  |                |                       |            |                                 |                            |                                 | +           |   | -                   | +                               |                                  |  |
|   |   |                           |                                     |                  |  |                |                       |            |                                 |                            |                                 | -           | -   |                     | +                               |                                  |  |
|   |   |                           |                                     |                  |  |                |                       |            |                                 |                            |                                 |             |   |                     |                                 |                                  |  |
|   |   |                           |                                     |                  |  | -              |                       |            |                                 |                            |                                 |             |   |                     |                                 |                                  |  |
|   |   |                           |                                     |                  |  | =              |                       |            |                                 |                            |                                 |             |   |                     |                                 |                                  |  |
|   |   |                           |                                     |                  |  |                |                       |            |                                 |                            |                                 |             |   |                     | +                               |                                  |  |
|   |   |                           |                                     |                  |  |                |                       |            |                                 |                            |                                 | -           |   |                     | ++                              | -                                |  |
| CRASH REPORTED  | DATE/TIME   | nı                        | SPATCH DATE / TI                    | ME               | ADE  | TVAL DA        | TE/TIME               | 1          | 411                             | SCENE (                    | LEADER                          | DATE        | TIME  | 1 1                 | PORT TAK                        | EN BY                            |  |
| 09182019  | •   |                           |                                     |                  | 0918   |                |                       |            | 0                               |                            |                                 |             | 711111  | 1 —                 | PORT TAK<br>POLICE AG           |                                  |  |
| 09182019 0845 09182019 0845 0918;  TOTAL TIME OTHER TOTAL OFFICER'S NAME* |   |                           |                                     |                  |  |                |                       |            |                                 | R'S NAME                   |                                 |             | 7777  |                     | MOTORIST                        |                                  |  |
| ROADWAY CLOSED INVESTIGATION TIME MINUTES JONES, Jackie                   |   |                           |                                     |                  |  |                |                       | Lt.        | 5                               |                            | bra                             | 411         |   |                     | SUPPLEM                         | ENT                              |  |
| 15  | 60  | 97                        | 7 0                                 | FFICER'S B       | ADGE NUMBER  | k              | 5                     |            |                                 | FFICER'S                   |                                 |             |   | 1 - "               | ,UKKEUTION<br>) AN EXISTING REP | OR ADDITION<br>ORT SENT TO GOPS) |  |
| SY7001 OH1 1/19 [760-08   | 2201  | <u></u>                   |                                     | 1                | 1 1  |                | ا ا                   |            |                                 |                            |                                 | 1           | 10  | 1                   |                                 |                                  |  |
| 1001 OUT 1118 [100-05   | ندن:  |                           |                                     |                  |  |                |                       |            |                                 |                            |                                 |             |   | P                   | AGE 1                           | 1 of 4                           |  |

| Case Number: 19-0030 Date: 9-18-19  Location: 62 & Franklin |  |
|---|--|
| Location: 62 E Franklin                                     |  |
| Description:  |  |
|   |  |
| 62  |  |
| E. Franklin St.   |  |
| Unit #2 Unit #1   |  |
| NOT TO SCALE  |  |
|   |  |

19-000030





4 - WEST UNIT SPEED DETECTED SPEED 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED POSTED SPEED

EQUIPMENT

54 - OTHER FIXED OBJECT

99 - OTHER / UNKNOWN

51 - WALL

52 - BUILDING

53 - TUNNEL

3 - EAST

7 - SOUTHEAST

8 - SOUTHWEST

9 - OTHER / UNKNOWN

/ CRASH CUSHION

27 - BRIDGE PIER OR ABUTMENT

J FIRST HARMFUL EVENT

26 - BRIDGE OVERHEAD

STRUCTURE

28 - BRIDGE PARAPET

30 - GUARDRAIL FACE

29 - BRIDGE RAIL

32 - PORTABLE BARRIER

34 - MEDIAN GUARDRAIL

35 - MEDIAN CONCRETE

BARRIER

BARRIER

33 - MEDIAN CABLE BARRIER

36 - MEDIAN OTHER BARRIER

38 - OVERHEAD SIGN POST

39-LIGHT/LUMINARIES

SUPPORT

40 - UTILITY POLE

41 - OTHER POST, POLE

OR SUPPORT

42 - CULVERT

MOST HARMFUL EVENT

44 - DITCH

46 - FENCE

48 - TREE

47 - MAILBOX

45 - EMBANKMENT

49 - FIRE HYDRANT

| OHIO D  | SONO DEPARTMENT MOTORIST / NON-MOTORIST                        |   |  |   |  |  |  |                                    |  | 19-000030   |   |  |                        |  |  |  |  |
|---|--|---|--|---|--|--|--|------------------------------------|--|---|---|--|------------------------|--|--|--|--|
| 0 1   | NAME: LAST, FIRST, MIDDLE  Logsdon, William R                  |   |  |   |  |  |  |                                    |  | DATE OF BIRTH AGE GE 06121949 70 1                            |   |  |                        |  |  |  |  |
| ADDRESS   | S: STREET, CITY, S   | <u> </u>  | CONTACT PHONE - INCLUDE AREA CODE  |   |  |  |  |                                    |  |   |   |  |                        |  |  |  |  |
| 2223 S Lakeman Dr Bellbrook OH 45305  |  |   |  |   |  |  |  |                                    |  | 937, 604-7849   |   |  |                        |  |  |  |  |
| INJURIES  | INJURED TAKEN BY   | EMS AGENCY (NAME)   | INJUREDT   | AKENT   | 0: MEDICAL FACILITY                        | (NAME, CITY  | SAFETY EQUIPMENT                           | DOT-COMPL                          | SEATING POSITION ET 0 1  | AIR BAG USAG  | e ejection  | TRAPPED                                  |                        |  |  |  |  |
| OL STATE  |  |   |  |   | OFFENSE CHARGED LOCAL CODE                 |  |  |                                    | Stay In M  | arked Lanes   | CITATION NUMBER S 30875                               |  |                        |  |  |  |  |
| OL CLASS  | ENDORSEMEN'<br>SELECT UP TO 2                                  | RESTRICTION SELECT UP TO 3 D                                |  |   | IVER ALCOHOL / DRUG SUSPECT                |  |  | CONDITION                          | ALCOH  | OL TEST<br>VALUE  |   | DRUG TEST(S)  TYPE RESULT SELECT UP TO 4 |                        |  |  |  |  |
| 4   |  | BŶ  |  |   | =  | ALCOHOL   MA<br>OTHER DRUG   | RIJUANA                                    |                                    | 1 1  |   | $1 \mid 1$  | -  | 1 1 1                  |  |  |  |  |
| UNIT#   | NAME: LAST,  | FIRST, MIDDLE   |  |   | DATE OF BIRTH                              |  | AGE  | GENDER                             |  |   |   |  |                        |  |  |  |  |
| ADDRESS: STREET, CITY, STATE, ZIP  CONTACT PHONE - INCLUDE A  |  |   |  |   |  |  |  |                                    |  |   |   |  |                        |  |  |  |  |
| ADDRESS: STREET, CITY, STATE, ZIP  CONTACT PHONE - INCLUDE AREA CODE  CONTACT PHONE - |  |   |  |   |  |  |  |                                    |  |   |   | 1 1                                      |                        |  |  |  |  |
| NON/  | TAKEN  TAKEN  TAKEN  TAKEN                                     |   |  | INJUNED 1A  | KEN IL                                     | . MEDICAL PACILITY   | (NAME, GITY                                | USED                               | DOT-COMPLE<br>MC HELME   | ANT   | N AIR BAG USAGE EJECTION TRAPPED                      |  |                        |  |  |  |  |
| OL STATE  | E OPERATOR LICENSE NUMBER                                      |   |  | OFFENSE CHARGED LOCAL CODE                                |  |  |  | OFFENSE DESC                       | RIPTION  |   | CITATION NUMBER                                       |  |                        |  |  |  |  |
| DL CLASS  |  |   |  | ZER ALCOHOL / DRUG SUSPECTED CRACTED ALCOHOL MARIJUANA    |  |  |  | CONDITION                          | ALCOH<br>STATUS TYPE   | HOL TEST DRUG TEST(S) E VALUE STATUS TYPE RESULT SCLECTUPTO 4 |   |  |                        |  |  |  |  |
| L. J  | NAME: LACE   | SIRST MIRRIE  |  |   | 0  | THER DRUG  |  | 1                                  |  |   |   |  |                        |  |  |  |  |
| UNIT # NAME: LAST, FIRST, MIDDLE  |  |   |  |   |  |  |  |                                    |  | DATE OF BIRTH AGE GENDER                                      |   |  |                        |  |  |  |  |
| ADDRESS:  | STREET, CITY, ST   | ATE, ZIP  | CONTACT PHONE - INCLUDE AREA CODE  |   |  |  |  |                                    |  |   |   |  |                        |  |  |  |  |
|   | INJURIES INJURED EMS AGENCY (NAME) INJURED TAKEN OF TAKEN USED |   |  |   |  |  |  | SAFETY EQUIPMENT<br>USED           | DOT-Comply   |   | AIR BAG USAGE   | EJECTION                                 | TRAPPED                |  |  |  |  |
| OL STATE  | E OPERATOR LICENSE NUMBER                                      |   |  |   | OFFENSE CHARGED LOCAL                      |  |  |                                    | MC HELME   |   | CITATION N  | CITATION NUMBER                          |                        |  |  |  |  |
| OL CLASS  | ENDORSEMENT  | DRSEMENT RESTRICTION SELECT UP TO 3 DRIV                    |  |   |  | WOL / DDILE CHEBE  | CODE                                       | CONDITION                          | DRUG TEST DRUG TEST  |   |   |  |                        |  |  |  |  |
| OL ULASS  | SELECT UP TO 2   | PTO 2 DI<br>BY  |  | VER ALCOHOL / DRUG SUSPECTED ALCOHOL MARIJUAN  OTHER DRUG |  |  |  | CONDITION                          | STATUS TYPE  |   | STATUS TYPE RESULT SELECT UPTO 4                      |  |                        |  |  |  |  |
| INJURIES SEATING POSITION   |  |   | The second second  | R BAG   |  | OL CLASS   |  | OL RESTRICT                        | OL RESTRICTION(S) DRIVER DISTRACTION TEST STATUS  1-ALCOHOL INTERLOCK DEVICE 1-NOT DISTRACTED 1-NONE GIVEN |   |   |  |                        |  |  |  |  |
| 1 - FATAL 1 - FRONT – LEFT SIDE 2 - SUSPECTED SERIOUS INJURY (MOTORCYCLE DRIVER)  |  | 1 - NOT DEPLOYED 1 - CLASS A 2 - DEPLOYED FRONT 2 - CLASS B |  |   |  |  | 1 - ALCOHOL INTERL<br>2 - CDL INTRASTATE   | T REFUSED                          |  |   |   |  |                        |  |  |  |  |
| 3 - SUSPECTED MINOR INJURY  |  | 2 - FRONT - MIDDLE 3 - DEPLOYED                             |  |   |  | 3 - CLASS C  |  | 3 - CORRECTIVE LEN                 | ISES   | ATION 3-TES   | ON 3-TEST GIVEN, CONTAMINATED                         |  |                        |  |  |  |  |
| 4 - PUSSIBLE INJUKT   |  | 4 - SECOND - LEFT SIDE                                      | D BOTH FRONT / SIDE 4 - REGULAR CLASS<br>ICABLE (OHIO = D)                   |   |  |  | 4 - FARM WAIVER<br>5 - EXCEPT CLASS A      | nua.                               | 4-TFS1   | SAMPLE / UNUSABLE<br>4 - TEST GIVEN, RESULTS KNOWN            |   |  |                        |  |  |  |  |
| (MOTORCYCLE PASSENGER)  |  |   | 9 - DEPLOYMENT UNKNOWN 5 - M/C MOPED ONLY 6 - EXCEPT 6 - NO VALID DL & CLASS |   |  |  |  |                                    |  | T GIVEN, RESUI<br>Nown  | LTS   |  |                        |  |  |  |  |
| 1 - NOT TRANSPORTED 6 - SECOND - RIGHT SIDE  /TREATED AT SCENE 7 - THIRD - LEFT SIDE  |  |   | F18  | ECTION  | -  | OL ENDORSEM  | ENT  | 7 - EXCEPT TRACTOR                 | ALCUNULIESTITE   |   |   |  |                        |  |  |  |  |
| 2 - EMS (MOTORCYCLE SIDE CAR)   |  | 1-NOT EJECTED H-HAZMAT                                      |  |   |  |  | 8-INTERMEDIATE L<br>RESTRICTIONS           |                                    | OTHER ACTIVITY WITH AN<br>Electronic Device  | 1 - NON   | 1 - NONE  |  |                        |  |  |  |  |
| 3- PULICE   |  | 8 - THIRD - MIDDLE<br>9 - THIRD - RIGHT SIDE                | 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED                                    |   |  | M - MOTORCYCLE<br>P - Passenger  |  | 9 - LEARNER'S PERM<br>RESTRICTIONS |  | 6 - PASSENGER 7 - OTHER DISTRACTION                           |   |  | 2 - BLOOD<br>3 - Urine |  |  |  |  |
| 10 SI EEDED SECTION   |  | 4 - NOT APPLICABLE N - TANKER                               |  |   |  |  | 10 - LIMITED TO DAYL                       | IGHT ONLY I                        |  | 4 - BREATH<br>E 5 - OTHER                                     |   |  |                        |  |  |  |  |
| 33 DACCEAGED IN OTHER   |  |   | Q - MOTOR SCOOTER 11 - LIMITED I  R - THREE-WHEEL MOTORCYCLE 12 - LIMITED -  |   |  |  |  | THE VEHICLE                        |  |   |   |  |                        |  |  |  |  |
| 2 - SHOULDER BELT ONLY USED (NON-TRAILING UNIT, BUS, 3 - LAP BELT ONLY USED PICK-UP WITH CAP)   |  | 1 - NOTTRAPPED S - SCHOOL BUS                               |  |   |  |  | 13 - MECHANICAL DEN<br>(SPECIAL BRAKES     | VICES                              |  | 1-NONE  |   |  |                        |  |  |  |  |
| 4 - SHOULDER & LAP BELT USED  |  | 12 - PASSENGER IN UNENCLOSED                                | LOSED MECHANICAL MEANS   |   |  | T - DOUBLE & TRIPLE TRAILERS CONTROLS, OR O  X - TANKER / HAZMAT ADAPTIVE DEVI |  |                                    |  | CONDITION  APPARENTLY NORMAL                                  |   | 2 - BLOOD<br>3 - URINE                   |                        |  |  |  |  |
| 5 - CHILD RESTRAINT SYSTEM -<br>FORWARD FACING  |  | CARGO AREA  13 - TRAILING UNIT                              | 7-1 NEL D D 1  |   |  |  |  | 14 - MILITARY VEHICL               | ES ONLY 2 - P  | 4 - OTHE  | 4 - OTHER   |  |                        |  |  |  |  |
| 6 - CHILD RESTRA  |  | 14 - RIDING ON VEHICLE EXTERIOR<br>(Non-trailing Unit)      |  |   | GENDER 15-MOTORVEHI<br>F-FEMALE AIR BRAKES |  |  |                                    |  | MOTIONAL (E.G., DEPRESSI<br>NGRY, DISTURBED)                  |   | DRUG TEST RESULT(S)                      |                        |  |  |  |  |
| 7 - BOOSTER SEAT  |  | 15 - NON-MOTORIST   | /// WINEE  |   |  |  | 16 - OUTSIDE MIRROR<br>17 - PROSTHETIC AID | 7.16                               | LNESS  |   | 1 - AMPHETAMINES 2 - BARBITURATES 3 - BENZODIAZEPINES |  |                        |  |  |  |  |
| 8 - HELMET USED<br>9 - PROTECTIVE PADS USED   |  | 99 - OTHER/ UNKNOWN   | o omen, omen,  |   |  |  | 18-OTHER                                   | Fi                                 | ELL ASLEEP, FAINTED,<br>ATIGUED, ETC.  |   |   |  |                        |  |  |  |  |
| (ELBOW, KNEES, ETC.)  |  |   |  |   |  |  |  |                                    | 01   | NDER THE INFLUENCE<br>F MEDICATIONS / DRUGS                   |   | 4 - CANNABINOIDS                         |                        |  |  |  |  |
| 10 - REFLECTIVE CLOTHING<br>11 - LIGHTING – PEDESTRIAN  |  |   |  |   |  |  |  |                                    |  | ALCOHOL<br>Ther / Unknown                                     | 5 - COCA<br>6 - OPIA                                  | CAINE<br>IATES / OPIDIDS                 |                        |  |  |  |  |
| / BICYCLE ONLY 99 - OTHER / UNKNOWN   |  |   |  |   |  |  |  |                                    |  | 7 - OTHER   |   |  |                        |  |  |  |  |
| CHIERT DINKIN   | V -1117  |   |  |   |  |  | 11 12 1                                    |                                    |  |   | 8 - NEGA  | ATIVE RESULTS                            |                        |  |  |  |  |