OF PUBLIC SAFETY	TRAFFIC	CRASH	REPORT	*DENOT	ES MANDATORY	FIELD FOI	SUPPLE	MENT REP	ORT		LOCAL F	EPORT NU	IMBER*				
RAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT FOR SUPPLEM											20-000015						
SECONDARY CRA			NCIC*		HIT/SKIP	NUMBI	ER OF UNITS	- STATE AND ADDRESS OF									
COUNTY* LOCALIT		PROPERTY	Bellbrook Y, VILLAGE, TOWNSH		Departmer	t	٦(),2,9,0	5	1 - SOLVED		<u> </u>	01 98-ANIMAL 99-UNKNOW				
1.4.9	1 - CITY 2 - VILLAGE 3 - TOWNSHIP	III					04242020	18	48 5	5 1- FATAL							
E ROUTE TYPE ROUTE	NUMBER PREFIX		LOCATION ROAD	NAME			ROAD T	/PE	LATITUDE			2 - SERIOUS INJURY SUSPECTED					
LOCATI		3 - EAST 4 - WEST	Wilmington	n-Daytor			ŖI		39,63	714	: 5	3 - MINOR INJURY SUSPECTED					
ROUTE TYPE ROUTE	NUMBER PREFIX	1 - NORTH 2 - SOUTH	REFERENCE ROAM	AD NAME (R	OAD, MILEPOST	HOUSE #)		ROAD TY	/PE	LONGITUDE	DECIMAL DEG	REES	4 - INJURY POSSIBLE				
ROOTE 1172 ROOTE			DF	٠ إ	84 10	968	5	5 - PROPERTY DAMAG									
1	REFERENCE POINT DIRECTION ROUTE TYPE								7		INTERS	CTION RE					
2- MILE POST	1 - NORTH IR - INTERSTATE ROUTE(TP) AL - ALLEY 2 - MILE POST 2 - SOUTH US - FFDERAL US POUTE AV - AVENUE							RD - ROAD SQ - SQUAR	E	WITHIN INT	ERSECTIO	N OR ON AP	PROACH				
	3 - HOUSE # 3 - EAST 4 - WEST SR - STATE ROUTE BL - BOULEV.							ST - STREE	- 1	WITHIN INT	ERCHANG	E AREA	NUMBER OF APPROACHES				
FROM REFERENCE	DISTANCE FROM REFERENCE UNIT OF MEASURE 1 - MILES TR - NUMBERED COUNTY ROUTE CT - COURT								CE		R	OADWAY	THE PERSON NAMED IN				
	2 - FE	ET	ROUTE	Nonir	PI - PIK		WA - WAY	1	ROADWAY D	VIDED							
	ION OF FIRST HAR	MFUL EVEN	г		MANNER OF CRA			ACT	+	DIRECTION OF TRAV							
0 1 2-ON ROAD		CROSSOVER	ALLEY ACCESS	0 1-1	NOT COLLISION BETWEEN		TO-REAR		l'	1 - NORTH		1 - DIVIC	EDIAN TYPE DED FLUSH MEDIAN				
3 - IN MEDIA 4 - ON ROADS	N 11	-RAILWAY G	RADE CROSSING		TWO MOTOR VEHICLES IN	6-ANGLE			l	2 - SOUTH 3 - EAST	L	(<4 FEET) 2 - DIVIDED FLUSH MEDIAN					
5 - ON GORE		-SHARED US TRAILS	E PAINS UK	1	TRANSPORT REAR-END			ME DIRECTION OSITE DIRECT	ION	4-WEST		(≥4 FEET) 3 - DIVIDED, DEPRESSED MEDIAN					
6 - OUTSIDE		- BIKE LANE - TOLL BOOT!	1	3-1	HEAD-ON	9-OTHER	/ UNKNO	WN				4 - DIVIDED, RAISED MEDIAN (ANY TYPE)					
8 - OFF RAME	99	-OTHER/UN	KNOWN									9 - OTHE	R/UNKNOWN				
WORK ZONE REL	ATED	1.1	WORK ZONE TYPE ANE CLOSURE	E.		ON OF CRA				CONTOUR	CO	NDITIONS	SURFACE				
WORKERS PRESI	ENT	2 - 1	ANE SHIFT/CROS			WARNIN	G SIGN	WORK ZON		2	ī		4				
LAW ENFORCEM	ENT PRESENT		VORK ON SHOULD OR MEDIAN		_ L ;	2 - ADVANC 3 - TRANSIT			- 1	1 - STRAIGHT LEVEL 1 - DRY 2 - STRAIGHT GRADE 2 - WET			1 - CONCRETE 2 - BLACKTOP				
ACTIVE SCHOOL	ZONE		NTERMITTENT OF	MOVING WO		- ACTIVIT - TERMIN		EA	- 1	3 - CURVE LEVEL 3 - SNOW			BITUMINOUS, ASPHALT				
LIGHT	CONDITION			WEA	THER				_	4 - CURVE GRADE 4 - ICE			3 - BRICK/BLOCK				
1 - DAYLIGHT	v		2 1-CLE	EAR	6 - SNOW				19	- OTHER/UNKNOWN		MUD, DIRT, RAVEL					
3 - DARK - LIG	HTED ROADWAY		2-CL0 3-F00		7-SEVER OKE 8-BLOWI	E CROSSWI IG SAND, S	NDS OIL, DIRT	SNOW			6 - WATE						
4 - DARK ROA 5 - DARK UNI		NG RAIN O	RFREEZ	NG DRIZZL	E.		7 - SLUSI		9 - OTHER/UNKNOWN								
9-OTHER/UN	KNOWN			ET, HAIL		- CAMILOT					9 - OTHEI	RANKNOWN	4				
NARRATIVE						FT	1					6	Indicate the north				
Unit #1 was traveli Pond Dr. behind U	ing southbound Init #2. Unit #2	d on Wilmi	ngton-Dayton	Rd. south	of Mill	-			T			7 6	direction with an "N" on the compass diagram.				
Unit #1 was distract halt. Unit #1 struck	cted by her do	q and faile	d to realize tra	iffic had c	ome to a	k.					\square	Pa					
TIGIL OINCH'I SUGON	COINT#2 III UIE	rear end.							+		211	<					
						-			+			ton					
							-		-		Ш	3					
											11	Δ	-				
						H					\Box	C					
						MI	Po	nd I	C.			2	-				
												5					
												ilmins	drawing				
													Lat to				
												3	Scale				
CRASH REPORTED		l	SPATCH DATE/TI		AR	RIVAL DATI	/TIME		Ш	SCENE CLEARED D	ATE / TIM		REPORT TAKEN BY				
04242020	1848	0,4,2,4	2020,1	.848	0424	2020	18	48	04	242020	19] ا ور	POLICE AGENCY				
TOTAL TIME ROADWAY CLOSED INVI	OTHER ESTIGATION TIME	TOTAL MINUTES	OFFICER'S N			1 1	Сне	CKED BY OFF	ICER	SHAME!	5		MOTORIST				
30	20	41	veiler, c		ADGE NUMBER	*	+	CHECKEN	KK	FICER'S BADGE N	IMBEP*	[SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO DOPS)				
					, , 3	3	<u> </u>		1	0	I .	5	Service of the service				
ISY7001 OH1 1/19 [760-08	320]												DAGE 1 as 4				

		O DEPARTMENT PUBLIC SAPKTY	MOTORIST /	Non	N-IV	ОТ	0R	IST				L	20-	O O O	REPORT N	UMBER					
UNIT # NAME: LAST, FIRST, MIDDLE											1-	THE PERSON NAMED IN COLUMN 1									
	MARSHALL, TAYLOR L ADDRESS: STREET, CITY, STATE, ZIP											04301995 AGE 24 SE									
2	7			011							CONTACT PHONE - INCLUDE AREA CODE										
Š	INJURIE	S INJURED	ach Dr Suite:B Ket					7				(i)	a .								
2 0 2	5	TAKEN 1	- MO HOLING (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CIT							USED O DOT-COMPLIANT CATHOUT USITION AIR BAG USAGE EJECTION TRAI										
L T	OL STAT		PR LICENSE NUMBER	-	OFFERSE OUR DOOR					U4 UMC HELI							1,				
TOP	GA	<u>-</u>					4511.21A LOCA					scription Clear	ท Distanc	e Ahead	CITATION NUMBER						
N	OL CLAS	S ENDORSEM: SELECT UP T	ENT RESTRICTION S		RIVER ALCOHOL / DRIES SUSPECTED					31180											
1	3	3				STRACTED					7	STATU	S TYPE	VALUE	STATUS	TYPE	RESULT S	ELECT UP TO 4			
	UNIT # NAME: LAST, FIRST, MIDDLE					OTHER DRUG															
i	02		O, MORGAN ALEX	RΔ								DATE OF BIRTH AGE GENDER									
ORIST	ADDRES	S: STREET, CITY		-								10172003 , 16 F									
OTOR	7625	PELWA	Y DR CENTERVIL	159 5	59 5021						CONTACT PHONE - INCLUDE AREA CODE										
N-MI	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)			MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT						_									
N /	4	BY				TOTAL PROPERTY (NAME, CIT					0,4	DOT-COMPLIANT SEATING POSITION AIR BAG USAGE E					ECTION	TRAPPED			
RIST	Oh	OPERATOR	LICENSE NUMBER		OFFENSE CH			ARGED	LOCA		NSE DESCRIPTION					CITATION NUMBER					
MOTO	OL CLASS	ENDORSEME							CODE							TON NOM	DEK				
	4	SELECT UP TO:		ECT UP TO 3	DRIVER			COHOL / DRUG SUSPI	ECTED	COND	ITION	STATUS	TYPE		No.	DRUGT					
			J		BY]	L	=	ALCOHOL MAI OTHER DRUG	RIJUANA	1		1	1	VALUE	STATUS	TYPE	RESULT SEL	ECT UP TO 4			
	UNIT # NAME: LAST, FIRST, MIDDLE					OTHER DRUG															
M.												DATE OF BIRTH AGE GENDER									
RIST	ADDRESS: STREET, CITY, STATE, ZIP													CONTACT PHONE - INCLUDE AREA CODE							
NON-MOTORIS	MIDDIES	T								- INCLUDE AREA CODE											
INJURIES INJURED EMS AGENCY (NAME) IN.							JURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPME					TOOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED									
OL STATE OPERATOR LICENSE NUMBER										USED		MC HELMET						Arres			
OL LINE HOMBER			OFFENSE CHA			СНА	RGED	OFFENS	E DESCR	IPTION	CITA			DN NUMB	ER						
M O	OL CLASS ENDORSEMENT SELECT UP TO 2 RESTRICTION SELECT UP TO			T UPTO3	DRIVER		ALC	COHOL / DRUG SUSPECTED													
	SELECTORIUZ			DISTRACTED BY		T		JUANA	CONDITION		STATUS	TATUS TYPE VALUE ST		TATUS	TYPE RESULT SELECT UP		T UP TO 4				
L	INTRI	RIFS	SEATING POSITION		└] 0	THER DRUG		L						J.					
	FATAL		1 - FRONT - LEFT SIDE	DEPLOYED	R BAG OL CLASS OYED 1-CLASSA					STRICT		The second liverage of	R DISTRACT	ОИ	TEST	STATUS					
		ERIOUS INJURY INOR INJURY	(MOTORCYCLE DRIVER) 2 - DEPLOYED 2 - FRONT - MIDDLE			FRONT 2 - CLASS B				1 - ALCOHOL INTERLOCK DEV 2 - CDL INTRASTATE ONLY			EVICE 1 - NOT DISTRACTED 2 - MANUALLY OPERATING AN			1 - NONE GIVEN					
	4 - POSSIBLE INJURY		3 - FRONT - RIGHT SIDE 4 - DEPLOYED			SIDE 3 - CLASS C BOTH FRONT / SIDE 4 - REGULAR CLASS				3 - CORRECTIVE LENSES			ELECT	RONIC COMMUNIC	ATION 2	3 - 1631 GIVEN, CONTAMINATED					
5-1	O APPARENT	INJURY	(MOTORCYCLE PASSENGER) 5 - NOT APPLIC			CABLE (OHIO = D)				4 - FARM WAIVER 5 - EXCEPT CLASS A BUS			DIALING) SA				SAMPLE / UNUSABLE 'EST GIVEN, RESULTS KNOWN				
	JURED T.	5 - SECOND - MIDDLE	9- DEPLOYMENT UNKNOWN				5 - M/C MOPED ONLY 6 - NO VALID OL	6 - EXCEPT CLASS A & CLASS B BUS			3-TALKING ON HANDS-FREE COMMUNICATION DEVICE			5 - TEST GIVEN, RESULTS UNKNOWN							
/TREATED AT SCENE 7			6 - SECOND – RIGHT SIDE 7 - THIRD – LEFT SIDE	EJECTI						7 - EXCEPT TRACTOR-TRAILER											
2 · E	MS Dlice		(MOTORCYCLE SIDE CAR) 8-THIRD-MIDDLE	1-NOTE	NOT EJECTED			H - HAZMAT	8 - INTERMEDIATE LICENSE RESTRICTIONS			5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE			ALCOHOLTEST TYPE 1-NONE						
	THER/UNKNO	IWN :	9-THIRD-RIGHT SIDE 2-PARTIALLY E 3-TOTALLY EJE			- motonotor.				9 - LEARNER'S PERMIT RESTRICTIONS			6 - PASSEN			2 - BLOOD					
SAFETY EQUIPMENT OFTRUCK CAB				4-NOT APPLICABLE				P - PASSENGER N -TANKER	10 - LIMITED TO DAYLIGHT ONLY			7 - OTHER DISTRACTION INSIDE THE VEHICLE			3 - URINE 4 - Breath						
1 - NONE USED 11 - PASSENGER IN OTHER			IRAPPEN				Q - MOTOR SCOOTER				- LIMITED TO EMPLOYMENT - LIMITED - OTHER		8 - OTHER DISTRACTION OUTSIDE THE VEHICLE			5-OTHER					
	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 DEVICES			9-OTHER/UNKNOWN DRUG TEST TYPE								
4 - SH	OULDER & LA	P BELT USED	12 - PASSENGER IN UNENCLOSED				MEANS T - DOUBLE & TRIPLE TRAIL			CONTROLS	BRAKES, F S, OR OTHE	R	CONDITION			1 - NONE 2 - BLOOD					
5 - CH FO	ild restraii Rward facin	NT SYSTEM - IG	CARGO AREA 3 - FREED BY 13 - TRAILING UNIT NON-MECHAN						ADAPTIVE DEVICES) 14 - MILITARY VEHICLES ONLY			1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT			3 - URINE						
6 - CH Re	- CHILD RESTRAINT SYSTEM – REAR FACING		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)			GENDER F-FEMALE				15 - MOTOR VEHICLES WITHOUT AIR BRAKES			JT 3 - EMOTIONAL (E.G., DEPRESSED.			4 - OTHER					
7 - BO	- BOOSTER SEAT		15 - NON-MOTORIST			M - MALE				16 - OUTSIDE N	MIRROR		ANGRY, DISTURBED) 4 - ILLNESS			DRUG TEST RESULT(S) 1-AMPHETAMINES					
	- HELMET USED - Protective pads USED		99 - OTHER / UNKNOWN			U - OTHER / UNKNOWN				17 - PROSTHETIC AID 18 - OTHER			5- FELL ASLEEP, FAINTED, Fatigued, etc.			2 - BARBITURATES					
(ELBOW, KNEES, ETC.) - REFLECTIVE CLOTHING		ETC.)							-v-villen			6 - UNDER THE INFLUENCE			3 - BENZODIAZEPINES						
l - LIG	HTING - PEDE												OF MEDICATIONS / DRUGS /ALCOHOL			4 - CANNABINOIDS 5 - COCAINE					
	CYCLE DNLY IER/UNKNOW	/N												9 - OTHER / UNKNOWN			6 - OPIATES / OPIOIDS 7 - OTHER				
_		/19 [760-1500		_												IHER EGATIVE RES	SULTS				
		1000	•																		