OF PUBLIC SAPETY TRAFFIC	CRASH		*DENOTES MA	NDATORY FI	ELD FOR	SUPPL	EMENT R	EPORT		~			EPORT NU			
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SECONDARY CRASH	OTHER	REPORTING AGENCY NAME* NCIC*												UNIT IN E		
PRIVA	TE PROPERTY	Bellbrook Police Department 0,2,9,0,5						,0,5,	2 L 2 - UNSOLVED UL UT 9					_1	ANIMAL UNKNOWN	
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LIGHT CONDITION  1 - DAYLIGHT		1 - CLI	<b>WEATHE</b> Ear	R 6 - SNOW					9 - OT	HER/UN	KNOWN		D, MUD, DIF GRAVEL	т,	4 - SLAG, STONE	
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADW	AV.	2 - CLC	OUDY G, SMOG, SMOKE	7 - SEVERE			DT GNOW						ER (STAND ING)	ING,	5 - DIRT	
4 - DARK - ROADWAY NOT LI	GHTED	4 - RAI		9 - FREEZIN								7 - SLU			9 - OTHER	VUNKNOWN
5 - DARK – UNKNOWN ROAD 9 - OTHER / UNKNOWN	WAY LIGHTING	5 - SLf	EET, HAIL	99 - OTHER	UNKNO	IWN						9 - OTH	ER/UNKNOV	VN		
NARRATIVE					T	T			7. [	11	T T	1		4	Indicat	e the north
Unit 2 was stopped in traffic f	acing west b	ound on W. Fr	anklin St. Uni	it 1 was	-	_	-		_			-			direction an "N"	n with
traveling west bound on W. F	ranklin St. U													V		s diagram.
cleared distance ahead, striki	ng unit 2.				- 1							0	1			-
Body camera on.					- (4	est	Fran	Klin	5	T		3/				-
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TOTAL TIME OTHER ROADWAY CLOSED INVESTIGATION 1	TOTAL				-1-		Снескео в								MOTORIST	
_		Stout, /		Am Manager			Willia							ي البحا	UPPLEM CORRECTION	OR ADDITION
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☐ FIRST HARMFUL EVENT

OHIO DE OF PURI MATY - MR	PARTHENT V	OTORIST / No	N-N	ото	RIS	Т			22	2 - 0 0 0 0	ORT NUMBER	12 11	1 1
01	MARTIN	FIRST, MIDDLE N, JOSEPH P							[12]	DATE OF BIRTH 491954		AGE 68	GENDER M
2	STREET, CITY, ST	M CT Suite:APT 7	CENTE	:D\/II I	ΕOI	h 45450-570°	2		CONTACT	PHONE - INCLUDE AREA CO	DDE		
<u> </u>		EMS AGENCY (NAME)	OLIVIL	-		: MEDICAL FACILITY		SAFETY EQUIPMENT	L_1_	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED
5	TAKÉN BY						11441112, 011117	USED 0,4	DOT-C	DMPLIANT 7	1	1	1
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ol class	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		TRACTED	AI	<b>DHOL / DRUG SUSPI</b> LCOHOL		CONDITION		1	status typ	E RESULT	T SELECT UP TO A
UNIT #	NAME: LAST,	FIRST, MIDDLE			<u> </u>	THEK DROG				DATE OF BIRTH		AGE	GENDER
02	SPEAKE	ER, DAVID C							122	71989		33	M
	STREET, CITY, ST			011.4	-005	0004			CONTACT	PHONE - INCLUDE AREA CO	DDE		
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INJURIES	TAKEN BY	EMS AGENCT (NAME)		INJUREDI	AKEN IU	: MEDICAL FACILITY	(NAME, CITY)	USED 04	DOT-C		AIR BAG USAG	E EJECTION	TRAPPED
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UNIT#	NAME: LAST, F	FIRST, MIDDLE								DATE OF BIRTH		AGE	GENDER
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ADDRESS	: STREET, CITY, ST	ATE, ZIP							CONTACT	PHONE - INCLUDE AREA CO	DE	1 1	1 1
ADDRESS 1NJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJUREDT	AKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED	DOT-C		ATR BAG USAG	EJECTION	TRAPPED
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ILLI	JRIES	SEATING POSITION		IR BAG	<u> </u>	THER DRUG OL CLASS	DUIT	OL RESTRIC	TION(S)	DRIVER DISTRACT	TON		
1- FATAL	, KIES	1 - FRONT - LEFT SIDE	1 - NOT DEP		45	1 - CLASS A		1-ALCOHOL INTER		1 - NOT DISTRACTED		TEST STA Ne given	105
2 - SUSPECTED 3 - SUSPECTED	SERIOUS INJURY MINOR INJURY	(MOTORCYCLE DRIVER)  2 - FRONT - MIDDLE	2 - DEPLOYE 3 - DEPLOYE			2 - CLASS B 3 - CLASS C		2 - COL INTRASTATI		2 - MANUALLY OPERATING ELECTRONIC COMMUNI	CATION 3 TE	ST REFUSED St given, con	ITAMINATED
4 - POSSIBLE IN	JURY	3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE		D BOTH FROM	NT / SIDE	4 - REGULAR CLASS		4 - FARM WAIVER		DEVICE (TEXTING, TYPI DIALING)	NG, SA	MPLE / UNUSA	ABLE
5 - NO APPAREN	IT INJURY	(MOTORCYCLE PASSENGER)	5 - NOT APPI 9 - DEPLOYN		WN	(OHIO = D) 5 - M/C MOPED ONLY		5 - EXCEPT CLASS A 6 - EXCEPT CLASS A		3 - TALKING ON HANDS-FRI COMMUNICATION DEVICE	EE	ST GIVEN. RES ST GIVEN, RES	
INJURED 1-NOTTRANSP	TAKEN BY	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS 7 - EXCEPT TRACTO		4 - TALKING ON HAND-HELL COMMUNICATION DEVICE	D	KNOWN	
/TREATED A		7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)		ECTION		OL ENDORSEM	MENT	8 - INTERMEDIATE		5 - OTHER ACTIVITY WITH	ALC	OHOLTES Ne	STTYPE
2 - EMS 3 - POLICE		8-THIRD - MIDDLE	1 - NOT EJEC 2 - PARTIALI			H - HAZMAT M - MOTORCYCLE		RESTRICTIONS 9 - LEARNER'S PER	MIT	6 - PASSENGER	2 - BL		
9-OTHER/UNK	CNOWN	9-THIRD - RIGHT SIDE 10-SLEEPER SECTION	3 - TOTALLY			P - PASSENGER		RESTRICTIONS  10 - LIMITED TO DAY	IGHT ONLY	7 - OTHER DISTRACTION INSIDE THE VEHICLE	3 - UR 4 - BR		
	QUIPMENT	OF TRUCK CAB 11 - PASSENGER IN OTHER	4 - NOT APPL			N - TANKER Q - MOTOR SCOOTER		11 - LIMITED TO EMP	LOYMENT	8 - OTHER DISTRACTION OU THE VEHICLE			
1 - NONE USED 2 - SHOULDER E	BELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1 - NOTTRAF	PED		R - THREE-WHEEL MO' S - SCHOOL BUS	TORCYCLE	12 - LIMITED - OTHE 13 - MECHANICAL DE		9 - OTHER / UNKNOWN		RUG TEST	TYPE
3 - LAP BELT ON		PICK-UP WITH CAP)  12 - PASSENGER IN UNENCLOSED	2 - EXTRICAT	TED BY		T - DOUBLE & TRIPLE	TRAILERS	(SPECIAL BRAKE CONTROLS, OR 01		CONDITION	1 - NO 2 - BLI		
5 - CHILD REST	RAINT SYSTEM –	CARGO AREA	3 - FREED BY	4	4110	X - TANKER / HAZMAT		ADAPTIVE DEVICE 14 - MILITARY VEHICE		1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT	3 - UR		1.0
FORWARD FA	ACING RAINT SYSTEM -	13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR	NUN-MEG	HANICAL ME	ANS	GENDER		15 - MOTOR VEHICLE		3 - EMOTIONAL (E.G., DEPRES	SSED,		
REAR FACIN	G	(NON-TRAILING UNIT) 15 - NON-MOTORIST				F - FEMALE M - MALE		AIR BRAKES  16 - OUTSIDE MIRROI	R	ANGRY, DISTURBED) 4- ILLNESS		G TEST RE PHETAMINES	
7 - BOOSTER SE B - HELMET US		99 - OTHER / UNKNOWN				U - OTHER / UNKNOWN		17 - PROSTHETIC AID		5- FELL ASLEEP, FAINTED, FATIGUED, ETC.		RBITURATES	
9 - PROTECTIVE (ELBOW, KNI								18-OTHER		6- UNDER THE INFLUENCE	A CAL	NZODIAZEPINI NNABINOIDS	ES
10 - REFLECTIVE	CLOTHING									OF MEDICATIONS / DRUG /ALCOHOL	5 - 000	CAINE	. 67
11 - LIGHTING - I										9 OTHER / UNKNOWN	6 - 0P1 7 - 0T1	IATES / OPIOID HER	S
99 - OTHER / UNK	CNOWN						J.					GATIVE RESUL	LTS

	OF PUBL	IC SAFETY U	CCUPANT /	WITNE	SS ADDENDUM	l		22-0		45	ř - ř	1 1 1
	02	1	ST, FIRST, MEDDLE  KER, LUCIA KA	THI FFN				11131	E OF BIRTH		AGE 33	GENDER F
							CONTACT PHONE - INCLUDE AREA CODE					
ADDRESS: STREET, CITY, STATE, ZIP  164 LOWER HILLSIDE DR BELLBROOK OH 45305 2112  INJURIES INJURED EMS AGENCY (NAME)  INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT							<u> </u>	1 1				
	INJURIES 5	TAKEN 1	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)  SAFETY EQUIPMENT USED  Q 4				DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION 1	TRAPPED
ľ	UNIT # NAME: LAST, FIRST, MIDDLE								E OF BIRTH		AGE	GENDER
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CCUPAN		: STREET, CITY, OWER HIII	, STATE, ZIP Iside Dr Bellbroo	k OH				CONTACT PHONE	- INCLUDE AREA CO	DE I	ř ř	
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ì	# TINU	l	ST, FIRST, MIDDLE				<u> </u>		E OF BIRTH		AGE	GENDER T./I
Į.	ADDRESS	Speak	er, Mathias					04212			+	M_
OCCUPAN		, ,	side DR Bellbro	ok OH 4530	)5			CONTACT PHONE	INCLUDE AREA CO	DE		
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	02	Speak	er, Michael					03052	2018	_ 41	4	M
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ı	1 - FATA			1 - NONE US	ED - COCCUPANT		T – LEFT SIDE ORCYCLE DRIV	FR)	1 - NOT DE	PLOYED		
ı			RIOUS INJURY		ER BELT ONLY USED		T - MIDDLE		2 - DEPLO' 3 - DEPLO'	YED FRONT		
ı		SIBLE INJU		3 - LAP BEL	T ONLY USED	3 - FRON	T - RIGHT SIDE		J- DEFEU	I CO SIDE		
ı	5 NOA					4 - SECO	ND - LEFT SIDE		4 - DEPLO	YED BOTH		
5 - CHILD RESTRAINT SY INJURED TAKEN BY FORWARD FACING			INJURY		ER & LAP BELT USED	(MOT	ND – LEFT SIDE ORCYCLE PASS		FRONT	SIDE		
	J-NOA	PPARENT I		5 - CHILD RE	ESTRAINT SYSTEM -	(M0T) 5 - SECO		ENGER)	FRONT/ 5 - NOT AP	SIDE PLICABLE	(A) (A) (A)	
	1 - NOT	INJURED TRANSPOR	TAKEN BY	5 - CHILD RE FORWAR	ESTRAINT SYSTEM – D FACING ESTRAINT SYSTEM –	5 - SECO 6 - SECO 7 - THIRI	ORCYCLE PASS ND – MIDDLE ND – RIGHT SIC D – LEFT SIDE	ENGER) DE	FRONT/ 5 - NOT AP	SIDE PLICABLE YMENT UNI		
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LOCAL REPORT NUMBER

22-2021

REPORTING AGENCY

Bellbrook

MIZ DZ9/YZZ

## FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I. JOE WARTIN HEREBY MAKE THIS VOLUNTARY STATEMENT TO
A. Stout #41 AT 3815 W. Franklin St. (LOCATION)
(OFFICERS NAME) (LOCATION)
AT APPROXIMATELY 5:15 I PULLED OST
of Dot's MARISET To go WEST ON 725.
JUST PAST LITTLE SUGARCIEEK RG TREE
FRIMMERS HAD THE ROAD BLUCKED AND
I RAN INTO The BACK of A STOPPED
VE hocker
ADDRESS ( ) ADDRESS
OF WITNESS 4600 WAREHAM & 777
SIGNATURE OF JOHN OFFICER'S SIGNATURE WITNESS JOHN OF HOLL OFFICER'S SIGNATURE WITNESS JOHN OFFICER'S SIGNATURE  O

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REPORT NUMBER	22-2021	AGENCY Bellbrook	M 12 10 29 14 2

## FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

A. Stout #41 AT	
(OFFICERS NAME)	3819. W. Franklin St.
I was driving west hound stopped in front of the	magnetic springs
for on coming tracke	to pass, I was
rear onded by a car.	
ESS 164 Lowe Hill: , dc P. Bel	