| of Public SAFETY | RAFFIC C | | | | S MANDATORY F | IELD FO | RSUPP | LEME | NT REPORT | | | | | | | NUMBER | | _ |
|------------------------------------|-----------------------------|-------------------------|----------------------------------|--|---------------------------|--------------------|--------------------|-------|----------------------------|--------------|----------------|-------------------------|------|--------------|-------------------|----------------------|-----------------------|---------------------------|
| M PHOTOS TAKEN | X 0H-2 | 0H-3 | LOCAL INFORMA | MOIT | | | | | | 2_ | 0 2 | 2 3 | - (| 0 (| 0 0 | 04 | 83 | 8 |
| SECONDARY CRASH | OH-1P PRIVATE P | , | REPORTING AGE Bellbroo | | | | | | NCIC* 9 0 5 | | | KIP OLVED NSOLVEI | | MBER | OF UNI | | 27 | RROR ANIMAL UNKNOWN |
| COUNTY* LOCALITY* | CITY | CATION: CITY, | VILLAGE, TOWNSHI | lb# | | | | | | | | H DATE / | _ | E* | T | | SH SEVER | |
| 2 9 1 2-1 | /ILLAGE FOWNSHIP | Bellbroo | OK LOCATION ROAD | 21446 | | | | _ | DO AD TVDF | 1,1 | | 023 | | 85 | 듸ㄴ | 2. | FATAL SERIOUS | |
| KOBIETIPE RODIERO | 2 | - SOUTH | | NAME | | | | | ROAD TYPE | 2 | | TUDE : | | | - 1 | | SUSPECTI MINOR IN | |
| | 4 | -WEST | Franklin | | | | | | ST | 3,9 | | 3 5 | | | _1 | | SUSPECT | |
| ROUTE TYPE ROUTE NU | 2 | - SOUTH | REFERENCE ROA | ID NAME (RO | AD, MILEPOST, I | HOUSE | " } | | ROAD TYPE | | | SITUDE : | | | - 1 | | INJURY P | |
| | | - EAST | 3645 | | | | | | | -84 | - <u>.</u> 0 | 7 8 | 3 | 5 (| 5 | 5- | PROPERTY ONLY | Y DAMAGE |
| REFERENCE POINT | DIRECTION FACH REFERENCE | | ROUTE TYP | The state of the s | | | DTYPE | | | | | | INT | ERSE | CTION | RELATED | | |
| 1 - INTERSECTION 2 - MILE POST | 1 - NOR 1 2 - SOU | T | INTERSTATE ROL FEDERAL US ROL | | AL - ALLEY AV - AVENUE | LA - L | IIGHWAY ANE | | - ROAD - SQUARE | | WITI | HEN INTE | ERSE | 10173 | V OR ON | APPROAG | H | |
| 3- HOUSE # | 3-EAS 4-WES | ST T | STATE ROUTE | | BL - BOULEVARD | | MILEPOST | ST | - STREET | | WITI | HEN INTE | ERCH | IANGE | AREA | NUM | BER OF API | LI Proaches |
| DISTANCE FROM REFERENCE | DISTANCE UNIT OF MEASUR | CR-I | NUMBERED COUN | NTY ROUTE | CR - CIRCLE CT - COURT | 0V - 0 | VAL ARKWAY | | - TERRACE | | NIII | 7 | | RO | ADWA | AY | 1118 | |
| | 1-MIL | ES TR-1 | NUMBERED TOWN | NSHIP | DR - DRIVE | PI - F | | | YAW - | - | DOS | DW/AV DI | VIDE | | | | | |
| 2 0 | 2 2-FEE 3-YAR | | 4001E | 1110 | HE - HEIGHTS | PL - F | LACE | | | Ш | RUA | DWAY DI | AIDE | | | | | |
| I . | OF FIRST HARM | | | | MANNER OF CRAS | | | | т | DIRE | TION | OF TRAVI | EL | | | MEDIAN | TYPE | |
| 1 - ON ROADWA | | CROSSOVER Driveway/A | LLEY ACCESS | ll a | NOT COLLISION BETWEEN | 4 - REA 5 - BAC | | AR | | | | NORTH | | | | IVIDED FI <4 FEET | USH MED | IAN |
| 3-IN MEDIAN | 11- | RAILWAY GR | ADE CROSSING | | TWO MOTOR Vehicles in | 6-ANG | | | | - | | SOUTH EAST | 1 | | 2 - DI | IVIDED FI | .USH MED | IAN |
| 4 - ON ROADSID 5 - ON GORE | | SHARED USI TRAILS | PATHS OR | | TRANSPORT REAR-END | | | | DIRECTION ITE DIRECTION | | | WEST | | | | ≥4 FEET IVIDED. D |) Epressei | MEDIAN |
| 6 - OUTSIDE TR | AFFIG WAT | BIKE LANE | | | HEAD-ON | | ER/UNI | | | | | | | | 4 - D | IVIDED, R | AISED ME | |
| 7 - ON RAMP 8 - OFF RAMP | | TOLL BOOTH OTHER/UNK | | | | | | | | | | | | | | ANY TYPE THER/UNI | | |
| - | | | WORK ZONE TY | DE | LOCATI | OM OF C | DACU II | w wn | K ZONE | | CONTO | IUR | т | CO | NDITIO | NG | SIID | FACE |
| WORK ZONE RELAT | | 1 - L | ANE CLOSURE | | | - BEFO | RE THE | 1ST W | ORK ZONE | ' | . 1 | | | | 1 | | 2 | |
| WORKERS PRESEN | Т | _ | ANE SHIFT/CROS | | 5 4 | | VING SIG NCE WA | | ARFA | 1 97 | | IT LEVEL | ١, | DRY L | | 1 | 1 - CONCR | |
| LAW ENFORCEMEN | IT PRESENT | | /ORK ON SHOULD R MEDIAN | JE R |] 3 | -TRAN | SITION | AREA | | ı | | IT GRADE | 1 | WET | | | 2 - BLACK | |
| ACTIVE SCHOOL ZO | INE | | NTERMITTENT O THER | R MOVING W | | | /ITY ARE | | ٨ | | RVE L | | 1 | SNOW | , | | | INOUS, |
| | | 3-0 | THE K | | | 7 - 1 - 1 - 1 - 1 | THE PART OF | TAKE | | 4 - CU | RVE G | RADE | 4 - | ICE | | | 3 - BRICK | |
| LIGHT C 1 - DAYLIGHT | ONDITION | | 1 - CL | | ATHER 6-SNOW | | | | | 9 - OT | HER/U | NKNOWN | 5- | | , MUD, I RAVEL | | 4 - SLAG, | |
| 4 2- DAWN/DUSK | | | O1 2-CL | | 7 - SEVER | E CROSS | WINDS | | | | | | | WATE | R (STAI | | STONE 5 - DIRT | 1 |
| 3 - DARK - LIGH 4 - DARK - ROAD | | ED | 3 - FO 4 - RA | | OKE 8-BLOWI | | | | SNOW IG DRIZZLE | | | | 1 | MOVI SLUS | | | | VUNKNOWN |
| 5 - DARK - UNK | | | | EET, HAIL | 99 - OTHE | | | | IG BRIZZEE | | | | 1 | | " R/UNKA | IOWN | | |
| 9-OTHER/UNK | NOWN | | | | | | , , , , | | | L_ | | | L | | | | | |
| NARRATIVE | | | | | | F., | | 1 | | ' | 1 | ' | | 131 | , No. | A | | e the north |
| The driver of | | | | | | - | | | | | | | | | | A | an "N" | |
| Franklin St. p | | _ | | | | - | 11 | - | | | | | - | | | V | Cuntpas | э инауган. |
| Unit 1 stated | | | | | | _ | | | | | | | | | | | | |
| a driveway ca | _ | | | urn int | o the | - | | | | | | | | | | | | - |
| side curve to | avoid the | vehicl | e. | | | - | | | | | | | | | | | | - |
| | | | | | | | | | | | | | | | | | | |
| | | | | _ | | - | | | | | | | | | | | - | |
| | | | | | | | | | | S | ee (| DH-2 | | | | | | - |
| | | | | | | - | | | | _ | | | | | | | | 1 2 |
| | | | | | | - | | | | | | | | | | | | |
| | | | | - | | | | | | 177 | /") | | | | | | | |
| | | | | | | - | (| 20 | ノルロ | ハ | 4 | | | | | | | |
| | | | | | | | 9 | ノノ | シレ | - 1 | 7 | | | | | | | - |
| | | | | | | | | | | | | | | | | | | |
| CRASH REPORTED D | ATE/TIME | D | ISPATCH DATE / | TIME | Al | RRIVAL | DATE /T | IME | 1 | SC | ENE C | LEARED | DAT | E/TI | ME | RE | PORT TAK | EN BY |
| 1,1,032,023 | 1,852 | 1,1,03 | 32023 | 190 | 2 1103 | 2.0 | 2,3 | 15 | 031 | 10 | 3 2 | 02 | 3, | 15 | 926 | 5 X | POLICE AG | SENCY |
| TOTAL TIME | OTHER | TOTAL | OFFICER'S | NAME* | | | | Сне | CKED BY OFFI | ' | | | | | | | MOTORIST | |
| ROADWAY CLOSED INVE | SILEATION TIME | MINUTE | s Moor | | | | | Ve | etter | | | | | | | | SUPPLEM CORRECTION | OR ADDITION |
| 0 0 | , 0 , | 1,2, | 4 B | OFFICER'S | BADGE NUMBE | R* | | E | CHECKED E | ov OFFI | | BADGE 3 | NUM | IBER* | | | TO AN EXISTING RE | |
| | | نگ کا | | - 3 | | | | | | | | _ | _ | 1 | | _ | | |



| CO - MAIL MINISTERIAL OF MAIL | | 2 0 2 3 - 0 0 0 0 0 4 8 3 8 |
|---|---|--|
| UNIT # OWNER NAME: LAST, FIRST, MIDDLE (LISAME AS DRIVER) | GWNED BUOME | 2023-00004838 |
| <u> </u> | OWNER PHONE: INCLUDE AREA CODE (SAME AS DRIVER) 9 3 7 9 0 3 3 9 6 3 | DAMAGE |
| OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER) 326 CEDARLEAF CT Court CENTERVILLE, OH 45459 | | DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE |
| COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP | | 2 1 - NONE 3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE |
| | COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE | 9 - UNKNOWN |
| O H FYVZOO1 | VEHICLEYEAR VEHICLE MAKE | DAMAGED AREA(S) |
| PHY | 0 5 7 2 0 0 3 BMW | INDICATE ALL THAT APPLY |
| VERIFIED CINCINNATE COMPANY INSURANCE POLICY # O244 28665 | COLOR VEHICLE MODEL | 11 12 0 11 12 1 |
| TYPE OF USE US DOT # | TOWED BY: COMPANY NAME | 10 11 1 2 |
| COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE | TOWED BY: COMPANY NAME | 0 2 3 3 3 |
| INTERLOCK HIT/SKIP UNIT #OCCUPANTS VEHICLE WEIGHT GYWR/GCWI | HAZARDOUS MATERIAL MATERIAL CLASS # PLACARD ID # | 3 9 9 3 |
| EQUIPPED 2 2 · 10,001 · 26K LBS | S. RELEASED CLASS # PLACARD ID # | 8 7 5 7 |
| 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART | 1 | 7 6 5 11 12 7 6 5 |
| 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13 - SMOWNOBILE 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINCE FINITY TRIPLY | 19 - BUS (16+ PASSENGERS) 23 - PEDESTRIAN / SKATER 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) | 10 2 |
| UNIT TYPE 4 - PICK UP 10-MOPED OR MOTORIZED 15-SEMI-TRACTOR | 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST | 10 1 2 |
| 5 - CARGOVAN BICYCLE 16 - FARM EQUIPMENT 6 - VAN (9.15 SEATS) 11 - ALL TERRAIN VEHICLE 11 MOTORINAMENT | 21 - HEAVY EQUIPMENT 26 - BICYCLE 22 - ANIMAL WITH RIDER OR 27 - TRAIN | 9 3 3 |
| ATV/UTV) 17-MOTORHOME | ANIMAL-DRAWN VEHICLE 99 - UNKNOWN OR HIT/SKIP | |
| # OF TRAILING UNITS WASVERLICE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION NOTE THE PROPERTY OF THE PROPERTY | | 12 7 |
| | 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN | 11 1 8 9 12 1 |
| 1 - DRIVER ASSISTANCE AUTONOMOUS 2 - PARTIAL AUTOMATION | 4 - HIGHAUTOMATION 5 - FULL AUTOMATION | 10 1 2 10 11 1 2 |
| 1. NONE MODE LEVEL | 3 - FULL AUTOMATION | 10 2 |
| O 1 , 2 - TAXI 7 - RUS_INTERCITY 12 AVERAGE | 16 - FARM 21 - MAIL CARRIER | 8 4 3 |
| SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE | 17 - MOWING 99 - OTHER / UNKNOWN 18 - SNOW REMOVAL | 17 7 7 |
| FUNCTION 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY | 19 - TOWING | |
| TO GENOMOSTICAL EGOLI BEAT | 20 - SAFETY SERVICE PATROL | 6 |
| / NOT APPLICABLE MOTOR VEHICLE CHASSIS | B - POLE 12-CONCRETE MIXER | 12 12 12 |
| BODY 2 - BUS 4 - LOGGING 6 - CARGO VANVENCLOSED BOX | 7 - CARGOTANK 13 - AUTOTRANSPORTER 10 - FLAT BED 14 - CARRACE (DECLINE) | |
| 7 - GRAIN/CHIPS/GRAVEL | IO-FLAT BED 14-GARBAGE/REFUSE 11-Dump 99-Other/Unknown | و د الله و د |
| 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICKTIRES S | - MOTOR TROUBLE 99 - OTHER / UNKNOWN | |
| VERTICE 4 TOTAL LARGES A STEEDING A | O - DISABLED FROM PRIOR | |
| 1. INTERCECTION IN DIVERS | ACCIDENT | 6 6 6 |
| CROSSWALK 5-BICYCLE LANE 9 | - MEDIAN/CROSSING ISLAND 12-FIRST RESPONDER | - NO DAMAGE [0] KI-UNDERCARRIAGE [14] |
| LOCATION COOCCULAL CONTROL CROSSWALK 8-SIDEWALK | O-DRIVEWAY ACCESS AT INCIDENT SCENE O-SHARED USE PATHS OR 99-OTHER/ UNKNOWN | ☐-TOP [13] ☐-ALL AREAS [15] |
| AT IMPACT 5 - TRAVEL LANE - OTHER LOCATION | TRAILS | - UNIT NOT AT SCENE [16] |
| 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 2 - NON-COLLISION 4 2 - BACKING 8 - ENTEDING TRANSCOLARS | - NEGOTIATING A CURVE 18 - APPROACHING | |
| 3-STRIKING 13-CHANGING LANES 9-LEAVING TRAFFIC LANE | - ENTERING OR CROSSING OR LEAVING VEHICLE SPECIFIED LOCATION 19-STANDING | INITIAL POINT OF CONTACT |
| ACTION A STOREY DECEDACY A CHEMICAL CO. | - WALKING, RUNNING, 20-OTHER MONLMOTORIST | 0 - NO DAMAGE 14 - UNDERCARRIAGE 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE |
| | 21-STANDING OUTSIDE | DIAGRAM 99-INKNOWN |
| | - WORKING DISABLED VEHICLE -PUSHING VEHICLE 99 - OTHER / UNKNOWN | 13 - TOP |
| 1 - NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM A 17 | MOIN COMPANY | TRAFFIC |
| 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA PARKED POSITION 18. | OPERATING DEFECTIVE 22 - NOT DISCERNIBLE | RAFFICWAY FLOW TRAFFIC CONTROL |
| 4-RANSTOP SIGN 10-IMPROPER PASSING ILLEGALLY | EQUIPMENT 23 - OPENING DOOR INTO | 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 2 - TWO-WAY 6 2 - SIGNAL 5 - WILL BOXEN |
| TIRCUMSTANCES 3 - UNSAFE SPEED 11 - DROVE OFF ROAD | SPILLING 99_0THED IMPROVED ACTION | 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL |
| 6 - IMPROPER TURN 12 - IMPROPER BACKING 16 - WANN WAY 20 - SEQUENCE OF EVENTS | IMPROPER CROSSING | F THROUGH LANES RAIL SPARE CROSSING |
| # D | | ON ROAD 1 - NOT INVOLVED |
| 11 - CROSS CENTERLINE 16 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE 16- | RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE | 2 - INVOLVED-ACTIVE CROSSING |
| 3 - IMMERSION 8 PAN OCCUPANT TRAVEL 17 - 3 | ANIMAL - FARM EQUIPMENT | 3 - INVOLVED-PASSIVE CROSSING |
| 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 12 - DOWNHILL RUNAWAY 19.4 | NIMAL DEER 23 - STRUCK BY FALLING, INIMAL OTHER SHIFTING CARGO OR | UNIT / NON-MOTORIST DIRECTION |
| 5 - CARGO / EQUIPMENT 10 - CROSS MEDIAN 15 - OTHER MON-LULLISIUM 20 - F | MOTOR VEHICLE IN ANYTHING SET IN MOTION BY A MOTOR VEHICLE | 1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST |
| 15-PEDALCYCLE 21-E | ARKED MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT F | FROM 4 3-EAST 7-SOUTHEAST |
| COLLISION WITH FIXED OBJECT - S 25-IMPACT ATTENUATOR 31-GUARDRAIL END 37-TRAFFIC SIGN POST 43-C | | 4 - WEST 8 - SOUTHWEST |
| 7 CRASH CUSHION 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - D | TCH EQUIPMENT | 9 - OTHER / UNKNOWN |
| STRUCTURE 39-LIGHT/LUMINARIES 45-E | MBANKMENT 51-WALL | UNIT SPEED DETECTED SPEED |
| 28-BRIDGE PARAPET BARRIER 40-UTILITY POLE 47-W | ENCE 52 - BUILDING Ailbox 53 - Tunnel | 2 0 1 1 1-STATED / ESTIMATED SPEED |
| 29-BRIDGE RAIL BARRIER OR SUPPORT 48-TH | REE 54 - OTHER FIXED OBJECT | 2 - CALCULATED / EDR |
| 1 | RE HYDRANT 99 - OTHER / UNKNOWN | POSTED SPEED 3 - UNDETERMINED |
| Y8304 OH1U 1/19 [760-0820] | | 2 5 |
| | (1-)(1 | PAGE 2 OF 4 |
| | 6 | PAGE 0F 4 BBPD 2019 OH-1 2023-00004838 Page 2 OF 4 |

| | PARTMENT VICE SAFETY | OTORIST / NO | N-N | OTOR | IST | | | | 004838 |
|---|-------------------------------|--|----------------------------|--------------------------|--------------------------------------|---------------------|--|---|---|
| UNIT# | NAME: LAST, | FIRST, MIDDLE | | | | | | DATE OF BIRTH | AGE GENDER |
| 0 1 | KEITH. T | ODD JOEL | | | | | | 0 3 1 5 1 9 | _ _ |
| ADDRESS: | STREET, CITY, ST | | | | | | | CONTACT PHONE - INCLUDE AREA CO | · |
| 2 | | CT Court CENTERVILI | F. OH 4 | 15450 | | | | 9 3 7 9 0 | .3 .3 .9 .6 .3 |
| <u> </u> | | EMS AGENCY (NAME) | | _ | EN TO: MEDICAL FACIL | ILA URANE CIAN | CACETY CONTONENT | | |
| 5 | TAKEN BY | Zano Praziro I (mante) | | THE ONLY TAN | CN 10. MEGICAL PAOLE | at a strame, of the | USED 9 9 | DOT-COMPLIANT 0 1 | AIR BAG USAGE EJECTION TRAPPED |
| OL STATE | OPERATOR L | ICENSE NUMBER | | OFFENSE | CHARGED | LOCAL | OFFENSE DESC | RIPTION | CITATION NUMBER |
| OL STATE | | | | | | CODE | | | |
| OL CLASS | ENDORSEMENT SELECT UP TO 2 | RESTRICTION SELECT | | | ALCOHOL / DRUG SU | SPECTED | CONDITION | STATUS TYPE VALUE S | DRUG TEST(S) STATUS TYPE RESULT SELECTUPTO |
| | 32220707102 | | BY | TRACTED | ALCOHOL | MARIJUANA | | | |
| | L | | | L | OTHER DRUG | | | | |
| UNIT # | NAME: LAST, | FIRST, MIDDLE | | | | | | DATE OF BIRTH | AGE GENDER |
| | | | | | | | | | |
| ADDRESS: | STREET, CITY, ST | TATE, ZIP | | | | | | CONTACT PHONE - INCLUDE AREA CO | DE |
| | | | | | | | | | |
| ADDRESS: | INJURED TAKEN | EMS AGENCY (NAME) | | INJUREDTAK | EN TO: MEDICAL FACIL | ITY (NAME, CITY) | | DOT-COMPLIANT SEATING POSITION | AIR BAG USAGE EJECTION TRAPPED |
| | BY | | | | | | USED | MC HELMET | , , , , , |
| OL STATE | OPERATOR L | ICENSE NUMBER | | OFFENSE | CHARGED | LOCAL | OFFENSE DESC | RIPTION | CITATION NUMBER |
| | | | | | | CODE | | | |
| DL CLASS | ENDORSEMENT SELECT UP TO 2 | RESTRICTION SELECT | UPTO3 DRI | VER TRACTED = | ALCOHOL / DRUG SU | SPECTED | CONDITION | ALCOHOL TEST STATUS TYPE VALUE 1 | DRUG TEST(S) STATUS TYPE RESULT SELECT UPTO 4 |
| | GEECOT OF TOE | | BA | TRACTED | ALCOHOL | MARIJUANA | | STATUS THE VALUE . | STATOS TIPE RESULT SELECTORION |
| ســــــــــــــــــــــــــــــــــــــ | | ــا نــــــا نـــــا أ | | | OTHER DRUG | | | L | |
| UNIT # | NAME: LAST, | FIRST, MIDDLE | | | | | | DATE OF BIRTH | AGE GENDER |
| سب | | | | | | | | | |
| ADDRESS: | STREET, CITY, ST | TATE, ZIP | | | | | | CONTACT PHONE - INCLUDE AREA CO | JOE |
| | | | | | | | | | |
| INJURIES | INJURED TAKEN | EMS AGENCY (NAME) | | INJURED TAK | ENTO: MEDICAL FACIL | ITY (NAME, CITY) | SAFETY EQUIPMENT USED | DOT-COMPLIANT SEATING POSITION | AIR BAG USAGE EJECTION TRAPPED |
| | BY | | | | | | U3ED | MC HELMET | |
| OL STATE | OPERATOR L | ICENSE NUMBER | | OFFENSE | CHARGED | LOCAL | OFFENSE DESC | RIPTION | CITATION NUMBER |
| | | | | | | | | | |
| OL CLASS | ENDORSEMENT SELECT UPTO 2 | RESTRICTION SELECT | | VER TRACTED | ALCOHOL / DRUG SU | SPECTED | CONDITION | ALCOHOL TEST STATUS TYPE VALUE : | DRUG TEST(S) STATUS TYPE RESULT SELECT UP 104 |
| | | | BY | TRACTED | = - | MARIJUANA | | | ALSOEI SELECTOR |
| L | L | | | L | OTHER DRUG | | | | |
| 1- FATAL | IRIES | 1-FRONT-LEFT SIDE | 1 - NOT DEP | UR BAG | 0L CL 1-CLASS A | ASS | OL RESTRIC | material state of the state of | TEST STATUS 1 - NONE GIVEN |
| | SERIOUS INJURY | (MOTORCYCLE DRIVER) | 2 - DEPLOY | | 2 - CLASS B | | 2 - CDL INTRASTAT | E ONLY 2 - MANUALLY OPERATING | GAN 2 - TEST REFUSED |
| 3 - SUSPECTED | | 2 - FRONT MIDDLE 3 - FRONT RIGHT SIDE | 3 - DEPLOY | | 3-CLASS C | | 3-CORRECTIVE LE | NSES ELECTRONIC COMMUNI DEVICE (TEXTING, TYP) | J-1E31 GIVEN, CONTAMINATED |
| 4 - POSSIBLE IN 5 - NO APPAREN | | 4 - SECOND - LEFT SIDE | 4 - DEPLOY | ED BOTH FRONT | / SIDE 4 - REGULAR CLA (OHIO = D) | SS | 4 - FARM WAIVER 5 - EXCEPT CLASS | DIALING | A TEST CIVEN DECLITE MINUS |
| | | (MOTORCYCLE PASSENGER) | | 'LICABLE MENT UNKNOWN | C MAC MODEL OF | ILY | 6-EXCEPT CLASS | S TACIONO DE TIAMBO I II | CE 5-TEST GIVEN, RESULTS |
| | TAKEN BY | 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE | | | 6 - NO VALID OL | | & CLASS B BUS | 4 - TALKING ON HAND-HEL | |
| 1 - NOT TRANSPO /TREATED AT | | 7 - THIRD - LEFT SIDE | E. | IECTION | OL ENDOR | SEMENT | 7 - EXCEPT TRACTO 8 - INTERMEDIATE | LICENSE 5 - OTHER ACTIVITY WITH | ALCOHOL TEST TYPE |
| 2 - EMS | | (MOTORCYCLE SIDE CAR) 8 - THIRD MIDDLE | 1 - NOT EJE | | H - HAZMAT | | RESTRICTIONS | ELECTRONIC DEVICE | 1 - NONE 2 - BLOOD |
| 3-POLICE 9-OTHER/UNK | Nown | 9 - THIRD - RIGHT SIDE | 2 - PARTIAL 3 - TOTALLY | LY EJECTED 'EJECTED | M - MOTORCYCLE P - PASSENGER | | 9 - LEARNER'S PER RESTRICTIONS | MIT 6-PASSENGER 7-OTHER DISTRACTION | 3 - URINE |
| | | 10 - SLEEPER SECTION OF TRUCK CAB | 4 - NOT APP | | N - TANKER | | 10 - LIMITED TO DAY | LIGHT ONLY INSIDE THE VEHICLE | 4 - BREATH |
| 1-NONE USED | QUIPMENT | 11 - PASSENGER IN OTHER | Y | RAPPED | Q - MOTOR SCOOT | | 11 - LIMITED TO EMP 12 - LIMITED - OTHE | THE VEHICLE | UTSIDE 5-OTHER |
| 2 - SHOULDER B | BELT ONLY USED | ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, | 1 - NOT TRA | | R - THREE-WHEE S - SCHOOL BUS | L MOTORCYCLE | 13- MECHANICAL DE | EVICES 9-OTHER/UNKNOWN | DRUG TEST TYPE |
| 3-LAP BELT ON | | PICK-UP WITH CAP) | 2 - EXTRICA | | T - DOUBLE & TRI | PLE TRAILERS | (SPECIAL BRAKE CONTROLS, OR O | | 1 - NONE 2 - BLOOD |
| | LAP BELT USED | 12 - PASSENGER IN UNENCLOSED Cargo area | 3 - FREED B | FICAL MEANS By | X - TANKER / HAZ | | ADAPTIVE DEVI | CES) 1 - APPARENTLY NORMAL | 3 - URINE |
| FORWARD FA | | 13-TRAILING UNIT | | CHANICAL MEAN | IS GENE | ER | 14 - MILITARY VEHICLE | E-THIOMAL IIII MININEN | 4-0thett |
| 6 - CHILD RESTR | RAINT SYSTEM – | 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) | | | F-FEMALE | | AIR BRAKES | ANGRY, DISTURBED) | DRUG TEST RESULT(S) |
| 7 - BOOSTER SE | | 15 - NON-MOTORIST | | | M - MALE | DATE | 16-OUTSIDE MIRRO | D. IELIICOO | 1 - AMPHETAMINES |
| 8 - HELMET USE | | 99 - OTHER / UNKNOWN | | | U - OTHER / UNKN | UWN | 17 - PROSTHETIC AID 18 - OTHER | 5 - FELL ASLEEP, FAINTED, Fatigued, etc. | 2 - BARBITURATES 3 - BENZODIAZEPINES |
| 9 - PROTECTIVE (ELBOW, KNE | | | | | | | | 6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUG | A CANNADINOIDS |
| 10-REFLECTIVE | • | | | | | | | /ALCOHOL | 5 - COCAINE |
| 11 - LIGHTING - P / Bicycle on | | | | | | | | 9- OTHER / UNKNOWN | 6 - OPIATES / OPIOIDS |
| 99 - OTHER/UNK | | | | | | (| 7(1) | o)\V/ | 7 - OTHER 8 - Negative results |
| IOVOODO OLIAI | | | | | | 1 | | -) | commre medució |

| Q | OHIO DE | PARTMENT IC SAFETY IS - PARTICIPAL | CCUPANT / | WITNE | SS ADDENDUN | Л | | 2023 | - | O O 4 | - | 8 |
|---------------|--|--|-------------------|----------------------------|--------------------------------|--------------------------------------|--------------------------------|-------------------------|--------------------|---------------|-----------|---------|
| | UNIT# | NAME: LAS | T, FIRST, MIDDLE | | | | | DAT | E OF BIRTH | | AGE | GENDER |
| H | 02 | KEITH, | KAREN ZENGEL | | | | | 1 2 3 | 1 1 9 | 6 2 | 6 ,0 , | , F |
| AN | ADDRESS: | STREET, CITY, | STATE, ZIP | | | | | CONTACT PHONE | - INCLUDE AREA CO | DE . | | 1 |
| | 326 CEI | DARLEAF | CT Court CENTER | VILLE, OH 4 | 15459 | | | | 1 4 | 1 1 | 1 1 | 1 1 |
| ĕ- | INJURIES | INJURED | EMS AGENCY (NAME) | | INJURED TAKEN TO: MEDICAL FAC | ILITY (NAME, CITY) | | DOT-COMPLIANT | SEATING POSITION | AJR BAG USAGE | EJECTION | TRAPPED |
| и | 5 , | TAKEN BY | | | | | USED O 4 | MC HELMET | 0 3, | , 1 | , 1 | 1 |
| | UNIT# | NAME: LAS | T, FIRST, MIDDLE | | | | | DAT | E OF BIRTH | | AGE | GENDER |
| н | | | | | | | | | 1 1 | | 4 r | |
| ANT | ADDRESS: | STREET, CITY, | STATE, ZIP | | | | | CONTACT PHONE | | DE | | |
| CCUPAN | | | | | | | | | 9 9 | | | |
| P-1- | INJURIES | INJURED | EMS AGENCY (NAME) | | INJURED TAKEN TO: MEDICAL FAC | ILITY (NAME, CITY) | SAFETY EQUIPMENT | | SEATING POSITION | AIR BAG USAGE | EJECTION | TRAPPED |
| Ħ | | TAKEN BY | | | | | USED | DOT-COMPLIANT MC HELMET | | | .] | ļ |
| 2 | UNIT # | NAME: LAS | T, FIRST, MIDDLE | = | | | | DAT | E OF BIRTH | T | AGE | GENDER |
| E | | | | | | | | | | | | GENDER |
| | ADDRESS: | STREET, CITY, | STATE, ZIP | | | | | CONTACT PHONE | • INCLUDE AREA CO | | | |
| CCUPAN | | | | | | | | | or v | 40 /S | | |
| _ | INJURIES | | EMS AGENCY (NAME) | | INJURED TAKEN TO: MEDICAL FACE | ILITY (NAME, CITY) | SAFETY EQUIPMENT | | SEATING POSITION | AIR BAG USAGE | EJECTION | TRAPPED |
| н | | TAKEN BY | | | | | USED | DOT-COMPLIANT | | | | |
| 'n | UNIT # | NAME: LAS | T, FIRST, MIDDLE | | | | | DAT | E OF BIRTH | | AGE | GENDER |
| ı | | | ,,,,,,, | | | | | | L OV DAVIN | | AGE | GENDER |
| | ADDRESS: | STREET, CITY, | STATE, ZIP | - | | | | CONTACT PHONE | • INCLUDE AREA CO | ns | | |
| GCUPAN | | | | | | | | Va. 12 17 | N W | y 200 | | |
| P-1 | INJURIES | INJURED | EMS AGENCY (NAME) | | INJURED TAKEN TO: MEDICAL FACE | ILITY (NAME, CITY) | SAFETY EQUIPMENT | | SEATING POSITION | AIR RAG USAGE | EJECTION | TRAPPED |
| В | | TAKEN BY | | | | | USED | DOT-COMPLIANT MC HELMET | | | | |
| Ē | Lan | INJU | JRIES | SAFETY | EQUIPMENT USED | Name and Address of the Owner, where | SEATING POS | ITION | | AIR BAG U | SAGE | |
| Г | 1 - FATA | L | | 1 - NONE US | | | T – LEFT SIDE | | 1 - NOT DE | | | |
| B | 2 - SUSF | ECTED SE | RIOUS INJURY | VEHICLE | OCCUPANT | | DRCYCLE DRIV | ER) | | YED FRONT | | |
| ı | 3 - SUSF | PECTED MI | NOR INJURY | 2 - SHOULDE | ER BELT ONLY USED | | T – MIDDLE T – RIGHT SIDE | | 3 - DEPLO | YED SIDE | | |
| ı | 4 - POSS | SIBLE INJU | RY | 3 - LAP BELT | | | ND - LEFT SIDE | | 4 - DEPLO | | | |
| П | 5 - NO A | PPARENT I | NJURY | | R & LAP BELT USED | | DRCYCLE PASS | ENGER) | FRONT | | | |
| b | 100 | INJURED | TAKEN BY | FORWARI | STRAINT SYSTEM – D FACING | | ND – MIDDLE ND – RIGHT SIE | DE | 5 - NOT AP | | (818)4/84 | |
| ı | | TRANSPOR | | | STRAINT SYSTEM - | 7 - THIR | LEFT SIDE | | A- DELFO | YMENT UNK | NOWN | |
| 6 | | ATED AT S | CENE | REAR FA | | | DRCYCLE SIDE D – MIDDLE | CAR) | 13000 | EJECTI | ON | |
| B | 2 - EMS | | | 7 - BOOSTER | | | O – RIGHT SIDE | | 1 - NOT EJ | | | |
| Ħ | 3 - POLI | | NA/N) | 8 - HELMET | | | PER SECTION (| | | LLY EJECTI | | |
| H. | 9 - OTHER / UNKNOWN 9 - PROTECTIVE PADS USED 11 - PASSEN (ELBOW, KNEES, ETC.) CARGO. | | | | ENGER IN OTH O AREA (NON-TR | | 4 - NOT AP | Y EJECTED | | | | |
| r | F-FEMA | | IDER | 10- REFLECT | IVE CLOTHING | BUS, P | ICK-UP WITH CAP | 2) | 4- 1001 AF | | | |
| | M - MALE | | | 11 - LIGHTING / BICYCLI | G – PEDESTRIAN | | ENGER IN UNE O AREA | NCLOSED | 1 - NOTTR | TRAPPI | - U | |
| B | U - OTHE | R / UNKNO\ | WN | 99 - OTHER / I | | 13 - TRAII | | | | ATED BY M | ECHANIC | : 11 |
| B | | | | 77- OTHER? | JISKIEG EVIE | | G ON VEHICLE TRAILING UNIT) | EXTERIOR | MEANS | | LUIMIII | /AL |
| | | | | | | 15 - NON-I | | | | BY NON-ME | CHANIC | AL |
| W, | | | | | | 99 - OTHE | R / UNKNOWN | | MEANS | | | |
| | NAME: LAS | T, FIRST, MIDDI | LE | | | | | DAT | E OF BIRTH | | AGE | GENDER |
| INESS | 1000000 | | | | | | | | | | | |
| <u>.</u> ≽ | ADDKESS: | STREET, CITY, | STATE, ZIP | | | | | CONTACT PHONE | - INCLUDE AREA COI | DE | | |
| M. | NAME | T, FIRST, MIDDI | IF. | | | | | 047 | E OF BIRTH | | ACC | OFWE- |
| ESS | MAINT: LAS | ii, rinai, MHDDI | | | | | | DAI | C OF DIKIN | | AGE | GENDER |
| -6 | ADDRESS: | STREET, CITY, | STATE, ZIP | | - (C) | AM | | CONTACT PHONE | - INCLUDE AREA COI | DE | | |
| Š | | | | | | U/D) | No | | 1 | | F - 3 | 7 3 |
| F. | NAME: LAS | T, FIRST, MIDD | LE | - | | | 11 | DAT | E OF BIRTH | | AGE | GENDER |
| ESS | | | | | | | · | | 1. 1. 1 | | 1 1 | |
| N I I | ADDRESS: | STREET, GITY, | STATE, ZIP | | | | | CONTACT PHONE | - INCLUDE AREA COL | DE 3 | | |
| | | | | | | | | | 3 7 | <u> </u> | | |

OHIO TRAFFIC ACCIDENT - DIAGRAM/NARRATIVE CONTINUATION

| LOCAL REPORT 2023-00004838 | REPORTING AGENCY | Bellbrook Police | M11 D 03 Y 2023 |
|-------------------------------|---------------------|-----------------------|-----------------|
| IN COUNTY OF 29 Greene | ACCIDENT V | V. Franklin ST Street | |

On 11/3/23 at 1852 hours, I was dispatched for a reported Hit/ Skip crash that occurred on W Franklin St. just west of Little Sugarcreek. The complainant, Todd Keith, stated he was the last car in the line traveling west on W. Franklin St and had just crossed the bridge construction zone. Mr. Keith stated a vehicle appeared in front of him causing him to break and veer to the right causing his front right tire and panel to make contact with the outside curb.

Mr. Keith stated he followed the vehicle that had pulled out and his wife, Karen Keith, wrote down the license plate of the vehicle. He followed the vehicle, a Toyota sedan with plate number HSQ6696, expecting the vehicle to pull over and stop. Mr. Keith stated when it did not stop, he tried to pull along side and ask the driver to pull over. The driver of the Toyota did not stop and Mr. Keith pulled into the parking lot of Fearless Church on Whites Corner near Wilmington Pike to report the incident. Mr. Keith provided a written statement.

The vehicle registration returned to

and was registered to

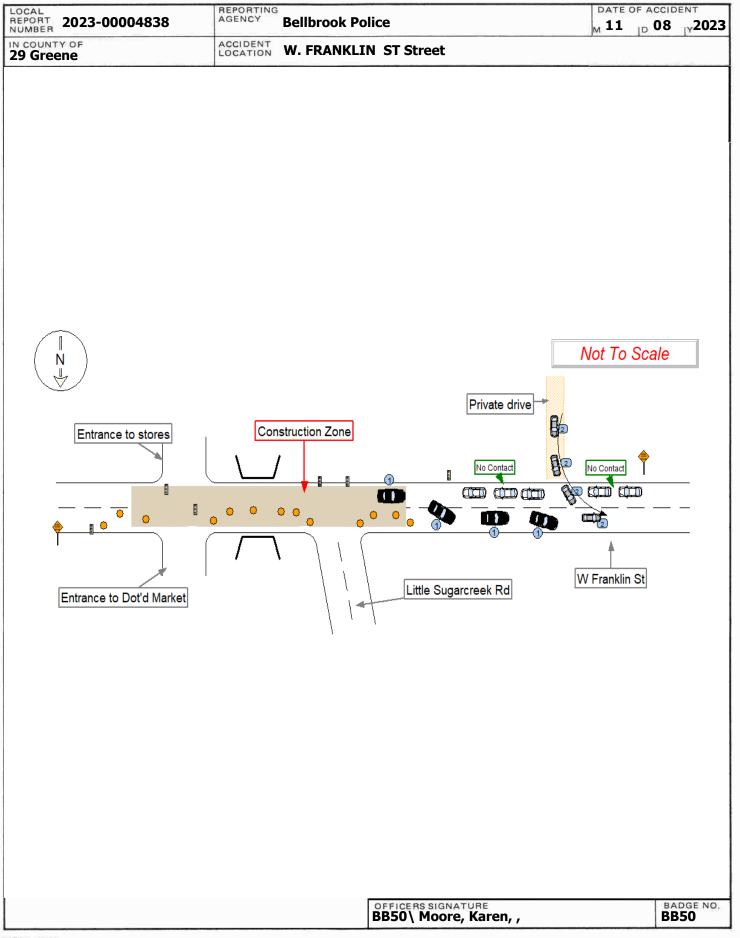
I attempted to speak with Ms. Grizzell, but due to conflicting work schedules, I was unable to speak with her until 11/9/23. Ms. Grizzell stated that she was waiting at the end of her driveway to turn west on W. Franklin St. Ms. Grizzell stated that she waited until the line had cleared and there were no other vehicles coming before turning out. Ms. Grizzell stated after pulling out, a vehicle came up from behind her and the occupant was yelling at her. She stated she did not stop. Ms. Grizzell was on he way to work but agreed to complete a written statement to be picked up on 11/10/23.

There were no independent witnesses to identify a driver at fault or confirm the location of the damage since there was no contact between the two vehicles.

BWC was on.



OFFICERS SIGNATURE BB50\ Moore, Karen, , BADGE NO



Ohio Department of Public Safety

TRAFFIC CRASH WITNESS STATEMENT

| LOCAL REPORT NUMBER | REPORTING AGENCY | DATE OF CRASH |
|---------------------|------------------|---------------|
| 23-4838 | BellbrokPD | M 11 03 123 |

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

| , |
|---|
| I, 1000 KEITH HEREBY MAKE THIS VOLUNTARY STATEMENT TO |
| MORE AT W. PANKIN ST. |
| COCATION |
| HEADING WEST ON FRANKLIN, N'ST WENT THRY THE LIGHT AT |
| UTILE GUER CREEK - FOLLOWING TRAFFIC |
| ANOTHER DRIVER, PULLED OUT IN PRONT OF ME FROM |
| THE UTT GIDE, SO ETTUER WAS CUTTING IN BETWEEN |
| TRAFFIC OR POSSIBLY NOT DIO A 4-TURN, 1010 NOT |
| SEE THE CAR UNTIL IT WAS DIRECTLY IN FRONT OF ME. |
| LOCKED UP BREAKS TO AVOID HITTING THE OTHER CAR |
| AND PULED TO THE RIGHT IMPACTED THE CENTENT BIRM |
| ON PAR RIGHT GIVE OF THE CAR. BUSTED RIGHT PROVI |
| FENDER, WHEEL, TIRE & POSINGLY RT. FROTT STROTT |
| OTHER DANGER/CAR TO NOT ALL NER. AND TURNED |
| RIGHT ON WILMWEBEN AND SOED AWAY, |
| |
| TOYOTH FA HISTORY |
| |
| # 4506696 |
| |
| GUPY |
| |
| |
| ADDRESS OF WITNESS CRARCESF CT. CONTROVIUE, OH 931-903-3913 |
| X WWW DYMAC X |
| |

HSY 7003 12/19 [760-1500]

TRAFFIC CRASH WITNESS STATEMENT

| | | No crosh |
|---------------------|------------------|----------------|
| LOCAL REPORT NUMBER | REPORTING AGENCY | DATE OF CRASH |
| 23 - 4838 | Bernsruck PD | M 11 10 3 1423 |

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

| 1, Vicki GT (228) HEREBY MAKE THIS VOLUNTARY STATEMENT TO |
|--|
| OFFICER'S NAME AT 3745 W. Frenklin. St LOCATION |
| I'm not sure of the date you're referring |
| too. It is really hard to pull out of our |
| driveway since the bridge construction transpired |
| I always inch out from my driveway into the |
| can't see the opcoming trafficules there's |
| alot of cars at the red light. I always pull |
| out slow but I want before doing that because |
| I don't want to hit ambody - it savery dangerous |
| situation. The evening that's in question |
| after pulling out slowty I always look in |
| my rear view mirror - I didn't see any |
| cats even close to me after puling obst of |
| ony driveway so when the man ; woman |
| pulled up text to me at st Rt 725. Wilmigton An |
| orderspation and was yelling at me - at Gist |
| I couldn't make out what they were yelling |
| out then the lady on the passenger side |
| yellad out ; said you almost hit is I didn't |
| ADDRESS OF WITNESS That they were insinuating. I had no |
| 3645 W. Franklin St. Bellbrook Ohlo SIGNATURE OF WITNESS OFFICER'S SIGNATURE |
| × Vicki Grezell × Mone \$50 GOPY |

clue, like I said before, I take my time pulling out my driveway and always look immediately in my recorvious mirror - I didn't see any cors
that were anywhere alose to me - I think I would remember that, what those people are daining. I'm a nurse and was on my way to work. Honestly-I didn't see any cars ever close to me when pulling out my driveway. I was appalled at them yelling at one like they did. It anybody is to brane it's the City of Bellbrook with the entire set-up they came up with - very dangerous for any of as pulling out of our driveway, unable to see any orcaning traffic, it's a worder there hasn't been any accident's at out driveway!

> 937-681-6550 Vicki Grzzell

COPY