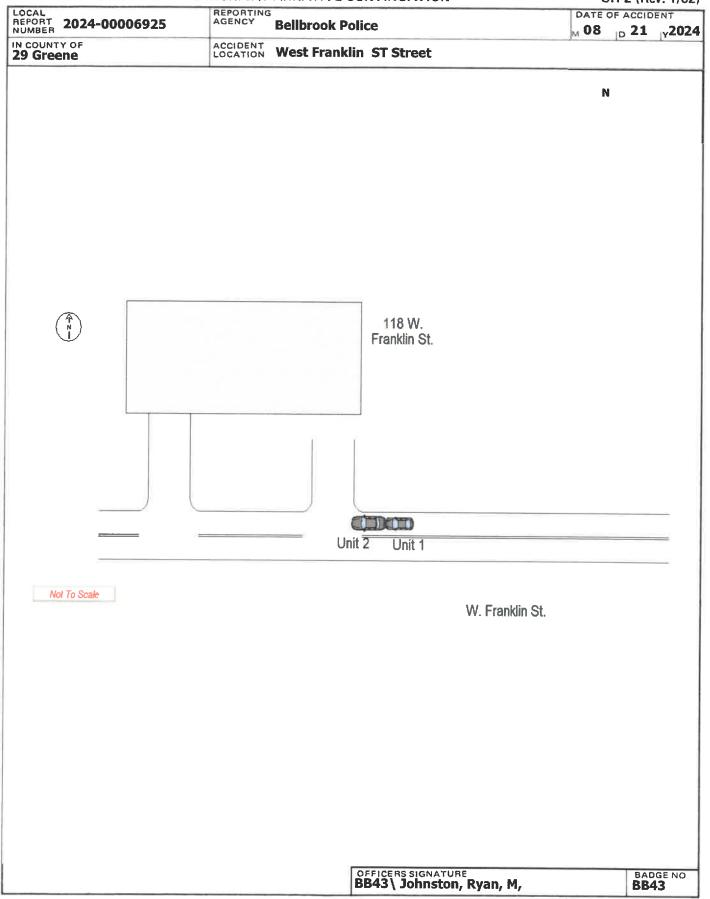
OF FUBLIC SAFETY TRAFFIC CRASH R	EPORT *DENOTES MANDATORY	Y FIELD FOR SUPPLEMEN	T REPORT		LOCAL REPORT NU	MBER*	
PHOTOS TAKEN OH-2 K OH-3	OCAL INFORMATION			2024	0000	06925	
OH-1P OTHER R	EPORTING AGENCY NAME*  Bellbrook Police		01C* 9 0 5	HIT/SKIP  1 - SOLVED  1 - UNSOLVED	NUMBER OF UNITS	UNIT IN ERROR  0 1 98 - ANIMAL 99 - UNKNOWN	
	/ILLAGE,TOWNSHIP*			CRASH DATE /		CRASH SEVERITY	
2.9 1 2-VILLAGE Bellbroo				08212024	1800 5	1 - FATAL  2 - SERIOUS INJURY	
2-SOUTH	OCATION ROAD NAME		OAD TYPE	LATITUDE OF		SUSPECTED	
4-WEST	Franklin		ST	3,9,6,3,6	227	3 - MINDR INJURY Suspected	
	EFERENCE ROAD NAME (ROAD, MILEPOS	T, HOUSE #)	OAD TYPE	LONGITUDE		4 - INJURY POSSIBLE	
4-WES!	18			-84 0 7 4	3 4 6	5 - PROPERTY DAMAGE ONLY	
REFERENCE POINT DIRECTION 1 - INTERSECTION FROM REFERENCE 1 - NORTH IR - IN	ROUTE TYPE  ITERSTATE ROUTE(TP) AL - ALLEY	ROAD TYPE HW- HIGHWAY RD -	ROAD	_	INTERSECTION RE		
2 MILE POST 2 2 COUTU	EDERAL US ROUTE AV - AVENUE	LA - LANE SQ -	SQUARE	WITHIN INTE	RSECTION OR ON AF	PROACH	
4-WEST SR-ST	CR - CIRCLE		STREET	WITHIN INTE	RCHANGE AREA	NUMBER OF APPROACHES	
FROM REFERENCE UNIT OF MEASURE	JMBERED COUNTY ROUTE CT - COURT	PK - PARKWAY TL -	TRAIL	ROADWAY			
	DUTE DUTE DR - DRIVE HE - HEIGHTS		WAY	ROADWAY DIV	TOED		
LOCATION OF FIRST HARMFUL EVENT	MANNER OF CR	RASH COLLISION/IMPACT		DIRECTION OF TRAVE		EDIAN TYPE	
1 - ON ROADWAY 9 - CROSSOVER 1 - ON SHOULDER 10 - DRIVEWAY/AL	1 - NOT COLLISION	N 4-REAR-TO-REAR		1-NORTH		DED FLUSH MEDIAN	
0 1 2-ON SHOUL DER 10-DRIVEWAY/AL 3-IN MEDIAN 11-RAILWAY GRA	Z TWO MOTOR	5 - BACKING 6 - ANGLE		2-SOUTH 3-EAST	FEET ) DED FLUSH MEDIAN		
4 - ON ROADSIDE 12 - SHARED USE I 5 - ON GORE TRAILS	PATHS OR TRANSPORT 2 - REAR-END	7 - SIDESWIPE, SAME DIE 8 - SIDESWIPE, OPPOSITE		4-WEST	(≥4	FEET ) DED, DEPRESSED MEDIAN	
6 - OUTSIDE TRAFFIC WAY 13- BIKE LANE	3 - HEAD-ON	9-OTHER/UNKNOWN	E DIKEGIIUN		4 - DIVI	DED, RAISED MEDIAN	
7 - ON RAMP 14-TOLL BOOTH 8 - OFF RAMP 99-OTHER/UNKN	IOWN					TYPE) :R/UNKNOWN	
WORK ZONE RELATED W	VORK ZONE TYPE LOCA	TION OF CRASH IN WORK	ZONE	CONTOUR	CONDITIONS	SURFACE	
1-LAI	NE CLOSURE	1 - BEFORE THE 1ST WOR WARNING SIGN		.1.	. 1	2	
D LAW ENCORCEMENT PRESENT	NE SHIFT/CROSSOVER PRK ON SHOULDER	2 - ADVANCE WARNING A	REA	1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE	
UK OK	MEDIAN FERMITTENT OR MOVING WORK	3 - TRANSITION AREA 4 - ACTIVITY AREA		2 - STRAIGHT GRADE	2-WET	2 - BLACKTOP,	
ACTIVE SCHOOL ZONE 5-0TI		5 - TERMINATION AREA	- 1	3 - CURVE LEVEL	3 - SNOW	BITUMINOUS, ASPHALT	
LIGHT CONDITION	WEATHER			4 - CURVE GRADE 9 - OTHER/UNKNOWN	4 - ICE 5 - SAND, MUD, DIR	3 - BRICK/BLOCK	
1 - DAYLIGHT 1 2 - DAWN/DUSK	1-CLEAR 6-SNOW 01 2-CLOUDY 7-SEVE				OIL, GRAVEL	STONE	
3 - DARK - LIGHTED ROADWAY	2-CLOUDY 7-SEVE 3-FOG, SMOG, SMOKE 8-BLOW	RE CROSSWINDS VING SAND, SOIL, DIRT, SN	ow		6-WATER (STAND) MOVING)	י ואוט-כן	
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING		ZING RAIN OR FREEZING ER / UNKNOWN	DRIZZLE		7 - SLUSH	9 - OTHER/UNKNOWN	
9-OTHER/UNKNOWN					9 - OTHER/UNKNOW	N	
NARRATIVE		-'   '   '   '		10. 10. 10. 10. 10.	- i - i - i - i - i - i - i - i - i - i	Indicate the north	
Unit 2 was stopped in traffic in		-				direction with an "N" on the	
Franklin Street. Unit 1 failed to	stop and rear-ended					compass diagram.	
Unit 2.							
BWC ON							
		-					
						<b>3</b>	
		1 26	<b>3</b> 6	<b>O</b>	H-2		
					4		
						>-	
CRASH REPORTED DATE / TIME DISI	PATCH DATE / TIME /	ARRIVAL DATE / TIME		SCENE CLEARED D	ATE/TIME	REPORT TAKEN BY	
08212024 1800 0821	2024, 1801 0821	12024 180	0,2 0	8212024	1849	POLICE AGENCY	
TOTAL TIME OTHER TOTAL	OFFICER'S NAME*					MOTORIST	
ROADWAY CLOSED INVESTIGATION TIME MINUTES	Johnston			ER'S NAME*		SUPPLEMENT (CORRECTION OR ADDITION	
0 6 0 108	OFFICER'S BADGE NUMB	ER*	Снескео ву	OFFICER'S BADGE N	UMBER*	TO AN EXISTING REPORT SENT TO ODPS)	
			(3)				



OH!	DEPARTMENT UNIT					2 0 2 4 - 0	REPORT NUMBER 9 2 5
UNIT#	OWNER NAME: LAST, FIRST, MIDDLE (X) SAME AS DRIVER)  JONES, CAMERON ALLEN  OWNER PHONE: INCLUSE AREA CODE (					DAMAGE	
OWNER A	DDRESS: STREET, CITY, STAT			9 3 / /	6   8   3   1   1   9	1 1 1015	AMAGE SCALE  3 - FUNCTIONAL DAMAGE
4018 C	4018 CENTER RD Road WILMINGTON, OH 45177					4 2- MINOR DA	
COMMER	CIAL CARRIER: NAME, ADD	IRESS, CITY, STATE, ZIP		COMMERCIAL CARRIE	R PHONE: INCLUDE AREA CODE		- UNKNOWN MAGED AREA(S)
	LICENSE PLATE#	VEHICL	E IDENTIFICATION #	7 4 1 YEHICLEY	EAR VEHICLE MAKE		TE ALL THAT APPLY
OH	KKL9465 INSURANCE COM		3 8 X F R 0 3 ;	COLOR		@_O	11 12 1
INSUR.	4104	TAIN!	INSURANCE POLICY #	BLK	328i	10 12 1 2	10 12 2
Сомм	TYPE OF USE  ERCIAL GOVERNMENT	IN EMERGENCY	US DOT #	TOWED BY: COMPA Bellbrook To			← 100 → 2 → 1
		#OCCUPANTS	EHICLE WEIGHT GVWR/GCWR		OUS MATERIAL		' - 10 '
DEVICE EQUIP	ELOCK PED HIT/SKIP UN		1 - ≤10K LBS. 2 - 10,001 - 26K LBS	DELEVEED	CLASS# PLACARD ID#	8 7 5 4	8 7 5 4
-	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	3 - >26K LBS. 12-GOLF CART	18-LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	7 6 5	12 7 6 5
0,1	2 - PASSENGER VAN (MINEVAN) 3 - Sport Utility Vehicle	8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE	13 - SNOWMOBILE	19 - BUS (16+ PASSENGERS)	24-WHEELCHAIR (ANY TYPE)	10	11 2
UNIT TYP	E 4 - PICK UP	10-MOPED OR MOTORIZED	14 - SINGLE UNIT TRUCK 15 - Semi-tractor	20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT	25 - OTHER NON-MOTORIST 26 - Bicycle	•	9 3 3
	5 - CARGO VAN 6 - VAN (9-15 SEATS)	BICYCLE 11-ALLTERRAINVEHICLE	16 - FARM EQUIPMENT 17 - MOTORHOME	22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	27 - TRAIN 99 - Unknown or Hit/Skip		
00	# of TRAILING UNITS	(ATV/UTV)			CHAINTHE WATERINGSALE	12 7	6 5 12
_00_	WASVEHICLE OPERATING IN A	JTONOMOUS	0 - NO AUTOMATION	3 - CONDITIONAL AUTOMATIO	N 9 - UNKNOWN	11 12	6 5 11 12 1
2	MODE WHEN CRASH OCCURRE 1-YES 2-NO 9-OTHER/UNI	0	1 - DRIVER ASSISTANCE	4 - HIGH AUTOMATION 5 - FULL AUTOMATION			10 11 1 2
		MODE LEVEL		3 - POLLADIUMATION		9 3 3	9 9 3 3
.0.1	1 - NONE 2 - Taxi	6 - BUS - CHARTER TOUR 7 - BUS - INTERCITY	11 - FIRE 12 - MILITARY	16 - FARM 17 - MOWING	23 - MAJL CARRIER 99 - OTHER / UNKNOWN	7	7 5 7
SPECIAL	3 - ELECTRONIC RIDE SHARING		13-POLICE	18 - SNOW REMOVAL	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7 0 5	
FUNCTIO	4 - SCHOOL TRANSPORT 5 - Bus - Transit/Commuter	9 - BUS - OTHER 10-ambulance	14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT	19 - TOWING 20 - SAFETY SERVICE PATROL		6	6
0 1	1 - NO CARGO BODYTYPE			8 - POLE	12 - CONCRETE MIXER	12	12 12 12
CARGO	/ NOT APPLICABLE 2 - BUS	MOTOR VEHICLE 4 - Logging	CHASSIS  6 - CARGO VAN/ENCLOSED BOX	9 - CARGOTANK 10 - Flat Bed	13-AUTOTRANSPORTER 14-Garbage/Refuse	a Ma	
BODY TYPE			7 - GRAIN/CHIPS/GRAVEL	11 - DUMP	99-OTHER/UNKNOWN	3 9	3 9 3 9 3
	1 - TURN SIGNALS	4 - BRAKES		9 - MOTORTROUBLE	99-OTHER/UNKNOWN	6	
VEHICLE DEFECTS	2 - HEAD LAMPS 3 - Tail Lamps	5 - STEERING 6 - TIRE BLOWOUT	8 - TRAILER EQUIPMENT Defective	10 - DISABLED FROM PRIOR ACCIDENT		_	6 6 6
	1 - INTERSECTION - MARKED	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12-FIRST RESPONDER	- NO DAMAGE [	O ] - UNDERCARRIAGE L 14 J
NON-MOTORIS	CROSSWALK 2-Intersection - Unmarked	4 - MIDBLOCK - MARKED Crosswalk		10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR	AT INCIDENT SCENE 99-OTHER/UNKNOWN	☐-TOP [13]	- ALL AREAS [15]
AT IMPACT	CROSSWALK	5 - TRAVEL LANE - OTHER LOCATIO		TRAILS		- UNIT	NOT AT SCENE [ 16 ]
	1 - NON-CONTACT 2 - NON-COLLISION	1 - STRAIGHT AHEAD 2 - BACKING		13 - NEGOTIATING A CURVE 14 - Entering or Crossing	18-APPROACHING Or leaving vehicle	INITIAL	POINT OF CONTACT
4	3-STRIKING	3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE	SPECIFIED LOCATION	19-STANDING	0 - NO DAMAG   <b>1</b>   <b>2</b>   1-12 - REFER 1	
ACTION	4 - STRUCK PRE-CRASH 5 - BOTH STRIKING ACTIONS	4 - OVERTAKING/PASSING	10-PARKED 11-SLOWING OR STOPPED	15 - WALKING, RUNNING, JOGGING, PLAYING	20 - OTHER NON-MOTORIST 21 - Standing Outside	DIAGRA	
	& STRUCK 9 - OTHER/ UNKNOWN	6 - MAKING LEFT TURN	INTRAFFIC	16 - WORKING 17 - PUSHING VEHICLE	DISABLED VEHICLE 99 - OTHER / UNKNOWN	13 - TOP	
	1 - NONE	7-LEFT OF CENTER	12 - DIG VERCEGO	17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY		TRAFFIC
	2 - FAILURE TO YIELD	8-FOLLOWING TOO CLOSE / ACD	DADVER DOCUTOR	18-OPERATING DEFECTIVE EQUIPMENT	22 - NOT DISCERNIBLE	TRAFFICWAY FLOW 1 - ONE-WAY	TRAFFIC CONTROL  1 - ROUNDABOUT 4 - STOP SIGN
0.8	3 - RAN RED LIGHT 4 - RAN STOP SIGN	9-IMPROPER LANE CHANGE 10-IMPROPER PASSING	THECALLY	19-LOAD SHIFTING/FALLING/	23 - OPE NING DOOR INTO ROADWAY	2 - TWO-WAY	6 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
CONTRIBUTING	5 - UNSAFE SPEED 6 - IMPROPER TURN	11 - DROVE OFF ROAD 12 - IMPROPER BACKING	74 14000117 111114	SPILLING 20-IMPROPER CROSSING	99-OTHER IMPROPER ACTION	# of THROUGH LANES	RAIL GRADE CROSSING
SEQUENCE	OF EVENTS					ON ROAD	1 - NOT INVOLVED
, <sub>1</sub> 2 ,0	1 ~ OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	EVENTS 11 - CROSS CENTERLINE	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE	2	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
1	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF	17-ANIMAL - FARM	EQUIPMENT 23 - STRUCK BY FALLING,	UNIT / NON	-MOTORIST DIRECTION
2	3 - IMMERSION 4 - Jackknife	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY	18 - ANIMAL — DEER 19 - ANIMAL — OTHER	SHIFTING CARGO OR ANYTHING SET IN MOTION	3,11,7,11011	1 - NORTH 5 - NORTHEAST
l., .	5 - CARGO / EQUIPMENT Loss or shift	10-CROSS MEDIAN	14 - PEDESTRIAN	20 - MOTOR VEHICLE IN Transport	BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	FROM 3 TO 4	2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST
3		COLLISIO	15-PEDALCYCLE N WITH FIXED OBJECT	21 - PARKED MOTOR VEHICLE - STRUCK	The state of the s		4 - WEST 8 - SOUTHWEST
4	25-IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END 32 - PORTABLE BARRIER	37 - TRAFFIC SIGN POST	43 - CURB 44 - Ditch	50 - WORK ZONE MAINTENANCE - EQUIPMENT	IIIIT ODGOO	9 - OTHER / UNKNOWN
	26-BRIDGE OVERHEAD STRUCTURE	33 - MEDIAN CABLE BARRIER	39-LIGHT/LUMINARIES	45 - EMBANKMENT	51 - WALL	UNIT SPEED	DETECTED SPEED  1 - STATED / ESTIMATED SPEED
5[]	27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET	34 - MEDIAN GUARDRAIL BARRIER	40 - UTILITY POLE	46 - FENCE 47 - Mailbox	52 - BUILDING 53 - TUNNEL	2 0	2 - CALCULATED / EDR
61	29-BRIDGE RAIL	35- MEDIAN CONCRETE BARRIER	OR SUPPORT	48 - TREE 49 - Fire Hydrant	54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	POSTED SPEED	3 - UNDETERMINED
1, 1,	30-GUARDRAIL FACE	36-MEDIAN OTHER BARRIER	42-CULVERT			, 2 , 5 ,	

→ MOST HARMFUL EVENT

or Publ	LIC SAFETY	OTORIST / N	ON-IV	TOTOR	IST			2024-0	0006925
UNIT#	NAME: LAST	, FIRST, MIDDLE						DATE OF BIRTH	AGE GENDER
01	JONES, CAMERON ALLEN							0 8 0 2 1 9	9 9 7 2 7 M
	STREET, CITY, S	TATE, ZIP						CONTACT PHONE - INCLUDE ARE	EA CODE
4018 CI		Road WILMINGTO	N, OH 45	5177				9 3 7 7 6	5 8 3 1 1 9
4018 CI INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)		INJUREDTAK	EN TO: MEDICAL FACILITY	(NAME, CITY	SAFETY EQUIPMENT USED 0 4 ,	DOT-COMPLIANT SEATING POSI	TION AIR BAG USAGE EJECTION TRAPPED
OL STATE	OPERATOR	LICENSE NUMBER		OFFENSE	CHARGED	LOCAL	OFFENSE DESC	RIPTION	CITATION NUMBER
				4511.21	L MM	CODE	Speed		32820
OL CLASS	ENDORSEMENT SELECTUP TO 2	RESTRICTION SELEC	DIS	TRACTED _	ALCOHOL / DRUG SUSP		CONDITION	ALCOHOL TEST STATUS TYPE VALUE	DRUG TEST(S) STATUS TYPE RESULT SELECTUPTO
	ļ	II	BY	1	ALCOHOL MA OTHER DRUG	RUUANA	1	1 1	1 1
UNIT#	NAME: LAST.	FIRST, MIDDLE			OTHER DROG			DATE OF BIRTH	
0 2		KAREN JENNIFER							
ADDRESS:	STREET, CITY, ST							CONTACT PHONE - INCLUDE ARE	
2406 SI	PAHR RD	Road XENIA, OH 453	<b>385</b>					9 3 7 5 (	
		EMS AGENCY (NAME)		INJUREDTAK	EN TO: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	SEATING POST	TION AIR BAG USAGE EJECTION TRAPPED
5	TAKEN BY						USED 0 4	DOT-COMPLIANT O 1	1 1 1
OL STATE	OPERATOR I	LICENSE NUMBER		OFFENSE	CHARGED	LOCAL	OFFENSE DESC	RIPTION	CITATION NUMBER
DL CLASS	ENDORSEMENT	RESTRICTION SELEC	UPTO3 DRI	VER	ALCOHOL / DRUG SUSP	FCTED.	CONDITION	ALCOHOL TEST	DRUG TEST(S)
	SELECT UP 102		BY	TRACTED	ALCOHOL MA			STATUS TYPE VALUE	STATUS TYPE RESULT SILECT HP TD 4
نالا				1 [	DTHER DRUG		1	1 1	1 1
UNIT#	NAME: LAST,	FIRST, MIDDLE						DATE OF BIRTH	AGE GENDER
ADDRESS:	STREET, CITY, ST	TATE, ZIP						CONTACT PHONE - INCLUDE ARE	A CODE
									(i   1   1   1   1
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAK	EN TO: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT SEATING POSIT	TION AIR BAG USAGE EJECTION TRAPPED
لـــــا	BY							LIMC HELMET	
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENSE	CHARGED	LOCAL	OFFENSE DESC	RIPTION	CITATION NUMBER
OL CLASS	ENDORSEMENT SELECTUPTO2	RESTRICTION SELECT			ALCOHOL / DRUG SUSPI	ECTED	CONDITION	ALCOHOL TEST	DRUG TEST(S)
	30000000000		BY	TRACTED		RIJUANA		STATUS TYPE VALUE	STATUS TYPE RESULT SELECTORIO4
INJU	PIEC	SEATING POSITION	<u> </u>	L	OTHER DRUG	_			
1 - FATAL	KIES	1- FRONT-LEFT SIDE	1 - NOT DEP	IR BAG LOYED	1 - CLASS A	5	OL RESTRIC		CTION TEST STATUS  I - NONE GIVEN
	SERIOUS INJURY	(MOTORCYCLE DRIVER)  2 - FRONT - MIDDLE	2 - DEPLOYE		2 - CLASS B		2 - CDL INTRASTATE	CUTCTROMIC COUNT	TING AN 2 - TEST REFUSED
3 - SUSPECTED I 4 - POSSIBLE IN		3 - FRONT - RIGHT SIDE	3 - DEPLOYE 4 - DEPLOYE	ED SIDE Ed both front/	3 - CLASS C SIDE 4 - REGULAR CLASS		3 - CORRECTIVE LEN 4 - FARM WAIVER	DEVICE (TEXTING, T	
5 - NO APPARENT	T INJURY	4 - SECOND – LEFT SIDE (MOTORCYCLE PASSENGER)	5 - NOT APP	LICABLE	(OHIO = D)		5 - EXCEPT CLASS A	DIALING) BUS 3 - TALKING ON HANDS	-FREE 4 - TEST GIVEN, RESULTS KNOWN
INJURED T	TAKEN BY	5 - SECOND - MIDDLE	9-DEPLOYI	WENT UNKNOWN	5 - M/C MOPED ONLY 6 - NO VALID OL		6 - EXCEPT CLASS A & CLASS B BUS	COMMUNICATION DI 4 - TALKING ON HAND-I	EVICE 5 - TEST GIVEN, RESULTS
1 - NOT TRANSPO		6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	51	ECTION	OL ENDORSE	AF N.T.	7 - EXCEPT TRACTOR	R-TRAILER COMMUNICATION DI	ALCOHOL TEST TYPE
2 - EMS		(MOTORCYCLE SIDE CAR)	1 - NOT EJE		H - HAZMAT		8-INTERMEDIATE I RESTRICTIONS	ICENSE 5 - OTHER ACTIVITY WI ELECTRONIC DEVIC	E 1 - NONE
3 - POLICE 9 - OTHER / UNK!	NOWN	8 - THIRD - MIDDLE 9 - Third - Right Side	2 - PARTIAL 3 - TOTALLY		M - MOTORCYCLE P - Passenger		9 - LEARNER'S PERF	ALT 6 - PASSENGER 7 - OTHER DISTRACTIO	2 - BLOOD N 3 - URINE
		10 - SLEEPER SECTION OF TRUCK CAB	4 - NOT APP		N - TANKER		10 - LIMITED TO DAYL	IGHT ONLY INSIDE THE VEHICL	E 4-BREATH
SAFETY EG 1-None USED	ROIPMENT	11 - PASSENGER IN OTHER	71	RAPPED	Q - MOTOR SCOOTER	TABANA: -	11 - LIMITED TO EMP	THE VEHICLE	N OUTSIDE 5 - OTHER
2 - SHOULDER BE		ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1 - NOTTRAI	PPED	R - THREE-WHEEL MO S - SCHOOL BUS	IUKCYCLE	13 - MECHANICAL DE	VICES 9-OTHER/UNKNOWN	DRUG TEST TYPE 1-NONE
3 - LAP BELT ONL 4 - Shoulder & :		PICK-UP WITH CAP)  12 - PASSENGER IN UNENCLOSED	2 - EXTRICAT MECHAN	TED BY ICAL MEANS	T - DOUBLE & TRIPLE	TRAILERS	CONTROLS, OR OT	HER CONDITION	2 - BLOOD
5 - CHILD RESTR	AINT SYSTEM -	CARGO AREA  13 - TRAILING UNIT	3 - FREED BY	Y Chanical Means	X - TANKER / HAZMAT		ADAPTIVE DEVIC	4 - 80 CHUENTEL BUILDIN	2 - ONING
FORWARD FAC 6 - CHILD RESTR	AINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR	HONFIELD		GENDER		15 - MOTOR VEHICLES AIR BRAKES	WITHOUT 3 - EMOTIONAL (E.G., DE	PRESSED,
REAR FACING 7 - BOOSTER SEA		(NON-TRAILING UNIT) 15 - NON-MOTORIST			F - FEMALE M - MALE		16 - OUTSIDE MIRROR	ANGRY, DISTURBED) 4- ILLNESS	DRUG TEST RESULT(S)  1-AMPHETAMINES
8 - HELMET USE		99 - OTHER / UNKNOWN			U-OTHER/UNKNOWN		17 - PROSTHETIC AID	5 - FELL ASLEEP, FAINT	
9 - PROTECTIVE I							18-OTHER	FATIGUED, ETC. 6- Under the influer	
O-REFLECTIVE (	CLOTHING							OF MEDICATIONS / DI / ALCOHOL	RUGS 4 - CANNABINUES 5 - COCAINE
1 - LIGHTING - PE / BICYCLE ONL								9- OTHER / UNKNOWN	6-OPIATES/OPIOIDS
9 - OTHER / UNKN									7 - OTHER 8 - NEGATIVE RESULTS



## TRAFFIC CRASH WITNESS STATEMENT

LOCAL REPORT NUMBER	REPORTING AGENCY	DATE OF CRASH
24-6925	Bellbrook Police	M 2 1021 1724

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

T. Control of the Con	
PRINTED	MAKE THIS VOLUNTARY STATEMENT TO
	11) V. Franklin St.
OT FIGURES INAMIL	LOCATION
I was traveling west-bound on turning into Dot's Market. I hit the impact from behind. My head hi	725 when multiple cars were
turning into Dot's Market, I hit the	brakes and felta hard
impact from behind. My head his	t the head rest and the
water splashed out of my glas got out of his car and the	s. The gay behind me
got out of his car and the	stedon me.
3	
ADDRESS OF WITNESS  JUDIO S OCH RA Venia OH 45386 Phone	humber 937-502-5752
SIGNATURE OF WITNESS X Laren July 2011 2011 2011 2011 2011 2011 2011 201	number 937-502-5753 S SIGNATURE
	#"
HSY 7003 12/19 [760-1500]	



## TRAFFIC CRASH WITNESS STATEMENT

LOCAL REPORT NUMBER	REPORTING AGENCY	DATE OF CRASH
24-6925	Bellbrook Palice	M 8 021 424

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

I, CAMEFON SONES HEREBY MAKE THIS VOLUNTARY STATEMENT TO
Johnston AT 119 W Franklin Street
I was Driving west franklin street 60ing 20 nph when I Looker of At the Road After working At my Spectometer I seen a car Hopper & Defore I
WHEN I LOKED At the ROAD After working It my
Spectometer à seen a car Hopper i perore I
cae UD Break I HiT.
ADDRESS OF WITNESS
ADDRESS OF WITNESS
SIGNATURE OF WITNESS  X  CAME  X  X  A  A  A  A  A  A  A  A  A  A  A