OF PUBLIC SAFETY	RAFFIC CRA			S MANDATORY F	IELD FOR SUPPLEM	ENT REPORT		LOCAL REPORT NUMBE	R*
X PHOTOS TAKEN	X 0H-2 X 0	п-э	CAL INFORMATION				2,0,2,5,	- ,0,0,0,0,	8,7,3,8,
SECONDARY CRASH		- 1	PORTING AGENCY NAME			NCIC*	HIT/SKIP 1 - SOLVED	NUMBER OF UNITS	UNIT IN ERROR
COUNTY* LOCALITY*	PRIVATE PRO		Bellbrook Poli	ce	<u></u>	2,9,0,5,	L1 2 - UNSOLVED	0,2	O 1 98 - ANIMAL 99 - UNKNOWN
1-	CITY VILLAGE		LLAGE, TOWNSHIP*				CRASH DATE /	TIME* CI	RASH SEVERITY 1 - FATAL
ROUTE TYPE ROUTE NU	TOWNSHIE	ORTH	CATION ROAD NAME			DA 4 D TUDE	10182025		2 - SERIOUS INJURY
מאדנים מייים	.2 - S 3 - E	HTUO				ROAD TYPE	LATITUDE DE		SUSPECTED 3 - MINOR INJURY
ROUTE TYPE ROUTE NU	4-W	EST	Wilmington FERENCE ROAD NAME (RO	AD MILEBORY	ISHEE EL	PI	3,9,6,3,1	5 8 5	SUSPECTED
No.		HTUO		JAU, MILEPUS I, I	10USE #)	ROAD TYPE	LONGITUDE		4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE
REFERENCE POINT	DIRECTION		355				-84, 1, 1, 0	3,7,1,	ONLY
1 - INTERSECTION	FROM REFERENCE 1 - NORTH	IR - INT	ROUTE TYPE TERSTATE ROUTE(TP)	AL - ALLEY	ROAD TYPE HW-HIGHWAY F	RD - ROAD		INTERSECTION RELATI	
2-MILE POST 3-HOUSE #	2-SOUTH 3-EAST	US - FEI	DERAL US ROUTE	AV - AVENUE		Q - SQUARE		RSECTION OR ON APPRO	ACH I I
DISTANCE	4 - WEST DISTANCE	1050706	ATE ROUTE	BL - BOULEVARD CR - CIRCLE		T - STREET E - TERRACE	WITHIN INTE	RCHÁNGE ÁREA NU	MBER OF APPROACHES
FROM REFERENCE	UNIT OF MEASURE 1 - MILES		MBERED COUNTY ROUTE MBERED TOWNSHIP	CT - COURT		L - TRAIL		ROADWAY	
1,3,4	2 2-FEET 3-YARDS		UTE	DR - DRIVE HE - HEIGHTS	PI - PIKE V	VA - WAY	ROADWAY DIV	/IDED	
LOCATION	OF FIRST HARMFU	L EVENT	1	MANNER OF CRAS	H COLLISION/IMPA	CT	DIRECTION OF TRAVE	L MEDI	AN TYPE
1 - ON ROADWA			EV ACCECC	DETWEEN	4 - REAR-TO-REAR		1-NORTH	1 - DIVIDED	FLUSH MEDIAN
3-IN MEDIAN	11-RAI	LWAY GRAD	E CROSSING	TWO MOTOR	5 - BACKING 6 - ANGLE		2 - SOUTH 3 - EAST	2 - DIVIDED	T) Flush median
4 - ON ROADSID 5 - ON GORE	E 12-SHA TRA	RED USE P. ILS			7 - SIDESWIPE, SAME 8 - SIDESWIPE, OPPO		4-WEST	(≥4 FEE 3 - DIVIDED	T) DEPRESSED MEDIAN
6 - OUTSIDE TR		E LANE L BOOTH			9-OTHER/UNKNOW				RAISED MEDIAN
7 - ON RAMP 8 - OFF RAMP		ER/UNKNO	NWC					9 - OTHER/U	
WORK ZONE RELAT	ED	W	ORK ZONE TYPE	LOCATI	ON OF CRASH IN WO	RK ZONE	CONTOUR	CONDITIONS	SURFACE
WORKERS PRESEN	т		E CLOSURE E SHIFT/CROSSOVER	1	- BEFORE THE 1ST V WARNING SIGN	VORK ZONE	4, 1	i 1 i	
LAW ENFORCEMEN		3-WOR	RK ON SHOULDER	1.0	- ADVANCE WARNIN		1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE
			MEDIAN ERMITTENT OR MOVING WO		- TRANSITION AREA - ACTIVITY AREA		2 - STRAIGHT GRADE		2 - BLACKTOP, BITUMINOUS,
ACTIVE SCHOOL ZO	NE	5 - OTH	ER	5	- TERMINATION ARE	ĒΑ	3 - CURVE LEVEL 4 - CURVE GRADE	3 - SNOW 4 - ICE	ASPHALT
	ONDITION		WEA	THER			9 - OTHER/UNKNOWN		3 - BRICK/BLOCK 4 - SLAG, GRAVEL,
1-DAYLIGHT 1 2-DAWN/DUSK	1 - DAKININIEW STON				STONE				
3 - DARK - LIGHTED ROADWAY 3 - FOG, SMOG, SMOKE 8 - BLOWING SAND, SOIL, DIRT, SNOW					MOVING)	5 - DIRT 9 - OTHER/UNKNOWN			
4 - DARK – ROADWAY NOT LIGHTED 4 - RAIN 9 - FREEZING RAIN OR FREEZING DRIZZLE 5 - DARK – UNKNOWN ROADWAY LIGHTING 5 - SLEET, HAIL 99 - OTHER / UNKNOWN					7 - SLUSH 9 - OTHER/UNKNOWN	9-01 HERUNKNUWN			
9-OTHER/UNKNOWN							9 - OTHEROUNDWN		
NARRATIVE						1 11		1	Indicate the north
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			7355 Wilming vehicles in fro						ounpus diagram.
			was traveling		-				5-1-1-1
			e behind Unit#		T.A.				
Unit#1 was no	ot able to s	afely s	top behind Un	t#2					
			r of unit#2. Bo						
	fer location	off th	e roadway for	further			_		
investigation.							See OH-2		
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					Date				
CRASH REPORTED DA			ATCH DATE/TIME		RIVAL DATE / TIME		SCENE CLEARED D		EPORT TAKEN BY
, 1, 0, 1, 8, 2, 0, 2, 5,				3 1,0,1,8,	2,0,2,5, ,1,	0,5,8,1	0,1,8,2,0,2,5	1,1,2,8	POLICE AGENCY
TOTAL TIME ROADWAY CLOSED INVES	OTHER STIGATION TIME N	TOTAL MINUTES	OFFICER'S NAME* Ruble		1	CKED BY OFFIC	ER'S NAME*		MOTORIST
				BADGE NUMBER		THE CHECKED BY	OFFICER'S BADGE N	UMBER*	SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ROPS)
0 6	0 1	., 0, 0	B B 1			ВВВ	4 8		
ISY7001 OH1 1/19 [760-082	oj								PAGE 1 OF 6

OHIO DEPARTMENT OF PUBLIC SAFETY	U	NIT
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2,0,2,5,-,0,0,0,0,8,7,3,8 OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER) OWNER PHONE: INCLUDE AREA CODE (SAME AS DRIVER) 0, 1 | EARLY, JULIE ANNETTE DAMAGE 5,1,3,7,6,6,0,1,4,1 OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER) DAMAGE SCALE 130 SOUTHLAKE DR Drive CENTERVILLE, OH 45459 1 - NONE 3 - FUNCTIONAL DAMAGE 2 - MINDR DAMAGE COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP 4 - DISABLING DAMAGE COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE 9 - UNKNOWN LP STATE LICENSE PLATE# VEHICLE IDENTIFICATION # DAMAGED AREA(S) VEHICLE YEAR VEHICLE MAKE O H GXA1670 5, F, N, R, L, 5, H, 6, 9, G, B, 1, 1, 1, 8, 1, INDICATE ALL THAT APPLY INSURANCE INSURANCE COMPANY
VERIFIED E INSURANCE 2,0,1,6 Honda INSURANCE POLICY # COLOR VEHICLE MODEL E Insurance PAOH-006135871 DBL Odyssey (min TYPE OF USE US DOT # COMMERCIAL GOVERNMENT IN EMERGENCY TOWED BY: COMPANY NAME INTERLOCK #OCCUPANTS VEHICLE WEIGHT GVWR/GCWR HAZARDOUS MATERIAL DEVICE MATERIAL RELEASED HIT/SKIP UNIT 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. CLASS # PLACARD ID # 0, 4, PLACARD J 3 - >26K L8S. 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 23-PEDESTRIAN/SKATER 0,2 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 24-WHEELCHAIR (ANY TYPE) UNIT TYPE 4 - PICK UP 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST 10-MOPED OR MOTORIZED 15-SEMI-TRACTOR 21 - HEAVY EQUIPMENT BICYCLE 26 - BICYCLF 5 - CARGO VAN 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 6 - VAN (9-15 SEATS) 11-ALLTERRAIN VEHICLE 27 - TRAIN 17 - MOTORHOME ANIMAL-DRAWN VEHICLE 00 # OF TRAILING UNITS (ATV/UTV) 99 - UNKNOWN OR HITZSKIP WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 2 I-YES 2-NO 9-OTHER/UNKNOWN 1 - DRIVER ASSISTANCE 12 0 4 - HIGH AUTOMATION 2 - PARTIAL AUTOMATION AUTONOMOUS 5 - FULL AUTOMATION MODE LEVEL 1 - NONE 6 - BUS - CHARTER/TOUR 11-FIRE 16 - FARM 0 1 2-TAXI 21 - MAIL CARRIER 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99-OTHER/UNKNOWN SPECIAL 3 - ELECTRONIC RIDE SHARING B - BUS - SHUTTLE 13-POLICE 18-SNOW REMOVAL FUNCTION 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14-PUBLICHTURY 19 - TOWING 5 - BUS - TRANSIT/COMMUTER 10-AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL 1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 0,1, 8 - POLE / NOT APPLICABLE 12-CONCRETE MIXER MOTOR VEHICLE CARGO CHASSIS 2 - BUS 9 - CARGOTANK 13-AUTOTRANSPORTER 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX BODY 10-FLAT BED 14-GARBAGE/REFUSE 7 - GRAIN/CHIPS/GRAVEL 11 - DUMP 99-OTHER/UNKNOWN a 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICKTIRES 9 - MOTORTROUBLE 00 VEHICLE 2-HEADLAMPS 99-OTHER/UNKNOWN 5 - STEERING 8 - TRAILER EQUIPMENT 10 - DISABLED FROM PRIOR DEFECTS 3-TAIL LAMPS 6 - TIRE BLOWNIT DEFECTIVE ACCIDENT I - INTERSECTION - MARKED 3 - INTERSECTION - OTHER - NO DAMAGE [0] 6 - BICYCLE LANE -UNDERCARRIAGE [14] 9 - MEDIAN/CROSSING ISLAND 12-FIRST RESPONDER CROSSWALK 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE NON-MOTORIST 2-INTERSECTION - UNMARKED 10-DRIVE WAY ACCESS AT INCIDENT SCENE CROSSWALK ☐ - TOP [13] LOCATION AT IMPACT 8 - SIDEWALK -ALL AREAS [15] CROSSWALK 99-OTHER/UNKNOWN 5 - TRAVEL LANE - OTHER LOCATION 11-SHARED USE PATHS OR - UNIT NOT AT SCENE [16] I - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTLATING A CURVE 18-APPROACHING 2 - NON-COLLISION 2 - BACKING 3 - STRIKING O, 1 3 - CHANGING LANES 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING OR LEAVING VEHICLE INITIAL POINT OF CONTACT 9 - LEAVING TRAFFIC LANE SPECIFIED LOCATION ACTION 4- STRUCK 0 - NO DAMAGE 19-STANDING PRE-CRASH 4 - OVERTAKING/PASSING 14 - UNDERCARRIAGE 15 - WALKING, RUNNING, JOGGING, PLAYING 10-PARKED 5- BOTH STRIKING ACTIONS 5- MAKING RIGHTTURN 20-OTHER NON-MOTORIST 1, 2, 1-12 - REFERTO UNIT 15 - VEHICLE NOT AT SCENE 11-SLOWING OR STOPPED 21 - STANDING OUTSIDE DIAGRAM & STRUCK INTRAFFIC 99 - UNKNOWN 6 - MAKING LEFT TURN 16 - WORKING DISABLEDVEHICLE 13 - TOP 9 - OTHER/ UNKNOWN 12-DRIVERLESS 17 - PUSHING VEHICLE 99-OTHER/UNKNOWN 1-NONE 7-LEFT OF CENTER 13 - IMPROPER START FROM A TRAFFIC 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY 2 - FAILURE TO YIELD PARKED POSITION 8-FOLLOWING TOO CLOSE / ACDA TRAFFICWAY FLOW 18-OPERATING DEFECTIVE TRAFFIC CONTROL 22 - NOT DISCERNIALE 3 - RAN RED LIGHT 14-STOPPED OR PARKED 9-JMPROPER LANE CHANGE 0.8 EQUIPMENT 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 23 - OPENING DOOR INTO 4 - RAN STOP SIGN ILL FGALLY CONTRIBUTING 10-IMPROPER PASSING 19-LOAD SHIFTING/FALLING/ 2 - TWO-WAY ROADWAY CIRCUMSTANCES 5- UNSAFE SPEED 2 - SIGNAL 15 - SWERVING TO AVOID 5 - YIELD SIGN 11 - DROVE OFF ROAD 3-FLASHER 99-OTHER IMPROPERACTION 16-WRONG WAY 6 - NO CONTROL 6-IMPROPERTURA 12-IMPROPER BACKING 20-IMPROPER CROSSING # of THROUGH LANES SEQUENCE OF EVENTS RAIL GRADE CROSSING ON ROAD 1 - NOT INVOLVED EVENTS 2 0, 1 - OVERTURN/ROLLOVER _2 2 - INVOLVED-ACTIVE CROSSING 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE -16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS OPPOSITE DIRECTION OF 3 - INVOLVED-PASSIVE CROSSING 17-ANIMAL - FARM TRAVEL 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 18-ANIMAL - DEER 23 - STRUCK BY FALLING 12 - DOWNHILL RUNAWAY UNIT / NON-MOTORIST DIRECTION J 4 - JACKKNIFF 9 - RAN OFF ROAD LEFT SHIFTING CARGO OR ANYTHING SET IN MOTION 19 - ANIMAL - OTHER 13 - OTHER NON-COLLISION 5 - CARGO/ EQUIPMENT 1-NORTH 5-NORTHEAST 10-CROSS MEDIAN 20 - MOTOR VEHICLE IN 14-PEDESTRIAN LOSS OR SHIFT BY A MOTOR VEHICLE 2 - SOUTH TRANSPORT 6 - NORTHWEST FROM 1 TO 2 15-PEDALCYCLE 24 - OTHER MOVABLE OBJECT 21 - PARKED MOTOR VEHICLE 3 - EAST 7 - SOUTHEAST COLLISION WITH FIXED OBJECT - STRUCK 8 - SOUTHWEST 25-IMPACT ATTENUATOR / CRASH CUSHION 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43-CURB 50-WORK ZONE MAINTENANCE EQUIPMENT 9 - OTHER / UNKNOWN 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 26 - BRIDGE OVERHEAD 44 - DITCH 33-MEDIAN CABLE BARRIER 39-LIGHT/LUMINARIES UNIT SPEED STRUCTURE 45 - EMBANKMENT 51 - WALL DETECTED SPEED 34 - MEDIAN GUARDRAIL SUPPORT 27- BRIDGE PIER OR ABUTMENT 46 - FENCE 52 - BUTLDING BARRIER 1 - STATED / ESTIMATED SPEED 40 - UTILITY POLE 28-BRIDGE PARAPET 47 - MAILBOX , 2, 53 - TUNNET 35-MEDIAN CONCRETE 41-OTHER POST, POLE 2 - CALCULATED / EDR 29-BRIDGE RAIL 48-TREE 54 - OTHER FIXED OBJECT BARRIER OR SUPPORT 30-GUARDRAIL FACE POSTED SPEED 49 - FIRE HYDRANT 3 - UNDETERMINED 36 - MEDIAN OTHER BARRIER 42 - CULVERT 99-OTHER/UNKNOWN J FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT 3 5 HSY8304 OH1U 1/19 [760-0820]

PAGE 2

0F6

LOCAL REPORT NUMBER



HSY8304 OH1U 1/19 [760-0820]

2,0,2,5,-,0,0,0,0,8,7,3,8 OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER) HINTT # OWNER PHONE: INCLUDE AREA CODE (SAMÉ AS DRIVER) DAMAGE **BRENT, ALEXANDER CHARLES** 2,6,9,2,8,1,1,3,6,1 DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER) 1 - NONE 3 - FUNCTIONAL DAMAGE 4072 WOODEDGE DR Drive BELLBROOK, OH 45305 J 2 - MINOR DAMAGE 4 - DISABLING DAMAGE COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE 9 - UNKNOWN DAMAGED AREA(S) LP STATE LICENSE PLATE # **VEHICLE IDENTIFICATION #** INDICATE ALL THAT APPLY VEHICLE YEAR VEHICLE MAKE ${\bf 5}_{1}{\bf T}_{1}{\bf D}_{1}{\bf Z}_{1}{\bf S}_{1}{\bf K}_{1}{\bf F}_{1}{\bf C}_{1}{\bf 5}_{1}{\bf R}_{1}{\bf S}_{1}{\bf 1}_{1}{\bf 1}_{1}{\bf 9}_{1}{\bf 8}_{1}{\bf 7}_{1}{\bf 9}_{1}$ O H 668ZWB 2,0,2,4 Toyota INSURANCE COMPANY INSURANCE VERIFIED **INSURANCE POLICY #** COLOR VEHICLE MODEL USAA GIC0425129907106 BLK Sienna (van) TYPE OF USE US DOT # TOWED BY: COMPANY NAME GOMMERCIAL GOVERNMENT IN EMERGENCY HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS MATERIAL RELEASED CLASS # PLACARD ID # 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. HIT/SKIP UNIT 0,5 PLACARD J 3 - >26K LBS. 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23-PEDESTRIAN/SKATER 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13-SNOWMOBILE 0 2 3 - SPORT UTILITY VEHICLE 19 - BUS (16+ PASSENGERS) 24-WHEELCHAIR (ANY TYPE) 9 - AUTOCYCLE 14-SINGLE UNIT TRUCK 20-OTHER VEHICLE 25 - OTHER NON-MOTORIST UNIT TYPE 4 - PICK UP 10-MOPED OR MOTORIZED 15-SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLF BICYCLE 5 - CARGO VAN 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 27-TRAIN 11 - ALLTERRAIN VEHICLE 6 - VAN (9-15 SEATS) ANIMAL-DRAWN VEHICLE 17.MOTORHOME 99 - UNKNOWN OR HIT/SKIP (ATV/UTV) , **00** # OF TRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS D - NO ALTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION 0 2 1-YES 2-NO 9-OTHER/UNKNOWN AUTONOMOUS 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION MODE LEVEL 1 - NONE 6 - BUS - CHARTERTOUR 11-FIRE 16 - FARM 21 - MAIL CARRIER 0 1 2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99-OTHER/IINKNOWN SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13-POLICE 18 - SNOW REMOVAL FUNCTION 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14-PUBLICUTIONTY 19-TOWING 5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL 1 - NO CARGO BODY TYPE 3 - VEHICLETOWING ANOTHER 5 - INTERMODAL CONTAINER 8 - POLE 12-CONCRETE MIXER O 1 / NOT APPLICABLE MOTORVEHICLE CHASSIS 9 - CARGOTANK 13-AUTOTRANSPORTER 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX BODY 10 - FLAT BED 14-GARBAGE/REFUSE 7 - GRAIN/CHIPS/GRAVEL 4 3 11 - DUMP 99 - OTHER/ UNKNOWN 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99-OTHER/UNKNOWN VEHICLE 2-HEADLAMPS 5 - STEFRING 8 - TRAILER EQUIPMENT 10 - DISABLED FROM PRIOR DEFECTS 3 - TAIL LAMPS 6 - TIRE BLOWOUT DEFECTIVE ACCIDENT - NO DAMAGE [0] UNDERCARRIAGE L 14 J 1 - INTERSECTION - MARKED 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12-FIRST RESPONDER 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE 10-DRIVEWAY ACCESS AT INCIDENT SCENE **□-TOP** (131) NON-MOTORIST 2-INTERSECTION - UNMARKED - ALL AREAS [15] CROSSWALK 99-OTHER/HINKNOWN 8 - SIDEWALK 11 - SHARED USE PATHS OR LOCATION AT IMPACT CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION TRAILS - UNIT NOT AT SCENE [16] 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING ILTURN 13 - REGOTIATING A CURVE 18-APPROACHING 2 - NON-COLLISION INITIAL POINT OF CONTACT 2 - BACKING 8 - ENTERING TRAFFIC LANE 14-ENTERING OR CROSSING OR LEAVING VEHICLE 4 3-STRIKING 1 1 3 - CHANGING LANES 0 - NO DAMAGE 9 - LEAVING TRAFFIC LANE SPECIFIED LOCATION 19-STANDING 14 - UNDERCARRIAGE ACTION 4- STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 15 - WALKING, RUNNING, 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE 10-PARKED 20-OTHER NON-MOTORIST 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN JOGGING, PLAYING DIAGRAM 21 - STANDING OUTSIDE 11-SLOWING OR STOPPED 99 - UNKNOWN & STRUCK 16 - WORKING INTRAFFIC 13 - TOP DISABLEDVEHICLE 6 - MAKING LEFT TURN 9 - OTHER/UNKNOWN 17 - PUSHING VEHICLE 12 - DRIVERLESS 99 - OTHER / LINKWOWN 1 - NONE 7-LEFT OF CENTER 13 - IMPROPER START FROM A 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY TRAFFICWAY FLOW TRAFFIC CONTROL 2 - FAILURE TO YIELD PARKED POSITION 8-FOLLOWING TOO CLOSE / ACDA 18-OPERATING DEFECTIVE 22 - NOT DISCERNIALE 1 - ONE-WAY 14-STOPPED OR PARKED 1 - ROUNDABOUT 4 - STOP SIGN 3 - RAN RED LIGHT , **0**, **1**, 9-IMPROPER LANE CHANGE EQUIPMENT 23 - OPENING DOOR INTO ILLEGALLY 2 - TWO-WAY 2 - SIGNAL 4 - RAN STOP SIGN 10-IMPROPER PASSING 19-LOAD SHIFTING/FALLING/ 5 - YIELD SIGN **ROADWAY** CONTRIBUTING 15 - SWERVING TO AVOID CIRCUMSTANCES 5 - UNSAFE SPEED SPILLING 3 - FLASHER 6 - NO CONTROL 11 - DROVE OFF ROAD 99 - OTHER IMPROPERACTION 16 - WRONG WAY 6-IMPROPERTURN 20 - IMPROPER CROSSING 12-IMPROPER BACKING # of THROUGH LANES RAIL GRADE CROSSING SEQUENCE OF EVENTS ON ROAD 1 - NOT INVOLVED EVENTS 2 - INVOLVED-ACTIVE CROSSING **_2**__ 1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE -16 - RAILWAY VEHICLE 3 - INVOLVED-PASSIVE CROSSING 22 - WORK ZONE MAINTENANCE OPPOSITE DIRECTION OF 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 17 - ANIMAL -- FARM EOUIPMENT TRAVEL 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 18-ANIMAL - DEER 23 - STRUCK BY FALLING **UNIT / NON-MOTORIST DIRECTION** 12 - DOWNHILL RUNAWAY SHIFTING CARGO OR → 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 19 - ANIMAL - OTHER 1 - NORTH 5 - NORTHEAST 13 - OTHER NON-COLLISION ANYTHING SET IN MOTION 5 - CARGO/ EQUIPMENT 20 - MOTOR VEHICLE IN 10-CROSS MEDIAN BY A MOTOR VEHICLE 2 - SOUTH 6 - NORTHWEST 14-PEDESTRIAN LOSS OR SHIFT TRANSPORT FROM 1 TO 2 24 - OTHER MOVABLE OBJECT 3 - EAST 7 - SOUTHEAST 15-PEDALCYCLE 21 - PARKED MOTOR VEHICLE 4 - WEST 8 - SOUTHWEST COLLISION WITH FIXED OBJECT - STRUCK 25-IMPACT ATTENUATOR /CRASH CUSHION 31-GUARDRAIL END 9 - OTHER / UNKNOWN 37 - TRAFFIC SIGN POST 43 - CURB 50 - WORK ZONE MAINTENANCE 32-PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DETCH EQUIPMENT UNIT SPEED 26 - BRIDGE OVERHEAD DETECTED SPEED 33-MEDIAN CABLE BARRIER 39-LIGHT/LUMINARIES 45 - EMBANKMENT 51 - WALL STRUCTURE 34-MEDIAN GUARDRAIL SUPPORT 1 - STATED / ESTIMATED SPEED 46 - FENCE 52 - BUILDING 27 - BRIDGE PIER OR ABUTMENT _0, _ BARRIER 40-UTILITY POLE 47 - MAILBOX 53 - TUNNEL 2 - CALCULATED / EDR 28 - BRIDGE PARAPET 41 - OTHER POST, POLE 35 - MEDIAN CONCRETE 54 - OTHER FIXED OBJECT 48 - TREE 29 - BRIDGE RAIL BARRIFR 3 - UNDETERMINED OR SHPPORT POSTED SPEED 99-OTHER/UNKNOWN 49 - FTRE HYDRAMT 30-GUARDRAIL FACE 36-MEDIAN OTHER BARRIER 42-CULVERT 3 , 5 1 MOST HARMFUL EVENT J FIRST HARMFUL EVENT

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LOCAL REPORT NUMBER

UNIT # NAME: LAST, FIRST, MIDDLE EARLY, JULIE ANNETTE ADDRESS: STREET, CITY, STATE, ZIP 130 SOUTHLAKE DR Drive CENTERVILLE, OH 45459 INJURIES INJURED TAKEN DE TAKEN BY INJURED TAKEN BY INJURED TAKEN BY LOCAL REPORT NUMBE 2 0 2 5 - 0 0 0 0 0 DATE OF BIRTH 0 7 2 7 1 9 8 8 CONTACT PHONE - INCLUDE AREA CODE 5 1 3 7 6 6 0 DDT-COMPLIANT USED DOT-COMPLIANT USED DOT-COMPLIANT USED DOT-COMPLIANT MC HELMET 0 1 1	R 7 3 8
DATE OF BIRTH O 7 2 7 1 9 8 8 ADDRESS: STREET, CITY, STATE, ZIP 130 SOUTHLAKE DR Drive CENTERVILLE, OH 45459 INJURES INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED DOT-COMPLIANT SEATING POSITION AIR BAG USA	
ADDRESS: STREET, CITY, STATE, ZIP 130 SOUTHLAKE DR Drive CENTERVILLE, OH 45459 INJURED TAKEN BY INJ	AGE GENDE
130 SOUTHLAKE DR Drive CENTERVILLE, OH 45459 INJURED INJURED INJURED EMS AGENCY (NAME) INJURED TAKEN BY CONTACT PHONE - INCLUDE AREA CODE 5 1 3 7 6 6 0 0 INJURED TAKEN USED DDT-COMPLIANT DDT-COMPLIANT DDT-COMPLIANT DDT-COMPLIANT DDT-COMPLIANT	3,7, F
130 SOUTHLAKE DR Drive CENTERVILLE, OH 45459 INJURES INJURED INJURED INJURED TAKEN BY INJURED TAKEN BY INJURED TAKEN BY INJURED TAKEN USED DDT-COMPLIANT SEATING POSITION AIR BAG USAN USED DDT-COMPLIANT SEATING POSITION AIR BAG USAN USED DDT-COMPLIANT USED DDT-COMPLIANT SEATING POSITION AIR BAG USAN USED DDT-COMPLIANT SEATING	
INJURED SAGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED DDT-COMPLIANT SEATING POSITION AIR BAG USA	1 4 1
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UNIT # NAME: LAST FIRST MIDDLE	
DATE OF BIRTH O, 2 BRENT, ALEXANDER CHARLES	AGE GENDE
ADDRESS: STREET, CITY, STATE, ZIP	2 8 M
CONTACT PHONE - INCLIDE AREA CODE	
4072 WOODEDGE DR Drive BELLBROOK, OH 45305	3 6 1
INJURIES INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED SEATING POSITION AIR BAG USAG	E EJECTION TRAPPED
O 4 MC HELMET O 1 1	1 1
DE STATE OPERATOR LICENSE NUMBER OFFENSE CHARGED LOCAL OFFENSE DESCRIPTION CITATION	
CODE	
L CLASS ENDORSEMENT RESTRICTION SELECT UPTO3 DRIVER ALCOHOL / DRUG SUSPECTED CONDITION ALCOHOL TEST	G TEST(S)
DISTRACTED ALCOHOL MARIJUANA STATUS TYPE VALUE STATUS TYPE	
THER DRUG 1 1 1 1 1	
UNIT # NAME: LAST, FIRST, MIDDLE DATE OF BIRTH	AGE GENDER
	AGE GENDER
DDRESS: STREET, CITY, STATE, ZIP	
CONTACT PHONE - INCLUDE AREA CODE	
NJURIES INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT SEATING POSITION AND RECEIVED	
BY USED DOT-COMPLIANT ALK BAG USAGE	EJECTION TRAPPED
STATE OPERATOR LICENSE NUMBER OFFENSE CHARGED LOCAL OFFENSE DESCRIPTION CITATION	ı
OFFENSE CHARGED LOCAL OFFENSE DESCRIPTION CITATION N	UMBER
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SELECTUPTO2 DISTRACTED DISTRACTED DISTRACTED	G TEST(S) RESULT SELECTOPIOA
ALCOHOL MARIDIANA	TELEGISE SELECTOPION
INJURIES SEATING POSITION AIR BAG OL CLASS OL RESTRICTION(S) DRIVER DISTRICTION	
ATAL 1-FRONT-LEFT SIDE 1-NOT DEPLOYED 1-CLASS A 1. ALCOHOL INTEGLOCY DEVICE 1. TO TOP DEVELOP 1. TO TOP DEVELOP 1. TO TOP DEVICE 1. TO TOP DEVELOP 1. TO TOP	EST STATUS
USPECTED SERIOUS INJURY (MOTORCYCLE DRIVER) 2 - DEPLOYED FRONT 2 - CLASS B 2 - CDI INTRASTATE ONLY 2 - MANIAL VIOLENCE DRIVER)	E GIVEN Frefused
3- DON'T DICHT SIDE 3- CLASS C 3- CORRECTIVE LENSES ELECTRONIC COMMUNICATION 3. TES	GIVEN, CONTAMINATED
4 - DEPLOYED BOTH FRONT/ SIDE 4 - REGULAR CLASS 4 - FARM WAIVER DIALING) O APPARENT TIMING 4 - SECOND - LEFT SIDE (MAID - IN) O APPARENT TIMING 4 - SECOND - LEFT SIDE (MAID - IN)	PLE / UNU SABLE
(MOTORCYCLE PASSENGER) 9. DEPT OWNER THROTOLOGY 9. DEPT OWNER THROTOLOGY 5. EXCEPT CLASS A BUS 3. TALKING ON HANDS-FREE 4. LES 4. LES	GIVEN, RESULTS KNOWN
TINE DAY 2-2000 - WINDLE 2-102	GIVEN, RESULTS Nown
REATED AT SCINE 7-THIRD - LEFT SIDE FLECTION OLE NO DOSEMENT 7- EXCEPT TRACTOR-TRAILER COMMUNICATION DEVICE OLC	HOL TEST TYPE
MS (WOUNGTELE SIDE CAR) 1- NOT EJECTED H-HAZMAT RESTRICTIONS ELECTRONIC PRINTER 1- NON	
DLICE 0- ITIND- MIDDLE 2-PARTIALLY EJECTED M-MOTORCYCLE 9-LEARNER'S PERMIT 6-PASSENGER 2-BLOG	D
HER/UNKNOWN 9-THIRD-RIGHT SIDE 3-TOTALLY EJECTED P-PASSENGER RESTRICTIONS 7-OTHER DISTRACTION 3-URIN	
TO SECTION	
FETY EQUIPMENT OF TRUCK CAB 4-NOT APPLICABLE N-TANKER 10-LIMITED TO EMPLOYMENT 8-OTHER DISTRICT OF THE PROPERTY AS OTHER DISTRICT OF THE PROPERTY	
FETY EQUIPMENT OF TRUCK CAB 4-NOT APPLICABLE N-TANKER 10-LIMITED TO DAYLIGHT ONLY INSIDE THE VEHICLE 4-BRE. INE USED 11-PASSENGER IN OTHER Q- MOTOR SCOOTER 11-LIMITED TO EMPLOYMENT 8-OTHER DISTRACTION OUTSIDE 5-OTHE ENCLOSED CARGO AREA TRAPPED R-THREF-WHEEL MOTORCYCLE 12-LIMITED - OTHER THE VEHICLE	JE TEST TYPE
FETY EQUIPMENT OF TRUCK CAB 4-NOTAPPLICABLE N-TANKER 10-LIMITED TO DAYLIGHT ONLY INSIDE THE VEHICLE 4-BREI INE USED 11-PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, 1-NOTTRAPPED R-THREE-WHEEL MOTORCYCLE (NON-TRAILING UNIT, BUS, 1-NOTTRAPPED S-SCHOOL BUS 13-MECHANICAL DEVICES 9-OTHER / UNIX.NOWN DR	
FETY EQUIPMENT OF TRUCK CAB 4 - NOT APPLICABLE N - TANKER 10 - LIMITED 10 DAYLIGHT ONLY INSIDE THE VEHICLE 4 - BREI ONE USED 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) 12 - NOT TRAPPED 13 - MECHANICAL DEVICES PICK-UP WITH CAP) 14 - NOT TRAPPED 2 - EXTRICATED BY N - TANKER 11 - LIMITED 10 DAYLIGHT ONLY INSIDE THE VEHICLE 4 - BREI 4 - OTHER 12 - LIMITED 0 - OTHER 13 - MECHANICAL DEVICES 9 - OTHER / UNKNOWN DR 13 - MECHANICAL DEVICES CONTROLS, OR OTHER 11 - NONI THE VEHICLE 13 - MECHANICAL DEVICES CONTROLS, OR OTHER	THE RESERVE AND ADDRESS OF THE PERSON NAMED IN
FETY EQUIPMENT OF TRUCK CAB 4 - NOT APPLICABLE N - TANKER 10 - LIMITED 10 DAYLIGHT ONLY INSIDE THE VEHICLE 4 - BRE- ONE USED 11 - PASSENGER IN OTHER ENCLOSED CAREO AREA (NON-TRAILINE DITT, BUS, PICK-UP WITH CAP) 2 - EXTRICATED BY INDUBER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED CARCO AREA 3 - FREED BY 3 - FREED BY 3 - FREED BY 3 - TANKER 10 - LIMITED 10 DAYLIGHT ONLY INSIDE THE VEHICLE 4 - BRE- 4 - NOT APPLICABLE N - TANKER 11 - LIMITED 0 EMPLOYMENT 12 - LIMITED 0 THER THE VEHICLE 12 - LIMITED 0 THER THE VEHICLE 13 - MECHANICAL DEVICES GPECIAL BRAKES, HAND CONTROLS, OR OTHER CONDITION 2 - BLOO ADAPTIVE DEVICES 1 - APPARENTLY NORMAL 3 - BRE- 4 - NOT APPLICABLE 5 - OTHE THE VEHICLE 6 - OTHER	
FETY EQUIPMENT OF TRUCK CAB 4 - NOT APPLICABLE N - TANKER 10 - LIMITED 10 DAYLIGHT ONLY INSIDE THE VEHICLE 4 - BRE- ONE USED 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (INON-TRAILING UNIT, BUS, PICK-UP WITH CAP) 12 - LIMITED - OTHER 13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER CARGO AREA 13 - FREED BY MECHANICAL MEANS T - DOUBLE & TRIPLE TRAILERS X - TANKER / HAZMAT ADAPTIVE DEVICES 1 - APPARENTLY NORMAL 3 - URIN 14 - MILITARY VEHICLES ONLY 2 - PHYSICAL IMPAIRMENT 4 - OTHE 4 - NOT APPLICABLE N - TANKER 1 - LIMITED - OTHER 1 - LIMITED - OTHER THE VEHICLE 4 - BRE- 4 - OTHE THE VEHICLE 5 - OTHE THE VEHICLE 5 - OTHE THE VEHICLE 5 - OTHE THE VEHICLE 6 - OTHER DISTRACTION OUTSIDE THE VEHICLE 5 - OTHE THE VEHICLE 6 - OTHER THE VEHICLE 5 - OTHE THE VEHICLE 6 - OTHER T	Terrent and the state of the state of
FETY EQUIPMENT OF TRUCK CAB 4 - NOT APPLICABLE N - TANKER 10-LIMITED 10 DAYLIGHT ONLY INSIDE THE VEHICLE 4 - BRE ONE USED 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) 2 - EXTRICATED BY NOULDER & LAP BELT USED 10 - ASSENGER IN UNENCLOSED CARGO AREA (LID RESTRAINT SYSTEM - KRWARD FACING 13 - TRAILING UNIT CARGO AREA (NON-TRAILING UNIT) 14 - MILITARY VEHICLES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES 1 - APPARENTLY NORMAL 3 - FREED BY NON-MECHANICAL MEANS X - TANKER / HAZMAT 14 - MILITARY VEHICLES ONLY 2 - PHYSICAL IMPAIRMENT 4 - OTHE ARR FACING DRUG 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - MOTOR VEHICLES WITHOUT ARR FACING DRUG 15 - MOTOR VEHICLES WITHOUT ARR RAKES ARR PROSSENCES ARR	R
FETY EQUIPMENT OF TRUCK CAB OF	Terrent and the state of the state of
FETY EQUIPMENT OF TRUCK CAB 4 - NOT APPLICABLE N - TANKER 10 - LIMITED 10 DAYLIGHT ONLY INSIDE THE VEHICLE 11 - LIMITED 10 DAYLIGHT ONLY INSIDE THE VEHICLE 12 - LIMITED - OTHER THE VEHICLE 13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES 13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES 14 - MILLING UNIT 15 - TRAILING UNIT 16 - MESTRAINT SYSTEM 16 - RESTRAINT SYSTEM 17 - DOUBLE & TRIPLE TRAILERS ADAPTIVE DEVICES 18 - OTHER VEHICLE 19 - OTHER / UNKNOWN 10 - OTHER / UNKNOWN 11 - APPARENTLY NORMAL 13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES 1 - APPARENTLY NORMAL 1 - MILLITARY VEHICLES ONLY 2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (E.G., DEPRESSED, AMERYLOSTICABLE 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST 16 - OUTSIDE MIRROR 17 - PROSTHETICALD 17 - PROSTHETICALD 18 - OTHER VEHICLE 18 - OTHER DISTRACTION OUTSIDE 18 - OTHER VEHICLE 19 - OTHER PISTRACTION OUTSIDE 19 - OTHER / UNKNOWN 1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (E.G., DEPRESSED, AMERYLOSTICBRED) DRUG DOSTER SEAT 15 - NON-MOTORIST 15 - NON-MOTORIST 16 - OUTSIDE MIRROR 17 - PROSTHETICALD 17 - PROSTHETICALD 18 - OTHER 18 - OTHER DISTRACTION OUTSIDE 18 - OTHER VEHICLE 18 - OTHER DISTRACTION OUTSIDE 18 - OTHER JUNKNOWN 1 - AND THE VEHICLE 4 - OTHER 15 - MOTORY CHICLES ONLY 2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (E.G., DEPRESSED, AMERYLOSTICALD 4 - ILL NESS 1 - AMPRI	TEST RESULT(S)
FETY EQUIPMENT OF TRUCK CAB OF THE VEHICLE SOTH	R TEST RESULT(S) ETAMINES ITURATES DDIAZEPINES
FELTY EQUIPMENT OF TRUCK CAB 4 - NOT APPLICABLE N - TANKER 10 - LIMITED 10 DAY LIGHT ONLY INSUE IT EVERICE 4 - BRE 4 - NOT APPLICABLE N - TANKER 11 - LIMITED 10 EMPLOYMENT 12 - LIMITED - OTHER 13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES) 13 - TRAILING UNIT NOT MECHANICAL MEANS 14 - MILLITARRY VEHICLE SONLY 15 - MOTOR YEHICLE SONLY 16 - MOTOR SCOOTER 17 - DOUBLE & TRIPLE TRAILERS CONTROLS, OR OTHER ADAPTIVE DEVICES) 16 - MOTOR YEHICLE SONLY 17 - MOUBLE & TRIPLE TRAILERS ADAPTIVE DEVICES) 18 - MOTOR YEHICLE SONLY 19 - OTHER / UNKNOWN 10 - OTHER 11 - LIMITED 10 EMPLOYMENT 12 - LIMITED - OTHER 13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES) 1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT 4 - OTHE AND TANKER 14 - MILLITARY VEHICLES ONLY 2 - PHYSICAL IMPAIRMENT 4 - OTHE AND TORY VEHICLE SONLY AND TORY VEHICLES WITHOUT AND TORY WE WE WE WE WITHOUT AND TORY WE WE WE WE WITHOUT AND TORY WE WE WE WE WITHOUT AND TORY WE WE WE WITHOUT AND TORY WHITH WE WE WE WE WE WITHOUT AND TORY WE WE WE WITHOUT AND TORY WHITH WE WE WE WE WE WITHOUT AND TORY WHITH WE W	R TEST RESULT(S) ETAMINES ITURATES DIAZEPINES ABINOIDS
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FETY EQUIPMENT OF TRUCK CAB 4 - NOT APPLICABLE N - TANKER Q - MOTOR SCOOTER PONE USED ONE USED OF TRUCK CAB OF THE VEHICLE OF TH	TEST RESULT(S) ETAMINES ITURATES JOIAZEPINES ABINOIDS NE ES/OPIOIDS

OF PUBLIC SAFETY UCCUPAN	T/WITNE	SS ADDENDU	M			LOCAL REP			
UNIT # NAME: LAST FIRST MIDDLE					2,0,2,5	5,-,0,0	0,0,1	3,7,3	3,8
	I Compa				DA	TE OF BIRTH		AGE	GENDER
ADDRESS: STREET, CITY, STATE, ZIP				0,1,1,	4,1,9,	5,1,	7,4	F	
				CONTACT PHONE - INCLUDE AREA CODE					
1878 SURREY TL Trail 1 BEL						4 7	4 4	. 2 .	2 0
INJURIES INJURED EMS AGENCY (NAM TAKEN BY	IE)	INJURED TAKEN TO: MEDICAL F	ACILITY (NAME, CITY	SAFETY EQUIPMENT	DOT-COMPLIAN	SEATING POSITION	AIR BAG USAG	E EJECTIO	N TRAPPED
BY				0 4	DOT-COMPLIAN MC HELMET	0 3	, 1	. 1	1
UNIT # NAME: LAST, FIRST, MIDDLE				11.	DA	TE OF BIRTH		AGE	GENDER
01 Early, Zoey					1	3 2 0	1 6	9, ,	F
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHON				الــــــــــــــــــــــــــــــــــــ
ADDRESS: STREET, CITY, STATE, ZIP 130 Southlake DR Drive Cen	terville, OH 454	59					_		
INJURIES INJURED EMS AGENCY (NAMI	E)	INJURED TAKEN TO: MEDICAL FA	CILITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	ATP RAC HSAC	ELECTION	TRAPPED
TAKEN BY				USED 0,4	DOT-COMPLIANT	0 , 5 ,	_		1
UNIT # NAME: LAST, FIRST, MIDDLE						لتكا		1 1	1 1
01 Early, Jacob					1	E OF BIRTH		AGE	GENDER
					1 1 1 1			1 1	<u> </u>
130 Southlake DR Drive Cent	tenville OH 4541	- 0			CONTACT PHONE	- INCLUDE AREA COE	E		
ADDRESS: STREET, CITY, STATE, ZIP 130 Southlake DR Drive Cent INJURIES INJURED EMS AGENCY (NAME		INJURED TAKEN TO: MEDICAL FA		CAPPEN PANTAMENT		1 1	_1_		
5 BY	-	MISORED PARENTO, MEDICAL PA	GILITY (NAME, CITY)	USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
				.0,4	MC HELMET	_0 _4	1	1_	11
					DAT	E OF BIRTH		AGE	GENDER
BRENT, MACT LUGA	N				0 4 0	3 1 9	9 7	2,8,	F
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE	- INCLUDE AREA COD	E		1
4072 WOODEDGE DR Drive B					2 6 9	9 4	4 6	2	4 9
INJURIES INJURED EMS AGENCY (NAME TAKEN BY	3)	INJURED TAKEN TO: MEDICAL FAC	CILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
				0,4	MC HELMET	0 3	1	1	1
INJURIES 1 - FATAL		Y EQUIPMENT USED		SEATING POS	ITION	FIRST	AIR BAG U	SAGE	12 14 15
2 - SUSPECTED SERIOUS INJURY	1 - NONE US VEHICLE	ED - OCCUPANT		T - LEFT SIDE ORCYCLE DRIV	ED)	1 - NOT DEF	PLOYED		
3 - SUSPECTED MINOR INJURY		ER BELT ONLY USED		T - MIDDLE	EKO	2 - DEPLOY	ED FRONT	FRONT	
4 - POSSIBLE INJURY		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSE ESTRAINT SYSTEM - D FACING 6 - SECOND - RIGHT SIDE (SECOND - RIGHT SIDE CING (MOTORCYCLE SIDE (M			3 - DEPLOYED		ED SIDE	SIDE	
5 - NO APPARENT INJURY	4 - SHOULDE						H		
S- HOATTAKENT INSORT	5 - CHILD RE								
INJURED TAKEN BY				ND - RIGHT SID	E	5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN			
1 - NOT TRANSPORTED /TREATED AT SCENE	6 - CHILD RE				CAR) EJECTION		NVVVN		
2 - EMS	7 - BOOSTER						DN		
3 - POLICE	8 - HELMET								
9 - OTHER / UNKNOWN						ED 3 - TOTALLY EJECTED		D	
GENDER									
F-FEMALE	10 - REFLECT	IVE CLOTHING	BUS, P	ICK-UP WITH CAP)	4 - NOT APP	LICABLE		
M - MALE		- PEDESTRIAN		ENGER IN UNEN DAREA	ICLOSED	1 - NOT TRAPPED			
U - OTHER / UNKNOWN	/ BICYCLE		13 - TRAIL						
	99 - OTHER / U	NKNOWN	14 - RIDIN	G ON VEHICLE	EXTERIOR				ICAL
			(NON-T	RAILING UNIT)		3 - FREED B	V NON-ME	CHANICA	
				R/UNKNOWN		MEANS	r Holl-ly	JIIMINIÇA	7 1 1 2
NAME: LAST, FIRST, MIDDLE					DATE	OF BIRTH		AGE	GENDER
				1.			, .].	AUL	GENDER
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE -	INCLUDE AREA CODE			4
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NAME: LAST, FIRST, MIDDLE					DATE	OF BIRTH		AGE	GENDER
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NAME: LAST, FIRST, MIDDLE					DATE	OF BIRTH	T	AGE T	GENDER
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ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE -	INCLUDE AREA CODE		<u> </u>	
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8355 OH1P 3/19 [760-1500]							P/	GE 5	0F 6

OF Pur	BLIC SAFETY	CCUPANT .	/ WITNE	SS ADDENDU	M				ORT NUMBE		
UNIT#	NAME.	ST, FIRST, MIDDLE					2,0,2,5		0.0.1	3,7,3	18,
. 02							1	TE OF BIRTH		AGE	GENDE
	Brent, S: STREET, CIT						0 2 2			0, ,	_ <u>M</u>
	•	je DR Drive Bellb	week OU 453				CONTACT PHON	E - INCLUDE AREA CO	ODE		
	INJURED	EMS AGENCY (NAME)	лоок, оп 453			T	1 1		1 1	1_1	
5	TAKEN BY	EMS AGERCY (NAME)		INJURED TAKEN TO: MEDICAL FA	ICILITY (NAME, CITY)	USED	DOT-COMPLIANT		AIR BAG USAG	E EJECTION	TRAPPE
		J		0,6,			L_IMC HELMET	0 4	1	J 1	1
UNIT #	1	ST, FIRST, MIDDLE					DA	E OF BIRTH		AGE	GENDE
O2	S: STREET, CITY	Lewis					0 4 2	9,2,0	2,3	2	M
		· -					CONTACT PHONE	- INCLUDE AREA CO	IDE		
	INJURED	EMS AGENCY (NAME)	rook, OH 453			T		1_1_	1 1	1 1	. 1
, 5	TAKEN BY	EIII ABERLY (NAME)		INJURED TAKEN TO: MEDICAL FA	CILITY (NAME, CITY)	USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGI	EJECTION	TRAPPE
UNIT #	NAME					0,5		0,6	_1	<u> </u>	_1_
. 02		ST, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDE
لــــــــــــــــــــــــــــــــــــــ	STREET, CITY	Willow					0,3,1			4	F
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	INJURED	e DR Drive Bellb	rook, UH 453			T				1 1	4
. 5	TAKEN BY	LING MERCY (MAME)		INJURED TAKEN TO: MEDICAL FAI	CILITY (NAME, CITY)	USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPE
	NAME		-			0,7	MC HELMET	0,7	_1	_ 1	1
UNIT#	NAME: LAS	ST, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER
ADDDESS	: STREET, CITY	CTATE 7ID						1 1 1			
NDDILLOS.	. SIRLE 1, GIT 1,	SIMIC, ZIP					CONTACT PHONE	- INCLUDE AREA COL	DE		
INJURIES	INJURED	EMS AGENCY (NAME)		MINISTRALIA SE		T				I E	1
	TAKEN BY	LING AGENCY (WARNE)		INJURED TAKEN TO: MEDICAL FAC	CILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPEL
	INI	JRIES	SAFFTY	' EQUIPMENT USED		CEATING DOC					
1 - FATA	SHAPP STORY		1 - NONE US		170	SEATING POS	ITTUN	MORE PROPERTY.	AIR BAG U	SAGE	
2 - SUSI	PECTED SE	RIOUS INJURY		OCCUPANT	(MOT	ORCYCLE DRIV	ER)	1 - NOT DE			
3 - SUSI	PECTED MI	NOR INJURY		R BELT ONLY USED	- In Lander College	T - MIDDLE			2 - DEPLOYED FRONT 3 - DEPLOYED SIDE		
4 - POSS	SIBLE INJU	RY	3 - LAP BELT			IT – RIGHT SIDE ND – LEFT SIDE					
5 - NO A	PPARENT I	NJURY		ER & LAP BELT USED (MOTORCYCLE PAS ESTRAINT SYSTEM - 5 - SECOND - MIDDLE D FACING 6 - SECOND - RIGHT SI ESTRAINT SYSTEM - 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE R SEAT 8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE		(MOTORCYCLE PASSENGER) 5 - SECOND – MIDDLE		FRONT/SIDE			
1000	INJURED	TAKEN BY						5 - NOT APP			
	TRANSPOR					D-LEFT SIDE	LEFT SIDE		9 - DEPLOYMENT UNKNOWN		
	ATED AT S	CENE	REAR FAC				CAR)	EJECTION 1 - NOT EJECTED			1500
2 - EMS 3 - POLI	CE		7 - BOOSTER								
	ER / UNKNO	WN	8 - HELMET	TVE PARS USED 10 - SLEEPER SE			SECTION OF TRUCK CAB		2 - PARTIALLY EJECTED		
		DER		KNEES, ETC.) CARG		ENGER IN OTHE O AREA (NON-TR		3 - TOTALLY EJECTED			
F-FEMA			10- REFLECT			ICK-UP WITH CAP) 4-1101		PPLICABLE		
			- FEDESIRIAN		ENGER IN UNEI O AREA	NCLOSED	HEISTERN.	TRAPPED			
U - OTHE	R / UNKNOV	VN	99 - OTHER / U		13 - TRAIL			1 - NOTTRAPPED			
						G ON VEHICLE	EXTERIOR	2 - EXTRICATED BY MECHANICAL MEANS			AL
					15 - NON-N		OTORIST 3 - FREED BY NON-MECHANI		CHANICA	VICAL	
564			100 200		99 - OTHEI	R/UNKNOWN		MEANS			
NAME: LAS	T, FIRST, MIDDL	.E					DATE	OF BIRTH		AGE	GENDER
ADDRESS:	STREET, CITY, S	STATE 71P						111		البلاية.	
							CONTACT PHONE -	INCLUDE AREA CODE	:		
NAME: LAST	T, FTRST, MIDDL	Ē					D4	OF BYDY'S	1		لسل
							DATE	OF BIRTH		AGE	GENDER
ADDRESS:	STREET, CITY, S	TATE, ZIP					CONTACT PHONE -	INCLUDE AREA CODE		البلل	
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NAME: LAST	, FIRST, MIDÐL	£			-		DATE	OF BIRTH		AGE	GENDER
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DDRESS: S	STREET, CITY, S	TATE, ZIP					CONTACT PHONE -	INCLUDE AREA CODE			
							1 1	1 1 1	-1-1		1 0
8355 OH1F	3/19 [760-1	500}							Р	AGE 6	0F 6

OCAL IEPORT 2025-00008738	REPORTING AGENCY Politore Police	DATE OF ACCIDENT
10000000000000000000000000000000000000	belibrook Police	M 10 D 18 Y 202
29 Greene	ACCIDENT LOCATION Wilmington PI Pike	
7355 Nuit 2	Moss Oak Trail Wilmington Dayton Road	Not To Scale

LOCAL		
REPORT	7000	-8738
NUMBER	2023	10 1 3/)

REPORTING
AGENCY Bellbrook PD

MIO DIT 1725

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

I, Juie Fary HEREBY MAKE THIS VOLUNTARY STATEMENT TO
Officer (on AT Wilmy to Dayth Rol near (entervil) (OFFICERS NAME) AT Wilmy to Dayth Rol near (entervil)
I had my daughter, son, i mom in the won traveling
of the hill before it goes down there was a
mail carrier VIM de livering mail. The black togota vanin
front of me had sloved down for them and
I did to not notice it happening. Dace I did
I slammed on the breaks and a did not stop
on time and pear ended the Toyota Van. Once
stopped I ensured My family was sife. I then
exited my vehicle and went to his to ensure
they were safe. I then asked it it would be
ok If we come down the small parking lot at the bottom
of the hill next to the light for the safety of
everyone and he agraed.
ADDRESS OF WITNESS 130 Southleke Dr. Centerill, OH 45459 PHONE 513-765-2141
OF WITNESS 130 South Like Dr. Centarille, OH 45459 SIGNATURE OF WITNESS Qui a. Early OFC. D. Cap #52
1.1

Ohio Department of Public Safety

TRAFFIC CRASH WITNESS STATEMENT

LOCAL REPORT NUMBER	DEDODTING ACTION	
ECOAL KEI OKI HUMBEK	REPORTING AGENCY	DATE OF CRASH
7000 0720	RELIZIONE ALL	DATE OF CRASH
2025 - 5100	BELLBADOK RD	10 10 100
		M 10 D 18 125

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

I, Alexander Brent HEREBY MAKE THIS VOLUNTARY STATEMENT TO
Officer's NAME AT Wilmington Pike (Retween moss on LOCATION and E: Center Sta
While driving South on wilmington pike, I came to a stop behind 3-5 cars which were behind a mailton truck. While
stopped a blue van Nit the back of my vehicle. I pulled over
approached my window, appleasized, and successed we would better
approached my window, apologized, and suggested we moved further down the road to a park so we wouldn't interfere with traffic. After
arriving at the park, I got out of the vehicle to inspect the clamage
ADDRESS OF WITNESS
4072 Wood edge Dr. Bell brook OH 45305 SIGNATURE OF WITNESS X OFFICER'S SIGNATURE A D A D A D A D A D A D B B B B B B B B B B B B
X All a Melle A73