OHIO DEPARTMENT OF PUBLIC SAFETY — TRAFFIC CRASH REPORT

LOCAL REPORT NUMBER: 14-216
CRASH SEVERITY: 3 (1 - Fatal, 2 - Injury, 3 - PDO)
HIT/SKIP: (1 - Solved, 2 - Unsolved)
LOCAL INFORMATION:

PHOTOS TAKEN: OH-2 OH-1P OH-3 OTHER
PDO UNDER STATE REPORTABLE DOLLAR AMOUNT:
PRIVATE PROPERTY:
REPORTING AGENCY NCIC: 0 8 3 0 3
REPORTING AGENCY NAME: Lebanon Police Department
NUMBER OF UNITS: 2
UNIT IN ERROR: 0 1 (98 - Animal, 99 - Unknown)

COUNTY: 83
CITY: ☑ CITY ☐ VILLAGE ☐ TOWNSHIP
CITY, VILLAGE, TOWNSHIP: Lebanon
CRASH DATE: 0 6 3 0 2 0 1 4
TIME OF CRASH: 1 2 2 2
DAY OF WEEK: MON

DEGREES / MINUTES / SECONDS
LATITUDE: ° ′ ″
LONGITUDE: ° ′ ″
OR
DECIMAL DEGREES
LATITUDE: 39.440530
LONGITUDE: -84.197860

ROADWAY DIVISION: ☐ DIVIDED ☑ UNDIVIDED
DIVIDED LANE DIRECTION OF TRAVEL: N - NORTHBOUND E - EASTBOUND S - SOUTHBOUND W - WESTBOUND
NUMBER OF THRU LANES: 1
ROAD TYPES OR MILEPOST [2]: AL - ALLEY; AV - AVENUE; BL - BOULEVARD; CR - CIRCLE; CT - COURT; DR - DRIVE; HE - HEIGHTS; HW - HIGHWAY; LA - LANE; MP - MILEPOST; PK - PARKWAY; PI - PIKE; PL - PLACE; RD - ROAD; SQ - SQUARE; ST - STREET; TE - TERRACE; TL - TRAIL; WA - WAY

LOCATION ROUTE TYPE [1]:
LOCATION ROUTE NUMBER:
LOC PREFIX (N,S,E,W):
LOCATION ROAD NAME: LaLuz
LOCATION ROAD TYPE [7]: BL
ROUTE TYPES [1]: IR - INTERSTATE ROUTE (INC. TURNPIKE); US - US ROUTE; SR - STATE ROUTE; CR - NUMBERED COUNTY ROUTE; TR - NUMBERED TOWNSHIP ROUTE

DISTANCE FROM REFERENCE: ☐ MILES ☐ FEET ☐ YARDS
DIR FROM REF (N,S,E,W):
REFERENCE ROUTE TYPE [1]:
REFERENCE ROUTE NUMBER:
REF PREFIX (N,S,E,W):
REFERENCE NAME (ROAD, MILEPOST, HOUSE #): 489
REFERENCE ROAD TYPE [7]:

REFERENCE POINT USED: 3 (1 - INTERSECTION, 2 - MILE POST, 3 - HOUSE NUMBER)
CRASH LOCATION: 0 1 (01 - NOT AN INTERSECTION; 02 - FOUR-WAY INTERSECTION; 03 - T-INTERSECTION; 04 - Y-INTERSECTION; 05 - TRAFFIC CIRCLE/ROUNDABOUT; 06 - FIVE-POINT, OR MORE; 07 - ON RAMP; 08 - OFF RAMP; 09 - CROSSOVER; 10 - DRIVEWAY/ALLEY ACCESS; 11 - RAILWAY GRADE CROSSING; 12 - SHARED-USE PATHS OR TRAILS; 99 - UNKNOWN)
☐ INTERSECTION RELATED
LOCATION OF FIRST HARMFUL EVENT: 1 (1 - ON ROADWAY; 2 - ON SHOULDER; 3 - IN MEDIAN; 4 - ON ROADSIDE; 5 - ON GORE; 6 - OUTSIDE TRAFFICWAY; 9 - UNKNOWN)

ROAD CONTOUR: 2 (1 - STRAIGHT LEVEL; 2 - STRAIGHT GRADE; 3 - CURVE LEVEL; 4 - CURVE GRADE; 9 - UNKNOWN)
ROAD CONDITIONS — PRIMARY: 0 1; SECONDARY:
(01 - DRY; 02 - WET; 03 - SNOW; 04 - ICE; 05 - SAND, MUD, DIRT, OIL, GRAVEL; 06 - WATER (STANDING, MOVING); 07 - SLUSH; 08 - DEBRIS*; 09 - RUT, HOLES, BUMPS, UNEVEN PAVEMENT*; 10 - OTHER; 99 - UNKNOWN)
* SECONDARY CONDITION ONLY

MANNER OF CRASH COLLISION/IMPACT: 1 (1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT; 2 - REAR-END; 3 - HEAD-ON; 4 - REAR-TO-REAR; 5 - BACKING; 6 - ANGLE; 7 - SIDESWIPE, SAME DIRECTION; 8 - SIDESWIPE, OPPOSITE DIRECTION; 9 - UNKNOWN)
WEATHER: 1 (1 - CLEAR; 2 - CLOUDY; 3 - FOG, SMOG, SMOKE; 4 - RAIN; 5 - SLEET, HAIL; 6 - SNOW; 7 - SEVERE CROSSWINDS; 8 - BLOWING SAND, SOIL, DIRT, SNOW; 9 - OTHER/UNKNOWN)

ROAD SURFACE: 2 (1 - CONCRETE; 2 - BLACKTOP, BITUMINOUS, ASPHALT; 3 - BRICK/BLOCK; 4 - SLAG, GRAVEL, STONE; 5 - DIRT; 6 - OTHER)
LIGHT CONDITIONS — PRIMARY: 1; SECONDARY:
(1 - DAYLIGHT; 2 - DAWN; 3 - DUSK; 4 - DARK - LIGHTED ROADWAY; 5 - DARK - ROADWAY NOT LIGHTED; 6 - DARK - UNKNOWN ROADWAY LIGHTING; 7 - GLARE*; 8 - OTHER; 9 - UNKNOWN)
* SECONDARY CONDITION ONLY
☐ SCHOOL ZONE RELATED
SCHOOL BUS RELATED: ☐ YES, SCHOOL BUS DIRECTLY INVOLVED ☐ YES, SCHOOL BUS INDIRECTLY INVOLVED

☐ WORK ZONE RELATED
☐ WORKERS PRESENT
☐ LAW ENFORCEMENT PRESENT (OFFICER/VEHICLE)
☐ LAW ENFORCEMENT PRESENT (VEHICLE ONLY)
TYPE OF WORK ZONE: (1 - LANE CLOSURE; 2 - LANE SHIFT/CROSSOVER; 3 - WORK ON SHOULDER OR MEDIAN; 4 - INTERMITTENT OR MOVING WORK; 5 - OTHER)
LOCATION OF CRASH IN WORK ZONE: (1 - BEFORE THE FIRST WORK ZONE WARNING SIGN; 2 - ADVANCE WARNING AREA; 3 - TRANSITION AREA; 4 - ACTIVITY AREA; 5 - TERMINATION AREA)

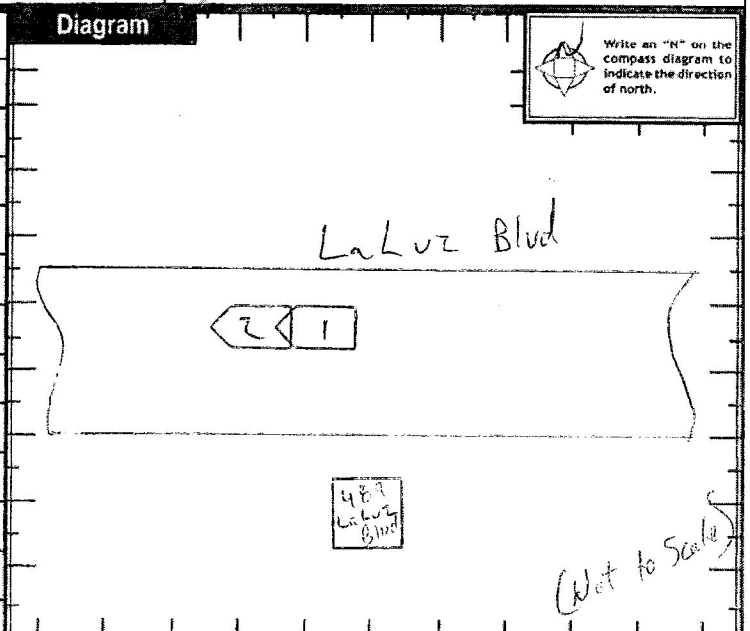
NARRATIVE

Unit #1 and Unit #2 were on LaLuz Blvd. traveling west. At some point the rear of Unit #1 and the front of Unit #2 collided.

According to the driver and passenger of Unit #1 they were traveling west on LaLuz Blvd. and Unit #2 was backing. Unit #1 vehicle came to a stop when Unit #2 was backing and Unit #2 backed into them.

According to the driver of Unit #2 and a witness talking to the driver of Unit #2 from outside of the vehicle. Unit #2 came to a stop and Unit #1 came from behind and struck Unit #2 in the center rear with it's center front.
I checked cameras in the area and did not locate anything of value.

DIAGRAM



REPORT TAKEN BY: ☑ POLICE AGENCY ☐ MOTORIST ☐ SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)

DATE CRASH REPORTED	TIME CRASH REPORTED	DISPATCH TIME	ARRIVAL TIME	TIME CLEARED	OTHER INVESTIGATION TIME	TOTAL MINUTES
06302014	1222	1224	1235	1327		65

OFFICER'S NAME: Ptl. T. Cooper
OFFICER'S BADGE NUMBER: 125
CHECKED BY: [illegible] 131

HSY7001 OH1 (REV 01/12)

OHIO DEPARTMENT OF PUBLIC SAFETY

UNIT

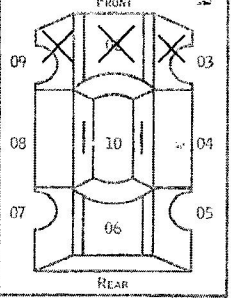
LOCAL REPORT NUMBER: 14-216

UNIT NUMBER	OWNER NAME: LAST, FIRST, MIDDLE (☑ SAME AS DRIVER)	OWNER PHONE NUMBER - INC. AREA CODE (☑ SAME AS DRIVER)	DAMAGE SCALE	DAMAGED AREA
01			3	

OWNER ADDRESS: CITY, STATE, ZIP (☑ SAME AS DRIVER)

DAMAGE SCALE: 1 - NONE; 2 - MINOR; 3 - FUNCTIONAL; 4 - DISABLING; 9 - UNKNOWN

DAMAGED AREA



LP STATE	LICENSE PLATE NUMBER	VEHICLE IDENTIFICATION NUMBER	# OCCUPANTS
OH	FWS4561	2T1BU4EE0DC975702	02

VEHICLE YEAR	VEHICLE MAKE	VEHICLE MODEL	VEHICLE COLOR
2013	Toyota	Corolla	Silver

☑ PROOF OF INSURANCE SHOWN	INSURANCE COMPANY	POLICY NUMBER	TOWED BY
☑	Geico	4331894131	

CARRIER NAME, ADDRESS, CITY, STATE, ZIP: Geico Casualty, One Geico Center, Macon, GA 31295

CARRIER PHONE - INCLUDE AREA CODE: (800) 841-3000

US DOT:

HM PLACARD ID NO.:

HM CLASS NUMBER:

VEHICLE WEIGHT GVWR/GCWR: 1 - LESS THAN OR EQUAL TO 10K LBS. 2 - 10,001 TO 26,000 LBS 3 - MORE THAN 26,000 LBS.

☐ HAZARDOUS MATERIAL RELEASED

CARGO BODY TYPE: 01

01 - NO CARGO BODY TYPE/NOT APPLICABLE; 02 - BUS/VAN (9-15 SEATS, INC DRIVER); 03 - BUS (16+ SEATS, INC DRIVER); 04 - VEHICLE TOWING ANOTHER VEHICLE; 05 - LOGGING; 06 - INTERMODAL CONTAINER CHASSIS; 07 - CARGO VAN/ENCLOSED BOX; 08 - GRAIN, CHIPS, GRAVEL; 09 - POLE; 10 - CARGO TANK; 11 - FLAT BED; 12 - DUMP; 13 - CONCRETE MIXER; 14 - AUTO TRANSPORTER; 15 - GARBAGE/REFUSE; 99 - OTHER/UNKNOWN

TRAFFICWAY DESCRIPTION: 1

1 - TWO-WAY, NOT DIVIDED; 2 - TWO-WAY, NOT DIVIDED, CONTINUOUS LEFT TURN LANE; 3 - TWO-WAY, DIVIDED, UNPROTECTED (PAINTED OR GRASS >4 FT.) MEDIAN; 4 - TWO-WAY, DIVIDED, POSITIVE MEDIAN BARRIER; 5 - ONE-WAY TRAFFICWAY

☐ HIT / SKIP UNIT

NON-MOTORIST LOCATION PRIOR TO IMPACT:

01 - INTERSECTION - MARKED CROSSWALK; 02 - INTERSECTION - NO CROSSWALK; 03 - INTERSECTION - OTHER; 04 - MIDBLOCK - MARKED CROSSWALK; 05 - TRAVEL LANE - OTHER LOCATION; 06 - BICYCLE LANE; 07 - SHOULDER/ROADSIDE; 08 - SIDEWALK; 09 - MEDIAN/CROSSING ISLAND; 10 - DRIVEWAY ACCESS; 11 - SHARED-USE PATH OR TRAIL; 12 - NON-TRAFFICWAY AREA; 99 - OTHER/UNKNOWN

TYPE OF USE: 1

1 - PERSONAL; 2 - COMMERCIAL; 3 - GOVERNMENT

☐ IN EMERGENCY RESPONSE

UNIT TYPE: 03

99 - UNKNOWN OR HIT/SKIP

PASSENGER VEHICLES (LESS THAN 9 PASSENGERS): 01 - SUB-COMPACT; 02 - COMPACT; 03 - MID SIZE; 04 - FULL SIZE; 05 - MINIVAN; 06 - SPORT UTILITY VEHICLE; 07 - PICKUP; 08 - VAN; 09 - MOTORCYCLE; 10 - MOTORIZED BICYCLE; 11 - SNOWMOBILE/ATV; 12 - OTHER PASSENGER VEHICLE

MED/HEAVY TRUCKS OR COMBO UNITS > 10K LBS: 13 - SINGLE UNIT TRUCK OR VAN 2AXLE, 6 TIRES; 14 - SINGLE UNIT TRUCK; 3+ AXLES; 15 - SINGLE UNIT TRUCK / TRAILER; 16 - TRUCK/TRACTOR (BOBTAIL); 17 - TRACTOR/SEMI-TRAILER; 18 - TRACTOR/DOUBLE; 19 - TRACTOR/TRIPLES; 20 - OTHER MED/HEAVY VEHICLE

☐ HAS HM PLACARD

BUS/VAN/LIMO (9 OR MORE INCLUDING DRIVER): 21 - BUS/VAN (9-15 SEATS, INC DRIVER); 22 - BUS (16+ SEATS, INC DRIVER)

NON-MOTORIST: 23 - ANIMAL WITH RIDER; 24 - ANIMAL WITH BUGGY, WAGON, SURREY; 25 - BICYCLE/PEDACYCLIST; 26 - PEDESTRIAN/SKATER; 27 - OTHER NON-MOTORIST

SPECIAL FUNCTION: 01

01 - NONE; 02 - TAXI; 03 - RENTAL TRUCK (OVER 10K LBS); 04 - BUS - SCHOOL (PUBLIC OR PRIVATE); 05 - BUS - TRANSIT; 06 - BUS - CHARTER; 07 - BUS - SHUTTLE; 08 - BUS - OTHER; 09 - AMBULANCE; 10 - FIRE; 11 - HIGHWAY/MAINTENANCE; 12 - MILITARY; 13 - POLICE; 14 - PUBLIC UTILITY; 15 - OTHER GOVERNMENT; 16 - CONSTRUCTION EQUIP.; 17 - FARM VEHICLE; 18 - FARM EQUIPMENT; 19 - MOTORHOME; 20 - GOLF CART; 21 - TRAIN; 22 - OTHER (EXPLAIN IN NARRATIVE); 99 - UNKNOWN

MOST DAMAGED AREA: 02

IMPACT AREA: 02

01 - NONE; 02 - CENTER FRONT; 03 - RIGHT FRONT; 04 - RIGHT SIDE; 05 - RIGHT REAR; 06 - REAR CENTER; 07 - LEFT REAR; 08 - LEFT SIDE; 09 - LEFT FRONT; 10 - TOP AND WINDOWS; 11 - UNDERCARRIAGE; 12 - LOAD/TRAILER; 13 - TOTAL (ALL AREAS); 14 - OTHER; 99 - UNKNOWN

ACTION: 9

1 - NON-CONTACT; 2 - NON-COLLISION; 3 - STRIKING; 4 - STRUCK; 5 - STRIKING/STRUCK; 9 - UNKNOWN

PRE-CRASH ACTIONS: 99

99 - UNKNOWN

MOTORIST: 01 - STRAIGHT AHEAD; 02 - BACKING; 03 - CHANGING LANES; 04 - OVERTAKING/PASSING; 05 - MAKING RIGHT TURN; 06 - MAKING LEFT TURN; 07 - MAKING U-TURN; 08 - ENTERING TRAFFIC LANE; 09 - LEAVING TRAFFIC LANE; 10 - PARKED; 11 - SLOWING OR STOPPED IN TRAFFIC; 12 - DRIVERLESS; 13 - NEGOTIATING A CURVE; 14 - OTHER MOTORIST ACTION

NON-MOTORIST: 15 - ENTERING OR CROSSING SPECIFIED LOCATION; 16 - WALKING, RUNNING, JOGGING, PLAYING, CYCLING; 17 - WORKING; 18 - PUSHING VEHICLE; 19 - APPROACHING OR LEAVING VEHICLE; 20 - STANDING; 21 - OTHER NON-MOTORIST ACTION

CONTRIBUTING CIRCUMSTANCES

PRIMARY: 99

SECONDARY:

99 - UNKNOWN

MOTORIST: 01 - NONE; 02 - FAILURE TO YIELD; 03 - RAN RED LIGHT; 04 - RAN STOP SIGN; 05 - EXCEEDED SPEED LIMIT; 06 - UNSAFE SPEED; 07 - IMPROPER TURN; 08 - LEFT OF CENTER; 09 - FOLLOWED TOO CLOSELY/ACDA; 10 - IMPROPER LANE CHANGE /PASSING/OFF ROAD; 11 - IMPROPER BACKING; 12 - IMPROPER START FROM PARKED POSITION; 13 - STOPPED OR PARKED ILLEGALLY; 14 - OPERATING VEHICLE IN NEGLIGENT MANNER; 15 - SWERVING TO AVOID (DUE TO EXTERNAL CONDITIONS); 16 - WRONG SIDE/WRONG WAY; 17 - FAILURE TO CONTROL; 18 - VISION OBSTRUCTION; 19 - OPERATING DEFECTIVE EQUIPMENT; 20 - LOAD SHIFTING/FALLING/SPILLING; 21 - OTHER IMPROPER ACTION

NON-MOTORIST: 22 - NONE; 23 - IMPROPER CROSSING; 24 - DARTING; 25 - LYING AND/OR ILLEGALLY IN ROADWAY; 26 - FAILURE TO YIELD RIGHT OF WAY; 27 - NOT VISIBLE (DARK CLOTHING); 28 - INATTENTIVE; 29 - FAILURE TO OBEY TRAFFIC SIGNS /SIGNALS/OFFICER; 30 - WRONG SIDE OF THE ROAD; 31 - OTHER NON-MOTORIST ACTION

VEHICLE DEFECTS: 01 - TURN SIGNALS; 02 - HEAD LAMPS; 03 - TAIL LAMPS; 04 - BRAKES; 05 - STEERING; 06 - TIRE BLOWOUT; 07 - WORN OR SLICK TIRES; 08 - TRAILER EQUIPMENT DEFECTIVE; 09 - MOTOR TROUBLE; 10 - DISABLED FROM PRIOR ACCIDENT; 11 - OTHER DEFECTS

SEQUENCE OF EVENTS

1	2	3	4	5	6
20					

FIRST HARMFUL EVENT: 1 MOST HARMFUL EVENT: 1 99 - UNKNOWN

NON-COLLISION EVENTS: 01 - OVERTURN/ROLLOVER; 02 - FIRE/EXPLOSION; 03 - IMMERSION; 04 - JACKKNIFE; 05 - CARGO/EQUIPMENT LOSS OR SHIFT; 06 - EQUIPMENT FAILURE (BLOWN TIRE, BRAKE FAILURE, ETC); 07 - SEPARATION OF UNITS; 08 - RAN OFF ROAD RIGHT; 09 - RAN OFF ROAD LEFT; 10 - CROSS MEDIAN; 11 - CROSS CENTER LINE OPPOSITE DIRECTION OF TRAVEL; 12 - DOWNHILL RUNAWAY; 13 - OTHER NON-COLLISION

COLLISION WITH PERSON, VEHICLE OR OBJECT NOT FIXED: 14 - PEDESTRIAN; 15 - PEDALCYCLE; 16 - RAILWAY VEHICLE (TRAIN, ENGINE); 17 - ANIMAL - FARM; 18 - ANIMAL - DEER; 19 - ANIMAL - OTHER; 20 - MOTOR VEHICLE IN TRANSPORT; 21 - PARKED MOTOR VEHICLE; 22 - WORK ZONE MAINTENANCE EQUIPMENT; 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE; 24 - OTHER MOVABLE OBJECT

COLLISION WITH FIXED OBJECT: 25 - IMPACT ATTENUATOR/CRASH CUSHION; 26 - BRIDGE OVERHEAD STRUCTURE; 27 - BRIDGE PIER OR ABUTMENT; 28 - BRIDGE PARAPET; 29 - BRIDGE RAIL; 30 - GUARDRAIL FACE; 31 - GUARDRAIL END; 32 - PORTABLE BARRIER; 33 - MEDIAN CABLE BARRIER; 34 - MEDIAN GUARDRAIL BARRIER; 35 - MEDIAN CONCRETE BARRIER; 36 - MEDIAN OTHER BARRIER; 37 - TRAFFIC SIGN POST; 38 - OVERHEAD SIGN POST; 39 - LIGHT/LUMINARIES SUPPORT; 40 - UTILITY POLE; 41 - OTHER POST, POLE OR SUPPORT; 42 - CULVERT; 43 - CURB; 44 - DITCH; 45 - EMBANKMENT; 46 - FENCE; 47 - MAILBOX; 48 - TREE; 49 - FIRE HYDRANT; 50 - WORK ZONE MAINTENANCE EQUIPMENT; 51 - WALL, BUILDING, TUNNEL; 52 - OTHER FIXED OBJECT

UNIT SPEED: ☐ STATED ☐ ESTIMATED

POSTED SPEED: 25

TRAFFIC CONTROL: 01

01 - NO CONTROLS; 02 - STOP SIGN; 03 - YIELD SIGN; 04 - TRAFFIC SIGNAL; 05 - TRAFFIC FLASHERS; 06 - SCHOOL ZONE; 07 - RAILROAD CROSSBUCKS; 08 - RAILROAD FLASHERS; 09 - RAILROAD GATES; 10 - CONSTRUCTION BARRICADE; 11 - PERSON (FLAGGER, OFFICER); 12 - PAVEMENT MARKINGS; 13 - CROSSWALK LINES; 14 - WALK/DON'T WALK; 15 - OTHER; 16 - NOT REPORTED

UNIT DIRECTION: FROM 3 TO 4

1 - NORTH; 2 - SOUTH; 3 - EAST; 4 - WEST; 5 - NORTHEAST; 6 - NORTHWEST; 7 - SOUTHEAST; 8 - SOUTHWEST; 9 - UNKNOWN

OHIO DEPARTMENT OF PUBLIC SAFETY — EDUCATION · SERVICE · PROTECTION

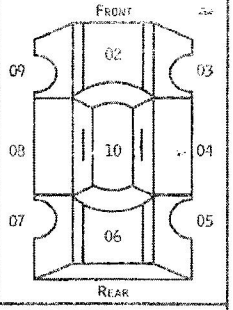
UNIT

LOCAL REPORT NUMBER: 14-216

UNIT NUMBER	OWNER NAME: LAST, FIRST, MIDDLE (☑ SAME AS DRIVER)	OWNER PHONE NUMBER - INC. AREA CODE (☑ SAME AS DRIVER)	DAMAGE SCALE	DAMAGED AREA
02			2	

OWNER ADDRESS: CITY, STATE, ZIP (☑ SAME AS DRIVER)

1 - NONE · 2 - MINOR · 3 - FUNCTIONAL · 4 - DISABLING · 9 - UNKNOWN



LP STATE	LICENSE PLATE NUMBER	VEHICLE IDENTIFICATION NUMBER	# OCCUPANTS
OH	Z082254	1GCEC19X47Z599736	01

VEHICLE YEAR	VEHICLE MAKE	VEHICLE MODEL	VEHICLE COLOR
2007	Chevy	Silverado	Black

PROOF OF INSURANCE SHOWN	INSURANCE COMPANY	POLICY NUMBER	TOWED BY
☑	Pekin	03625459P	

CARRIER NAME, ADDRESS, CITY, STATE, ZIP: Ohio Insurance and Financial Group

CARRIER PHONE - INCLUDE AREA CODE: (513) 770-9319

US DOT

HM PLACARD ID NO.

HM CLASS NUMBER

VEHICLE WEIGHT GVWR/GCWR: 1 - LESS THAN OR EQUAL TO 10K LBS. · 2 - 10,001 TO 26,000 LBS · 3 - MORE THAN 26,000 LBS.

☐ HAZARDOUS MATERIAL RELEASED

CARGO BODY TYPE: 01

01 - NO CARGO BODY TYPE/NOT APPLICABLE · 02 - BUS/VAN (9-15 SEATS, INC DRIVER) · 03 - BUS (16+ SEATS, INC DRIVER) · 04 - VEHICLE TOWING ANOTHER VEHICLE · 05 - LOGGING · 06 - INTERMODAL CONTAINER CHASSIS · 07 - CARGO VAN/ENCLOSED BOX · 08 - GRAIN, CHIPS, GRAVEL · 09 - POLE · 10 - CARGO TANK · 11 - FLAT BED · 12 - DUMP · 13 - CONCRETE MIXER · 14 - AUTO TRANSPORTER · 15 - GARBAGE/REFUSE · 99 - OTHER/UNKNOWN

TRAFFICWAY DESCRIPTION: 1

1 - TWO-WAY, NOT DIVIDED · 2 - TWO-WAY, NOT DIVIDED, CONTINUOUS LEFT TURN LANE · 3 - TWO-WAY, DIVIDED, UNPROTECTED (PAINTED OR GRASS >4 FT.) MEDIAN · 4 - TWO-WAY, DIVIDED, POSITIVE MEDIAN BARRIER · 5 - ONE-WAY TRAFFICWAY

☐ HIT / SKIP UNIT

NON-MOTORIST LOCATION PRIOR TO IMPACT

01 - INTERSECTION - MARKED CROSSWALK · 02 - INTERSECTION - NO CROSSWALK · 03 - INTERSECTION - OTHER · 04 - MIDBLOCK - MARKED CROSSWALK · 05 - TRAVEL LANE - OTHER LOCATION · 06 - BICYCLE LANE · 07 - SHOULDER/ROADSIDE · 08 - SIDEWALK · 09 - MEDIAN/CROSSING ISLAND · 10 - DRIVEWAY ACCESS · 11 - SHARED-USE PATH OR TRAIL · 12 - NON TRAFFICWAY AREA · 99 - OTHER/UNKNOWN

TYPE OF USE: 1

1 - PERSONAL · 2 - COMMERCIAL · 3 - GOVERNMENT

☐ IN EMERGENCY RESPONSE

UNIT TYPE: 07

99 - UNKNOWN OR HIT/SKIP

PASSENGER VEHICLES (LESS THAN 9 PASSENGERS): 01 - SUB-COMPACT · 02 - COMPACT · 03 - MID SIZE · 04 - FULL SIZE · 05 - MINIVAN · 06 - SPORT UTILITY VEHICLE · 07 - PICKUP · 08 - VAN · 09 - MOTORCYCLE · 10 - MOTORIZED BICYCLE · 11 - SNOWMOBILE/ATV · 12 - OTHER PASSENGER VEHICLE

MED/HEAVY TRUCKS OR COMBO UNITS > 10K LBS: 13 - SINGLE UNIT TRUCK OR VAN 2AXLE, 6 TIRES · 14 - SINGLE UNIT TRUCK; 3+ AXLES · 15 - SINGLE UNIT TRUCK / TRAILER · 16 - TRUCK/TRACTOR (BOBTAIL) · 17 - TRACTOR/SEMI-TRAILER · 18 - TRACTOR/DOUBLE · 19 - TRACTOR/TRIPLES · 20 - OTHER MED/HEAVY VEHICLE

☐ HAS HM PLACARD

BUS/VAN/LIMO (9 OR MORE INCLUDING DRIVER): 21 - BUS/VAN (9-15 SEATS, INC DRIVER) · 22 - BUS (16+ SEATS, INC DRIVER)

NON-MOTORIST: 23 - ANIMAL WITH RIDER · 24 - ANIMAL WITH BUGGY, WAGON, SURREY · 25 - BICYCLE/PEDACYCLIST · 26 - PEDESTRIAN/SKATER · 27 - OTHER NON-MOTORIST

SPECIAL FUNCTION: 01

01 - NONE · 02 - TAXI · 03 - RENTAL TRUCK (OVER 10K LBS) · 04 - BUS - SCHOOL (PUBLIC OR PRIVATE) · 05 - BUS - TRANSIT · 06 - BUS - CHARTER · 07 - BUS - SHUTTLE · 08 - BUS - OTHER · 09 - AMBULANCE · 10 - FIRE · 11 - HIGHWAY/MAINTENANCE · 12 - MILITARY · 13 - POLICE · 14 - PUBLIC UTILITY · 15 - OTHER GOVERNMENT · 16 - CONSTRUCTION EQUIP. · 17 - FARM VEHICLE · 18 - FARM EQUIPMENT · 19 - MOTORHOME · 20 - GOLF CART · 21 - TRAIN · 22 - OTHER (EXPLAIN IN NARRATIVE)

MOST DAMAGED AREA: 06

IMPACT AREA: 06

01 - NONE · 02 - CENTER FRONT · 03 - RIGHT FRONT · 04 - RIGHT SIDE · 05 - RIGHT REAR · 06 - REAR CENTER · 07 - LEFT REAR · 08 - LEFT SIDE · 09 - LEFT FRONT · 10 - TOP AND WINDOWS · 11 - UNDERCARRIAGE · 12 - LOAD/TRAILER · 13 - TOTAL (ALL AREAS) · 14 - OTHER · 99 - UNKNOWN

ACTION: 9

1 - NON-CONTACT · 2 - NON-COLLISION · 3 - STRIKING · 4 - STRUCK · 5 - STRIKING/STRUCK · 9 - UNKNOWN

PRE-CRASH ACTIONS: 99

99 - UNKNOWN

MOTORIST: 01 - STRAIGHT AHEAD · 02 - BACKING · 03 - CHANGING LANES · 04 - OVERTAKING/PASSING · 05 - MAKING RIGHT TURN · 06 - MAKING LEFT TURN · 07 - MAKING U-TURN · 08 - ENTERING TRAFFIC LANE · 09 - LEAVING TRAFFIC LANE · 10 - PARKED · 11 - SLOWING OR STOPPED IN TRAFFIC · 12 - DRIVERLESS · 13 - NEGOTIATING A CURVE · 14 - OTHER MOTORIST ACTION

NON-MOTORIST: 15 - ENTERING OR CROSSING SPECIFIED LOCATION · 16 - WALKING, RUNNING, JOGGING, PLAYING, CYCLING · 17 - WORKING · 18 - PUSHING VEHICLE · 19 - APPROACHING OR LEAVING VEHICLE · 20 - STANDING · 21 - OTHER NON-MOTORIST ACTION

CONTRIBUTING CIRCUMSTANCES

PRIMARY: 99

SECONDARY:

99 - UNKNOWN

MOTORIST: 01 - NONE · 02 - FAILURE TO YIELD · 03 - RAN RED LIGHT · 04 - RAN STOP SIGN · 05 - EXCEEDED SPEED LIMIT · 06 - UNSAFE SPEED · 07 - IMPROPER TURN · 08 - LEFT OF CENTER · 09 - FOLLOWED TOO CLOSELY/ACDA · 10 - IMPROPER LANE CHANGE /PASSING/OFF ROAD · 11 - IMPROPER BACKING · 12 - IMPROPER START FROM PARKED POSITION · 13 - STOPPED OR PARKED ILLEGALLY · 14 - OPERATING VEHICLE IN NEGLIGENT MANNER · 15 - SWERVING TO AVOID (DUE TO EXTERNAL CONDITIONS) · 16 - WRONG SIDE/WRONG WAY · 17 - FAILURE TO CONTROL · 18 - VISION OBSTRUCTION · 19 - OPERATING DEFECTIVE EQUIPMENT · 20 - LOAD SHIFTING/FALLING/SPILLING · 21 - OTHER IMPROPER ACTION

NON-MOTORIST: 22 - NONE · 23 - IMPROPER CROSSING · 24 - DARTING · 25 - LYING AND/OR ILLEGALLY IN ROADWAY · 26 - FAILURE TO YIELD RIGHT OF WAY · 27 - NOT VISIBLE (DARK CLOTHING) · 28 - INATTENTIVE · 29 - FAILURE TO OBEY TRAFFIC SIGNS /SIGNALS/OFFICER · 30 - WRONG SIDE OF THE ROAD · 31 - OTHER NON-MOTORIST ACTION

VEHICLE DEFECTS: 01 - TURN SIGNALS · 02 - HEAD LAMPS · 03 - TAIL LAMPS · 04 - BRAKES · 05 - STEERING · 06 - TIRE BLOWOUT · 07 - WORN OR SLICK TIRES · 08 - TRAILER EQUIPMENT DEFECTIVE · 09 - MOTOR TROUBLE · 10 - DISABLED FROM PRIOR ACCIDENT · 11 - OTHER DEFECTS

SEQUENCE OF EVENTS

1	2	3	4	5	6
20					

FIRST HARMFUL EVENT: 1 · MOST HARMFUL EVENT: 1 · 99 - UNKNOWN

NON-COLLISION EVENTS: 01 - OVERTURN/ROLLOVER · 02 - FIRE/EXPLOSION · 03 - IMMERSION · 04 - JACKKNIFE · 05 - CARGO/EQUIPMENT LOSS OR SHIFT · 06 - EQUIPMENT FAILURE (BLOWN TIRE, BRAKE FAILURE, ETC) · 07 - SEPARATION OF UNITS · 08 - RAN OFF ROAD RIGHT · 09 - RAN OFF ROAD LEFT · 10 - CROSS MEDIAN · 11 - CROSS CENTER LINE OPPOSITE DIRECTION OF TRAVEL · 12 - DOWNHILL RUNAWAY · 13 - OTHER NON-COLLISION

COLLISION WITH PERSON, VEHICLE OR OBJECT NOT FIXED: 14 - PEDESTRIAN · 15 - PEDALCYCLE · 16 - RAILWAY VEHICLE (TRAIN, ENGINE) · 17 - ANIMAL - FARM · 18 - ANIMAL - DEER · 19 - ANIMAL - OTHER · 20 - MOTOR VEHICLE IN TRANSPORT · 21 - PARKED MOTOR VEHICLE · 22 - WORK ZONE MAINTENANCE EQUIPMENT · 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE · 24 - OTHER MOVABLE OBJECT

COLLISION WITH FIXED OBJECT: 25 - IMPACT ATTENUATOR/CRASH CUSHION · 26 - BRIDGE OVERHEAD STRUCTURE · 27 - BRIDGE PIER OR ABUTMENT · 28 - BRIDGE PARAPET · 29 - BRIDGE RAIL · 30 - GUARDRAIL FACE · 31 - GUARDRAIL END · 32 - PORTABLE BARRIER · 33 - MEDIAN CABLE BARRIER · 34 - MEDIAN GUARDRAIL BARRIER · 35 - MEDIAN CONCRETE BARRIER · 36 - MEDIAN OTHER BARRIER · 37 - TRAFFIC SIGN POST · 38 - OVERHEAD SIGN POST · 39 - LIGHT/LUMINARIES SUPPORT · 40 - UTILITY POLE · 41 - OTHER POST, POLE OR SUPPORT · 42 - CULVERT · 43 - CURB · 44 - DITCH · 45 - EMBANKMENT · 46 - FENCE · 47 - MAILBOX · 48 - TREE · 49 - FIRE HYDRANT · 50 - WORK ZONE MAINTENANCE EQUIPMENT · 51 - WALL, BUILDING, TUNNEL · 52 - OTHER FIXED OBJECT

UNIT SPEED: ☐ STATED ☐ ESTIMATED

POSTED SPEED: 25

TRAFFIC CONTROL: 01

01 - NO CONTROLS · 02 - STOP SIGN · 03 - YIELD SIGN · 04 - TRAFFIC SIGNAL · 05 - TRAFFIC FLASHERS · 06 - SCHOOL ZONE · 07 - RAILROAD CROSSBUCKS · 08 - RAILROAD FLASHERS · 09 - RAILROAD GATES · 10 - CONSTRUCTION BARRICADE · 11 - PERSON (FLAGGER, OFFICER) · 12 - PAVEMENT MARKINGS · 13 - CROSSWALK LINES · 14 - WALK/DON'T WALK · 15 - OTHER · 16 - NOT REPORTED

UNIT DIRECTION: FROM 3 TO 4

1 - NORTH · 2 - SOUTH · 3 - EAST · 4 - WEST · 5 - NORTHEAST · 6 - NORTHWEST · 7 - SOUTHEAST · 8 - SOUTHWEST · 9 - UNKNOWN

OHIO DEPARTMENT OF PUBLIC SAFETY — MOTORIST / NON-MOTORIST / OCCUPANT

LOCAL REPORT NUMBER: 14-216

MOTORIST/NON-MOTORIST

UNIT NUMBER	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
01	Rheinfrank, Pamela	09/11/1974	39	F (F - FEMALE, M - MALE)

ADDRESS, CITY, STATE, ZIP: 1158 S. Timber Creek Dr., Milford, OH 45150

CONTACT PHONE - INCLUDE AREA CODE: (513) 614-1886

INJURIES	INJURED TAKEN BY	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED	DOT COMPLIANT MOTORCYCLE HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
1	1			99	☐	01	1	1	1

OL STATE	OPERATOR LICENSE NUMBER	OL CLASS	NO VALID OL	M/C END.	CONDITION	ALCOHOL/DRUG SUSPECTED	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST STATUS	DRUG TEST TYPE
OH	RM129847	4	☐	☐	1	1	1	1	.	1	1

OFFENSE CHARGED (☑ LOCAL CODE)	OFFENSE DESCRIPTION	CITATION NUMBER	HANDS-FREE DEVICE USED	DRIVER DISTRACTED BY
			☐	4

MOTORIST/NON-MOTORIST

UNIT NUMBER	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
02	Smith, Cleveland	09/29/1965	48	M (F - FEMALE, M - MALE)

ADDRESS, CITY, STATE, ZIP: 1065 E. Main St. #67, Lebanon, Oh 45036

CONTACT PHONE - INCLUDE AREA CODE: (513) 370-4078

INJURIES	INJURED TAKEN BY	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED	DOT COMPLIANT MOTORCYCLE HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
1	1			99	☐	01	1	1	1

OL STATE	OPERATOR LICENSE NUMBER	OL CLASS	NO VALID OL	M/C END.	CONDITION	ALCOHOL/DRUG SUSPECTED	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST STATUS	DRUG TEST TYPE
OH	UG430863	4	☐	☐	1	1	1	1	.	1	1

OFFENSE CHARGED (☐ LOCAL CODE)	OFFENSE DESCRIPTION	CITATION NUMBER	HANDS-FREE DEVICE USED	DRIVER DISTRACTED BY
			☐	4

INJURIES
1 - No Injury / None Reported
2 - Possible
3 - Non-Incapacitating
4 - Incapacitating
5 - Fatal

INJURED TAKEN BY
1 - Not Transported / Treated at Scene
2 - EMS
3 - Police
4 - Other
9 - Unknown

SAFETY EQUIPMENT USED
Motorist
01 - None Used - Vehicle Occupant
02 - Shoulder Belt Only Used
03 - Lap Belt Only Used
04 - Shoulder and Lap Belt Used
05 - Child Restraint System-Forward Facing
06 - Child Restraint System- Rear Facing
07 - Booster Seat
08 - Helmet Used
99 - Unknown Safety Equipment

Non-Motorist
09 - None Used
10 - Helmet Used
11 - Protective Pads Used (Elbows, Knees, Etc)
12 - Reflective Clothing
13 - Lighting
14 - Other

SEATING POSITION
01 - Front - Left Side (Motorcycle Driver)
02 - Front - Middle
03 - Front - Right Side
04 - Second - Left Side (Motorcycle Passenger)
05 - Second - Middle
06 - Second - Right Side
07 - Third - Left Side (Motorcycle Side Car)
08 - Third - Middle
09 - Third - Right Side
10 - Sleeper Section of Cab (Truck)
11 - Passenger - Other Enclosed Cargo Area (Non-Trailing Unit Such as a Bus, Pick-up with Cap)
12 - Passenger in Unenclosed Cargo Area
13 - Trailing Unit
14 - Riding on Vehicle Exterior (Non-Trailing Unit)
15 - Non-Motorist
16 - Other
99 - Unknown

AIR BAG USAGE
1 - Not Deployed
2 - Deployed Front
3 - Deployed Side
4 - Deployed Both Front/Side
5 - Not Applicable
9 - Deployment Unknown

EJECTION
1 - Not Ejected
2 - Totally Ejected
3 - Partially Ejected
4 - Not Applicable

TRAPPED
1 - Not Trapped
2 - Extricated by Mechanical Means
3 - Extricated by Non-Mechanical Means

OPERATOR LICENSE CLASS
1 - Class A
2 - Class B
3 - Class C
4 - Regular Class (Ohio is "D")
5 - M/C/Moped Only

CONDITION
1 - Apparently Normal
2 - Physical Impairment
3 - Emotional (Depressed, Angry, Disturbed)
4 - Illness
5 - Fell Asleep, Fainted, Fatigued
6 - Under the Influence of Medications, Drugs, Alcohol
7 - Other

ALCOHOL/DRUG SUSPECTED
1 - None
2 - Yes - Alcohol Suspected
3 - Yes - HBD Not Impaired
4 - Yes - Drugs Suspected
5 - Yes - Alcohol and Drugs Suspected

ALCOHOL TEST STATUS
1 - None Given
2 - Test Refused
3 - Test Given, Contaminated Sample/Unusable
4 - Test Given, Results Known
5 - Test Given, Results Unknown

ALCOHOL TEST TYPE
1 - None
2 - Blood
3 - Urine
4 - Breath
5 - Other

DRUG TEST STATUS
1 - None Given
2 - Test Refused
3 - Test Given, Contaminated Sample/Unusable
4 - Test Given, Results Known
5 - Test Given, Results Unknown

DRUG TEST TYPE
1 - None
2 - Blood
3 - Urine
4 - Other

DRIVER DISTRACTED BY
1 - No Distraction Reported
2 - Phone
3 - Texting/E-mailing
4 - Electronic Communication Device
5 - Other Electronic Device (Navigation Device, Radio, DVD)
6 - Other Inside the Vehicle
7 - External Distraction

OCCUPANT

UNIT NUMBER	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
01	Durham, Felicia	01/19/1994	20	F (F - FEMALE, M - MALE)

ADDRESS, CITY, STATE, ZIP: 485 LaLuz Blvd. #106, Lebanon, OH 45036

CONTACT PHONE - INCLUDE AREA CODE: (513) 510-6288

INJURIES	INJURED TAKEN BY	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED	DOT COMPLIANT MOTORCYCLE HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
1	1			99	☐	03	1	1	1

OCCUPANT

UNIT NUMBER	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
				☐ F - FEMALE, M - MALE

ADDRESS, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED	DOT COMPLIANT MOTORCYCLE HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
					☐				

OHIO DEPARTMENT OF PUBLIC SAFETY — OCCUPANT / WITNESS ADDENDUM

Local Report Number: 14-2169

OCCUPANT

Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender
	Witness: Gibson, Brenda			F (F - Female, M - Male)

Address, City, State, Zip	Contact Phone - Include Area Code
489 LaLuz Blvd. #215, Lebanon, Oh 45036	(513) 228-2851

Injuries	Injured Taken By	EMS Agency	Medical Facility Injured Taken To	Safety Equipment Used	DOT Compliant Motorcycle Helmet	Seating Position	Air Bag Usage	Ejection	Trapped
					☐				

OCCUPANT

Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender
				F - Female, M - Male

Address, City, State, Zip	Contact Phone - Include Area Code

Injuries	Injured Taken By	EMS Agency	Medical Facility Injured Taken To	Safety Equipment Used	DOT Compliant Motorcycle Helmet	Seating Position	Air Bag Usage	Ejection	Trapped
					☐				

OCCUPANT

Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender
				F - Female, M - Male

Address, City, State, Zip	Contact Phone - Include Area Code

Injuries	Injured Taken By	EMS Agency	Medical Facility Injured Taken To	Safety Equipment Used	DOT Compliant Motorcycle Helmet	Seating Position	Air Bag Usage	Ejection	Trapped
					☐				

OCCUPANT

Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender
				F - Female, M - Male

Address, City, State, Zip	Contact Phone - Include Area Code

Injuries	Injured Taken By	EMS Agency	Medical Facility Injured Taken To	Safety Equipment Used	DOT Compliant Motorcycle Helmet	Seating Position	Air Bag Usage	Ejection	Trapped
					☐				

OCCUPANT

Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender
				F - Female, M - Male

Address, City, State, Zip	Contact Phone - Include Area Code

Injuries	Injured Taken By	EMS Agency	Medical Facility Injured Taken To	Safety Equipment Used	DOT Compliant Motorcycle Helmet	Seating Position	Air Bag Usage	Ejection	Trapped
					☐				

Injuries
1 No Injury / None Reported
2 Possible
3 Non-Incapacitating
4 Incapacitating
5 Fatal

Injured Taken By
1 Not Transported /Treated at Scene
2 EMS
3 Police
4 Other
9 Unknown

Safety Equipment Used
Motorist
01 None Used - Vehicle Occupant
02 Shoulder Belt Only Used
03 Lap Belt Only Used
04 Shoulder and Lap Belt Used
05 Child Restraint System-Forward Facing
06 Child Restraint System-Rear Facing
07 Booster Seat
08 Helmet Used
99 Unknown Safety Equipment

Non-Motorist
09 None Used
10 Helmet Used
11 Protective Pads Used (Elbows, Knees, Etc)
12 Reflective Clothing
13 Lighting
14 Other

Seating Position
01 Front - Left Side (Motorcycle Driver)
02 Front - Middle
03 Front - Right Side
04 Second - Left Side (Motorcycle Passenger)
05 Second - Middle
06 Second - Right Side
07 Third - Left Side (Motorcycle Side Car)
08 Third - Middle
09 Third - Right Side
10 Sleeper Section of Cab (Truck)
11 Passenger in Other Enclosed Cargo Area (Non-Trailing Unit, Such as Bus, Pick-up with Cap)
12 Passenger in Unenclosed Cargo Area
13 Trailing Unit
14 Riding on Vehicle Exterior (Non-Trailing Unit)
15 Non-Motorist
16 Other
99 Unknown

Air Bag Usage
1 Not Deployed
2 Deployed Front
3 Deployed Side
4 Deployed Both Front/Side
5 Not Applicable
9 Deployment Unknown

Ejection
1 Not Ejected
2 Totally Ejected
3 Partially Ejected
4 Not Applicable

Trapped
1 Not Trapped
2 Extricated by Mechanical Means
3 Extricated by Non-Mechanical Means

OHIO TRAFFIC CRASH WITNESS STATEMENT **OH-3 REV 1/82**

LOCAL REPORT NUMBER	REPORTING AGENCY Lebanon Police Dept.	DATE OF CRASH M 10/30/14

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

I, Brenda Gibson (PRINTED) HEREBY MAKE THIS VOLUNTARY STATEMENT TO

Ptl. T. Cooper (OFFICERS NAME) AT La Luz Blvd. (LOCATION)

I was puting my son's bike in the trunck of my car and a man stoped on La Luz blvd. and said "Excuse me miss. I was about to respond when a silver car ran into the back of the man's truck. The passanger of the silver car and the man exited the vehicles and the woman started screaming at the man and the man was asking if everyone was ok. Everyone seemed unhurt but a little shaken up

ADDRESS OF WITNESS	489 La Luz blvd. Apt. 215 Lebanon OH 45036	PHONE (513) 228-2851
SIGNATURE OF WITNESS	X Brenda Gibson	OFFICERS SIGNATURE

HSY 7003 1/82

OHIO TRAFFIC CRASH WITNESS STATEMENT **OH-3 REV 1/82**

LOCAL REPORT NUMBER	REPORTING AGENCY	DATE OF CRASH
	Lebanon Police Dept.	M 6 D 30 Y 19

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

I, Felicia Durham (PRINTED) HEREBY MAKE THIS VOLUNTARY STATEMENT TO

Ptl. T. Cooper (OFFICERS NAME) AT La Luz Blvd. (LOCATION)

I was in the passengar seat and ~~me~~ me and my mom stop because the Black truck was backing up. And my mom Put her car in Reverse to back because the Black truck was in Front of her before she could Back up he speeded up before she could Back up and hit the Front of her car.

ADDRESS OF WITNESS	PHONE
485 La Luz Blvd Apt 106 Lebanon, Ohio 45036	510-6288

SIGNATURE OF WITNESS	OFFICERS SIGNATURE
Felicia Durham	

HSY 7003 1/82