

OHIO TRAFFIC CRASH REPORT

OH-1 (Rev. 1-82)

LOCAL REPORT NO. 15-18345, Lebanon Police, 0830300, ODHS USE ONLY - 00 NOT MARK ABOVE, REPORT TAKEN AT SCENE, NO OF VEH PEDESTRIANS INVOLVED 2, CRASH SEVERITY PROPERTY DAMAGE ONLY, COMBINED VEH/PROP LOSS OVER \$150, HIT SKIP SOLVED, IN COUNTY OF WARREN IN CITY LEBANON, DATE OF CRASH: 10/18/15, TIME: MILITARY 1037, CRASH OCCURRED ON Kroger, 1425 Columbus Ave., Lebanon, OH, 45036

LOG-1, LOG-2, LOC JUR FH9 FILT

A UNIT NO. 1, NO OF OCCUPANTS, OPERATING, PARKED, DRIVERLESS, HIT & RUN NON CONTACT, INSURANCE CO OR AGENT StateFarm2841968D21350

DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI) Ramsey, Stephanie, N, ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) 1197 Lake Meadow Ct, Lebanon, OH, 45036

PHONE NO. 513-328-0309, BIRTH DATE 3/9/82, AGE 33, SEX F, SOCIAL SECURITY NO., STATE OH, DRIVER'S LICENSE NO. RV188302, OCCUPATION

OWNER (IF SAME AS DRIVER, WRITE SAME) Same, ADDRESS, PHONE

VEH YR 2007, MAKE Toyota, MODEL Camery, COLOR Whi, STYLE 4D, STATE OH, LICENSE PLATE NO. FHE4509, TOWING SERVICE N/A, VEH/PED DIR FROM TO

CIRCLE DAMAGE AREAS, DAMAGE SEVERITY, DAMAGE SCALE, VEHICLE DISPOSITION, FIRE

8 UNIT NO. 2, NO OF OCCUPANTS, OPERATING, PARKED, DRIVERLESS, HIT & RUN NON-CONTACT, INSURANCE CO. OR AGENT Geico/4280812787

DRIVER/PEDESTRIAN NAME (LAST, FIRST, MI) Gabone, George, E, ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) 5636 Eaglecreek CT., Maineville, OH, 45039

PHONE NO. 513-494-0684, BIRTH DATE 1/4/59, AGE 56, SEX M, SOCIAL SECURITY NO., STATE OH, DRIVER'S LICENSE NO. TN674430, OCCUPATION

OWNER (IF SAME AS DRIVER, WRITE SAME) Same, ADDRESS, PHONE

VEH YR 2014, MAKE Nissan, MODEL, COLOR Blk, STYLE SW, STATE OH, LICENSE PLATE NO. GBT9779, TOWING SERVICE N/A, VEH/PED DIR FROM TO

CIRCLE DAMAGE AREAS, DAMAGE SEVERITY, DAMAGE SCALE, VEHICLE DISPOSITION, FIRE

C FROM UNIT NO., NAME (LAST, FIRST, MI), BIRTHDATE, AGE, POSITION, INJURIES

D FROM UNIT NO., NAME (LAST, FIRST, MI), BIRTHDATE, AGE, POSITION, INJURIES

E FROM UNIT NO., NAME (LAST, FIRST, MI), BIRTHDATE, AGE, POSITION, INJURIES

F FROM UNIT NO., NAME (LAST, FIRST, MI), BIRTHDATE, AGE, POSITION, INJURIES

P-PEDESTRIAN, RESTRAINTS

A B C INJURED TAKEN TO By, A B C O E F ALCOHOL

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A OFFENSE CHARGED AND DESCRIPTION, ORC CITY ORD., OFFENSE CHARGED AND DESCRIPTION, ORC CITY ORD., OFFENSE CHARGED AND DESCRIPTION, ORC CITY ORD.

RECEIVED CALL 1037, DISPATCHED 1040, ARRIVED 1044, CLEARED 1056, OTHER TIME 0000, TOTAL MINUTES 00offoff

DATE REPORT FILED 10/22/15, PHOTOS YES NO, OFFICER'S NAME Ptl. Crockett Brummett, BADGE NO. 111, CHECKED BY

1 NOT EJECTED, 2 PARTIAL, 3 TOTAL, 4 TRAPPED INSIDE VEHICLE, 1 NO DRUGS DETECTED, 2 USING PRESCRIBED DRUG, 3 USING ILLICIT DRUG

DRIVER-PEDESTRIAN-VEHICLE SECTION

OCCUPANT SECTION

POLICE ACTION

LOCAL FILE NO