OHIO DEPARTMENT TRAFFIC CRAS	⊀1 	OCAL REPORT NUMBER						
PHOTOS TAKEN OH-2 OH-5	2024-	00004	045					
SECONDARY CRASH PRIVATE PROPE	Heath DD	<u>:</u> *	0 4 5 0	HIT/SKIP 1 - SOLVED	NUMBER OF UNITS	UNIT IN ERROR 1 98 - ANIMAL		
COUNTY* LOCALITY* LOCATION	N: CITY, VILLAGE, TOWNSHIP*			2 - UNSOLVED		39 - UNKNOWN		
4 5 1 - CITY 2 - VILLAGE HEA				04272024	1633 2	- FATAL		
1 1 2 1/25	RTH LOCATION ROAD NAME		ROAD TY	PE LATITUDE DE		- SERIOUS INJURY SUSPECTED		
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NOM 2 - SOU 2 - SOU 2 4 - WES	ST 20TH		S ,T	40028	081	- MINOR INJURY SUSPECTED		
	RTH REFERENCE ROAD NAME (I	ROAD, MILEPOST, HOUSE #)	ROAD TY	PE LONGITUDE	ECIMAL DEGREES 4	- INJURY POSSIBLE		
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NOF 2 - SOU 3 - EAS 4 - WES	ST			-82 4 4 3	6 0 5	- PROPERTY DAMAGE ONLY		
REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD 1	YPE		INTERSECTION RELATE			
1 - INTERSECTION 1 - NORTH 2 - MILE POST 1 2 - SOUTH	IR - INTERSTATE ROUTE(TP)	AL - ALLEY HW- HIG AV - AVENUE LA - LAN			RSECTION OR ON APPROA	сн		
2-SOUTH 3-EAST 4-WEST	US - FEDERAL US ROUTE SR - STATE ROUTE	BL - BOULEVARD MP - MIL			RCHANGE AREA NUM	4 IBER OF APPROACHES		
DISTANCE DISTANCE FROM REFERENCE UNIT OF MEASURE	CR - NUMBERED COUNTY ROUTE	CR - CIRCLE OV - OVA		CE	ROADWAY			
1 - MILES	TR - NUMBERED TOWNSHIP ROUTE	DR - DRIVE PI - PIK	E WA - WAY	ROADWAY DIV	TIDED			
		HE - HEIGHTS PL - PLA						
LOCATION OF FIRST HARMFUL I 1 - ON ROADWAY 9 - CROSS		MANNER OF CRASH COLLIS - NOT COLLISION 4 - REAR-		DIRECTION OF TRAVE	- 101	N TYPE LUSH MEDIAN		
	EWAY/ALLEY ACCESS WAY GRADE CROSSING	BETWEEN 5 - BACKI		2-SOUTH	(<4 FEET)		
4 - ON ROADSIDE 12-SHAR	ED USE PATHS OR	VEHICLES IN 6-ANGLE TRANSPORT 7-SIDES	WIPE, SAME DIRECTION	3 - EAST 4 - WEST	(≥4 FEET	v 19		
5 - ON GORE TRAIL 6 - OUTSIDE TRAFFIC WAY 13-BIKE	LANE		WIPE, OPPOSITE DIRECT ? / UNKNOWN	ON	4 - DIVIDED, I	DEPRESSED MEDIAN RAISED MEDIAN		
7 - ON RAMP 14- TOLL			(ANY TYPE) 9 - OTHER/UNKNOWN					
O-OTT KAWII	WORK ZONE TYPE	LOCATION OF CD	ACII IN WORK ZONE	CONTOUR	CONDITIONS	SURFACE		
WORK ZONE RELATED	1 - LANE CLOSURE	1 - BEFORE	ASH IN WORK ZONE THE 1ST WORK ZON		1	2		
WORKERS PRESENT	2 - LANE SHIFT/CROSSOVER 3 - WORK ON SHOULDER	270.3973045045054037	IG SIGN E WARNING AREA	1 - STRAIGHT LEVEL				
LAW ENFORCEMENT PRESENT	OR MEDIAN	WORK 3-TRANSI		2 - STRAIGHT GRADE				
ACTIVE SCHOOL ZONE	4 - INTERMITTENT OR MOVING 5 - OTHER	25 4 7500	ATION AREA	3 - CURVE LEVEL	ASTRALI			
LIGHT CONDITION	· · · · · · · · · · · · · · · · · · ·	EATHER		4 - CURVE GRADE 9 - OTHER/UNKNOWN	4 - ICE 5 - SAND, MUD, DIRT,	3 - BRICK/BLOCK		
1 - DAYLIGHT	1 - CLEAR	6 - SNOW	INDO		OIL, GRAVEL	4 - SLAG, GRAVEL, STONE		
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	2 - CLOUDY 3 - FOG, SMOG, S	7 - SEVERE CROSSW MOKE 8 - BLOWING SAND,			6 - WATER (STANDING, MOVING)	5 - DIRT 9 - OTHER/UNKNOWN		
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGH	4 - RAIN TING 5 - SLEET, HAIL	9 - FREEZING RAIN (99 - OTHER / UNKNO		.E	7 - SLUSH	3 - OTHER ONKNOWN		
9-OTHER/UNKNOWN			5.700 ft		9 - OTHER/UNKNOWN			
NARRATIVE		F.1			N	Indicate the north		
UNIT 2 WAS STOPPED, AT	TEMPTING TO MA	KE A				an "N" on the compass diagram.		
RIGHT TURN ON RED.				ScenePD TM - Evaluation Edition				
UNIT 1 STRUCK UNIT 2 FI	ROM REHIND	Stole	Evaluation Edition	Evaluation Edition wation Edition				
ONIT I STROCK ONIT 211	NOPI BEILIND.	Lyanu	BROTT LAROTT	Evaluation				
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		_	HEDSR 79	Evaluation Edition	Evaluation Edition			
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		le-7		Evaluation Edition	Section Not To Scale			
		Evalu	Evaluation Edition ation Edition	1111	Evaluation Edition			
			Evaluation Edition	Evaluation Edition uation Edition	Edition	1		
		Evalu	ation Edition	Trancite (877) 908-4777				
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DA		SCENE CLEARED		POLICE AGENCY		
	4272024 163	30427202			1654	MOTORIST		
	TOTAL OFFICER'S NAME* Schumache	er	Peterso	FFICER'S NAME* On	냚	SUPPLEMENT		
	OFFICER	'S BADGE NUMBER*		ED BY OFFICER'S BADGE I		(CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)		
0 0 6 0 8	1 0 7	- 11 5	6 0 1	7 - 1	4 5			

0F **5**

OF PUBLIC SAFETY MOTORIST / NON-MOTORIST							2 0	2	4 - 0 C			0 4	5			
UNIT#	NAME: LAST, F	NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH AGE GENDER								
0 1	GILBERT, HEATHER ILENE								0 1 / 2 1 / 1 9 7 9 4 5 F							
										ONTACT PHONE - INCLUDE AREA CODE						
NJURIES	TH ST NEWARK, OH 43055 S INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT SEATING POSITION A)										ON ATD DA	G USAGE	EJECTION	TRAPPED		
o 5	TAKEN BY	EWS AGENCY (NAME)		INJURED	IAKEN IU	: WEDICAL PACILITY	AL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED . 0 . 4 .			-COMPLIA	NT	I AIR BAI	6 USAGE	1	1 1	
OL STATE		ICENSE NUMBER		OFFENS	SE CHAF	RGED	LOCAL	OFFENSE DESC					TATION NUMBER			
В О Н				333.0			CODE	333.03					042724001			
OL CLASS	S ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER		OHOL / DRUG SUSPI		CONDITION	STATUS		DL TEST VALUE	STATUS	DRU(G TEST(S	SELECT UP TO 4	
. 4	SELECT OP 10 2		BY	TRACTED	=	LCOHOL MAI	RIJUANA	1	1	1	VALUE	1	1	KESOLI	SELECT OF TO 4	
UNIT#	NAME: LAST, F	I L L L L L L L L L L L L L L L L L L L			□ 0	THER DRUG					ATE OF BIRTH		<u> </u>	⊥ ∟∟∟ AGE	GENDER	
0 2		6, ALBERT CLARKE									. , 7 , / , 1 ,	9 5	, .	7 .3 .	M	
	S: STREET, CITY, ST.								\vdash		NE - INCLUDE AREA					
₽		DR BREMEN, OH 43	107													
<u> </u>	SINJURED	EMS AGENCY (NAME)		INJURED	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIP				DOT	Complex	SEATING POSITI	ON AIR BA	G USAGE	EJECTION	TRAPPED	
5	TAKEN BY							USED 0 4	DOT-COMPLIANT O 1			_ _ 1	1 1 1			
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	SE CHAF	RGED	LOCAL CODE	OFFENSE DESC	CRIPTION			CITATION NUMBER				
O H																
≥ OL CLASS	SELECT UP TO 2	RESTRICTION SELECT	DIS	VER Tracted	_	DHOL / DRUG SUSPI LCOHOL MAI	ECTED RIJUANA	CONDITION	STATUS	TYPE	VALUE	STATUS	TYPE	RESULT	SELECT UP TO 4	
4	4 BY			1	OTHER DRUG			1	1 1 1			1	1 1			
UNIT#	NAME: LAST, F	FIRST, MIDDLE								D	DATE OF BIRTH			AGE	GENDER	
	_												_ _			
ADDRESS	S: STREET, CITY, ST.	ATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						•	
3										1		-				
INJURIES	INJURED I	EMS AGENCY (NAME)		INJURED	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED		-COMPLIA		ON AIR BA	G USAGE	EJECTION	TRAPPED	
OL STATE				OFFENSE CHARGED LOCAL			OFFENSE DESC			_ CITA	CITATION NUMBER					
ORIS	O' ERATOR E	TOLKSE KOMBEK		OTT EIN	CODE			OTTENSE SESO			Į viin					
OL CLASS	S ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT			ALC	OHOL / DRUG SUSPI	ECTED	CONDITION	STATUS		L TEST VALUE	STATUS	DRU(G TEST(S	SELECT UP TO 4	
	SELECT UP 10 2		BY	TRACTED	=		RIJUANA		STATUS	1175	VALUE	STATUS	1176	KESULI	SELECT UP TO 4	
L TN I	URIES	SEATING POSITION		IR BAG	☐ 0 ⁻	THER DRUG OL CLAS	c	OL RESTRIC	TION(S)		RIVER DISTRAC	CTION		LEST STA		
1 - FATAL	OKIES	1 - FRONT - LEFT SIDE	1 - NOT DEP			1 - CLASS A	3	1 - ALCOHOL INTER			NOT DISTRACTED	2110N		E GIVEN	.103	
	D SERIOUS INJURY	(MOTORCYCLE DRIVER) 2 - FRONT – MIDDLE	2 - DEPLOYI 3 - DEPLOYI			2 - CLASS B 3 - CLASS C		2 - CDL INTRASTAT 3 - CORRECTIVE LE			MANUALLY OPERATI ELECTRONIC COMMU			T REFUSED	TAMINATED	
4 - POSSIBLE		3 - FRONT - RIGHT SIDE	RONT – RIGHT SIDE 4 - DEPLOYED BOTH FRONT / SIDE			4 - REGULAR CLASS 4 - FARM WAIVER			DEVICE (TEXTING, TYPIN DIALING)			YPING,	, SAMPLE / UNUSABLE			
5 - NO APPARENT INJURY		(MOTORCYCLE PASSENGER)				(OHIO = D) 5 - EXCEPT CLASS. 5 - M/C MOPED ONLY 6 - EXCEPT CLASS.			J- IALKING ON HANDS-I KE							
INJURED TAKEN BY 5 - SECOND - MIDDLE			7-0212011	WILLIAM DIVINIA	, , , , ,	6 - NO VALID OL & CLASS B BUS 4 - TALKING ON HAND-HELD 7 - EXCEPT TRACTOR-TRAILER COMMUNICATION DEVICE					ELD	F				
1 - NOT TRANS /TREATED		7 - THIRD - LEFT SIDE	E.	ECTION		OL ENDORSE	MENT	8 - INTERMEDIATE		5 -	OTHER ACTIVITY WI	TH AN	ALC 1 - NON	OHOLTES	ST TYPE	
2 - EMS 3 - POLICE		(MOTORCYCLE SIDE CAR) 8 - THIRD – MIDDLE	1 - NOT EJE			H - HAZMAT M - MOTORCYCLE		RESTRICTIONS 9 - LEARNER'S PER	MIT		ELECTRONIC DEVICE PASSENGER		2 - BL0			
9 - OTHER / UNKNOWN		9 - THIRD - RIGHT SIDE 3 - TOTALLY EJECTED 3 - TOTALLY EJECTED			P - PASSENGER RESTRICTIONS			7 - OTHER DISTRACTION				3 - URINE 4 - BREATH				
SAFETY EQUIPMENT 10 - SLEEPER SECTION OF TRUCK CAB		4 - NOT APP	T-NOT APPLICABLE N-TANKER				10 - LIMITED TO DAYLIGHT ONLY 11 - LIMITED TO EMPLOYMENT		8 - OTHER DISTRACTION OUTSIDE							
ENCLOSED CARGO AREA		RAPPED R - THREE-WHEEL MOTORCYCLE 12 - LIMITED - OTH			9_OTHER/UNKNOWN				DRUG TEST TYPE							
2 - SHOULDER BELT ONLY USED 3 - LAP BELT ONLY USED		(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)					S - SCHOOL BUS 13 - MECHANICAL D (SPECIAL BRAK T - DOUBLE & TRIPLE TRAILERS CONTROLS OR O				CONDITION		1 - NONE			
4 - SHOULDER & LAP BELT USED		12 - PASSENGER IN UNENCLOSED CARGO AREA	PASSENGER IN UNENCLOSED MECHANICAL MEANS			X - TANKER / HAZMAT	CONTROLS, OR O ADAPTIVE DEVI	CES)	ES) 1 - APPARENTLY NORMAL		named and the second	2 - BLOOD 3 - URINE				
FORWARD I		13 - TRAILING UNIT NON-MECHANICAL MEANS			14 - MILITARY VEHI 15 - MOTOR VEHICLI			E THI GIGHE IMPRIMENT				4 - OTHER				
6 - CHILD RESTRAINT SYSTEM — REAR FACING		_ 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)			AIR BRAKES			ANGRY, DISTURBED)				DRUG TEST RESULT(S)				
7 - BOOSTER S		15 - NON-MOTORIST 99 - OTHER / UNKNOWN					16 - OUTSIDE MIRRO 17 - PROSTHETIC AIG			5 - FELL ASLEEP, FAINTED		ED,	1 - AMPHETAMINES 2 - BARBITURATES			
	VE PADS USED	77 - OTHER CHARTACAMIA						18 - OTHER		FATIGUED, ETC. 6- UNDER THE INFLUENCE			3 - BENZODIAZEPINES			
	NEES, ETC.) VE CLOTHING									OF MEDICATIONS / DRUGS / ALCOHOL			4 - CANNABINOIDS 5 - COCAINE			
10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEOESTRIAN (CONCRETE ONLY)											OTHER / UNKNOWN		6 - OPIATES / OPIOIDS			
/ BICYCLE ONLY 99 - OTHER / UNKNOWN								7 - OTHER 8 - NEGATIVE R						LTS		

Q	OHIO DEPARTMENT OF PUBLIC SAFETY OCCUPANT / WITNESS ADDENDUM						2024	- 0 0			5			
	UNIT # NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER						
	02	02 LAMKINS, BRENDA JEAN							6 / 1 9	4 4	7 9	F		
OCCUPANT		STREET, CITY,	STATE, ZIP D DR BREMEN, OF	CONTACT PHONE - INCLUDE AREA CODE										
8		INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED			DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED		
Ļ	_5	BY O 4							0 3	1	_1	_1		
ı	UNIT #	JNIT # NAME: LAST, FIRST, MIDDLE							E OF BIRTH		AGE	GENDER		
냙	ADDDECC	IDDRESS: STREET, CITY, STATE, ZIP							- INCLUDE AREA CO					
OCCUPAN	ADDRESS	: STREET, CITT,	STATE, ZIP											
0	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: Medical Facili	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED				
ì	UNIT#	NAME: LAS	T, FIRST, MIDDLE				1	DATE OF BIRTH AGE GENDE						
DAN	ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
OCCUPAN		T	T				T							
	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	TY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED		
8	UNIT #	NAME: I AS	T, FIRST, MIDDLE					DΔT	E OF BIRTH		AGE	GENDER		
ı			,,,,											
ANA	ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
OCCUPANT														
0	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	TY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED		
▋		BY						☐ MC HELMET						
	1 - FATA		JRIES	1 - NONE US	FD.		SEATING POS T – LEFT SIDE	1110N	1 - NOT DE	AIR BAG	JSAGE			
	2 - SUSPECTED SERIOUS INJURY VEHICLE			OCCUPANT (MOTORCYCLE DRIVER BELT ONLY USED 2 - FRONT - MIDDLE 3 - FRONT - RIGHT SID						Γ				
							Ξ.	3 - DEPLO	YED SIDE					
	5 - NU APPARENT INJURY				I ONLY USED ER & LAP BELT USED	ND – LEFT SID	E		LOYED BOTH NT/SIDE					
					ESTRAINT SYSTEM – (MOTORCYCLE PA 5 - SECOND – MIDDLI			ENGER)	5 - NOT APPLICABLE					
H			TAKEN BY		D FACING		ND – RIGHT SII	DE	9 - DEPLOYMENT UNKNOWN EJECTION					
		TRANSPOR EATED AT S		6 - CHILD RE	ESTRAINT SYSTEM – CING		D – LEFT SIDE ORCYCLE SIDE	CAR)						
	2 - EMS 7 - B00STEF			SEAT		D – MIDDLE D – RIGHT SIDE		1 - NOT EJ	ECTED					
	3 - POLICE 8 - HELMET					PER SECTION (2 - PARTIA	LLY EJEC	ΓED				
				TVE PADS USED KNEES, ETC.)		ENGER IN OTH		3 - TOTALL						
					TIVE CLOTHING BUS, PICK-UP WITH CA 12 - PASSENGER IN UNI CARCO AREA			P) .	4 - NOT AP					
								NCLUSED	TRAPPED 1 - NOT TRAPPED					
						LING UNIT NG ON VEHICLE	EVTEDIND	2 - EXTRICATED BY MECHANI			CAL			
						(NON-	TRAILING UNIT)	EXTERIOR	MEANS		FOLLANIO	A.1		
							MOTORIST R/UNKNOWN		3 - FREED MEANS		ECHANIC	AL		
S S	NAME: LA	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER		
WITNESS	ANNDESS	: STREET, CITY,	STATE 71D					CONTACT PHONE		<u> </u>				
M	ADDICESS	. 31KEE1, 0111,	STATE, ZIF						I I	<u> </u>	1 1			
ş	NAME: LA	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER		
WITNESS	ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE		DE				
SS	NAME: LA	ST, FIRST, MIDD	LE						E OF BIRTH		AGE	GENDER		
WITNESS	ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE		<u> </u>		
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