OFFICE CRASH	LOCAL REPORT NUMBER*										
OH-2	2023-	00013	917								
PHOTOS TAKEN OH-1P OTHER	NCIC*	HIT/SKIP NUMBER OF UNITS UNIT IN ERROR									
SECONDARY CRASH PRIVATE PROPERTY	1507	1 - SOLVED									
1 - GIIY	Y, VILLAGE, TOWNSHIP*		CRASH DATE / TIME * CRASH SEVERITY  12192023 1634 5 1 - FATAL								
3-TOWNSHIP	4 5 1 2-VILLAGE HEATH										
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	LOCATION ROAD NAME		St. Statement Martin Contraction Contraction								
1 11 11 11 11 11 11 11 11 11 11 11 11 1	JACKSONTOWN		RD	SUSPECTED							
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	REFERENCE ROAD NAME (ROAD,	WILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE		INJURY POSSIBLE PROPERTY DAMAGE					
	674	(= 1/20)		-82,402	9,5,0	ONLY					
REFERENCE POINT DIRECTION 1-INTERSECTION FROM REFERENCE 1-NORTH IR	ROUTE TYPE - INTERSTATE ROUTE(TP) AL	<b>ROAD TYPE</b> - ALLEY HW- HIGHWAY R	RD - ROAD	l —	INTERSECTION RELATED RSECTION OR ON APPROA	`					
2 MILEDOST 2 COUTU	TEDERAL OS ROOTE		Q - SQUARE								
	STATE ROUTE		T - STREET E - TERRACE								
FROM REFERENCE UNIT OF MEASURE 1 - MILES TR	CT CT		L - TRAIL VA - WAY	ROADWAY							
2 - FEET	ROUTE	- HEIGHTS PL - PLACE	VA- WAI	ROADWAY DIVIDED							
LOCATION OF FIRST HARMFUL EVEN		NER OF CRASH COLLISION/IMPA	СТ	DIRECTION OF TRAVE	MEDIA	N TYPE					
1 - ON ROADWAY 9 - CROSSOVER <b>0 1</b> 2 - ON SHOULDER 10 - DRIVEWAY		1 - NORTH	1 - DIVIDED F ( < 4 FEET	LUSH MEDIAN )							
3 - IN MEDIAN 11 - RAILWAY G	RADE CROSSING VEHI	MOTOR 5-BACKING CLES IN 6-ANGLE	- DIDECTION	3 - EAST		LUSH MEDIAN					
4 - ON ROADSIDE 12-SHARED U 5 - ON GORE TRAILS	2 - REAF	NSPORT 7 - SIDESWIPE, SAMI R-END 8 - SIDESWIPE, OPPO		4 - WEST 3 - DIVIDED, DEPRESSED M							
6 - OUTSIDE TRAFFIC WAY 13 - BIKE LANE 7 - ON RAMP 14 - TOLL BOOT	D. HLAL	9-OTHER/UNKNOV	٧N	4 - DIVIDED, RAISED MEDIAN (ANY TYPE)							
8-OFF RAMP 99-OTHER/UN	IKNOWN				9 - OTHER/UN	KNOWN					
☐ WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH IN WO		CONTOUR	CONDITIONS	SURFACE					
	LANE CLOSURE LANE SHIFT/CROSSOVER	1 - BEFORE THE 1ST \ WARNING SIGN		4	1	2					
LAW ENFORCEMENT PRESENT L 3-	IG AREA	1 - STRAIGHT LEVEL 1 - DRY 1 - CONCRETE 2 - STRAIGHT GRADE 2 - WET 2 - BLACKTOP.									
	INTERMITTENT OR MOVING WORK OTHER	4 - ACTIVITY AREA 5 - TERMINATION ARI	Ε.Δ.	2 - STRAIGHT GRADE 3 - CURVE LEVEL	3 - SNOW	2 - BLACKTOP, BITUMINOUS, ASPHALT					
	Ī:		LA	4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK					
<b>LIGHT CONDITION</b> 1 - Daylight	1 - CLEAR	R 6 - SNOW		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL	4 - SLAG, GRAVEL, STONE					
1 2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	CNOW		6 - WATER (STANDING, MOVING)	5 - DIRT							
4 - DARK – ROADWAY NOT LIGHTED	, SNOW NG DRIZZLE	7 - SLUSH 9 - OTHER/UNKNOW									
5 - DARK — UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN			9 - OTHER/UNKNOWN								
NARRATIVE					- In	Indicate the north					
UNIT #1 AND UNIT #2 WER	E TRAVELING SOUT	H ON				direction with an "N" on the					
ST RT 13. UNIT #1 STOPPEI	FOR TRAFFIC AND	WAS		ScenePD ™ - Evaluation Edition		compass diagram.					
STRUCK IN THE REAR BY UN	IIT #2.	_	Evaluation	Evaluation Edition		_					
		Evaluation Edition	uation Edition		Evaluation Edition Evaluation Edition	.     -					
		Evalu	Evaluation	Evaluation   Edition	Edition	_					
		Evaluation Edition	/	St Rt 79/JACH	SONTOWN RD Evaluation Edition Evaluation Edition						
			uation Edition	Evaluation Edition	A N						
		Evaluation Edition	Some	Evaluation	Not To Scale Evaluation Edition						
		Evaluation Edition	uation Edition	Evaluation Edition							
				BETALUACIOS Evaluation Edition	Evaluation Edition  CLT Evaluation Edition  ENTERMAN RD						
		Evaluation Edition	uation Edition Evaluation	Edition	Evaluation Edition						
		-		Evaluation Edition	Evaluation Edition						
		Evaluation Edition	ation Edition	Trancite (877) 908-4777							
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME		SCENE CLEARED I	2011-041-05 2011-040-042: 144-	EPORT TAKEN BY					
12192023 1634 121	92023 1635	12192023 1	6 4 4 1	2192023	1713	POLICE AGENCY					
TOTAL TIME OTHER TOTAL	L OFFICER'S NAME*	C+		CER'S NAME*		MOTORIST					
ROADWAY CLOSED INVESTIGATION TIME MINUT	BY OFFICER'S BADGE NUMBER*  SUPPLEMENT (CORRECTION OF ADDITION 10 AM EXISTING REPORT SENT 10 400°S)										
3.9	0 OFFICER'S BAD		0 7	- 1	4 7						

OHIO DEF OF PUBLI SAFETY - SERVI	OF PUBLIC SAFETY MOTORIST / NON-MOTORIST						2 0 2 3 - 0 0 0 1 3 9 1 7									
UNIT#								DATE OF BIRTH AGE GENDER								
01	GASTINEAU, VICKIE L								0 8 / 2 6 / 1 9 5 0 7 3 F							
2	STREET, CITY, ST.	<sup>ate, zip</sup> 'WN RD 37 HEATH, (	OH 430	56					CONTA	CT PHO	NE - INCLUDE AREA	CODE				
		EMS AGENCY (NAME)	311 430		TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT			SEATING POSITI	ON AIR RA	IG USAGE	EJECTION	TRAPPED	
NON 5	TAKEN BY				INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMEN USED 0 4			USED		F-COMPLIA HELME	NT	1		1	1	
OL STATE	OPERATOR L	TOR LICENSE NUMBER OFFENSE			SE CHAI	RGED	LOCAL CODE	OFFENSE DESC	RIPTION	ı	CIT			ATION NUMBER		
O H																
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		IVER Stracted		OHOL / DRUG SUSPE LCOHOL   MAR	E <b>CTED</b> RIJUANA	CONDITION	STATUS	TYPE	VALUE	STATUS		RESUL	SELECT UP TO 4	
_4				1	=	THER DRUG		1	1	1	•	_1	1			
UNIT#	NAME: LAST, F	FIRST, MIDDLE						1		D	ATE OF BIRTH			AGE	GENDER	
0 2	FREEMAN	, JENNIFER LYNN							1 1 / 2 9 / 1 9 8 5 3 8 F							
₹	STREET, CITY, ST								CONTA	CT PHO	NE - INCLUDE AREA	CODE			_	
፯		D HEATH, OH 43056  EMS AGENCY (NAME)		Thumber	TAKENTO	MEDICAL FACILITY		SAFETY EQUIPMENT			CEATING DOCITI	ON AID DA	0.115.405	FIFOTION	TRANSFE	
INJURIES .	TAKEN BY	EWS AGENCY (NAME)		INJURED	,		USED 0 4	DOT-COMPLIANT SEATING POSITION  MC HELMET  0 1				AIR BAG USAGE EJECTION TRAPPED  1 1 1				
OL STATE	OPERATOR L	□   R LICENSE NUMBER		OFFEN	OFFENSE CHARGED LOCAL		OFFENSE DESC			C		CITATION NUMBER				
Во н (				333.0	333.03 CODE		333.03	333.03		13			30121923001			
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		IVER STRACTED	_	OHOL / DRUG SUSPE		CONDITION	STATUS	ALCOHO TYPE	L TEST VALUE	STATUS	DRU(	G TEST(S	SELECT UP TO 4	
. 4	ļ		ВУ	1	=	LCOHOL   MAF THER DRUG	RIJUANA	1	1	1 .	l	1	1			
UNIT #	NAME: LAST, F	FIRST, MIDDLE			<u> </u>	THER BROO				D	ATE OF BIRTH			AGE	GENDER	
										1 1	1 1 1 1			1 1		
ADDRESS:	STREET, CITY, ST	ATE, ZIP							CONTA	CT PHO	NE - INCLUDE AREA	CODE				
				_				_	ш					<u> </u>		
INJURIES	INJURED I TAKEN BY				TAKEN TO	: MEDICAL FACILITY	: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED			DOT-COMPLIANT SEATING POSITION AIF			BAG USAGE   EJECTION   TRAPPED			
OL STATE		ATOR LICENSE NUMBER		OFFENSE CHARGED LOCAL OF		OFFENSE DESC					L  L Ation Number					
							CODE									
OL CLASS	ASS ENDORSEMENT RESTRICTION SELECT UP TO 3 SELECT UP TO 2			IVER STRACTED	ALC	OHOL / DRUG SUSPE	CTED	CONDITION		ALCOHO TYPE	L TEST VALUE	STATUS		G TEST(S	SELECT UP TO 4	
	022201 01 102		BY	TRACTED	=	_	RIJUANA									
INJU	RIES	SEATING POSITION		AIR BAG	П°	THER DRUG OL CLASS	S	OL RESTRIC	TION(S)	DF	IVER DISTRAC	CTION		IEST STA	TUS	
1 - FATAL		1 - FRONT - LEFT SIDE 1 - NOT DEP					1 - ALCOHOL INTERLOCK DEVICE		CE 1-	1 - NOT DISTRACTED		1 - NONE GIVEN				
2 - SUSPECTED 3 - SUSPECTED	SERIOUS INJURY MINOR INJURY	(MOTORCYCLE DRIVER) 2 - DEPLOYE 2 - FRONT - MIDDLE 3 - DEPLOYE						2 - CDL INTRASTATE ONLY 3 - CORRECTIVE LENSES			2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING.			3-1E31 GIVEN, CUNTAMINATED		
4 - POSSIBLE IN	BLE INJURY 3 - FRONT - RIGHT SIDE 4 - DEPLOYE			ED BOTH FRONT / SIDE 4 - REGULAR CLASS (OHIO = D)			4 - FARM WAIVER			DIALING)			SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN			
	(MOTORCYCLE PASSENGER) 9-DEPLOYN			TENT UNKNOWN 5 - M/C MOPED ONLY 6 - EX			6 - EXCEPT CLASS	6 - EXCEPT CLASS A			3 - IALKING UN HANDS-FREE COMMUNICATION DEVICE 5 - TEST GIVEN, RESULTS					
INJURED  1 - NOTTRANSP	ORTED	6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS 7 - EXCEPT TRACTO	R-TRAILER		TALKING ON HAND-H COMMUNICATION DE				ST TYPE	
/TREATED AT 2 - EMS	T SCENE	7 - THIRD – LEFT SIDE (MOTORCYCLE SIDE CAR)	1 - NOT EJI	JECTION ECTED		OL ENDORSEM H - HAZMAT	MENT	8 - INTERMEDIATE RESTRICTIONS	LICENSE		OTHER ACTIVITY WIT		1 - NON		SIEITIFE	
3 - POLICE		8 - THIRD - MIDDLE 2 - PARTIALL		LLY EJECTED	Y EJECTED M - MOTORCYCLE			9 - LEARNER'S PERMIT		6-	6 - PASSENGER			2 - BLOOD 3 - URINE		
9 - OTHER / UNK	9-THIRD						RESTRICTIONS  10 - LIMITED TO DAYLIGHT ONLY			7 - OTHER DISTRACTION INSIDE THE VEHICLE			4 - BREATH			
	QUIPMENT	OF TRUCK CAB 11 - PASSENGER IN OTHER				Q - MOTOR SCOOTER		11 - LIMITED TO EM			OTHER DISTRACTION THE VEHICLE	OUTSIDE	5 - OTH	ER		
1 - NONE USED 2 - SHOULDER E	BELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1 - NOT TRA	APPED		R - THREE-WHEEL MO S - SCHOOL BUS	TORCYCLE	12 - LIMITED - OTHE 13 - MECHANICAL D		9 -	OTHER/UNKNOWN			UG TEST	TYPE	
	AP BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRICA  10 ULDER & LAP REIT USED 12 - PASSENGER IN UNENCLOSED MECHAN					(SPECIAL BRAKES, HAND CONTROLS, OR OTHER			CONDITION		1 - NONE 2 - BLOOD					
5 - CHILD REST	ILD RESTRAINT SYSTEM — CARGO AREA 3-FREED B		X - TANKER / HA7MAT			ADAPTIVE DEVICES)  14 - MILITARY VEHICLES ONLY			1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT		3 - URINE 4 - OTHER					
FORWARD FA	ACING RAINT SYSTEM –	13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR	IN O IN-IVIE	LOTTANITUAL W	EMI43			15 - MOTOR VEHICLE AIR BRAKES		3 - 1	EMOTIONAL (E.G., DEP				COLUMN	
REAR FACIN	G	(NON-TRAILING UNIT) 15 - NON-MOTORIST						16 - OUTSIDE MIRRO	)R		NGRY, DISTURBED) LLNESS			HETAMINES	ESULT(S)	
7 - BOOSTER SE 8 - HELMET US		99 - OTHER / UNKNOWN						17 - PROSTHETIC AI 18 - OTHER	D		ELL ASLEEP, FAINTE TATIGUED, ETC.	ED,		BITURATES	E0	
9 - PROTECTIVE (ELBOW, KNE								10-UINER		6- l	JNDER THE INFLUEN OF MEDICATIONS / DR			ZODIAZEPIN NABINOIDS	ΕŞ	
10 - REFLECTIVE	CLOTHING									1	ALCOHOL		5 - 000/			
11 - LIGHTING - I / BICYCLE Of										9-0	THER / UNKNOWN		6 - 0PIA 7 - 0TH	ATES / OPIOIO ER	15	
99 - OTHER / UNK	KNOWN													ATIVE RESU	LTS	