



TRAFFIC CRASH REPORT

CRASH REPORT # 09MPD 0550	CRASH SEVERITY 3 <small>1 FATAL ERROR 2 FATAL INJURY 3 FATAL INJURY 4 UNKNOWN</small>	PRIVATE PROPERTY <input type="checkbox"/> NO <input type="checkbox"/> YES	HITS/SKIP 1 <small>1 NOT HIT/SKIP 2 HIT/NO INJURY 3 UNRESOLVED</small>	PHOTOS TAKEN <input type="checkbox"/> YES <input type="checkbox"/> NO	OH-1 OH-3 OH-1P OTHER <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
N.C.I.C. # 03801	REPORTING AGENCY MILLERSBURG POLICE DEPARTMENT	# UNITS 2	UNIT ERROR 01 <small>1 UNKNOWN 2 UNKNOWN 3 UNKNOWN</small>	DATE OF CRASH 03/13/2009	

TIME OF CRASH 15:45	DAY OF WEEK FRI	CITY/VILLAGE/TOWNSHIP VILLAGE	NAME (OF CITY, VILLAGE OR TOWNSHIP) MILLERSBURG	COUNTY # 38	LATITUDE 40335101	LONGITUDE 081551306
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CRASH OCCURRED ON	TYPE LOCATION POINT USED	LOCAL INFORMATION
PREFIX WOOSTER	CRASH LOCATION WOOSTER	TYPE LOC 1 <small>1 NAMED STREET 2 NUMBERED STREET 3 NUMBERED ROUTE</small>

AT REFERENCE	REFERENCE POINT USED	03 TOWNSHIP BOUNDARY	04 DRIVEWAY
DIST. REF.	DR	PREFIX	REFERENCE CARY
REF POINT 02	01 STATE LINE 02 INTERSECTION OF TWO STREETS 03 COUNTY LINE 04 FURNACE NUMBER		05 DRIVEWAY 06 STREET OR ROAD WITH/OUT REFERENCE

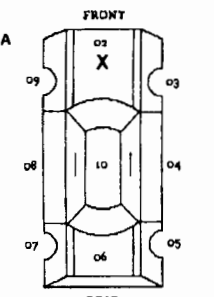
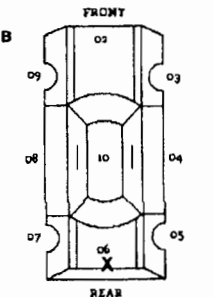
MOTORIST / NON-MOTORIST

A	UNIT # 01	# OF OCC 1	NAME (LAST, FIRST, MIDDLE) WEAVER MILDRED N
ADDRESS (STREET, CITY, STATE, ZIP-CODE) 5366 CR 201 MILLERSBURG OH 44654			
SOCIAL SECURITY NUMBER [REDACTED]	DATE OF BIRTH 12/30/1930	AGE 78	SEX F
HOME PHONE # (330)893-2880	WORK PHONE #		
DL STATE OH	DL # RF380392	LP STATE OH	LP # BY79GS
INJURED TAKEN BY 1 <small>1 ENGINE 4 OTHER 2 EMS 3 UNKNOWN 3 POLICE</small>		TRANSPORTED BY	INJURED TAKEN TO
OWNER NAME (IF SAME, WRITE 'SAME') WEAVER, MILDRED N		OWNER ADDRESS (STREET, CITY, STATE, ZIP-CODE) 5366 CR 201 MILLERSBURG OH 44654	
YEAR 2000	MAKE CHEVROLET	MODEL OTHER TRUC	COLOR WHITE
INSURANCE COMPANY MOTORIST MUTUAL	TOWING SERVICE	OWNER PHONE#	
OFFENSE CHARGED	OFFENSE DESCRIPTION	CITATION #	LOCAL CODE <input type="checkbox"/> YES <input type="checkbox"/> NO

B	UNIT # 02	# OF OCC 1	NAME (LAST, FIRST, MIDDLE) BAKER EVERETT D
ADDRESS (STREET, CITY, STATE, ZIP-CODE) 711 MAXWELL AVE MILLERSBURG OH 44654			
SOCIAL SECURITY NUMBER [REDACTED]	DATE OF BIRTH 05/12/1961	AGE 47	SEX M
HOME PHONE # (330)674-5570	WORK PHONE #		
DL STATE OH	DL # RF095752	LP STATE OH	LP # DXL1287
INJURED TAKEN BY 1 <small>1 ENGINE 4 OTHER 2 EMS 3 UNKNOWN 3 POLICE</small>		TRANSPORTED BY	INJURED TAKEN TO
OWNER NAME (IF SAME, WRITE 'SAME') BAKER, EVERETT D		OWNER ADDRESS (STREET, CITY, STATE, ZIP-CODE) 711 MAXWELL AVE MILLERSBURG OH 44654	
YEAR 2002	MAKE MERCURY	MODEL OTHER	COLOR WHITE
INSURANCE COMPANY MOTORIST MUTUAL	TOWING SERVICE	OWNER PHONE#	
OFFENSE CHARGED	OFFENSE DESCRIPTION	CITATION #	LOCAL CODE <input type="checkbox"/> YES <input type="checkbox"/> NO

C	UNIT #	NAME (LAST, FIRST, MIDDLE)	HOME PHONE#	DATE OF BIRTH	AGE	SEX
ADDRESS (STREET, CITY, STATE, ZIP-CODE)			INJURED TAKEN BY	TRANSPORTED BY	INJURED TAKEN TO	
D	UNIT #	NAME (LAST, FIRST, MIDDLE)	HOME PHONE#	DATE OF BIRTH	AGE	SEX
ADDRESS (STREET, CITY, STATE, ZIP-CODE)			INJURED TAKEN BY	TRANSPORTED BY	INJURED TAKEN TO	

SEATING POSITION	SAFETY EQUIPMENT	AIR BAG	AIR BAG SWITCH	EJECTION	TRAPPED	INJURIES
A 01 <small>01 FRONT - LEFT (MC DRIVER) 02 FRONT - MIDDLE 03 FRONT - RIGHT 04 REAR - LEFT (MC PASSENGER) 05 REAR - MIDDLE 06 REAR - RIGHT 07 THIRD - LEFT (MC PASSENGER SIDE CAB) 08 THIRD - MIDDLE 09 THIRD - RIGHT 10 LEFT PER SECTION OF CAB 11 UNSEATED CARGO AREA 12 UNSEATED CARGO AREA 13 TRAILING UNIT 14 EXTERIOR 15 OTHER 16 NON-MOTORIST 17 UNKNOWN</small>	A 04 <small>01 NONE USED 02 SEATBELT (FRONT) 03 SEATBELT (SIDE) 04 SEATBELT (SIDE) 05 SEATBELT (SIDE) 06 SEATBELT (SIDE) 07 SEATBELT (SIDE) 08 SEATBELT (SIDE) 09 SEATBELT (SIDE) 10 SEATBELT (SIDE) 11 SEATBELT (SIDE) 12 SEATBELT (SIDE) 13 SEATBELT (SIDE) 14 SEATBELT (SIDE) 15 SEATBELT (SIDE) 16 SEATBELT (SIDE) 17 SEATBELT (SIDE) 18 SEATBELT (SIDE) 19 SEATBELT (SIDE) 20 SEATBELT (SIDE) 21 SEATBELT (SIDE) 22 SEATBELT (SIDE) 23 SEATBELT (SIDE) 24 SEATBELT (SIDE) 25 SEATBELT (SIDE) 26 SEATBELT (SIDE) 27 SEATBELT (SIDE) 28 SEATBELT (SIDE) 29 SEATBELT (SIDE) 30 SEATBELT (SIDE) 31 SEATBELT (SIDE) 32 SEATBELT (SIDE) 33 SEATBELT (SIDE) 34 SEATBELT (SIDE) 35 SEATBELT (SIDE) 36 SEATBELT (SIDE) 37 SEATBELT (SIDE) 38 SEATBELT (SIDE) 39 SEATBELT (SIDE) 40 SEATBELT (SIDE) 41 SEATBELT (SIDE) 42 SEATBELT (SIDE) 43 SEATBELT (SIDE) 44 SEATBELT (SIDE) 45 SEATBELT (SIDE) 46 SEATBELT (SIDE) 47 SEATBELT (SIDE) 48 SEATBELT (SIDE) 49 SEATBELT (SIDE) 50 SEATBELT (SIDE) 51 SEATBELT (SIDE) 52 SEATBELT (SIDE) 53 SEATBELT (SIDE) 54 SEATBELT (SIDE) 55 SEATBELT (SIDE) 56 SEATBELT (SIDE) 57 SEATBELT (SIDE) 58 SEATBELT (SIDE) 59 SEATBELT (SIDE) 60 SEATBELT (SIDE) 61 SEATBELT (SIDE) 62 SEATBELT (SIDE) 63 SEATBELT (SIDE) 64 SEATBELT (SIDE) 65 SEATBELT (SIDE) 66 SEATBELT (SIDE) 67 SEATBELT (SIDE) 68 SEATBELT (SIDE) 69 SEATBELT (SIDE) 70 SEATBELT (SIDE) 71 SEATBELT (SIDE) 72 SEATBELT (SIDE) 73 SEATBELT (SIDE) 74 SEATBELT (SIDE) 75 SEATBELT (SIDE) 76 SEATBELT (SIDE) 77 SEATBELT (SIDE) 78 SEATBELT (SIDE) 79 SEATBELT (SIDE) 80 SEATBELT (SIDE) 81 SEATBELT (SIDE) 82 SEATBELT (SIDE) 83 SEATBELT (SIDE) 84 SEATBELT (SIDE) 85 SEATBELT (SIDE) 86 SEATBELT (SIDE) 87 SEATBELT (SIDE) 88 SEATBELT (SIDE) 89 SEATBELT (SIDE) 90 SEATBELT (SIDE) 91 SEATBELT (SIDE) 92 SEATBELT (SIDE) 93 SEATBELT (SIDE) 94 SEATBELT (SIDE) 95 SEATBELT (SIDE) 96 SEATBELT (SIDE) 97 SEATBELT (SIDE) 98 SEATBELT (SIDE) 99 SEATBELT (SIDE) 100 SEATBELT (SIDE)</small>	A 1 <small>1 NOT DEPLOYED 2 DEPLOYED - FRONT 3 DEPLOYED - SIDE 4 DEPLOYED BOTH FRONT SIDE 5 NOT APPLICABLE 6 DEPLOYMENT UNKNOWN</small>	A 1 <small>1 LOCKOFF SWITCH NOT PRESENT 2 PARTIALLY DEPLOYED 3 PARTIALLY DEPLOYED 4 NOT APPLICABLE 5 UNKNOWN</small>	A 1 <small>1 NOT EJECTED 2 PARTIALLY EJECTED 3 PARTIALLY EJECTED 4 NOT APPLICABLE 5 UNKNOWN</small>	A 1 <small>1 NOT TRAPPED 2 EJECTED (TO) BY MECHANICAL MEANS 3 EJECTED BY NON-MECHANICAL MEANS 4 UNKNOWN</small>	A 1 <small>1 NONE BY 2 POSSIBLE 3 NON-CAPACITATING 4 CAPACITATING 5 STATE OF OH BY 6 UNKNOWN</small>
<input type="checkbox"/> SUPPLEMENT 'S' IF YES						

UNIT NUMBERS A <input type="text" value="01"/> B <input type="text" value="02"/>	DAMAGE AREA 	PRE-CRASH ACTIONS A <input type="text" value="01"/> B <input type="text" value="11"/>	SEQUENCE OF EVENTS <table border="1"> <tr> <td>A</td> <td>B</td> </tr> <tr> <td>1 <input type="text" value="20"/></td> <td>1 <input type="text" value="20"/></td> </tr> <tr> <td>2 <input type="text"/></td> <td>2 <input type="text"/></td> </tr> <tr> <td>3 <input type="text"/></td> <td>3 <input type="text"/></td> </tr> <tr> <td>4 <input type="text"/></td> <td>4 <input type="text"/></td> </tr> </table>	A	B	1 <input type="text" value="20"/>	1 <input type="text" value="20"/>	2 <input type="text"/>	2 <input type="text"/>	3 <input type="text"/>	3 <input type="text"/>	4 <input type="text"/>	4 <input type="text"/>	POSTED SPEED A <input type="text" value="35"/> B <input type="text" value="35"/>	DRUG TEST STATUS A <input type="text" value="1"/> B <input type="text" value="1"/>
A	B														
1 <input type="text" value="20"/>	1 <input type="text" value="20"/>														
2 <input type="text"/>	2 <input type="text"/>														
3 <input type="text"/>	3 <input type="text"/>														
4 <input type="text"/>	4 <input type="text"/>														
NON-MOTORIST LOCATION A <input type="text"/>		CONTRIBUTING CIRCUMSTANCES A <input type="text" value="08"/> B <input type="text" value="01"/>	NON-COLLISION 01 OVERTURN ROLL-OVER 02 FIRE/EXPLOSION 03 IMMERSION 04 JACKKNIFE 05 CARGO EQUIPMENT LOSS OR SHIFT 06 EQUIPMENT FAILURE (BLOWN TIRE, BRAKE FAIL, ETC.) 07 IMPACT WITH OBJECT 08 ANIMAL OR ROAD BARRIER 09 OFF ROAD/LEFT 10 CROSS-MEDIAN CENTERLINE 11 UNKNOWN COLLISION 12 OTHER NON-COLLISION 13 UNKNOWN NON-COLLISION 14 UNKNOWN NON-COLLISION 15 UNKNOWN NON-COLLISION 16 UNKNOWN NON-COLLISION 17 UNKNOWN NON-COLLISION 18 UNKNOWN NON-COLLISION 19 UNKNOWN NON-COLLISION 20 UNKNOWN NON-COLLISION 21 UNKNOWN NON-COLLISION 22 UNKNOWN NON-COLLISION 23 UNKNOWN NON-COLLISION 24 UNKNOWN NON-COLLISION 25 UNKNOWN NON-COLLISION 26 UNKNOWN NON-COLLISION 27 UNKNOWN NON-COLLISION 28 UNKNOWN NON-COLLISION 29 UNKNOWN NON-COLLISION 30 UNKNOWN NON-COLLISION 31 UNKNOWN NON-COLLISION 32 UNKNOWN NON-COLLISION 33 UNKNOWN NON-COLLISION 34 UNKNOWN NON-COLLISION 35 UNKNOWN NON-COLLISION 36 UNKNOWN NON-COLLISION 37 UNKNOWN NON-COLLISION 38 UNKNOWN NON-COLLISION 39 UNKNOWN NON-COLLISION 40 UNKNOWN NON-COLLISION 41 UNKNOWN NON-COLLISION 42 UNKNOWN NON-COLLISION 43 UNKNOWN NON-COLLISION 44 UNKNOWN NON-COLLISION 45 UNKNOWN NON-COLLISION 46 UNKNOWN NON-COLLISION 47 UNKNOWN NON-COLLISION 48 UNKNOWN NON-COLLISION 49 UNKNOWN NON-COLLISION 50 UNKNOWN NON-COLLISION 51 UNKNOWN NON-COLLISION 52 UNKNOWN NON-COLLISION 53 UNKNOWN NON-COLLISION 54 UNKNOWN NON-COLLISION 55 UNKNOWN NON-COLLISION 56 UNKNOWN NON-COLLISION 57 UNKNOWN NON-COLLISION 58 UNKNOWN NON-COLLISION 59 UNKNOWN NON-COLLISION 60 UNKNOWN NON-COLLISION 61 UNKNOWN NON-COLLISION 62 UNKNOWN NON-COLLISION 63 UNKNOWN NON-COLLISION 64 UNKNOWN NON-COLLISION 65 UNKNOWN NON-COLLISION 66 UNKNOWN NON-COLLISION 67 UNKNOWN NON-COLLISION 68 UNKNOWN NON-COLLISION 69 UNKNOWN NON-COLLISION 70 UNKNOWN NON-COLLISION 71 UNKNOWN NON-COLLISION 72 UNKNOWN NON-COLLISION 73 UNKNOWN NON-COLLISION 74 UNKNOWN NON-COLLISION 75 UNKNOWN NON-COLLISION 76 UNKNOWN NON-COLLISION 77 UNKNOWN NON-COLLISION 78 UNKNOWN NON-COLLISION 79 UNKNOWN NON-COLLISION 80 UNKNOWN NON-COLLISION 81 UNKNOWN NON-COLLISION 82 UNKNOWN NON-COLLISION 83 UNKNOWN NON-COLLISION 84 UNKNOWN NON-COLLISION 85 UNKNOWN NON-COLLISION 86 UNKNOWN NON-COLLISION 87 UNKNOWN NON-COLLISION 88 UNKNOWN NON-COLLISION 89 UNKNOWN NON-COLLISION 90 UNKNOWN NON-COLLISION 91 UNKNOWN NON-COLLISION 92 UNKNOWN NON-COLLISION 93 UNKNOWN NON-COLLISION 94 UNKNOWN NON-COLLISION 95 UNKNOWN NON-COLLISION 96 UNKNOWN NON-COLLISION 97 UNKNOWN NON-COLLISION 98 UNKNOWN NON-COLLISION 99 UNKNOWN NON-COLLISION 100 UNKNOWN NON-COLLISION	TRAFFIC CONTROL A <input type="text" value="01"/> B <input type="text" value="01"/>	DRUG TEST TYPE A <input type="text" value="1"/> B <input type="text" value="1"/>										
TYPE OF UNIT A <input type="text" value="07"/> B <input type="text" value="06"/>	MOST DAMAGED AREA A <input type="text" value="02"/> B <input type="text" value="06"/>	VEHICLE DEFECT CODE ONLY IF #1 SELECTED ABOVE A <input type="text"/>	FIRST HARMFUL EVENT A <input type="text" value="5"/> B <input type="text" value="5"/>	DIRECTION FROM TO FROM TO A <input type="text" value="2"/> <input type="text" value="1"/> B <input type="text" value="2"/> <input type="text" value="1"/>	DRUG TEST 1 & 2 RESULT <table border="1"> <tr> <td>1</td> <td>2</td> <td>1</td> <td>2</td> </tr> <tr> <td>A <input type="text" value="1"/></td> <td>A <input type="text" value="1"/></td> <td>B <input type="text" value="1"/></td> <td>B <input type="text" value="1"/></td> </tr> </table>	1	2	1	2	A <input type="text" value="1"/>	A <input type="text" value="1"/>	B <input type="text" value="1"/>	B <input type="text" value="1"/>		
1	2	1	2												
A <input type="text" value="1"/>	A <input type="text" value="1"/>	B <input type="text" value="1"/>	B <input type="text" value="1"/>												
IN EMERGENCY RESPONSE A <input type="text" value="1"/> B <input type="text" value="1"/>	POINT OF IMPACT A <input type="text" value="02"/> B <input type="text" value="06"/>	VEHICLE DEFECT CODE ONLY IF #1 SELECTED ABOVE A <input type="text"/>	MOST HARMFUL EVENT A <input type="text" value="5"/> B <input type="text" value="5"/>	CONDITION A <input type="text" value="1"/> B <input type="text" value="1"/>	TYPE OF INTERSECTION <input type="text" value="02"/>										
DAMAGE SCALE A <input type="text" value="2"/> B <input type="text" value="2"/>	ACTION A <input type="text" value="3"/> B <input type="text" value="4"/>	VEHICLE DEFECT CODE ONLY IF #1 SELECTED ABOVE A <input type="text"/>	SPEED DETECTED A <input type="text" value="1"/> B <input type="text" value="1"/>	ALCOHOL/DRUG SUSPECTED A <input type="text" value="1"/> B <input type="text" value="1"/>	OCCURRENCE <input type="text" value="1"/>										
DAMAGE SCALE A <input type="text" value="2"/> B <input type="text" value="2"/>	STRIKING VEHICLE OVERIDE/UNDERIDE A <input type="text" value="1"/> B <input type="text" value="1"/>	VEHICLE DEFECT CODE ONLY IF #1 SELECTED ABOVE A <input type="text"/>	SPEED A <input type="text" value="20"/> B <input type="text" value="0"/>	ALCOHOL TEST STATUS A <input type="text" value="1"/> B <input type="text" value="1"/>	ROAD CONTOUR <input type="text" value="2"/>										
DAMAGE SCALE A <input type="text" value="2"/> B <input type="text" value="2"/>	STRIKING VEHICLE OVERIDE/UNDERIDE A <input type="text" value="1"/> B <input type="text" value="1"/>	VEHICLE DEFECT CODE ONLY IF #1 SELECTED ABOVE A <input type="text"/>	SPEED A <input type="text" value="20"/> B <input type="text" value="0"/>	ALCOHOL TEST TYPE A <input type="text" value="1"/> B <input type="text" value="1"/>	ROAD CONDITIONS PRIMARY <input type="text" value="01"/> SECONDARY <input type="text"/>										
DAMAGE SCALE A <input type="text" value="2"/> B <input type="text" value="2"/>	STRIKING VEHICLE OVERIDE/UNDERIDE A <input type="text" value="1"/> B <input type="text" value="1"/>	VEHICLE DEFECT CODE ONLY IF #1 SELECTED ABOVE A <input type="text"/>	SPEED A <input type="text" value="20"/> B <input type="text" value="0"/>	ALCOHOL TEST RESULT A <input type="text"/>	LOCAL REPORT # 09MPD 0550										

NARRATIVE

UNIT #2 WAS STOPPED ON WOOSTER ROAD TO MAKE A LEFT HAND TURN ONTO CARY STREET. UNIT #1 WAS TRAVELING NORTHBOUND ON WOOSTER ROAD. UNIT #1 DID NOT GET STOPPED IN TIME. UNIT #1 STRUCK UNIT #2 IN THE REAR END.

<p>MANNER OF COLLISION OR IMPACT</p> <p>2</p> <p>1 NOT COLLISION BETWEEN TWO VEHICLES IN TRANSPORT 2 REAR-REAR 3 HEAD-ON 4 REAR-TO-REAR 5 BACKING 6 ANGLES 7 SIDEWIPES SAME DIRECTION 8 SIDEWIPES OPPOSITE DIRECTION 9 UNKNOWN</p>	<p>SCHOOL BUS RELATED</p> <p>1</p> <p>1 NO 2 YES, DIRECTLY INVOLVED 3 YES, INDIRECTLY INVOLVED 4 UNKNOWN</p> <p>WORK ZONE RELATED</p> <p>1</p> <p>1 NO 2 YES 3 UNKNOWN</p>	<p>DIAGRAM</p>
<p>WEATHER</p> <p>01</p> <p>01 CLEAR 02 CLOUDY 03 FOG/SMOG/HAZE 04 RAIN 05 SLEET (RAIN FREEZING) 06 SUN/DRIZZLE 06 SNOW 07 SEVERE CROSSWINDS (RELIQUIN) 08 SAND/BLIZZARD/SNOW 09 OTHER 10 UNKNOWN</p>	<p>TYPE OF WORK ZONE</p> <p><input type="checkbox"/></p> <p>11 AHEAD 21 AHEAD CROSSOVER 31 WORK ON SHOULDER OR MEDIAN 41 INTERMITTENT OR MOVING WORK 51 OTHER</p>	
<p>LIGHT CONDITIONS</p> <p>PRIMARY <input checked="" type="checkbox"/> SECONDARY <input type="checkbox"/></p> <p>1 DAYLIGHT 2 DAWN 3 DUSK 4 DARK - LIGHTED ROADWAY 5 DARK - ROADWAY NOT LIGHTED 6 DARK - UNKNOWN ROADWAY LIGHTING 7 (H) (H) 8 OTHER 9 UNKNOWN</p>	<p>LOCATION OF CRASH IN WORK ZONE</p> <p><input type="checkbox"/></p> <p>1 BEFORE THE FIRST WORK ZONE WARNING SIGN 2 ADVANCE WARNING AREA 3 TRANSITION AREA 4 ACTIVITY AREA</p> <p>WORKERS PRESENT</p> <p><input type="checkbox"/></p> <p>1 NO 2 YES 3 UNKNOWN</p>	

<p>TRUCK/BUS UNIT #</p> <p><input type="text"/></p>	<p>THE CRASH INVOLVED ONE OR MORE OF THE FOLLOWING: A TRUCK (MOTOR VEHICLE) WITH A GVWR MORE THAN 10000 POUNDS, OR A TRUCK (MOTOR VEHICLE) WITH A HAZARDOUS MATERIALS PLACARD, OR A BUS DESIGNED FOR AT LEAST 8 PASSENGERS, INCLUDING DRIVER.</p>	<p>THE CRASH RESULTED IN ONE OF THE FOLLOWING: A FATALITY, OR AN INJURY REQUIRING TRANSPORTATION OR IMMEDIATE MEDICAL TREATMENT, OR AT LEAST ONE VEHICLE WAS TOWED DUE TO DEBILITATING DAMAGE OR REQUIRED INTERVENING ASSISTANCE BEFORE PROCEEDING UNDER ITS OWN POWER.</p>
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COMPANY (FROM SHIPPING PAPERS)

ADDRESS (STREET, CITY, ST, ZIP CODE)

US DOT	ICC MC	PUCO	TRAILER LP ST.	TRAILER LP YEAR	TRAILER LP #	PLACARD #	# DIA
<p>CARGO BODY TYPE</p> <p><input type="checkbox"/></p> <p>01 NOT APPLICABLE 02 BUS (N-15 INCLUDING DRIVER) 03 VAN ENCLOSED BOX 04 GRAIN/CHIPS/GRAVEL</p>	<p>05 TRAILER 06 CARGO TANK 07 FLATBED 08 DRUM 09 CONCRETE MIXER</p>	<p>10 AUTO TRANSPORTER 11 A-BUS-3-REAR 12 OTHER 13 UNKNOWN</p>	<p>WEIGHT (GVWR)</p> <p><input type="checkbox"/></p> <p>1 11,000-14,000 2 14,001-24,000 3 MORE THAN 24,000</p>	<p>CDL CLASS</p> <p><input type="checkbox"/></p> <p>1 CLASS A 2 CLASS B 3 CLASS C 4 CLASS D 5 CLASS E</p>	<p>HAZARDOUS MATERIALS</p> <p><input type="checkbox"/></p> <p>1 NO 2 YES 3 UNKNOWN</p>	<p>HAZARDOUS MATERIALS REFERRED</p> <p><input type="checkbox"/></p> <p>1 NO 2 YES 3 NOT APPLICABLE</p>	

POLICE ACTION

DATE CRASH REPORTED 03/13/2009	TIME REC CALL 15:45	DISPATCH 15:46	ARRIVED 15:48	CLEARED 16:07	OTHER 0	TOTAL MINUTES 21
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OFFICER'S NAME CAPT. SCOTT AKINS	BADGE # 103	CHECKED BY	DATE REPORT FILED 03/13/2009
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<p>REPORT TAKEN BY</p> <p>1 POLICE AGENCY 2 MOTORIST</p> <p>1</p>	<p>REPORT TAKEN AT</p> <p>1 SCENE 2 STATION 3 OTHER</p> <p>1</p>	<p><input type="checkbox"/> SUPPLEMENT 'X' IF YES</p>	<p>LOCAL REPORT # 09MPO 0550</p>
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Accio
Rpt

PUBLIC RECORDS REQUEST RESPONSE WORKSHEET

Some or all of the information you have requested has not been provided or has been intentionally obscured or deleted (redacted) because the information is exempt from the duty to permit public inspection or copying from an item that otherwise meets the definition of "record" in Section 149.011. In other words, it does not meet the definition of "public record" found in section 149.43(A) (1). The subsection of 149.43(A) (1) that applies is designated:

_____ (a) "Medical records" defined as any document or combination of documents, except births, deaths, and the fact of admission to or discharge from a hospital, that pertains to the medical history, diagnosis, prognosis, or medical condition of a patient and that is generated and maintained in the process of medical treatment.

Records that pertain to a patient's medical history, diagnosis, prognosis or medical condition and that were generated and maintained in the process of medical treatment are not subject to disclosure under the Public Records Act.¹⁵² The record must have both of these characteristics to be exempt from public disclosure.¹⁵³ Birth records, death records, and the fact of admission to or discharge from a hospital are not "medical records,"¹⁵⁴ so they must be disclosed. The report of a medical professional that is generated for employment or litigation purposes, rather than in the process of medical treatment, is not a "medical record." For instance, a psychological report made as part of the hiring process was generated for employment purposes, not for medical treatment and is not a "medical record" for purposes of this exemption.¹⁵⁵ Similarly, when a run sheet created and maintained by a county emergency medical services (EMS) organization documents treatment of a living patient, the EMS organization may redact information that pertains to the patient's medical history, diagnosis, prognosis or medical condition.¹⁵⁶ The medical records exemption does not permit, however, the redaction of names, addresses or other non-medical personal information.¹⁵⁷ Such information may, at first blush, appear to be protected by the Health Insurance Portability And Accountability Act (HIPAA); however, a recent Ohio Supreme Court decision clarified that HIPAA is not available as a catch-all exemption under Ohio's Public Records Act.

¹⁵¹ Ohio Rev. Code Ann. §149.43(A)(1)(a) and (A)(3).

¹⁵² Ohio Rev. Code Ann. §149.43(A)(1)(a) and (A)(3); *Bartley v. Little* (Dec. 28, 2000), Muskingum App. No. CT99-16, 2000 Ohio App. LEXIS 8238.

¹⁵³ Ohio Rev. Code Ann. §149.43(A)(3); State ex rel. *Strothers v. Wertheim* (1997), 80 Ohio St.3d 155, 1997 Ohio 349, 684 N.E.2d 1239;

¹⁵⁴ Ohio Rev. Code Ann. §149.43(A)(1)(a) and (A)(3).

¹⁵⁵ State ex rel. *Multimedia, Inc. v. Snowden* (1995), 72 Ohio St.3d 141, 144-45, 1995 Ohio 248, 647 N.E.2d 1374, 1379; State v. *Hall* (2001), 141 Ohio App.3d 561, *Lawrence App.*, No. 00CA23, 2001 Ohio 4059, 752 N.E.2d 318 (psychiatric reports compiled solely to assist court with competency to stand trial determination are not medical records); State ex rel. *DeRemer v. Waller* (Mar.

17, 1997), 5th Dist. No. 1997CA00055, 1997 Ohio App. LEXIS 1909. See, also, State ex rel. *Richard v. Cleveland Metro Health Cir.* (1992), 84 Ohio App.3d 142, 616 N.E.2d 549; State ex rel. *National Broadcasting Co. v. Cleveland* (1992), 82 Ohio App.3d 202, *Cuyahoga App.* No. 52337, 511 N.E.2d 838; State ex rel. *Toledo Blade Co. v. Teib* (1990), 50 Ohio Misc. 2d 1, 552 N.E.2d 243. But see, *Sheely v. Norris* (Oct. 7, 1993), 11th Dist. No. 92-P-0027, No. 92-P-0028, 1993 Ohio App. LEXIS 5205 (emergency room records in custody of prosecutor are not public records). (Note other statutes such as the federal Americans with Disabilities Act (see 29 U.S.C. §2601, et seq. (1993)).

¹⁵⁸ State ex rel. *Enquirer v. Daniels* (2006), ___ Ohio St. 3d ___, 2006 Ohio 1215

(h) "Confidential law enforcement investigatory records" defined in Section 149.43 (A)(2) as any record that pertains to a law enforcement matter of a criminal, quasi-criminal, civil, or administrative nature, but only to the extent that the release of the record would create a high probability of disclosure of any of the following (check all that apply):

In determining whether a record constitutes a confidential law enforcement investigatory record, the courts use a two-step test.¹⁸¹ The record must both (a) pertain to a criminal, quasi-criminal, civil or administrative law enforcement matter, and (b) create a high probability of disclosing at least one of the five types of information highlighted above.¹⁸² If information does not meet the test, the information may not be withheld under CLEIRs.

Note, however, release of the information may still be restricted under any of the other express exemptions or the catch-all exemption.¹⁸³

¹⁸¹ State ex rel. Musial v. City of N. Olmsted (2005), 106 Ohio St.3d 459, 2005 Ohio 5521, 835 N.E.2d 1243; State ex rel. Beacon Journal Publ. Co. v. Maurer (2001), 91 Ohio St.3d 54, 2001 Ohio 282, 741 N.E.2d 511; State ex rel. Polovischak v. Mayfield (1990), 50 Ohio St.3d 51, 52, 552 N.E.2d 635, 636-37.

¹⁸² State ex rel. Multimedia, Inc. v. Snowden (1995), 72 Ohio St.3d 141, 1995 Ohio 248, 647 N.E.2d 1374; State ex rel. Polovischak v. Mayfield (1990), 50 Ohio St.3d 51, 552 N.E.2d 635.

¹⁸³ State ex rel. Beacon Journal Publ. Co. v. City of Akron (2004), 104 Ohio St.3d 399, 2004 Ohio 6557, overruling State ex rel. Beacon Journal Publ. Co. v. City of Akron (Apr. 12, 2004), 9th Dist. No. 21116, 2004 Ohio App. LEXIS 1814 (although incident reports are not exempt under CLEIRs, abuse reports from children services agencies incorporated therein are exempt from disclosure under a separate catch-all statute).

 X (v) Records the release of which is prohibited by state or federal law as follows (check all that apply):

 X Social Security numbers

Protecting (SSNs) is based on a federal constitutional right to privacy.³⁵⁷ Although the federal Privacy Act (5 U.S.C. §552a) does not expressly prohibit the release of SSNs by state and local public offices, it does create an individual expectation of privacy.³⁵⁸ Any federal, state, or local government agency that asks individuals to disclose their SSNs must state 1) whether that disclosure is mandatory or voluntary, and if mandatory under what authority the SSN is solicited, and 2) what use will be made of it.³⁵⁹ Therefore, a SSN can only be disclosed after individuals have been given prior notice that their SSNs will be publicly available. However, the Ohio Supreme Court has ruled that 911 tapes are always a public record which must be made immediately available. This is the case even if the tapes contain SSNs. The court found that there is no expectation of privacy when a person makes a 911 call. Instead, there is an expectation that the information will be recorded and disclosed to the public.³⁶⁰

³⁵⁷ State ex rel. Beacon Journal Publ. Co. v. City of Akron (1994), 70 Ohio St.3d 605, 1994 Ohio 6, 640 N.E.2d 164. See, also, State ex rel. Beacon