OF PURIC DATE	TRAFF	c Cr	RASH	REPORT	*DENO	TES MANDATORY	FIELD FOR SUP	PLEMENT	REPORT		LOCAL REPOR	T NUMBER	•
PHOTOS TAKEN	<b>X</b> OH -2		)н <b>-</b> з	LOCAL INFORMAT	TON 22MPD	0382					22MPI		
SECONDARY CR	ASH OH-1	, 🔲 o	/\ I	REPORTING AGEN	ICY NAME *			NCI		HIT/SKIP 1 - SOLVED	NUMBER OF U	i 1 .	UNIT IN ERROR 98 - ANIMAL
	PRIVA	TE PROPE		Millersburg				038	301 <sub>1</sub>	2 2 - UNSOLVED		<u> </u>	99 - UNKNOWN
COUNTY* LOCALI	1 - CITY	LOCAT	TON: CITY	/, VILLAGE, TOWNSHII	p <b>*</b>					CRASH DATE	/TIME*		SH SEVERITY FATAL
38[2]	2 - VILLAGE 3 - TOWNSHIP	Miller	rsburg							03/05/202	2 07:37	. 5 .	SERIOUS INJURY
ROUTE TYPE ROU	TE NUMBER PR	EFIX 1 - ↑ 2 - 9	NORTH I	LOCATION ROAD	NAME			R	OAD TYPE		ECIMAL DEGRÉES	۹.	SUSPECTED MINOR INJURY
301	<u> </u> L	2 3-E	EAST WEST	Monroe					ST	40.546	608		SUSPECTED
ROUTE TYPE ROU	TE NUMBER PR	EFIX 1 - 1		REFERENCE ROA	D NAME (ROAD,	MILEPOST, HQ	USE#)	R	OAD TYPE	LONGITUDE	ECIMAL DEGREES		INJURY POSSIBLE
ROUTE TYPE ROU	lı lı	2 13-8	South East West	696						-81.916	120	5 -	PROPERTY DAMAGE ONLY
REFERENCE POINT	T DIRE	CTION FERENCE	1 1534	ROUTE TY	PE		ROAD TYPE			<del></del>	INTERSECTION	N RELATE	,
1 - INTERSECTION	ON   _ :	- NORTH		INTERSTATE ROUT		-ALLEY	HW - HIGHW		- ROAD	WITHIN INTE	RSECTION OR O	APPROAC	н
3 - HOUSE #	:لئا إ	- SOUTH	¹ us-	FEDERAL US ROU	76 1	V - AVENUE L - BOULEVARD	LA - LANE MP - MILEPO		- SQUARE - STREET	WITHIN INTE	RCHANGE AREA		
DISTANCE FROM REFERENCE		ANCE MEASURE	SR -	STATE ROUTE		R - CIRCLE	OV - OVAL		- TERRACE				BER OF APPROACHES
FROM REFERENCE		measure 1 - Miles	: <b> </b>	NUMBERED COU	DI POUTE	T - COURT R - DRIVE	PK - PARKWA PI - PIKE		- TRAIL - WAY		ROAE	VVAY	
194.70	111 6 1	2 - FEET 3 - YARDS		NUMBERED TOWN	NSHIP H	E - HEIGHTS	PL - PLACE			ROADWAY	DIVIDED		
	ATION OF FIRST			T		NNER OF CRAS			г	DIRECTION OF TRA	VEL	MEDIA	N TYPE
1 - ON ROA			SSOVER IVEWAY/A	ALLEY ACCESS	1 1	OT COLLISION 4	- REAR-TO-RE - BACKING	AR		1 - NORTH			JSH MEDIAN
3 - IN MED		11 - RAI	ILWAY GR	RADE CROSSING	TW	O MOTOR	- ANGLE			2 - SOUTH	1, ,	<4 FEET ) DIVIDED FLI	USH MEDIAN
4 - ON ROA 5 - ON GO		12 - SHA TRA		E PATHS OR		ANSPORT 7	- SIDESWIPE, 9			4 - WEST		≥4 FEET )	PRESSED MEDIAN
	E TRAFFIC WAY					MK-END	- SIDESWIPE, C						AISED MEDIAN
7 - ON RAN 8 - OFF RA			LL BOOTH HER / UNI		3-46	AD-ON 9	- OTHER / UN	KNOWN				ANY TYPE) OTHER / UN	IKNOWN
WORK ZONE REL	ATED	$\neg$		WORK ZONE T	YPE	LOCATIO	N OF CRASH	IN WOR	K ZONE	CONTOUR	СОИВП	ONS	SURFACE
WORKERS PRESE			1 -	LANE CLOSURE			BEFORE THE			2	1 1	1	2
				LANE SHIFT/ CRO		L <sub>2</sub> ,	WARNING SIC - ADVANCE W		AREA	1 - STRAIGHT	1 - DRY	J	1 - CONCRETE
LAW ENFORCEM	ENT PRESENT	ΙL		WORK ON SHOU OR MEDIAN	LDER	1	- TRANSITION			LEVEL	2 - WET		2 - BLACKTOP,
ACTIVE SCHOOL	ZONE			INTERMITTENT O	R MOVING WOR	K	- ACTIVITY ARE - TERMINATION			2 - STRAIGHT GRADE	3 - SNOW 4 - ICE		BITUMINOUS, ASPHALT
			5 -	OTHER			- TERMINATIO	N AREA		3 - CURVE LEVEL	5 - SAND, MU	-	3 - BRICK/BLOCK 4 - SLAG , GRAVEL
LIC 1 - DAYLIG	SHT CONDITION	•		٠, ا	LEAD.	WEATHER				4 - CURVE GRADE 9 - OTHER	OIL, GRAV		STONE
1 , 2-DAWN/				1-0	LOUDY	6 - SNOW 7 - SEVERE C	ROSSWINDS			JUNKNOWN	MOVING) 7 - SLUSH		5 - DIRT 9 - OTHER
3-DARK-	LIGHTED ROAD\ ROADWAY NOT				OG, SMOG, SMOI						9 - OTHER / U	NKNOWN	/ UNKNOWN
1	UNKNOWN RO			4 - R 5 - Si	AIN LEET, HAIL	9 - FREEZING	S RAIN OR FREE UNKNOWN	ZING DR	RIZZLE				
9 - OTHER	/ UNKNOWN												[
NARRATIVE											•		•
Unit one was tra woodline, failing	veling south ( ) to negotiate	on Sout	h Monre ve and s	oe St. Unit one went straight o	went straight	t into the				<b>①</b>		NO 2665	1 / 0
woodline, strikin		the cui	• • • • • • • • • • • • • • • • • • • •	went straight c	in the roadwa	y into the						608 S Morroe	1 1 1
1							İ		i			_	/8 /
													/i / l
				•				₩a				_	/
								Washington St	s				/è
								-	′   i				
									1!1		South Monroe	2	SKI SKI
													Ş
													Ì
									i				ļ
													[
													l
									1 ! 1				l
CRASH REPORT	ED DATE / TIME		_	DISPATCH DATE	/TIME	AR	RIVAL DATE /	TIME	1	SCENE CLEARED	DATE / TIME		REPORT TAKEN BY
03/05/20	022 07:37			03/05/2022		1	/05/2022 0			03/05/202			POLICE AGENCY
TOTAL TIME	OTHER		TOTA			اـــــــــــــــــــــــــــــــــــــ	, , , , , , , , , , , , , , , , , , , ,		ED BY OFFICES		55,67	┦□̈́	MOTORIST
ROADWAY CLOSED		TIME	MINUT					wastki	or OFFICE?	A I I MANIE			UPPLEMENT
			F		OFFICER'S BA	LDGE NUMBER*			CHECKED BY	OFFICER'S BADGE	NUMBER*		RRECTION OR ADDITION IN EXISTING REPORT SENT TO
56				1	10			ODPS)					



	LOCAL REPORT NUMBER						
	2	22N	1PD0382				
R)			MAGE				
-	1 - NONE	DAN	IAGE SCALE  3 - FUNCTIONAL DAMAGE				
,	1 4 2 - MINOR DA	MAG					
			NKNOWN				
			GED AREA(S) ALL, THAT APPLY				
•							
$\overline{}$			11 12 1				
_	" " "	t	10 1 1 2				
		,					
		1					
#		•					
4	7 6	אַנוּ	2 5				
9	10/	╲┟	<u>₩</u> , ,				
	, <i>(</i> -	u u	<b>—</b>				
	° <b>∖-</b> -	1					
•	s	<u> ۲</u>					
	11 - 12	7	5 12				
	10 12	·	10 12 1				
		١					
	9 3	3	* [ ] 3 ] 3				
WN	レスがぬがくろ		スノ州州、スコ				
NA LAI							
	8 -		<del>-</del> <del>-</del>				
		1	2 12 12				
٧N	12						
	و دار کاراه		P 3 9 T 3 9				
		9					
WN	6	ļ					
- 1		6	6 6				
	☐- NO DAMAG	E[0	] UNDERCARRIAGE [ 14 ]				
ΝN	☐- TOP [ 13 ]		- ALL AREAS [ 15 ]				
		UNI	r NOT AT SCENE[ 16 ]				
DE I	_						
	INITIA 0 - NO DAN		DINT OF CONTACT  14 - UNDERCARRIAGE				
/N	12 1-12 - REFE	r to	UNIT 15 - VEHICLE NOT AT SCENE				
	DIAG	RAM	99 - UNKNOWN				
	13 - TOP						
NT-A		TE	RAFFIC				
NTO	TRAFFICWAY FLOW 1 - ONE-WAY		TRAFFIC CONTROL  1 - ROUNDABOUT 4 - STOP SIGN				
<b>`</b>	2-TWO-WAY	$\epsilon$	2 - SIGNAL 5 - YIELD SIGN				
			3 - FLASHER 6 - NO CONTROL				
	# OF THROUGH LANES ON ROAD		RAIL GRADE CROSSING  1 - NOT INVLOYED				
П	l		2 - INVOLVED-ACTIVE CROSSING				
į	[2]		3 - INVOLVED-PASSIVE CROSSING				
R	UNIT / NO	N-NC	NOTORIST DIRECTION				
OR			1 - NORTH S - NORTHEAST				
- 1	1	2	2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST				
- ;	FROM 1 TO	۷_	4 - WEST 8 - SOUTHWEST				
,			9 - OTHER / UNKNOWN				
1	UNIT SPEED		DETECTED SPEED				
1	1 35 1		1 - STATED / ESTIMATED SPEED				
		- 1					

C PORT	WINDS B.		NI		. n.a		_						LOC	AL RES	PORT NU	MBER		
	IV.	10	TORIST / <b>N</b> O	ON	- <b>iV</b> i	OTO	OR	IST					_		PD03			
UNIT #	NAME: LAS	ST, FIRS	T, MIDDLE			_							DATE OF B	RTH		$\top$	AGE	GENDER
	STREET, CITY	, STATE	, ZIP								CONT	ГАСТ РН	ONE - INCL	UDE AR	EA CODE			<del></del>
, он											ļ							
injuries 5	INJURED TAKEN	EMS A	AGENCY (NAME)		เขเหเ	JRED TAKE	N TO: M	TEDICAL FACILITY (NAME O	CITY)	SAFETY EQUIPMENT	   DC	Т-Сомец	SEAT IANT POST		AIR BA	G USAGE	EJECTIO	N TRAPPED
	BY _1_				$\bot$		_			99	Шмс	HELME	T		}			
OL STATE	OPERATOR	LICEN	SE NUMBER		OFF	FENSE CI	HARGE	ED	LOCAL	OFFENSE DESCR	PTION				CITAT	ION N	UMBER	
OL CLASS	ENDORSEMI			—т	_Ļ_	<del></del>				ļ								
UL CLM35	ENDON	***   '	RESTRICTION SELECT UP TO 3		DRIVER DISTRACI		ALCOH ALCOH	IOL / DRUG SUSPE HOL MARIIU		CONDITION	A STATUS	TYPE	OL'TEST VALUE	1	STATUS	DRUG	G TEST(	(S) S SELECT UP TO 4
					BY		OTHER	R DRUG		<u> </u>			<u> </u>					
UNIT #	NAME: LAS	ST, FIRS	T, MIDDLE										DATE OF BI	RTH			AGE	GENDER
Abbass.	STOSET CITY	CTATI									<u> </u>							<u> </u>
ADDRESS:	STREET, CITY,	SIAIE	., ZIP								CONT	ACT PH	ONE - INCL	UDE AR	EA CODE			
INJURIES		EMS #	AGENCY (NAME)		INUU	JRED TAKE	N TO: M	EDICAL FACILITY (NAME, O	спу)	SAFETY EQUIPMENT			SEAT	ING	AIR BA	G USAGE	E EJECTIO	N TRAPPED
	TAKEN BY				ŀ					USED		T-Compu HELME		TION				
OL STATE	OPERATOR	LICEN	SE NUMBER		OFF	FENSE C	HARGE	ÉD	LOCAL	OFFENSE DESCR	PTION				CITAT	rion N	L UMBER	
OL CLASS	ENDORSEME	ENT	RESTRICTION SELECT UP TO 3		DRIVER DISTRACI		-	OL / DRUG SUSPE		CONDITION	_	T	OL TEST.			DRUG	S TEST(	S)
! 		ł			BY		ALCOH		JANA		STATUS	TYPE	VALUE	•	STATUS	TYPE	RESULTS	S SELECT UP TO 4
UNIT #	NAME: LAS	T, FIRS	T, MIDDLE					-		<u> </u>		1	DATE OF BI	RTH		┰	AGE	GENDER
	1																	GENDER
ADDRESS:	STREET, CITY,	STATE	ZIP								CONT	ACT PH	ONE - INCLI	UDE AR	EA CODE			1
INJURIES	TAKEN	EMS A	LGENCY (NAME)		INJUR	IRED TAKEN	N TO: MI	EDICAL FACILITY (NAME, C	OTY)	SAFETY EQUIPMENT		Т-Сомец			AIR BA	G USAGE	EJECTIO	N TRAPPED
	OPERATOR	LICEN	FF MUNANCO		<del> </del>			_	1			HELME	<u>г  </u>		igspace		<u> </u>	<u> </u>
OL STATE	CFERRIOR	LICEN	)E NUMBER		OFF	FENSE C	HARGE	iD	LOCAL	OFFENSE DESCRI	PTION				CITAT	ION NO	UMBER	
OL CLASS	ENDORSEME	ENT [	RESTRICTION SELECT UP TO 3	- Ir	DRIVER		AI COR	OL / DRUG SUSPE	.CTED	CONDITION	Δ	LCOH	OL TEST			חפונמ	5 TEST(	(C)
	1				DISTRACI BY		ALCOH	_		CONDITION	STATUS	TYPE	VALUE		SUFATS	TYPE		SELECT UP TO 4
	<u>l</u>						OTHER	1										
- FATAL	URIES		SEATING POSITION  SERONT - LEFT SIDE		AIR E	30.0		OL CLAS	S	OL RESTRIC		• .	IVER DIS				EST ST	ATUS
- SUSPECTED	SERIOUS		(MOTORCYCLE DRIVER)	2 - DEP	PLOYED FR PLOYED SIL	RONT		1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTER DEVICE 2 - COL INTRASTATI		2 - 1	MANUALLY O LECTRONIC			2 - TEST	NE GIVEN T REFUSED	,
- SUSPECTED	MINOR		FRONT - RIGHT SIDE SECOND - LEFT SIDE	FRO	PLOYED BO DNT/SIDE		;	3 - CLASS C		3 - CORRECTIVE LEN 4 - FARM WAIVER			OMMUNICA TEXTING, TYP		EVICE 1	CON	T GIVEN, NTAMINATI NUSABLE	ED SAMPLE
INJURY - POSSIBLE IN			(MOTORCICLE PASSENGER)		IT APPLICA PLOYMENT			'4 - REGULAR CLAS , (OHIO = D)		5 - EXCEPT CLASS A	BUS	. n	NATING			4 - TEST		ia/si
- NO APPAREI	NT INJURŸ	7÷	SECOND - RIGHT SIDE THIRD - LEFT SIDE		EJECT	TION		5 - M/C MOPED O	DNLY	& CLASS B BUS 7 - EXCEPT TRACTO		4-T	OMMUNICA FALKING ON I	HAND-I	HELD	5 - TEST	T GIVEN; ULTS UNKN	
	TAKEN BY	8 -	,		T EJECTED	)		, 6 - NO VALID OL		8 - INTERMEDIATE L i RESTRICTIONS		.5 - 0	OMMUNICA OTHER ACTIVI	ITY WIT	'H AN	ALCO	HOL TO	EST TYPE
- NOT TRAN /TREATED /			- SLEEPER SECTION	3 - TOT	RTIALLY EJEC	CTED	ļ	OL ENDORSE	MENT	9 - LEARNER'S PERM RESTRICTIONS 10 - LIMITED TO DA		†6-P	LECTRONIC E PASSENGER OTHER DISTRA	Y.	1	1 - NON 2 - BLO	1E	
- EMS - POLICE		11	- PASSENGER IN	4 - NO	TAPPLICA		-10	H - HAZMAT   M - MOTORCYCLE	Ε	ONLY		, n	NSIDE THE VE	HICLE		3 - URIN 4 - BREA	NE	
- OTHER / U	NKNOWN	ļ			T TRAPPED	D.		P - PASSENGER		12 - LIMITED - OTHE 13 - MECHANICAL D	R	`	OUTSIDE THE	VEHICLI	E ;	S - OTH		
SAFETY E	QUIPMENT	42	BUS, PICK-UP WITH CAP) - PASSENGER IN UNENCLOSED CARGO AREA	MEC	RICATED E			N - TANKER Q - MOTOR SCOO	OTER	(SPECIAL BRAKE CONTROLS, OR	S, HAND		CONDI	TIÓN	- I	1 - NON	NE	T TYPE
- NONE USED - SHOULDER S			- TRAILING UNIT - RIDING ON VEHICLE		N-MECHA!	ANICAL ME	EANS	R - THREE-WHEEL MOTORCYCLE		ADAPTIVE DEVI	LLES ONL'	Y 2-P	PPÄRENTLY I HYSICAL IMP	AIRMEN	NT	2 - BLOC 3 - URIN	NE	
USED - LAP BELT ON			EXTERIOR (NON-TRAILING UNIT)					S - SCHOOL BUS		15 - MOTOR VEHICE WITHOUT AIR 8 16 - OUTSIDE MIRRO	RAKES	! D	MOTIONAL (E EPRESSED, ANG ISTURBED)			4 - OTH		RESULT(S)
- SHOULDER 8 USED	& LAP BELT		- NON-MOTORIST - OTHER / UNKNOWN				Ŷ	T - DOUBLE & TRII		17 - PROSTHETIC AI		<sup>1</sup> 4 - 11	LLNESS ELL ASLEEP, F	AIRITER	. 1	1 - AMPI	HETAMINE	ES: ,
- CHILD RESTR - FORWARD	RAINT SYSTEM FACING	*					1	X - TANKER / HAZ	MAT	1		, F/	ATIGUED, ETC INDER THE IN			3 - BENZ	BITURATES ZODIAZEPII	NES
- REAR FACIN		1	1	į			ļ	GENDE	R	f		' М	IEDICATIONS LCOHOL		GS/ j	5 - COCA		
- BOOSTER SE - HELMET USE	ED	į	**					F - FEMALE M - MALE					THER / UNK	IOWN	);	7 - OTHE	ITES / OPIO Er Ative resu	
- PROTECTIVE (ELBOWS, KI	NEES, ETC)	•						U - OTHER / UNKN	10MN	i (		ļ			,,	> NEU#	THE KESU	iris.
0 - REFLECTIVE 1 - LIGHTING -	- PEDESTRIAN	1	**************************************							}		1						
BICYCLE O 9 - OTHER / UN		*		÷			*	i				1			1			

Ū		OCCUPANT / WITNESS ADDENDUM					LOCAL REPORT NUMBER 22MPD0382					
	UNIT #	NAME: LA	ST, FIRST, MIDDLE					DA	TE OF BIRTH		AGE	GENDER
CCUPAN	ADDRESS:	STREET, CIT	Y, STATE, ZIP	-				CONTACT PHON	E - INCLUDE ARE	A CODE		
	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	<u> </u>	INJURED TAKEN TO: MEDICAL FACILITY (NA	ME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED
,	# דואט	NAME: LA	ST, FIRST, MIDDLE				•	DA	ITE OF BIRTH		AGE	GENDER
OCCUPAN	ADDRESS:	STREET, CIT	Y, STATE, ZIP		· · · · · · · · · · · · · · · · · · ·			CONTACT PHON	E - INCLUDE ARE	A CODE		
	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NA	ME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	ELECTION	TRAPPED
	UNIT #	NAME: LA	ST, FIRST, MIDDLE	-		_		DA	TE OF BIRTH		AGE	GENDER
CCUPAN	ADDRESS:	STREET, CIT	Y, STATE, ZIP					CONTACT PHON	E - INCLUDE ARE	A CODE		
	INJURIES	INJURED TAKEN BY	KEN			DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED		
- 1	UNIT #	NAME: LA	ST, FIRST, MIDDLE				-	DA	TE OF BIRTH		AGE	GENDER
CCUPAN	ADDRESS:	STREET, CIT	Y, STATE, ZIP				-	CONTACT PHON	E - INCLUDE ARE	A CODE		
	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAI	ME CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED
		IN.	JURIES	SAFETY	EQUIPMENT USED	1	SEATING POS	ITION		AIR BAG I	ISAGE	_
	1 - FAT	AL		1 - NONE (	JSED -	1 - FRON	IT - LEFT SIDË		1 - NOT (	DEPLOYED.		
H	2 - SUS	PECTED S	ERÍOUS INJURY	VEHICLE	E OCCUPANT*		ORCYCLE DRIVE	R)	1	OYED FROM	IT .	
H.	3 - SUS	PECTED N	NINOR INJURY		DER BELT ONLY USED	78	IT - MIDDLE IT - RIGHT SIDE		1 -	OYED SIDE	1:	
ł		SIBLE INJ	· '		T ONLY USED	1	ND - LEFT SIDE		4 - DEPLO	OYED BOTH	l	
	5 - NO .	APPAREN	IT INJURY		DER & LAP BELT USED ESTRAINT SYSTEM®		ORCYCLE PASSE ND - MIDDLE	NGER)	FRON	T/SIDE		
		INJURE	TAKEN BY	and the second of the second	RD FACING	3.	ND - RIGHT SIDE	· `	¥. * * * * * * * * * * * * * * * * * * *	APPLICABLI		
	1 - NOT	T TRANSP	ORTED /	6 - CHILD R	ESTRAINT SYSTEM -	7 - THIRD	O - LEFT SIDE		9 - DEPLO	DYMENT U	NKNOW!	N
ı		ATED AT S		REAR FA			ORCYCLE SIDE C D - MIDDLE	AR)		EJECTI	ON	
	2 - EMS 3 - POL	1.2		7 BOOSTE		9 - THIRI	O - RIGHT SIDE	1 - NOT EJECTED			4 1	
		ier / UNK	KIOMAINI	8 - HELMET	TIVE PADS USED		PER SECTION O	ER ENCLOSED  RAILING UNIT. P WITH CAP)  NCLOSED  3 - TOTALLY EJECTED  4 - NOT APPLICABLE  TRAPPED				•
	5 0111				S, KNEES, ETC)		SENGER IN OTHI GO AREA (NON-TI					
		G	NDER		TIVE CLOTHING	SUC	H AS A BUS, PICK-UP					
	F - FEM	IALE	<u>.</u>		NG - PEDESTRIAN		GO AREA					
ı	M - MA	ALE .	-		LE ONLY / UNKNOWN	1	ILING UNIT.	· <del>-</del>	1 - NOT 1	CATED BY:		:
١,	U - OTH	HER / UNI	KNOWN	23 a O LINEW	) ONKNOWN	1	NG ON VEHICLE I-TRAILING UNIT)	EXTERIOR	E	ANICAL MI	ANS	
			· · · · · · · · · · · · · · · · · ·	-	i ving π <sub>0</sub>	15 - NOI	N-MOTORIST ER / UNKNOWN	1	3 - FREED NON-	BY MECHANIC	AL MEAI	NS
VESS	NAME: LAS	ST, FIRST, MI	DDLE				-	DA	TE OF BIRTH		AGE	GENDER
TIM	ADDRESS:	STREET, CIT	Y, STATE, ZIP					CONTACT PHON	- INCLUDE ARE	A CODE		
VESS	NAME: LAS	ST, FIRST, MI	DDLE					DA	TE OF BIRTH		AGE	GENDER
WIT	ADDRESS:	STREET, CIT	Y, STATE, ZIP					CONTACT PHONE	- INCLUDE ARE	A CODE		_
NESS	NAME: LAS	ST, FIRST, MI	DDLE					DA	TE OF BIRTH		AGE	GENDER
WIT	ADDRESS:	STREET, CIT	Y, STATE, ZIP		<del></del>			CONTACT PHONE	- INCLUDE ARE	A CODE		

_	uin	TRAFFIC	ACCIDENT.	OH2 NARRATIVE
Ю	MILL	TRAFFIC	ACCIDENT.	THE NARRATIVE

CAL REPORT NUMBER 22MPD0382	REPORTING AGENCY Millersburg	DATE OF CRASH 03/05/2022
COUNTY OF OIMES County	ACCIDENT LOCATION Monroe	
	Monroe	
he sign that was dama illage of Millersburg i	ged during this incident is owned by s 6 N Washington St, Millersburg, O	the Village Of Millersburg. The address for the H 44654. Phone number (330)- 674-5931

OFFICERS SIGNATURE	,	BADGE NO.
		110

OCAL LAMPIO382	REPORTING AGENCY	nersburg P	olice	Department	MO3 ID 05 IY22
N COUNTY OF Holmes	ACCIDENT LOCATION	5 Morror		without Losel	
					# 1095 R.11
					0-20
			- N-		
					1// 90.9
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			<u>-</u> -		
Washing		5	_Mo	Roe ST	777
3					
1				₩,+1→	105.9
			}		
RP=POIZ					
RP-519/1= 90	9-9-				
RP-A= 105.9					
RP-B=94,7					
			; <del>-</del>		
			OFFICER	S SIGNATURE	BADGE NO