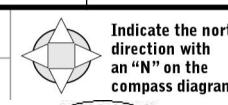


TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

<input checked="" type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> OH-2 <input checked="" type="checkbox"/> OH-3 <input type="checkbox"/> SECONDARY CRASH <input type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> PRIVATE PROPERTY				LOCAL INFORMATION SR 32 WB WEST OF GLENESTE WITHAMSVILLE REPORTING AGENCY NAME* Union Township Police Dept.				NCIC* 01316			LOCAL REPORT NUMBER* 122005345		
COUNTY* 13		LOCALITY* 1-CITY 2-VILLAGE 3-TOWNSHIP		LOCATION: CITY, VILLAGE, TOWNSHIP*				HIT/SKIP 1-SOLVED 2-UNSOLVED		NUMBER OF UNITS 02		UNIT IN ERROR 01 98-ANIMAL 01 99-UNKNOWN	
CRASH DATE / TIME* 05292022 1828		CRASH SEVERITY 3 1-FATAL 2-SERIOUS INJURY SUSPECTED 3-MINOR INJURY SUSPECTED 4-INJURY POSSIBLE 5-PROPERTY DAMAGE ONLY											
LOCATION ROUTE TYPE SR	ROUTE NUMBER 0032	PREFIX 4 1-NORTH 2-SOUTH 3-EAST 4-WEST	LOCATION ROAD NAME SR 32			ROAD TYPE HW	LATITUDE DECIMAL DEGREES 39.094773						
			REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) GLENESTE WITHAMSVILLE				LONGITUDE DECIMAL DEGREES 84.263039						
REFERENCE POINT 1-INTERSECTION 2-MILE POST 3-HOUSE #		DIRECTION FROM REFERENCE W 1-NORTH 2-SOUTH 3-EAST 4-WEST		ROUTE TYPE IR - INTERSTATE ROUTE(TP) US - FEDERAL US ROUTE SR - STATE ROUTE		ROAD TYPE AL - ALLEY AV - AVENUE BL - BOULEVARD CR - CIRCLE CT - COURT DR - DRIVE HE - HEIGHTS		INTERSECTION RELATED <input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input checked="" type="checkbox"/> WITHIN INTERCHANGE AREA					
DISTANCE FROM REFERENCE 600		DISTANCE UNIT OF MEASURE 2 1-MILES 2-FEET 3-YARDS		ROUTE TYPE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE		ROAD TYPE HW - HIGHWAY LA - LANE MP - MILEPOST OV - OVAL PK - PARKWAY PI - PIKE PL - PLACE		NUMBER OF APPROACHES 4 ROADWAY <input type="checkbox"/> ROADWAY DIVIDED					
LOCATION OF FIRST HARMFUL EVENT 01 1-ON ROADWAY 2-ON SHOULDER 3-IN MEDIAN 4-ON ROADSIDE 5-ON GORE 6-OUTSIDE TRAFFIC WAY 7-ON RAMP 8-OFF RAMP				MANNER OF CRASH COLLISION/IMPACT 7 1-NOT COLLISION 2-BETWEEN 3-TWO MOTOR VEHICLES IN TRANSPORT 4-REAR-END 5-BACKING 6-ANGLE 7-SIDESWIPE, SAME DIRECTION 8-SIDESWIPE, OPPOSITE DIRECTION 9-HEAD-ON 10-CROSSOVER 11-DRIVeway/ALLEY ACCESS 12-SHARED USE PATHS OR TRAILS 13-BIKE LANE 14-TOLL BOOTH 99-OTHER / UNKNOWN				DIRECTION OF TRAVEL 1-NORTH 2-SOUTH 3-EAST 4-WEST		MEDIAN TYPE 1-DIVIDED FLUSH MEDIAN (<4 FEET) 2-DIVIDED FLUSH MEDIAN (≥4 FEET) 3-DIVIDED, DEPRESSED MEDIAN 4-DIVIDED, RAISED MEDIAN (ANY TYPE) 9-OTHER/UNKNOWN			
<input type="checkbox"/> WORK ZONE RELATED <input type="checkbox"/> WORKERS PRESENT <input type="checkbox"/> LAW ENFORCEMENT PRESENT <input type="checkbox"/> ACTIVE SCHOOL ZONE		WORK ZONE TYPE 1-LANE CLOSURE 2-LANE SHIFT/CROSSOVER 3-WORK ON SHOULDER OR MEDIAN 4-INTERMITTENT OR MOVING WORK 5-OTHER		LOCATION OF CRASH IN WORK ZONE 1-BEFORE THE 1ST WORK ZONE WARNING SIGN 2-ADVANCE WARNING AREA 3-TRANSITION AREA 4-ACTIVITY AREA 5-TERMINATION AREA		CONTOUR 1 1-STRAIGHT LEVEL 2-STRAIGHT GRADE 3-CURVE LEVEL 4-CURVE GRADE 9-OTHER/UNKNOWN		CONDITIONS 1 1-DRY 2-WET 3-SNOW 4-ICE 5-SAND, MUD, DIRT, OIL, GRAVEL 6-WATER (STANDING, MOVING) 7-SLUSH 9-OTHER/UNKNOWN		SURFACE 2 1-CONCRETE 2-BLACKTOP, BITUMINOUS, ASPHALT 3-BRICK/BLOCK 4-SLAG, GRAVEL, STONE 5-DIRT 9-OTHER/UNKNOWN			
LIGHT CONDITION 1 1-DAYLIGHT 2-DAWN/DUSK 3-DARK - LIGHTED ROADWAY 4-DARK - ROADWAY NOT LIGHTED 5-DARK - UNKNOWN ROADWAY LIGHTING 9-OTHER / UNKNOWN				WEATHER 01 1-CLEAR 2-CLOUDY 3-FOG, SMOG, SMOKE 4-RAIN 5-SLEET, HAIL				6-SNOW 7-SEVERE CROSSWINDS 8-BLOWING SAND, SOIL, DIRT, SNOW 9-FREEZING RAIN OR FREEZING DRIZZLE 99-OTHER / UNKNOWN		Not To Scale  SR 32 W/B			
NARRATIVE <p>Unit #2 was stopped at the intersection W/B Sr 32 at Gleneste Withamsville Rd. There was a vehicle directly next to Unit #2. Unit #1 pulled his motorcycle over the center lane line in between both vehicles at the intersection. When the light turned green, Unit #1 and Unit #2 accelerated. Unit #1 got in front of the outside vehicle and continued W/B, approaching a vehicle in front. Unit #1 attempted to lane change to split the gap of Unit #2 and the other vehicle, Striking Unit #2 in the side.</p>													
CRASH REPORTED DATE / TIME 05292022 1828		DISPATCH DATE / TIME 05292022 1830		ARRIVAL DATE / TIME 05292022 1837		SCENE CLEARED DATE / TIME 05292022 1927		REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST					
TOTAL TIME ROADWAY CLOSED 0000		OTHER INVESTIGATION TIME		TOTAL MINUTES 0057		OFFICER'S NAME* TOROK, DYLAN		CHECKED BY OFFICER'S NAME* Wilson, Christopher D					
						OFFICER'S BADGE NUMBER* 1 2		CHECKED BY OFFICER'S BADGE NUMBER* 8 6					
<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODS)													

OWNER

VEHICLE

EVENT(s)

SEQUENCE OF EVENTS

1 20 1 - OVERTURN/ROLLOVER
2 - FIRE/EXPLOSION
3 - IMMERSION
4 - JACKKNIFE
5 - CARGO/EQUIPMENT LOSS OR SHIFT

3 1 - FIRST HARMFUL EVENT

4 25 - IMPACT ATTENUATOR / CRASH CUSHION
26 - BRIDGE OVERHEAD STRUCTURE
5 27 - BRIDGE PIER OR ABUTMENT
28 - BRIDGE PARAPET
6 29 - BRIDGE RAIL
30 - GUARDRAIL FACE

1 1 - MOST HARMFUL EVENT

UNIT # 01	OWNER NAME: LAST, FIRST, MIDDLE (<input checked="" type="checkbox"/> SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE (<input checked="" type="checkbox"/> SAME AS DRIVER)
OWNER ADDRESS: STREET, CITY, STATE, ZIP (<input checked="" type="checkbox"/> SAME AS DRIVER)		215 PARK MEADOW DR BATAVIA OHIO 45103
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

LP STATE OH	LICENSE PLATE # 9YA4	VEHICLE IDENTIFICATION # W B 1 0 1 5 1 5 A X X Z D 7 1 1 3 8		VEHICLE YEAR 1999	VEHICLE MAKE Harley Davidson
<input type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY		INSURANCE POLICY #	COLOR GRY	VEHICLE MODEL Other/Unknown
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME		
<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED <input type="checkbox"/> HIT/SKIP UNIT 01		VEHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD		

UNIT TYPE 07	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE 11 - ALL-TERRAIN VEHICLE (ATV/UTV)	12 - GOLF CART 13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT 17 - MOTORHOME	18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP
# OF TRAILING UNITS					

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION	9 - UNKNOWN
AUTONOMOUS MODE LEVEL			

SPECIAL FUNCTION 01	1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY 8 - BUS - SHUTTLE 9 - BUS - OTHER 10 - AMBULANCE	11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY	16 - FARM 17 - MOWING 18 - SNOW REMOVAL 19 - TOWING	21 - MAIL CARRIER 99 - OTHER / UNKNOWN
15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL					

CARGO BODY TYPE 01	1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING	5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	8 - POLE 9 - CARGO TANK 10 - FLAT BED 11 - DUMP	12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN
1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS					

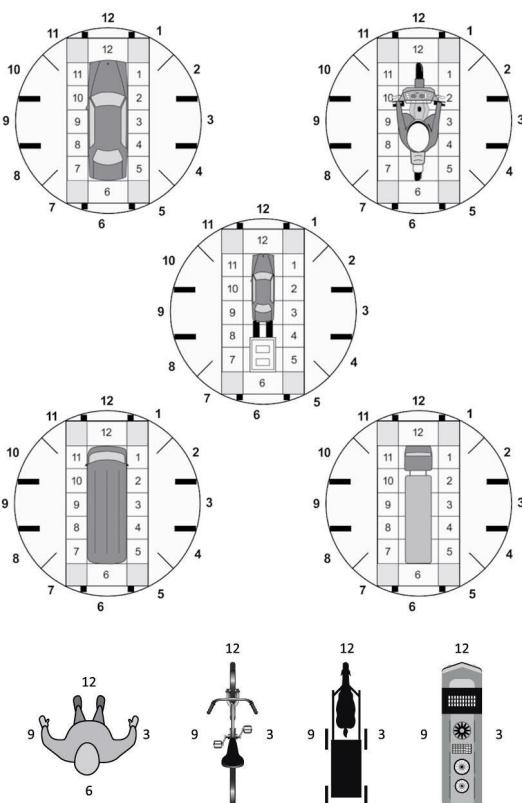
VEHICLE DEFECTS 00	4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT	7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE	9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT	99 - OTHER / UNKNOWN	
1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK					

NON-MOTORIST LOCATION AT IMPACT 00	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED 5 - MIDBLOCK - UNMARKED 6 - TRAVEL LANE - OTHER LOCATION	6 - BICYCLE LANE 7 - SHOULDER / ROADSIDE 8 - SIDEWALK	9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS	12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN	
1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 03 4 - STRUCK 5 - BOTH STRIKING & STRUCK 6 - OTHER / UNKNOWN					

ACTION 3	1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS	13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 22 - LYING IN ROADWAY 23 - NOT DISCERNIBLE 24 - OTHER IMPROPER ACTION	
1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN					

CONTRIBUTING CIRCUMSTANCES 99	7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / ACDA 9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING	13 - IMPROPER START FROM A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID 16 - WRONG WAY	17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/FALLING/SPILLING 20 - IMPROPER CROSSING	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION	
1 - SEPARATION OF UNITS 2 - RAN OFF ROAD RIGHT 3 - RAN OFF ROAD LEFT 4 - CROSS MEDIAN 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE					

EVENTS					
1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO/EQUIPMENT LOSS OR SHIFT	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE	16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE	22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVEABLE OBJECT		
25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 5 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 6 29 - BRIDGE RAIL 30 - GUARDRAIL FACE	31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT		
COLLISION WITH FIXED OBJECT - STRUCK					

DAMAGE		
DAMAGE SCALE		
4	1 - NONE 2 - MINOR DAMAGE 9 - UNKNOWN	3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE
DAMAGED AREA(S) INDICATE ALL THAT APPLY		
		
<input type="checkbox"/> - NO DAMAGE [0] <input type="checkbox"/> - UNDERCARRIAGE [14] <input type="checkbox"/> - TOP [13] <input type="checkbox"/> - ALL AREAS [15] <input type="checkbox"/> - UNIT NOT AT SCENE [16]		
INITIAL POINT OF CONTACT		
10	0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP	14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN
TRAFFIC		
1	1 - ONE-WAY 2 - TWO-WAY	TRAFFIC CONTROL 1 - ROUNDABOUT 2 - SIGNAL 3 - FLASHER 4 - STOP SIGN 5 - YIELD SIGN 6 - NO CONTROL
2	# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
UNIT / NON-MOTORIST DIRECTION		
FROM 3	TO 4	1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER / UNKNOWN
UNIT SPEED		DETECTED SPEED 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
POSTED SPEED		55

OWNER

UNIT # 02 OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER) OWNER PHONE: INCLUDE AREA CODE (SAME AS DRIVER)

OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)

4240 MALLARD DR BATAVIA OHIO 45103

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP

COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

LP STATE O H LICENSE PLATE # 9YA4 VEHICLE IDENTIFICATION # 3D17MIX48A98G137873 VEHICLE YEAR 2015 VEHICLE MAKE DODGE

INSURANCE COMPANY GEICO INSURANCE POLICY # 4344695889 COLOR WHI VEHICLE MODEL Ram

COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE

INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT #OCCUPANTS 01

US DOT # VEHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS.
2 - 10,001 - 26K LBS.
3 - >26K LBS. TOWED BY: COMPANY NAME

HAZARDOUS MATERIAL MATERIAL RELEASED PLACARD CLASS # PLACARD ID #

1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER
2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13 - SNOWMOBILE 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE)
3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST
4 - PICK UP 10 - MOPED OR MOTORIZED BICYCLE 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE
5 - CARGO VAN 11 - ALL TERRAIN VEHICLE (ATV/UTV) 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 27 - TRAIN
6 - VAN (9-15 SEATS) 17 - MOTORHOME 28 - OTHER VEHICLE 29 - UNKNOWN OR HIT/SKIP

OF TRAILING UNITS 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 0 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN
1 - YES 2 - NO 9 - OTHER / UNKNOWN 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION
2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION

1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE 16 - FARM 21 - MAIL CARRIER
2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99 - OTHER / UNKNOWN
3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL
4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY 19 - TOWING
5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL

1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 8 - POLE 12 - CONCRETE MIXER
/ NOT APPLICABLE MOTOR VEHICLE CHASSIS 9 - CARGO TANK 13 - AUTO TRANSPORTER
2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10 - FLAT BED 14 - GARBAGE/REFUSE
7 - GRAIN/CHIPS/GRAVEL 11 - DUMP 99 - OTHER / UNKNOWN

1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN
2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT 10 - DISABLED FROM PRIOR
3 - TAIL LAMPS 6 - TIRE BLOWOUT DEFECTIVE ACCIDENT

1 - INTERSECTION - MARKED 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12 - FIRST RESPONDER
CROSSWALK 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS AT INCIDENT SCENE
2 - INTERSECTION - UNMARKED 8 - SIDEWALK 11 - SHARED USE PATHS OR 99 - OTHER / UNKNOWN
CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION TRAILS

1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18 - APPROACHING
2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING 19 - STANDING
3 - STRIKING 01 3 - CHANGING LANES 9 - LEAVING TRAFFIC LANE SPECIFIED LOCATION 20 - OTHER NON-MOTORIST
4 - STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 10 - PARKED 15 - WALKING, RUNNING, 21 - STANDING OUTSIDE
5 - BOTH STRIKING & STRUCK ACTIONS 5 - MAKING RIGHT TURN 11 - SLOWING OR STOPPED IN TRAFFIC 22 - WORKING
6 - MAKING LEFT TURN 12 - DRIVERLESS 16 - WORKING DISABLED VEHICLE
9 - OTHER / UNKNOWN 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN

1 - NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM A 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY
2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA 14 - STOPPED OR PARKED 18 - OPERATING DEFECTIVE 22 - NOT DISCERNIBLE
3 - RAN RED LIGHT 9 - IMPROPER LANE CHANGE 15 - ILLEGALLY EQUIPMENT 23 - OPENING DOOR INTO
4 - RAN STOP SIGN 10 - IMPROPER PASSING 16 - SWERVING TO AVOID 19 - LOAD SHIFTING/FALLING/ 20 - ROADWAY
5 - UNSAFE SPEED 11 - DROVE OFF ROAD 12 - WRONG WAY SPILLING 21 - IMPROPER CROSSING
6 - IMPROPER TURN 12 - IMPROPER BACKING 17 - WORKING 99 - OTHER IMPROPER ACTION

SEQUENCE OF EVENTS

1 - 20 1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE - 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE
2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 12 - OPPOSITE DIRECTION OF 17 - ANIMAL - FARM EQUIPMENT
3 - IMMERSION 8 - RAN OFF ROAD RIGHT 13 - DOWNHILL RUNAWAY 18 - ANIMAL - DEER 23 - STRUCK BY FALLING,
4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 14 - OTHER NON-COLLISION 19 - ANIMAL - OTHER SHIFTING CARGO OR
5 - CARGO / EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 15 - PEDESTRIAN 20 - MOTOR VEHICLE IN ANYTHING SET IN MOTION
11 - 25 - IMPACT ATTENUATOR / CRASH CUSHION 31 - GUARDRAIL END 16 - UTILITY POLE 21 - PARKED MOTOR VEHICLE
12 - BRIDGE OVERHEAD STRUCTURE 32 - PORTABLE BARRIER 37 - TRAFFIC SIGN POST 43 - CURB 22 - OTHER MOVABLE OBJECT
13 - BRIDGE PIER OR ABUTMENT 33 - MEDIAN CABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH
14 - BRIDGE PARAPET 34 - MEDIAN GUARDRAIL 39 - LIGHT / LUMINARIES 45 - EMBANKMENT
15 - BRIDGE RAIL 35 - MEDIAN CONCRETE 40 - SUPPORT 46 - FENCE
16 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 41 - OTHER POST, POLE 47 - MAILBOX
17 - 42 - CULVERT 42 - SUPPORT 48 - TREE 50 - WORK ZONE MAINTENANCE
18 - 43 - FIRE HYDRANT 49 - OTHER / UNKNOWN EQUIPMENT

COLLISION WITH FIXED OBJECT - STRUCK

1 - 40 25 - IMPACT ATTENUATOR / CRASH CUSHION 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB 50 - WORK ZONE MAINTENANCE
1 - 41 - BRIDGE OVERHEAD STRUCTURE 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH EQUIPMENT
1 - 42 - BRIDGE PIER OR ABUTMENT 33 - MEDIAN CABLE BARRIER 39 - LIGHT / LUMINARIES 45 - EMBANKMENT
1 - 43 - BRIDGE PARAPET 34 - MEDIAN GUARDRAIL 40 - SUPPORT 46 - FENCE
1 - 44 - BRIDGE RAIL 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 47 - MAILBOX
1 - 45 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - SUPPORT 48 - TREE
1 - 46 - CULVERT 43 - FIRE HYDRANT 49 - OTHER / UNKNOWN 51 - WALL
1 - 47 - SUPPORT 44 - OTHER / UNKNOWN 52 - BUILDING
1 - 48 - SUPPORT 45 - OTHER / UNKNOWN 53 - TUNNEL
1 - 49 - SUPPORT 46 - OTHER / UNKNOWN 54 - OTHER FIXED OBJECT
1 - 50 - OTHER / UNKNOWN 47 - OTHER / UNKNOWN 55 - FIRE HYDRANT
1 - 51 - OTHER / UNKNOWN 48 - OTHER / UNKNOWN 56 - OTHER / UNKNOWN

EVENT(s)

1 - 20 1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE - 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE
2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 12 - OPPOSITE DIRECTION OF 17 - ANIMAL - FARM EQUIPMENT
3 - IMMERSION 8 - RAN OFF ROAD RIGHT 13 - DOWNHILL RUNAWAY 18 - ANIMAL - DEER 23 - STRUCK BY FALLING,
4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 14 - OTHER NON-COLLISION 19 - ANIMAL - OTHER SHIFTING CARGO OR
5 - CARGO / EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 15 - PEDESTRIAN 20 - MOTOR VEHICLE IN ANYTHING SET IN MOTION
11 - 25 - IMPACT ATTENUATOR / CRASH CUSHION 31 - GUARDRAIL END 16 - UTILITY POLE 21 - PARKED MOTOR VEHICLE
12 - BRIDGE OVERHEAD STRUCTURE 32 - PORTABLE BARRIER 37 - TRAFFIC SIGN POST 43 - CURB 22 - OTHER MOVABLE OBJECT
13 - BRIDGE PIER OR ABUTMENT 33 - MEDIAN CABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH
14 - BRIDGE PARAPET 34 - MEDIAN GUARDRAIL 39 - LIGHT / LUMINARIES 45 - EMBANKMENT
15 - BRIDGE RAIL 35 - MEDIAN CONCRETE 40 - SUPPORT 46 - FENCE
16 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 41 - OTHER POST, POLE 47 - MAILBOX
17 - 42 - CULVERT 42 - SUPPORT 48 - TREE 50 - WORK ZONE MAINTENANCE
18 - 43 - FIRE HYDRANT 43 - OTHER / UNKNOWN EQUIPMENT
19 - 44 - OTHER / UNKNOWN 44 - OTHER / UNKNOWN 51 - WALL
20 - 45 - OTHER / UNKNOWN 45 - OTHER / UNKNOWN 52 - BUILDING
21 - 46 - OTHER / UNKNOWN 46 - OTHER / UNKNOWN 53 - TUNNEL
22 - 47 - OTHER / UNKNOWN 47 - OTHER / UNKNOWN 54 - OTHER FIXED OBJECT
23 - 48 - OTHER / UNKNOWN 48 - OTHER / UNKNOWN 55 - FIRE HYDRANT
24 - 49 - OTHER / UNKNOWN 49 - OTHER / UNKNOWN 56 - OTHER / UNKNOWN

EVENTS

1 - 20 1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE - 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE
2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 12 - OPPOSITE DIRECTION OF 17 - ANIMAL - FARM EQUIPMENT
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MOTORIST / NON-MOTORIST	UNIT #	NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH	AGE	GENDER			
	01	JONES JOHN					04291951	071	M			
	ADDRESS: STREET,CITY,STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
	215 PARK MEADOW DR, BATAVIA, Ohio, 45103											
	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME,CITY)		SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET		SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
	3	2	UT EMS	University Hospital CINCINNATI		01			01	5	3	1
	OL STATE	OPERATOR LICENSE NUMBER		OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION		CITATION NUMBER			
	**			4511.39			Improper Turn/Fail To Signal Turn		0131612060120221926			
	OL CLASS	ENDORSEMENT SELECT UPTO 2	RESTRICTION SELECT UPTO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST	DRUG TEST(S)				
				1	<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	1	STATUS	TYPE	VALUE	STATUS	TYPE	RESULT SELECT UPTO 4
UNIT #	NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH	AGE	GENDER				
02	THORNBERRY GERALD P					08131966	055	M				
ADDRESS: STREET,CITY,STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE							
4240 MALLARD DR, BATAVIA, Ohio, 45103												
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INJURIES	SEATING POSITION		AIR BAG		OL CLASS	OL RESTRICTION(S)	DRIVER DISTRACTION			TEST STATUS		
1 - FATAL	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)		1 - NOT DEPLOYED		1 - CLASS A	1 - ALCOHOL INTERLOCK DEVICE	1 - NOT DISTRACTED			1 - NONE GIVEN		
2 - SUSPECTED SERIOUS INJURY	2 - FRONT - MIDDLE		2 - DEPLOYED FRONT		2 - CLASS B	2 - CDL INTRASTATE ONLY	2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)			2 - TEST REFUSED		
3 - SUSPECTED MINOR INJURY	3 - FRONT - RIGHT SIDE		3 - DEPLOYED SIDE		3 - CLASS C	3 - CORRECTIVE LENSES	3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE			3 - TEST GIVEN, RESULTS UNKNOWN		
4 - POSSIBLE INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)		4 - DEPLOYED BOTH FRONT / SIDE		4 - REGULAR CLASS (OHIO = D)	4 - FARM WAIVER	4 - TEST GIVEN, RESULTS UNKNOWN			4 - TEST GIVEN, RESULTS UNKNOWN		
5 - NO APPARENT INJURY	5 - SECOND - MIDDLE		5 - NOT APPLICABLE		5 - M/C MOPED ONLY	5 - EXCEPT CLASS A BUS	5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE			5 - OTHER		
INJURED TAKEN BY	6 - SECOND - RIGHT SIDE		6 - DEPLOYMENT UNKNOWN		6 - NO VALID OL	6 - EXCEPT CLASS A & CLASS B BUS	6 - PASSENGER			6 - BLOOD		
1 - NOT TRANSPORTED /TREATED AT SCENE	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)		7 - NOT EJECTED		H - HAZMAT	7 - EXCEPT TRACTOR-TRAILER	7 - OTHER DISTRACTION INSIDE THE VEHICLE			7 - URINE		
2 - EMS	8 - THIRD - MIDDLE		8 - PARTIALLY EJECTED		M - MOTORCYCLE	8 - INTERMEDIATE LICENSE RESTRICTIONS	8 - OTHER DISTRACTION OUTSIDE THE VEHICLE			8 - BREATH		
3 - POLICE	9 - THIRD - RIGHT SIDE		9 - TOTALLY EJECTED		P - PASSENGER	9 - LEARNER'S PERMIT RESTRICTIONS	9 - OTHER / UNKNOWN			9 - OTHER		
9 - OTHER / UNKNOWN	10 - SLEEPER SECTION OF TRUCK CAB		4 - NOT APPLICABLE		N - TANKER	10 - LIMITED TO DAYLIGHT ONLY						
SAFETY EQUIPMENT	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)		TRAPPED		Q - MOTOR SCOOTER	11 - LIMITED TO EMPLOYMENT						
1 - NONE USED	12 - PASSENGER IN UNENCLOSED CARGO AREA		1 - NOT TRAPPED		R - THREE-WHEEL MOTORCYCLE	12 - LIMITED - OTHER						
2 - SHOULDER BELT ONLY USED	13 - TRAILING UNIT		2 - EXTRICATED BY MECHANICAL MEANS		S - SCHOOL BUS	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)						
3 - LAP BELT ONLY USED	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		3 - FREED BY NON-MECHANICAL MEANS		T - DOUBLE & TRIPLE TRAILERS	14 - MILITARY VEHICLES ONLY						
4 - SHOULDER & LAP BELT USED	15 - NON-MOTORIST				X - TANKER / HAZMAT	15 - MOTOR VEHICLES WITHOUT AIR BRAKES						
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING	99 - OTHER / UNKNOWN				GENDER	16 - OUTSIDE MIRROR						
6 - CHILD RESTRAINT SYSTEM - REAR FACING					F - FEMALE	17 - PROSTHETIC AID						
7 - BOOSTER SEAT					M - MALE	18 - OTHER						
8 - HELMET USED					U - OTHER / UNKNOWN							
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)												
10 - REFLECTIVE CLOTHING												
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY												
99 - OTHER / UNKNOWN												

Union Township Police Dept.

OHIO TRAFFIC ACCIDENT - IMAGE CONTINUATION

122005345

Traffic Crash/Injury

6/02/2022 OH3



TRAFFIC CRASH WITNESS STATEMENT

OH-3

LOCAL REPORT NUMBER	REPORTING AGENCY	DATE OF CRASH
22-5345	UTPD	M 5 29 22

FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

Robin Souder
PRINTED

HEREBY MAKE THIS VOLUNTARY STATEMENT TO

PO Toron

OFFICER'S NAME

AT SR32 @ 6F

LOCATION

I was sitting at stop light right lane and in line. A truck 1st in line at stop light. Motorcycle came up in middle of 2 lanes stopped at stop light. The person in the truck turned his wheels and pulled up really close to motorcycle. Stop light still red the person in the truck was yelling at the motorcycle rider being aggressive to motorcycle rider. Light turned green. The truck accelerated and motorcycle took off also. The truck was pushing the motorcycle over into right lane trying to make motorcycle rider wreck. At that point diesel truck was giving off black smoke and then I seen the motorcycle rider flip flopping on the road. Got out to help motorcycle rider.

ADDRESS OF WITNESS

PHONE

SIGNATURE OF WITNESS

Robin Souder

OFFICER'S SIGNATURE

PO D. Toron #2

Union Township Police Dept.

OHIO TRAFFIC ACCIDENT - IMAGE CONTINUATION

122005345

Traffic Crash/Injury

6/02/2022 OH3

Form 6-01g (Revised 02/07)

Union Township Police Department

Statement Form

Patrol Division

Date: May 29-2022

Incident # 22-5345

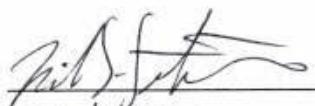
1. Mike Sebastian

HEREBY MAKE THIS VOLUNTARY STATEMENT

PRINT NAME

Motor bike came between cars at red light. Biker tried to get in front of truck on left and hit front fender.

Signature:



Witness:

POD. 70 on H2

Address: 1821 S woodland Dr

Phone: _____

DOB: 10-8-26

SSN: 

Union Township Police Dept.

OHIO TRAFFIC ACCIDENT - IMAGE CONTINUATION

122005345

Traffic Crash/Injury

6/02/2022 OH3

OHIO TRAFFIC CRASH WITNESS STATEMENT

OH-3 REV 1/82

LOCAL REPORT NUMBER	22-5345	REPORTING AGENCY	<u>Union Township Police Department</u>	DATE OF CRASH	5 29 22
IN COUNTY OF	Clermont	CRASH LOCATION	W/B SK32 @ Glen Este Williams Rd		

FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, Jerry Thorlby, hereby make this voluntary statement to PO TOROK At Accident Scene

- 1) What time did the accident happen? 06:30 + -
- 2) What road were you traveling on? SK 32
- 3) What direction were you traveling? W/E
- 4) Were you injured? YES or NO If yes, explain: _____
- 5) What was your speed before the crash? 350
- 6) What is the speed limit? 55
- 7) Is there anything you could have done to avoid the accident? No
- 8) Is the address on your license correct? YES or NO. If no, please list the correct address below.

9) Were you wearing your seat belt? YES NO. If you have passengers, were they wearing their seat belt? YES or NO

10) Vehicle Year / Make/ Model 2008 Body - Ram

11) List all the occupants below:

Name	Address (street, city, zip)	Seating Position
Jerry Thorlby	4350 Mallard Dr	Driver

12) Describe what happened?

I was stopped at the Red Light at the intersection in front of a motor star in the ~~left~~ left lane. a motor cycle pulled up Between me and the other car. It cracked my window and yelled out you fool do that he laughed when the light turned Green I moved forward he went into the ~~right~~ right lane. I was approaching another car in the Right lane the motor cycle sped up and tried to pass over into my lane, and ran into the rear side of my truck. I stayed in my lane.

Insurance Company Geico Policy# 4344-69-58-89

Signature X

Jerry Thorlby

OFFICER'S SIGNATURE	X <u>POD-Torok</u>	UNIT NO.	PAGE NO.
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Union Township Police Dept.

OHIO TRAFFIC ACCIDENT - IMAGE CONTINUATION

122005345

Traffic Crash/Injury

6/02/2022 OH3

Form 6-01g (Revised 02/07)

Union Township Police Department

Statement Form

Patrol Division

Date: May 29 2022

Incident # 22-9345

I, Jammie Sebastian

PRINT NAME

HEREBY MAKE THIS VOLUNTARY STATEMENT

Saw a motorcycle come between me and a white truck when as we were sitting at red light they were going back and forth before the light even turned green once it did they both took off neither one would back down The truck stayed in lane but motorcycle hit side

Q. At any point did the truck leave his marked lane?

A. No

Q. Who was the at fault driver from your perspective?

A. Motorcycle

Signature: Jammie Sebastian

Address: 1821 Woodland Dr S

Witness: P.O.D. 70004 #12

Phone: ██████████
DOB: 02-19-80 SSN: ██████████

Union Township Police Dept.

OHIO TRAFFIC ACCIDENT - IMAGE CONTINUATION

122005345

Traffic Crash/Injury

6/02/2022 OH3

OHIO TRAFFIC CRASH WITNESS STATEMENT

OH-3 REV 1/82

LOCAL REPORT NUMBER 22-5345	REPORTING AGENCY <u>Union Township Police Department</u>	DATE OF CRASH 5/29/22 M D Y
IN COUNTY OF Clermont	CRASH LOCATION <u>ON WEST BOUND 32 @ APPROX GLENESSE-WITHAMSVILLE</u>	

FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, John Tork Hereby make this voluntary statement to PO TOROK At Accident Scene

- 1) What time did the accident happen? APPROX 10:30
- 2) What road were you traveling on? 32
- 3) What direction were you traveling? WEST
- 4) Were you injured? YES or NO. If yes, explain: HEAD CONCUSSION & NUMEROUS ROAD RASH
- 5) What was your speed before the crash? 60
- 6) What is the speed limit? 55 MPH
- 7) Is there anything you could have done to avoid the accident? I DON'T KNOW
- 8) Is the address on your license correct? YES or NO. If no, please list the correct address below.

9) Were you wearing your seat belt? YES NO. If you have passengers, were they wearing their seat belt? YES or NO

10) Vehicle Year / Make/ Model 2015 HARLEY 48

11) List all the occupants below:

Name	Address (street, city, zip)	Seating Position

12) Describe what happened?

THE TRAFFIC LIGHT WAS RED EAST & WEST ON 32 AND I PULLED UP BETWEEN THE TRUCK THAT HIT ME AND THE CAR TO THE RIGHT OF ME. THE TRUCK PULLED OVER ON ME ALMOST HITTING ME BEFORE THE LIGHT CHANGED. THE DRIVER WAS YELLING @ ME AND HAVING OBSCENE HAND TESTERS AND CALLING ON HIS PHONE I PULLED AROUND HIM AND TOOK OFF AND THE NEXT THING I LAST THING I REMEMBER OF THE ACCIDENT I WAS HIT IN THE BACK AND IT PRODUCED MY CAR FORWARD AND I DON'T REMEMBER ANYTHING ELSE

Insurance Company _____ Policy# _____

Signature X

	OFFICER'S SIGNATURE <u>X POB. Tork</u>	UNIT NO. <u>12</u>	PAGE NO. <u></u>
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