



TRAFFIC CRASH REPORT

LOCAL REPORT NUMBER *	2014021983	CRASH SEVERITY	3	MIS/SKIP	2
		1 - FATAL		1 - SOLVED	
		2 - INJURY		2 - UNSOLVED	
		3 - PDO			

LOCAL INFORMATION		I-75 N AT E NATIONAL RD	
<input type="checkbox"/> PHOTOS TAKEN	<input type="checkbox"/> PDD UNDER STATE REPORTABLE DOLLAR AMOUNT	<input type="checkbox"/> PRIVATE PROPERTY	REPORTING AGENCY NCIC * 05713
<input type="checkbox"/> OH-2	<input type="checkbox"/> OH-1P	<input type="checkbox"/> OH-3	REPORTING AGENCY NAME * VANDALIA DIVISION OF POLICE
COUNTY *		CITY *	CITY, VILLAGE, TOWNSHIP *
[57]		[]	VANDALIA
CRASH DATE *		TIME OF CRASH	DAY OF WEEK
[05/23/2014]		[18:30]	[Fri]

DEGREES / MINUTES / SECONDS	LONGITUDE	DECIMAL DEGREES	LONGITUDE
LATITUDE		LATITUDE	
[039:53:31.36]	[084:11:20.46]	[39.892045]	[84.189017]

ROADWAY DIVISION	DIVIDED LANE DIRECTION OF TRAVEL	NUMBER OF THRU LANES	ROAD TYPES OR MILEPOST #
<input type="checkbox"/> DIVIDED	<input type="checkbox"/> N - NORTHBOUND E - EASTBOUND	[03]	AL - ALLEY CR - CIRCLE
<input checked="" type="checkbox"/> UNDIVIDED	<input type="checkbox"/> S - SOUTHBOUND W - WESTBOUND		AV - AVENUE CT - COURT
			BL - BOULEVARD DR - DRIVE
			HE - HEIGHTS MP - MILEPOST
			LA - LAKE PL - PLACE
			PK - PARKWAY RD - ROAD
			ST - STREET WA - WAY
			TE - TERRACE
			SQ - SQUARE TL - TRAIL

LOCATION ROUTE NUMBER	LOC PREFIX	LOCATION ROAD NAME	LOCATION ROAD TYPE #	ROUTE TYPES #
[]	[N]	I-75	[HW]	IP - INTERSTATE ROUTE (INC TURNPIKE)
				US - US ROUTE
				SR - STATE ROUTE
				CR - NUMBERED COUNTY ROUTE
				TR - NUMBERED TOWNSHIP ROUTE

DISTANCE FROM REFERENCE	DIR FROM REF	REFERENCE ROUTE NUMBER	REF PREFIX	REFERENCE NAME (ROAD, MILEPOST, HOUSE #)	REFERENCE ROAD TYPE #
[]	[]	[]	[E]	NATIONAL	[RD]

REFERENCE POINT USED	CRASH LOCATION	CRASH LOCATION	INTERSECTION RELATED	LOCATION OF FIRST HARMFUL EVENT
[1]	[08]	01 - NOT AN INTERSECTION	<input type="checkbox"/>	1 - ON ROADWAY
1 - INTERSECTION	02 - FOUR-WAY INTERSECTION	06 - FIVE-POINT, OR MORE		5 - ON GORE
2 - MILE POST	03 - T-INTERSECTION	07 - ON RAMP		6 - OUTSIDE TRAFFICWAY
3 - HOUSE NUMBER	04 - Y-INTERSECTION	08 - OFF RAMP		9 - UNKNOWN
	05 - TRAFFIC CIRCLE/ROUNDABOUT	09 - CROSSOVER		
		10 - DRIVEWAY/ALLEY ACCESS		

ROAD CONTOUR	ROAD CONDITIONS	ROAD CONDITIONS	ROAD CONDITIONS
[1]	[01]	01 - DRY	05 - SAND, MUD, DIRT, OIL, GRAVEL
1 - STRAIGHT LE-EL	02 - WET	02 - WET	06 - WATER (STANDING, MOVING)
2 - STRAIGHT GRADE	03 - SNOW	03 - SNOW	07 - SLUSH
3 - CURVE LEVEL	04 - ICE	04 - ICE	08 - DEBRIS*
			09 - RUT, HOLES, BUMPS, UNEVEN PAYEMENT*
			10 - OTHER
			99 - UNKNOWN

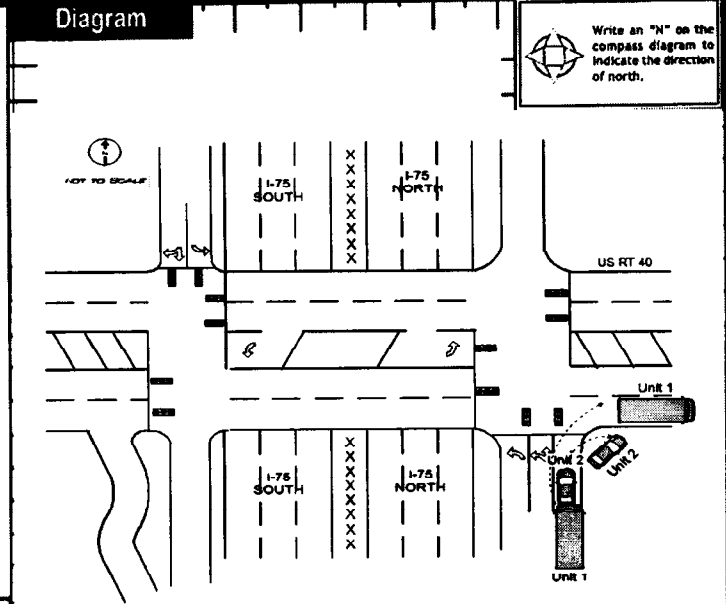
MANNER OF CRASH COLLISION/IMPACT	WEATHER
[2]	[1]
1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT	1 - CLEAR
2 - REAR-END	4 - RAIN
3 - HEAD-ON	5 - SLEET, HAIL
4 - REAR-TO-REAR	6 - SNOW
5 - BACKING	7 - SEVERE CROSSWINDS
6 - ANGLE	8 - BLOWING SAND, SOIL, DIRT, SNOW
7 - SIDESWIPE, SAME DIRECTION	9 - OTHER/UNKNOWN
8 - SIDESWIPE, OPPOSITE DIRECTION	
9 - UNKNOWN	

ROAD SURFACE	LIGHT CONDITIONS	SCHOOL BUS RELATED
[2]	[1]	<input type="checkbox"/>
1 - CONCRETE	1 - DAYLIGHT	<input type="checkbox"/> YES, SCHOOL BUS DIRECTLY INVOLVED
2 - BLACKTOP, BITUMINOUS, ASPHALT	2 - DAWN	<input type="checkbox"/> YES, SCHOOL BUS INDIRECTLY INVOLVED
3 - BRICK/BLOCK	3 - DUSK	
4 - SLAG, GRAVEL, STONE	4 - DARK - LIGHTED ROADWAY	
5 - DIRT	5 - DARK - ROADWAY NOT LIGHTED	
6 - OTHER	6 - DARK - UNKNOWN ROADWAY LIGHTING	
	7 - GLARE*	
	8 - OTHER	
	9 - UNKNOWN	

WORK ZONE RELATED	TYPE OF WORK ZONE	LOCATION OF CRASH IN WORK ZONE
<input type="checkbox"/>	[]	[]
<input type="checkbox"/> WORKERS PRESENT	1 - LANE CLOSURE	1 - BEFORE THE FIRST WORK ZONE WARNING SIGN
<input type="checkbox"/> LAW ENFORCEMENT PRESENT (OFFICER/VEHICLE)	2 - LANE SHIFT/CROSSOVER	2 - ADVANCE WARNING AREA
<input type="checkbox"/> LAW ENFORCEMENT PRESENT (VEHICLE ONLY)	3 - WORK ON SHOULDER OR MEDIAN	3 - TERMINATION AREA
	4 - INTERMITTENT OR MOVING WORK	4 - ACTIVITY AREA
	5 - OTHER	5 - TERMINATION AREA

NARRATIVE

Unit 2 was traveling northbound on Interstate 75 and exited on the exit ramp to E. National Rd. Unit 2 said she was stopped at the traffic light in the right lane to turn eastbound onto E. National Rd. when a FedEx delivery truck, Unit 1, rear ended her vehicle on the exit ramp. Unit 2 driver said she pulled to the side of the road and the FedEx truck continued past her eastbound on E. National Rd.



REPORT TAKEN BY	<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPSS)					
[] POLICE AGENCY	[] MOTORIST					
DATE CRASH REPORTED	TIME CRASH REPORTED	DISPATCH TIME	ARRIVAL TIME	TIME CLEARED	OTHER INVESTIGATION TIME	TOTAL MINUTES
[05/23/2014]	[19:33]	[19:33]	[19:33]	[0:00]	[]	[267]
OFFICER'S NAME *	OFFICER'S BADGE NUMBER	CHECKED BY	PAGE	OF		
Phillip Shafer	172	Benjamin Walker				



MOTORIST / Non-MOTORIST / OCCUPANT

LOCAL REPORT NUMBER

2014021983

UNIT NUMBER 01	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER <input checked="" type="checkbox"/> M - MALE <input type="checkbox"/> F - FEMALE
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Address, City, State, Zip _____ CONTACT PHONE - INCLUDE AREA CODE _____

INJURIES	INJURED TAKEN BY	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED 99	DOT COMPLIANT <input type="checkbox"/> MOTORCYCLE HELMET	SEATING POSITION 01	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1
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OL STATE	OPERATOR LICENSE NUMBER	OL CLASS	No <input type="checkbox"/> VALID OL	M/C END. <input type="checkbox"/>	CONDITION 1	ALCOHOL/DRUG SUSPECTED 1	ALCOHOL TEST STATUS 1	ALCOHOL TEST TYPE 1	ALCOHOL TEST VALUE	DRUG TEST STATUS 1	DRUG TEST TYPE 1
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OFFENSE CHARGED (<input type="checkbox"/> LOCAL CODE)	OFFENSE DESCRIPTION	CITATION NUMBER	HANDS-FREE <input type="checkbox"/> DEVICE USED	DRIVER DISTRACTED BY 1
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UNIT NUMBER 02	NAME: LAST, FIRST, MIDDLE PATTON, ELISABETH C	DATE OF BIRTH 04/08/1983	AGE 31	GENDER <input type="checkbox"/> M - MALE <input checked="" type="checkbox"/> F - FEMALE
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Address, City, State, Zip **9240 MANN RD TIPP CITY, OH 45371** CONTACT PHONE - INCLUDE AREA CODE **(937) 684-6227**

INJURIES 1	INJURED TAKEN BY	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED 04	DOT COMPLIANT <input type="checkbox"/> MOTORCYCLE HELMET	SEATING POSITION 01	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1
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OL STATE OH	OPERATOR LICENSE NUMBER SH741966	OL CLASS 4	No <input type="checkbox"/> VALID OL	M/C END. <input type="checkbox"/>	CONDITION 1	ALCOHOL/DRUG SUSPECTED 1	ALCOHOL TEST STATUS 1	ALCOHOL TEST TYPE 1	ALCOHOL TEST VALUE	DRUG TEST STATUS 1	DRUG TEST TYPE 1
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OFFENSE CHARGED (<input type="checkbox"/> LOCAL CODE)	OFFENSE DESCRIPTION	CITATION NUMBER	HANDS-FREE <input type="checkbox"/> DEVICE USED	DRIVER DISTRACTED BY 1
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INJURIES 1 - NO INJURY / NONE REPORTED 2 - POSSIBLE 3 - NON-INCARCERATING 4 - INCARCERATING 5 - FATAL	INJURED TAKEN BY 1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 4 - OTHER 9 - UNKNOWN	SAFETY EQUIPMENT USED MOTORIST 01 - NONE USED - VEHICLE OCCUPANT 02 - SHOULDER BELT ONLY USED 03 - LAP BELT ONLY USED 04 - SHOULDER AND LAP BELT USED NON-MOTORIST 05 - CHILD RESTRAINT SYSTEM-FORWARD FACING 06 - CHILD RESTRAINT SYSTEM- REAR FACING 07 - BOOSTER SEAT 08 - HELMET USED 09 - NONE USED 10 - HELMET USED 11 - PROTECTIVE PADS USED (ELBOW, KNEE, ETC)	12 - REFLECTIVE CLOTHING 13 - LIGHTING 14 - OTHER
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SEATING POSITION 01 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) 02 - FRONT - MIDDLE 03 - FRONT - RIGHT SIDE 04 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 05 - SECOND - MIDDLE 06 - SECOND - RIGHT SIDE 07 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 08 - THIRD - MIDDLE 09 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF CAB (TRUCK) 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT SUCH AS A BOX, PERCH OR WIRE CUP) 12 - PASSENGER IN UNENCLOSED CARGO AREA 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST 16 - OTHER 99 - UNKNOWN	AIR BAG USAGE 1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN
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EJECTION 1 - NOT EJECTED 2 - TOTALLY EJECTED 3 - PARTIALLY EJECTED 4 - NOT APPLICABLE	TRAPPED 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - EXTRICATED BY NON-MECHANICAL MEANS	OPERATOR LICENSE CLASS 1 - CLASS A 2 - CLASS B 3 - CLASS C 4 - REGULAR CLASS (OHIO LICENSE) 5 - MC/MOPED ONLY	CONDITION 1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (DEPRESSED, ANGRY, DISTURBED) 4 - ILLNESS 5 - FELL ASLEEP, FAINTED, FATIGUED 6 - UNDER THE INFLUENCE OF MEDICATIONS, DRUGS, ALCOHOL 7 - OTHER	ALCOHOL/DRUG SUSPECTED 1 - NONE 2 - YES - ALCOHOL SUSPECTED 3 - YES - HBD NOT IMPAIRED 4 - YES - DRUGS SUSPECTED 5 - YES - ALCOHOL AND DRUGS SUSPECTED
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ALCOHOL TEST STATUS 1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN	ALCOHOL TEST TYPE 1 - NAME 2 - BLOOD 3 - URINE 4 - BREATH 5 - OTHER	DRUG TEST STATUS 1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN	DRUG TEST TYPE 1 - NONE 2 - BLOOD 3 - URINE 4 - OTHER	DRIVER DISTRACTED BY 1 - NO DISTRACTION REPORTED 2 - PHONE 3 - TEXTING/E-MAILING 4 - ELECTRONIC COMMUNICATION DEVICE 5 - OTHER ELECTRONIC DEVICE (NAVIGATION DEVICE, RADAR, DVD) 6 - OTHER INSIDE THE VEHICLE 7 - EXTERNAL DISTRACTION
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UNIT NUMBER	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER <input type="checkbox"/> M - MALE <input type="checkbox"/> F - FEMALE
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Address, City, State, Zip _____ CONTACT PHONE - INCLUDE AREA CODE _____

INJURIES	INJURED TAKEN BY	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED	DOT COMPLIANT <input type="checkbox"/> MOTORCYCLE HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
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UNIT NUMBER	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER <input type="checkbox"/> M - MALE <input type="checkbox"/> F - FEMALE
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Address, City, State, Zip _____ CONTACT PHONE - INCLUDE AREA CODE _____

INJURIES	INJURED TAKEN BY	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED	DOT COMPLIANT <input type="checkbox"/> MOTORCYCLE HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
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Page _____ of _____



UNIT

LOCAL REPORT NUMBER

2014021983

UNIT NUMBER 01	OWNER NAME: LAST, FIRST, MIDDLE (<input type="checkbox"/> SAME AS DRIVER) UNKNOWN	OWNER PHONE NUMBER - INC. AREA CODE (<input type="checkbox"/> SAME AS DRIVER)	DAMAGE SCALE 2	DAMAGED AREA FRONT REAR
OWNER ADDRESS: CITY, STATE, ZIP (<input type="checkbox"/> SAME AS DRIVER)			1 - NONE	09
LP STATE	LICENSE PLATE NUMBER	VEHICLE IDENTIFICATION NUMBER	2 - MINOR	08
VEHICLE YEAR	VEHICLE MAKE	VEHICLE MODEL	3 - FUNCTIONAL	10
		VEHICLE COLOR WHITE	4 - DISABLING	07
<input type="checkbox"/> PROOF OF INSURANCE SHOWN	INSURANCE COMPANY	POLICY NUMBER	9 - UNKNOWN	06
		TOWED BY		05

CARRIER NAME, ADDRESS, CITY, STATE, ZIP FEDEX, , UNKNOWN, OH	CARRIER PHONE - INCLUDE AREA CODE (999) 999-9999
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US DOT UNKNOWN	VEHICLE WEIGHT GVWR/GCWR 2 1 - LESS THAN OR EQUAL TO 10K LBS. 2 - 10,001 TO 26,000 LBS. 3 - MORE THAN 26,000 LBS.	CARGO BODY TYPE 07 01 - NO CARGO BODY TYPE/NOT APPLICABLE 02 - BUS/VAN (9-15 SEATS, INC DRIVER) 03 - BUS (16+ SEATS, INC DRIVER) 04 - VEHICLE TOWING ANOTHER VEHICLE 05 - LOGGING 06 - INTERMODAL CONTAINER CHASSIS 07 - CARGO VAN/ENCLOSED BOX 08 - GRAIN, CHIPS, GRAVEL 09 - POLE 10 - CARGO TANK 11 - FLAT BED 12 - DUMP 13 - CONCRETE MIXER 14 - AUTO TRANSPORTER 15 - GARBAGE/REFUSE 99 - OTHER/UNKNOWN	TRAFFICWAY DESCRIPTION 5 1 - TWO-WAY, NOT DIVIDED 2 - TWO-WAY, NOT DIVIDED, CONTINUOUS LEFT TURN LANE 3 - T-WAY, DIVIDED, UNPROTECTED (PAINTED OR GRASS - 4 FT) MEDIUM 4 - TWO-WAY, DIVIDED, POSITIVE MEDIUM BARRIER 5 - ONE-WAY TRAFFICWAY
HM PLACARD ID No	<input type="checkbox"/> HAZARDOUS MATERIAL RELEASED		<input type="checkbox"/> HIT / SKIP UNIT

NON-MOTORIST LOCATION PRIOR TO IMPACT 01 01 - INTERSECTION - MARKED CROSSWALK 02 - INTERSECTION - NO CROSSWALK 03 - INTERSECTION - OTHER 04 - MIDBLOCK - MARKED CROSSWALK 05 - TRAVEL LANE - OTHER LOCATION 06 - BICYCLE LANE 07 - SHOULDER/ROADSIDE 08 - SIDEWALK 09 - MEDIUM/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED-USE PATH OR TRAIL 12 - NON-TRAFFICWAY AREA 99 - OTHER/UNKNOWN	TYPE OF USE 2 1 - PERSONAL 2 - COMMERCIAL 3 - GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE	UNIT TYPE 99 99 - UNKNOWN OR HIT / SKIP	PASSENGER VEHICLES (LESS THAN 9 PASSENGERS) 01 - SUB-COMPACT 02 - COMPACT 03 - MID SIZE 04 - FULL SIZE 05 - MINIVAN 06 - SPORT UTILITY VEHICLE 07 - PICKUP 08 - VAN 09 - MOTORCYCLE 10 - MOTORIZED BICYCLE 11 - SNOWMOBILE/ATV 12 - OTHER PASSENGER VEHICLE	MED/HEAVY TRUCKS OR COMBO UNITS > 10K LBS 13 - SINGLE UNIT TRUCK OR VAN 2AXLE, 6 TIRES 14 - SINGLE UNIT TRUCK; 3+ AXLES 15 - SINGLE UNIT TRUCK / TRAILER 16 - TRUCK/TRACTOR (BOBTAIL) 17 - TRACTOR/SEMI-TRAILER 18 - TRACTOR/DOUBLE 19 - TRACTOR/TRIPLES 20 - OTHER MED/HEAVY VEHICLE	BUS/VAN/LIMO (9 OR MORE INCLUDING DRIVER) 21 - BUS/VAN (9-15 SEAT, INC DRIVER) 22 - BUS (16+ SEAT, INC DRIVER) NON-MOTORIST 23 - ANIMAL WITH RIDER 24 - ANIMAL WITH BUGGY, WAGON, SURREY 25 - BICYCLE/PEDALCYCLIST 26 - PEDESTRIAN/SKATER 27 - OTHER NON-MOTORIST
			<input type="checkbox"/> HAS HM PLACARD		

SPECIAL FUNCTION 01 01 - NONE 02 - TAXI 03 - RENTAL TRUCK (OVER 10K LB) 04 - BUS - SCHOOL (PUBLIC OR PRIVATE) 05 - BUS - TRANSIT 06 - BUS - CHARTER 07 - BUS - SHUTTLE 08 - BUS - OTHER	09 - AMBULANCE 10 - FIRE 11 - HIGHWAY/MAINTENANCE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - OTHER GOVERNMENT 16 - CONSTRUCTION EQUIP.	17 - FARM VEHICLE 18 - FARM EQUIPMENT 19 - MOTORHOME 20 - GOLF CART 21 - TRAIN 22 - OTHER (EXPLAIN IN NARRATIVE)	MOST DAMAGED AREA 99 01 - NONE 02 - CENTER FRONT 03 - RIGHT FRONT 04 - RIGHT SIDE 05 - RIGHT REAR 06 - REAR CENTER 07 - LEFT REAR	08 - LEFT SIDE 09 - LEFT FRONT 10 - TOP AND WINDOWS 11 - UNDERCARRIAGE 12 - LOAD/TRAILER 13 - TOTAL(ALL AREAS) 14 - OTHER	ACTION 3 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - STRIKING/STRUCK 9 - UNKNOWN
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PRE-CRASH ACTIONS 11 01 - STRAIGHT AHEAD 02 - BACKING 03 - CHANGING LANES 04 - OVERTAKING/PASSING 05 - MAKING RIGHT TURN 06 - MAKING LEFT TURN 99 - UNKNOWN	07 - MAKING U-TURN 08 - ENTERING TRAFFIC LANE 09 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS	13 - NEGOTIATING A CURVE 14 - OTHER MOTORIST ACTION	NON-MOTORIST 15 - ENTERING OR CROSSING SPECIFIED LOCATION 16 - WALKING, RUNNING, JOGGING, PLAYING, CYCLING 17 - WORKING 18 - PUSHING VEHICLE 19 - APPROACHING OR LEAVING VEHICLE 20 - STANDING	21 - OTHER NON-MOTORIST ACTION
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CONTRIBUTING CIRCUMSTANCES PRIMARY 99 01 - NONE 02 - FAILURE TO YIELD 03 - RAN RED LIGHT 04 - RAN STOP SIGN 05 - EXCEEDED SPEED LIMIT 06 - UNSAFE SPEED 07 - IMPROPER TURN 08 - LEFT OF CENTER 09 - FOLLOWED TOO CLOSELY/ACDA 10 - IMPROPER LANE CHANGE /PASSING/DRY ROAD	MOTORIST 01 - NONE 02 - FAILURE TO YIELD 03 - RAN RED LIGHT 04 - RAN STOP SIGN 05 - EXCEEDED SPEED LIMIT 06 - UNSAFE SPEED 07 - IMPROPER TURN 08 - LEFT OF CENTER 09 - FOLLOWED TOO CLOSELY/ACDA 10 - IMPROPER LANE CHANGE /PASSING/DRY ROAD	11 - IMPROPER BACKING 12 - IMPROPER START FROM PARKED POSITION 13 - STOPPED OR PARKED ILLEGALLY 14 - OPERATING VEHICLE IN NEGLIGENCE MANNER 15 - SWEERVING TO AVOID (DUE TO EXTERNAL CONDITIONS) 16 - WRONG SIDE/WRONG WAY 17 - FAILURE TO CONTROL 18 - VISION OBSTRUCTION 19 - OPERATING DEFECTIVE EQUIPMENT 20 - LOAD SHIFTING/FALLING/SPILLING 21 - OTHER IMPROPER ACTION	NON-MOTORIST 22 - NONE 23 - IMPROPER CROSSING 24 - DARTING 25 - LYING AND/OR ILLEGALLY IN ROADWAY 26 - FAILURE TO YIELD RIGHT OF WAY 27 - NOT VISIBLE (DARK CLOTHING) 28 - INATTENTIVE 29 - FAILURE TO OBEY TRAFFIC SIGNALS /SIGNALS/OFFICER 30 - WRONG SIDE OF THE ROAD 31 - OTHER NON-MOTORIST ACTION	VEHICLE DEFECTS 01 01 - TURN SIGNALS 02 - HEAD LAMPS 03 - TAIL LAMPS 04 - BRAKES 05 - STEERING 06 - TIRE BLOWOUT 07 - WORN OR SLICK TIRES 08 - TRAILER EQUIPMENT DEFECTIVE 09 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT 11 - OTHER DEFECTS
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SEQUENCE OF EVENTS 1 20 2 3 4 5 6 FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT 1 99 - UNKNOWN	NON-COLLISION EVENTS 01 - OVERTURN/ROLLOVER 02 - FIRE/EXPLOSION 03 - IMMERSION 04 - JACKKNIFE 05 - CARGO/EQUIPMENT LOSS OR SHIFT 06 - EQUIPMENT FAILURE (BLOWN TIRE, BRAKE FAILURE, ETC) 07 - SEPARATION OF UNITS 08 - RAN OFF ROAD RIGHT 09 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN 11 - OPPOSITE CENTER LINE 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION	COLLISION WITH FIXED OBJECT 25 - IMPACT ATTENUATION/CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE 31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 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 50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL, BUILDING, TUNNEL 52 - OTHER FIXED OBJECT
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UNIT SPEED 005 <input type="checkbox"/> STATED <input checked="" type="checkbox"/> ESTIMATED	POSTED SPEED 35	TRAFFIC CONTROL 04 01 - NO CONTROLS 02 - STOP SIGN 03 - YIELD SIGN 04 - TRAFFIC SIGNAL 05 - TRAFFIC FLASHERS 06 - SCHOOL ZONE 07 - RAILROAD CROSSBUCKS 08 - RAILROAD FLASHERS 09 - RAILROAD GATES 10 - CONSTRUCTION BARRICADE 11 - PERSON (FLAGGER, OFFICER) 12 - PAVEMENT MARKINGS 13 - CROSSWALK LINES 14 - WALK/DON'T WALK 15 - OTHER 16 - NOT REPORTED	UNIT DIRECTION FROM 2 TO 3 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - UNKNOWN
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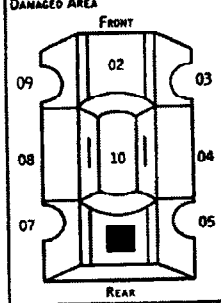
UNIT

LOCAL REPORT NUMBER

2014021983

 UNIT NUMBER **02** OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER) **PATTON, ELISABETH C**

 OWNER PHONE NUMBER - INC. AREA CODE (SAME AS DRIVER) **(937) 684-6227**

 DAMAGE SCALE **2**

 OWNER ADDRESS: CITY, STATE, ZIP (SAME AS DRIVER) **9240 MANN RD TIPP CITY, OH 45371**

 LP STATE **OH** LICENSE PLATE NUMBER **DOY1831**

 VEHICLE IDENTIFICATION NUMBER **3G2JB12F15S153321** # OCCUPANTS **01**

 VEHICLE YEAR **2005** VEHICLE MAKE **PONT**

 VEHICLE MODEL **Sunfire** VEHICLE COLOR **BLUE**

 PROOF OF INSURANCE SHOWN STATE COMPANY **STATE FARM**

 POLICY NUMBER **0900 0142-F01-35E** TOWED BY

CARRIER PHONE - INCLUDE AREA CODE

CARRIER NAME, ADDRESS, CITY, STATE, ZIP

 US DOT **01** HAZARDOUS MATERIAL RELEASED

 VEHICLE WEIGHT GVWR/GCWR **01**

- 1 - LESS THAN OR EQUAL TO 10K LBS.
- 2 - 10,001 TO 26,000 LBS.
- 3 - MORE THAN 26,000 LBS.

 CARGO BODY TYPE **01**

- 01 - NO CARGO BODY TYPE/NOT APPLICABLE
- 02 - BUS/VAN (9-15 SEATS, INC DRIVER)
- 03 - BUS (16+ SEATS, INC DRIVER)
- 04 - VEHICLE TOWING ANOTHER VEHICLE
- 05 - LOGGING
- 06 - INTERMODAL CONTAINER CHASSIS
- 07 - CARGO VAN/ENCLOSED BOX
- 08 - GRAIN, CHIPS, GRAVEL
- 09 - POLE
- 10 - CARGO TANK
- 11 - FLAT BED
- 12 - DUMP
- 13 - CONCRETE MIXER
- 14 - AUTO TRANSPORTER
- 15 - GARBAGE/REFUSE
- 99 - OTHER/UNKNOWN

 TRAFFICWAY DESCRIPTION **5**

- 1 - TWO-WAY, NOT DIVIDED
- 2 - TWO-WAY, NOT DIVIDED, CONTINUOUS LEFT TURN LANE
- 3 - TWO-WAY, DIVIDED, UNPROTECTED (PAINTED OR GRASS 4 FT.) MEDIAN
- 4 - TWO-WAY, DIVIDED, POSITIVE MEDIAN BARRIER
- 5 - ONE-WAY TRAFFICWAY

 HIT / SHIP UNIT

 NON-MOTORIST LOCATION PRIOR TO IMPACT **01**

- 01 - INTERSECTION - MARKED CROSSWALK
- 02 - INTERSECTION - NO CROSSWALK
- 03 - INTERSECTION - OTHER
- 04 - MIDBLOCK - MARKED CROSSWALK
- 05 - TRAVEL LANE - OTHER LOCATION
- 06 - BICYCLE LANE
- 07 - SHOULDER/ROADSIDE
- 08 - SIDEWALK
- 09 - MEDIAN/CROSSING ISLAND
- 10 - DRIVEWAY ACCESS
- 11 - SHOULDERS/USE PATH OR TRAIL
- 12 - NON-TRAFFICWAY AREA
- 99 - OTHER/UNKNOWN

 TYPE OF USE **1**

- 1 - PERSONAL
- 2 - COMMERCIAL
- 3 - GOVERNMENT

 IN EMERGENCY RESPONSE

 UNIT TYPE **02**

- 99 - UNKNOWN OR HIT / SKIP
- 01 - SUB-COMPACT
- 02 - COMPACT
- 03 - MID SIZE
- 04 - FULL SIZE
- 05 - MINIVAN
- 06 - SPORT UTILITY VEHICLE
- 07 - PICKUP
- 08 - VAN
- 09 - MOTORCYCLE
- 10 - MOTORIZED BICYCLE
- 11 - SNOWMOBILE/ATV
- 12 - OTHER PASSENGER VEHICLE

 MED/HEAVY TRUCKS OR COMBD UNITS > 10K LBS

- 13 - SINGLE UNIT TRUCK OR VAN 2AXLE, 6 TIRES
- 14 - SINGLE UNIT TRUCK; 3+ AXLES
- 15 - SINGLE UNIT TRUCK / TRAILER
- 16 - TRUCK/TRACTOR (BOBTAIL)
- 17 - TRACTOR/SEMI-TRAILER
- 18 - TRACTOR/DOUBLE
- 19 - TRACTOR/TRIPLES
- 20 - OTHER MED/HEAVY VEHICLE

 HAS HM PLACARD

 BUS/VAN/LIMB (9 OR MORE INCLUDING DRIVER)

- 21 - BUS/VAN (9-15 SEATS, INC DRIVER)
- 22 - BUS (16+ SEATS, INC DRIVER)

 NON-MOTORIST

- 23 - ANIMAL WITH RIDER
- 24 - ANIMAL WITH BUGGY, WAGON, SURREY
- 25 - BICYCLE/PEDALCYCLIST
- 26 - PEDESTRIAN/SKATER
- 27 - OTHER NON-MOTORIST

 SPECIAL FUNCTION **01**

- 01 - NONE
- 02 - TAXI
- 03 - RENTAL TRUCK (OVER 10K LBS)
- 04 - BUS - SCHOOL (PUBLIC OR PRIVATE)
- 05 - BUS - TRANSIT
- 06 - BUS - CHARTER
- 07 - BUS - SHUTTLE
- 08 - BUS - OTHER
- 09 - AMBULANCE
- 10 - FIRE
- 11 - HIGHWAY/MAINTENANCE
- 12 - MILITARY
- 13 - POLICE
- 14 - PUBLIC UTILITY
- 15 - OTHER GOVERNMENT
- 16 - CONSTRUCTION EQUIP.
- 17 - FARM VEHICLE
- 18 - FARM EQUIPMENT
- 19 - MOTORHOME
- 20 - GOLF CART
- 21 - TRAIN
- 22 - OTHER (EXPLAIN IN NARRATIVE)

 MOST DAMAGED AREA **06**

- 01 - NONE
- 02 - CENTER FRONT
- 03 - RIGHT FRONT
- 04 - RIGHT SIDE
- 05 - RIGHT REAR
- 06 - REAR CENTER
- 07 - LEFT REAR
- 08 - LEFT SIDE
- 09 - LEFT FRONT
- 10 - TOP AND WINDOWS
- 11 - UNDERCARRIAGE
- 12 - LOAD/TRAILER
- 13 - TOTAL(ALL AREAS)
- 14 - OTHER
- 99 - UNKNOWN

 ACTION **4**

- 1 - NON-CONTACT
- 2 - NON-COLLISION
- 3 - STRIKING
- 4 - STRUCK
- 5 - STRIKING/STRUCK
- 9 - UNKNOWN

 PRE-CRASH ACTIONS **11**

- 01 - STRAIGHT AHEAD
- 02 - BACKING
- 03 - CHANGING LANES
- 04 - OVERTAKING/PASSING
- 05 - MAKING RIGHT TURN
- 06 - MAKING LEFT TURN
- 07 - MAKING U-TURN
- 08 - ENTERING TRAFFIC LANE
- 09 - LEAVING TRAFFIC LANE
- 10 - PARKED
- 11 - SLOWING OR STOPPED IN TRAFFIC
- 12 - DRIVERLESS
- 13 - NEGOTIATING A CURVE
- 14 - OTHER MOTORIST ACTION

 NON-MOTORIST

- 15 - ENTERING OR CROSSING SPECIFIED LOCATION
- 16 - WALKING, RUNNING, JOGGING, PLAYING, CYCLING
- 17 - WORKING
- 18 - PUSHING VEHICLE
- 19 - APPROACHING OR LEAVING VEHICLE
- 20 - STANDING
- 21 - OTHER NON-MOTORIST ACTION

 CONTRIBUTING CIRCUMSTANCES
 PRIMARY **01**

- 01 - NONE
- 02 - FAILURE TO YIELD
- 03 - RAN RED LIGHT
- 04 - RAN STOP SIGN
- 05 - EXCEEDED SPEED LIMIT
- 06 - UNSAFE SPEED
- 07 - IMPROPER TURN
- 08 - LEFT OF CENTER
- 09 - FOLLOWED TOO CLOSELY/ACDA
- 10 - IMPROPER LANE CHANGE /PASSING/DRY ROAD

 SECONDARY

- 11 - IMPROPER BACKING
- 12 - IMPROPER START FROM PARKED POSITION
- 13 - STOPPED OR PARKED ILLEGALLY
- 14 - OPERATING VEHICLE IN NEGLIGENT MANNER
- 15 - SWERVING TO AVOID (DUE TO EXTERNAL CONDITIONS)
- 16 - WRONG SIDE/WRONG WAY
- 17 - FAILURE TO CONTROL
- 18 - VISION OBSTRUCTION
- 19 - OPERATING DEFECTIVE EQUIPMENT
- 20 - LOAD SHIFTING/FALLING/SPILLING
- 21 - OTHER IMPROPER ACTION

 NON-MOTORIST

- 22 - NONE
- 23 - IMPROPER CROSSING
- 24 - DARTING
- 25 - LYING AND/OR ILLEGALLY IN ROADWAY
- 26 - FAILURE TO YIELD RIGHT OF WAY
- 27 - NOT VISIBLE (DARK CLOTHING)
- 28 - INATTENTIVE
- 29 - FAILURE TO OBEY TRAFFIC SIGNS /SIGNALS/OFFICER
- 30 - WRONG SIDE OF THE ROAD
- 31 - OTHER NON-MOTORIST ACTION

 VEHICLE DEFECTS

- 01 - TURN SIGNALS
- 02 - HEAD LAMPS
- 03 - TAIL LAMPS
- 04 - BRAKES
- 05 - STEERING
- 06 - TIRE BLOWOUT
- 07 - WORN OR SLICK TIRES
- 08 - TRAILER EQUIPMENT DEFECTIVE
- 09 - MOTOR TROUBLE
- 10 - DISABLED FROM PRIOR ACCIDENT
- 11 - OTHER DEFECTS

 SEQUENCE OF EVENTS
 1 **20** 2 3 4 5 6
 FIRST HARMFUL EVENT **1** MOST HARMFUL EVENT **1**
 COLLISION WITH PERSON, VEHICLE OR OBJECT NOT FIXED

- 14 - PEDESTRIAN
- 15 - PEDALCYCLE
- 16 - RAILWAY VEHICLE (TRAIN, ENGINE)
- 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 MOVABLE OBJECT

 NON-COLLISION EVENTS

- 01 - OVERTURN/ROLLOVER
- 02 - FIRE/EXPLOSION
- 03 - IMMERSION
- 04 - JACKKNIFE
- 05 - CARGO/EQUIPMENT LOSS OR SHIFT
- 06 - EQUIPMENT FAILURE (BLOWN TIRE, BRAKE FAILURE, ETC)
- 07 - SEPARATION OF UNITS
- 08 - RAN OFF ROAD RIGHT
- 09 - RAN OFF ROAD LEFT
- 10 - CROSS MEDIAN
- 11 - CROSS CENTER LINE
- 12 - DOWNHILL RUNAWAY
- 13 - OTHER NON-COLLISION

 COLLISION WITH FIXED OBJECT

- 25 - IMPACT ATTENUATOR/CRASH CUSHION
- 26 - BRIDGE OVERHEAD STRUCTURE
- 27 - BRIDGE PIER OR ABUTMENT
- 28 - BRIDGE PARAPET
- 29 - BRIDGE RAIL
- 30 - GUARDRAIL FACE
- 31 - GUARDRAIL END
- 32 - PORTABLE BARRIER
- 33 - MEDIAN CABLE BARRIER
- 34 - MEDIAN GUARDRAIL BARRIER
- 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
- 50 - WORK ZONE MAINTENANCE EQUIPMENT
- 51 - WALL, BUILDING, TUNNEL
- 52 - OTHER FIXED OBJECT

 UNIT SPEED **000** POSTED SPEED **35**
 STATED ESTIMATED

 TRAFFIC CONTROL **04**

- 01 - NO CONTROLS
- 02 - STOP SIGN
- 03 - YIELD SIGN
- 04 - TRAFFIC SIGNAL
- 05 - TRAFFIC FLASHERS
- 06 - SCHOOL ZONE
- 07 - RAILROAD CROSSINGS
- 08 - RAILROAD FLASHERS
- 09 - RAILROAD GATES
- 10 - CONSTRUCTION BARRICADE
- 11 - PERSON (FLAGGER, OFFICER)
- 12 - PAVEMENT MARKINGS
- 13 - CROSSWALK LINES
- 14 - WALK/DON'T WALK
- 15 - OTHER
- 16 - NOT REPORTED

 UNIT DIRECTION FROM **2** TO **3**

- 1 - NORTH
- 2 - SOUTH
- 3 - EAST
- 4 - WEST
- 5 - NORTHEAST
- 6 - NORTHWEST
- 7 - SOUTHWEST
- 8 - SOUTHWEST
- 9 - UNKNOWN

 PAGE OF

LOCAL REPORT NUMBER 2014021983	REPORTING AGENCY VANDALIA DIVISION OF POLICE	DATE OF CRASH M 5 D 23 Y 2014
IN COUNTY OF MONTGOMERY	CRASH LOCATION I-75	

Unit 2 was traveling northbound on Interstate 75 and exited on the exit ramp to E. National Rd. Unit 2 said she was stopped at the traffic light in the right lane to turn eastbound onto E. National Rd. when a FedEx delivery truck, Unit 1, rear ended her vehicle on the exit ramp. Unit 2 driver said she pulled to the side of the road and the FedEx truck continued past her eastbound on E. National Rd.

The damage I observed on the blue Pontiac Sunfire was black scuff and scratch marks on the center area of the rear bumper. It appeared as if some of the rubber from a black rubber bumper transferred onto her vehicle during contact. The driver of Unit 2, Ms. Patton, described the FedEx truck as a large white FedEx delivery truck with the sliding side doors. Ms Patton said the passenger side door was open when she saw the FedEx truck leave the area after the accident. Ms Patton could not be sure if the truck was from FedEx Express (purple and orange lettering on the truck) or FedEx Ground (purple and green lettering on the truck).

I called both FedEx Express (3605 Concord Dr. Vandalia, OH 45377) and FedEx Ground (795 Deer Run Rd. Vandalia, OH 45377) to speak with the night managers. Terry Mauer, of FedEx Express, said he has not had any reports of an accident but will check with his drivers and look at his trucks. Chris Gleason, of FedEx Ground, also said he has not received any reports and will check his trucks and drivers. I gave both managers my contact information and asked them to contact me if they have any information regarding this accident.

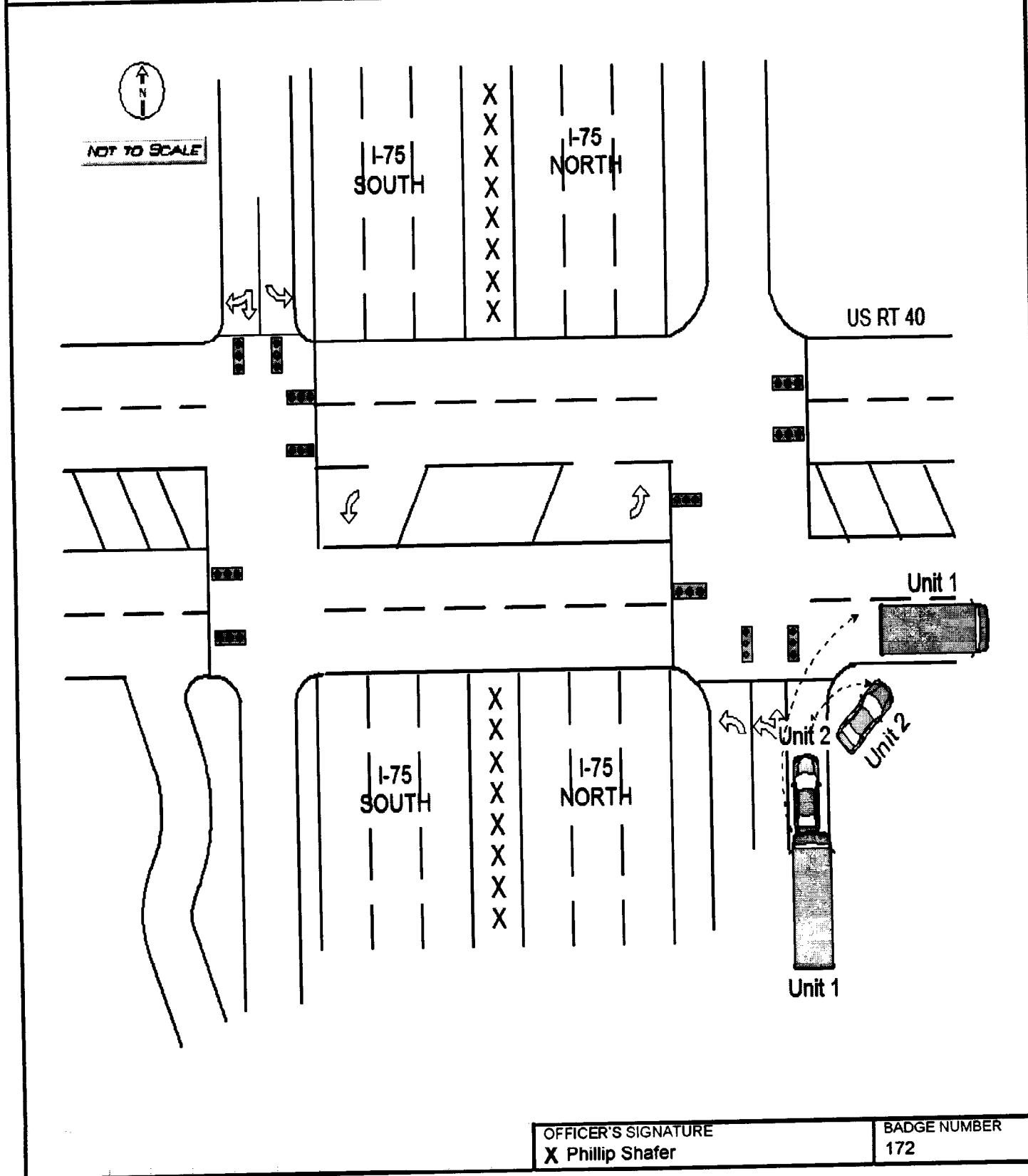
OFFICER'S SIGNATURE

X Phillip Shafer

BADGE NUMBER

172

LOCAL REPORT NUMBER 2014021983	REPORTING AGENCY VANDALIA DIVISION OF POLICE	DATE OF CRASH M 5 D 23 Y 2014
IN COUNTY OF MONTGOMERY	CRASH LOCATION N I-75 HW/E NATIONAL RD	



OFFICER'S SIGNATURE X Phillip Shafer	BADGE NUMBER 172
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