



TRAFFIC CRASH REPORT

LOCAL REPORT NUMBER * 1111201121-121413418 CRASH SEVERITY 3 HIT/SKIP 1
 1 - FATAL 2 - INJURY 3 - PDO 1 - SOLVED 2 - UNSOLVED

PHOTOS TAKEN OH-2 OH-1P OH-3 OTHER PDD UNDER STATE REPORTABLE DOLLAR AMOUNT PRIVATE PROPERTY REPORTING AGENCY NCIC * 08304 REPORTING AGENCY NAME * MASON POLICE NUMBER OF UNITS 02 UNIT IN ERROR 01
 98 - ANIMAL 99 - UNKNOWN

COUNTY * 83 CITY * CITY OF MASON CITY, VILLAGE, TOWNSHIP * CITY OF MASON CRASH DATE * 110132012 TIME OF CRASH 1412 DAY OF WEEK SAIT

DEGREES / MINUTES / SECONDS LATITUDE 39° 20' 13.111" LONGITUDE 78° 42' 37.000" DECIMAL DEGREES LATITUDE 39.336949 LONGITUDE 78.4343650

ROADWAY DIVISION DIVIDED UNDIVIDED DIVIDED LANE DIRECTION OF TRAVEL N - NORTHBOUND E - EASTBOUND S - SOUTHBOUND W - WESTBOUND NUMBER OF TRAFFIC LANES 02 ROAD TYPES OR MILEPOST ² AL - ALLEY CR - CIRCLE HE - HEIGHTS MP - MILEPOST PL - PLACE ST - STREET WA - WAY AV - AVENUE CT - COURT HW - HIGHWAY PK - PARKWAY RD - ROAD TE - TERRACE BL - BOULEVARD DR - DRIVE LA - LANE PI - PIKE SQ - SQUARE TL - TRAIL

LOCATION ROUTE NUMBER RD LOCATION ROUTE TYPE 1 LOCATION ROAD NAME READING ROAD LOCATION ROAD TYPE 2 ROUTE TYPES ¹ IR - INTERSTATE ROUTE (INC. TURNPIKES) CR - NUMBERED COUNTY ROUTE US - US ROUTE TR - NUMBERED TOWNSHIP ROUTE SR - STATE ROUTE

DISTANCE FROM REFERENCE 15 DIR FROM REF N, S, E, W REFERENCE ROUTE NUMBER RD REFERENCE NAME (ROAD, MILEPOST, HOUSE #) WESTERN ROW ROAD REFERENCE ROAD TYPE 2

REFERENCE POINT USED 1 - INTERSECTION 2 - MILE POST 3 - HOUSE NUMBER CRASH LOCATION 02 - FOUR-WAY INTERSECTION 01 - NOT AN INTERSECTION 03 - T-INTERSECTION 04 - Y-INTERSECTION 05 - TRAFFIC CIRCLE/ROUNDBOUNT 06 - FIVE-POINT, OR MORE 07 - ON RAMP 08 - OFF RAMP 09 - CROSSOVER 10 - DRIVEWAY/ALLEY ACCESS 11 - RAILWAY GRADE CROSSING 12 - SHARED-USE PATHS OR TRAILS 99 - UNKNOWN INTERSECTION RELATED LOCATION OF FIRST HARMFUL EVENT 1 - ON ROADWAY 2 - ON SHOULDER 3 - IN MEDIAN 4 - ON ROADSIDE 5 - ON GORE 6 - OUTSIDE TRAFFICWAY 9 - UNKNOWN

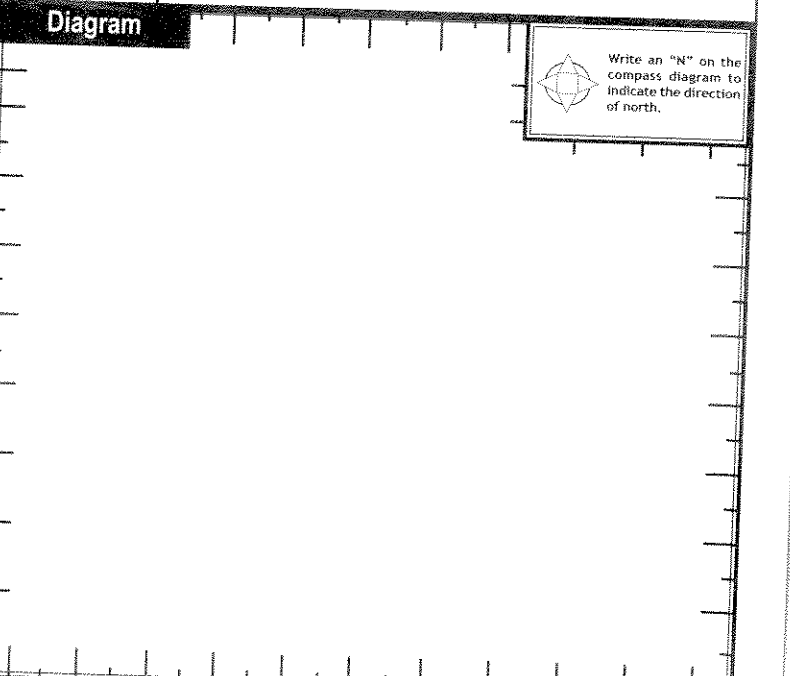
ROAD CONTOUR 1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - UNKNOWN ROAD CONDITIONS PRIMARY 01 02 03 04 SECONDARY 05 06 07 08 09 10 WEATHER 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

MANNER OF CRASH COLLISION/IMPACT 2 - TWO MOTOR VEHICLES IN TRANSPORT 1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES 3 - HEAD-ON 4 - REAR-TO-REAR 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - UNKNOWN WEATHER 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 - OTHER/UNKNOWN

ROAD SURFACE 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 6 - OTHER LIGHT CONDITIONS PRIMARY 01 02 03 04 SECONDARY 05 06 07 08 09 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

WORK ZONE RELATED WORKERS PRESENT LAW ENFORCEMENT PRESENT (OFFICER/VEHICLE) SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO DOPS) TYPE OF WORK ZONE 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 FIRST WORK ZONE WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA

NARRATIVE
 UNIT 1 AND UNIT 2 WERE TRAVELING NORTHBOUND ON READING ROAD AT WESTERN ROW ROAD. UNIT 2 STOPPED AT THE RED LIGHT, UNIT 1 WAS UNABLE TO STOP AND STRUCK THE REAR OF UNIT 2, CAUSING MINIMAL TO NO DAMAGE ON UNIT 2.



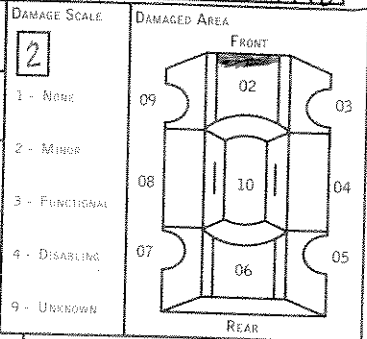
REPORT TAKEN BY POLICE AGENCY MOTORIST SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO DOPS) DATE CRASH REPORTED 110132012 TIME CRASH REPORTED 1412 DISPATCH TIME 1414 ARRIVAL TIME 1427 TIME CLEARANCE 1445 OTHER INVESTIGATION TIME 10 TOTAL MINUTES 43 OFFICER'S NAME PO BRIAN LAHMAN OFFICER'S BADGE NUMBER 1052 CHECKED BY SS PAGE 1 OF 4



UNIT

LOCAL REPORT NUMBER
 1111261121-12431481

UNIT NUMBER: 011
 OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER): WELLS, HERSCHEL E
 OWNER PHONE NUMBER - INC. AREA CODE (SAME AS DRIVER): 513-793-5935
 OWNER ADDRESS: CITY, STATE, ZIP (SAME AS DRIVER): 7905 PLAINFIELD RD CINCINNATI, OH 45236
 LP STATE: OH LICENSE PLATE NUMBER: CEE 7500
 VEHICLE IDENTIFICATION NUMBER: 1G61Z1T57N117F31159119
 # OCCUPANTS: 02
 VEHICLE YEAR: 2007 VEHICLE MAKE: CHEVROLET
 VEHICLE MODEL: IMPRA VEHICLE COLOR: BRONZE
 PROOF OF INSURANCE SHOWN: STATE FARM POLICY NUMBER: 386-9753-B14-3514
 TOWED BY: NONE



CARRIER NAME, ADDRESS, CITY, STATE, ZIP: _____
 CARRIER PHONE - INCLUDE AREA CODE: _____
 US DOT: _____
 HM PLACARD ID No.: _____
 HM CLASS NUMBER: _____
 VEHICLE WEIGHT GVWR/GCWR: 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 - 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: 1 - TWO-WAY, NOT DIVIDED, 2 - TWO-WAY, NOT DIVIDED, CONTINUOUS LEFT TURN LANE, 3 - TWO-WAY, DIVIDED, UNPROTECTED (PAVED OR GRASS > 4 FT.) MEDIAN, 4 - TWO-WAY, DIVIDED, POSITIVE MEDIAN BARRIER, 5 - ONE-WAY TRAFFICWAY
 HIT / SKIP UNIT

NON-MOTORIST LOCATION PRIOR TO IMPACT: 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 ADDRESS, 11 - SHARED-USE PATH OR TRAIL, 12 - NON-TRAFFICWAY AREA, 99 - OTHER/UNKNOWN
 TYPE OF USE: 1 - PERSONAL, 2 - COMMERCIAL, 3 - GOVERNMENT
 IN EMERGENCY RESPONSE
 UNIT TYPE: 03
 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 - TRACTOR/TRAILER (BDBTARL), 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 SEATS, INC DRIVER), 22 - BUS (16+ SEATS, INC DRIVER)
 NON-MOTORIST: 23 - ANIMAL WITH RIDER, 24 - ANIMAL WITH BUGGY, WAGON, SURREY, 25 - BICYCLE/PEDESTALIST, 26 - PEDESTRIAN/SKATER, 27 - OTHER NON-MOTORIST
 HAS HM PLACARD

SPECIAL FUNCTION: 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: 02
 IMPACT AREA: 02
 ACTION: 3
 1 - NON-CONTACT, 2 - NON-COLLISION, 3 - STRIKING, 4 - STRUCK, 5 - STRIKING/STRUCK, 9 - UNKNOWN

PRE-CRASH ACTIONS: 01
 MOTORIST: 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

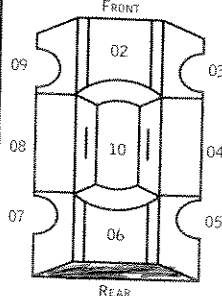
CONTRIBUTING CIRCUMSTANCES: 09
 PRIMARY: 01 - NONE, 02 - FAILURE TO YIELD, 03 - RAN RED LIGHT, 04 - RAN STOP SIGN, 05 - EXCEEDED SPEED LIMIT, 06 - UNSAFE SPEED, 07 - IMPROPER TURN, 08 - LEFT OF CENTER, 09 - FOLLOWED TOO CLOSELY/ACDA, 10 - IMPROPER LANE CHANGE /PASSING/OFF ROAD, 11 - IMPROPER BACKING, 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: 20
 MOST HARMFUL EVENT: 20
 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 OR SUPPORT, 11 - CROSS CENTER LINE OPPOSITE DIRECTION OF TRAVEL, 12 - DOWNHILL RUNAWAY, 13 - OTHER NON-COLLISION
 COLLISION WITH PERSON, VEHICLE OR OBJECT NOT FIXED: 14 - PEDESTRIAN, 15 - BICYCLE, 16 - RAILWAY VEHICLE (TRAIN, ENGINE), 17 - ANIMAL - FARM, 18 - ANIMAL - DEEP, 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
 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/LUMINAIRE/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: 5
 POSTED SPEED: 35
 TRAFFIC CONTROL: 04
 01 - NO CONTROL, 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 1
 1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST, 5 - NORTHEAST, 6 - NORTHWEST, 7 - SOUTHEAST, 8 - SOUTHWEST, 9 - UNKNOWN

1111201121-1241314181

UNIT NUMBER 012, OWNER NAME: HAZEN, SHERRY J W, OWNER PHONE NUMBER: 513-295-9919, DAMAGE SCALE 2, DAMAGED AREA FRONT, OWNER ADDRESS: 5407 WANDERING WAY, MASON, OH 45040, LP STATE OH, LICENSE PLATE NUMBER Ejq6836, VEHICLE IDENTIFICATION NUMBER 5TBJN32111Y5081833, # OCCUPANTS 01, VEHICLE YEAR 2010, VEHICLE MAKE TOYOTA, VEHICLE MODEL TACOMA, VEHICLE COLOR GREEN, INSURANCE COMPANY STATE FARM, POLICY NUMBER 295-99A-A23-350, TOWED BY NONE



US DOT, HM PLACARD ID No., HM CLASS Number, VEHICLE WEIGHT GVWR/GWR, CARGO BODY TYPE, TRAFFICWAY DESCRIPTION, HAZARDOUS MATERIAL RELEASED, NON-MOTORIST LOCATION PRIOR TO IMPACT, TYPE OF USE, UNIT TYPE, PASSENGER VEHICLES, MED/HEAVY TRUCKS OR COMBO UNITS, BUS/VAN/LIMO

SPECIAL FUNCTION, MOST DAMAGED AREA, IMPACT AREA, ACTION, PRE-CRASH ACTIONS, CONTRIBUTING CIRCUMSTANCES, VEHICLE DEFECTS

SEQUENCE OF EVENTS, COLLISION WITH PERSON, VEHICLE OR OBJECT NOT FIXED, COLLISION WITH FIXED OBJECT, UNIT SPEED, POSTED SPEED, TRAFFIC CONTROL, UNIT DIRECTION

UNIT SPEED 10, POSTED SPEED 35, TRAFFIC CONTROL 04, UNIT DIRECTION FROM 2 TO 1

UNIT SPEED 10, POSTED SPEED 35, TRAFFIC CONTROL 04, UNIT DIRECTION FROM 2 TO 1

UNIT SPEED 10, POSTED SPEED 35, TRAFFIC CONTROL 04, UNIT DIRECTION FROM 2 TO 1

UNIT SPEED 10, POSTED SPEED 35, TRAFFIC CONTROL 04, UNIT DIRECTION FROM 2 TO 1

UNIT SPEED 10, POSTED SPEED 35, TRAFFIC CONTROL 04, UNIT DIRECTION FROM 2 TO 1



MOTORIST / NON-MOTORIST / OCCUPANT

LOCAL REPORT NUMBER
 111120121-124318

DATE OF BIRTH: 06051924 AGE: 86 GENDER: M (F - FEMALE, M - MALE)

UNIT NUMBER: 01 NAME: LAST, FIRST, MIDDLE: WELLS, HERSCHEL E

ADDRESS, CITY, STATE, ZIP: 7905 PLAINFIELD RD CINCINNATI, OH 45236

CONTACT PHONE - INCLUDE AREA CODE: 513-388-2935

INJURIES: 1 INJURED TAKEN BY: EMS AGENCY

SAFETY EQUIPMENT USED: 04

DOT COMPLIANT: MOTORCYCLE HELMET

SEATING POSITION: 01 AIR BAG USAGE: 1 EJECTION: 1 TRAPPED: 1

OL STATE: 04H OPERATOR LICENSE NUMBER: RM241249

OL CLASS: C No VALID OL: M/C END: 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

OFFENSE CHARGED: LOCAL CODE OFFENSE DESCRIPTION: CITATION NUMBER: HANDS-FREE DEVICE USED: DRIVER DISTRACTED BY:

UNIT NUMBER: 02 NAME: LAST, FIRST, MIDDLE: HAZEN, SHERRY JW

ADDRESS, CITY, STATE, ZIP: 5407 WANDERING WAY MASON, OH 45040

CONTACT PHONE - INCLUDE AREA CODE: 513-509-8530

INJURIES: 1 INJURED TAKEN BY: EMS AGENCY

SAFETY EQUIPMENT USED: 04

DOT COMPLIANT: MOTORCYCLE HELMET

SEATING POSITION: 01 AIR BAG USAGE: 1 EJECTION: 1 TRAPPED: 1

OL STATE: 04H OPERATOR LICENSE NUMBER: RG624425

OL CLASS: P No VALID OL: M/C END: 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

OFFENSE CHARGED: LOCAL CODE OFFENSE DESCRIPTION: CITATION NUMBER: HANDS-FREE DEVICE USED: DRIVER DISTRACTED BY:

INJURIES	INJURED TAKEN BY	SAFETY EQUIPMENT USED	NON-MOTORIST
1 - NO INJURY / NONE REPORTED 2 - POSSIBLE 3 - NON-INCAPACITATING 4 - INCAPACITATING 5 - FATAL	1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 4 - OTHER 9 - UNKNOWN	MOTORIST 01 - NONE USED - VEHICLE OCCUPANT 02 - SHOULDER BELT ONLY USED 03 - LAP BELT ONLY USED 04 - SHOULDER AND LAP BELT USED 99 - UNKNOWN SAFETY EQUIPMENT	NON-MOTORIST 09 - NONE USED 10 - HELMET USED 11 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC) 12 - REFLECTIVE CLOTHING 13 - LIGHTING 14 - OTHER

SEATING POSITION	AIR BAG USAGE
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 BUS, PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED CARGO AREA 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST 16 - OTHER 99 - UNKNOWN	1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN

EJECTION	TRAPPED	OPERATOR LICENSE CLASS	CONDITION	ALCOHOL/DRUG SUSPECTED
1 - NOT EJECTED 2 - TOTALLY EJECTED 3 - PARTIALLY EJECTED 4 - NOT APPLICABLE	1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - EXTRICATED BY NON-MECHANICAL MEANS	1 - CLASS A 2 - CLASS B 3 - CLASS C 4 - REGULAR CLASS (SEE "D") 5 - M/C/MOPED ONLY	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	1 - NONE 2 - YES - ALCOHOL SUSPECTED 3 - YES - HBD NOT IMPAIRED 4 - YES - DRUGS SUSPECTED 5 - YES - ALCOHOL AND DRUGS SUSPECTED

ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	DRUG TEST STATUS	DRUG TEST TYPE	DRIVER DISTRACTED BY
1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN	1 - NONE 2 - BLOOD 3 - URINE 4 - BREATH 5 - OTHER	1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN	1 - NONE 2 - BLOOD 3 - URINE 4 - OTHER	1 - NO DISTRACTION REPORTED 2 - PHONE 3 - TEXTING/E-MAILING 4 - ELECTRONIC COMMUNICATION DEVICE 5 - OTHER ELECTRONIC DEVICE (NAVIGATION DEVICE, RADIO, DVD) 6 - OTHER INSIDE THE VEHICLE 7 - EXTERNAL DISTRACTION

UNIT NUMBER: 01 NAME: LAST, FIRST, MIDDLE: WELLS, JEWELL

ADDRESS, CITY, STATE, ZIP: 7905 PLAINFIELD RD CINCINNATI, OH 45236

CONTACT PHONE - INCLUDE AREA CODE: 513-733-5935

INJURIES: 1 INJURED TAKEN BY: EMS AGENCY

SAFETY EQUIPMENT USED: 04

DOT COMPLIANT: MOTORCYCLE HELMET

SEATING POSITION: 03 AIR BAG USAGE: 1 EJECTION: 1 TRAPPED: 1

UNIT NUMBER: NAME: LAST, FIRST, MIDDLE: DATE OF BIRTH: AGE: GENDER: F (F - FEMALE, M - MALE)

ADDRESS, CITY, STATE, ZIP: CONTACT PHONE - INCLUDE AREA CODE:

INJURIES: INJURED TAKEN BY: EMS AGENCY

SAFETY EQUIPMENT USED: DOT COMPLIANT: MOTORCYCLE HELMET

SEATING POSITION: AIR BAG USAGE: EJECTION: TRAPPED:

LOCAL REPORT NUMBER

12-24348

REPORTING AGENCY

MASON POLICE

OH-2

DATE OF ACCIDENT

M 10 D 13 Y 12

IN COUNTY OF

WARREN

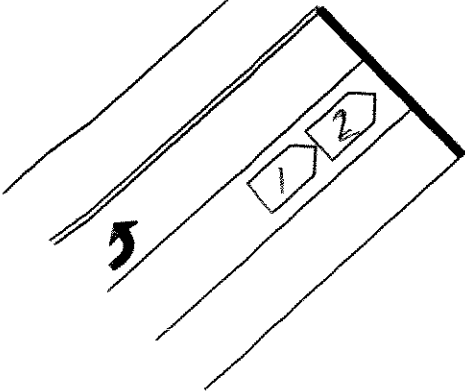
ACCIDENT LOCATION

READING RD/ WESTERN ROW RD



READING RD

WESTERN ROW RD



NOT TO SCALE

OFFICER'S SIGNATURE

PO [Signature]

BADGE NUMBER

1052