OHIO TRAFFIC CRASH REPORT — OH-1 (Rev. 1-82)

LOCAL REPORT NO. 13-8741 | OH-2 OH-3 | Lebanon Police | 0830300 | ODHS USE ONLY - DO NOT MARK ABOVE | LOCAL FILE NO

REPORT TAKEN: AT STATION / AT SCENE | NO OF VEH PEDESTRIANS INVOLVED: 2 | CRASH SEVERITY (CHECK MOST SEVERE): FATAL / INJURY / PROPERTY DAMAGE ONLY | COMBINED VEH/PROP LOSS: OVER $150 / UNDER $150 | HIT SKIP: SOLVED / UNSOLVED

IN COUNTY OF WARREN | IN CITY: LEBANON | DATE OF CRASH: 05/22/13 | DAY: WED | TIME: MILITARY 2248

CRASH OCCURRED ON: S-96 Columbus Ave | WITHIN THE INTERSECTION OF:

IF NOT IN INTERSECTION: ___ MILES 50 FEET N W E (S) OF (LIST NEAREST INTERSECTING STREET, MILEPOST, HOUSE NO.) Ridge Rd. | CITY CODE 8303

LOG | LOG | LOC | JUR | FH'9 | FILT

DRIVER-PEDESTRIAN-VEHICLE SECTION

A — UNIT NO. 1 | NO OF OCCUPANTS 1 | OPERATING ☒ | PARKED ☐ | DRIVERLESS ☐ | HIT & RUN NON CONTACT ☐ | INSURANCE CO OR AGENT: American Family

DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI): Lewis, Matt, S | ADDRESS (NO., STREET, CITY, STATE, ZIP CODE): 837 Branstrator Rd, Maynesville, OH

PHONE NO.: 937-944-3453 | BIRTH DATE: 03/04/1990 | AGE: 23 | SEX: M | SOCIAL SECURITY NO.: -5501 | STATE: OH | DRIVER'S LICENSE NO.: FC645790 | OCCUPATION:

OWNER (IF SAME AS DRIVER, WRITE SAME): Lewis, Cassandra | ADDRESS: Same | PHONE: Same

VEH YR: 2002 | MAKE: Ford | MODEL: Focus | COLOR: Gold | STYLE: 4S | STATE: OH | LICENSE PLATE NO.: FPS2360 | TOWING SERVICE: | VEH/PED DIR FROM: E TO: W

CIRCLE DAMAGE AREAS: 1 2 3 4 5 6 7 8 | 9 TOP, 10 UNDER CAR, 11 LOAD, 12 TRAILER | DAMAGE SEVERITY: ☒ NON-FUNCTIONAL, ☐ FUNCTIONAL, ☐ DISABLING | DAMAGE SCALE: ☐ NONE, ☐ MODERATE, ☒ LIGHT, ☐ HEAVY | VEHICLE DISPOSITION: ☐ DRIVEN AWAY, ☒ REMAINED AT SCENE, ☐ TOWED | FIRE: ☒ NO FIRE, ☐ FIRE DUE TO CRASH, ☐ OTHER FIRE

8 — UNIT NO. 2 | NO OF OCCUPANTS | OPERATING ☒ | PARKED ☐ | DRIVERLESS | HIT & RUN | NON-CONTACT | INSURANCE CO. OR AGENT: Gmac Ins.

DRIVER/PEDESTRIAN NAME (LAST, FIRST, MI): Mescher, Callie, Lee | ADDRESS (NO., STREET, CITY, STATE, ZIP CODE): 1941 Shawhan RD. Morrow, OH

PHONE NO.: 513-292-5001 | BIRTHDATE: 07/31/90 | AGE: 22 | SEX: F | SOCIAL SECURITY NO.: -3954 | STATE: OH | DRIVER'S LICENSE NO.: SL 195033 | OCCUPATION:

OWNER (IF SAME AS DRIVER, WRITE SAME): Same | ADDRESS: Same | PHONE: Same

VEH YR: 2009 | MAKE: Ford | MODEL: Mustang | COLOR: Black | STYLE: 2S | STATE: OH | LICENSE PLATE NO.: FPT3146 | TOWING SERVICE: | VEH/PED DIR FROM: S TO: N

CIRCLE DAMAGE AREAS: 1 2 3 4 5 6 7 8 | 9 TOP, 10 UNDER CAR, 11 LOAD, 12 TRAILER | DAMAGE SEVERITY: ☒ NON-FUNCTIONAL, ☐ FUNCTIONAL, ☐ DISABLING | DAMAGE SCALE: ☐ NONE, ☐ MODERATE, ☒ LIGHT, ☐ HEAVY | VEHICLE DISPOSITION: ☐ DRIVEN AWAY, ☒ REMAINED AT SCENE, ☐ TOWED | FIRE: ☒ NO FIRE, ☐ FIRE DUE TO CRASH, ☐ OTHER FIRE

OCCUPANT SECTION

C — FROM UNIT NO. | NAME (LAST, FIRST, MI) | BIRTHDATE m D y | AGE | ADDRESS: same | PHONE | SEX

D — FROM UNIT NO. | NAME (LAST, FIRST, MI) | BIRTHDATE m D y | AGE | ADDRESS | PHONE | SEX

E — FROM UNIT NO. | NAME (LAST, FIRST, MI) | BIRTHDATE m D y | AGE | ADDRESS | PHONE | SEX

F — FROM UNIT NO. | NAME (LAST, FIRST, MI) | BIRTHDATE m D y | AGE | ADDRESS | PHONE | SEX

POSITION: A 1 B 1 C D E F

INJURIES: A 5 B 5 C D E F

1 FATAL, 2 SERIOUS VISIBLE, 3 MINOR VISIBLE, 4 NO VISIBLE INJURY, 5 NOT INJURED

CONDITION: A 1 B 1

1 APPARENTLY NORMAL, 2 SICK, 3 FATIGUED, 4 APPARENTLY ASLEEP, 5 PHYSICAL DEFECT, 8 OTHER CONDITION, 7 UNKNOWN

P-PEDESTRIAN

RESTRAINTS: A 4 B 4 C D E F

1 NOT USED, 2 NONE AVAILABLE, 3 LAP BELT USED, 4 LAP/SHOULDER BELT USED, 5 SHOULDER BELT USED, 6 CHILD SAFETY SEAT, 7 AIR BAG USED, 8 USE NOT REPORTED

ALCOHOL: A ☐ YES ☒ NO TESTED | B ☐ YES ☒ NO TESTED

1 NO ALCOHOL DETECTED, 2 HBD ABILITY IMPAIRED, 3 HBD ABILITY NOT IMPAIRED, 4 HBD ABILITY UNKNOWN

EJECTION: A 1 B 1 C D E F

1 NOT EJECTED, 2 PARTIAL, 3 TOTAL, 4 TRAPPED INSIDE VEHICLE

DRUGS: A TESTED ☐ YES ☒ NO | B TESTED ☐ YES ☒ NO

1 NO DRUGS DETECTED, 2 USING PRESCRIBED DRUG, 3 USING ILLICIT DRUG

A B C — INJURED TAKEN TO — By

D E F

A B C — INJURED TAKEN TO — By

D E F

A ☐ ORC ☐ CITY ORD — OFFENSE CHARGED AND DESCRIPTION

B ☐ ORC ☐ CITY ORD — OFFENSE CHARGED AND DESCRIPTION

RECEIVED CALL	DISPATCHED	ARRIVED	CLEARED	OTHER TIME	TOTAL MINUTES
2248	2249	2249	2300	0010	0022

DATE REPORT FILED	PHOTOS	OFFICER'S NAME	BADGE NO.	CHECKED BY
05/22/13	☐ YES ☒ NO	D KURILKO	115	

State Pil-012 2/13/03