

OHIO TRAFFIC CRASH REPORT

OH-1 (Rev. 1-82)

LOCAL REPORT NO. **14-1400** OH-2 OH-3 **Lebanon Police** 0830300 ODHS USE ONLY - 00 NOT MARK ABOVE

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: DAY **12** MONTH **31** YEAR **14** TIME: MILITARY **1348**

CRASH OCCURRED ON **Dollar Tree** WITHIN THE INTERSECTION OF **Columbus AVE.**

IF NOT IN INTERSECTION (LIST NEAREST INTERSECTING STREET, MILEPOST, HOUSE NO.) CITY CODE

LOC JUR FH9 FILT

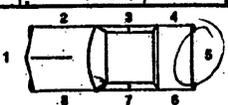
A UNIT NO. **1** NO OF OCCUPANTS **1** OPERATING PARKED DRIVERLESS HIT & RUN NON CONTACT INSURANCE CO OR AGENT **USAA**

DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI) **Alesi, Laura** ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) **2492 Manistigue Lakes Dr. Lebanon OH**

PHONE NO. **513-646-0808** BIRTH DATE **08, 18, 65** AGE **48** SEX **F** SOCIAL SECURITY NO. STATE **OH** DRIVER'S LICENSE NO. **5X402098** OCCUPATION

OWNER (IF SAME AS DRIVER, WRITE SAME) **Daniel Alesi** ADDRESS **same** PHONE **513-646-0808**

VEH YR **09** MAKE **Buick** MODEL **SW** COLOR **White** STYLE STATE **OH** LICENSE PLATE NO. **EE58927** TOWING SERVICE VEH/PED DIR FROM TO

CIRCLE DAMAGE AREAS  9 TOP 10 UNDER CAR 11 LOAD 12 TRAILER DAMAGE SEVERITY NON-FUNCTIONAL FUNCTIONAL DISABLING DAMAGE SCALE NONE LIGHT MODERATE HEAVY VEHICLE DISPOSITION DRIVEN AWAY REMAINED AT SCENE TOWED FIRE NO FIRE FIRE DUE TO CRASH OTHER FIRE

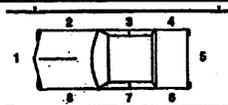
8 UNIT NO. **2** NO OF OCCUPANTS **0** OPERATING PARKED DRIVERLESS HIT & RUN NON CONTACT INSURANCE CO OR AGENT **Geico**

DRIVER/PEDESTRIAN NAME (LAST, FIRST, MI) ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) PHONE

PHONE NO. BIRTHDATE AGE SEX SOCIAL SECURITY NO. STATE DRIVER'S LICENSE NO. OCCUPATION

OWNER (IF SAME AS DRIVER, WRITE SAME) **Randi Hiter** ADDRESS **4730 Guerlev Rd #2 Cincinnati OH** PHONE **513-598-0196**

VEH YR **04** MAKE **GMC** MODEL **SW** COLOR **Blue** STYLE STATE **OH** LICENSE PLATE NO. **GBH 4738** TOWING SERVICE VEH/PED DIR FROM TO

CIRCLE DAMAGE AREAS  9 TOP 10 UNDER CAR 11 LOAD 12 TRAILER DAMAGE SEVERITY NON-FUNCTIONAL FUNCTIONAL DISABLING DAMAGE SCALE NONE LIGHT MODERATE HEAVY VEHICLE DISPOSITION DRIVEN AWAY REMAINED AT SCENE TOWED FIRE NO FIRE FIRE DUE TO CRASH OTHER FIRE

C FROM UNIT NO. NAME (LAST, FIRST, MI) BIRTHDATE AGE POSITION INJURIES

A	B	C	D	E	F	A	B	C	D	E	F
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ADDRESS PHONE SEX

D. FROM UNIT NO. NAME (LAST, FIRST, MI) BIRTHDATE AGE POSITION INJURIES

A	B	C	D	E	F	A	B	C	D	E	F
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ADDRESS PHONE SEX

E. FROM UNIT NO. NAME (LAST, FIRST, MI) BIRTHDATE AGE POSITION INJURIES

A	B	C	D	E	F	A	B	C	D	E	F
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ADDRESS PHONE SEX

F. FROM UNIT NO. NAME (LAST, FIRST, MI) BIRTHDATE AGE POSITION INJURIES

A	B	C	D	E	F	A	B	C	D	E	F
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ADDRESS PHONE SEX

A B C INJURED TAKEN TO By A B C D E F ALCOHOL

A	B	C	D	E	F	A	B	C	D	E	F
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D E F INJURED TAKEN TO By

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

1 APPARENTLY NORMAL 2 SICK 3 FATIGUED 4 APPARENTLY ASLEEP 5 PHYSICAL DEFECT 6 OTHER CONDITION 7 UNKNOWN

A OFFENSE CHARGED AND DESCRIPTION ORC CITY ORD

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RECEIVED CALL **1348** DISPATCHED **1349** ARRIVED **1357** CLEARED **1406** OTHER TIME **10** TOTAL MINUTES **28**

DATE REPORT FILED **12/24/14** PHOTOS YES NO OFFICER'S NAME **Morris** BADGE NO. **131** CHECKED BY

EJECTION DRUGS

A	B	C	D	E	F	A	B	C	D	E	F
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1 NOT EJECTED 2 PARTIAL 3 TOTAL 4 TRAPPED INSIDE VEHICLE

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

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

DRIVER-PEDESTRIAN-VEHICLE SECTION

OCCUPANT SECTION

POLICE ACTION

LOCAL FILE NO