

OHIO TRAFFIC CRASH REPORT

OH-1 (Rev. 1-82)

LOCAL REPORT NO. 14-21411, 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: 12 21 14, DAY Sunday, TIME: MILITARY 1012, CRASH OCCURRED ON 650 E Main, WITHIN THE INTERSECTION OF, IF NOT IN INTERSECTION (LIST NEAREST INTERSECTING STREET, MILEPOST, HOUSE NO.), CITY CODE

LOCAL FILE NO. 14-21411

DRIVER-PEDESTRIAN-VEHICLE SECTION

LOG-1 LOG-2 LOC JUR FH9 FILT, A UNIT NO. 1, NO OF OCCUPANTS, OPERATING PARKED DRIVERLESS HIT & RUN NON CONTACT, INSURANCE CO OR AGENT Progressive, DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI) Bishop, Bradley D, ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) 2106 Hamilton Rd., Lebanon, Oh 45036, PHONE NO. 513-508-7013, BIRTH DATE, AGE 18, SEX M, SOCIAL SECURITY NO., STATE Oh, DRIVER'S LICENSE NO. TB001579, OCCUPATION, OWNER (IF SAME AS DRIVER, WRITE SAME) Brent Bishop, ADDRESS 635 Hoffman Ave, PHONE, VEH YR 2000, MAKE Ford, MODEL Excursion, COLOR Maroon, STYLE SW, STATE Oh, LICENSE PLATE NO. FIM1316, TOWING SERVICE, VEH/PED DIR FROM TO, CIRCLE DAMAGE AREAS, DAMAGE SEVERITY, DAMAGE SCALE, VEHICLE DISPOSITION, FIRE, 8 UNIT NO. 2, NO OF OCCUPANTS, OPERATING PARKED DRIVERLESS HIT & RUN NON-CONTACT, INSURANCE CO OR AGENT State Farm, DRIVER/PEDESTRIAN NAME (LAST, FIRST, MI) Combs, Manda S, ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) 2595 Lebanon Road, Lebanon, Oh 45036, PHONE NO. 513-403-3597, BIRTHDATE, AGE, SEX F, SOCIAL SECURITY NO., STATE OH, DRIVER'S LICENSE NO., OCCUPATION, OWNER (IF SAME AS DRIVER, WRITE SAME) Same, VEH YR 2011, MAKE Ford, MODEL Escape, COLOR Blue, STYLE SW, STATE Oh, LICENSE PLATE NO. FWU9109, TOWING SERVICE, VEH/PED DIR FROM TO, CIRCLE DAMAGE AREAS, DAMAGE SEVERITY, DAMAGE SCALE, VEHICLE DISPOSITION, FIRE

OCCUPANT SECTION

C FROM UNIT NO., NAME (LAST, FIRST, MI), BIRTHDATE, AGE, POSITION, INJURIES, D. FROM UNIT NO., NAME (LAST, FIRST, MI), BIRTHDATE, AGE, E. FROM UNIT NO., NAME (LAST, FIRST, MI), BIRTHDATE, AGE, F. FROM UNIT NO., NAME (LAST, FIRST, MI), BIRTHDATE, AGE, P-PEDESTRIAN, RESTRAINTS, ALCOHOL, 1 NOT USED, 2 NONE AVAILABLE, 3 LAP BELT USED, 4 LAP/SHOULDER BELT USED, 5 SHOULDERS 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

POLICE ACTION

A B C INJURED TAKEN TO By, D E F INJURED TAKEN TO By, A B C OFFENSE CHARGED AND DESCRIPTION, D E F OFFENSE CHARGED AND DESCRIPTION, RECEIVED CALL, DISPATCHED 1028, ARRIVED 1033, CLEARED 1059, OTHER TIME, TOTAL MINUTES 00off0ff, DATE REPORT FILED 12 21 14, PHOTOS YES NO, OFFICER'S NAME S. Drake, BADGE NO. 118, CHECKED BY, A B C D E F EJECTION, DRUGS, 1 NOT EJECTED, 2 PARTIAL, 3 TOTAL, 4 TRAPPED INSIDE VEHICLE, 1 NO DRUGS DETECTED, 2 USING PRESCRIBED DRUG, 3 USING ILLICIT DRUG