TRAFFIC CRASH REPORT

Local Information

Local Report Number: 16-170

Crash Severity: 2 (1 - Fatal, 2 - Injury, 3 - PDO)

Hit/Skip: 1 - Solved, 2 - Unsolved

Photos Taken: OH-2, OH-1P, OH-3, Other

PDO Under State Reportable Dollar Amount

Private Property

Reporting Agency NCIC: 08303

Reporting Agency Name: Lebanon Police Department

Number of Units: 2

Unit in Error: 01 (98 - Animal, 99 - Unknown)

County: 83

☑ City ☐ Village ☐ Township

City, Village, Township: Lebanon

Crash Date: 05192016

Time of Crash: 1445

Day of Week: THR

Degrees / Minutes / Seconds: Latitude ___°___'___.___" Longitude ___°___'___.___"

Decimal Degrees: Latitude 39.438935 Longitude -84.198149

Roadway Division: ☐ Divided ☑ Undivided

Number of Thru Lanes: 3

Road Types or Milepost: AL - Alley, AV - Avenue, BL - Boulevard, CR - Circle, CT - Court, DR - Drive, HE - Heights, HW - Highway, LA - Lane, MP - Milepost, PK - Parkway, PI - Pike, PL - Place, RD - Road, SQ - Square, ST - Street, TE - Terrace, TL - Trail, WA - Way

Location Route Number

Location Route Type: N, S, E, W

Columbus

Location Road Type: AV

Route Types: IR - Interstate Route (inc. turnpike), US - US Route, SR - State Route, CR - Numbered County Route, TR - Numbered Township Route

Distance From Reference: ☐ Miles ☐ Feet ☐ Yards

Direction From Reference: N, S, E, W

Reference Route Type

Reference Route Number

Reference Name (Road, Milepost, House #): 453 Columbus

Reference Road Type: AV

Reference Point Used: 3 (1 - Intersection, 2 - Mile Post, 3 - House Number)

Crash Location: 01 (01 - Not an Intersection, 02 - Roadway Intersection, 03 - Intersection, 04 - Y-Intersection, 05 - Traffic Circle/Roundabout, 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 (1 - On Roadway, 2 - On Shoulder, 3 - In Median, 4 - On Roadside, 5 - On Gore, 6 - Outside Trafficway, 9 - Unknown)

Road Contour: 1 (1 - Straight Level, 2 - Straight Grade, 3 - Curve Level, 4 - Curve Grade, 9 - Unknown)

Road Conditions: Primary 01, Secondary (01 - Dry, 02 - Wet, 03 - Snow, 04 - Ice, 05 - Sand, Mud, Dirt, Oil, Gravel, 06 - Water (Standing, Moving), 07 - Slush, 08 - Debris*, 09 - Rut, Holes, Bumps, Uneven Pavement*, 10 - Other, 99 - Unknown)

* Secondary Condition Only

Manner of Crash Collision Impact: 6 (1 - Not Collision Between Two Motor Vehicles In Transport, 2 - Rear End, 3 - Head-On, 4 - Rear-to-Rear, 5 - Backing, 6 - Angle, 7 - Sideswipe, Same Direction, 8 - Sideswipe, Opposite Direction, 9 - Unknown)

Weather: 1 (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, Secondary (1 - Daylight, 2 - Dawn, 3 - Dusk, 4 - Dark - Lighted Roadway, 5 - Dark - Roadway Not Lighted, 6 - Dark - Unknown Roadway Lighting, 7 - Glare*, 8 - Other, 9 - Unknown)

* Secondary Condition Only

☐ School Zone Related

School Bus Related: ☐ Yes, School Bus Directly Involved ☐ Yes, School Bus Indirectly Involved

☐ Work Zone Related

☐ Workers Present ☐ Law Enforcement Present (Officer/Vehicle) ☐ Law Enforcement Present (Vehicle Only)

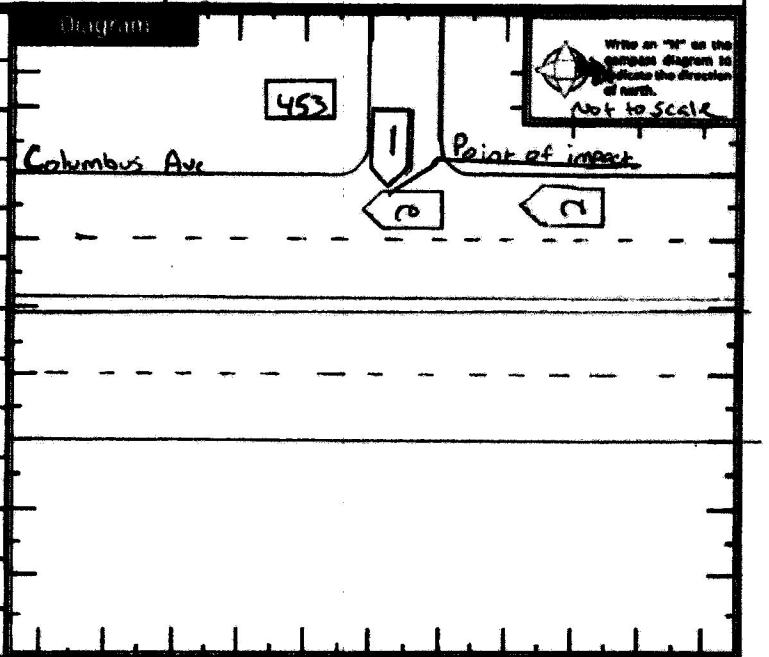
Type of Work Zone: 1 - Lane Closure, 2 - Lane Shift Crossover, 3 - Work on Shoulder or Median, 4 - Intermittent or Moving Work, 5 - Other

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 was pulling out of the drive of 453 Columbus Ave. Unit #2 was traveling south on Columbus Ave. Unit #1 pulled out in front of Unit #2. Unit #1 and Unit #2 struck each other. The damage on Unit #1 is on the front left and Unit #2 the front rights.

Diagram



Report Taken By: ☑ Police Agency ☐ Motorist

☐ Supplement (Correction or Addition to an Existing Report Sent to ODPS)

Date Crash Reported	Time Crash Reported	Dispatch Time	Arrival Time	Time Cleared	Other Investigation Time	Total Minutes
05192016	1445	1449	1449	1521		36

Officer's Name: D. FRY

Officer's Badge Number: 119

Checked By: [signature]

HSY7001 OH1 (Rev 01/12)

UNIT

Local Report Number: 16-179

Unit Number: 01

Owner Name: Last, First, Middle (☐ Same As Driver): Hidalgo, Jaqueline

Owner Phone Number - Inc. Area Code (☐ Same As Driver):

Owner Address: City, State, Zip (☐ Same As Driver): 3934 Vine St., Cincinnati, OH 45202

Damage Scale: 2 — 1 - None; 2 - Minor; 3 - Functional; 4 - Disabling; 9 - Unknown

Damaged Area: Front 02; 09; 03; 08; 10; 04; 07; 06; 05; Rear

LP State: OH

License Plate Number: GOH2498

Vehicle Identification Number: 5FNRL189631B117742

Occupants: 01

Vehicle Year: 2003

Vehicle Make: Honda

Vehicle Model: Odyssey

Vehicle Color: Silver

☐ Proof of Insurance Shown

Insurance Company: Unknown

Policy Number:

Towed By:

Carrier Name, Address, City, State, Zip:

Carrier Phone - Include Area Code:

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.

☐ Hazardous Material Released

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: 1

1 - Two-Way, Not Divided; 2 - Two-Way, Not Divided, Continuous Left Turn Lane; 3 - Two-Way, Divided, Unprotected (Paint 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 Access; 11 - Shared 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: 05

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 Seats, Inc Driver); 22 - Bus (16+ Seats, Inc Driver)

Non-Motorist: 23 - Animal With Rider; 24 - Animal With Buggy, Wagon, Surrey; 25 - Bicycle/Pedacyclist; 26 - Pedestrian/Skater; 27 - Other Non Motorist

☐ Has HM Placard

Special Function: 01

01 - None; 02 - Taxi; 03 - Rental Truck (Over 10K Lbs); 09 - Ambulance; 10 - Police; 11 - Highway/Maintenance; 17 - Farm Vehicle; 18 - Farm Equipment; 19 - Motorhome

Most Damaged Area: 09

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 - Underbody; 12 - Force Unknown; 13 - Total (All Areas); 14 - Other; 99 - Unknown

Impact Area: 09

Action: 5

1 - Non-Contact; 2 - Non-Collision; 3 - Striking; 4 - Struck; 5 - Striking/Struck; 9 - Unknown

Pre-Crash Actions: 06

Motorist:

Non Motorist:

23 - Other Non Motorist Action

Contributing Circumstances

Primary: 02

Motorist:

Secondary:

Non-Motorist:

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:

Non-Collision Events:

10 - Cross Median; 11 - Cross Center Line Opposite Direction of Travel; 12 - Downhill Runaway; 13 - Other Non Collision

Collision With Fixed Object:

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:

Posted Speed: 35

Traffic Control: 01

Unit Direction: From 4 To 1

1 - North; 2 - South; 3 - East; 4 - West; 5 - Northeast; 6 - Northwest; 7 - Southeast; 8 - Southwest; 9 - Unknown

HSV8304 OHIO (R. 1/12)

UNIT

Local Report Number: 16-179

Unit Number: 02

Owner Name: Last, First, Middle (☑ Same As Driver)

Owner Phone Number - Inc. Area Code (☑ Same As Driver)

Damage Scale: 4 (1 - None, 2 - Minor, 3 - Functional, 4 - Disabling, 9 - Unknown)

Damaged Area: Front 02, 09, 03, 08, 10, 04, 07, 05, 06, Rear

Owner Address: City, State, Zip (☑ Same As Driver)

LP State: OH

License Plate Number: FUH8131

Vehicle Identification Number: 1G4CW54KXY4285066

Occupants: 03

Vehicle Year: 2000

Vehicle Make: Buick

Vehicle Model: Park Avenue

Vehicle Color: Tan

☑ Proof of Insurance Shown

Insurance Company: Allstate

Policy Number: 992434863

Towed By: Lebanon Towing

Carrier Name, Address, City, State, Zip: Stan Martz, 42 N. Broadway, Lebanon, Oh 45036

Carrier Phone - Include Area Code: (513) 934-2433

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.

☐ Hazardous Material Released

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: 1

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 / 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 Access
11 - Shared 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: 04

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 Seats, Inc Driver)
22 - Bus (16+ Seats, Inc Driver)

Non-Motorist
23 - Animal With Rider
24 - Animal With Buggy, Wagon, Surrey
25 - Bicycle/Pedacyclist
26 - Pedestrian/Skater
27 - Other Non-Motorist

☐ Has HM Placard

Special Function: 01

01 - None
02 - Taxi
03 - Rental Truck (Over 10K Lbs)
09 - Ambulance
10 - Bus
11 - Highway/Maintenance
17 - Farm Vehicle
18 - Farm Equipment
19 - Motorhome

Most Damaged Area: 03

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 Window
11 - Underbody
12 - Load/Trailer
13 - Total Area
14 - Other
99 - Unknown

Impact Area: 03

Action: 5

1 - Non-Contact
2 - Non-Collision
3 - Striking
4 - Struck
5 - Striking/Struck
9 - Unknown

Pre-Crash Actions: 01

Motorist

Non-Motorist

21 - Other Non-Motorist Action

Contributing Circumstances

Primary: 01

Motorist

Non-Motorist

Secondary:

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

Non-Collision Events

10 - Cross Median
11 - Cross Centerline - Opposite Direction of Travel
12 - Downhill Runaway
13 - Other Non Collision

Collision with Person, Vehicle or Object Not Fixed

Collision with Fixed Object

31 - Median Cable Barrier
32 - Median Concrete Barrier
33 - Median Other Barrier
34 - Traffic Sign Post
35 - Overhead Sign Post
36 - Light/Luminaries Support
39 - Other Post, Pole or Support
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

Posted Speed: 35

Traffic Control: 01

Unit Direction: From 1 To 2

1 - North
2 - South
3 - East
4 - West
5 - Northeast
6 - Northwest
7 - Southeast
8 - Southwest
9 - Unknown

HS18304 (Rev. 10/2012)

MOTORIST / NON-MOTORIST / OCCUPANT

Local Report Number: 16-170

Motorist/Non-Motorist

Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender
01	Paredes-Garcia, Ismael	10 09 1960	56	M (F - Female, M - Male)

Address, City, State, Zip: 3934 Vine St., Cincinnati, OH
Contact Phone - Include Area Code: (513) 773-9358

Injuries	Injured Taken By	EMS Agency	Medical Facility Injured Taken To	Safety Equipment Used	DOT Compliant Motorcycle Helmet	Seating Position	Air Bag Usage	Ejection	Trapped
1				99		01	1	1	1

OL State	Operator License Number	OL Class	No Valid OL	M/C Endorsement	Condition	Alcohol/Drug Suspected	Alcohol Test Status	Alcohol Test Type	Alcohol Test Value	Drug Test Status	Drug Test Type
	None				1	1	1	1		1	1

Offense Charged (Local Code)	Offense Description	Citation Number	Hands-Free Device Used	Driver Distracted By
331.22	Right of Way	68706		1

Motorist/Non-Motorist

Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender
02	Ellis, Don	08 02 1957	58	M (F - Female, M - Male)

Address, City, State, Zip: 215 N High St., Lebanon, Oh 45036
Contact Phone - Include Area Code: (513) 850-1906

Injuries	Injured Taken By	EMS Agency	Medical Facility Injured Taken To	Safety Equipment Used	DOT Compliant Motorcycle Helmet	Seating Position	Air Bag Usage	Ejection	Trapped
1				99		01	2	1	1

OL State	Operator License Number	OL Class	No Valid OL	M/C Endorsement	Condition	Alcohol/Drug Suspected	Alcohol Test Status	Alcohol Test Type	Alcohol Test Value	Drug Test Status	Drug Test Type
OH	RS406692	4			1	1	1	1		1	1

Offense Charged (Local Code)	Offense Description	Citation Number	Hands-Free Device Used	Driver Distracted By
				1

Injured
1 - No Injuries / Not Removed
2 - Possible
3 - Non-Incapacitating
4 - Incapacitating
5 - Fatal

Injured Taken By
1 - Not Transported / Treated at Scene
2 - EMS
3 - Police
4 - Other
5 - Unknown

Safety Equipment Used
01 - None Used / Vehicle Equipped
02 - Shoulder Belt Only Used
03 - Lap Belt Only Used
04 - Shoulder and Lap Belt Used
05 - Child Restraint System-Forward Facing
06 - Child Restraint System-Rear Facing
07 - Booster Seat
08 - Helmet Used
99 - Unknown Safety Equipment

Non-Motorist
09 - None Used
10 - Helmet Used
11 - Protective Pads Used (Elbow, Knee, Etc)
12 - Reflective Clothing
13 - Lighting
14 - Other

Seating Position
01 - Front - Left Side (Motorcycle Operator)
02 - Front - Middle
03 - Front - Right Side
04 - Second - Left Side (Motorcycle Passenger)
05 - Second - Middle
06 - Second - Right Side
07 - Third - Left Side
08 - Third - Middle
09 - Third - Right Side
10 - Sleeper Section of Cab (Truck)
11 - Passenger in Other Enclosed Compartment Area
12 - Passenger in Unenclosed Compartment Area
13 - Riding on Vehicle Exterior (Non-Trailing Unit)
14 - Riding on Vehicle Exterior (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 - Deployed Unknown

Ejection
1 - Not Ejected
2 - Totally Ejected
3 - Partially Ejected
4 - Not Applicable

Trapped
1 - Not Trapped
2 - Extricated by Mechanical Means
3 - Unknown

Operator License Class
1 - Class A
2 - Class B
3 - Class C
4 - Restricted Commercial Vehicle
5 - M/Motorcycle Only

Condition
1 - Apparently Normal
2 - Physical Impairment
3 - Emotional (Depressed, Tired, Disturbed)
4 - Illness
5 - Fell Asleep, Fainted, Fainted
6 - Under the Influence of Medications, Drugs, Alcohol
7 - Other

Alcohol/Drug Suspected
1 - None
2 - Yes - Alcohol Suspected
3 - Yes - HBD Not Involved
4 - Yes - Drugs Suspected
5 - Yes - Alcohol and Drugs Suspected

Alcohol Test Status
1 - Not Given
2 - Not Refused
3 - Test Given, Contaminated Sample/Unusable
4 - Test Given, Results Known
5 - Test Given, Results Unknown

Alcohol Test Type
1 - None
2 - Blood
3 - Urine
4 - Breath
5 - Other

Drug Test Status
1 - Not Given
2 - Not 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, Radio, DVD)
6 - Other Inside the Vehicle
7 - External Distraction

Occupant

Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender
02	Ellis, Janet	03 16 1957	59	F (F - Female, M - Male)

Address, City, State, Zip: 215 N High St., Lebanon, Oh 45036
Contact Phone - Include Area Code: (513) 850-1906

Injuries	Injured Taken By	EMS Agency	Medical Facility Injured Taken To	Safety Equipment Used	DOT Compliant Motorcycle Helmet	Seating Position	Air Bag Usage	Ejection	Trapped
3	2	Lebanon Fire/EMS	Bethesda Arrow Spri	99		03	2	1	1

Occupant

Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender
02	Ellis, Don	05 08 1975	41	M (F - Female, M - Male)

Address, City, State, Zip: 215 N High St., Lebanon, Oh 45036
Contact Phone - Include Area Code: (513) 850-0517

Injuries	Injured Taken By	EMS Agency	Medical Facility Injured Taken To	Safety Equipment Used	DOT Compliant Motorcycle Helmet	Seating Position	Air Bag Usage	Ejection	Trapped
2	1			99		06	1	1	1