

OHIO TRAFFIC CRASH REPORT

OH-1 (Rev. 10/99)

State Seal

LOCAL REPORT #*
2012018946

CRASH SEVERITY
3 1 FATAL 3 PDO
2 Injury 4 Unknown

PRIVATE PROPERTY

HIT / SKIP
1 NOT HIT / SKIP
2 SOLVED
3 UNSOLVED
1

PHOTOS TAKEN
Y

OH-2 OH-3 OH-1P OTHR
X

NCIC #*
08304

REPORTING AGENCY*
City of Mason - City of Mason Police Depart

UNITS
2

UNIT ERROR
01 88=ANIMAL
89=UNKNOWN

DATE OF CRASH*
08142012

TIME OF CRASH 05:57 DAY OF WEEK Tue CITY* X VILLAGE* TWP* NAME (OF CITY, VILLAGE OR TOWNSHIP)* Mason COUNTY #* 83 LATITUDE LONGITUDE

CRASH OCCURRED ON PREFIX CRASH LOCATION Mason-Montgomery Road TYPE LOC 1 TYPE LOCATION POINT USED 1 NAMED STREET 3 NUMBERED ROUTE 2 NUMBERED STREET LOCAL INFORMATION

CRASH AT / REFERENCE DIST REFERENCE 500.00 DR PREFIX N REFERENCE North East Street REF POINT 02 REFERENCE POINT USED 01 STATE LINE 02 INTERSECT ON 2 STREETS 03 COUNTY LINE 04 HOUSE NUMBER 05 TOWNSHIP BOUNDARY 06 MILE POST 07 CORPORATION LIMIT 08 PLACE NAME W/O REFERENCE 09 DRIVEWAY 10 STREET OR ROUTE W/O REFERENCE

UNIT # A 1 NAME (LAST, FIRST, MIDDLE) Knoop, Merrill Edmund ADDRESS (STREET, CITY, STATE, ZIP CODE) 105 East North Street, Mason OH, 45040

SOCIAL SECURITY NUM DATE OF BIRTH 02151931 AGE 81 SEX M HOME PHONE # (513) 398-5460 WORK PHONE #

DL STATE OH DL # RG746258 LP STATE OH LP # EMW5842 INJURED TAKEN BY 1 NONE 2 EMS 3 POLICE 4 OTHER 5 UNKNOWN TRANSPORTED BY INJURED TAKEN TO

OWNER'S NAME (IF SAME WRITE "SAME") Knoop, Merrill Edmund ADDRESS (STREET, CITY, STATE, ZIP CODE) Same YEAR 2009 MAKE HYUN MODEL Sonata COLOR LBL INSURANCE COMPANY TOWING SERVICE OWNER PHONE # 513-398-5460(H)

OFFENSE CHARGED 331.03 OFFENSE DESCRIPTION Overtaking, Passing to Left CITATION # 71661 LOCAL CODE? X

UNIT # B 2 NAME (LAST, FIRST, MIDDLE) Dankwa, Otten W ADDRESS (STREET, CITY, STATE, ZIP CODE) 11584 New Hope Drive, Cincinnati OH, 45240

SOCIAL SECURITY NUM DATE OF BIRTH 09071981 AGE 30 SEX M HOME PHONE # (513) 824-0888 WORK PHONE #

DL STATE OH DL # SX493742 LP STATE OH LP # EKY5875 INJURED TAKEN BY 1 NONE 2 EMS 3 POLICE 4 OTHER 5 UNKNOWN TRANSPORTED BY INJURED TAKEN TO

OWNER'S NAME (IF SAME WRITE "SAME") Dankwa, Otten W ADDRESS (STREET, CITY, STATE, ZIP CODE) Same YEAR 2007 MAKE VOLK MODEL Passat COLOR GRY INSURANCE COMPANY State Farm TOWING SERVICE OWNER PHONE # 513-824-0888(H)

OFFENSE CHARGED OFFENSE DESCRIPTION CITATION # LOCAL CODE?

UNIT # C NAME (LAST, FIRST, MIDDLE) HOME PHONE # DATE OF BIRTH AGE SEX

ADDRESS (STREET, CITY, STATE, ZIP CODE) INJURED TAKEN BY 1 NONE 2 EMS 3 POLICE 4 OTHER 5 UNKNOWN TRANSPORTED BY INJURED TAKEN TO

UNIT # D NAME (LAST, FIRST, MIDDLE) HOME PHONE # DATE OF BIRTH AGE SEX

ADDRESS (STREET, CITY, STATE, ZIP CODE) INJURED TAKEN BY 1 NONE 2 EMS 3 POLICE 4 OTHER 5 UNKNOWN TRANSPORTED BY INJURED TAKEN TO

SEATING POSITION	SAFETY EQUIPMENT	AIR BAG	AIR BAG SWITCH	EJECTION	TRAPPED	INJURIES
01 FRONT - LEFT (MC DRIVER)	01 NONE USED	1 01 NOT DEPLOYED	1 01 NOT PRESENT	1 01 NOT EJECTED	1 01 NOT TRAPPED	1 01 NO INJURY
A 02 FRONT - MIDDLE	02 SHOULDER BELT ONLY	02 DEPLOYED - FRONT	02 IN ON POSITION	02 TOTALLY EJECTED	02 EXTRACTED BY MECHANICAL MEANS	02 POSSIBLE
03 FRONT - RIGHT	03 LAP BELT ONLY	03 DEPLOYED - SIDE	03 IN OFF POSITION	03 PARTIALLY EJECTED	03 FREED BY MEANS	03 NON-
04 SECOND - LEFT (MC PASS)	04 SHOULDER LAP BELT	04 DEPLOYED BOTH FRONT/ SIDE	04 UNKNOWN POSITION	04 NOT APPLIED	04 INCAPACITATED	04 INCAPACITATED
B 05 SECOND - MIDDLE	05 CHILD SAFETY SEAT	05 NOT APPLIED		05 UNKNOWN	05 NON-MECHANICAL MEANS	05 FATAL INJURY
06 SECOND - RIGHT	06 MC HELMET USED	06 UNKNOWN			06 UNKNOWN	06 UNKNOWN
07 THIRD - LEFT (MC PASSENGER SIDE CAR)	07 USE UNKNOWN					
C 08 THIRD - MIDDLE	NON-MOTORIST					
09 THIRD - RIGHT	08 NONE USED					
10 SLEEPER SECTION OF CAB	09 HELMET USED					
D 11 ENCLOSED CARGO AREA	10 PROTECTIVE PADS					
12 UNENCLOSED CARGO AREA	11 REFLECTIVE CLOTHING					
13 TRAILING UNIT	12 LIGHTING					
14 EXTERIOR	13 OTHER					
15 OTHER	14 UNKNOWN					
16 NON-MOTORIST						
17 UNKNOWN						
BLANK FOR WITNESS						SUPPLEMENT "X" IF YES

Motorist/Non-Motorist

Occupant

Narrative

Unit #1 turned right onto Mason-Montgomery from East Main Street. Unit #2 was behind Unit #1. After turning unit #1 entered the left lane of travel. Unit #2 stayed in the right lane of travel. Unit #1 then made an improper lane change and struck unit #2 in the left rear with the right front.

MANNER OF COLLISION OR IMPACT

SCHOOL BUS RELATED

- 7**
- 01 NOT COLLISION BETWEEN TWO VEHICLES IN TRANSPORT
 - 02 REAR-END
 - 03 HEAD-ON
 - 04 REAR-TO-REAR
 - 05 BACKING
 - 06 ANGLE
 - 07 SIDESWIBE, SAME DIRECTION
 - 08 SIDESWIBE, OPPOSITE DIRECTION
 - 09 UNKNOWN

- 1**
- 01 NO
 - 02 YES, DIRECTLY INVOLVED
 - 03 YES, INDIRECTLY INVOLVED
 - 04 UNKNOWN

WORK ZONE RELATED

WEATHER

- 01**
- 01 CLEAR
 - 02 CLOUDY
 - 03 FOG, SMOG, SMOKE
 - 04 RAIN
 - 05 SLEET, HAIL (FREEZING RAIN DRIZZLE)
 - 06 SNOW
 - 07 SEVERE CROSSWINDS
 - 08 BLOWING SAND, SOIL, DIRT, SNOW
 - 09 OTHER
 - 10 UNKNOWN

- 1**
- 01 NO
 - 02 YES
 - 03 UNKNOWN

TYPE OF WORK ZONE

-
- 01 LANE CLOSURE
 - 02 LANE SHIFT/CROSSOVER
 - 03 WORK ON SHOULDER OR MEDIAN
 - 04 INTERMITTENT/MOVING WORK
 - 05 OTHER

LOCATION OF CRASH IN WORK ZONE

-
- 01 BEFORE FIRST WORK ZONE WARNING SIGN
 - 02 ADVANCE WARNING AREA
 - 03 TRANSITION AREA
 - 04 ACTIVITY AREA

WORKERS PRESENT

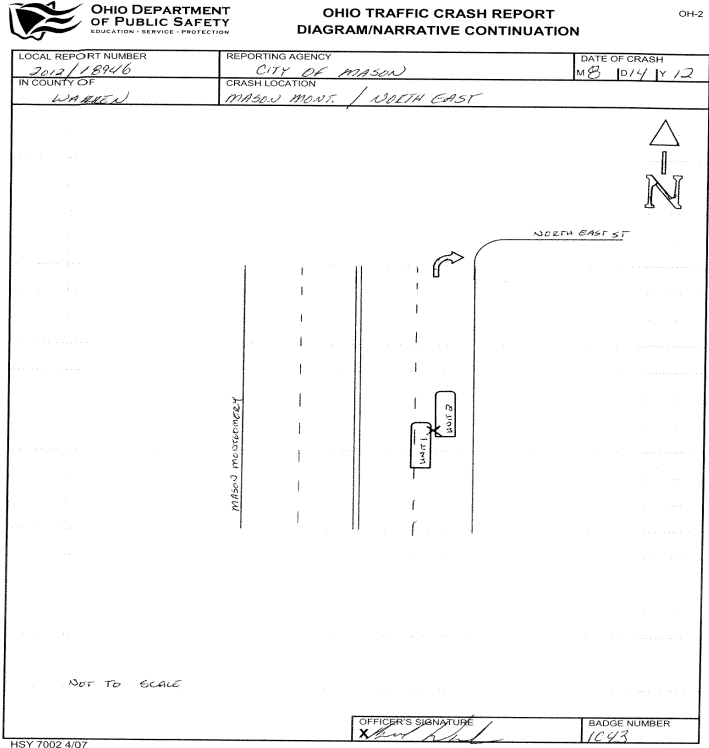
-
- 01 NO
 - 02 YES
 - 03 UNKNOWN

LIGHT CONDITIONS

PRIMARY SECONDARY

- 4**
- 01 DAYLIGHT
 - 02 DAWN
 - 03 DUSK
 - 04 DARK - LIGHTED ROADWAY
 - 05 DARK - NOT LIGHTED
 - 06 DARK - UNKNOWN LIGHTING
 - 07 CLARE
 - 08 OTHER
 - 09 UNKNOWN

Diagram



Truck/Bus

THE CRASH INVOLVED ONE OR MORE OF THE FOLLOWING:
 A TRUCK (MOTOR VEHICLE) WITH A GVWR MORE THAN 10,000 POUNDS; OR
 A TRUCK (MOTOR VEHICLE) WITH A HAZARDOUS MATERIALS PLACARD; OR
 A BUS DESIGNED FOR AT LEAST 8 PERSONS, INCLUDING DRIVER.

AND

THE CRASH RESULTED IN ONE OR MORE OF THE FOLLOWING:
 A FATALITY; OR
 AN INJURY REQUIRING TRANSPORTATION FOR IMMEDIATE MEDICAL TREATMENT; OR
 AT LEAST ONE VEHICLE WAS TOWED DUE TO DISABLING DAMAGE OR REQUIRED
 INTERVENING ASSISTANCE BEFORE PROCEEDING UNDER ITS OWN POWER.

Unit#

COMPANY (FROM SHIPPING PAPERS)

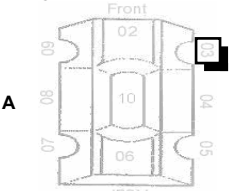
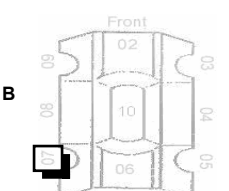
COMPANY PHONE

ADDRESS (STREET, CITY, ST, ZIP CODE)

US DOT	ICC MC	EUCO	TRAILER LP ST.	TRAILER LP YEAR	TRAILER LP#	PLACARD #	# DIA
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
CARGO BODY TYPE	WEIGHT (GVWR)	CDL Class	Hazardous Materials Placard	Hazardous Materials Released			
<ul style="list-style-type: none"> 01 NOT APPLI CABLE 02 BUS (9-15 INCLUDING DRIVER) 03 VAN ENCLOSED BOX 04 GRAIN CHIPS/ GRAVEL 	<ul style="list-style-type: none"> 05 POLE 06 CARGO TAN 07 FLATBED 08 DUMP 09 CONCRETE MIXER 10 AUTO TRANSPORTER 11 GARBAGE/REFUSE 12 OTHER 13 UNKNOWN 	<ul style="list-style-type: none"> 01 CLASS A 02 CLASS B 03 CLASS C 04 CLASS M 05 CLASS D 	<ul style="list-style-type: none"> 01 NO 02 YES 03 UNKNOWN 	<ul style="list-style-type: none"> 01 NO 02 YES 03 NOT APPLI CABLE 04 UNKNOWN 			

Police Action

DATE CRASH REPORTED	TIME REC CALL	DISPATCH	ARRIVED	CLEARED	OTHER	TOTAL MINUTES
08/14/2012	06:01	05:57	06:01	06:40	30.00	68.78
OFFICER'S NAME*	PAGE #*	CHECKED BY	DATE REPORT FILED*			
Police Officer Bradley W Walker	1C43		08/15/2012			
REPORT TAKEN BY	REPORT TAKEN AT	SUPPLEMENT * "X" IF YES	LOCAL REPORT #			
1	1		2012000018946			

UNIT NUMBERS <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">1 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">2 <small>B</small></div> </div>	DAMAGE AREA  	PRE-CRASH ACTIONS <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">03 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">01 <small>B</small></div> </div>	SEQUENCE OF EVENTS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">20 <small>1</small></td> <td style="width: 50%; text-align: center;">20 <small>1</small></td> </tr> <tr> <td style="text-align: center;">2 <small>2</small></td> <td style="text-align: center;">2 <small>2</small></td> </tr> <tr> <td style="text-align: center;">3 <small>3</small></td> <td style="text-align: center;">3 <small>3</small></td> </tr> <tr> <td style="text-align: center;">4 <small>4</small></td> <td style="text-align: center;">4 <small>4</small></td> </tr> </table>	20 <small>1</small>	20 <small>1</small>	2 <small>2</small>	2 <small>2</small>	3 <small>3</small>	3 <small>3</small>	4 <small>4</small>	4 <small>4</small>	POSTED SPEED <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">25 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">25 <small>B</small></div> </div>	DRUG TEST STATUS <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">1 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">1 <small>B</small></div> </div>				
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NON-MOTORIST LOCATION <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">A</div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">B</div> </div>	MOST DAMAGED AREA <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">03 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">07 <small>B</small></div> </div>	MOTORIST 01 MOVEMENTS ESSENTIALLY STRAIGHT AHEAD 02 BACKING 03 CHANGING LANES 04 OVERTAKING/PASSING 05 TURNING RIGHT 06 TURNING LEFT 07 MAKING U-TURN 08 ENTERING TRAFFIC LANE 09 LEAVING TRAFFIC LANE 10 PARKED 11 SLOWING/STOPPING IN TRAFFIC 12 DRIVERLESS 13 OTHER 14 UNKNOWN	NON-COLLISION 01 OVERTURN/ROLLOVER 02 FIRE/EXPLOSION 03 IMMERSION 04 JACKKNIFE 05 CARGO EQUIPMENT LOSS/SHIFT 06 EQUIPMENT FAILURE 07 SEPARATION OF UNITS 08 RAN OFF ROAD RIGHT 09 RAN OFF ROAD LEFT 10 CROSS MEDIAN/CENTERLINE 11 DOWNHILL RUNAWAY 12 OTHER NON-COLLISION 13 UNKNOWN NON-COLLISION	TRAFFIC CONTROL <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">12 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">12 <small>B</small></div> </div>	DRUG TEST TYPE <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">1 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">1 <small>B</small></div> </div>												
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CONTRIBUTING CIRCUMSTANCES <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">09 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">01 <small>B</small></div> </div>	VEHICLE DEFECT CODE ONLY IF '19' SELECTED ABOVE <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">A</div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">B</div> </div>	MOTORIST 01 NONE 02 FAI LURE TO YIELD 03 RAN RED LIGHT, OR STOP SIGN 04 EXCEEDED SPEED LIMIT 05 UNSAFE SPEED 06 IMPROPER TURN 07 LEFT OF CENTER 08 FOLLOWED TOO CLOSELY/ACDA 09 IMPROPER LANE CHANGE/ DROVE OFF ROAD/ IMPROPER PASSING 10 IMPROPER BACKING 11 IMPROPER START FROM PARKED POSITION 12 STOPPED OR PARKED ILLEGALLY 13 OPERATIONS ON VEHICLE IN ERRATIC, RECKLESS, CARELESS, NEGLIGENT OR AGGRESSIVE MANNER 14 SWERVING TO AVOID (DUE TO WIND, SLIPPERY SURFACE, VEHICLE, OBJECT, NON-MOTORIST IN ROADWAY, ETC) 15 FAI LURE TO CONTROL 16 VISION OBSTRUCTION 17 DRIVER INATTENTIVE 18 FATIGUE/ASLEEP 19 OPERATIONS ON DEFECTIVE EQUIPMENT 20 LOAD SHIFTING/FALLING/SPILLING 21 OTHER IMPROPER ACTION 22 UNKNOWN	COLLISION WITH FIXED OBJECT 25 IMPACT ATTENUATOR/CRASH CUSHION 26 BRIDGE OVERHEAD STRUCTURE 27 BRIDGE PIER OR ABUTMENT 28 BRIDGE PARAPET 29 BRIDGE RAIL 30 GUARDRAIL FACE 31 GUARDRAIL END 32 MEDIAN BARRIER 33 HIGHWAY TRAFFIC SIGN POST 34 OVERHEAD SIGN POST 35 LIGHT/LUMINARIES SUPPORT 36 UTILITY POLE 37 OTHER POST, POLE OR SUPPORT 38 CULVERT 39 CURB 40 DITCH 41 EMBANKMENT 42 FENCE 43 MAILBOX 44 TREE 45 OTHER FIXED OBJECT 46 WORK ZONE MAINTENANCE EQUIPMENT 47 UNKNOWN FIXED OBJECT 48 OTHER 49 UNKNOWN	CONDITION <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">1 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">1 <small>B</small></div> </div>	TYPE OF INTERSECTION <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">01</div>												
NON-MOTORIST 35 ANIMAL W/ RIDER 36 ANIMAL W/ BUGGY 37 BICYCLE 38 PEDESTRIAN 39 PEDALCYCLIST 40 SKATER 41 OTHER-NON MOTORIST 42 UNKNOWN	ACTION <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">3 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">4 <small>B</small></div> </div>	VEHICLE DEFECT 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 CRASH 11 OTHER DEFECTS	FIRST HARMFUL EVENT <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">1 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">1 <small>B</small></div> </div>	ALCOHOL/ DRUG SUSPECTED <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">1 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">1 <small>B</small></div> </div>	OCCURRENCE <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">1</div>												
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DAMAGE SCALE <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">2 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">2 <small>B</small></div> </div>	NO UNDERRIDE OR OVERRIDE 01 NO UNDERRIDE OR OVERRIDE 02 UNDERRIDE, COMPARTMENT INTRUSION 03 UNDERRIDE, NO COMPARTMENT INTRUSION 04 UNDERRIDE, COMPARTMENT INTRUSION UNKNOWN 05 OVERRIDE, MOTOR VEHICLE IN TRANSPORT 06 OVERRIDE, OTHER VEHICLE 07 UNKNOWN	VEHICLE DEFECT 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 CRASH 11 OTHER DEFECTS	SPEED DETECTED <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">1 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">1 <small>B</small></div> </div>	ALCOHOL TEST TYPE <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">1 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">1 <small>B</small></div> </div>	ROAD CONDITIONS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">01 <small>PRI</small></td> <td style="width: 50%; text-align: center;">01 <small>SEC</small></td> </tr> </table>	01 <small>PRI</small>	01 <small>SEC</small>										
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SPEED <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">20 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">25 <small>B</small></div> </div>	ALCOHOL TEST RESULT <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">A</div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">B</div> </div>	OTHER 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 CRASH 11 OTHER DEFECTS	POSTED SPEED <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">20 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">25 <small>B</small></div> </div>	ALCOHOL TEST TYPE 01 NONE 02 BLOOD 03 URINE 04 BREATH 05 OTHER	LOCAL REPORT#* <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;">201200018946</div>												

OHIO TRAFFIC ACCIDENT - STATEMENT CONTINUATION

LOCAL REPORT NUMBER	REPORTING AGENCY Mason Police Department	
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