### Owner Information

- **Owner Name:** Wilson Anthony L
- **Phone:** 216-249-9841
- **Address:** 10715 Wadsworth Ave
- **City, State, Zip:** Garfield HTS, OH 44125

### Vehicle Information

- **License Plate:** OH1U 1/19
- **VIN:** 2FTRX17251520585
- **Make:** Ford
- **Color:** Red
- **Model:** F-150

### Event Information

<table>
<thead>
<tr>
<th>Code</th>
<th>Event</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Collision</td>
<td>Fixed object - struck</td>
</tr>
<tr>
<td>02</td>
<td>Failed to yield</td>
<td>Pedestrian</td>
</tr>
<tr>
<td>03</td>
<td>Right turn</td>
<td>Pedestrian</td>
</tr>
<tr>
<td>04</td>
<td>Pedestrian</td>
<td>Pedestrian</td>
</tr>
<tr>
<td>05</td>
<td>Right turn</td>
<td>Pedestrian</td>
</tr>
<tr>
<td>06</td>
<td>Pedestrian</td>
<td>Pedestrian</td>
</tr>
<tr>
<td>07</td>
<td>Left turn</td>
<td>Pedestrian</td>
</tr>
<tr>
<td>08</td>
<td>Wrong way</td>
<td>Pedestrian</td>
</tr>
<tr>
<td>09</td>
<td>Pedestrian</td>
<td>Pedestrian</td>
</tr>
<tr>
<td>10</td>
<td>Right turn</td>
<td>Pedestrian</td>
</tr>
<tr>
<td>11</td>
<td>Pedestrian</td>
<td>Pedestrian</td>
</tr>
<tr>
<td>12</td>
<td>Right turn</td>
<td>Pedestrian</td>
</tr>
<tr>
<td>13</td>
<td>Pedestrian</td>
<td>Pedestrian</td>
</tr>
<tr>
<td>14</td>
<td>Right turn</td>
<td>Pedestrian</td>
</tr>
<tr>
<td>15</td>
<td>Pedestrian</td>
<td>Pedestrian</td>
</tr>
</tbody>
</table>

### Damage Information

- **Damage:** 0 - No Damage
- **Damage Scale:** 1 - None, 2 - Minor Damage, 3 - Functional Damage, 4 - Disable Damage, 5 - Unknown
- **Damaged Areas:** Indicate all that apply:
  - 0 - No Damage, 14 - Undercarrige, 15 - Vehicle Not at Scene, 16 - Unknown

### Other Information

- **Initial Point of Contact:** 0 - On-Offway, 1 - Two-Way, 2 - Thrufare
- **Rail Grade Crossing:**
  - 1 - Not Involved
  - 2 - Involved - Active Crossing
  - 3 - Involved - Passive Crossing

---

**Sequence of Events**

1. Overtaking
2. Pulling onto shoulder
3. Making a left turn
4. Making a left turn
5. Improper starting
6. Improper starting
7. Improper starting
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96. Improper starting
97. Improper starting
98. Improper starting
99. Improper starting
100. Improper starting

**Collisions with Fixed Object**

- 0 - No Damage
- 1 - Minimum Damage
- 2 - Minor Damage
- 3 - Functional Damage
- 4 - Disable Damage

**Detected Speed**

- 1 - Estimated/Estimated
- 2 - Calculated/EDR
- 3 - Undetermined
### MOTORIST / NON-MOTORIST

#### SECTION 1

**Operator’s Identification**
- **Name:** Ransom Anthony
- **Address:** 4245 East 189th St, Cleveland, OH 44105
- **Driver Distraction:** No
- **Drug Suspected:** Alcohol

#### SECTION 2

**Driver’s Identification**
- **Name:** Last, First, M
- **Address:** Street, City, State, Zip
- **Distraction:** Driver was distracted.
- **Drug Suspected:** Alcohol

#### SECTION 3

**Injured Taker**
- **Name:** Last, First, M
- **Address:** Street, City, State, Zip
- **Distraction:** Driver was distracted.
- **Drug Suspected:** Alcohol

#### SECTION 4

**Operator’s License Number:** OL
- **Restriction:** Class A
- **Class:** A
- **Status Type:** Compliant
- **Test Status:** None

#### SECTION 5

**Driver’s License Number:** OL
- **Restriction:** Class A
- **Class:** A
- **Status Type:** Compliant
- **Test Status:** None

#### SECTION 6

**Drug Test Results**
- **Type:** Alcohol
- **Value:** Present
- **Status Type:** Compliant
- **Test Status:** None

#### SECTION 7

**Other Evidence**
- **Location:** East 189th St
- **Vehicle:** Pick-up Truck
- **ECF:** Yes
- **Occupant:** Passenger

#### SECTION 8

**Emergency Contact**
- **Phone Number:** Include Area Code

#### SECTION 9

**Vehicle Information**
- **Make:** Ford
- **Model:** F-150
- **Year:** 2019
- **Color:** White
- **Tag:** OH1M

#### SECTION 10

**Incident Information**
- **Time:** 6:28 PM
- **Date:** 1/19/2021
- **Location:** 4245 East 189th St

#### SECTION 11

**Offense**
- **Description:** Failure to Control
- **Citation Number:** G20193572

#### SECTION 12

**Physical Evidence**
- **Alcohol Test:** Yes
- **Alcohol Test Type:** Interlock
- **Status Type:** Compliant
- **Test Status:** None

#### SECTION 13

**Medical Information**
- **Injuries:** 1 - FATAL
- **Injured:** Yes
- **Injured Taker:** Yes
- **Injured Taken By:** EMS AGENCY

#### SECTION 14

**Injuries**
- **Location:** Head / Neck
- **Injury:** 1 - FATAL
- **Injured:** Yes
- **Injured Taker:** Yes
- **Injured Taken By:** EMS AGENCY

#### SECTION 15

**Safety Equipment**
- **Helmet:** Yes
- **Glove:** Yes
- **Glasses:** Yes
- **Protective Gear:** Yes
- **Bicyclist:** Yes

#### SECTION 16

**Driver Distraction**
- **Distraction:** Driver was distracted.
- **Drug Suspected:** Alcohol

#### SECTION 17

**Vehicle Information**
- **Make:** Ford
- **Model:** F-150
- **Year:** 2019
- **Color:** White
- **Tag:** OH1M
<table>
<thead>
<tr>
<th>UNIT #</th>
<th>NAME: LAST, FIRST, MIDDLE</th>
<th>OCCUPANT / WITNESS ADDENDUM</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong></td>
<td><strong>HUDDLE</strong> LATASHA D</td>
<td><strong>20193314</strong></td>
</tr>
<tr>
<td>ADDRESS: STREET, CITY, STATE, ZIP</td>
<td><strong>5283 E 126TH ST 201 GARFIELD HTS OH 44125</strong></td>
<td><strong>21664780079</strong></td>
</tr>
<tr>
<td>INJURIES</td>
<td>5</td>
<td>SAFETY EQUIPMENT USED</td>
</tr>
<tr>
<td>INJURED TAKEN BY</td>
<td>EMS AGENCY (NAME)</td>
<td>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</td>
</tr>
<tr>
<td>SAFETY EQUIPMENT USED</td>
<td>DOT-COMPLIANT MC HELMET</td>
<td>SEATING POSITION</td>
</tr>
<tr>
<td>AIR BAG USAGE</td>
<td>0</td>
<td>EJECTION</td>
</tr>
<tr>
<td>TRAPPED</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>INJURIES</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>INJURED TAKEN BY</td>
<td>EMS AGENCY (NAME)</td>
<td>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</td>
</tr>
<tr>
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<td>DOT-COMPLIANT MC HELMET</td>
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<tr>
<td>AIR BAG USAGE</td>
<td>0</td>
<td>EJECTION</td>
</tr>
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<td>TRAPPED</td>
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<td>DOT-COMPLIANT MC HELMET</td>
<td>SEATING POSITION</td>
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<tr>
<td>AIR BAG USAGE</td>
<td>0</td>
<td>EJECTION</td>
</tr>
<tr>
<td>TRAPPED</td>
<td>0</td>
<td>1</td>
</tr>
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<td>2</td>
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<td>SEATING POSITION</td>
</tr>
<tr>
<td>AIR BAG USAGE</td>
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<td>EJECTION</td>
</tr>
<tr>
<td>TRAPPED</td>
<td>0</td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>INJURIES</th>
<th>SAFETY EQUIPMENT USED</th>
<th>SEATING POSITION</th>
<th>AIR BAG USAGE</th>
<th>EJECTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 - FATAL</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 - SUSPECTED SERIOUS INJURY</td>
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</tr>
<tr>
<td>3 - SUSPECTED MINOR INJURY</td>
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</tr>
<tr>
<td>4 - POSSIBLE INJURY</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 - NO APPARENT INJURY</td>
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<td></td>
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<td></td>
</tr>
</tbody>
</table>

| INJURED TAKEN BY | 1 - NOT TRANSPORTED / TREATED AT SCENE | 2 - EMS | 3 - POLICE | 9 - OTHER / UNKNOWN |

<table>
<thead>
<tr>
<th>GENDER</th>
<th>F - FEMALE</th>
<th>M - MALE</th>
<th>U - OTHER /UNKNOWN</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 - NOT DEPLOYED</td>
<td>2 - DEPLOYED FRONT</td>
<td>3 - DEPLOYED SIDE</td>
<td>4 - DEPLOYED BOTH FRONT/SIDE</td>
</tr>
<tr>
<td>5 - NOT APPLICABLE</td>
<td>9 - DEPLOYMENT UNKNOWN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 - NOT EJECTED</td>
<td>2 - PARTIALLY EJECTED</td>
<td>3 - TOTALLY EJECTED</td>
<td>4 - NOT APPLICABLE</td>
</tr>
<tr>
<td>1 - NOT TRAPPED</td>
<td>2 - EXTRICATED BY MECHANICAL MEANS</td>
<td>3 - FREED BY NON-MECHANICAL MEANS</td>
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</table>
**OHIO TRAFFIC CRASH REPORT**

**DIAGRAM / NARRATIVE CONTINUATION**

<table>
<thead>
<tr>
<th>LOCAL REPORT NUMBER</th>
<th>REPORTING AGENCY</th>
<th>DATE OF CRASH</th>
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</thead>
<tbody>
<tr>
<td>20193314</td>
<td>GARFIELD HEIGHTS PD</td>
<td>M 09 D 22 Y 2019</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>IN COUNTY OF</th>
<th>CRASH LOCATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>18</td>
<td>SR 17</td>
</tr>
</tbody>
</table>

***Owner of Pole #717215 located on SR 17 @ E.104th Street***

C.E.I.

6896 Miller Road

Brecksville Ohio 44141

1-800-589-3101

OFFICER'S SIGNATURE

BADGE NUMBER

055