

10052184W

P OH-1 (Rev. 10-99)

TRAFFIC CRASH REPORT



CRASH SEVERITY
 1 FATAL
 2 FATAL
 3 MURDER
 3

PRIVATE PROPERTY
 YES/NO
 1 NOT HIT/STP
 2 SOLID
 3 UNCLIPPED
 1

PHOTOS TAKEN
 ON-2 ON-3 ON-1P ON-1R
 X X

REPORTING AGENCY # 0HP91 STATE HWY PATROL 02 02 09012003

DAY OF WEEK 1902 MON NAME (OF CITY, VILLAGE OR TOWNSHIP) # X SPRINGFIELD 50 LATITUDE LONGITUDE 17

CRASH LOCATION: I.R. 76 (OHIO TURNPIKE) E.B. TYPE LOC 3 TYPE LOCATION POINT USED 1 NAMED STREET 2 NUMERED ROUTE 2 RAILROAD STREET 234.8 E
 COUNTY ROAD: 2 MW MILEPOST 235 REFERENCE POINT USED 01 STATE LANE 02 INTERSECTION 2 STREETS 03 COUNTY LANE 04 HOUSE NUMBER 05 TOWNSHIP BOUNDARY 06 MILE POST 07 CORPORATION LIMIT 08 PLACE NAME W/O REFERENCE 09 DIVERGENT 10 STREET OR ROUTE W/O REFERENCE

NAME (LAST, FIRST, MIDDLE) 0101 BURTON, OH HOME PHONE # WORK PHONE #

DATE OF BIRTH 02131977 26 F SEX F
 DL STATE OH LP STATE OH ISSUED/TAKEN BY 1 NONE 4 OTHER 2 EMS 5 UNKNOWN 3 POLICE 6 UNCLIPPED
 OWNER NAME (IF SAME, WRITE "SAME") SAME ADDRESS (STREET, CITY, STATE, ZIP CODE)

YEAR 1994 MAKE FORD MODEL Taurus COLOR BROWN INSURANCE COMPANY PROGRESSIVE TOWNSHIP SERVICE
 DAMAGE DESCRIPTION

NAME (LAST, FIRST, MIDDLE) 0202 APT TA ANN ARBOR MI HOME PHONE # WORK PHONE #

DATE OF BIRTH 02191970 33 M SEX M
 DL STATE MI LP STATE MI ISSUED/TAKEN BY 1 NONE 4 OTHER 2 EMS 5 UNKNOWN 3 POLICE 6 UNCLIPPED
 OWNER NAME (IF SAME, WRITE "SAME") SAME ADDRESS (STREET, CITY, STATE, ZIP CODE)

YEAR 1985 MAKE BMW MODEL 735E COLOR SILVER INSURANCE COMPANY AAA TOWNSHIP SERVICE JEWELL'S
 DAMAGE DESCRIPTION

NAME (LAST, FIRST, MIDDLE) 02141966 37 M SEX M
 ADDRESS (STREET, CITY, STATE, ZIP CODE) RICHMOND, VA HOME PHONE #

ADDRESS (STREET, CITY, STATE, ZIP CODE) ISSUED/TAKEN BY 1 NONE 4 OTHER 2 EMS 5 UNKNOWN 3 POLICE 6 UNCLIPPED
 TRANSPORTED BY INSURED TAKEN TO

SEATING POSITION	SAFETY EQUIPMENT	AIR BAG	AIR BAG DEPLOYED	EJECTION	TRAPPED	INJURED
01 Front - Left (MC Driver)	01 None Used	1 Not Deployed	1 Not Deployed	1 Not Ejected	1 Not Trapped	1 No Injury
02 Front - Right	02 Shoulder Belt Only	2 Deployed-Forward	2 In On Position	2 Totally Ejected	2 Ejected/By	2 Possible
03 Front - Left (MC Pass)	03 Lap Belt Only	3 Deployed-Side	3 In Off Position	3 Partially Ejected	3 Incapacitated	3 None
04 Second - Middle	04 Shoulder/Lap Belt	4 Deployed Both	4 Unknown	4 Not Applicable	4 Not Trapped	4 Incapacitated
05 Second - Right	05 Child Safety Seat	5 Not Applicable		5 Unknown	5 Freed By	5 Fatal Injury
07 Third - Left (MC Passenger/Seat Car)	06 MC Occupant	6 Unknown			6 Unknown	6 Unknown
08 Third - Middle	07 Use Unknown					
09 Third - Right	08 None-Used					
10 Sleeper Section Of Cab	09 None Used					
11 Enclosed Cargo Area	10 Protective Pads					
12 Unenclosed Cargo Area	11 Protective Clothing					
13 Trailing Unit	12 Latched					
14 Exterior	13 Other					
15 Other	14 Unknown					
16 Non-Motorist						
17 Unknown						

UNIT NUMBERS

DAMAGE AREA

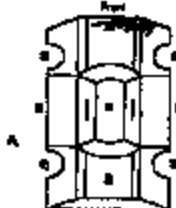
PRI-CRASH ACTIONS

SEQUENCE OF EVENTS

POSTED SPEED

DRUG TEST STATUS

01 02



01 01

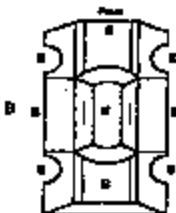
09 12
40

65 65

1 1

Non-Motorist Location

- 01 ALIGNED CROSSWALK AT INTERSECTION
- 02 INTERSECTION NO CROSSWALK
- 03 NON-INTERSECTION CROSSWALK
- 04 DIVERGENT ACCESS CROSSWALK
- 05 IN ROADWAY
- 06 NOT IN ROADWAY
- 07 MEDIAN (BUT NOT SHOULDER)
- 08 BLADE
- 09 SHOULDER
- 10 SIDEWALK
- 11 WITHIN 10 FEET OF ROADWAY (BUT SHOULDER, MEDIAN, SIDEWALK, BLADE)
- 12 BEYOND 10 FEET OF ROADWAY (BUT IN TRAFFICWAY)
- 13 OUTSIDE TRAFFICWAY
- 14 SHOULD USE PATHS ON TABLE
- 15 UNKNOWN



MOST DAMAGED AREA

- MOTORIST**
- 01 MOVEMENTS ESPECIALLY STRAIGHT AHEAD
- 02 BRAKING
- 03 CHANGING LANES
- 04 OVERTAKING/PASSING
- 05 TURNING RIGHT
- 06 TURNING LEFT
- 07 MAKING U-TURN
- 08 REVERSING TRAFFIC LANE
- 09 LEAVING TRAFFIC LANE
- 10 PULSED
- 11 SLOWING/STOPPING IN TRAFFIC
- 12 STOPPING
- 13 OTHER
- 14 UNKNOWN
- NON-MOTORIST**
- 15 STOPPING/CHANGING IN SPECIFIED LOCATION
- 16 WALKING, RUNNING, JOGGING, PLAYING, CYCLING
- 17 STOPPING
- 18 PULLING VEHICLE
- 19 APPROACHING/LEAVING VEHICLE
- 20 PLACING/WORKING ON VEHICLE
- 21 STOPPING
- 22 OTHER
- 23 UNKNOWN

- NON-COLLISION**
- 01 OVERTURN/FOLLOWER
- 02 FIRE/EXPLOSION
- 03 IMPACT
- 04 JACKKNIFE
- 05 CURBS/EQUIPMENT LOSS/TRIPP
- 06 EQUIPMENT FAILURE
- 07 SEPARATION OF WHEELS
- 08 RUN OFF ROAD RIGHT
- 09 RUN OFF ROAD LEFT
- 10 CROSS MEDIAN/CENTRALISE
- 11 OVERHILL REVERSITY
- 12 OTHER NON-COLLISION
- 13 UNKNOWN NON-COLLISION
- COLLISION W/ PERSON, VEHICLE, STRUCTURE, HOV, POLE**
- 14 PERSON/VEHICLE
- 15 PERSON/VEHICLE
- 16 RAILROAD VEHICLE
- 17 RAILROAD - FERRY
- 18 RAILROAD - DUCK
- 19 RAILROAD - OTHER
- 20 MOTOR VEHICLE IN TRAFFICWAY
- 21 PARKED MOTOR VEHICLE
- 22 WORK ZONE MAINTENANCE EQUIPMENT
- 23 OTHER MOVABLE OBJECT
- 24 UNKNOWN MOVABLE OBJECT

TRAFFIC CONTROL

12 12

- 01 NO CONTROL
- 02 STOP SIGN
- 03 YIELD SIGN
- 04 TRAFFIC SIGNAL
- 05 TRAFFIC FLASHERS
- 06 SCHOOL ZONE
- 07 RAILROAD CROSSING
- 08 RAILROAD FLASHERS
- 09 RAILROAD CROSSING
- 10 CONSTRUCTION BARRICADE
- 11 POLICE OFFICER
- 12 PAYMENT MAINTENANCE
- 13 CHANGING LANES
- 14 WALK/DRY WALK SIGNAL
- 15 TRAFFIC CONTROL DEVICE IMPROPERLY INSTALLED, CHECKED
- 16 OTHER

- 1 NONE
- 2 TEST FAILED
- 3 TEST OK, CONTAMINATED SAMPLE/UNUSABLE
- 4 TEST OK, RESULTS KNOWN
- 5 TEST OK, RESULTS UNKNOWN
- 6 UNKNOWN

DRUG TEST TYPE

1 1

- 1 NONE
- 2 ELIAD
- 3 URINE
- 4 OTHER

DRUG TEST 1&2 RESULT

TYPE OF UNIT

03 03

03 01

- MOTORIST**
- 01 BUS-COMMUTER
- 02 COMMUTER
- 03 MID SIZE
- 04 FULL SIZE
- 05 MINIVAN
- 06 JETTER LIGHT VEHICLE
- 07 PICKUP
- 08 FARM/PAV
- 09 SPECIAL UNIT TRUCK
- 10 TRUCK, 2 AXLES, 8 TIRES
- 11 TRUCK, 2 AXLES, 6 TIRES
- 12 TRUCK, 3 AXLES, 8 TIRES
- 13 TRUCK, 3 AXLES, 6 TIRES
- 14 TRUCK, 4 AXLES, 8 TIRES
- 15 TRUCK, 4 AXLES, 6 TIRES
- 16 WITH WHEEL ON CURB/PAVEMENT ONLY
- 17 TRUCK, 2 AXLES
- 18 MOTORCYCLE
- 19 MOTORCYCLE
- 20 SCHOOL BUS
- 21 COMMUTER BUS
- 22 PUBLIC BUS
- 23 OTHER BUS
- 24 POLICE VEHICLE
- 25 FIRE TRUCK
- 26 APPARATUS/VEHICLE
- 27 TAXI
- 28 MOTOR HOME
- 29 TRAILER
- 30 FARM VEHICLE
- 31 FARM EQUIPMENT
- 32 SHOVMACHINE
- 33 CONSTRUCTION EQUIPMENT
- 34 ALL OTHERS
- NON-MOTORIST**
- 35 ANIMAL VEHICLE
- 36 ANIMAL VEHICLE
- 37 BICYCLE
- 38 PEDESTRIAN
- 39 PEDESTRIAN
- 40 SKATEBOARD
- 41 OTHER NON-MOTORIST
- 42 UNKNOWN
- IN EMERGENCY RESPONSE**
- 1 NO
- 2 YES
- 3 UNKNOWN

03 01

CONTRIBUTING CIRCUMSTANCES

01 19

- MOTORIST**
- 01 NONE
- 02 FAILURE TO YIELD
- 03 RUN RED LIGHT, ON STOP SIGN
- 04 EXCEEDED SPEED LIMIT
- 05 URGENT SPEED
- 06 IMPROPER TURN
- 07 LEFT OF CENTER
- 08 FOLLOWED TOO CLOSELY/CLSA
- 09 IMPROPER LANE CHANGE/CHANGING OFF ROAD
- 10 IMPROPER PASSING
- 11 IMPROPER START FROM PARKED POSITION
- 12 STOPPED ON PAVED SURFACE
- 13 OPERATING VEHICLE IN BEARING, REVERSING, EMERGENCY, ROADWAY OR ADJACENT AREAS
- 14 STOPPING TO AVOID (DUE TO STOP, SURFACE, VEHICLE, OBJECT, NON-MOTORIST IN ROADWAY, ETC)
- 15 FAILURE TO CONTROL
- 16 VEHICLE OBSTRUCTION
- 17 OTHER OBSTRUCTION
- 18 FATIGUED/ASLEEP
- 19 OPERATING DEFECTIVE EQUIPMENT
- 20 LOAD EXCEEDED/CALCULATED/SHOULD
- 21 OTHER IMPROPER ACTION
- 22 UNKNOWN
- NON-MOTORIST**
- 23 NONE
- 24 IMPROPER CROSSING
- 25 DARTING
- 26 LYING AHEAD/ILLEGALLY IN ROADWAY
- 27 FAILURE TO YIELD RIGHT OF WAY
- 28 NOT VEHICLE (DANG. OBJECTS)
- 29 INATTENTIVE
- 30 FAILURE TO OBEY TRAFFIC SIGNAL, SIGNALS, OR OTHERS
- 31 WRONG SIDE OF THE ROAD
- 32 OTHER
- 33 UNKNOWN

POINT OF IMPACT

03 01

- 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 UNDERPASSAGE
- 12 LEAD/TAKEAWAY
- 13 TOTAL (ALL AREAS)
- 14 OTHER
- 15 UNKNOWN

ACTION

3 1

- 1 NON-CONTACT
- 2 NON-COLLISION
- 3 STRUCK
- 4 STRUCK
- 5 BOTH STRUCK AND STRUCK
- 6 UNKNOWN

VEHICLE DEFECT CODE (ONLY IF "X" SELECTED ABOVE)

11

- 01 TIRE SIGNALS
- 02 HEAD LAMPS
- 03 TAIL LAMPS
- 04 BRAKES
- 05 STEERING
- 06 THE BLOWOUT
- 07 WORK ON SLICK TIRES
- 08 TIRE/VALVE EQUIPMENT DEFECTIVE
- 09 MOTOR TROUBLE
- 10 DETACHED FROM FRONT CRASH
- 11 OTHER DEFECTS

FAULT HARMFUL EVENT

1 1

OF THE SEQUENCE OF EVENTS - WHICH ONE IS THE FIRST HARMFUL EVENT (1-4)

MOST HARMFUL EVENT

2 1

OF THE SEQUENCE OF EVENTS - WHICH ONE IS THE MOST HARMFUL EVENT (1-4)

SPEED DETECTED

1 1

SPEED

60
60

CONDITION

1 1

- 1 ANY WEATHER NORMAL
- 2 PHYSICAL IMPAIRMENT
- 3 HAZARDOUS
- 4 SLIPPERY
- 5 POLE, ASH, FRESH, FROZEN, ETC
- 6 UNDER THE INFLUENCE OF WEATHER/ROAD/TRAFFIC
- 7 OTHER
- 8 UNKNOWN

ALCOHOL/DRUG SUSPECTED

1 1

- 1 NONE
- 2 YES - ALCOHOL SUSPECTED
- 3 YES - HED NOT IMPAIRED
- 4 YES - DRUGS SUSPECTED
- 5 YES - ALCOHOL/DRUGS SUSPECTED
- 6 UNKNOWN

ALCOHOL TEST STATUS

1 1

- 1 NONE
- 2 TEST FAILED
- 3 TEST OK, CONTAMINATED SAMPLE/UNUSABLE
- 4 TEST OK, RESULTS KNOWN
- 5 TEST OK, RESULTS UNKNOWN
- 6 UNKNOWN

ALCOHOL TEST TYPE

1 1

- 1 URINE
- 2 URINE
- 3 URINE
- 4 BREATH
- 5 OTHER

ALCOHOL TEST RESULT

OCCURRENCE

1

- 1 ON ROADWAY
- 2 ON SHOULDER
- 3 IN MEDIAN
- 4 ON PAVEMENT
- 5 ON GROUND
- 6 OUTSIDE TRAFFICWAY
- 7 UNKNOWN

ROAD CONDITION

2

- 1 STRAIGHT LAINE
- 2 BROADWAY GRADE
- 3 CURVE LAINE
- 4 CURVE GRADE

ROAD CONDITIONS

02

- 01 DRY
- 02 WET
- 03 SNOW
- 04 ICE
- 05 SAND, MUD, DIRT, OIL, GRAVEL
- 06 WATER (STREETS, MEDIAN)
- 07 SLOTTED
- 08 DIRT
- 09 RUT, HOLES, BUMP, UNFINISHED
- 10 OTHER
- 11 UNKNOWN

* Secondary Road Conditions ONLY

DAMAGE SCALE

2 1

- 1 NONE
- 2 NON-FUNCTIONAL DAMAGE
- 3 FUNCTIONAL DAMAGE
- 4 DETAILED DAMAGE
- 5 STRUCK
- 6 UNKNOWN

Striking Vehicle Operating/Impaired

1

- 1 NO INCREASE OR OVERLOAD
- 2 UNKNOWN, COMPARTMENT IMPAIRED
- 3 UNKNOWN, NO COMPARTMENT IMPAIRED
- 4 UNKNOWN, COMPARTMENT IMPAIRED UNKNOWN
- 5 UNKNOWN, MOTOR VEHICLE IN TRAFFICWAY
- 6 UNKNOWN, OTHER TRUCK
- 7 UNKNOWN

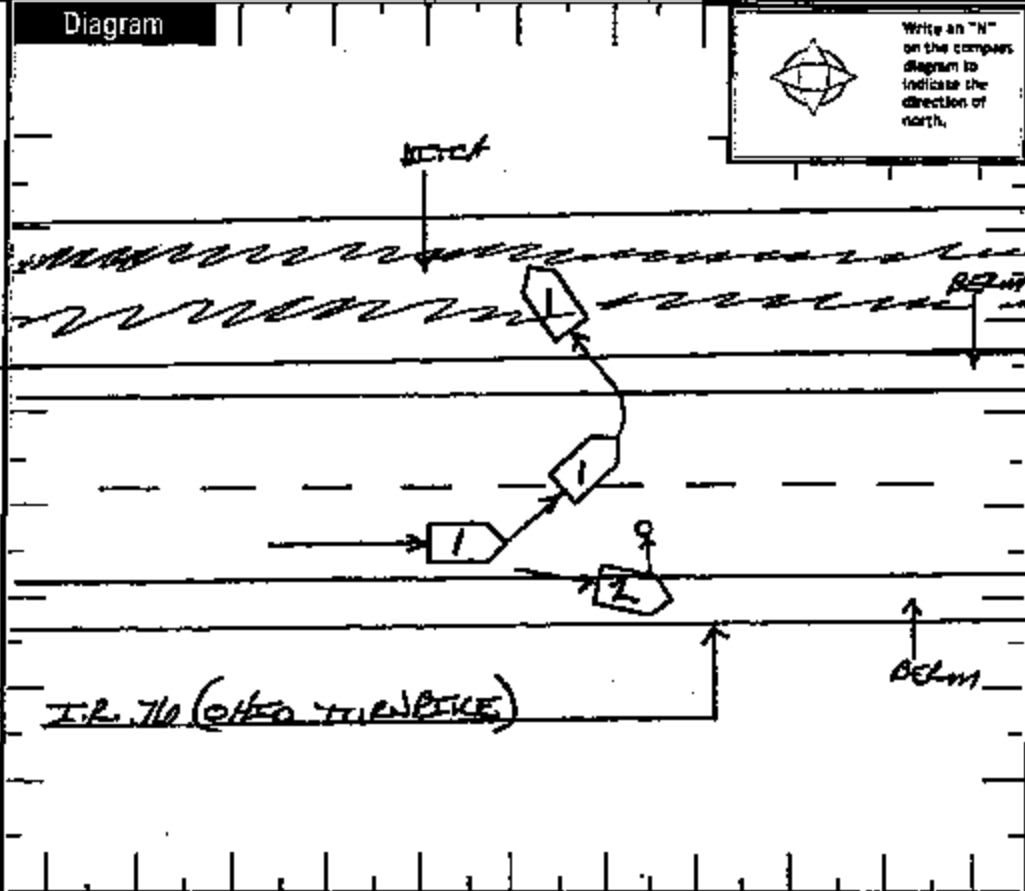
Narrative

UNITS #1 AND 2 WERE BOTH EASTBOUND ON THE OLD TURNPIKE WHEN UNIT #2 LOST THE LEFT FRONT WHEEL OF HIS VEHICLE. UNIT #1 THEN SWERVED TO AVOID THE WHEEL AND DROVE OFF THE NORTHSIDE OF THE ROAD WHERE SHE STUCK A BITCH.

MANNER OF COLLISION OR IMPACT SCHOOL BUS RELATED

- | | |
|---|----------------------------|
| 1 NOT COLLISION BETWEEN TWO VEHICLES IN TRANSPORT | 1 No |
| 2 REAR-TO-REAR | 2 Yes, Directly Involves |
| 3 HEAD-ON | 3 Yes, Indirectly Involves |
| 4 REAR-TO-REAR | 4 Unknown |
| 5 BRACING | |
| 6 ANGLE | Work Zone Related |
| 7 REVERSE, SAME DIRECTION | |
| 8 REVERSE, OPPOSITE DIRECTION | |
| 9 Unknown | |
-
- | | |
|----------------|--------------------------|
| WEATHER | Type Of Work Zone |
| 04 | 1 No |
| | 2 Yes |
| | 3 Unknown |
-
- | | |
|----------------|------------------------------|
| WEATHER | Type Of Work Zone |
| 04 | 1 Lane Closure |
| | 2 Lane Shift/Changeover |
| | 3 Work On Shoulder Or Median |
| | 4 Intermittent Moving Work |
| | 5 Other |
-
- | | |
|----------------|---------------------------------------|
| WEATHER | LOCATION OF CHAIN IN Work Zone |
| 04 | 1 Before First Work Zone Warning Sign |
| | 2 Advance Warning Area |
| | 3 Transition Area |
| | 4 Activity Area |
-
- | | |
|----------------|------------------------|
| WEATHER | WORKERS PRESENT |
| 04 | 1 No |
| | 2 Yes |
| | 3 Unknown |

Diagram



Write an "N" on the compass diagram to indicate the direction of north.

Truck/Bus

THE CHAIN 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 BEING USED FOR AT LEAST 8 PERSONS, INCLUDING DRIVER.

A AND D THE CHAIN 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 MECHANICAL DAMAGE OR REQUIRED EXTENSIVE ASSISTANCE BEFORE PROCEEDING UNDER ITS OWN POWER.

Company (From Business Records) _____ Dispatch Phone _____
 Address (Street, City, St, Zip Code) _____

UN DOT	ICC MC	PUCO	TRAILER LP ST	TRAILER LP TRAIL	TRAILER LP F
CARGO BODY TYPE	01 NOT APPLICABLE	02 FOLI	03 CONCRETE MIXER	04 AUTO TRANSPORTER	05 GARAGE/SHOP
	06 BUS (P-13 INCLUDING DRIVER)	07 CARGO TANK	08 AUTO TRANSPORTER	09 AUTO TRANSPORTER	10 AUTO TRANSPORTER
	08 VAN/ENCLOSED BOX	09 PLATON	11 GARAGE/SHOP	12 OTHER	13 UNKNOWN
	04 GRANT/CHASSIS/SEMI	06 DUMP			
Weight (GVWR)	1 LESS THAN 10,000	2 10,001 - 20,000	3 MORE THAN 20,000	CDL Class	Hazardous Materials Placard
	1 CLASS A	2 CLASS B	3 CLASS C	4 CLASS D	5 CLASS E
	1 No	2 Yes	3 Unknown		Hazardous Materials Released
	1 No	2 Yes	3 Not Applicable	4 Unknown	

Police Action

09012003 / 1902 1902 1918 2021 79

Dispatch: 1902, Arrived: 1918, Cleared: 2021, Other: 79

Officer's Name: TPR H.M. [Signature] 1510

Checked By: 476

Date Report Filed: 09062003

Report Taken By: 1 POLICE AGENCY 2 MOTORIST

Report Taken At: 1 SCENE 2 STATION 3 OTHER

OHIO TRAFFIC ACCIDENT -- DIAGRAM/NARRATIVE CONTINUATION

OH-2 (Rev. 1/82)

LOCAL REPORT NUMBER [REDACTED]	REPORTING AGENCY STATE HWY PATROL	DATE OF ACCIDENT M 9 10 1 03
IN COUNTY OF MAHONING	ACCIDENT LOCATION I.R. 76 (OHIO TURNPIKE) E.B. MILEPOST 234.8	

DAMAGE TO UNIT #1
A. FRONT BUMPER

DAMAGE TO UNIT #2
A. NONE

WEATHER : HEAVY RAIN
ROADWAY : ASPHALT

JUST A FEW HOURS PRIOR TO THE CRASH UNIT #2 HAD HIS LEFT FRONT TIRE CHANGED BY MADISON SERVICE AT THE 41 MILEPOST ON THE OHIO TURNPIKE. BY THE TIME UNIT #2 MADE IT TO THE 234.8 MILEPOST THE WHEEL FELL OFF CAUSING THE CRASH THERE.

OFFICERS SIGNATURE



BADGE NO.

570

LOCAL REPORT NUMBER

REPORTING AGENCY

STATE NEW PATROL

DATE OF CRASH

M 9 10 / 1983

FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, [REDACTED]

HEREBY MAKE THIS VOLUNTARY STATEMENT TO

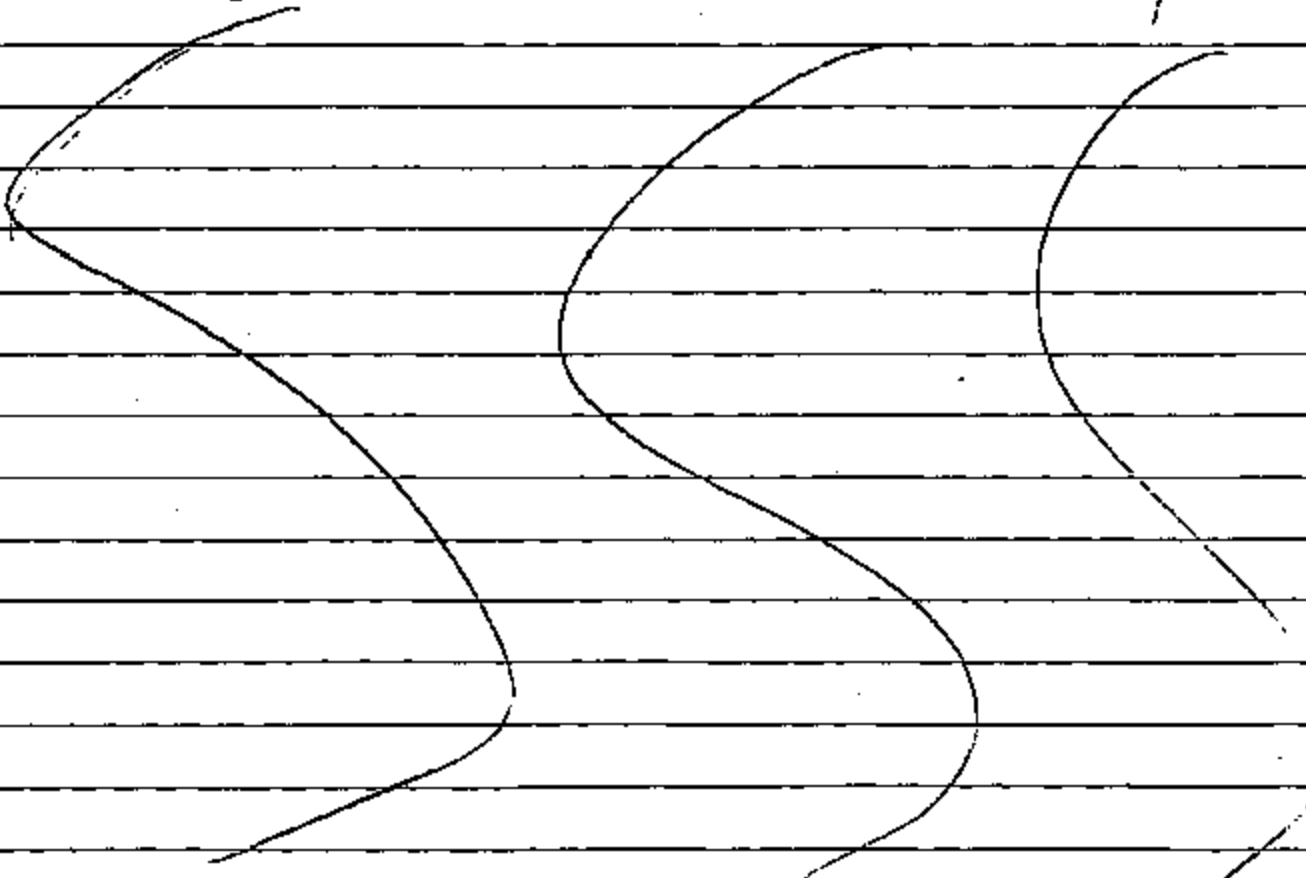
P.L. H. M. PETERSON

(OFFICER'S NAME)

AT CRASH SCENE

(LOCATION)

While travelling east on the Ohio Turnpike, at approximately 60 m.p.h., the wheel of the car travelling in front of me (both cars in right hand lane) began to fall off. As the wheel fell off, I braked to avoid the wheel + the car, but my car spun into the middle of the road, ^(due to rainy conditions) and I accelerated into the left median strip.



ADDRESS OF WITNESS

SIGNATURE OF WITNESS

OFFICER'S SIGNATURE

[Handwritten signature of P.L. H. M. Peterson]

LOCAL
REPORT
NUMBERREPORTING
AGENCY

STATE HIGH PATROL

DATE OF CRASH

M 9 D 1 Y 03

FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, [REDACTED] (PRINTED) HEREBY MAKE THIS VOLUNTARY STATEMENT TO

T. J. J. [REDACTED]
(OFFICERS NAME)AT CRASH SCENE
(LOCATION)

I was travelling east on Ohio TURNPIKE in my BMW 735i at around 60 MPH at around 7:00 PM on Sept 1st, 2003. I was going in the center lane on a 3 lane Highway, when suddenly my left hand side front tire went out and the car went down on the side (with only 3 tires). I saw sparks coming out and I saw in the rear view mirror and immediately pull to the right side shoulder. (No vehicle was coming from right lane) The car started shaking a bit 2 seconds before and as I applied the brake the tire immediately went out and I saw it spin down the road ahead of me on the highway. A lady was coming behind me in a grey car and I saw her car spinning in the rear view mirror and she went into the ditch in the middle of the highway. When I vehicle came to a complete stop, I leaned out and checked my wheels then went back towards the vehicle. Raymond Newman (Chardhock) was also in my car both of us were wearing seat belts. It was raining today too.

ADDRESS
OF
WITNESSSIGNATURE
OF
WITNESS

OFFICERS SIGNATURE

T. J. J. [REDACTED]

LOCAL REPORT NUMBER

[REDACTED]

REPORTING AGENCY

STATE HIGH PATROL

DATE OF CRASH

M 9 10 1 83

FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, [REDACTED] HEREBY MAKE THIS VOLUNTARY STATEMENT TO

(PRINTED)

THH H. M. PATROL

(OFFICER'S NAME)

AT

CLASH SCENE

(LOCATION)

ON EAST 76 TRUCK CAME OFF CAR CROSS IN FRONT OF THE CAR CAUSING THE CAR TO GO IN DITCH

Q WHAT LANE WAS THE BMW IN?

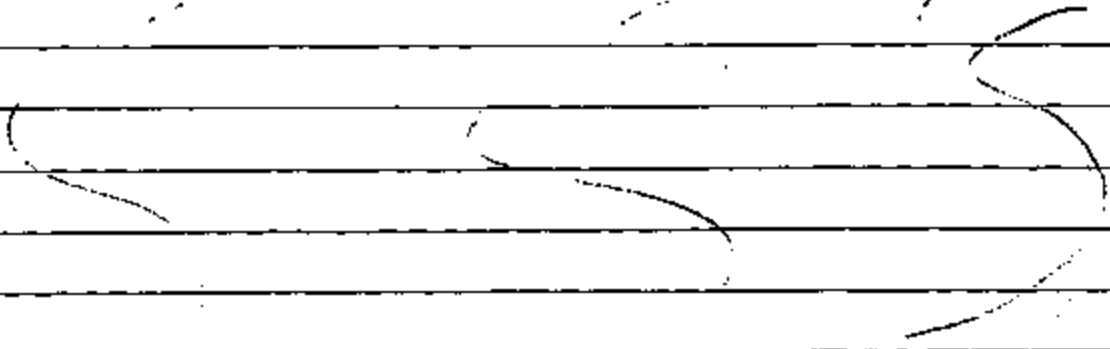
A. THE RIGHT LANE, BOTH OF THEM

Q I SAW THE WHEEL COME OFF TO CROSS

IN FRONT OF THE OTHER CAR AND SHE HIT HER BRAKES TO AVOID THE WHEEL AND SPUN OUT INTO THE DITCH.

Q WHAT LANE DID THE WHEEL END UP IN?

A. I WENT OFF THE OTHER CAR AS HE STARTED TO FALL OFF ON THE BRK AND THE WHEEL ENDED UP IN FRONT OF HER CAR



ADDRESS OF WITNESS

[REDACTED]

SIGNATURE OF WITNESS

[REDACTED]

OFFICER'S SIGNATURE

THH H. M. PATROL