



U.S. Department  
of Transportation  
  
National Highway  
Traffic Safety  
Administration

**DOT Auto Safety Hotline**  
**Vehicle Owner's Questionnaire**  
To Report Vehicle Safety Defects  
1-888-DASH-2-DOT  
(1-888-327-4236)  
INTERNET [www.nhtsa.dot.gov/hotline](http://www.nhtsa.dot.gov/hotline)

FOR AGENCY USE ONLY 100148

Date Received

30-MAY-2006

Repository

Reference No.  
10158595

**OWNER INFORMATION (Type or Print)**

Name [REDACTED]  
Address [REDACTED]  
City VIRGINIA BEACH State VA Zip Code [REDACTED]

Daytime Telephone Number [REDACTED]

E-mail Address [REDACTED]

Evening Telephone Number [REDACTED]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  YES  NO  
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.  
Signature of Owner \_\_\_\_\_ Date 5/1/06

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1RF120610 [REDACTED]  
Make MONACO Model DIPLOMAT Model Year 2001  
Date Purchased 02-AUG-01 Dealer's Name and Telephone Number DIXIE RV Engine: No: Cylinders Fuel Type: Diesel  
Original Owner  Dealer's City NEWPORT NEWS State VA Zip Code [REDACTED]  
Transmission Type AUTOMATIC  Antilock Brakes Powertrain REAR WHEEL DRIVE  
 Cruise Control Vehicle Component Code 162300 STRUCTURE:BODY;DOOR  
Multiple Failure: 1

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Incident Date(s) 26-SEP-2004 Failure Mileage 36000 Failure Speed 45

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make [REDACTED] Tire Model (Name or Number) [REDACTED] Tire Size (Example P215/65R15) [REDACTED]  
DOT No. (Example: DOTM4SABC036)  Original Equipment  Prior Repair Failure Location: [REDACTED]  
Tire Component Code [REDACTED] Tire Failure Type [REDACTED]

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make: [REDACTED] Date Manufactured: [REDACTED] Model No./Name: [REDACTED]  
Seat Type: [REDACTED] Installation System: [REDACTED]  
Child Seat Component Code: [REDACTED] Failed Part: [REDACTED]

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash  Yes  No Fire  Yes  No  
Number of Persons Injured [REDACTED] Number of Deaths 1 Reported to Police Y

Narrative Description of Incident(s), Crash(es), and Injury(ies).  
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure;  
i.e. parts repaired or replaced (and if old part is available).

DT: THE CONTACT STATED WHILE THE DRIVER OF THE COACH WAS DRIVING AT 45 MPH THE RIGHT FRONT TIRE BLEW OUT IMMEDIATELY AFTERWARDS THE LEFT REAR TIRE BLEW. THIS CAUSED THE DRIVER TO LOSE CONTROL OF THE COACH. THE COACH WENT UP ON AN EMBANKMENT. THE PASSENGER IN THE COACH WAS NOT IN A SEATBELT. THE DOOR WAS RIPPED FROM THE HINGES THROWING THE PASSENGER ONTO THE EMBANKMENT. THE PASSENGER WAS RAN OVER BY THE COACH AND BY THE VEHICLE THE COACH WAS TOWING. THE PASSENGER WAS KILLED IN THE ACCIDENT. THE COACH WAS INSPECTED BY A FORENSIC EXPERT AND DETERMINED THE WELDING ON THE DOOR FRAME WAS SHAVED OFF SO THE DOOR WOULD FIT INTO THE FRAME CAUSING THE DOOR TO BE WEAKENED.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974-Public Law 93-579 This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond to this questionnaire. Your response may be used to assist the NHTSA in determining whether a Manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

**INVESTIGATION OF THE RUTH SHEEHAN  
FATAL INJURY INCIDENT**

**By:**

**LANCE WATT**

**MARCH 7, 2006**



**Robson Forensic**  
INCORPORATED

# INVESTIGATION OF THE RUTH SHEEHAN

## FATAL INJURY INCIDENT

### ENGINEER'S PRELIMINARY REPORT

MARCH 7, 2006

#### 1. INTRODUCTION.

On September 26, 2004 [REDACTED] was a front seat passenger in a 2001 Monaco Diplomat motorhome which was being driven by Dennis D. Lilleflore on I-64 westbound near Route 799 in Louisa County, Virginia. The motorhome experienced a blowout on its right rear outer tire which resulted in loss of control of the vehicle followed by a subsequent impact of the motorhome's right front corner with an embankment. The impact with the embankment caused the front passenger door assembly to separate from the motorhome, and [REDACTED] to be ejected and run over by either the motorhome or, the vehicle in tow.

The purpose of my investigation was to determine if a defect in either design or workmanship was the cause of the passenger door separating from the motorhome, and if a defect in the right rear, outer tire, was the cause of the blowout.

#### 2. AVAILABLE INFORMATION.

1. Commonwealth of Virginia, State Police Crash Report CS# 04-21-04-5106 by Trooper J. D. Amick, and scene mapping by Troopers Malcolm S. Austin and Kevin S. Frazier.
2. 37 Color Photographs taken by State Police of scene and victim.
3. Commonwealth of Virginia, Certificate of Death dated September 27, 2004.
4. License Application for the involved motorhome.
5. Written Statement of Dennis Lilleflore dated November 18, 2004.
6. Field notes of the December 14, 2004 inspection of the motorhome conducted by John G. Sims, P.E. of Robson Lapina, Inc.
7. CD containing photographs of the motorhome taken by John G. Sims.
8. Notes of interview of Dennis Lilleflore by John G. Sims, P.E. dated 2/14/05.
9. My inspection of the motorhome on January 12, 2006.



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### 3. DESCRIPTION OF THE INCIDENT.

The Police Report states:

Vehicle #1 lost control due to tire blowout, ran off road right, ejecting passenger after striking embankment. Vehicle #1 towing a passenger vehicle.

I-64 in the area of the incident is a divided highway with 2 travel lanes in each direction. It has an asphalt surface with no defects. A grass and wooded median separates east and westbound traffic. The roadway is straight with a slight downward elevation. The road surface was dry, the weather cloudy, and it was daylight.

In the westbound direction there is a about a 10-foot 6-inch wide paved shoulder, which abuts a 12-foot 8-inch wide grass shoulder that drops about 8-inches in elevation from roadway level into a concrete drainage swale. An embankment that intersects the drainage swale rises about 23-inches over a distance of about 4-feet. The traveled roadway width is 23-feet 8-inches, the right travel lane is 11-feet 9-inches wide, and there is a 3-foot 4-inch paved shoulder abutting the median.

From the first roadway mark in the left travel lane, the motorhome traveled about 241-feet 7-inches as it crossed and left the right-hand travel lane. It traveled about another 80 feet on the paved shoulder, about 115 feet on the grass shoulder before striking the embankment, and about another 764-feet before coming to rest with its right side wheels in the drainage swale.

A door from the motorhome was reported by Police as being found about 444-feet beyond the point where the embankment was impacted. Scene photographs show the screen door assembly being located in about this location. The deceased was at rest about 125-feet beyond the noted door resting point, and photographs show the main passenger door assembly being located on the embankment beside the deceased to the west.

Other than measuring the scene, the Police performed no reconstruction of the incident.

### 4. VEHICLE INFORMATION.

Manufacturer: Monaco Coach Corporation.

Model: Diplomat LE.

Unit #: 122176.

Serial #: [REDACTED]

RVIA #: 7060485.

Date of Manufacture: 11/2000.

Year Model: 2001.

Chassis: Monaco Roadmaster.

Model: R4R

VIN: 1RG12061012 [REDACTED]



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Gross Vehicle Weight Rated: 32,800 pounds.  
Gross Axle Weight Rated – Front: 12,800 pounds.  
Gross Axle Weight Rated – Rear: 20,000 pounds.  
Tire size: 275/70R22.5 Load Range "H"  
Tire Manufacturer: Good Year.  
Tire Model: G159 Unisteel.  
Tire Inflation Pressure – Front: 120 P.S.I. cold.  
- Rear: 100 P.S.I. cold.

Wheel Size: 22.5 x 8.25.

Wheels Front: Alcoa Aluminum, Hub Pilot.

Wheels Rear Outer: Alcoa Aluminum, Hub Pilot.

Wheels Rear Inner: Steel, Hub Pilot.

Engine: Cummins, B-5.9 Diesel, 300 H.P.

Transmission: Allison, World 6 Speed Automatic.

Foundation Brakes: Air, "S" Cam, drum.

The motorhome was equipped with two slide outs, one in the main living/dining area on the left side, and one in the rear bedroom, also on the left side.

The chassis has steel understructure framing below the floor area. The body structure elements are sandwich panels with aluminum framing members. The body structure elements are joined together and attached to the chassis understructure framing.

## 5. INSPECTION RESULTS AND ANALYSIS.

At the time of my inspection, there was no wheel/tire assembly mounted on the left front hub (Photo 1). I questioned personnel at the storage lot and was informed that due to the soft ground condition at the time the motorhome was put in storage, and in order to move into position, they had to remove the left front wheel/tire assembly and remount it at the right rear outer wheel position.

The right rear outer tire of the motorhome suffered penetrating mechanical damage to its outer sidewall in several locations resulting in it becoming deflated (Photos 2a - 2e). The tire, while still on the rim, left roadway marks until it became demounted from the rim. As the tire demounted from the rim, the rim's outer flange and bead lip area were deformed in several locations. The rim did not contact the road surface at any time. The right rear inner tire was inflated and undamaged.

The damaged right rear outer wheel rim had been placed in the motorhome interior (Photo 3). The demounted tire had been previously obtained and secured as evidence by John Sims during his inspection, and was subsequently delivered to Robson Forensics' Lancaster location for evidence storage and inspection.

Photographic evidence shows that the demounted tire impacted and deformed the rear, full width mud flap as it passed under the motorhome. The vehicle-in-tow ran over the tire causing its right front tire to become deflated. The impact of the vehicle-in-tow with



the tire from the motorhome bent the tow bar arms (Photos 4 & 5), contributing to the loss of control of the motorhome.

Police scene photographs show pieces of tire debris on the roadway along with a length of inner tread rib from the left rear outer tire that was also retrieved as evidence by John Sims. The position of the tire debris on the roadway in relationship to the marks deposited by the deflated right rear outer tire indicates that the left rear outer tire had started to shed portions of its tread face shortly after the right rear tire had become deflated. The tire debris was located in the right travel lane and on the paved shoulder up to the point that the motorhome entered the grass shoulder area.

Police photographs show that the left rear outer tire's sidewall and tread shoulder area were not visibly damaged with the motorhome in the at rest position. However, at some time the motorhome had been towed with the rear wheels in contact with the road, and during this towing, the left rear outer tire tread became totally separated from the carcass with portions of the tire sidewall also being torn away (Photo 6). As the separating tread whipped around, it deposited rubber scrub marks on the side of the body of the motorhome around the wheel arch (Photos 7 & 8). Tread separation like this typically occurs from heat generated due to either an under inflated or overloaded tire, but can also be initiated by damage resulting from contact with roadway debris.

The left rear wheel rim in the Police photographs showed abrasion marks around the bead lip circumference indicating that it had rubbed along a curb or similar fixed object at some time, and those abrasions were also existent at the time of my inspection (Photo 7). The left rear inner tire was inflated and undamaged.

There was no pre crash tire defects present that contributed to the loss of control of the motorhome.

The step cover in front of the passenger seat was retracted exposing the entry stepwell (Photo 9). The step cover when deployed covers the entry stepwell and provides a floor in front of the passenger seat. It also provides for additional structural load transfer across the stepwell in frontal crashes. The deployable entry step when stowed, is tucked up behind, and protected by, the chassis frame structure.

The motorhome impacted the embankment with its front right corner before being deflected counterclockwise and running along the embankment face with its right side wheels in the drainage swale to its final rest position. The vehicle-in-tow remained coupled to the motorhome throughout the duration of the incident.

Impact of the motorhome with the embankment resulted in deformation of the chassis frame structure at the right front corner (Photo 10). The lower passenger door frame threshold and the bottom closeout member of the door assembly were torn away from ground contact (Photo 11), resulting in structural separation of the leading edge of the passenger door assembly, including its hinges, the lower portion of the body "A" Pillar, and the screen door assembly, from the body structure (Photos 12, 13 & 14).

As the passenger door assembly separated from the body structure, the powered deployable entry step, believing that the entry door had been opened, automatically deployed downward and out digging into the embankment and causing the step and its support mechanism to be bent rearward (Photos 15, 16, & 17). The now deployed entry step was forced backwards into the tread face of the right front tire, carved the tread loose from the carcass (Photo 18), and resulted in the right front tire becoming deflated.

The passenger door release handle was not locked at the time of the incident; however the dead bolt was engaged in the "B" Pillar receiver (Photo 19). As the door assembly became structurally detached at the "A" Pillar, it snapped the strikers off at the "B" Pillar (Photos 20 & 21), and bent the exposed shank of the deadbolt (Photo 22). The latches in the door assembly were undamaged and were fully functional when closed and triggered by the door release handle (Photos 23 & 24). The lock for the door release handle was tested and found to be functioning properly.

No physical damage occurred to the passenger door assembly with the exception of its bottom closeout member being torn away on impact with the embankment (Photos 11, 12, 13, 14, 25 & 26). The screen door assembly was essentially undamaged with the exception of two broken welds on the leading, hinge edge member, which resulted in its separation from the passenger door assembly (Photo 12).

The passenger door assembly remained temporarily attached to the body after structural separation by means of the top mounted limit restraint arm. Scratches on the right side body sidewall (Photo 27) indicate that the door assembly flailed around before becoming separated from the limit restraint arm and falling to the ground (Photos 28 & 29).

The deceased had nothing to brace or support herself on with the stepwell cover being retracted and fell into the stepwell when the motorhome impacted the embankment. This resulted in her being ejected out through the entry door aperture as the passenger door assembly became structurally separated from the motorhome body structure.

The "A" Pillar is a fabricated assembly consisting of various sections of aluminum extrusion welded together (Photos 30 & 31). The upper end of the "A" Pillar is angled down and rearward from the roof line to the belt line area, where it is then welded to the vertical "A" Pillar section. Welds at this structural joint area and other joint areas in the vicinity were of poor quality with little to no penetration into or through the parent metal (Photos 30, 31, 32, 33, 34 & 35). The protruding weld bead areas where body panel structure was adhesively attached to the "A" Pillar had been ground flush with the parent metal face, further reducing the weld bead cross sectional area (Photo 36).

The design of the existing butt welded joint area in the "A" Pillar could have been structurally enhanced by the addition of gussets and/or fish plates.

Alternatively, the "A" Pillar could have been designed and fabricated as a one piece assembly and formed to final configuration at the belt line area so that structural reliance on a poorly executed butt welded joint was not a factor.



Due to the moment arm length from the stepwell lower step up to the belt line area, the "A" Pillar joint area, even if being properly and effectively welded and gusseted/fish plated, would not have been capable of preventing all chassis frame deformation when impact with the embankment occurred. It would however have prevented structural failure of the "A" Pillar at the belt line, which became the primary separation point of the leading edge area of the passenger door assembly from the body structure.

Without separation of the passenger door assembly from the "A" Pillar, the door would have remained within the door aperture thereby allowing distribution of the horizontal impact loading through the door assembly and into the "B" Pillar and body sidewall structure.

Without separation of the passenger door assembly from the body structure, the entry step would not have deployed, and damage to the chassis structure to which the step is attached would have been minimized from that which actually resulted.

Design and manufacturing defects present in the "A" Pillar welds were the primary cause of the passenger door assembly separating from the motorhome body structure.

Although there are no crash worthiness standards applicable to motorhomes, frontal crashes similar to that which occurred in this case are foreseeable. Analytical tools are readily available to simulate impact loads, determine their effects, and structurally evaluate designs before the vehicle is manufactured.

## **6. FINDINGS.**

Within the bounds of reasonable engineering certainty, and subject to change if additional information becomes available, it is my professional opinion that:

1. There was no pre crash tire defects present that contributed to loss of control of the motorhome.
2. The design of the existing butt welded joint in the "A" Pillar could have been structurally enhanced by the addition of gussets or fish plates.
3. Alternatively, the "A" Pillar could have been designed and fabricated as a one piece assembly and formed to final configuration at the belt line area so that structural reliance on a poorly executed butt welded joint was not a factor.
4. Without separation of the passenger door assembly from the "A" Pillar, the door assembly would have remained within the door aperture thereby allowing distribution of the horizontal impact loading through the door assembly and into the "B" Pillar and body sidewall structure.

5. Without separation of the passenger door assembly from the body structure, the entry step would not have deployed, and damage to the chassis structure to which the step is attached would have been minimized from that which actually resulted.
6. Design and manufacturing defects in the "A" Pillar welds were the primary cause of the passenger door assembly separating from the motorhome body structure.
7. Although there are no crash worthiness standards applicable to motorhomes, frontal crashes similar to that which occurred in this case are foreseeable. Analytical tools are readily available to simulate impact loads, determine their effects, and structurally evaluate designs before the vehicle is manufactured.

[REDACTED]

Heavy Truck and Bus Expert



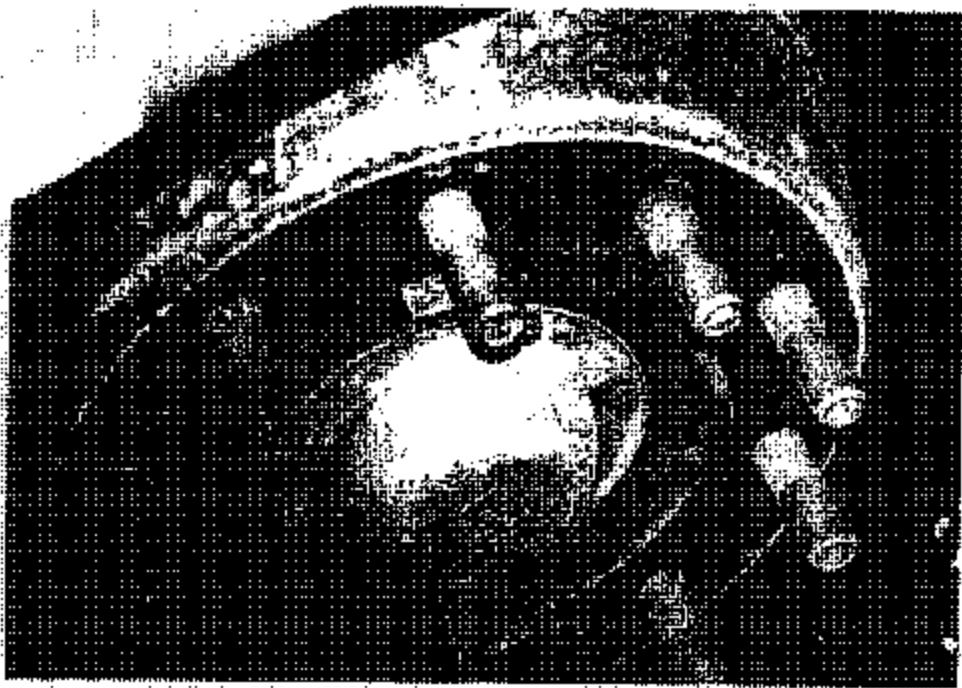


PHOTO 1.



PHOTO 2(a).



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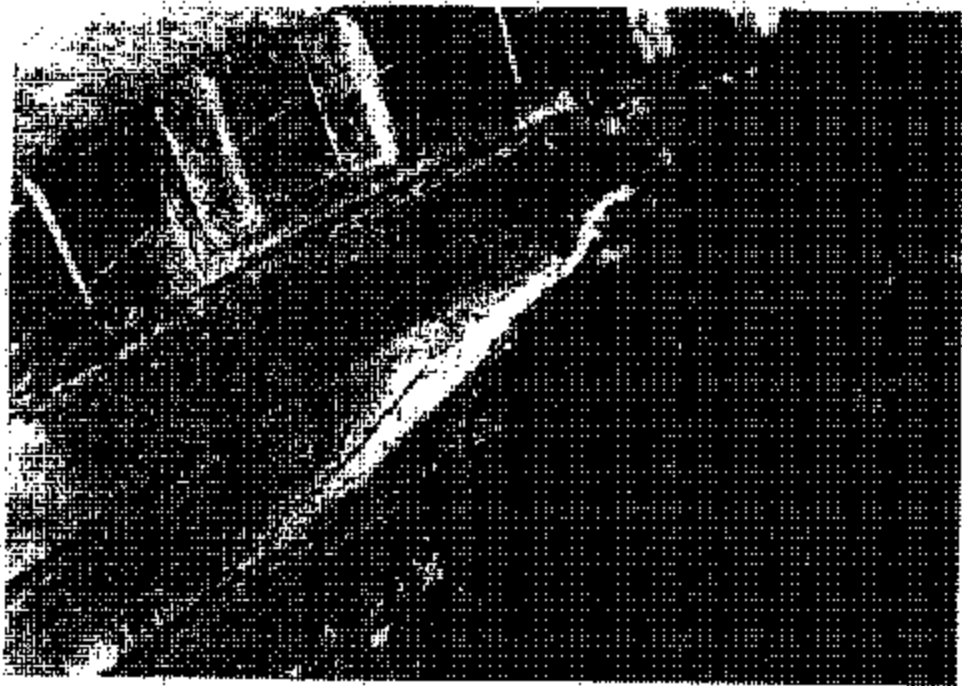


PHOTO 2(b).

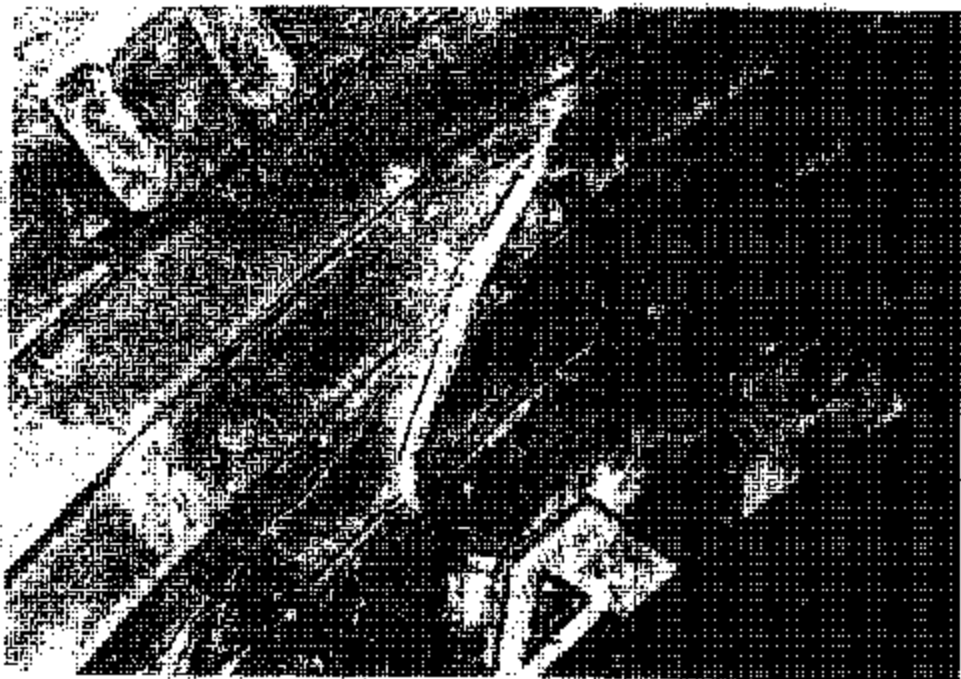


PHOTO 2(c).



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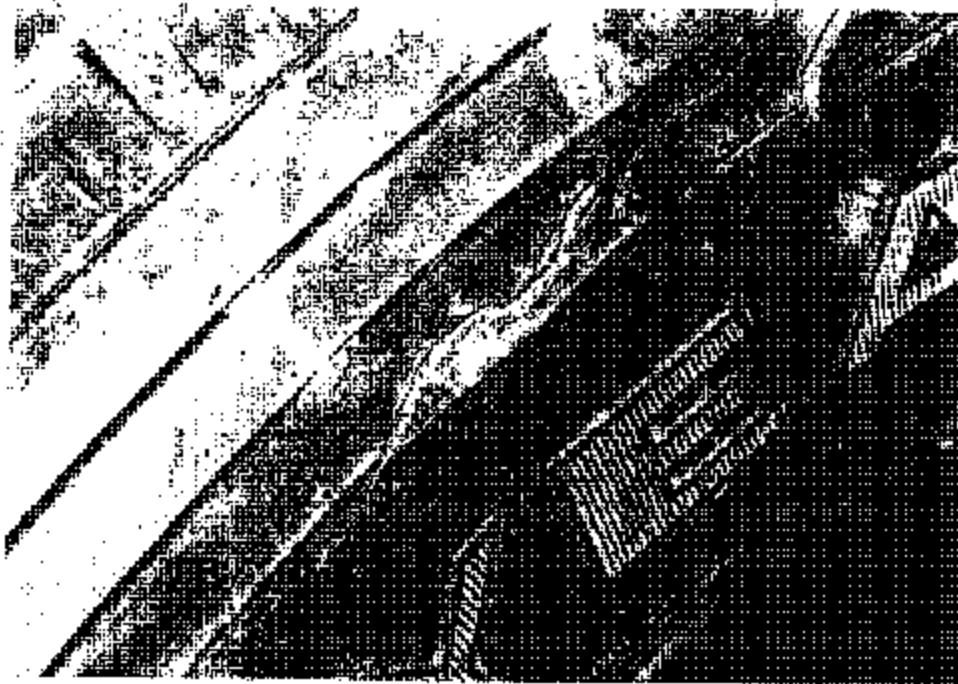


PHOTO 2(d).

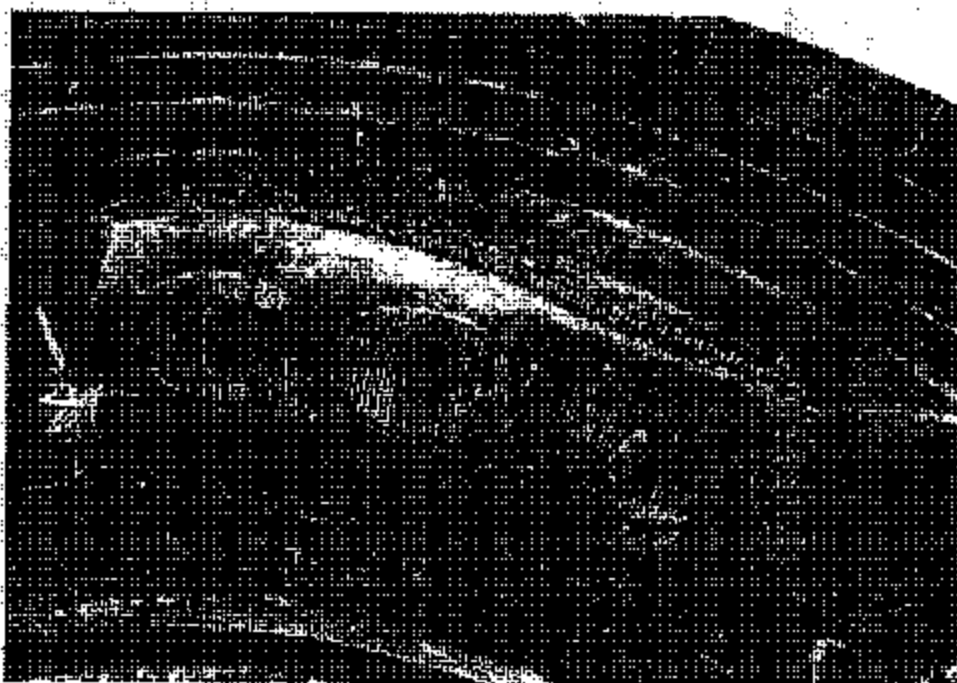


PHOTO 2(e).



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PHOTO 3.

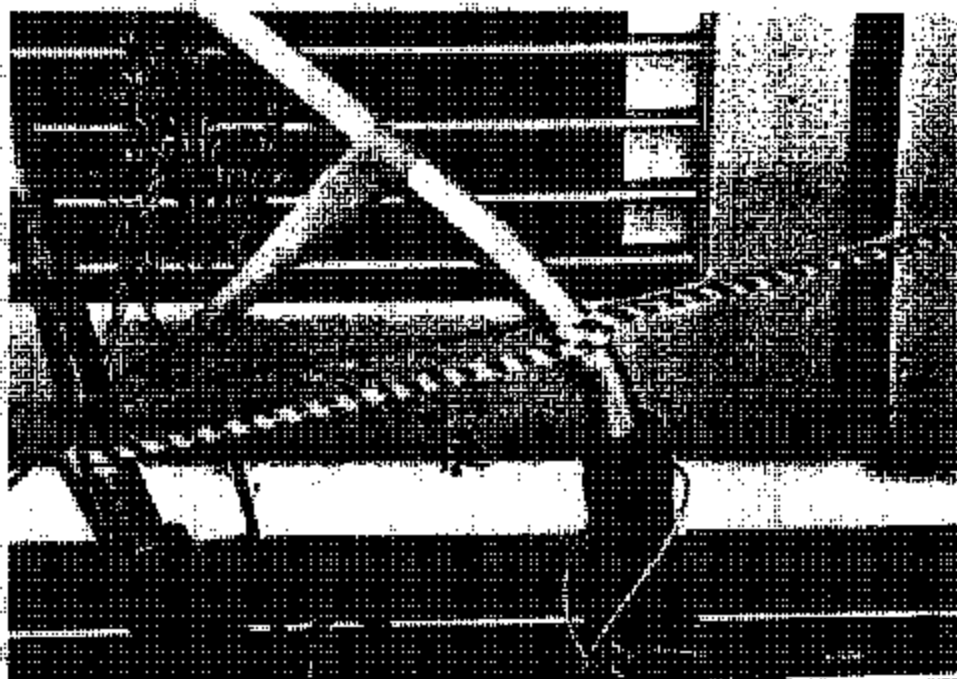


PHOTO 4.



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PHOTO 5.

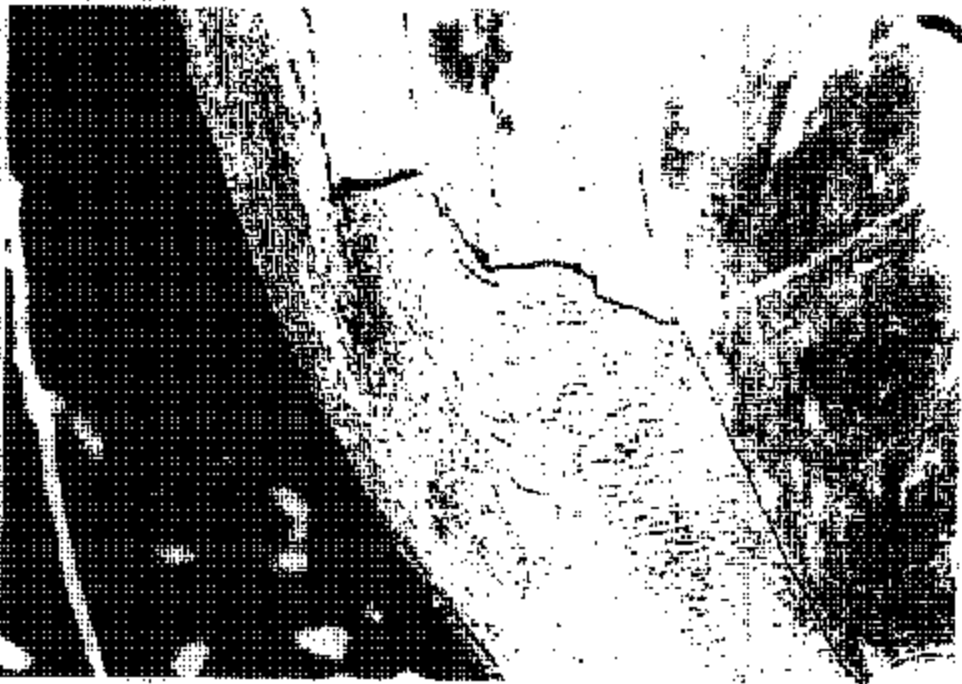


PHOTO 6.



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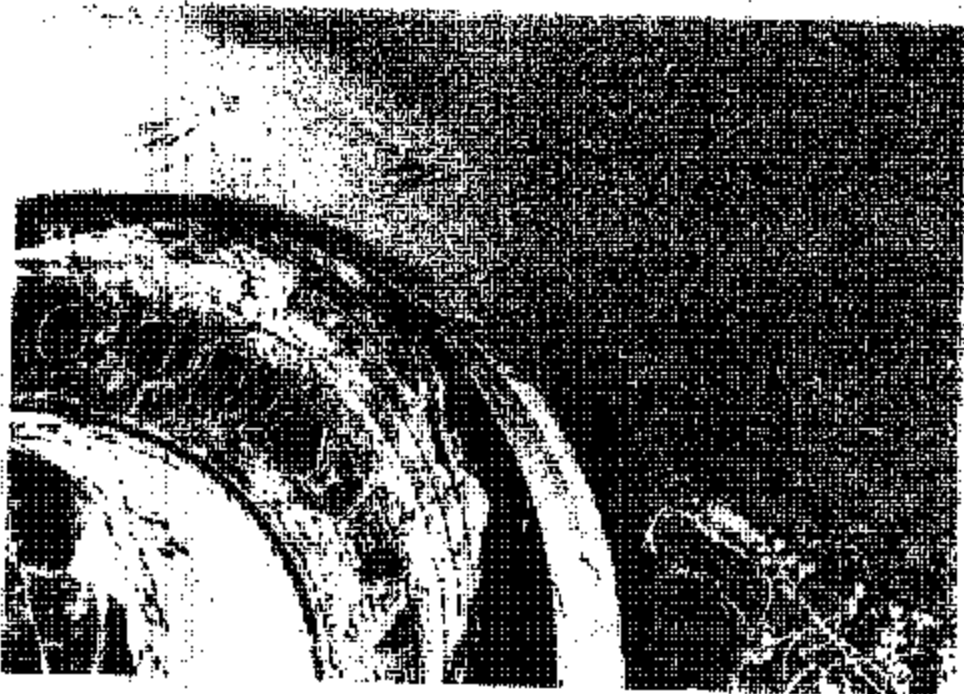


PHOTO 7.



PHOTO 8.



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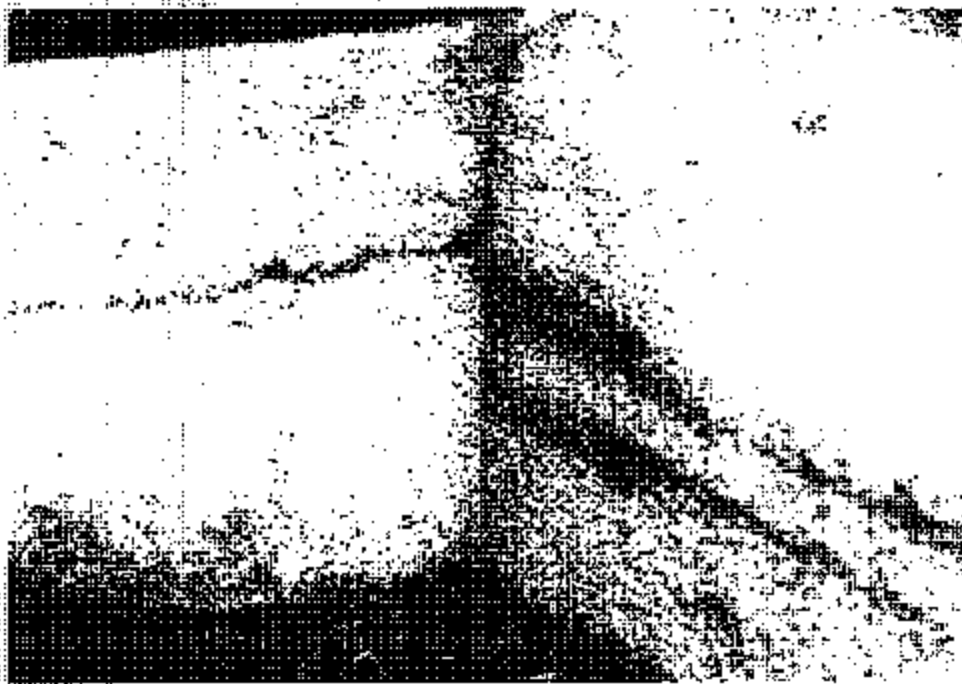


PHOTO 9.

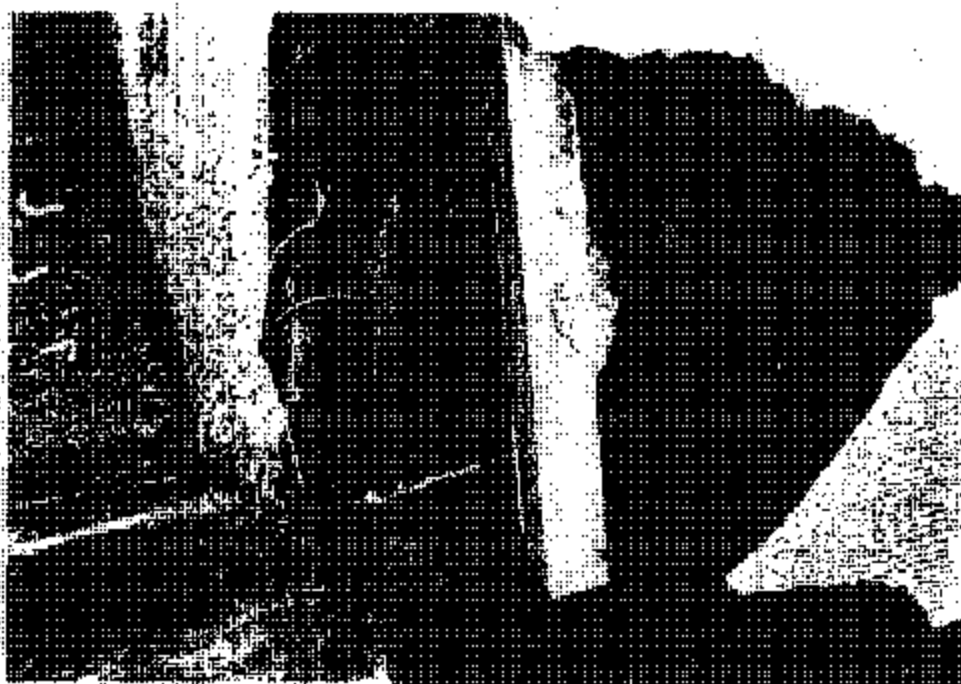


PHOTO 10.



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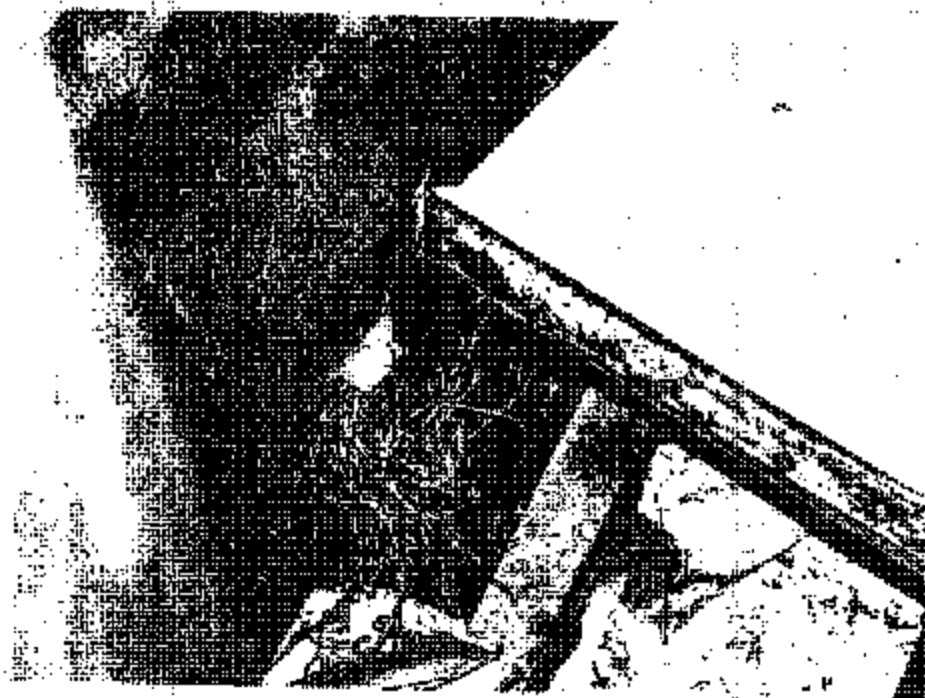


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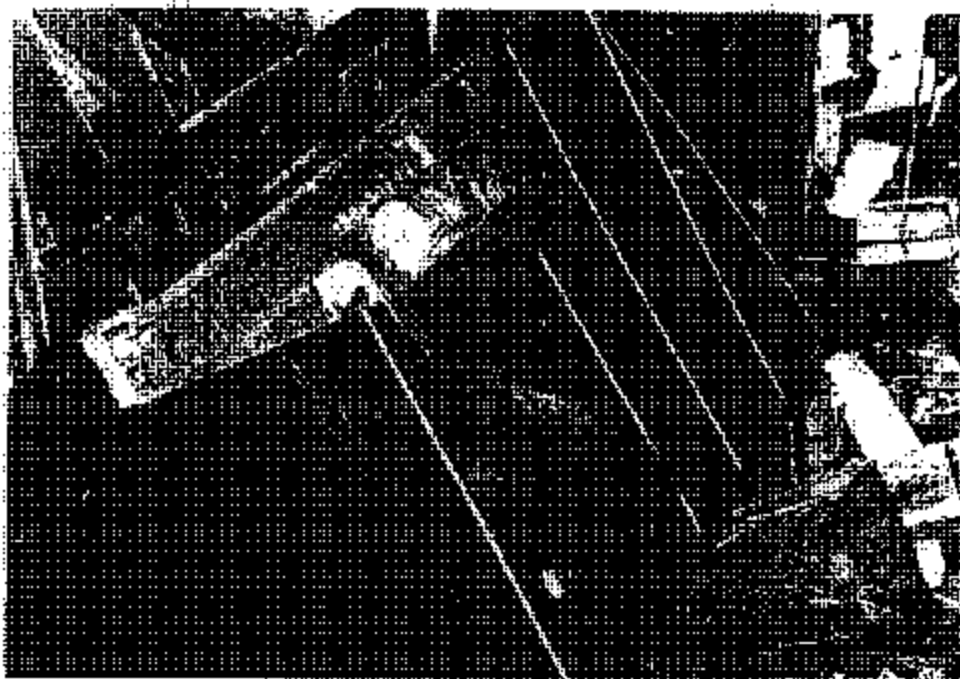


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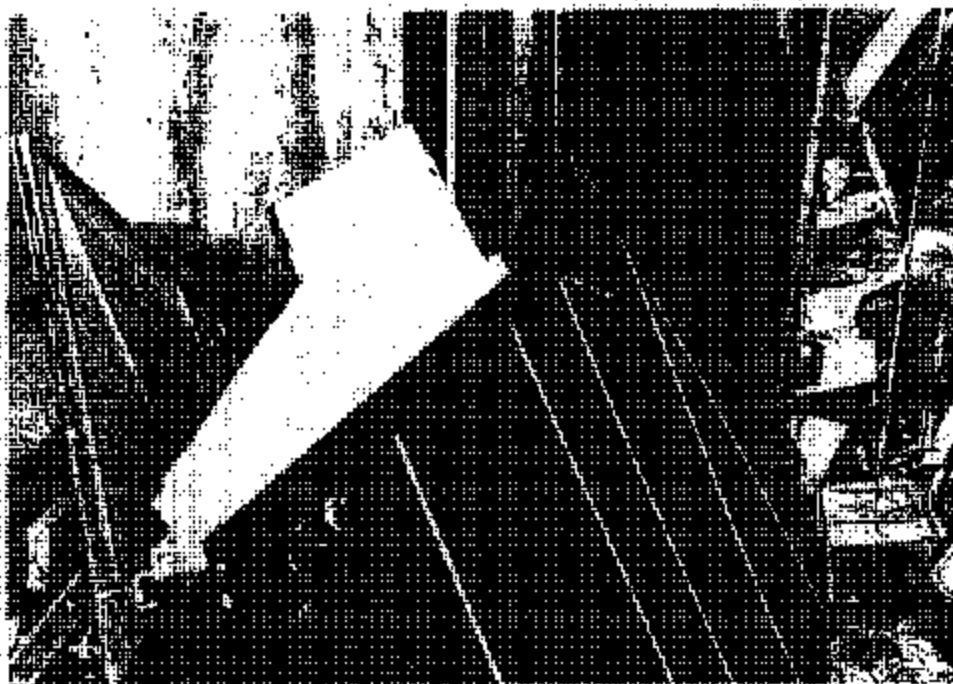


PHOTO 13.



PHOTO 14.



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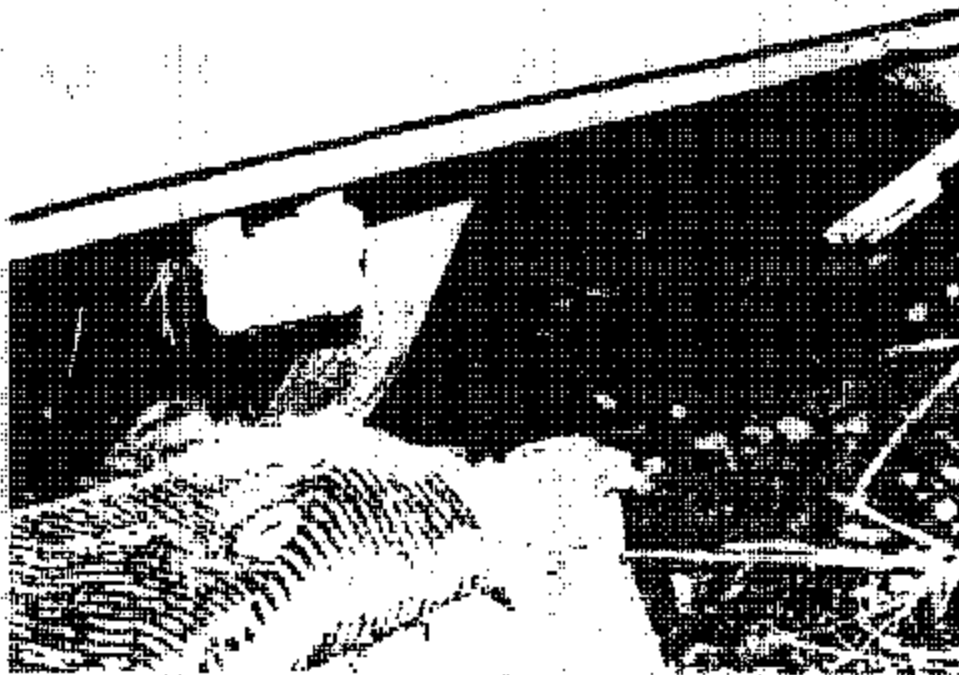


PHOTO 15.



PHOTO 16.



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PHOTO 17.



PHOTO 18.



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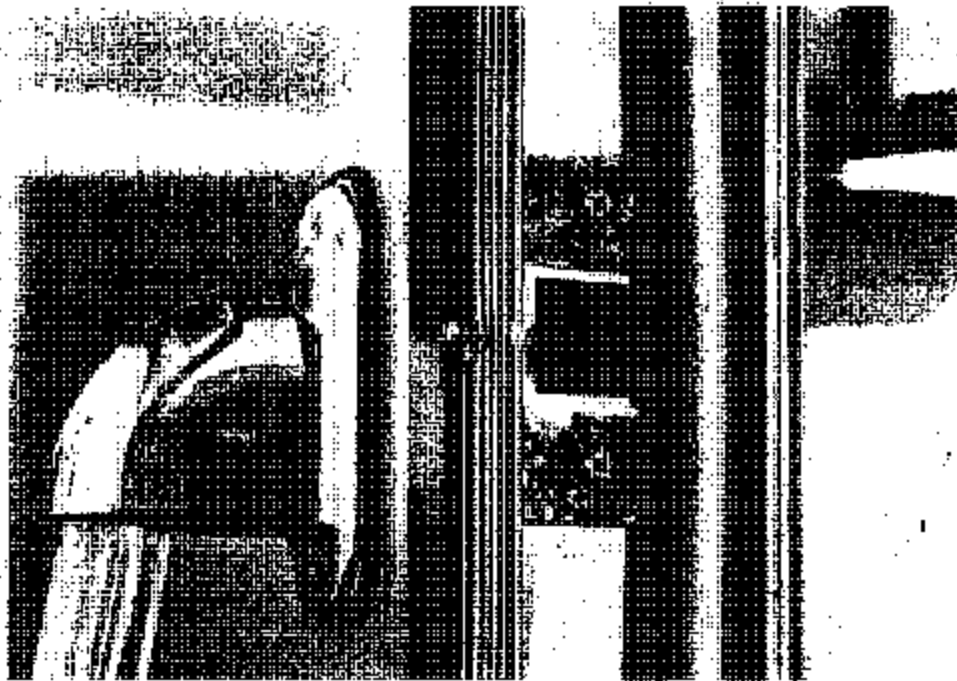


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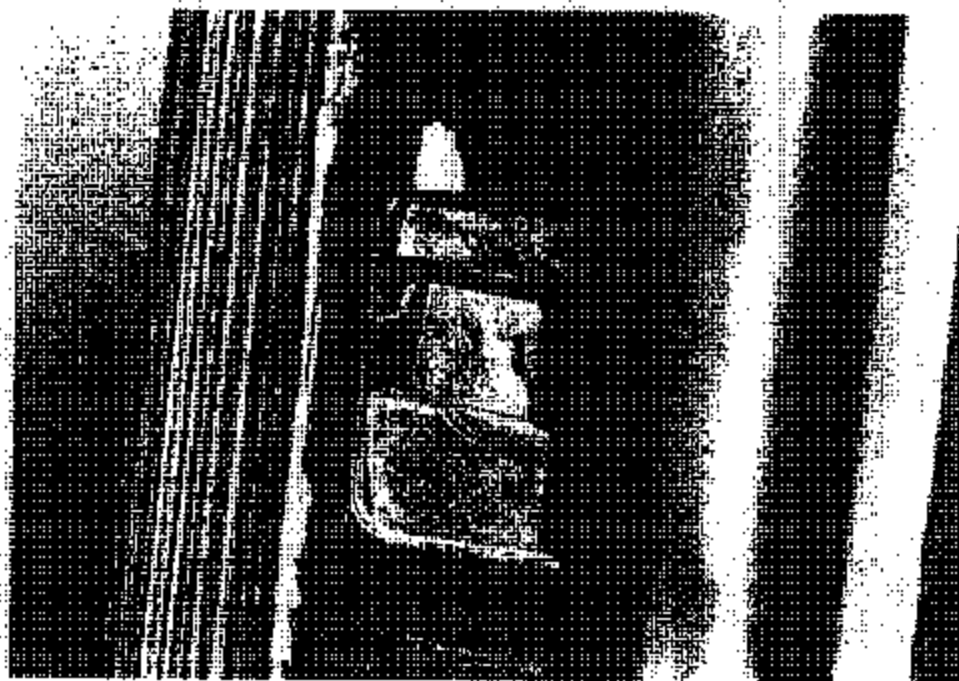


PHOTO 20.



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PHOTO 21.

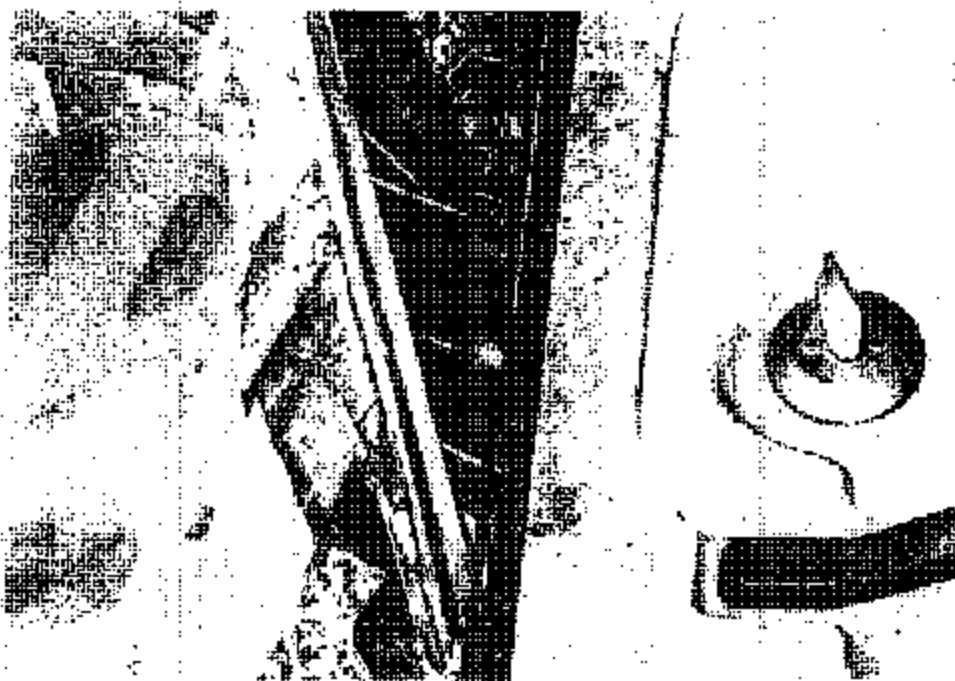


PHOTO 22.



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PHOTO 23.

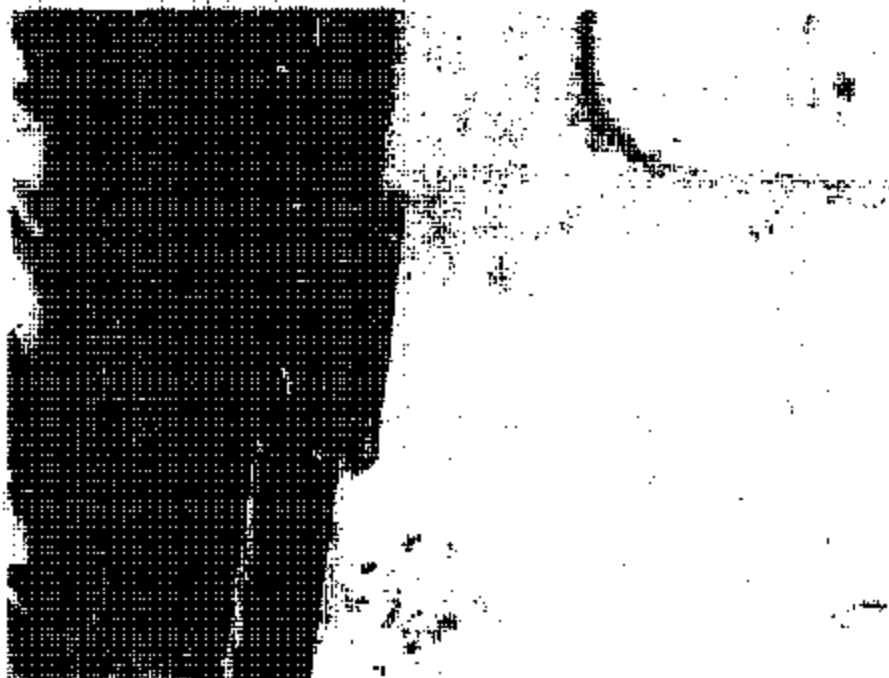


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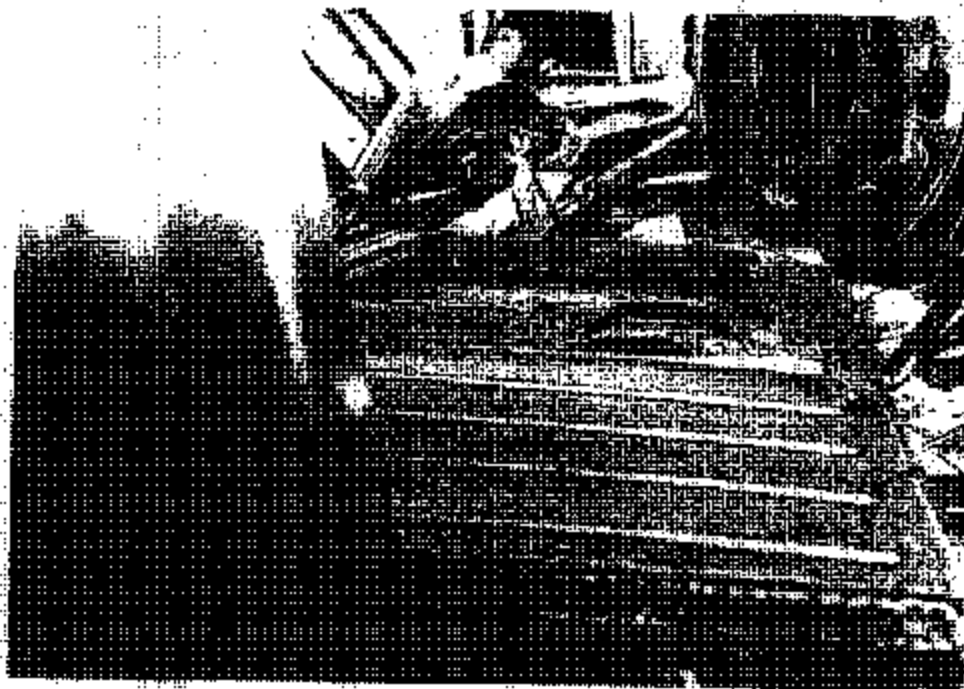


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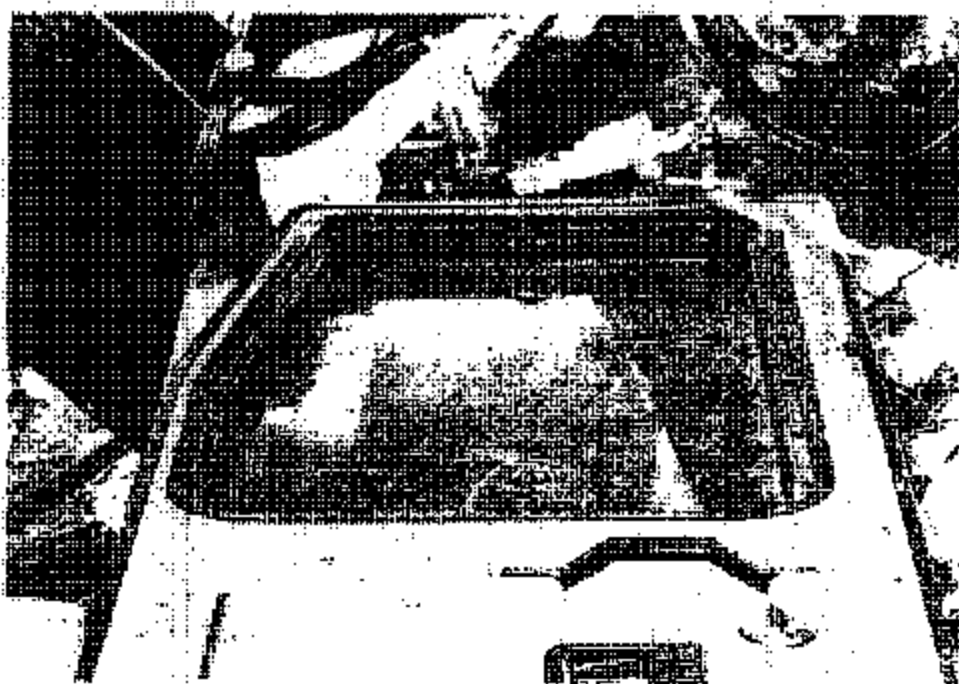


PHOTO 26.



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PHOTO 27.

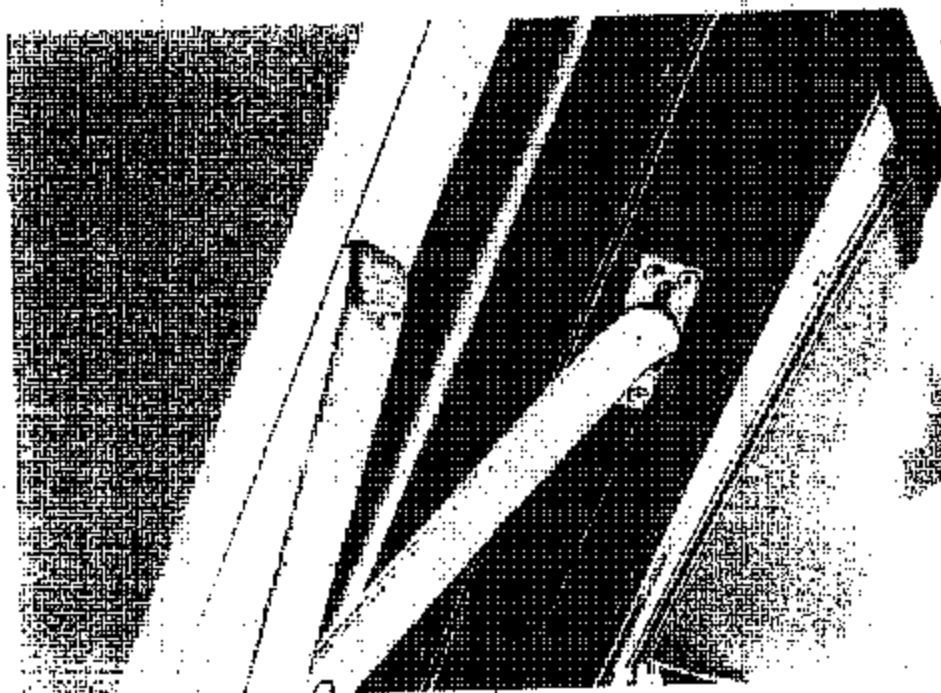


PHOTO 28.



PHOTO 29.

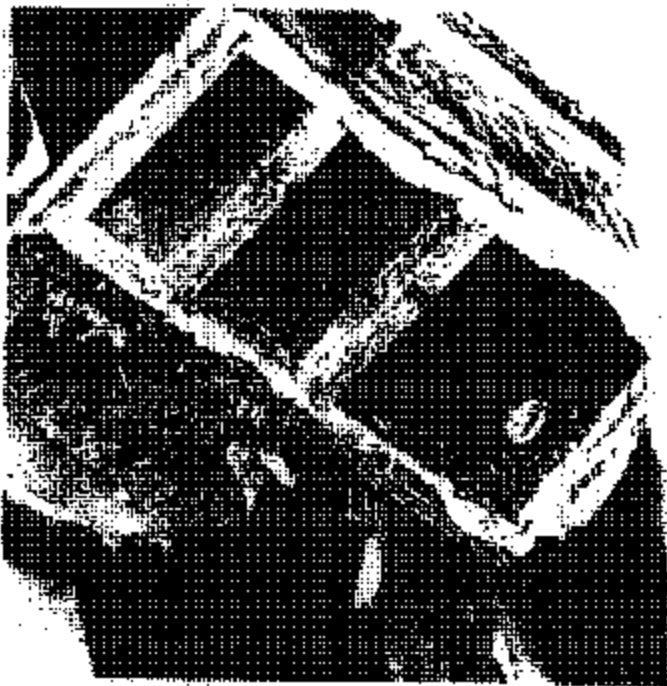


PHOTO 30.



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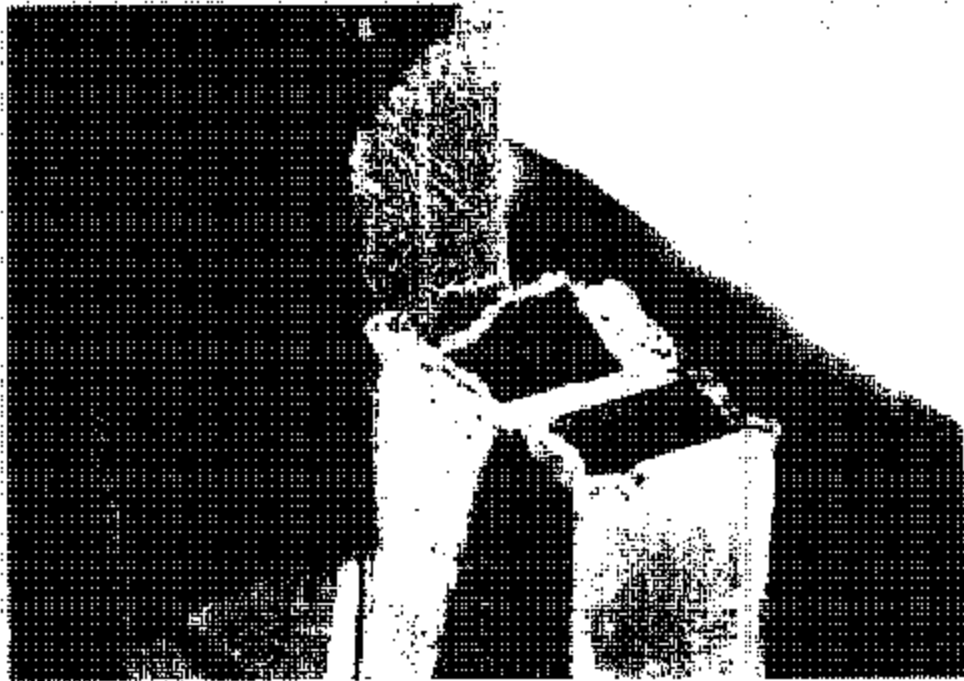


PHOTO 31.



PHOTO 32.



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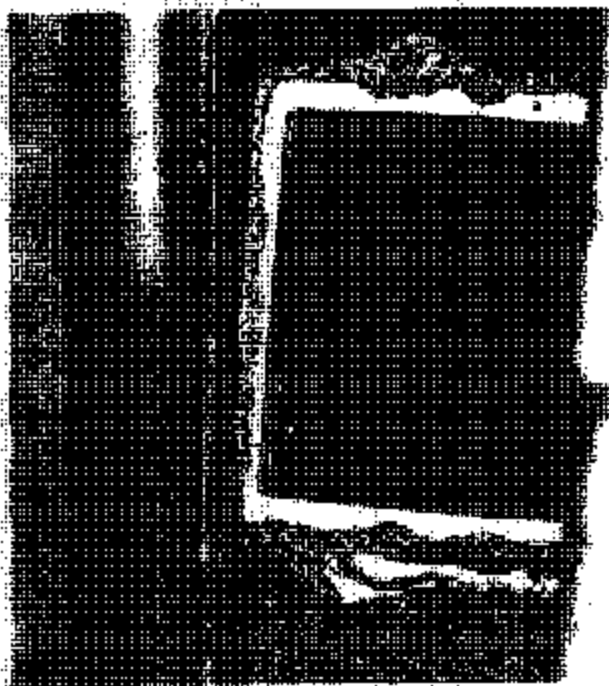


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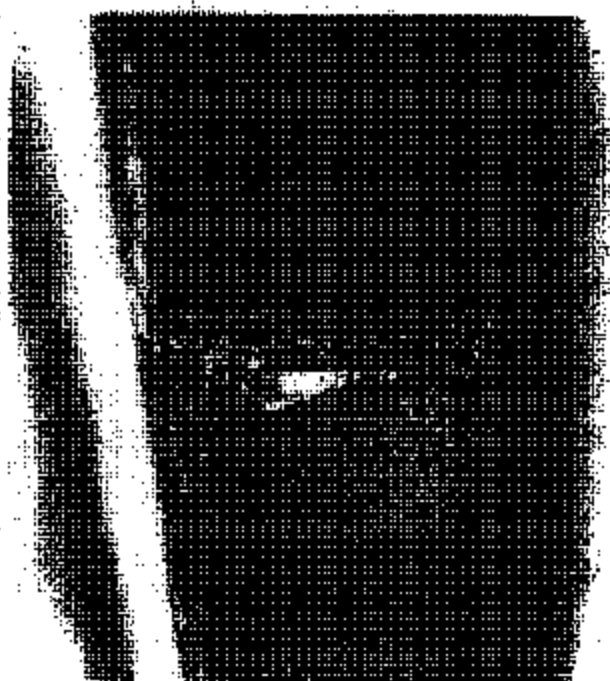


PHOTO 34.





PHOTO 35.



PHOTO 36.



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86 ARSON/EXPLOSIVES

ORIGIN OF FIRE (1) Incendiary (A) Accidental (U) Unidentified BOMB DATA Explosive Devices Incendiary Devices Disposal Thrown Other High Low Host Devices Suspicious Items VP Support

SEIZURE TYPE CODES (1) Consent Search (2) Search Warrant (3) Evidentiary (4) Altered Property (5) Paid Down Search (6) Accommodation (7) Interdiction (8) UIC Purchase by CSI (9) UIC Reverse Purchase (10) Plain View (11) Incident/Arrest (12) Carroll Doctrine (13) Vehicle Inventory (14) Row Contraband (15) Buy/Burst (16) UIC Purchase (17) UIC Purchase Off Agent (18) DCC Search

07 DRUG SEIZURE DRUG TYPE (A) Crack Cocaine (B) Cocaine (C) Hashish (D) Heroin (E) Marijuana (F) Morphine (G) Opium (H) Other Narcotics (I) LSD (J) PCP (K) Other Hallucinogens (L) Amphetamines/Meth (M) Other Stimulants (N) Barbiturates (O) Other Depressants (P) Other Drugs (Q) MDMA (Ecstasy) (R) Cocaine (S) Unknown Drug PHARMACEUTICAL (Yes/No) SCHEDULE (I-III) STREET VALUE (\$) QUANTITY (GROSS/NET/OTHER) CLAMOROUSLY LAG DEMONSTRATED (Yes/No) UNIT OF MEASURE (GM) Grams (NF) Pkts (FD) RI Devices (DU) Dose Units SEIZURE TYPE

08 VEHICLE VIN YEAR MAKE MODEL LICENSE NUMBER STATE YEAR INVOLVEMENT (R) Recovered (S) Stolen (I) Involved OWNER'S LAST NAME FIRST NAME MIDDLE NAME LOCATION STORED OWNER'S ADDRESS CITY STATE ZIP CODE

09 PROPERTY TYPE PROPERTY LOSS (1) None (2) Burned (3) Corroded/Forged (4) Damaged/Destroyed (5) Recovered (6) Seized (7) Stolen (8) Unknown JURISDICTION SEIZURE JURISDICTION RECEIVED RELEASE FEE

Table with 5 columns: EVENT #, PROP CODE, QTY, ITEM, DESCRIPTION, VALUE SEIZED/LOST, VALUE REC/FOUND, DATE RECOVERED

- PROPERTY CODES (Enter Number in Prop Code Column Above) 01 Aircraft 02 Alcohol 03 Automobiles 04 Bicycles 05 Buses 06 Cloths/Furs 07 Computers & Software 08 Consumable Goods 09 Credit/Debit Cards 10 Drugs/Narcotics 11 Drug/Narcotic Equipment 12 Farm Equipment 13 Firearms 14 Gambling Equipment 15 Heavy Construction Equip 16 Household Goods 17 Jewelry/Precious Metals 18 Livestock 19 Merchandise 20 Money 21 Negotiable Instruments 22 Nonnegotiable Instruments 23 Office Type Equipment 24 Other Motor Vehicles 25 Purses/Handbags/Wallets 26 Radio/TV/VCRs 27 Recordings-Audio/Visual 28 Recreational Vehicles 29 Structures-Single Occupancy 30 Structures-Other Dwellings 31 Structures-Other Comm/Business 32 Structures-Industrial/Manufacturing 33 Structures-Other Public/Community 34 Structures-Storage 35 Structures-Other 36 Tools-Power/Hand 37 Trucks 38 Vehicle Parts/Accessories 39 Watercraft 77 Other 66 Fencing Inventory 68 Churches 81 Schools

10 DEATH CV # NEXT OF KIN NOTIFIED NAME ADDRESS LAST PERSON TO SEE SUBJECT ALIVE NAME ADDRESS RESCUE UNIT AT SCENE MEDICAL EXAMINER INVESTIGATOR PROMOTING DEPT DEATH DATE TIME TIME

11 SUMMARY This report is being supplemented to attach the medical examiner's report. Case is to be marked closed service. CONFIDENTIAL

12 ADDITIONAL INFORMATION SCENE PROCESSED BY TYPE EVIDENCE TAKEN WHERE EVIDENCE STORED INITIALLY NEGATIVE FILM NUMBER TELETYPE NO - NCIC NON-AUTO TELETYPE DATE REV. OTHER CASE NUMBER INFORMATION COPIES FURNISHED TO APPROVING SUPERVISOR DATE APPROVED

## FILE REVIEW

Sworn Employee AMICK File Number 04-27-04-5166  
 Serials No. \_\_\_\_\_ through \_\_\_\_\_ Reviewed By Maley Date 9-29-04

## DOCUMENTS FILED

	Serial Number		Serial Number
1. SP-103	_____	15. Acknowledgment Letter to Requesting Agency	_____
2. SP-102	<u>✓</u>	16. Summary to A/G	_____
3. Laboratory Request	_____	17. Summary to Sec. Pub. Safety	_____
4. Laboratory Analysis	_____	18. Summary to Other	_____
5. Date Lab Anal. Filed w/Court	_____	19. Prosecutive Confirmation	_____
6. Destruction Order	_____	20. Prosecutive Report	_____
7. Certificate of Destruction	_____	21. Letter of Declination	_____
8. Affidavit/Search Warrant	_____	22. Bomb Data Report to FBI	_____
9. VUS/CCRE Arrest Record	_____	23. SP-102 Indices Check	_____
10. CCRE/NCIC Check	_____	24. CID Indices Check	_____
11. Crime Scene Diagram	_____	25. Other	_____
12. SP-165 Bulky Evid. Inventory	_____		
13. SP-102 Arson Loss Data	_____		
14. Negative File No. Reported	_____		

## REQUIREMENTS TO CLOSE CASE

1. Field Notes Filed	_____	4. Court Disposition to CCRE	_____
2. Charged Out Serials Returned	_____	5. Pertinent Documents to RMD by SP-102	_____
3. Evidence Disposed	_____		

Undeveloped Leads:

Hours Devoted to Case Since  
Last Review \_\_\_\_\_  
Total Hours to Date \_\_\_\_\_

Supervisor's Comments and Instructions:**CONFIDENTIAL**

CASE INITIATION

101 / 01	REPORTED BY J.D. Arrick	CASE NUMBER 2364	OFF ID	DATE 9-26-04	TIME 1447	<input type="checkbox"/> Original Report <input checked="" type="checkbox"/> Supplemental Report	UCR	CASE NUMBER 04-21-04-5106
SEARCHED CRIME <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	CONSPIRACY CASE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	WARRANT COLLAR CRIME <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	MISC TECH CRIME <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	SEARCHED OFFICIAL <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	ASSIST CASE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	ROAD BLOCK <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	CASE PRIORITY 1 2 3 4	DATE CLOSED
LEADER OF REQUEST (01) Sheriff's Office (02) BPO Referral (03) Civil Request (04) VSP/TF Initiated (05) Other LE Agency (06) Governor	(Check Only One) (07) Attorney General (08) Grand Jury (09) Commonwealth Attorney (10) Other Public Agency (11) Insurance Company (12) Police Department	CASE STATUS (1) Active (2) Closed T/T BCI (3) Unfounded (4) Closed Arrest (5) Inactive (6) Inactive WOF (7) Closed Service	(2) Closed Exception by: (A) Death of Offender (B) Prosecution Declined (C) Extradition Declined (D) Refused to Cooperate (E) Juvenile, No Custody (F) Not Applicable (G) Inactive NCIC	STATE AGENCY <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	CLASS OF CASE 1 2 3 4 5 6	Occurred <input checked="" type="checkbox"/> On <input type="checkbox"/> Between DATE 9-26-04	TIME 1440	

VEHICLE ADDRESS I-64 WB @ 132.5 MM	CITY LOUISA	STATE VA.	ZIP CODE 23093	POLYJURISDICTION 054
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VEHICLE # 1	EVENT CODE 0001	EVENT DESCRIPTION ACCIDENTAL DEATH (MOTOR VEHICLE CRASH)	<input type="checkbox"/> (A) Attempted <input checked="" type="checkbox"/> (C) Completed	PREMISES ENTERED <input type="checkbox"/>	BACK CALLS			
TYPE SECURITY (01) Alarm/Audio (02) Alarm/Silent (03) Siren/Grate	(Check up to two) (04) Camera (05) Dog (06) Deadbolt	(07) Locked (08) Unlocked (09) Ext. Lights (10) Int. Lights	(11) Fence (12) Guard (13) Neighborhood Watch (14) Other	(15) None (16) None	ADDRESS/DEV USED (A) Alcohol (B) Drugs (C) Computer Equip	CRIMINAL ACTIVITY (Check Up To Three) (01) Buy/Receive (02) Distribute/Sell (03) Possess/Conceal	(04) Exploit Children (05) Cultivate/Manufact/Publish (06) Operate/Finance/Assist	(07) Transport/Import (08) Use/Consume

VEHICLE # 1	EVENT CODE 0001	EVENT DESCRIPTION ACCIDENTAL DEATH (MOTOR VEHICLE CRASH)	<input type="checkbox"/> (A) Attempted <input checked="" type="checkbox"/> (C) Completed	PREMISES ENTERED <input type="checkbox"/>	BACK CALLS			
TYPE SECURITY (01) Alarm/Audio (02) Alarm/Silent (03) Siren/Grate	(Check up to two) (04) Camera (05) Dog (06) Deadbolt	(07) Locked (08) Unlocked (09) Ext. Lights (10) Int. Lights	(11) Fence (12) Guard (13) Neighborhood Watch (14) Other	(15) None (16) None	ADDRESS/DEV USED (A) Alcohol (B) Drugs (C) Computer Equip	CRIMINAL ACTIVITY (Check Up To Three) (01) Buy/Receive (02) Distribute/Sell (03) Possess/Conceal	(04) Exploit Children (05) Cultivate/Manufact/Publish (06) Operate/Finance/Assist	(07) Transport/Import (08) Use/Consume

CV # 1	LAST NAME	FIRST NAME	MIDDLE NAME	RACE	SEX	DATE OF BIRTH	AGE	SSN
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ADDRESS	CITY RINGGOLD	STATE VA	ZIP CODE	RESIDENCE PHONE
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CV # 1	LAST NAME	FIRST NAME	MIDDLE NAME	RACE W	SEX F	DATE OF BIRTH	AGE 51	SSN
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ADDRESS	CITY FL	STATE	ZIP CODE	RESIDENCE PHONE	BUSINESS PHONE
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INJURY (01) Hematoma (02) Nontraumatic (03) Unknown	RECENT INJURY (04) Resident (05) Nonresident (06) Unknown	VICTIM RELATED TO EVENT (01) 02 03 04 05 (06) 07 08 09 10	VICTIM INJURY (1) None (2) Broken Bones (3) Possible Internal Injury	(Check Up to Five) (4) Severe Laceration (5) Minor Injury (6) Major Injury	(7) Loss of Teeth (8) Unconsciousness	ADDITIONAL INFORMATION (9) Individual (10) Business (11) Financial Inst (12) Government (13) Religious Org (14) Society/Public (15) Other (16) Unknown
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RELATIONSHIP OF VICTIM TO SUSPECT / OFFENDER (01) Parent (02) Spouse (03) Child (04) Sibling (05) In-Law (06) Boy/Girl Friend (07) Friend (08) Employee (09) Landlord/Tenant (10) Stranger (11) Neighbor (12) Acquaintance (13) Employer (14) Common-Law Spouse (15) Grandparent (16) Stepparent (17) Stepchild (18) Sibling (19) Step-Sibling (20) Other Family (21) Baby-sitter (Baby) (22) Child of BF/GF (23) Homosexual Relation (24) Ex-Spouse (25) Otherwise Known (26) Relationship Unknown (27) Victim was Offender
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ARRESTEE/OFFENDER/OTHER	LAST NAME	FIRST NAME	MIDDLE NAME	RACE	SEX	DATE OF BIRTH	SSN
ADDRESS	CITY	STATE	ZIP CODE	RESIDENCE PHONE			
ALIAS AKA	OCCUPATION	LICENSE	BUSINESS PHONE				
ARREST NUMBER	ARREST NUMBER	ARREST NUMBER	ARREST NUMBER				

ARRESTEE/OFFENDER/OTHER	LAST NAME	FIRST NAME	MIDDLE NAME	RACE	SEX	DATE OF BIRTH	SSN
ADDRESS	CITY	STATE	ZIP CODE	RESIDENCE PHONE			
ALIAS AKA	OCCUPATION	LICENSE	BUSINESS PHONE				
ARREST NUMBER	ARREST NUMBER	ARREST NUMBER	ARREST NUMBER				

CONFIDENTIAL

(9) Officer Assault	(10)	(11) Morn Assault Circumstances	(12)	(13) Larceny	(14)	(15) Tool/Weapon Used	(16)	(17) Location	(18)	(19) Entry	(20)	(21) Exit	(22)	(23) Last Scene	(24)
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**ARSON/EXPLOSIVES**

ICDM OF TYPE <input type="checkbox"/> Incendiarious <input type="checkbox"/> Undetermined	<input type="checkbox"/> (A) Accidental <input type="checkbox"/> (B) Other	BOMB DATA Explosive Devices _____ High _____ Low _____	Incendiarious Devices _____ Home Devices _____	Disruptors _____ Suspicious Items _____	Traps _____ VP Support _____	Other _____

ICDM TYPE CODES Consent Search (87) Search Warrant (88) Evacuation (89) Abused Property (90) Put Down Search (91) Accommodation (92) Interdiction (93) UAC Purchase by CSI (94) UAC Reverse Purchase (95) Plain View (84) Incident/Arrest (86) Control Doctrine (88) Vehicle Inventory (89) Run Control (90) Run Bust (91) UAC Purchase (92) UAC Purchase (93) Agent (94) DOC Search (95)
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DO STATE <input type="checkbox"/> (A) Crack Cocaine <input type="checkbox"/> (B) Cocaine <input type="checkbox"/> (C) Hashish <input type="checkbox"/> (D) Heroin <input type="checkbox"/> (E) Marijuana <input type="checkbox"/> (F) Morphine	<input type="checkbox"/> (G) Opium <input type="checkbox"/> (H) Other Narcotics <input type="checkbox"/> (I) LSD <input type="checkbox"/> (J) PCP <input type="checkbox"/> (K) Other Hallucinogens <input type="checkbox"/> (L) Amphetamines/Amphetamine <input type="checkbox"/> (M) Other Stimulants	<input type="checkbox"/> (N) Barbiturates <input type="checkbox"/> (O) Other Depressants <input type="checkbox"/> (P) Other Drugs <input type="checkbox"/> (Q) MDMA (Ecstasy) <input type="checkbox"/> (R) Dayconite <input type="checkbox"/> (S) Unknown Drug	PHARMACEUTICAL <input type="checkbox"/> Yes <input type="checkbox"/> No	SCHEDULE _____	STREET VALUE \$ _____ (ROUND TO NEAREST DOLLAR)	QUANTITY _____ (ROUND TO NEAREST 100)	CLASSIFICATION LAW VIOLATED <input type="checkbox"/> Yes <input type="checkbox"/> No	TYPE OF MEASURE <input type="checkbox"/> (GMS) Grams <input type="checkbox"/> (M) Milligrams <input type="checkbox"/> (OZ) Ounces <input type="checkbox"/> (L) Liters	DATE SEIZED _____	SEIZURE TYPE <input type="checkbox"/> (N) Narcotics <input type="checkbox"/> (P) Plants <input type="checkbox"/> (C) Chemicals <input type="checkbox"/> (D) Dose Units
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YEAR 01	MAKE MONACO	MODEL DIPLOMAT	LICENSE NUMBER SLEEP 2	STATE SD	YEAR 05	DEPARTMENT <input type="checkbox"/> (6) State <input checked="" type="checkbox"/> (7) Involved	<input type="checkbox"/> (R) Recovered <input type="checkbox"/> (O) Other	
IN 1RF12061012	SEIZED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	DATE SEIZED 9-26-04	RELEASE TYPE _____	DATE RELEASED 04-21-3693	TRUCK # _____	DRIVER'S LAST NAME LILFLOREN DENNIS	DRIVER'S FIRST NAME DUANE	LOCATION SEIZED FIELDS ASHLAND TOWING 102 S. WASHINGTON HWY ASHLAND, WA. 23005
WORKER'S ADDRESS 3700 S. WESTPORT AVE SIOUX FALLS SD 57100	CITY SIOUX FALLS SD	STATE SD	ZIP CODE 57100					

IS PROPERTY LOAN <input type="checkbox"/> (7) None	<input type="checkbox"/> (2) Burned <input type="checkbox"/> (3) Counterfeit/Forged	<input type="checkbox"/> (4) Damaged/Destroyed <input type="checkbox"/> (5) Recovered	<input type="checkbox"/> (6) Seized <input type="checkbox"/> (7) Stolen	<input type="checkbox"/> (8) Unknown	JURISDICTION SEIZED _____	JURISDICTION RECOVERED _____	SEIZURE TYPE _____
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ITEM #	ENTRY CODE	QTY	ITEM	DESCRIPTION	VALUE STOLEN/LOST	VALUE REC/FOUND	DATE RECOVERED

AIRCRAFT ALCOHOL AUTOMOBILES BICYCLE BUSES CLOTHING/FURS COMPUTERS & SOFTWARE	(8) Consumable Goods (9) Credit/Debit Cards (10) Drugs/Narcotics (11) Drug/Narcotic Equipment (12) Farm Equipment (13) Firearms (14) Gambling Equipment	(15) Heavy Constructed Equip (16) Household Goods (17) Jewelry/Precious Metals (18) Luggage (19) Merchandise (20) Money (21) Negotiable Instruments	(22) Navigatable Instruments (23) Office Type Equipment (24) Other Motor Vehicles (25) Personal Luggage/Wallets (26) Radio/TV/VCRs (27) Recreational Audio/Visual (28) Recreational Vehicles	(29) Structures-Single Occupancy (30) Structures-Other Dwellings (31) Structures-Other Commercial (32) Structures-Industrial/Manufacturing (33) Structures-Other Public/Community (34) Structures-Storage (35) Structures-Other	(36) Tools-Power/Hand (37) Trucks (38) Vehicle Parts/Accessories (39) Watercraft (40) Other (41) Pending Inventory (42) Churches (43) Schedules
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NAME ROBERT WEAVER	RELATIONSHIP DAUGHTER	TYPE DEATH TRAUMA
ADDRESS LAKE MONTICELLO VOL. RESERVE SPAD PALMYRA, VA	DATE 9-26-04	TIME 1523
MEDICAL EXAMINER _____	PHYSICIAN PROSECUTING DEATH _____	DEATH DATE 9-26-04
TIME UNIT AT SCENE _____	_____	TIME 1523

ON STATED DATE AND TIME WRITER WAS NOTIFIED BY SP RICHMOND OF ABOVE CAPTIONED CASE. WRITER ARRIVED ON SCENE @ 1455 HRS

ON SCENE WRITER LOCATED A LARGE MOTOR HOME PULLING A CAR WHICH WAS LOCATED IN THE DITCH ON THE NORTH SIDE OF THE INTERSTATE. MOTORHOME SUSTAINED MOST DAMAGE TO THE RIGHT SIDE AND FRONT OF VEHICLE. THE MOTORHOME WAS BEARING S.D TAGS SLEEP 2 WHICH WAS OWNED AND OPERATED BY DENNIS DUANE LILFLOREN OF 3700 S. WESTPORT AVE SIOUX FALLS S.D. 57106. THE VICTIM WAS LYING IN THE DITCH EAST OF THE MOTORHOME.

RE PROCESSED BY J.D. AMICK	TYPE EVIDENCE TAKEN PICTURES MEASUREMENTS	STATEMENTS _____	WHERE EVIDENCE STORED SP 50 PAD	INITIALS _____	NEGATIVE FILE NUMBER 0405404319F
OFFICE NO - WCIC NON-AUTO _____	TELETYPE DATE _____	REF. OTHER CASE NUMBER _____	<b>CONFIDENTIAL</b>		

ST. R. M. WEAVER  
 9-29-04

## VIRGINIA STATE POLICE

Date of Transcription

9-29-04

THE ROADWAY AT THIS LOCATION WAS BLOCKED WITH A DRAINAGE AND STRAIT. THE WEATHER WAS CLEAR AND DRY WITH NO ROADWAY DEFECTS. (Refer to Diagrams Attached) For POINTS OF IMPACT ROAD WIDTH ETC. MS. TANA DAVIDSON 244 DELLA LANE RICHMOND, VA PHONE# 703-965-5874 WAS INTERVIEWED AT THE SCENE AT APPROX 1500 HRS BY W/PC. MS DAVIDSON STATED "I WAS ABOUT FIVE OR SIX CARS BEHIND HIM WHEN HIS TIRE BLEW OUT, HE LOST CONTROL TRYING TO STEER IT. HE RAN OFF THE ROAD TO THE RIGHT."

MR. DENNIS DUANE LILLEGREN OF 3100 S. HIGHTOWER AVE. PMB 1499 SIOUX FALLS S.D. 57106 WAS INTERVIEWED BY W/PC AT THE SCENE AT APPROX 1515 HRS. MR. LILLEGREN STATED "I HAD A BLINDNIT. I TRIED TO HOLD IT IN THE ROAD BUT I COULDN'T. WE RAN OFF THE ROAD AND HIT THE BANK. THE BANK TOOK THE DOOR OFF AND SHE FELL OUT THE DOOR. I WAS GOING AROUND 60 TO 65 MPH WHEN IT HAPPENED."

VICTIM WAS PRONOUNCED DEAD AT THE SCENE AT 1523 HRS BY ROBERT WEAVER OF LAKE MONTICELLO RESCUE SQUAD UPON CONSULTATION ON THE RADIO BY DR. WEAVER ALLEN AT UVA HOSPITAL. INVESTIGATOR AMANDA MADSEN FROM THE M.E. OFFICE WAS ADVISED OF THE SITUATION AND GAVE PERMISSION TO REMOVE VICTIM FROM THE SCENE AND TRANSPORT TO M.E. OFFICE IN RICHMOND. THERE DID NOT APPEAR TO BE ANY ALCOHOL OR DRUGS INVOLVED IN THIS CASE.

MY INVESTIGATION REVEALED THE MOTORHOME WAS IN THE RIGHT LANE WHEN THE RIGHT FRONT TIRE AND STEERING AXLE BLEW. THIS CAUSED THE MOTORHOME TO GO LEFT. DRIVER TRIED TO COMPENSATE BY STEERING RIGHT AND LOST CONTROL CAUSING MOTORHOME TO RUN OFF ROAD RIGHT STRIKING EMBANKMENT AND ROLLING ON ITS RIGHT SIDE. AT THAT TIME, THE DOOR ON THE RIGHT FRONT OF MOTORHOME WAS RIPPED AWAY FROM THE MOTORHOME CAUSING THE VICTIM TO FALL INTO THE SHAIWELL AND SUBSEQUENTLY COME OUT THE DEAD. THE MOTORHOME AND THE CAR BEING TOWED

Investigation on

9-29-04

at

1500 HRS

File #

by

TROOPER J.D. ANICK

Date dictated

**CONFIDENTIAL**

VIRGINIA STATE POLICE

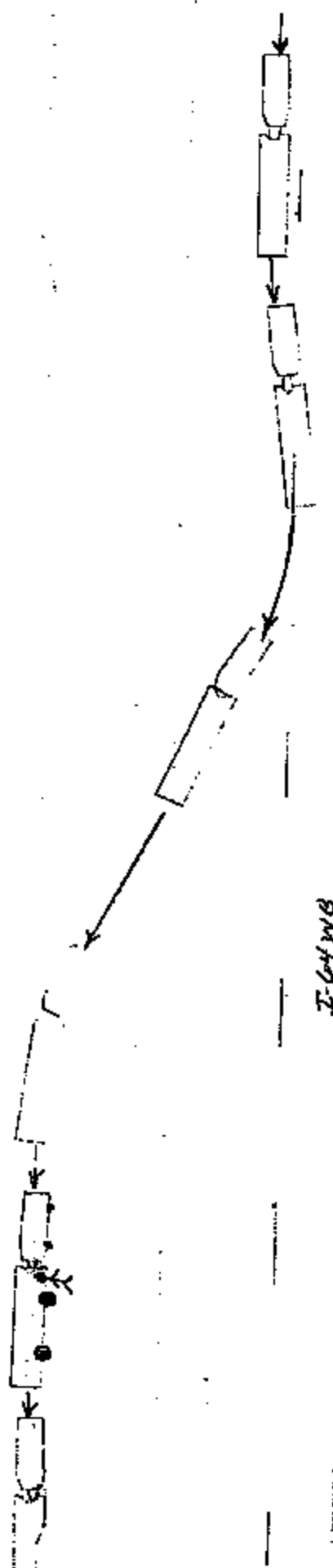
Date of Transcription 9-29-04

*RAV OVER VICTIM WHO SUFFERED MULTIPLE TRAUMA TO HER ENTIRE BODY. NO CHARGES ARE BEING PLACED. REQUEST THIS REMAIN ACTIVE FOR M.E. REPORT.*

Investigation on 9-26-04 at 1500 HIS File # \_\_\_\_\_

by Teedee J.D. Amick Date dictated \_\_\_\_\_

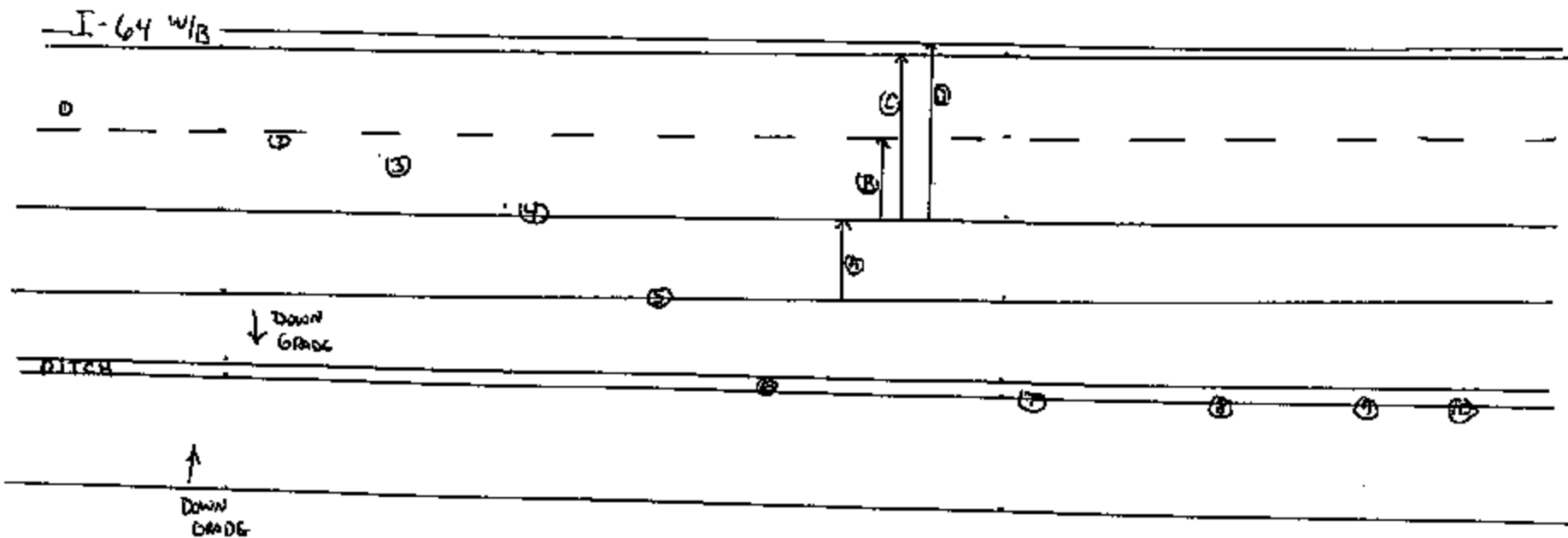
**CONFIDENTIAL**



10-30 F LONDA CO.  
9-26-04 1440 hrs.  
Victim - SHEEHAN  
TRD, J. D. Amick  
CS.# 04-21-04-5706

CONFIDENTIAL

CONFIDENTIAL



- |                                 |        |
|---------------------------------|--------|
| ① First mark in road            |        |
| ② First Debris in Road          | 160 ±  |
| ③ Center of Tire                | 182 ±  |
| ④ Went off of Road              | 241 ±  |
| ⑤ went into grass               | 321 ±  |
| ⑥ point of travel on Embankment | 436 ±  |
| ⑦ Door                          | 880 ±  |
| ⑧ Body                          | 1005 ± |
| ⑨ Back of car                   | 1160 ± |
| ⑩ Front of RV                   | 1272 ± |

- |                         |      |
|-------------------------|------|
| ① Width of Shoulder     | 10 ± |
| ② Width of Lane         | 11 ± |
| ③ Width of Road         | 23 ± |
| ④ Width to Edge of Road | 27 ± |

6608 - TPR Malcolm S. Austin  
 16116 - TPR Kevin S. Frazier

NOTICE OF VEHICLE IMPOUNDMENT/IMMOBILIZATION

OPERATION, REGISTRATION AND LIEN

FILE NUMBER

OPERATOR'S NAME: (LAST) *BEING TOWED* (FIRST) (MIDDLE)

ADDRESS: (STREET AND NUMBER OR P.O. BOX NUMBER) (CITY) (STATE) (ZIP CODE)

REGISTERED OWNER'S NAME: (FIRST) (MIDDLE)

ADDRESS: (STREET AND NUMBER OR P.O. BOX NUMBER) (CITY) (STATE) (ZIP CODE)

LIENHOLDER: *LADY LAKE FL.* (ADDRESS)

IMPOUNDMENT/IMMOBILIZATION, AND STORAGE

REASON: UNATTENDED IN EXCESS OF 24 HRS.  TRAFFIC HAZARD  ACCIDENT  STOLEN  OTHER  (EXPLAIN IN NARRATIVE)

VIOLATION OF VIRGINIA CODE 46.2-301.1 (OPERATE A VEHICLE WHILE LICENSE, LEARNER'S PERMIT, OR PRIVILEGE TO DRIVE HAS BEEN EITHER (1) SUSPENDED OR REVOKED FOR DRIVING WHILE INTOXICATED OR FOR DRIVING AFTER BEING ADJUDICATED AN HABITUAL OFFENDER, WHEN THAT ADJUDICATION WAS BASED AT LEAST IN PART UPON AN ALCOHOL-RELATED OFFENSE; OR (2) WHEN THE LICENSE HAS BEEN ADMINISTRATIVELY SUSPENDED PURSUANT TO VIRGINIA CODE 46.2-301.2).

STORAGE LOCATION: <i>LOUISA CO. Lunenburg Co Line</i>	DATE STORED: <i>9-26-04</i>	TIME STORED: <i>1630</i>	WEATHER: <i>Sunny</i>
<i>VAYD Automotive 2994 Three Notch Rd Kents Shore VA 23086</i>	<i>LOUISA CO. Kents Shore VA 23086</i>		ENTERED IN VCN YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
<i>Vayd Automotive 2994 Three Notch Rd Kents Shore VA 23086</i>		<i>434-589-3871</i>	

VEHICLE DESCRIPTION

VEHICLE YEAR: <i>99</i>	MAKE: <i>Chevrolet</i>	MODEL: <i>Malibu</i>	STYLE: <i>4DR</i>	COLOR: <i>Silver</i>	ESTIMATED VALUE: <i>6,000</i>
LICENSE NO.: <i>W17D-VSU</i>	LICENSE YEAR: <i>2005</i>	STATE: <i>FL</i>	TYPE: <i>Pass</i>	VIN OR MOTOR NUMBER: <i>1G1W5S2</i>	

VEHICLE INFORMATION

IGNITION KEY:  NOT FOUND  OWNER  WRECKER DRIVER  KIGNION  OPERATOR  CUSTODIAN NAME OF CUSTODIAN:

OTHER KEYS: NONE FOUND  RETURNED TO OPERATOR  GIVEN TO OWNER  GIVEN TO JAILER  GIVEN TO CUSTODIAN  NAME OF CUSTODIAN:

WINDOWS CLOSED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	DOORS LOCKED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	RADIO IN VEHICLE YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	BATTERY IN VEHICLE YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK <input type="checkbox"/>	SPARE TIRE IN TRUNK YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK <input type="checkbox"/>	TRUNK LOCKED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
ODOMETER READING: <i>NA</i>		IN RUNNING CONDITION YES <input type="checkbox"/> NO <input type="checkbox"/> UNK <input checked="" type="checkbox"/>		VEHICLE/KNOWN DAMAGE: <i>Right Front fender, Right Door, Right front wheel</i>	

RELEASE INFORMATION

OWNER NOTIFIED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	DATE:	RELEASED TO OWNER YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	DATE:
LIENHOLDER YES <input type="checkbox"/> NO <input type="checkbox"/>	DATE:	RELEASED TO LIENHOLDER YES <input type="checkbox"/> NO <input type="checkbox"/>	DATE:
SPECIAL CONDITIONS FOR RELEASE: <i>ROUTINE</i> <input checked="" type="checkbox"/>		COMMONWEALTH'S ATTORNEY'S APPROVAL <input type="checkbox"/> OTHER <input type="checkbox"/>	
EXPIRATION OF TERM OF IMPOUNDMENT:			

NARRATIVE - INVENTORY OF PROPERTIES

ADDITIONAL INFORMATION AS NEEDED: *INVENTORY/HARMS CD's, 1 umbrella*

*NOT STOLEN*

*TT# 04-21-3693*

NOTICE SENT TO CLERK OF GENERAL DISTRICT COURT

CHECK TO INDICATE THAT THE OFFENDER CHARGED IN THIS IMPOUNDMENT CASE IS A JUVENILE.

**CONFIDENTIAL**

OPERATOR'S SIGNATURE - I certify that I have received a copy of this impoundment notice.

REPORTING MEMBER: <i>[Signature]</i>	CODE NUMBER: <i>2354</i>	DATE SUBMITTED: <i>9-27-04</i>	STATUS (CHECK ONE) PENDING <input checked="" type="checkbox"/> CLEARED <input type="checkbox"/>
AREA APPROVAL: <i>[Signature]</i>	CODE NUMBER: <i>4916</i>	DATE APPROVED: <i>9-29-04</i>	
DIVISION APPROVAL:	CODE NUMBER:	DATE APPROVED:	

# NOTICE OF VEHICLE IMPOUNDMENT/IMMOBILIZATION

**OPERATION, REGISTRATION AND LIEN** **FILE NUMBER**

OPERATOR'S NAME: (LAST) [REDACTED] (FIRST) [REDACTED] (MIDDLE) [REDACTED]

ADDRESS: (STREET AND NUMBER OR PO BOX NUMBER) [REDACTED] (CITY) [REDACTED] (STATE) [REDACTED] (ZIP CODE) [REDACTED]

REGISTERED OWNER'S NAME: (LAST) [REDACTED] (FIRST) **SIoux FALLS** (MIDDLE) [REDACTED] (STATE) **SD.**

ADDRESS: (STREET AND NUMBER OR PO BOX NUMBER) [REDACTED] (CITY) [REDACTED] (STATE) [REDACTED] (ZIP CODE) [REDACTED]

LIENHOLDER (NAME) **THOR CREDIT** (ADDRESS) **600 ANTON BLVD SUITE 1900 COSTA MESA CA 92626**

**IMPOUNDMENT/IMMOBILIZATION, AND STORAGE**

REASON: UNATTENDED IN EXCESS OF 24 HRS.  TRAFFIC HAZARD  ACCIDENT  STOLEN  OTHER  (EXPLAIN IN NARRATIVE)

VIOLATION OF VIRGINIA CODE 46.2-301.1 (OPERATE A VEHICLE WHILE LICENSE, LEARNER'S PERMIT, OR PRIVILEGE TO DRIVE HAS BEEN EITHER (1) SUSPENDED OR REVOKED FOR DRIVING WHILE INTOXICATED OR FOR DRIVING AFTER BEING ADJUDICATED AN HABITUAL OFFENDER, WHEN THAT ADJUDICATION WAS BASED AT LEAST IN PART UPON AN ALCOHOL-RELATED OFFENSE; OR (2) WHEN THE LICENSE HAS BEEN ADMINISTRATIVELY SUSPENDED PURSUANT TO VIRGINIA CODE 46.2-301.2).

RECOVERY TIME, DATE AND LOCATION: <b>9-26-04 1530 I64WB 2132.5MM</b>	DATE STORED <b>9-26-04</b>	TIME STORED <b>1800</b>	WEATHER <b>CLEAR</b>
STORAGE LOCATION: <b>FIELDS ASHLAND TOWING 102 S. LEXINGTON HWY ASHLAND VA 23005</b>	ENTERED IN VCM YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		
TOWING SERVICE: <b>SAME AS ABOVE</b>			

**VEHICLE DESCRIPTION**

VEHICLE YEAR <b>2001</b>	MAKE <b>MONACO</b>	MODEL <b>DIPLOMAT</b>	STYLE <b>MH</b>	COLOR <b>GREY</b>	ESTIMATED VALUE <b>100,000</b>
LICENSE NO. <b>SLEEP 2</b>	LICENSE YEAR <b>'05</b>	STATE <b>SD</b>	TYPE <b>PC</b>	VIN OR MOTOR NUMBER <b>1RF12061012013666</b>	

**VEHICLE INFORMATION**

IGNITION KEY:  NOT FOUND  OWNER  WRECKER DRIVER  
 IGNITION  OPERATOR  CUSTODIAN NAME OF CUSTODIAN:

OTHER KEYS: NONE FOUND  RETURNED TO OPERATOR  GIVEN TO OWNER  GIVEN TO JAILER  GIVEN TO CUSTODIAN  NAME OF CUSTODIAN:

WINDOWS CLOSED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	DOORS LOCKED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	RADIO IN VEHICLE YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	BATTERY IN VEHICLE YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK <input type="checkbox"/>	SPARE TIRE IN TRUNK YES <input type="checkbox"/> NO <input type="checkbox"/> UNK <input checked="" type="checkbox"/>	TRUNK LOCKED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
ODOMETER READING: <b>UNK.</b>	IN RUNNING CONDITION YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK <input type="checkbox"/>	VISIBLE/KNOWN DAMAGE <b>ALL OF REAR SIDE, REAR AND FRONT</b>			

**RELEASE INFORMATION**

OWNER NOTIFIED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	DATE	RELEASED TO OWNER YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	DATE
LIENHOLDER YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	DATE	RELEASED TO LIENHOLDER YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	DATE
SPECIAL CONDITIONS FOR RELEASE ROUTINE <input checked="" type="checkbox"/>		COMMONWEALTH'S ATTORNEY'S APPROVAL <input type="checkbox"/> OTHER <input type="checkbox"/>	

EXPIRATION OF TERM OF IMPOUNDMENT

**NARRATIVE - INVENTORY OF PROPERTIES**

ADDITIONAL INFORMATION AS NEEDED:  
**Inventory - Laptop Computer, T.V., Cell Phone, Sat. System, M. CLOWNE, DVD PLAYER, BEST CLOTHING, DVDS, CDS, B. COOLERS AND 4 CHECK BOOKS.**

**NOT STOLEN** **TT#14-21-369.3**

NOTICE SENT TO CLERK OF GENERAL DISTRICT COURT

CHECK TO INDICATE THAT THE OFFENDER CHARGED IN THIS IMPOUNDMENT CASE IS A JUVENILE.

CONFIDENTIAL

OPERATOR'S SIGNATURE - I certify that I have received a copy of this impoundment notice.

REPORTING MEMBER <i>[Signature]</i>	CODE NUMBER <b>2354</b>	DATE SUBMITTED <b>9-27-04</b>	STATUS (CHECK ONE) PENDING <input checked="" type="checkbox"/> CLEARED <input type="checkbox"/>
AREA APPROVAL <i>[Signature]</i>	CODE NUMBER <b>4906</b>	DATE APPROVED <b>9-29-04</b>	
DIVISION APPROVAL	CODE NUMBER	DATE APPROVED	

# Police Crash Report

Crash date 09/26/2004	Day of week Sun	Military time (24 hr. clock) 1440	County of crash LOUISA	Official DMV use
<input type="checkbox"/> City of	Location of crash		GPS Lat.	
<input type="checkbox"/> Town of				

Location of crash (route/road) I-64 WB	Road crossing ID no. (if within 150 ft.)	GPS Long.	Mile marker number 13215	Local case number
Location of crash (route/road) at intersection with or <u>1/2</u> miles <input checked="" type="checkbox"/> east <input type="checkbox"/> west <input type="checkbox"/> north <input type="checkbox"/> south of <u>RT. 799</u>				Number of vehicles 1

Vehicle No. 1	Vehicle No. 2 (or pedestrian <input type="checkbox"/> )
Driver's name (last, first, middle) [REDACTED]	Driver's name (last, first, middle)
Driver had scene <input type="checkbox"/> Yes <input type="checkbox"/> No	Driver had scene <input type="checkbox"/> Yes <input type="checkbox"/> No
Address (street and no.)	Address (street and no.)

City SIOUX FALLS	State SD	ZIP	City	State	ZIP
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Birth date 08/13/1943	Gender M	Driver's license number 01021808	State SD	Birth date	Gender	Driver's license number	State
Vehicle owner's name (last, first, middle) or Commercial motor carrier same as driver				Vehicle owner's name (last, first, middle) or Commercial motor carrier same as driver			

Address (street and no.)	Address (street and no.)
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City	State	ZIP	City	State	ZIP
------	-------	-----	------	-------	-----

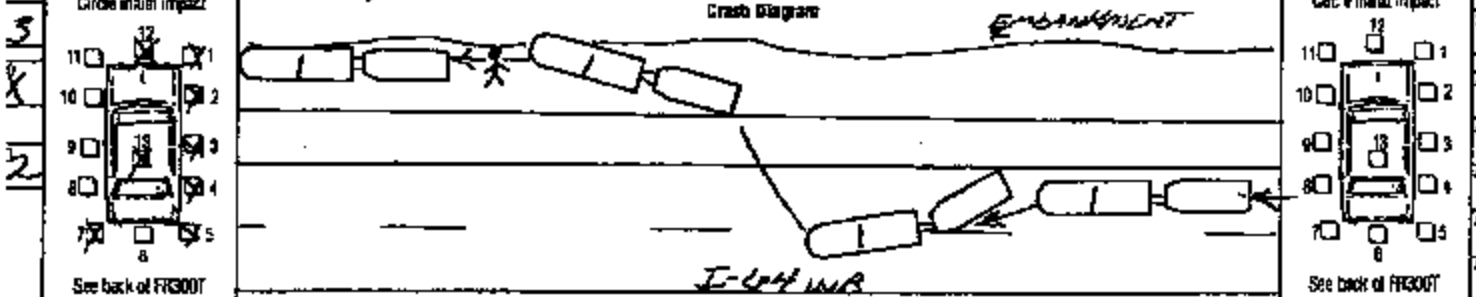
A. Veh. type 7	Veh. year 01	Veh. make DODGE	Veh. model DIPLOMAT	DMV Towed <input checked="" type="checkbox"/>	A. Veh. type	Veh. year	Veh. make	Veh. model	DMV Towed <input type="checkbox"/>
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Vehicle plate number SLEP2	State SD	B. DMV type 1	EMV in service 3	Approximate repair cost 29,000	Vehicle plate number	State	B. EMV type	EMV in service	Approximate repair cost
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U.S. DOT no. or VA no.	Class or name	U.S. DOT no. or VA no.	Placed no. and class or name
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No. of axles	Truck cover <input type="checkbox"/> Y <input type="checkbox"/> N	GVMR <input type="checkbox"/> 10,000 and under <input type="checkbox"/> 10,001 to 25,000 <input type="checkbox"/> over 25,000	<input type="checkbox"/> HAZMAT <input type="checkbox"/> Oversize	<input type="checkbox"/> Cargo spill <input type="checkbox"/> Damaged <input type="checkbox"/> Unusable	No. of axles	Truck cover <input type="checkbox"/> Y <input type="checkbox"/> N	GVMR <input type="checkbox"/> 10,000 and under <input type="checkbox"/> 10,001 to 25,000 <input type="checkbox"/> over 25,000	<input type="checkbox"/> HAZMAT <input type="checkbox"/> Oversize	<input type="checkbox"/> Cargo spill <input type="checkbox"/> Damaged <input type="checkbox"/> Unusable
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Vehicle no. 1 storage	Name of insurance company (not agent) PROGRESSIVE	Name of insurance company (not agent)	Vehicle no. 2 storage
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Speed Before crash 105	Limit 65	Max. rate 65	Time dir W	Speed Before crash	Limit	Max. rate	Time dir
Passenger's age group Less than 6-17 6-17 18-21 Over 21				Passenger's age group Less than 6-17 6-17 18-21 Over 21			

Damage to property other than vehicles	Approximate repair cost	Object struck (tree, fence, etc.)	Property owner's name (last, first, middle) and address
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Crash description: #1 LOST CONTROL DUE TO TIRE BLOWOUT, RAN OFF ROAD RIGHT, STRUCK EMBANKMENT. PASSENGER AFTER STRIKING EMBANKMENT. VEHICLE #1 TOWING A PASSENGER VEHICLE.

Offenses charged driver NONE
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12	13	14	15	16	17	18	19	20	Names of injured (if deceased give date of death)	DMV Refused	Date of death: MM/DD/YYYY
1	3	1	2	3	8/31/53	F	1	X	SHELDON, RUTH MAE	N	09/26/2004
1	1	4	2	1	8/13/43	M	2	X	LIEFDORN, DENNIS D.	Y	

All injured

	<b>Traffic control</b> 1. No traffic control 2. Officer or flagger 3. Traffic signal 4. Stop sign 5. Slow or warning sign 6. Traffic lanes marked 7. No passing lines 8. Yield sign 9. One way road or street 10. Railroad crossing with markings and signs 11. Railroad crossing with signals 12. Railroad crossing with gate and signals 13. Other 14. Pedestrian crosswalk 15. Reduced speed - school zone 16. Reduced speed - work zone 17. Special corridor	<b>Vehicle maneuver</b> 1. Going straight ahead 2. Making right turn 3. Making left turn 4. Making U-turn 5. Slowing or stopping 6. Starting in traffic lane 7. Starting from parked position 8. Stopped in traffic lane 9. Ran off road - right 10. Ran off road - left 11. Parked 12. Backing 13. Passing 14. Changing lanes 15. Other 16. Exiting street from parking lot			
1		<b>Type of collision</b> 1. Rear end 2. Angle 3. Head on 4. Sideswipe - same direction 5. Sideswipe - opposite direction 6. Fixed object in road 7. Balls 8. Non-collision 9. Fixed object - off road 10. Deer 11. Other animal 12. Pedestrian 13. Bicyclist 14. Motorcycle 15. Backed into 16. Other	Vehicle 1 3 Vehicle 2 3 Vehicle 2 3		
2	<b>Was traffic control working?</b> 1. Yes 2. No	<b>Collision with fixed object</b> 1. Bank or ledge 2. Tree 3. Utility pole 4. Fence or post 5. Guard rail 6. Parked vehicle 7. Tunnel, bridge, underpass, culvert, etc. 8. Sign, traffic signal 9. Impact cushioning device 10. Other 11. Jersey wall 12. Building/structure	Vehicle 1 28 Vehicle 2 29		
3	<b>Roadway alignment</b> 1. Straight - Level 2. Curve - Level 3. Grade - Straight 4. Grade - Curve 5. Hillcrest - Straight 6. Hillcrest - Curve 7. Dip - Straight 8. Dip - Curve 9. Other 10. Over/Off Ramp	<b>Driver's action</b> 1. No improper action 2. Exceeded speed limit 3. Exceeded safe speed but not speed limit 4. Overtaking on left 5. Overtaking on curve 6. Overtaking at intersection 7. Improper passing of school bus 8. Calling in 9. Other improper passing 10. Wrong side of road - not overtaking 11. Did not leave right-of-way 12. Following too close 13. Fall to signal or improper signal 14. Improper turn - wide right turn 15. Improper turn - cut corner or left turn 16. Improper turn - wrong lane 17. Other improper turn 18. Improper backing 19. Improper start from parked position 20. Discarded officer or flagger 21. Discarded traffic signal 22. Discarded stop or yield sign 23. Driver distraction 24. Failed to stop at through highway - no sign 25. Drive through work zone 26. Fall to exit of fence or flag 27. Fall to dim headlights 28. Driving artificial lights 29. Improper parking location 30. Avoiding pedestrian 31. Avoiding other vehicle 32. Avoiding animal 33. Crowded off highway 34. Hit and run 35. Car on away - no driver 36. Blinded by headlights 37. Other 38. Avoiding object in roadway 39. Entering police 40. Failed to maintain proper control 41. Improper passing 42. Improper or unsafe lane change 43. Over correction	Vehicle 1 28 Vehicle 2 29 Vehicle 1 30 Vehicle 2 31 Vehicle 1 32 Vehicle 2 33		
4	<b>Weather</b> 1. Clear 2. Cloudy 3. Fog 4. Mist 5. Rain 6. Snow 7. Steam/Fog 8. Smoke/Dust 9. Other	<b>Driver vision obscured</b> 1. Not obscured 2. Rain, snow, etc. on windshield 3. Windshield otherwise obscured 4. Vision obscured by load on vehicle 5. Trees, crops, etc. 6. Building 7. Encumbrance 8. Sign or signboard 9. Hillcrest 10. Parked vehicle(s) 11. Moving vehicle(s) 12. Sun or headlight glare 13. Other 14. Blurred spot 15. Spray/dust 16. Stopped vehicle(s)	<b>Type of driver distractions</b> 1. Looking at roadside incident 2. Driver fatigue 3. Looking at scenery 4. Passengers(s) 5. Radio/CD, etc. 6. Cell phone 7. Eyes not on road 8. Daydreaming 9. Eating/drinking 10. Adjusting vehicle controls 11. Other	<b>Condition of driver/pedestrian contributing to the crash</b> 1. No defects 2. Eyesight defective 3. Hearing defective 4. Other body defects 5. Illness 6. Fatigued 7. Apparently asleep 8. Other	Vehicle 1 34 Vehicle 2 35 Pedestrian 35 Vehicle 1 37 Vehicle 2 38 Pedestrian 39
5	<b>Roadway surface conditions</b> 1. Dry 2. Wet 3. Snowy 4. Ice 5. Icy 6. Oil/Other liquids 7. Other 8. Natural debris 9. Roadway flooded	<b>Driver vision obscured</b> 1. Not obscured 2. Rain, snow, etc. on windshield 3. Windshield otherwise obscured 4. Vision obscured by load on vehicle 5. Trees, crops, etc. 6. Building 7. Encumbrance 8. Sign or signboard 9. Hillcrest 10. Parked vehicle(s) 11. Moving vehicle(s) 12. Sun or headlight glare 13. Other 14. Blurred spot 15. Spray/dust 16. Stopped vehicle(s)	<b>Condition of driver/pedestrian contributing to the crash</b> 1. No defects 2. Eyesight defective 3. Hearing defective 4. Other body defects 5. Illness 6. Fatigued 7. Apparently asleep 8. Other	Vehicle 1 34 Vehicle 2 35 Pedestrian 35 Vehicle 1 37 Vehicle 2 38 Pedestrian 39	
6	<b>Roadway defects</b> 1. No defects 2. Holes, ruts, bumps 3. Soft or low shoulder 4. Under repair 5. Loose material 6. Restricted width 7. Slick pavement 8. Other 9. Roadway obstructed 10. Other	<b>Driver vision obscured</b> 1. Not obscured 2. Rain, snow, etc. on windshield 3. Windshield otherwise obscured 4. Vision obscured by load on vehicle 5. Trees, crops, etc. 6. Building 7. Encumbrance 8. Sign or signboard 9. Hillcrest 10. Parked vehicle(s) 11. Moving vehicle(s) 12. Sun or headlight glare 13. Other 14. Blurred spot 15. Spray/dust 16. Stopped vehicle(s)	<b>Condition of driver/pedestrian contributing to the crash</b> 1. No defects 2. Eyesight defective 3. Hearing defective 4. Other body defects 5. Illness 6. Fatigued 7. Apparently asleep 8. Other	Vehicle 1 34 Vehicle 2 35 Pedestrian 35 Vehicle 1 37 Vehicle 2 38 Pedestrian 39	
7	<b>Light conditions</b> 1. Dawn 2. Daylight 3. Dusk 4. Darkness - roadway lighted 5. Darkness - roadway not lighted	<b>Driver vision obscured</b> 1. Not obscured 2. Rain, snow, etc. on windshield 3. Windshield otherwise obscured 4. Vision obscured by load on vehicle 5. Trees, crops, etc. 6. Building 7. Encumbrance 8. Sign or signboard 9. Hillcrest 10. Parked vehicle(s) 11. Moving vehicle(s) 12. Sun or headlight glare 13. Other 14. Blurred spot 15. Spray/dust 16. Stopped vehicle(s)	<b>Condition of driver/pedestrian contributing to the crash</b> 1. No defects 2. Eyesight defective 3. Hearing defective 4. Other body defects 5. Illness 6. Fatigued 7. Apparently asleep 8. Other	Vehicle 1 34 Vehicle 2 35 Pedestrian 35 Vehicle 1 37 Vehicle 2 38 Pedestrian 39	
8	<b>Kind of locality</b> 1. School 2. Church 3. Playground 4. Open country 5. Business/Industrial 6. Residential 7. Interstate/Limited access 8. Other 9. Bridge/Tunnel 10. Parking lot	<b>Driver vision obscured</b> 1. Not obscured 2. Rain, snow, etc. on windshield 3. Windshield otherwise obscured 4. Vision obscured by load on vehicle 5. Trees, crops, etc. 6. Building 7. Encumbrance 8. Sign or signboard 9. Hillcrest 10. Parked vehicle(s) 11. Moving vehicle(s) 12. Sun or headlight glare 13. Other 14. Blurred spot 15. Spray/dust 16. Stopped vehicle(s)	<b>Condition of driver/pedestrian contributing to the crash</b> 1. No defects 2. Eyesight defective 3. Hearing defective 4. Other body defects 5. Illness 6. Fatigued 7. Apparently asleep 8. Other	Vehicle 1 34 Vehicle 2 35 Pedestrian 35 Vehicle 1 37 Vehicle 2 38 Pedestrian 39	
9	<b>Work zone</b> 1. Active 2. Inactive 3. No work zone 4. Unknown	<b>Driver vision obscured</b> 1. Not obscured 2. Rain, snow, etc. on windshield 3. Windshield otherwise obscured 4. Vision obscured by load on vehicle 5. Trees, crops, etc. 6. Building 7. Encumbrance 8. Sign or signboard 9. Hillcrest 10. Parked vehicle(s) 11. Moving vehicle(s) 12. Sun or headlight glare 13. Other 14. Blurred spot 15. Spray/dust 16. Stopped vehicle(s)	<b>Condition of driver/pedestrian contributing to the crash</b> 1. No defects 2. Eyesight defective 3. Hearing defective 4. Other body defects 5. Illness 6. Fatigued 7. Apparently asleep 8. Other	Vehicle 1 34 Vehicle 2 35 Pedestrian 35 Vehicle 1 37 Vehicle 2 38 Pedestrian 39	
10	<b>Work zone - work zone present</b> 1. Yes 2. No 3. Unknown	<b>Driver vision obscured</b> 1. Not obscured 2. Rain, snow, etc. on windshield 3. Windshield otherwise obscured 4. Vision obscured by load on vehicle 5. Trees, crops, etc. 6. Building 7. Encumbrance 8. Sign or signboard 9. Hillcrest 10. Parked vehicle(s) 11. Moving vehicle(s) 12. Sun or headlight glare 13. Other 14. Blurred spot 15. Spray/dust 16. Stopped vehicle(s)	<b>Condition of driver/pedestrian contributing to the crash</b> 1. No defects 2. Eyesight defective 3. Hearing defective 4. Other body defects 5. Illness 6. Fatigued 7. Apparently asleep 8. Other	Vehicle 1 34 Vehicle 2 35 Pedestrian 35 Vehicle 1 37 Vehicle 2 38 Pedestrian 39	
11	<b>Surface type</b> 1. Concrete 2. Blacktop, asphalt, bituminous 3. Brick or block 4. Sand, gravel, stone 5. Dirt 6. Other 7. Unknown	<b>Driver vision obscured</b> 1. Not obscured 2. Rain, snow, etc. on windshield 3. Windshield otherwise obscured 4. Vision obscured by load on vehicle 5. Trees, crops, etc. 6. Building 7. Encumbrance 8. Sign or signboard 9. Hillcrest 10. Parked vehicle(s) 11. Moving vehicle(s) 12. Sun or headlight glare 13. Other 14. Blurred spot 15. Spray/dust 16. Stopped vehicle(s)	<b>Condition of driver/pedestrian contributing to the crash</b> 1. No defects 2. Eyesight defective 3. Hearing defective 4. Other body defects 5. Illness 6. Fatigued 7. Apparently asleep 8. Other	Vehicle 1 34 Vehicle 2 35 Pedestrian 35 Vehicle 1 37 Vehicle 2 38 Pedestrian 39	
12	<b>Vehicle occupied for jurisdiction</b> 1. Vehicle No. 1 2. Vehicle No. 2 3. Bicyclist 4. Pedestrian 5. Other	<b>Injury type</b> 1. Dead before report made 2. Visible signs of injury, as bleeding wound or distended member or fluid to be carried from scene. 3. Other visible injury, as lacerations, abrasions, swelling, lumps, etc. 4. No visible injury, but complaint of pain, or necessary unconsciousness.	<b>Pedestrian actions</b> 1. Crossing at intersection - with signal 2. Crossing at intersection - against signal 3. Crossing at intersection - no signal 4. Crossing at intersection - illegally 5. Crossing not at intersection - rural 6. Crossing not at intersection - urban 7. Coming from behind parked cars 8. Getting off or on school bus 9. Playing in roadway 10. Getting off or on another vehicle 11. Hitchhiking on vehicle 12. Walking in roadway with traffic - sidewalks available 13. Walking in roadway with traffic - sidewalks not available 14. Walking in roadway against traffic - sidewalks available 15. Walking in roadway against traffic - sidewalks not available 16. Working in roadway 17. Standing in roadway 18. Lying in roadway 19. Not in roadway 20. Other	<b>Drug user</b> 1. Yes 2. No 3. Not reported 4. Unknown	Vehicle 1 40 Vehicle 2 41 Pedestrian 42 Vehicle 1 43 Vehicle 2 44 Pedestrian 45 Vehicle 1 46 Vehicle 2 47 Vehicle 1 48 Vehicle 2 49 Vehicle 1 50 Vehicle 2 51
13	<b>Position in/on vehicle</b> 1. Driver 2-6. Passengers 7. Cargo area 8. Riding/sleeping on outside 9-99. All other passengers	<b>Birth date</b> MM/DD/YYYY <b>Gender</b> M/F	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	Vehicle 1 40 Vehicle 2 41 Pedestrian 42 Vehicle 1 43 Vehicle 2 44 Pedestrian 45 Vehicle 1 46 Vehicle 2 47 Vehicle 1 48 Vehicle 2 49 Vehicle 1 50 Vehicle 2 51
14	<b>Seat belt equipment used</b> 1. No restraint used 2. Lap belt only 3. Shoulder belt only 4. Lap and shoulder belts 5. Child restraint 6. Helmet 7. Other 8. Booster seat	<b>Air bag</b> 1. Deployed 2. Not deployed 3. Unusable 4. Kicked off 5. Unknown	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	Vehicle 1 40 Vehicle 2 41 Pedestrian 42 Vehicle 1 43 Vehicle 2 44 Pedestrian 45 Vehicle 1 46 Vehicle 2 47 Vehicle 1 48 Vehicle 2 49 Vehicle 1 50 Vehicle 2 51
15	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	Vehicle 1 40 Vehicle 2 41 Pedestrian 42 Vehicle 1 43 Vehicle 2 44 Pedestrian 45 Vehicle 1 46 Vehicle 2 47 Vehicle 1 48 Vehicle 2 49 Vehicle 1 50 Vehicle 2 51
16	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	Vehicle 1 40 Vehicle 2 41 Pedestrian 42 Vehicle 1 43 Vehicle 2 44 Pedestrian 45 Vehicle 1 46 Vehicle 2 47 Vehicle 1 48 Vehicle 2 49 Vehicle 1 50 Vehicle 2 51
17	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	Vehicle 1 40 Vehicle 2 41 Pedestrian 42 Vehicle 1 43 Vehicle 2 44 Pedestrian 45 Vehicle 1 46 Vehicle 2 47 Vehicle 1 48 Vehicle 2 49 Vehicle 1 50 Vehicle 2 51
18	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	Vehicle 1 40 Vehicle 2 41 Pedestrian 42 Vehicle 1 43 Vehicle 2 44 Pedestrian 45 Vehicle 1 46 Vehicle 2 47 Vehicle 1 48 Vehicle 2 49 Vehicle 1 50 Vehicle 2 51
19	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	Vehicle 1 40 Vehicle 2 41 Pedestrian 42 Vehicle 1 43 Vehicle 2 44 Pedestrian 45 Vehicle 1 46 Vehicle 2 47 Vehicle 1 48 Vehicle 2 49 Vehicle 1 50 Vehicle 2 51
20	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	<b>Medical condition</b> 1. Blood 2. Breath 3. Refused 4. No test	Vehicle 1 40 Vehicle 2 41 Pedestrian 42 Vehicle 1 43 Vehicle 2 44 Pedestrian 45 Vehicle 1 46 Vehicle 2 47 Vehicle 1 48 Vehicle 2 49 Vehicle 1 50 Vehicle 2 51
Name of injured (if deceased give date of death)			EMS transport	Date of death MM/DD/YYYY	

Vehicle type (put in box A)	
1. Passenger car	16. Bus - commercial passenger bus (seats 9-15 people, including driver)
2. Truck - pick-up/passenger truck	17. Bus - commercial passenger bus (seats 15+ people, including driver)
3. Van	18. Other
4. Truck - straight truck (2-side), flat bed, dump truck, wrecker, tractor truck	19. Special vehicle - farm equip, go-cart, hearse, boatmobile
5. Truck - tractor trailer	20. Special vehicle - ATV
6. Truck - tractor twin-trailer	21. Special vehicle - golf cart
7. Motor home, recreational vehicle	22. Special vehicle - low-speed vehicle
8. Special vehicle - oversized vehicle/earthmover/road equipment	23. Truck - sport utility vehicle
9. Bicycle	24. Truck - straight truck (3 or more sides)
10. Moped	25. Truck - tractor triple-trailer (bobtail - no trailer)
11. Motorcycle	
12. Emergency vehicle	
13. Bus - school bus	
14. Bus - city transit bus/private-owned church bus	

Emergency vehicle type (put in box B)		Emergency vehicle status (put in box C)	
1. Not applicable	5. Tow truck	1. Yes, in emergency	3. Not applicable
2. Police	6. Military	2. No, not in emergency	4. Unknown
3. Fire	7. Maintenance		
4. Ambulance	8. Other		

**Impact areas**  
The impact areas are for the full vehicle including the trailer (if any). (i.e., for a car, 9 is the driver's door but for a car and trailer a 9 could be the hitch point).

Motorcycle	Car-trailer	Semi-trailer	Semi-tractor

**CHILDRESS, FLAX & LEVINE, P.C.**  
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CALVIN H. CHILDRESS, of Counsel  
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JEFFREY C. FLAX  
Jflax9601@aol.com

LEONARD LEVINE

December 9, 2004

**VIA UPS OVERNIGHT DELIVERY**

  
Richmond, VA 23229

**RE: My Client: Estate of **  
**Date of Accident: September 26, 2004**

Dear 

Pursuant to our recent conversations concerning the above referenced accident which resulted in the death of Ruth Sheehan, we would like to engage your services as an expert to investigate the circumstances of this accident and determine whether or not a possible product liability case may exist.

I am enclosing with this letter the following documentary information to assist you in your investigation:

1. Virginia State Police Department Accident Report.
2. Death Certificate.
3. License Application containing the year, make, model and VIN number of the vehicle involved.
4. Factual summary prepared by Dennis Lillefloren.

5. Photographs of the scene of the accident and the vehicle.

This accident occurred on September 26, 2004, on I-64 Westbound near Route 799 in Louisa County. Mr. Lilleflore who co-owned the vehicle with Ruth Sheehan was operating a 2001 Monaco recreational motor home. The weather was not a factor in the accident. As you can see from Mr. Lilleflore's statement, a tire blew out on the right front of the vehicle while on the highway. In attempting to control the vehicle, it was forced off the roadway and ran partially up an embankment on the side of the road. The vehicle did not turn over. Mr. Lilleflore indicates that the front windows blew out and that the right front passenger door and screen door came off. Ms. Sheehan was ejected from the vehicle we believe through that right front passenger door and killed.

We are asking you to investigate at least two (2) specific issues which appear to be relevant:

1. Why did the doors come off and was there a design or manufacturers defect with that door which caused it to fail under these circumstances;
2. Is there an issue with respect to the tire blow out on this vehicle insofar as either a tire defect or possible recall on this tire or by the RV manufacturer.

We understand that you have quite a bit of experience in the recreational vehicle field. I have executed your retainer agreement which you forwarded and I am enclosing an initial retainer fee of Fifteen Hundred Dollars (\$1,500.00).

As I had discussed with you by telephone, however we would like to establish an initial budget in this matter and prior to incurring expenses or billings in excess of the enclosed Fifteen Hundred Dollars (\$1,500.00) you will need to contact me for further authorization.

The vehicle is located at the following address:

Road Runner  
15175 Review Road  
Culpepper, Virginia 22701  
(540) 727-7982

Stock Number: 70688

Office Hours are Monday through Friday from 8:00 a.m. to 4:00 p.m.

The insurance company has indicated that it will remain there until they receive further notice from us. Therefore, time is of the essence in your investigation.

If you feel it will be necessary for us to maintain any of the physical evidence, such as the door or tires please let me know immediately, so that arrangements can be made with the insurance company prior to their taking possession of the vehicle.

If you feel the need to speak to the insurance adjuster her name is Alice Eriavez, with Progressive Insurance and her telephone number is (804) 364-6669.

We understand that both the door and the tires have been placed with the vehicle, so they should be available for your inspection.

Please confirm receipt of this information and advise me of your undertaking your investigation.

Very truly yours,

CHILDRESS, FLAX & LEVINE



Jeffrey C. Flax

JCF/acm

Enclosures

cc: Nichole Duncan

To protect the privacy of individuals, NHTSA does not make medical records available to the public without authorization. For this reason, documents falling into this category have not been included in this complaint record.