

[illegible]

OHIO TRAFFIC ACCIDENT - DIAGRAM/NARRATIVE CONTINUATION

OH - 2

LOCAL REPORT NUMBER 10910103	REPORTING AGENCY STATE HIGHWAY PATROL	DATE OF ACCIDENT 10/21/07
IN COUNTY OF MAHONING	ACCIDENT LOCATION SR 76 2.10 MILE EAST OF MARIETTA 234	

1. UNIT #1 DAMAGE 2 REAR FENDER, LHS REAR FENDER AND
HARD DISSEMBLY CAME OFF UNIT.

2. DRIVER OF UNIT #1 STATED THE VEHICLE HAD NOT HAD CAR
MAINTENANCE PERFORMED ON IT LATELY.

3. NO ADVERSE WEATHER CONDITIONS.

OFFICER'S SIGNATURE *[Signature]* BADGE NUMBER *[Signature]*

OHIO TRAFFIC CRASH WITNESS STATEMENT

OH-9 REV 1/82

LOCAL REPORT NUMBER 10-91-0103	REPORTING AGENCY STATE HIGHWAY PATROL	DATE OF CRASH 10/20/03
---	---	---------------------------

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

I, [REDACTED] (PRINTED) _____, HEREBY MAKE THIS VOLUNTARY STATEMENT TO
[REDACTED] (OFFICER'S NAME) AT [REDACTED] (LOCATION)

I WAS GO WEST AT 55 MPH
GETTING OFF AT 680.
THE LEFT AXLE BROKE
OFF BEFORE EXIT

Q. WITH WHOM WERE YOU AND
A. ALONE.

Q. WHAT LANE?
A. RIGHT LANE.

Q. HAVE YOU HAD ANY VEHICLE WORK DONE RECENTLY?
A. NO.

Q. DID YOU HAVE ANY INDICATION THE AXLE WAS ABOUT TO BREAK?
A. NO. IT FELT LIKE A BUMP GROOVE AND WENT TO PULL OVER SIDE
OF ROAD AND AXLE CAME OFF.

Q. ARE YOU INSURED?
A. NO.

ADDRESS OF
WITNESS
[REDACTED]
SIGNATURE
OF
WITNESS
[REDACTED]

McKenna PA
[REDACTED]
OFFICER'S SIGNATURE
[REDACTED]