

Complaint Number

11288428

INFORMATION REDACTED PURSUANT TO THE FREEDOM OF INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

No. [REDACTED]

JIM HUDSON MOTORS, INC.
dba JIM HUDSON MITSUBISHI

Personally appeared before me _____ (Seller) _____ (Dealer Retail Tax #)

310 GREYSTONE BLVD. COLUMBIA SC 29210

(Address)

who being duly sworn, deposes and says that on the 7th day of AUG 19 99

he sold the following motor vehicle: Make MITSUBISHI Model MONTE SPT

Year 2000 Identification (Serial) No. JA4LS31H1Y [REDACTED]

License No. _____ to [REDACTED] (Buyer)

[REDACTED] IRMO RICH SC [REDACTED]
(Street) (City) (County) (State) (Zip)

Special Mailing Address

Deponent further states that there are no liens or encumbrances on the said vehicle except as listed below:

Lienholder NMCA Amount 27596.00

Address P.O. BOX 6943 CYPRESS CA 90630 Date 08/07/99

I certify that the odometer now reads 165 (no tenths) miles and to the best of my knowledge that it reflects the actual mileage of the vehicle described below, unless one of the following statements is checked.

(1) I hereby certify that to the best of my knowledge, the odometer reading reflects the amount of mileage in excess of its mechanical limits.

(2) I hereby certify that the odometer reading is NOT the actual mileage. WARNING - ODOMETER DISCREPANCY

Federal law (and State law, if applicable) requires that you state the mileage upon transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.

JIM HUDSON MOTORS, INC.
dba JIM HUDSON MITSUBISHI

[Signature] _____
(Signature of Seller)

JIM HUDSON MOTORS, INC. 99
(Print Seller's Name)

[REDACTED] _____
(Signature of Buyer)

[REDACTED] _____
(Print Buyer's Name)

Property Tax Section
Check One:

Purchase License Plate

D. L. Number [REDACTED]

License Plate Issued _____

Transfer License Plate

[REDACTED] _____
Signature of Buyer/ purchasing plates

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11288428



Complaint Number
11288420



Complaint Number

11288428



Complaint Number
112888428



Complaint Number
11288428



Complaint Number
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JAN 12 2011

ORIGINAL

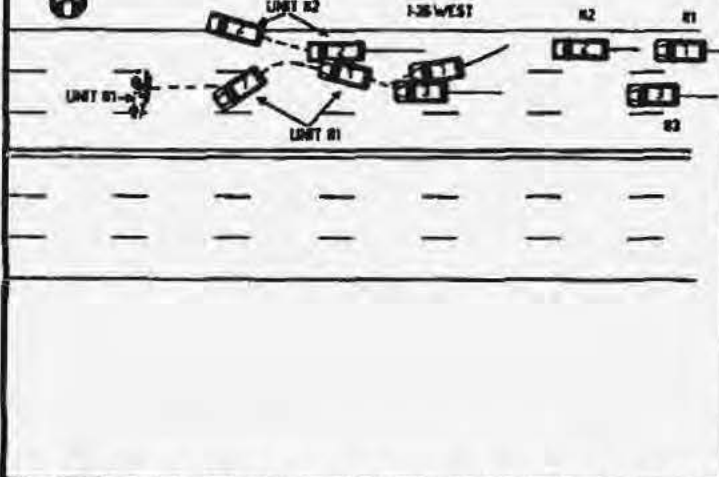
SOUTH CAROLINA DRIVERS & DMV USE ONLY		Page # 1	SOUTH CAROLINA TRAFFIC COLLISION REPORT FORM TR - 310 (Rev. 7/2010)		# Of Units 03	Arrested - Attach Copy of Original Report Convicted	Notified 1 2 0 5	Arrived 1 2 1 8
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Date 12-11-2010	Time of Collision 1200	Owner 32	1- Interstate 2- US Primary 3- SC Primary	4- Secondary 5- County 6- PP	Collision Location (RT # / Name) E 281	1- Main 2- Alternate 3- Spur	4- Connection 5- Business 6- Other	Miles: 1.50	Dir. N E S W	In (Near) City or Town of: IRMO
Lane # / Dr. 2 / S W	Distance Offset .75	Direction N E	1- Interstate 2- US Primary 3- SC Primary	4- Secondary 5- County 6- Other	Base Intersection (RT # / Name) 871 PINEY GROVE RD	1- Main 2- Alternate 3- Spur	4- Connection 5- Business 6- Other	GPS COORDINATES 00 00 00 00 DEGREES MINUTES SECONDS		
R.R. Id.	From N E S W	Ramp Only 1- Entrance 2- Exit	1- Interstate 2- US Primary 3- SC Primary	4- Secondary 5- County 6- Other	Second Intersection (RT # / Name) / RICHLAND CO. LINE	1- Main 2- Alternate 3- Spur	4- Connection 5- Business 6- Other	Latitude 34 04 32.10	Longitude 81 08 00.94	

Unit # 01	Sex M	Race W	Street/R.F.D. [REDACTED]	City, State, & Zip [REDACTED]	Unit # 02	Sex F	Race W	Street/R.F.D. [REDACTED]	City, State, & Zip SWANSEA SC	
Birth Date [REDACTED]	Class D	Insurance Company ALLSTATE	Year 2000	Body SU	Vehicle Make MITS	VIN # JA4LS31H1YF	Year 2002	Body VN	Vehicle Make HOND	VIN # 2HKRL189R2H6
State SC	Year 2011	License Plate # [REDACTED]	Owner's Full Name [REDACTED]	Home Telephone [REDACTED]	State SC	Year 2011	License Plate # [REDACTED]	Owner's Full Name [REDACTED]	Home Telephone [REDACTED]	
Contributed To Collision Yes (X) No					Contributed To Collision Yes (X) No					
Estimated Speed 60	Speed Limit 60	C.D.L. Req. Yes (X) No	T/B/S Req. Yes (X) No	Alc/Drg Info (see back): Yes (X) No	Estimated Speed 15	Speed Limit 60	C.D.L. Req. Yes (X) No	T/B/S Req. Yes (X) No	Alc/Drg Info (see back): Yes (X) No	
State SC					State IN					

Unit # 03	Sex M	Race W	Street/R.F.D. [REDACTED]	City, State, & Zip HELTONVILLE IN	Unit # 02	Sex M	Race W	Street/R.F.D. [REDACTED]	City, State, & Zip [REDACTED]	
Birth Date [REDACTED]	Class NA	Insurance Company HASTINGS MUTUAL	Year 2003	Body SU	Vehicle Make CHEV	VIN # 1GN0T13853	Year 2011	Body SU	Vehicle Make [REDACTED]	VIN # [REDACTED]
State IN	Year 2011	License Plate # [REDACTED]	Owner's Full Name [REDACTED]	Home Telephone [REDACTED]	State IN	Year 2011	License Plate # [REDACTED]	Owner's Full Name [REDACTED]	Home Telephone [REDACTED]	
Contributed To Collision Yes (X) No					Contributed To Collision Yes (X) No					
Estimated Speed 60	Speed Limit 60	C.D.L. Req. Yes (X) No	T/B/S Req. Yes (X) No	Alc/Drg Info (see back): Yes (X) No	Estimated Speed 60	Speed Limit 60	C.D.L. Req. Yes (X) No	T/B/S Req. Yes (X) No	Alc/Drg Info (see back): Yes (X) No	

Dir. of Travel:	Unit 1: N S E (W)	Unit 2: N S E (W)	Unit 3: N S E (W)	Unit 1 Dam. \$ 8500	Unit 2 Dam. \$ 5000	Unit 3 Dam. \$ 4000	Prop. Dam. 1 \$	Prop. Dam. 2 \$
Property Owned (Driver)				Property Owned (Witness)				
Address [REDACTED]				Address [REDACTED]				
City COLUMBIA				City IRMO				
State SC				State SC				



Describe What Happened (Refer to Units by Number)
Y (X)

ALL UNITS WERE TRAVELING WEST ON I-26. DRIVER OF UNIT #2 SLOWED FOR TRAFFIC STOPPING AHEAD. DRIVER OF UNIT #1 WAS TRAVELING TOO FAST FOR CONDITIONS AND SWERVED LEFT TO AVOID STRIKING REAR OF UNIT #2 BUT STRUCK THE RIGHT SIDE OF UNIT #3. UNIT #1 THEN STRUCK THE LEFT SIDE OF UNIT #2 AND LOST CONTROL CAUSING UNIT #1 TO OVERTURN ON THE ROADWAY.

NOTICE - THE TR-310 IS FOR STATISTICAL REPORTING PURPOSES ONLY AND IS A REFLECTION OF THE OFFICER'S BEST KNOWLEDGE, OPINION AND BELIEF COVERING THE COLLISION BUT NO WARRANTY IS MADE AS TO THE FACTUAL ACCURACY THEREOF.									
Investigating Officer's Name KYZER - B E	Rank LCPL	Badge # 1770	Jurisdiction Code HP01	Review Date 12-11-2010	Reviewer's Name CHRISTOPHER SHELTON	Rank SGT	Internal Agency Code 10BW248051		

Complaint Number 11258428

Certified to be a true and correct
copy of the original document on file
with the South Carolina Department of
Motor Vehicles.

S. H. Lewis
Driver Services, Director

Unit	Date of Birth	Sex	Race	INJ	Seat	R/S/D	A/B/D	Eject	LAI	Tran	Name	Street Address	City	State	Zip Code
1				2	01	13	4	3	1	2	1		IRMO	SC	
2				1	01	13	4	3	1	1	1		SWANSEA	SC	
3				0	01	13	4	3	1	1	2		HELTONVILL	IN	
2				1	03	13	4	3	1	1	1		GASTON	SC	
03				0	05	13	4	3	1	1	2		BEDFORD	IN	
02				0	06	13	7	3	1	1	1		SWANSEA	SC	

Race A - Asian/Pacific Islander B - African American C - Hispanic D - Other E - Unknown		W - Caucasian U - Other U - Unknown		a) Injury Status 0 - Not Injured 1 - Possible Injury 2 - Non-incapacitating 3 - Incapacitating 4 - Fatal		Seating Loc. 01 02 03 04 05 06 07 08 09		20 - Pedestrian 30 - Trailing Unit 40 - Bus or Van (4th row or higher) 50 - Other Enclosed Area (nontrailing) 51 - Other Unenclosed Area (nontrailing)		60 - Sleeper of Cab 70 - Riding on Unit Exterior 80 - Lap 90 - Other Unenclosed Area (nontrailing)		Restraint/Safety Device 00 - None Used 11 - Shoulder belt 12 - Lap Belt Only 13 - Shoulder & Lap Belt 21 - Child 22 - Safety Seat 23 - Other 24 - Other (Seat, Support, Etc.) 25 - Other (MMA, Building, Tunnel, Etc.) 26 - Tote 27 - Utility Pole 28 - Work Zone Mater. Equipment	
Air Bag Deployment / Switch 1 - Deployed Front 2 - Deployed Side 3 - Deployed Both 4 - Not Deployed 5 - Not Applicable 6 - Deployment Unknown		Ejection 1 - Not Ejected 2 - Part Ejected 3 - Tot Ejected 4 - Not App 5 - Unknown		b) 2 or 3 Wheel Motorized Vehicle Head Injury 1 - Yes 2 - No Location After Impact 1 - Not Trapped 2 - Ejected (Mechanical Means) 3 - Freed (non-mech) 4 - Not Applicable 5 - Unknown		Transported to Medical Facility 1 - Yes 2 - No 3 - Unknown		By 1 - EMS 2 - Police 3 - Other 4 - Unknown		31 - Helmet 32 - Reflective Clothing 33 - Protective Pads 34 - Lighting			
Non-Collision 01 - Collapsed Lines or Ribs 02 - Cross Median Center 03 - Downhill Runaway 04 - Equipment Failure 05 - Pile-Up/Collision 06 - Intersection 07 - Jactivity 08 - Overturn/Rollover 09 - Run off Road Left 10 - Run off Road Right 11 - Separation of Units 12 - Spill (Two-Wheelers Only) 13 - Other Non-collision 14 - Unknown		Collision Not Faced 15 - Arrest (Door Only) 16 - Arrest (All Other) 17 - Motor Veh. (In Transport) 18 - Motor Veh. (Stopped) 19 - Motor Veh. (Other Recovery) 20 - Motor Veh. (Parade) 21 - Pedestrian 22 - Railway Veh. 23 - Work Zone Mater. Equip. 24 - Other Movable Object 25 - Unknown		Collision: Fixed Object 26 - Bridge Overhead Structure 27 - Bridge Pier or Abutment 28 - Guardrail 29 - Highway Traffic Sign Post 30 - Impact Attenuator/Crash Cushion 31 - Light/Luminous Support 32 - Mail Box 33 - Median Barrier 34 - Overhead Sign Support 35 - Other (Post, Pole, Support, Etc.) 36 - Other (MMA, Building, Tunnel, Etc.) 37 - Tree 38 - Utility Pole 39 - Work Zone Mater. Equipment		40 - Other 41 - Unknown							
Manner of Collision (Struck Veh) 1 - 00 - Not Coll. w/ Motor Veh. 2 - 10 - Rear End 3 - 20 - Head On 4 - 30 - Rear-to-Rear 5 - 40 - Angle ("A" / "a") 6 - 42 - Angle (→ / ←) 7 - 43 - Angle (↘ / ↗) 8 - 50 - Side-swipe Same Dir. 9 - 60 - Side-swipe Opposite Dir. 10 - 70 - Backed Into 11 - 80 - Unknown		1st / Most Deformed Area 12 - 13 - 14 - 15 - 16 - 17 - 18 - 19 - 20 - 21 - 22 - 23 - 24 - 25 - 26 - 27 - 28 - 29 - 30 - 31 - 32 - 33 - 34 - 35 - 36 - 37 - 38 - 39 - 40 - 41 - 42 - 43 - 44 - 45 - 46 - 47 - 48 - 49 - 50 - 51 - 52 - 53 - 54 - 55 - 56 - 57 - 58 - 59 - 60 - 61 - 62 - 63 - 64 - 65 - 66 - 67 - 68 - 69 - 70 - 71 - 72 - 73 - 74 - 75 - 76 - 77 - 78 - 79 - 80 - 81 - 82 - 83 - 84 - 85 - 86 - 87 - 88 - 89 - 90 - 91 - 92 - 93 - 94 - 95 - 96 - 97 - 98 - 99 - 100 - 101 - 102 - 103 - 104 - 105 - 106 - 107 - 108 - 109 - 110 - 111 - 112 - 113 - 114 - 115 - 116 - 117 - 118 - 119 - 120 - 121 - 122 - 123 - 124 - 125 - 126 - 127 - 128 - 129 - 130 - 131 - 132 - 133 - 134 - 135 - 136 - 137 - 138 - 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S. H. Rweis

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