

DP14-004

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

CHRYSLER

9/15/2014

Legals and Cust Complaints

PUBLIC

CT CORPORATION
A WoltersKluwer Company

**Service of Process
Transmittal**

05/12/2008

CT Log Number [REDACTED]

PL
1192308



new
case

TO: Richard D Houtman, VP/Associate Gen Csl.
Chrysler LLC
Office Of General Counsel, 1000 Chrysler Drive
CIMS 485-14-78
Auburn Hills, MI 48326-2766

RE: Process Served in Louisiana

FOR: Chrysler LLC (Domestic State: DE)

ENCLOSED ARE COPIES OF LEGAL PROCESS RECEIVED BY THE STATUTORY AGENT OF THE ABOVE COMPANY AS FOLLOWS:

TITLE OF ACTION: [REDACTED] vs. Chrysler, LLC, Dodge and Chrysler, LLC,
etc., Dfts.

DOCUMENT(S) SERVED: Citation, Petition, Attachment

COURT/AGENCY: 19th Judicial District Court, Parish of East Baton Rouge, LA
Case # [REDACTED]

NATURE OF ACTION: Product Liability Litigation - Airbags failed to deploy in a 2007 Dodge Ram Truck
during collision on 05/06/2007 causing the death of Alicia Campbell Istre

ON WHOM PROCESS WAS SERVED: C T Corporation System, Baton Rouge, LA

DATE AND HOUR OF SERVICE: By Process Server on 05/12/2008 at 08:40

APPEARANCE OR ANSWER DUE: Within 15 days after you have received these documents

ATTORNEY(S) / SENDER(S): Edward G. Saal, Jr.
P.O. Box 176
Gueydan, LA 70542
337-536-9210

ACTION ITEMS: SOP Papers with Transmittal, via Fed Ex 2 Day, 791064459269
Email Notification, Richard D Houtman sprocess@chrysler.com

SIGNED: C T Corporation System
PER: Lisa Uttech
ADDRESS: 5615 Corporate Blvd
Suite 400B
Baton Rouge, LA 70808
TELEPHONE: 225-922-4490

**CHRYSLER LLC
OFFICE OF THE GENERAL COUNSEL**

MAY 14 2008

BY *aa* MAIL / REC AGENT / SEC. OF STATE / PROCSERVER

Page 1 of 1 / LU

Information displayed on this transmittal is for CT Corporation's record keeping purposes only and is provided to the recipient for quick reference. This information does not constitute a legal opinion as to the nature of action, the amount of damages, the answer date, or any information contained in the documents themselves. Recipient is responsible for interpreting said documents and for taking appropriate action. Signatures on certified mail receipts confirm receipt of package only, not contents.

CITATION



NUMBER [REDACTED] SECTION 25
19th JUDICIAL DISTRICT COURT
PARISH OF EAST BATON ROUGE
STATE OF LOUISIANA

vs.

CHRYSLER, LLC, ET AL
(Defendant)

TO: **CHRYSLER, LLC D/B/A DODGE**
THROUGH THEIR AGENT FOR SERVICE OF PROCESS:
C.T. CORPORATION SYSTEM

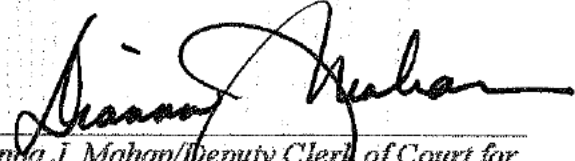
GREETINGS:

Attached to this citation is a certified copy of the petition*. The petition tells you what you are being sued for.

You must EITHER do what the petition asks OR, within fifteen (15) days after you have received these documents, you must file an answer or other legal pleading in the office of the Clerk of Court at the Governmental Building, 222 St. Louis Street, Baton Rouge, Louisiana.

If you do not do what the petition asks, or if you do not file an answer or legal pleading within fifteen (15) days, a judgment may be rendered against you without further notice.

This citation was issued by the Clerk of Court for East Baton Rouge Parish on 08-MAY-2008.


Dianna J. Mahan/Deputy Clerk of Court for
Doug Welborn, Clerk of Court

Requesting Attorney: EDWARD G SAAL

Also attached are the following documents:
PETITION FOR DAMAGES

SERVICE INFORMATION:

Received on the _____ day of _____, 20____ and on the _____ day of _____, 20____, served on the above named party as follows:

CT CORPORATION SYSTEMS: By tendering same to the within named, by handing same to _____.

DUE AND DILIGENT: After diligent search and inquiry, was unable to find the within named _____ or his domicile, or anyone legally authorized to represent him.

RETURNED: Parish of East Baton Rouge, this _____ day of _____, 20____.

SERVICE: \$ _____
MILEAGE \$ _____
TOTAL: \$ _____

Deputy Sheriff
Parish of East Baton Rouge

CITATION - 2425

RECEIVED

MAY 09 2008

E.B.R. SHERIFF'S OFFICE

authorized to do business in the State of Louisiana and the Parish of East Baton Rouge is the proper venue under La. C.C.P. Article 42(4).

4.

That defendants are justly and truly indebted to your petitioners for damages for the wrongful death of the late [REDACTED] for the following reasons.

5.

That your petitioners, pursuant to La. C.C.P. Article 2315.2 (1), are the proper parties to pursue a wrongful death action for the wrongful death of the late [REDACTED]

6.

On May 6, 2007, [REDACTED] was operating a 2007 Dodge Ram Truck, VIN 1D7KS28C57J [REDACTED] in the southbound lane of [REDACTED] at approximately 2:00 A.M. Petitioner, [REDACTED], was the guest passenger in the vehicle.

7.

Upon approaching a slight curve to the left after crossing the LA State Highway [REDACTED] bridge over the [REDACTED] the Dodge Ram Truck left the roadway and traveled South in the West embankment of the highway for approximately 407 feet. The front end of the vehicle struck the embankment and the said [REDACTED] was ejected causing her demise.

8.

Despite the severity of the impact, the air bags with which the Dodge Truck was equipped, failed to deploy, thereby allowing the said [REDACTED] to be ejected from the vehicle.

9.

That defendants are liable to your petitioners for damages to be proved on trial of this matter due to their negligent acts as follows:

- a. Improper installation and/or manufacture of the air bag system on the vehicle in question;
- b. Improper manufacture or construction of the vehicle in question;

- c. Failure to properly inspect the safety systems contained in the vehicle in question;
- d. Failure to properly install and/or insure that all safety system for the subject vehicle were in working order prior to the vehicle being sold;
- e. Improper design of the vehicle's safety systems; and
- f. Any and all other acts of negligence which may be proven at trial of this matter.

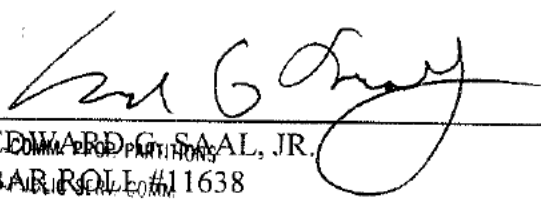
10.

That the negligence of defendants as above set forth were the proximate cause of the death of the late [REDACTED] and they should be cast for damages in favor of your petitioners herein in an amount to be determined by this Court, including damage for emotional distress, loss of consortium and for all other damages appropriate to this cause.

WHEREFORE, PETITIONER PRAY:


1. That citation be issued and that defendants be served with this petition in due course;
2. That after all legal delays and upon trial of this matter, that Judgment be rendered herein against defendants for damages to be determined by this Court in favor of your petitioners;
3. That the defendants be cast for all cost of these proceedings;
4. And for all orders and for all general and equitable relief, etc.

Respectfully submitted,

CIVIL 

- 01-DAMAGES
- 02-CONTRACT
- 03-PRISONER SUIT
- 04-EXECUTORY PROCESS
- 05-JIT. OFFENSES
- 06-VICTION
- 07-WORKMENS COMPENSATION
- 08-JUDICIAL REVIEW
- 09-PROPERTY RIGHTS
- 10-INJUNCTION MANDAMUS
- 11-EDWARD G. SAAL, JR.
- 12-BAR ROLL #11638
- 13-A PROFESSIONAL LAW CORP
- 14-BOX 176
- 15-GUEYDAN, LA 70542
- 16-(337) 536-9210
- 17-
- 18-
- 19-
- 20-

CERTIFIED TRUE COPY
 051660
 2008 MAY 28 PM 2:05
 DEPUTY CLERK & RECORDER FOR
 DOUG WELBORN
 CLERK OF COURTE B.P. PARISH

CERTIFIED TRUE COPY
 BY  5/28/08
 DEPUTY CLERK

STATE OF LOUISIANA:

PARISH OF VERMILION:

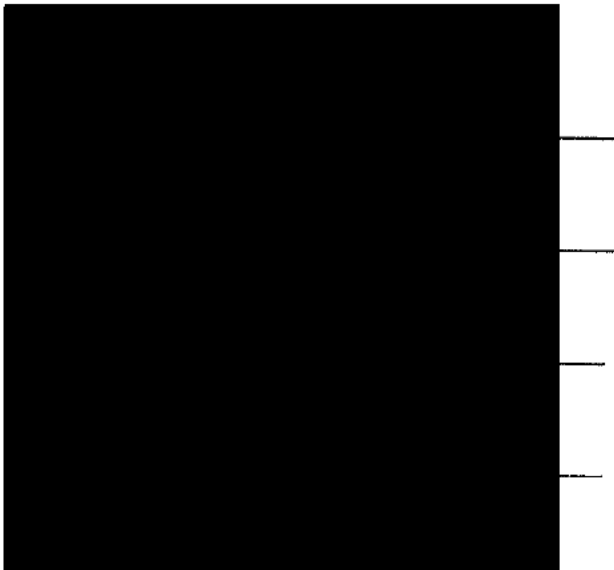
BEFORE ME, the undersigned authority, personally came and appeared

[Redacted Name]

who,

upon being duly sworn, did depose and say on oath:

That they are the petitioners named in the above and foregoing petition and that all of the allegations of fact therein contained are true and correct.



Sworn and subscribed to, before me,

this 6th day of MAY, 2008.

Edward G. Saal, Jr.

EDWARD G. SAAL, JR., ATTORNEY & NOTARY PUBLIC (BAR ROLL #117638)

CERTIFIED COPY
DEPUTY CLERK OF COURT

PLEASE SERVE DEFENDANTS, CHRYSLER, ELC, DODGE AND CHRYSLER, LLC, D/B/A DODGE, THROUGH THEIR AGENT FOR SERVICE OF PROCESS:

C.T. CORPORATION SYSTEM
5615 CORPORATE BLVD.
SUITE 400-B
BATON ROUGE, LA 70808

CERTIFIED TRUE COPY
MAY - 8 2008
BY *[Signature]*
DEPUTY CLERK

STATE OF LOUISIANA
UNIFORM MOTOR VEHICLE TRAFFIC CRASH REPORT

DATE OF CRASH: **05/06/2007** TIME: **02:22** TROOP: **I**

PARISH: **Vermilion** PARISH CODE: **57**

CITY OR TOWN: [REDACTED] CITY CODE: [REDACTED]

LAT: **30.07605** LONG: **92.51317**

Quadrant: NW SW NE SE N S E W

CRASH OCCURED ON: **C:State Highway**

HIGHWAY # [REDACTED] MILEPOST [REDACTED] ROADWAY NAME [REDACTED]

DISTANCE: **1.1** MILES FEET **N** STREET/HIGHWAY [REDACTED] NOT AT INTERSECTION

DISTANCE: [REDACTED] MILES FEET STREET/HIGHWAY [REDACTED]

WORK ZONE HIT & RUN
 PUBLIC PROPERTY DAMAGE PHOTOS MADE
 RR TRAIN INVOLVED FATALITY
 PED INJURY

CONTRIBUTING FACTORS AND CONDITIONS

ROAD SURFACE A: Dry B: Black Top	ROADWAY CONDITIONS A: No Abnormalities	TYPE OF ROADWAY B: Two-Way Road w/ No Physical Separation	ALIGNMENT A: Straight - Level	PRIMARY FACTOR A: Violations
WEATHER A: Clear	KIND OF LOCATION E: Residential Scattered	RELATION TO ROADWAY E: Beyond Shoulder - Right	ACCESS CONTROL A: No Control (Unlimited Access to Road)	SECONDARY FACTOR B: Movement Prior to Crash LIGHTING B: Dark - No Street Light

A PASSENGER CAR	D A, B, C, OR S WITH TRAILER	G OFF-ROAD VEHICLE	J BUS W/SEATS FOR 8-16 OCCUPANTS	M SINGLE UNIT TRUCK W/3 AXLES OR	Q TRACTOR SEMI-TRAILOR	T FARM EQUIPMENT	A BUS	D FLATBED	G AUTO TRANSPORTER	J HOPPER
B LT. TRUCK (P.U., ETC.)	E MOTORCYCLE	H EMERGENCY VEHICLE IN USE	K BUS W/SEATS FOR 16 OR MORE OCC.	N TRUCK/ TRAILER	R TRUCK DOUBLE	V MOTOR HOME	B VAN/ENCLOSED BOX	E DUMP TRUCK/ TRAILER	H LOG TRUCK/ TRAILER	K POLE TRAILER
C VAN	F PEDALCYCLE	I SCHOOL BUS	L SINGLE UNIT TRUCK W/2 AXELS	P TRUCK/ TRAILOR	S SUV	Z OTHER	C CARGO TANK	F CONCRETE MIXER	I GARBAGE/ REFUSE	X NO CARGO BODY Z OTHER

SEATING POSITION	EJECTION	TRAPPED OR EXTRICATED	AIRBAG	OCCUPANT PROTECTION SYSTEM USED	INJURY
A - FRONT SEAT LEFT SIDE (MOTORCYCLE DRIVER)	A - NOT EJECTED	A - NOT TRAPPED	A - DEPLOYED	A - NONE USED - VEHICLE OCCUPANT	A - FATAL
B - FRONT SEAT MIDDLE	B - TOTALLY EJECTED	B - TRAPPED/ EXTRICATED	B - NON DEPLOYED	B - SHOULDER BELT ONLY USED	B - INCAPACITATING/ SEVERE
C - FRONT SEAT RIGHT SIDE (NON-TRAILING UNIT)	C - PARTIALLY EJECTED	C - TRAPPED/ NOT EXTRICATED	C - NON DEPLOYED/ SWITCH OFF	C - LAP BELT ONLY USED	C - NON-INCAPACITATING/ MODERATE
D - SECOND SEAT LEFT SIDE (MOTORCYCLE PASSENGER)	Y - UNKNOWN	Y - UNKNOWN	D - NOT APPLICABLE	D - SHOULDER AND LAP BELT USED	D - POSSIBLE/ COMPLAINT
E - SECOND SEAT MIDDLE			Y - UNKNOWN	E - CHILD SAFETY SEAT IMPROPERLY USED	E - NO INJURY
F - SECOND SEAT RIGHT SIDE				F - CHILD SAFETY SEAT USED	
G - THIRD ROW LEFT SIDE (MOTORCYCLE PASSENGER)				G - HELMET USED	
H - THIRD ROW MIDDLE (NON-TRAILING UNIT)				Y - RESTRAINT USE UNKNOWN	
I - THIRD ROW RIGHT SIDE					

EMERGENCY SERVICES: AMBULANCE TIME CALLED: **02:32** ARRIVED SCENE: **02:54** DEPARTED SCENE: **03:47** ARRIVED HOSPITAL: [REDACTED]

RESCUE UNIT: TIME CALLED: **02:33** ARRIVED SCENE: **02:40**

AMBULANCE SERVICE: **ACADIAN AMBULANCE** FIRE DEPARTMENT: **GUEYDAN FIRE DEPARTMENT**

INVESTIGATING AGENCY: **Louisiana State Police** TIME OF NOTIFICATION: **02:32** TIME OF ARRIVAL: **02:53** TIME ALL LANES OPENED: **06:11**

INVESTIGATION COMPLETE: **N** INVESTIGATING POLICE AGENCY: **A:State** REPORT COMPLETED: **05/09/2007**

McFarlain, Donald SIGNATURE: [REDACTED] BADGE #: **1738** SUPERVISOR'S INITIALS: **BD**

STATE OF LOUISIANA
UNIFORM MOTOR VEHICLE TRAFFIC CRASH REPORT
VEHICLE/PEDESTRIAN

REPORT NUMBER [REDACTED] PAGE # 2

VEH #1 CONFIG. B CARGO BODY TYPE X YEAR 2007 MAKE DODGE MODEL RAM # DOORS 4 # AXLES 2 # TIRES 4

V.I.N. 1D7KS28C57 [REDACTED] VEHICLE TOWED A:Yes REMOVED BY SOUTHSIDE TOWING

LICENSE PLATE 2007 LA [REDACTED] TYPE PRIVATE TRUCK GWR/GDWR [REDACTED] REASON TOWED A:Vehicle Damage

TRAILER DESCRIPTION [REDACTED] LICENSE PLATE [REDACTED] YEAR [REDACTED] STATE [REDACTED] NUMBER [REDACTED]

VEHICLE DESCRIPTION COMMERCIAL/BUSINESS VEHICLE [] GOVERNMENT VEHICLE [] PERSONAL VEHICLE [X]

NAME (LAST, FIRST, MI) [REDACTED] OF [X] DRIVER [] PEDESTRIAN [] DATE OF BIRTH [REDACTED]

STREET ADDRESS [REDACTED] TELEPHONE # [REDACTED] CITY Gueydan STATE LA ZIP [REDACTED]

POSITION	EJECTION	TRAP EXTRACTED	AIR BAG	OC PROTS SYS	SEX	RACE	AGE	INJURY
A	B	A	B	A	F	W	44	A

STATE LA CLASS E ENDORSEMENTS [] DRIVER'S LICENSE NUMBER [REDACTED] INSTRUCTED TO EXCHANGE INFORMATION? NO NAME OF FACILITY [REDACTED]

OWNER'S NAME (LAST, FIRST, MI OR COMPANY NAME) [REDACTED] Same as driver [] TELEPHONE # [REDACTED]

STREET ADDRESS [REDACTED] CITY Gueydan STATE LA ZIP [REDACTED]

INSURANCE CO. NAME REPUBLIC POLICY NUMBER [REDACTED] EXPIRATION DATE 01/24/2008

AGENT'S NAME/ADDRESS [REDACTED]

OCCUPANT'S NAME (LAST, FIRST, MI) [REDACTED] DATE OF BIRTH [REDACTED]

POSITION	EJECTION	TRAP EXTRACTED	AIR BAG	OC PROTS SYS	SEX	RACE	AGE	INJURY
C	A	A	B	D	M	W	45	D

CITY Gueydan STATE LA ZIP [REDACTED] TRANSPORTED TO MEDICAL FACILITY C:Refused Aid NAME OF FACILITY [REDACTED]

VISION OBSCUREMENTS N:No Obscurements	CONDITION OF DRIVER Y:Unknown	VIOLATION S:Careless Operation	DRIVER DISTRACTION Y:Unknown	REASON FOR MOVEMENT Y:Reason Unknown
MOVEMENT PRIOR TO CRASH G:Ran Off Road	TRAFFIC CONTROL Q:Yellow No Passing Line	TRAFFIC CONTROL CONDITIONS A:Controls Functioning	VEHICLE CONDITION K:No Defects Observed	VEHICLE LIGHTING A:Headlights On
SEQUENCE OF EVENTS - 1ST J:Ran Off Road Right	SEQUENCE OF EVENTS - 2ND DD:Ditch	SEQUENCE OF EVENTS - 3RD KK:Utility Pole/Light Support	SEQUENCE OF EVENTS - 4TH A:Overturned/Rollover	MOST HARMFUL EVENT A:Overturned/Rollover

ALCOHOL/ DRUG INVOLVEMENT ALCOHOL/ DRUGS SUSPECTED Y:Unknown ALCOHOL C:Test Given, Results Pending DRUGS B:Test Given, Results Pending BAC [REDACTED]

HEADED	DIRECTION BEFORE CRASH ON STREET, HIGHWAY OR RAMP	FINAL LOCATION OF VEHICLES	DISTANCE TRAVELED AFTER IMPACT	SPEED EST.	POSTED	FR	FL	RR	RL
S	[REDACTED]	OFF ROADWAY	407 FEET	UNK	55	000	000	000	000

DAMAGE TO VEHICLE	
1ST AREA DAMAGED	1ST EXTENT OF DEFORMITY
A:Front Bumper	G:Severe
2ND L:Left Front Fender	G:Severe
3RD K:Left Front Quarter Panel	G:Severe

CITATION NO. [REDACTED] R.S. OR ORD. NO. [REDACTED]

NOTICE OF INSURANCE VIOLATION []

STATE OF LOUISIANA
UNIFORM MOTOR VEHICLE TRAFFIC CRASH REPORT
NARRATIVE/DIAGRAM

REPORT NUMBER

PAGE #

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OFFICER'S NARRATIVE On May 6, 2007, I, S/T Donald McFarlain 1738, was notified by Troop I Dispatch at 0232 hours to respond to a crash on [REDACTED] in Riceville. I was advised that serious or fatal injuries were involved. I arrived at the scene at 0253 hours. Upon my arrival I observed a Vermilion Parish Sheriff's Unit, Gueydan Fire Department and several first responders already on the scene. I spoke with Dy. Gerald Stewart with VPSO, and he advised me that it was a single vehicle crash with two occupants. Dy. Stewart stated that one occupant was standing near the vehicle and the other occupant was deceased in front of the vehicle. I noticed a red colored Dodge Ram truck that was in the west side ditch of [REDACTED] and it was facing north. The vehicle had severe damage mainly to the front end. I observed a white female lying in the front of the vehicle who appeared to be deceased. I also located a white male who was an occupant in the vehicle. I advised him who I was and asked him for his name. He told me that his name was [REDACTED]. I asked Mr. [REDACTED] if he was injured and he told me that he was injured. I advised him that an ambulance was on the way. I then asked him what had happened. He told me that he was asleep and did not remember what happened. He told me that the deceased female was his wife and that she was driving the vehicle at the time of the crash. Mr. [REDACTED] did not know how he was able to exit the vehicle.

After speaking to Mr. [REDACTED] I began to investigate the crash scene. I was unable to locate any witnesses to the crash other than Mr. [REDACTED]. I was able to locate the direction the vehicle was traveling, evidence of where the vehicle had left the roadway and evidence that indicated several impact points. Based on this information I was able to conclude that vehicle 1 was traveling south on La. [REDACTED]. The vehicle was traveling in a straight portion of the roadway approaching a slight left hand curve in the roadway. Before reaching the curve, the driver steered her vehicle off the right side of the roadway and entered the west side ditch of La. [REDACTED]. Tire tracks in the ditch indicated the vehicle's movement. There were no marks on the roadway from vehicle 1 prior to it leaving the roadway. There was also no indication that the driver took any type of evasive action before leaving the roadway. The tire tracks in the ditch were straight and this also indicated no type of steering maneuver.

After entering the ditch the vehicle traveled south in the ditch for approximately 407 feet until its left front end struck an embankment in the ditch. This point of impact was indicated by a gouge in the embankment. After striking the embankment, the vehicle became airborne and traveled 106 feet before landing in the ditch. The evidence that led to conclude that vehicle 1 was traveling through the air for 106 feet was that the grass was tall in the ditch and none of it had any signs that it had been run over or touched by vehicle 1. Upon vehicle 1's second impact the vehicle overturned at least one time, rotated clockwise and struck the ground three more times. These impacts were all indicated by gouge marks and debris that were left, before striking a fence and a utility pole. At some point while the vehicle was overturning, the driver was ejected and thrown onto the ground. After striking the utility pole, which was broken in two, the vehicle came to rest in the ditch facing north. The property owner, [REDACTED] was the first person on the scene. Mr. [REDACTED] stated to me that he did not see the crash, but he heard it from the inside of his home. Mr. [REDACTED] stated that he went to the scene and noticed the two occupants lying face down on the ground. Mr. [REDACTED] stated that the female occupant was on the ground at the front of the vehicle and was not moving, but the male occupant, who was at the rear of the vehicle, was moving. Mr. [REDACTED] stated that he had called 911 before leaving his house and that not long after he was on the scene, help started to arrive.

Alcohol Involvement:

Consumption of alcoholic beverages of some type is suspected with the passenger, but it is unknown with the driver. I did not find any evidence at the scene, i.e. empty beer cans or bottles of any kind. Mr. [REDACTED] did advise me that he had drank alcohol that night and that his wife had not drank any alcohol. At 0408 hours, using an LSP issued NIK Post Mortem Blood Kit # 108105, Acadia Parish Dy. Coroner Monte Briggs drew two vials of blood from the deceased at the scene of the crash. The blood kit was sealed, labeled and submitted into evidence at 20:27 hours that night. Sgt. Eric Duplechain observed as I deposited the blood kit into the evidence locker at Troop I.

Photographs:

I photographed the scene of the crash using my LSP issued Yashica 35mm camera. I took two rolls of film that night using Fujicolor Superia Xtra 400 speed film. I also took one roll that afternoon at 1730 hours to have daylight photos of the scene.

Traffic Control/ Roadway Type:

[REDACTED] at the scene of the crash is a two lane asphalt roadway with no physical separation and no improved shoulders. The roadway is straight and level with a traffic control consisting of a clearly visible single yellow dashed centerline for north bound traffic and a solid yellow line for traffic traveling south. There were also solid white fog lines on the east and west edges of the roadway. A posted speed limit sign of 55 mph. was located 3 miles north of the crash site for southbound traffic. The writing on the back of the sign indicated that it was installed on 10-23-03. The only other traffic sign that was near the crash site was a curve indicator sign. This sign was located just south of where the vehicle came to rest and was not relevant to the crash.

Measurements:

Paint markings and measurements were taken while at the scene that morning by myself, Tpr. Brad Guidroz and Sgt. Eric Duplechain. A roller wheel, 100' tape and a Lidar were all used to obtain the measurements.

Seatbelt Use:

The driver was not wearing her seatbelt. I made this determination due to the fact that she was ejected from the vehicle. It also appeared that the driver's side seatbelt was in proper working order and free from any defects.

The passenger of the vehicle was found out of the vehicle when the first people arrived on the scene. I was able to look at [REDACTED] and he had what appeared to be markings over his right shoulder that were consistent with him wearing the passenger side seatbelt. I also spoke to Dr. Ghayas Ahmed, the emergency room doctor at Crowley American Legion Hospital. Dr. Ahmed examined [REDACTED] that morning and he told me that in his medical opinion, the injuries on [REDACTED]

STATE OF LOUISIANA
 UNIFORM MOTOR VEHICLE TRAFFIC CRASH REPORT
 NARRATIVE/DIAGRAM

REPORT NUMBER [REDACTED]

PAGE # 4

right shoulder were consistent with seatbelt markings.

Pronounced:

On May 6, 2007 at 0400 hours, Dy. Coroner Monte Briggs (Acadia Parish) pronounced the driver, [REDACTED] deceased. Mr. [REDACTED] stated that the subject died of multiple internal injuries.

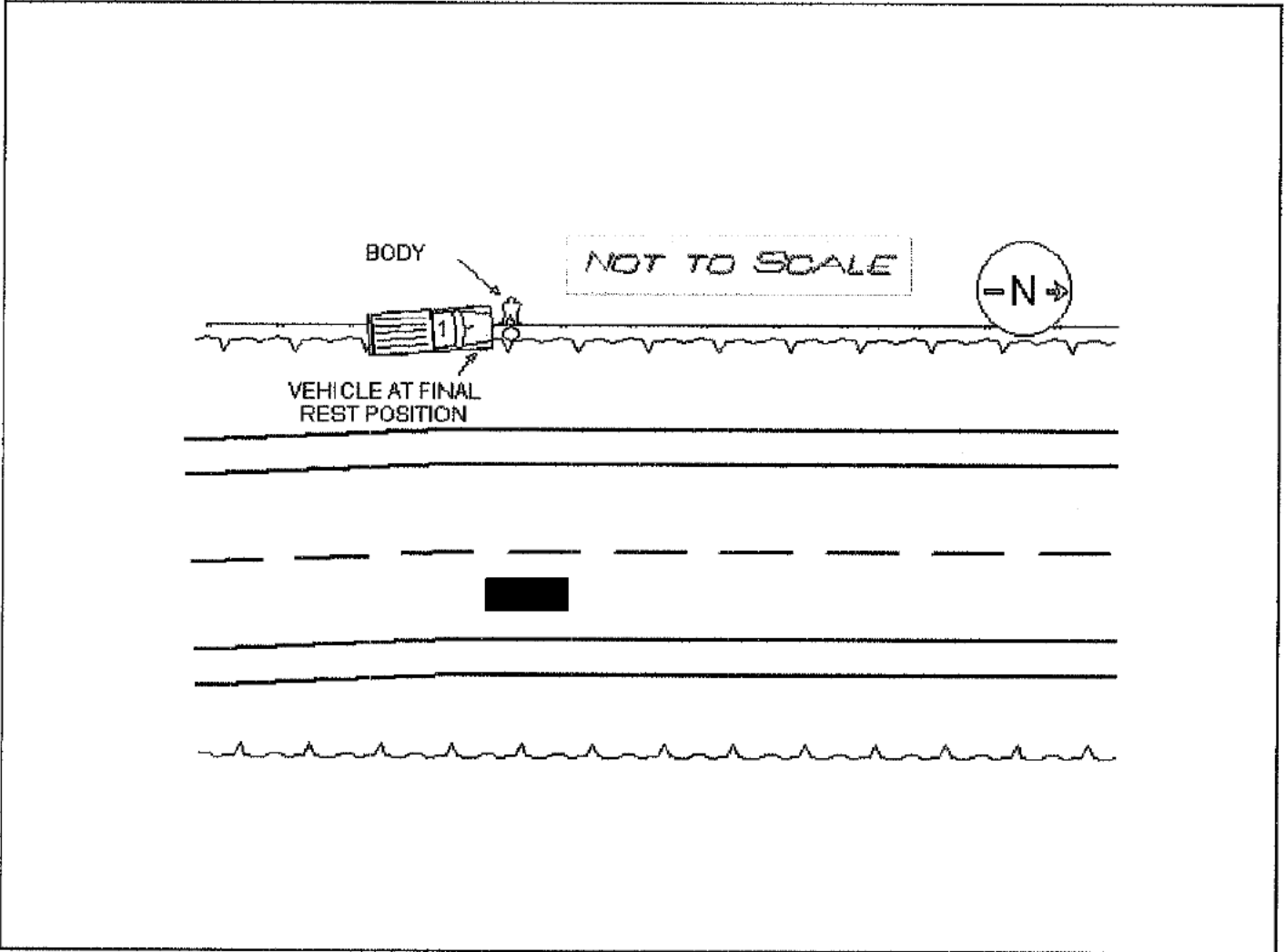
Damage to Private Property:

There was one utility pole belonging to Entergy utilities damaged and 50 feet of fence belonging to [REDACTED] Gueydan, La. [REDACTED]

Conclusions:

It is unknown why the vehicle Mrs. [REDACTED] was driving left the roadway. There were no indications that another vehicle was involved. There was no indication of tire failure or equipment failure that contributed to the crash. There were no roadway abnormalities and all lane markings were visible. The weather conditions for travel were favorable and traffic was light. There were no signs of any type of steering maneuvers enacted by the driver prior to the crash. The only conclusions that may be pointed out is that the driver possibly fell asleep. Mr. [REDACTED] did state to me that his wife advised him that she had been very tired that whole night. The investigation of the crash remains open pending the results of the blood tests.

NON-COLLISION WITH MOTOR VEHICLE A	REAR END B	HEAD-ON C	RIGHT ANGLE D	LEFT TURN E	LEFT TURN F	LEFT TURN G	RIGHT TURN H	RIGHT TURN I	SIDESWIPE SAME J	SIDESWIPE OPPOSITE K	OTHER Z	MANNER OF COLLISION A
---------------------------------------	---------------	--------------	------------------	----------------	----------------	----------------	-----------------	-----------------	---------------------	-------------------------	------------	--------------------------



STATE OF LOUISIANA
UNIFORM MOTOR VEHICLE TRAFFIC CRASH REPORT
DRIVER/WITNESS VOLUNTARY STATEMENT

COMPUTER NUMBER

PAGE #

[REDACTED]

10

DATE 5/06/07 TIME 1820 PLACE MATTHEWS FUNERAL HOME IN GUEYDAN
I, [REDACTED] AM 45 YEARS OF AGE,
MY ADDRESS IS [REDACTED] Lumberton, La [REDACTED]
AND MY TELEPHONE NUMBER IS [REDACTED]

When leaving my Cafe in Morse, I entered the passenger seat, layed my seat back & put my seat belt on, my wife took charge of the driving. I fell asleep & then the next thing I remember is being in my Dad's truck at Abbeville Sr. Hosp. in Abbeville where my mom was working.

THE ABOVE STATEMENT, TO THE BEST OF MY KNOWLEDGE, IS A TRUE AND CORRECT ACCOUNT OF MY RECOLLECTION IN THE ABOVE DESCRIBED MOTOR VEHICLE CRASH.

SIGNED: [REDACTED]

OFFICER TAKING STATEMENT: DONALD McFARLAN

SIGNATURE: 117 Donald McFarlan 1787

INVESTIGATING OFFICER'S INITIALS DM

STATE OF LOUISIANA
 UNIFORM MOTOR VEHICLE TRAFFIC CRASH REPORT
 NARRATIVE/DIAGRAM

REPORT NUMBER

PAGE #

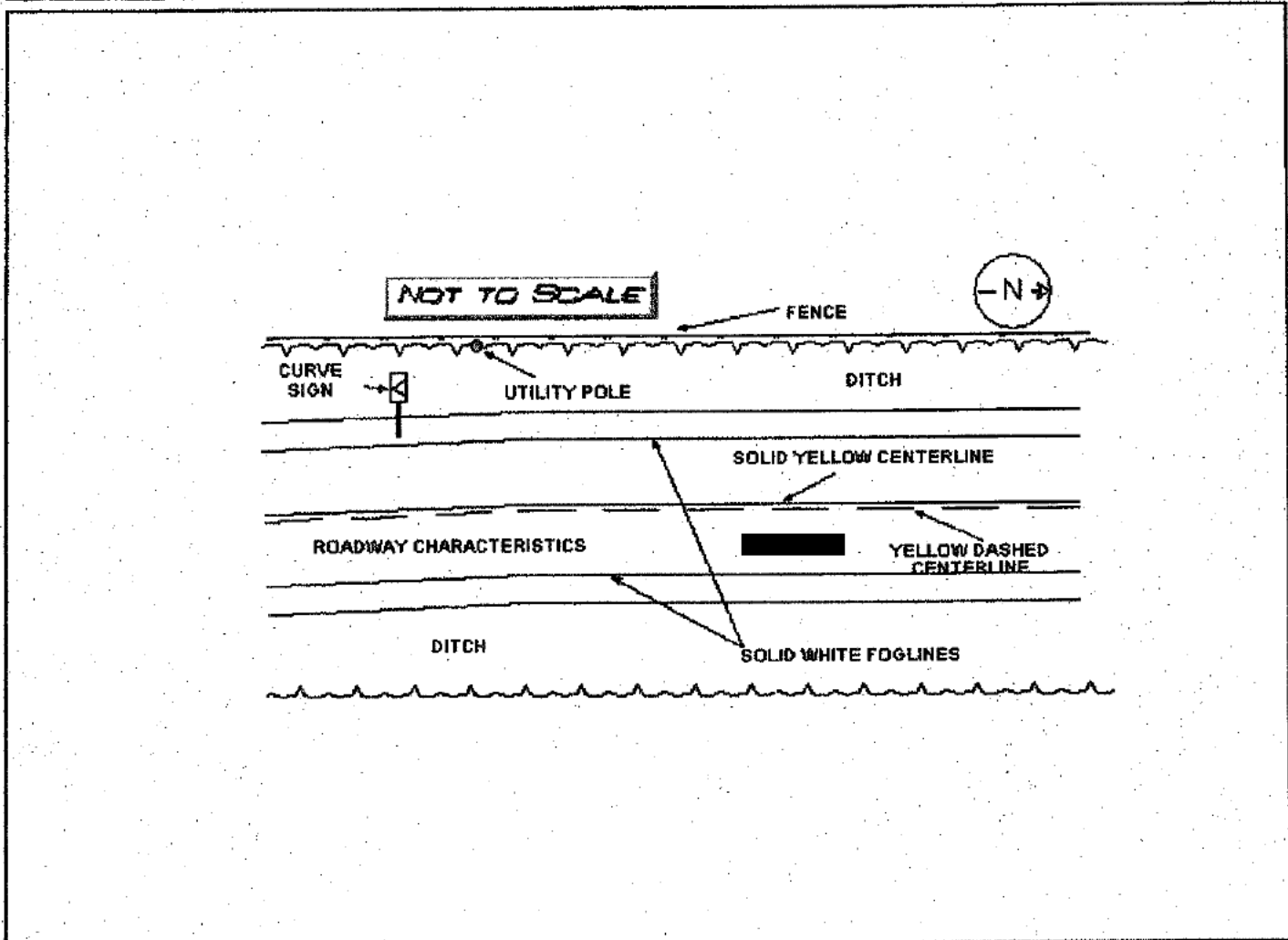
[REDACTED]

5

I 671

OFFICER'S NARRATIVE

NON-COLLISION WITH MOTOR VEHICLE A	REAR END B	HEAD-ON C	RIGHT ANGLE D	LEFT TURN E	LEFT TURN F	LEFT TURN G	RIGHT TURN H	RIGHT TURN I	SIDESWIPE SAME J	SIDESWIPE OPPOSITE K	OTHER Z	MANNER OF COLLISION A
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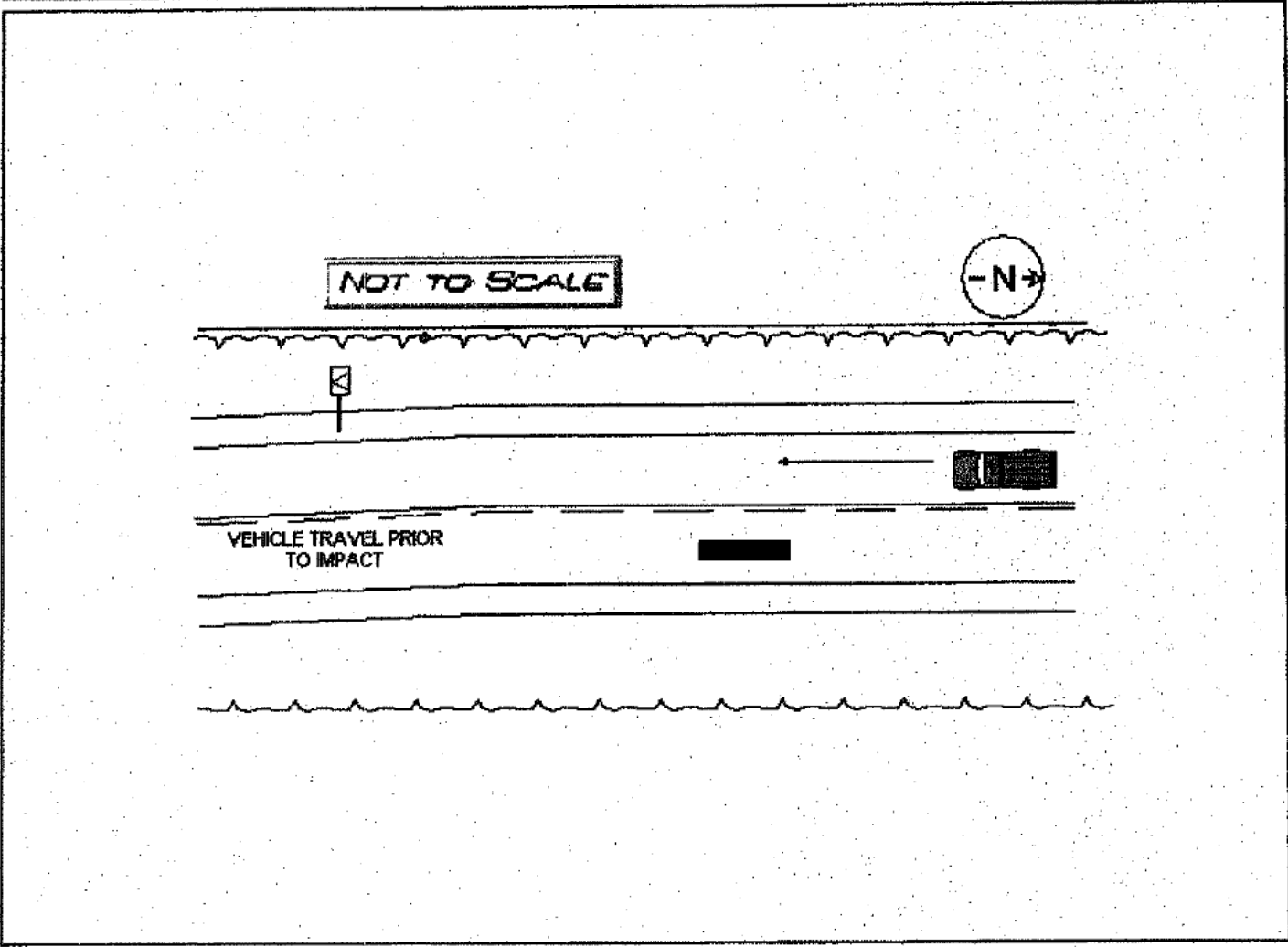
STATE OF LOUISIANA
UNIFORM MOTOR VEHICLE TRAFFIC CRASH REPORT
NARRATIVE/DIAGRAM

REPORT NUMBER [REDACTED]

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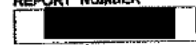
OFFICER'S NARRATIVE

NON-COLLISION WITH MOTOR VEHICLE A	REAR END B	HEAD-ON C	RIGHT ANGLE D	LEFT TURN E	LEFT TURN F	LEFT TURN G	RIGHT TURN H	RIGHT TURN I	SIDESWIPE SAME J	SIDESWIPE OPPOSITE K	OTHER Z	MANNER OF COLLISION A
---------------------------------------	---------------	--------------	------------------	----------------	----------------	----------------	-----------------	-----------------	---------------------	-------------------------	------------	--------------------------



STATE OF LOUISIANA
 UNIFORM MOTOR VEHICLE TRAFFIC CRASH REPORT
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REPORT NUMBER

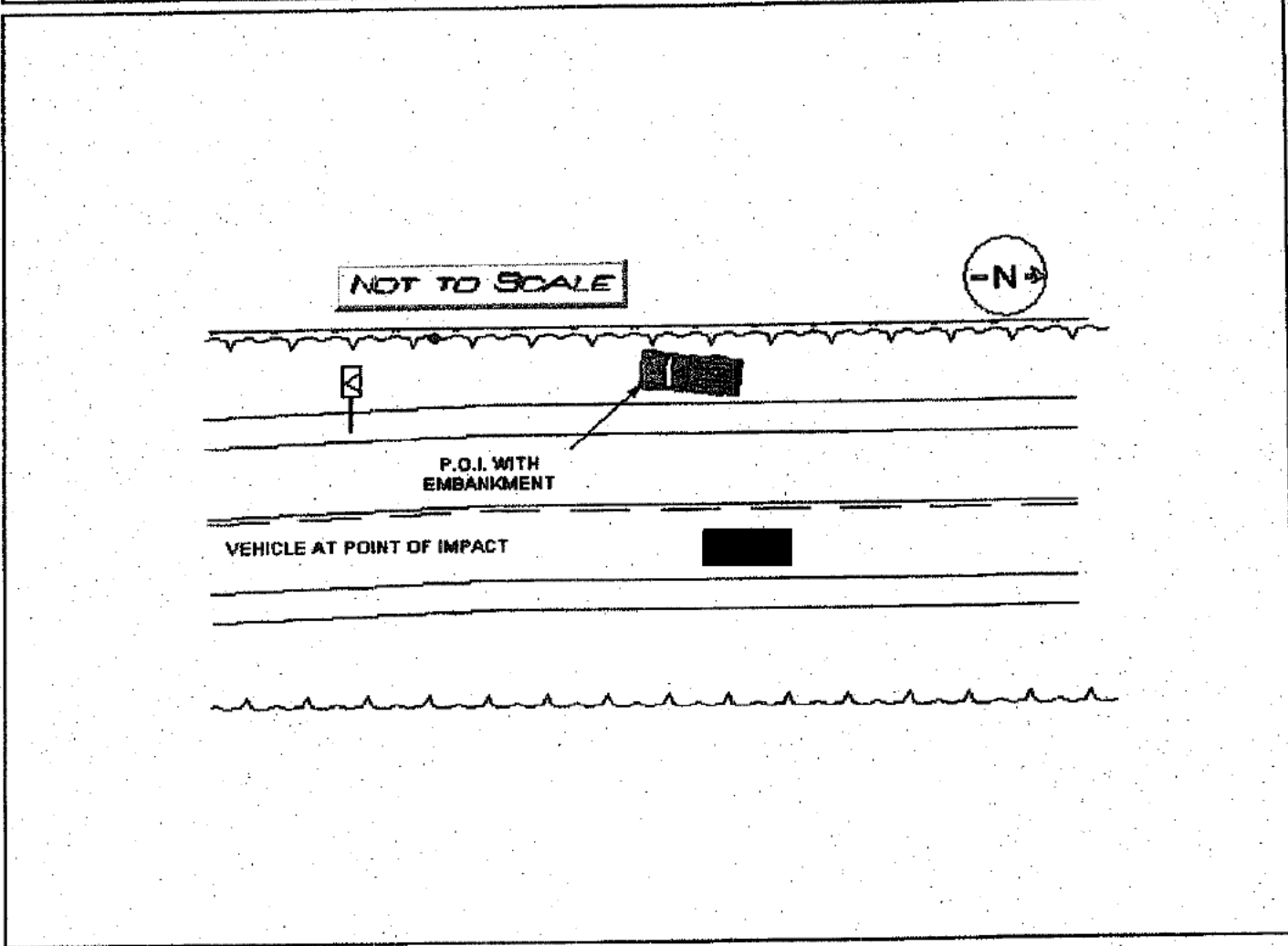


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OFFICER'S NARRATIVE

NON-COLLISION WITH MOTOR VEHICLE A	REAR END B	HEAD-ON C	RIGHT ANGLE D	LEFT TURN E	LEFT TURN F	LEFT TURN G	RIGHT TURN H	RIGHT TURN I	SIDESWIPE SAME J	SIDESWIPE OPPOSITE K	OTHER Z	MANNER OF COLLISION A
---------------------------------------	---------------	--------------	------------------	----------------	----------------	----------------	-----------------	-----------------	---------------------	-------------------------	------------	--------------------------



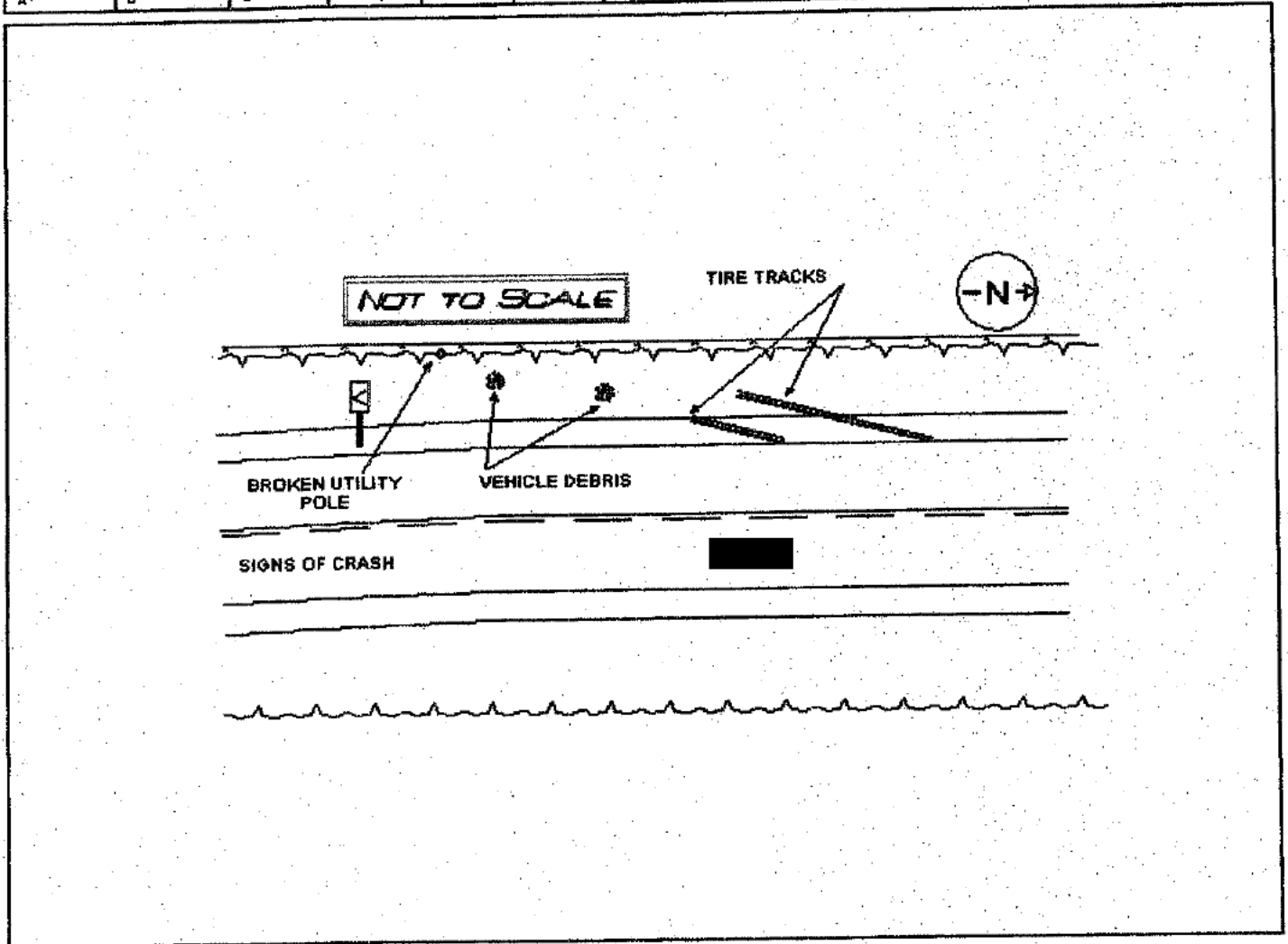
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OFFICER'S NARRATIVE

NON-COLLISION WITH MOTOR VEHICLE A	REAR END B	HEAD-ON C	RIGHT ANGLE D	LEFT TURN E	LEFT TURN F	LEFT TURN G	RIGHT TURN H	RIGHT TURN I	SIDESWIPE SAME J	SIDESWIPE OPPOSITE K	OTHER Z	MANNER OF COLLISION A
---------------------------------------	---------------	--------------	------------------	----------------	----------------	----------------	-----------------	-----------------	---------------------	-------------------------	------------	--------------------------



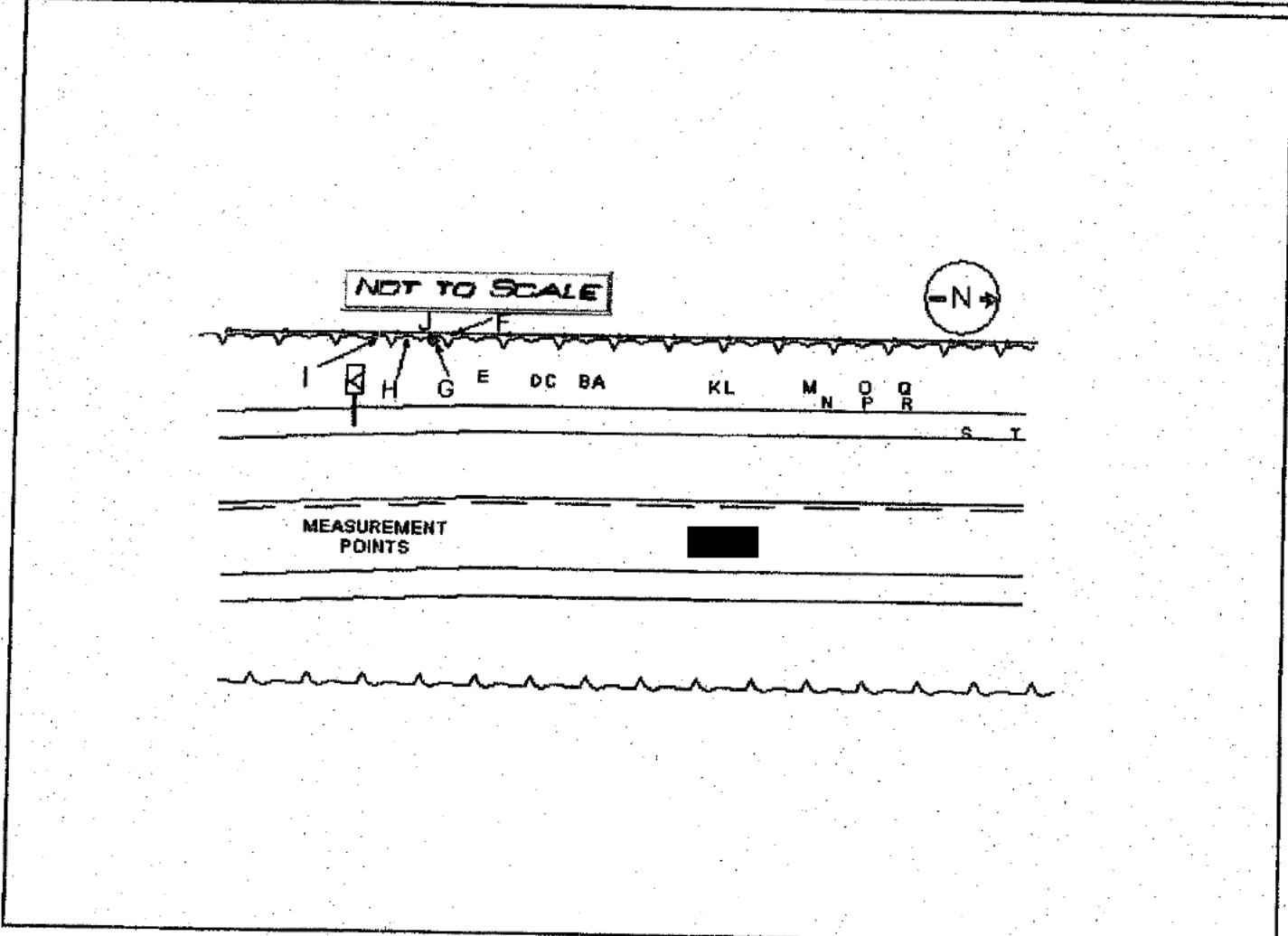
STATE OF LOUISIANA
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OFFICER'S NARRATIVE

NON-COLLISION WITH MOTOR VEHICLE A	REAR END B	HEAD-ON C	RIGHT ANGLE D	LEFT TURN E	LEFT TURN F	LEFT TURN G	RIGHT TURN H	RIGHT TURN I	SIDESWIPE SAME J	SIDESWIPE OPPOSITE K	OTHER Z	MANNER OF COLLISION A
---------------------------------------	---------------	--------------	------------------	----------------	----------------	----------------	-----------------	-----------------	---------------------	-------------------------	------------	--------------------------



STATE OF LOUISIANA
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LOUISIANA STATE POLICE – TROOP I

FATALITY / SERIOUS INJURY
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HIGHWAY: [Redacted] (NUMBER OR NAME)

ROADWAY MEASUREMENTS			
POINTS OF INTEREST	FEET	INCHES	MISCELLANEOUS
ROADWAY (TRAVEL PORTION) *	23	3	*REQUIRED MEASUREMENT*
SHOULDER (WEST)	4	1	<input type="checkbox"/> N/A
SHOULDER (EAST)	5	2	<input type="checkbox"/> N/A
HIGHWAY (TOTAL) *	32	6	*REQUIRED MEASUREMENT*
DITCH (WEST)	21	2	<input type="checkbox"/> N/A <input checked="" type="checkbox"/> WIDTH MEASUREMENT
REFERENCE LINE (TOP OF DITCH)			<input type="checkbox"/> N/A <input type="checkbox"/> MEASUREMENT FROM REFERENCE LINE
DITCH (EAST)	22	3	<input type="checkbox"/> N/A <input checked="" type="checkbox"/> WIDTH MEASUREMENT
REFERENCE LINE (TOP OF DITCH)			<input type="checkbox"/> N/A <input type="checkbox"/> MEASUREMENT FROM REFERENCE LINE
OTHER ()			<input type="checkbox"/> N/A <input type="checkbox"/> MEASUREMENT FROM REFERENCE LINE <input type="checkbox"/> WIDTH MEASUREMENT
OTHER ()			<input type="checkbox"/> N/A <input type="checkbox"/> MEASUREMENT FROM REFERENCE LINE <input type="checkbox"/> WIDTH MEASUREMENT

MEASURING OFFICERS			
METHOD OF MEASUREMENT	NAME	AGENCY	DUTIES
MANUAL <input checked="" type="checkbox"/> COORDINATE <input type="checkbox"/> TRIANGULATION	S/T D. MCFARLAIN	LSP-1	<input type="checkbox"/> TAPE HOLDER <input checked="" type="checkbox"/> RECORDER
	SGT E. DUPLCHAIN	LSP-1	<input checked="" type="checkbox"/> TAPE HOLDER <input type="checkbox"/> RECORDER
	TPR B. GUIDROZ	LSP-1	<input checked="" type="checkbox"/> TAPE HOLDER <input type="checkbox"/> RECORDER
TOTAL STATION			<input type="checkbox"/> TAPE HOLDER <input type="checkbox"/> RECORDER
			<input type="checkbox"/> TAPE HOLDER <input type="checkbox"/> RECORDER

MEASURING DEVICE INFORMATION				
DEVICE	MAKE	MODEL	LENGTH	TYPE
TOTAL STATION <input type="checkbox"/> N/A				
MEASURING TAPE <input type="checkbox"/> N/A	STANLEY			
MEASURING TAPE <input type="checkbox"/> N/A			100'	FIBERGLASS
MEASURING TAPE <input type="checkbox"/> N/A				
ROLLER TAPE <input type="checkbox"/> N/A	MEASURE MASTER	12	999'	WHEEL
OTHER <input type="checkbox"/> N/A	ULTRALYTE	UL100		LIDAR

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TRAFFIC CONTROL DEVICES					
DEVICE(S)	CONDITION				
	EXCELLENT	GOOD	FAIR	POOR	NONE
* SIGN (DATE: N/A, DISTANCE: 200' S)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
* SIGN (DATE: 10/23/03, DISTANCE: 3 MI N)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
* SIGN (DATE: , DISTANCE:)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
* SIGN (DATE: , DISTANCE:)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
* SIGN (DATE: , DISTANCE:)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
* SIGN (DATE: , DISTANCE:)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
LIGHTS ()	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
LIGHTS ()	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
WHITE SOLID LINES	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WHITE DASHED LINES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
YELLOW SOLID LINES	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
YELLOW DASHED LINES	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER ()	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER ()	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
* INCLUDE THE MOST RECENT DATE ON THE REAR OF ALL DOTD SIGNS. IF THE SIGN IS A CURVE OR TURN WARNING SIGN, INCLUDE THE DISTANCE FROM THE SIGN TO THE FIRST POINT OF CURVATURE. IF IT IS NOT A CURVE OR TURN WARNING SIGN, INCLUDE THE DISTANCE FROM SIGN TO THE CRASH SCENE *					
ROADWAY CHARACTERISTICS					
ALIGNMENT (CHECK ALL THAT APPLY)					
<input checked="" type="checkbox"/> STRAIGHT		<input type="checkbox"/> CURVE		<input type="checkbox"/> ELEVATED	
<input type="checkbox"/> ON-GRADE		<input type="checkbox"/> SUPERELEVATION			
CURVED ROADWAY MEASUREMENTS (IF APPLICABLE)					
CHORD	100'				
MIDDLE ORDINATE	1'				
MEASURE THE OUTSIDE EDGE OF THE CURVE					
MISCELLANEOUS					
VISUAL OBSTRUCTION (IF APPLICABLE)		N/A			
VISUAL OBSTRUCTION (IF APPLICABLE)		N/A			
ROADWAY DEFECT (IF APPLICABLE)		N/A			
ROADWAY DEFECT (IF APPLICABLE)		N/A			
ROADWAY DEFECT (IF APPLICABLE)		N/A			
HOW AREA OF IMPACT DETERMINED		GOUGES IN WEST SIDE DITCH			

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PHOTOGRAPHS			
PHOTOGRAPHER	S/T D. MCFARLAIN	AGENCY	LSP-I
BRAND OF CAMERA	YASHICA	CAMERA SERIAL NUMBER	464606
BRAND OF FILM	FUJI	TYPE OF FILM	35MM
NUMBER OF ROLLS TAKEN	3		
BREATH/CHEMICAL TESTING			
DRIVER NUMBER ONE			
BLOOD DRAWN AT (LOCATION)	ON SCENE		<input type="checkbox"/> N/A
BLOOD DRAWN BY	DY. CORONER MONTE BRIGGS (ACADIA PARISH)		<input type="checkbox"/> N/A
URINE COLLECTED BY (IF APPLICABLE)			<input checked="" type="checkbox"/> N/A
SPECIMEN KIT NUMBER	108105		<input type="checkbox"/> N/A
TROOPER SECURING KIT	S/T DONALD MCFARLAIN		<input type="checkbox"/> N/A
INTOXILYZER RESULTS			<input checked="" type="checkbox"/> N/A
TROOPER ADMINISTERING TEST			<input checked="" type="checkbox"/> N/A
DRIVER NUMBER TWO			
BLOOD DRAWN AT (LOCATION)			<input type="checkbox"/> N/A
BLOOD DRAWN BY			<input type="checkbox"/> N/A
URINE COLLECTED BY (IF APPLICABLE)			<input type="checkbox"/> N/A
SPECIMEN KIT NUMBER			<input type="checkbox"/> N/A
TROOPER SECURING KIT			<input type="checkbox"/> N/A
INTOXILYZER RESULTS			<input type="checkbox"/> N/A
TROOPER ADMINISTERING TEST			<input type="checkbox"/> N/A
BIKELIST / PEDESTRIAN			
BLOOD DRAWN AT (LOCATION)			<input type="checkbox"/> N/A
BLOOD DRAWN BY			<input type="checkbox"/> N/A
URINE COLLECTED BY (IF APPLICABLE)			<input type="checkbox"/> N/A
SPECIMEN KIT NUMBER			<input type="checkbox"/> N/A
TROOPER SECURING KIT			<input type="checkbox"/> N/A
INTOXILYZER RESULTS			<input type="checkbox"/> N/A
TROOPER ADMINISTERING TEST			<input type="checkbox"/> N/A

STATE OF LOUISIANA
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[REDACTED]

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*FATALITY / SERIOUS INJURY
 INVESTIGATION REPORT SUPPLEMENTAL*

DECEASED INFORMATION			
NAME OF DECEASED	[REDACTED]		
OCCUPANT IN VEHICLE NUMBER	1		
PRONOUNCED DEAD BY	DY COR. MONTE BRIGGS	PARISH CORONER	DR. JODI MCGEE
LOCATION PRONOUNCED	ON SCENE	TIME PRONOUNCED	0400 HRS
PRELIMINARY CAUSE OF DEATH	MASSIVE INTERNAL INJURIES		
PERSON TAKING CHARGE OF PERSONAL EFFECTS	FAMILY ON SCENE		
DECEASED TRANSPORTED TO	MATTHEWS AND SO	DECEASED TRANSPORTED BY	MATTHEWS AND SON
DECEASED INFORMATION			
NAME OF DECEASED			
OCCUPANT IN VEHICLE NUMBER			
PRONOUNCED DEAD BY		PARISH CORONER	
LOCATION PRONOUNCED		TIME PRONOUNCED	HRS
PRELIMINARY CAUSE OF DEATH			
PERSON TAKING CHARGE OF PERSONAL EFFECTS			
DECEASED TRANSPORTED TO		DECEASED TRANSPORTED BY	
DECEASED INFORMATION			
NAME OF DECEASED			
OCCUPANT IN VEHICLE NUMBER			
PRONOUNCED DEAD BY		PARISH CORONER	
LOCATION PRONOUNCED		TIME PRONOUNCED	HRS
PRELIMINARY CAUSE OF DEATH			
PERSON TAKING CHARGE OF PERSONAL EFFECTS			
DECEASED TRANSPORTED TO		DECEASED TRANSPORTED BY	
DECEASED INFORMATION			
NAME OF DECEASED			
OCCUPANT IN VEHICLE NUMBER			
PRONOUNCED DEAD BY		PARISH CORONER	
LOCATION PRONOUNCED		TIME PRONOUNCED	HRS
PRELIMINARY CAUSE OF DEATH			
PERSON TAKING CHARGE OF PERSONAL EFFECTS			
DECEASED TRANSPORTED TO		DECEASED TRANSPORTED BY	

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WITNESS INFORMATION

WITNESS NUMBER (1)

NAME	[REDACTED]		
ADDRESS	[REDACTED] GUEYDAN, LA [REDACTED]		
HOME PHONE NUMBER	[REDACTED]	WORK PHONE NUMBER	
WITNESS STATEMENT OBTAINED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
<input type="checkbox"/> NOT APPLICABLE			

WITNESS NUMBER ()

NAME			
ADDRESS			
HOME PHONE NUMBER		WORK PHONE NUMBER	
WITNESS STATEMENT OBTAINED	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<input checked="" type="checkbox"/> NOT APPLICABLE			

WITNESS NUMBER ()

NAME			
ADDRESS			
HOME PHONE NUMBER		WORK PHONE NUMBER	
WITNESS STATEMENT OBTAINED	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<input type="checkbox"/> NOT APPLICABLE			

DAMAGED PROPERTY OWNER(S)

PROPERTY OWNER

NAME	[REDACTED]		
ADDRESS	[REDACTED] GUEYDAN, LA		
HOME PHONE NUMBER	[REDACTED]	WORK PHONE NUMBER	
DESCRIPTION OF DAMAGE	50 FEET OF FENCE		
<input type="checkbox"/> NOT APPLICABLE			

PROPERTY OWNER

NAME			
ADDRESS			
HOME PHONE NUMBER		WORK PHONE NUMBER	
DESCRIPTION OF DAMAGE			
<input checked="" type="checkbox"/> NOT APPLICABLE			

PROPERTY OWNER

NAME			
ADDRESS			
HOME PHONE NUMBER		WORK PHONE NUMBER	
DESCRIPTION OF DAMAGE			
<input type="checkbox"/> NOT APPLICABLE			

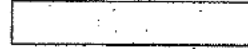
STATE OF LOUISIANA
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LOUISIANA STATE POLICE – TROOP I

*FATALITY / SERIOUS INJURY
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EMERGENCY SERVICES ASSISTANCE	
SHERIFF'S DEPARTMENT(S)	VERMILION PARISH SHERIFF'S OFFICE
POLICE DEPARTMENT(S)	
FIRE DEPARTMENT(S)	GUEYDAN FIRE DEPARTMENT
AMBULANCE SERVICE(S)	ACADIAN AMBULANCE
OTHER	
OTHER COMPANY ASSISTANCE	
ELECTRIC COMPANY	ENTERGY
TELEPHONE COMPANY	
GAS COMPANY	
CABLE T.V. COMPANY	
DOTD	
OTHER	

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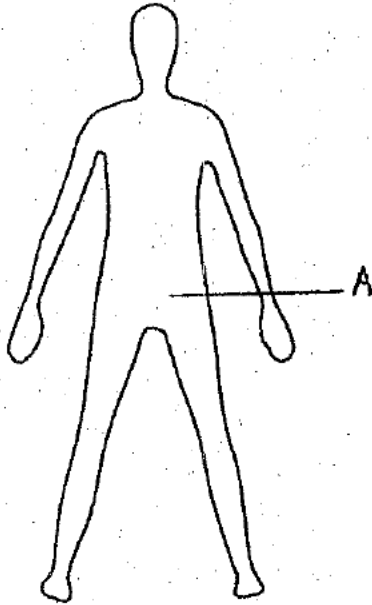
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LOUISIANA STATE POLICE – TROOP I

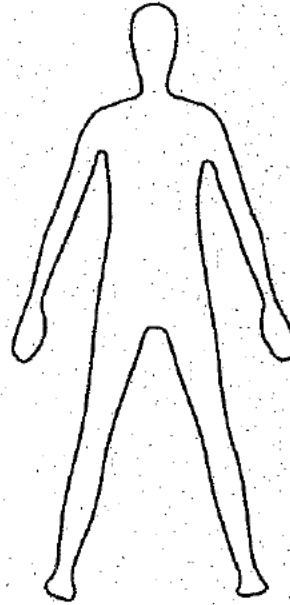
FATALITY / SERIOUS INJURY
 INVESTIGATION REPORT SUPPLEMENTAL

OBSERVED INJURIES

INJURED PERSON'S NAME:	[REDACTED]
<input checked="" type="checkbox"/> OCCUPANT OF VEHICLE NUMBER (1)	<input type="checkbox"/> PEDESTRIAN
OBSERVATIONS MADE BY: S/T DONALD MCFARLAIN	



FRONT VIEW



REAR VIEW

AREA OF INJURY	DESCRIPTION
A	OPEN CUT AND BLEEDING
B	
C	
D	
E	
F	
G	
H	
I	
J	
ANY OTHER INFORMATION: N/A	

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LOUISIANA STATE POLICE - TROOP I

*FATALITY / SERIOUS INJURY
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COORDINATE MEASUREMENTS

LANDMARK: LDH CONCRETE MARKER 40 FEET WEST OF LA 91

REFERENCE LINE: SOLID WHITE FOGLINE

REFERENCE POINT (⊙): PAINT MARK ON FOGLINE

DESCRIPTION OF POINT	⊙	NORTH	SOUTH	EAST	WEST
2 ND IMPACT GOUGE MARK (BEGINNING)	A		662"		200"
2 ND IMPACT GOUGE MARK (END)	B		77'11"		222"
3 RD IMPACT GOUGE MARK	C		96'6"		23'6"
4 TH IMPACT GOUGE MARK	D		105'		163"
5 TH IMPACT GOUGE MARK	E		116'8"		202'
IMPACT WITH FENCE	F		122'8"		38'6"
IMPACT WITH UTILITY POLE	G		144'10"		44'
RIGHT FRONT CORNER OF VEHICLE 1	H		148'2"		43'6"
RIGHT REAR CORNER OF VEHICLE 1	I		166'2"		43'8"
BODY	J		149'3"		45'8"
1 ST IMPACT GOUGE MARK (END)	K	40'2"			16'
1 ST IMPACT GOUGE MARK (BEGINNING)	L	50'7"			14'4"
RIGHT TIRE TRACK IN DITCH	M	96'7"			17'1"
LEFT TIRE TRACK IN DITCH	N	96'2"			10'7"
RIGHT TIRE TRACK IN DITCH	O	175'			17'
LEFT TIRE TRACK IN DITCH	P	175'			11'3"
RIGHT TIRE TRACK IN DITCH	Q	280'			13'5"
LEFT TIRE TRACK IN DITCH	R	280'			6'
LEFT SIDE OF VEH. OFF ROADWAY	S	365'			0
RIGHT SIDE OF VEH. OFF ROADWAY	T	457'			0
	U				
	V				
	W				
	X				
	Y				
	Z				

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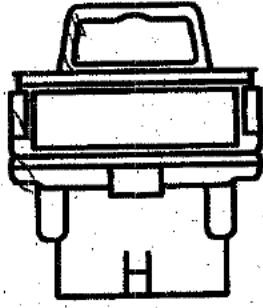
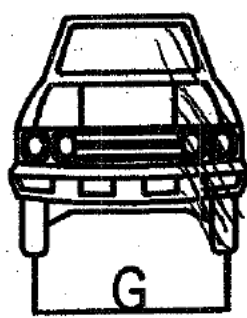
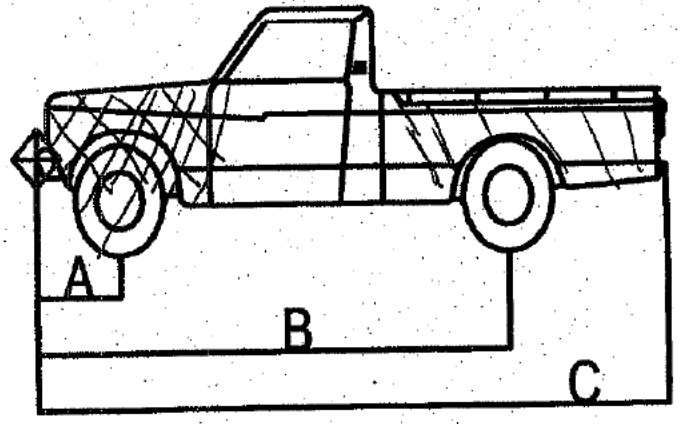
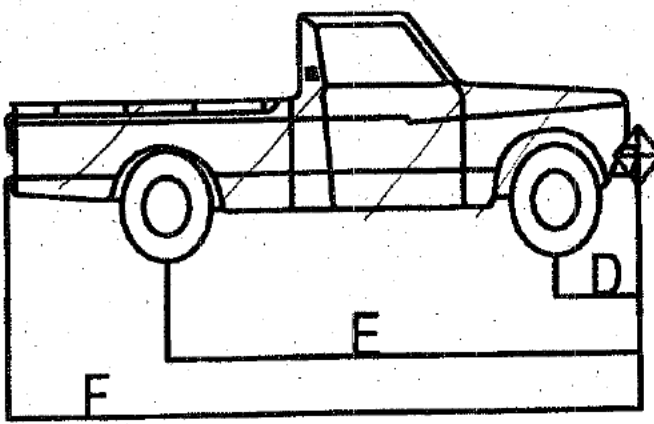
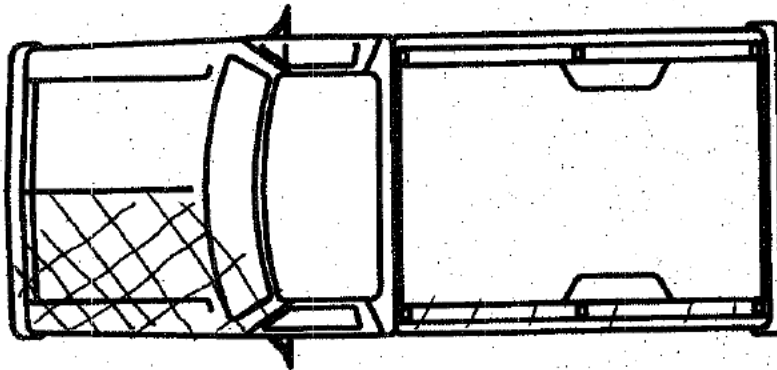
VEHICLE DAMAGE ANALYSIS

VEHICLE NUMBER 1

INSPECTED BY: S/T DONALD MCFARLAIN

DATE: 05/06/2006

TIME: 0544 HRS



SHADE IN DAMAGED AREAS

[REDACTED]

20

[REDACTED]

LOUISIANA STATE POLICE - TROOP I

FATALITY / SERIOUS INJURY INVESTIGATION REPORT SUPPLEMENTAL VEHICLE DAMAGE ANALYSIS VEHICLE NUMBER 1

MEASUREMENTS								
	A	B	C	D	E	F	G	H
MEASUREMENTS	4'	15'	19'	3'5"	15'	19'	6'8"	5'2"
MVI	NUMBER	UNREADABLE						
	STATE	LA						
	EXPIRATION DATE	UNREADABLE						
ODOMETER READING	UNREADABLE							
PHYSICAL DEFECTS	N/A							
MISSING ITEMS (PRIOR TO CRASH)								
LOCATION OF INSPECTION	ON SCENE							
TIRE INFORMATION								
TIRE	FRONT LEFT	FRONT RIGHT	REAR LEFT	REAR RIGHT				
TREAD DEPTH (32's)	10/32	9/32	8/32	8/32				
TIRE PRESSURE (PSI)	47	DEFLATED	DEFLATED	DEFLATED				
SEATED/UNSEATED	SEATED	UNSEATED	UNSEATED	UNSEATED				
ADDITIONAL TIRES <input type="checkbox"/> N/A								
TREAD DEPTH (32's)								
TIRE PRESSURE (PSI)								
SEATED/UNSEATED								
ADDITIONAL MEASUREMENTS (32's)								
TIRE	FOUR O'CLOCK	EIGHT O'CLOCK	TWELVE O'CLOCK					

MEASURE THE CENTER GROOVE OF EACH TIRE. TAKE ADDITIONAL MEASUREMENTS AT THE FOUR O'CLOCK, EIGHT O'CLOCK, AND TWELVE O'CLOCK POSITIONS ACROSS THE WIDTH OF THE TREAD FOR TIRES THAT HAVE 2/32 INCH OR LESS OF REMAINING TREAD



SPEED
LIMIT
55





























































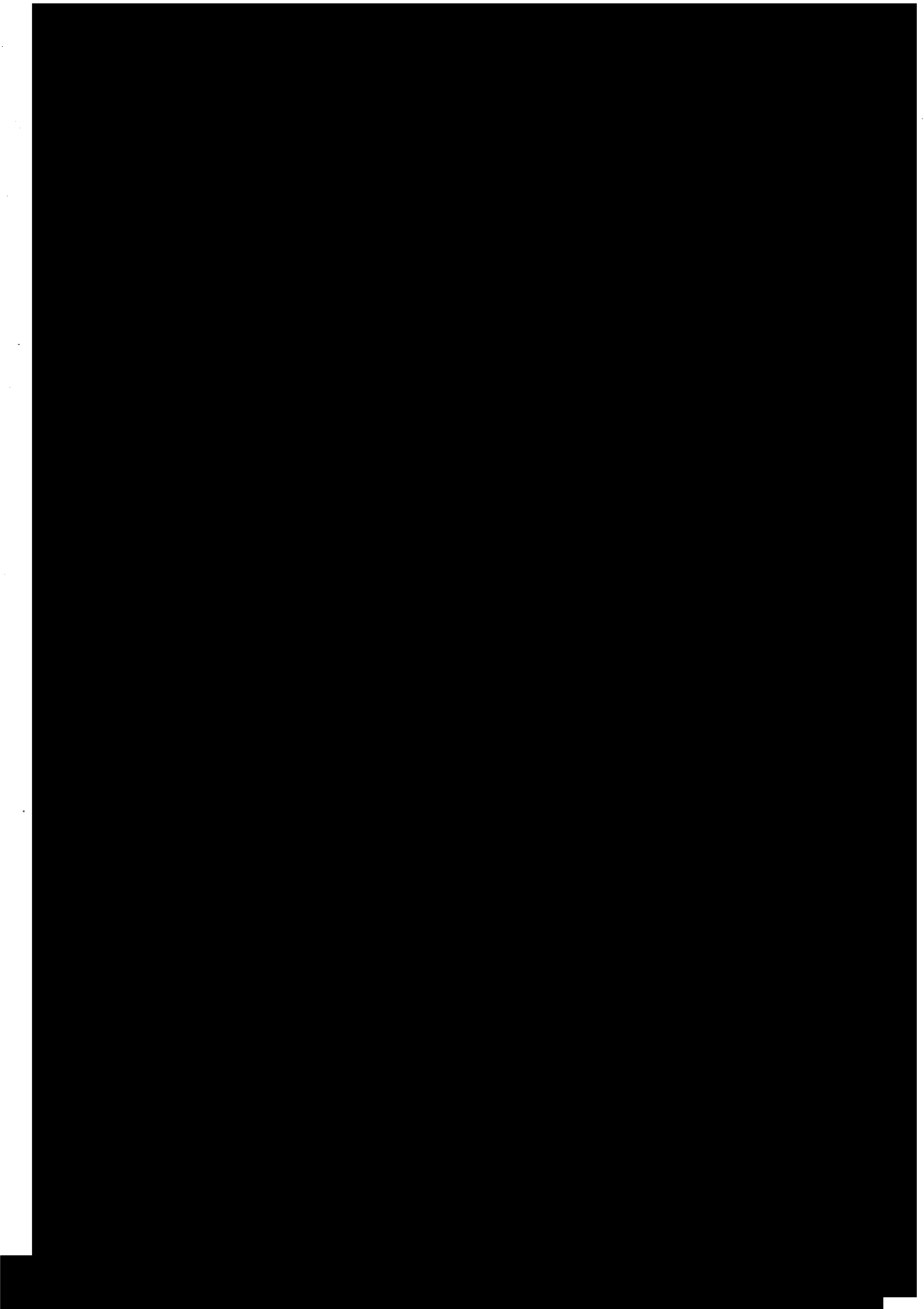
DP14-004

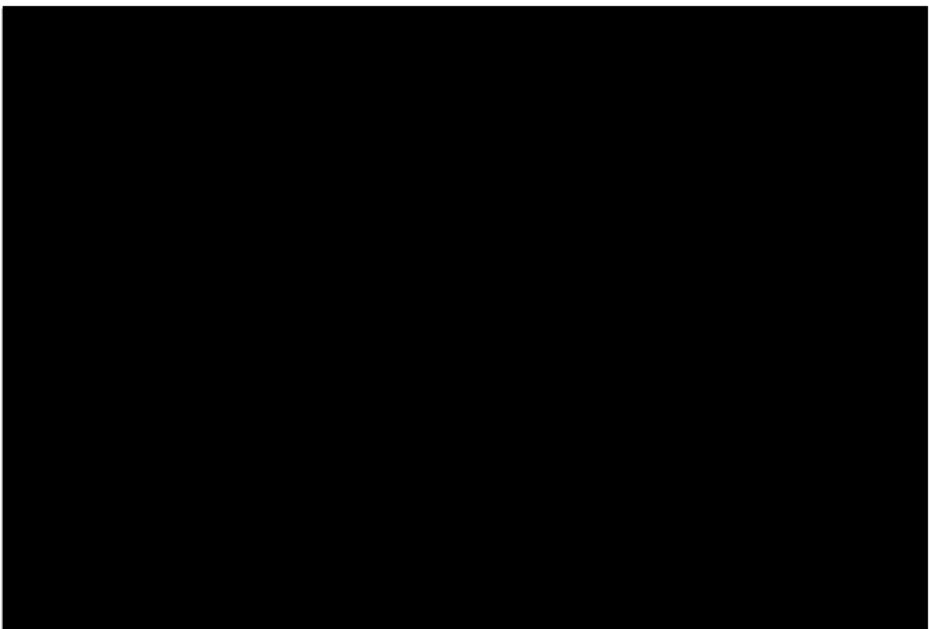
CHRYSLER

9/15/2014

Legals and Cust Complaints

PUBLIC





Notes:

06/08/2007



NYPD
PHOTO UNIT



Sheet 1 of 3

No. Killed 01 No. Injured 01 No. of Vehicles 01 No. of Pedestrians 01 Leaving Scene NO Photos YES
 Date of Report 05/03/07 Date of Accident 05/03/07 Time 1425 M. Day Thursday
 Precinct 045 Accident No. 999 Aided No. _____ U.F.61 No. 3098 Case No. 307-16
 Accident Occurred On: _____ Miles Avenue
50 feet N S E of/at _____
 Borough BRONX PF PNE _____ CF _____ CNF _____ Supplementary _____ Pickup _____

VEHICLES
 Year 2007 Make Jeep Type SUBN Color Grey Reg. No. _____ State PA
 Operator _____ N/A Address _____ N/A
 Sex _____ D.O.B. _____ Class Lic. _____ No. _____ State _____
 Vehicle Identification No. 1J4GL48K57W _____ Cargo _____ Veh. Wt. _____ lbs.
 Ins. Code # 999 Policy # _____ Number of occupants 00
 Owner _____ Address _____ Allentown, PA _____

Year 2007 Make Toyota Type Van Color Blue Reg. No. _____ State NY
 Operator PARKED Address _____
 Sex _____ D.O.B. _____ Class Lic. _____ No. _____ State _____
 Vehicle Identification No. 5TDZK22C4 _____ Cargo _____ Veh. Wt. _____ lbs.
 Ins. Code # 341 Policy # _____ N/A Number of occupants 00
 Owner _____ Address _____ Bronx NY _____

PERSONS KILLED OR INJURED
 Name _____ Address _____ Bronx NY _____
 Oper. Veh. No. _____ Pass. Veh. No. _____ Where Seated _____ Pedestrian Sex M Age 1
 Date of Death 05/03/07 Time 1535 Removed to JACOBI
 Victim Ejected _____ Wore Safety Belt _____ Injury Severe Head Trauma

Name _____ Address _____ Bronx NY _____
 Oper. Veh. No. _____ Pass. Veh. No. _____ Where Seated _____ Pedestrian Sex F Age 24
 Date of Death _____ Time _____ Removed to JACOBI
 Victim Ejected _____ Wore Safety Belt _____ Injury MINOR SCRAPES TO RIGHT AND LEFT ARMS

Name _____ Address _____
 Oper. Veh. No. _____ Pass. Veh. No. _____ Where Seated _____ Pedestrian _____ Sex _____ Age _____
 Date of Death _____ Time _____ Removed to _____
 Victim Ejected _____ Wore Safety Belt _____ Injury _____

Name _____ Address _____
 Oper. Veh. No. _____ Pass. Veh. No. _____ Where Seated _____ Pedestrian _____ Sex _____ Age _____
 Date of Death _____ Time _____ Removed to _____
 Victim Ejected _____ Wore Safety Belt _____ Injury _____

WITNESSES
 Name N/A Address _____ Tel. No. _____
 Name _____ Address _____ Tel. No. _____
 Name _____ Address _____ Tel. No. _____

WEATHER AND TERRAIN CONDITIONS

WEATHER	LIGHT CONDITION	AREA	LOCATION	ROAD	ROAD CONDITION	SURFACE
Clear	<input checked="" type="checkbox"/> Daylight	<input checked="" type="checkbox"/> Industrial	At Intersection	Straight/ Level	Dry	<input checked="" type="checkbox"/> Concrete
Cloudy	<input type="checkbox"/> Dawn	<input type="checkbox"/> Business	Between Intersection	Straight/Grade	Wet	Asphalt
Rain	<input type="checkbox"/> Dusk	<input type="checkbox"/> Residential	<input checked="" type="checkbox"/> Overpass	Curve/ Level	Snowy	Brick
Snow	<input type="checkbox"/> Darkness	<input type="checkbox"/> School	Underpass	Curve/Grade	Icy	Cobbie
Sleet	<input type="checkbox"/>	<input type="checkbox"/> Parkway/ Expy.	Bridge	Hillcrest	Muddy	Gravel
Fog	<input type="checkbox"/>	<input type="checkbox"/> Other	Other	<input checked="" type="checkbox"/> %Grade	<input checked="" type="checkbox"/> Other	Other

TRAFFIC CONTROL		VEHICLE DIRECTION		PEDESTRIAN ACTIONS		
		1	2	1	2	3
Police Officer	Going Straight			1	2	3
Signal Light	Changing Lanes			With Signal	Behind Parked Cars	
Stop Sign	Right/ Left Turn			Against Signal	In Safety Zone	
Pedestrian Signal	U Turn			No Signal	Playing in Road	
Yield Sign	Pull from Curb			Diagonally	Running off Sidewalk,	
Other	Parked	<input checked="" type="checkbox"/>		Other	Not in Roadway	<input checked="" type="checkbox"/>
None	<input checked="" type="checkbox"/> Backing			Against Flashing Don't Walk	Other	
	Other					

DRIVER VISION BLOCKED
 VEH. YES NO
 VEH. YES NO

Circle all occupants

1	4	1
	5	2
	6	3

1	4	1
	5	2
	6	3

OPR. PED. CONDITION	OPR.	PED.
PHYSICAL DEFECT		
INTOXICATED		
APPARENTLY NORMAL		1 2
UNKNOWN		

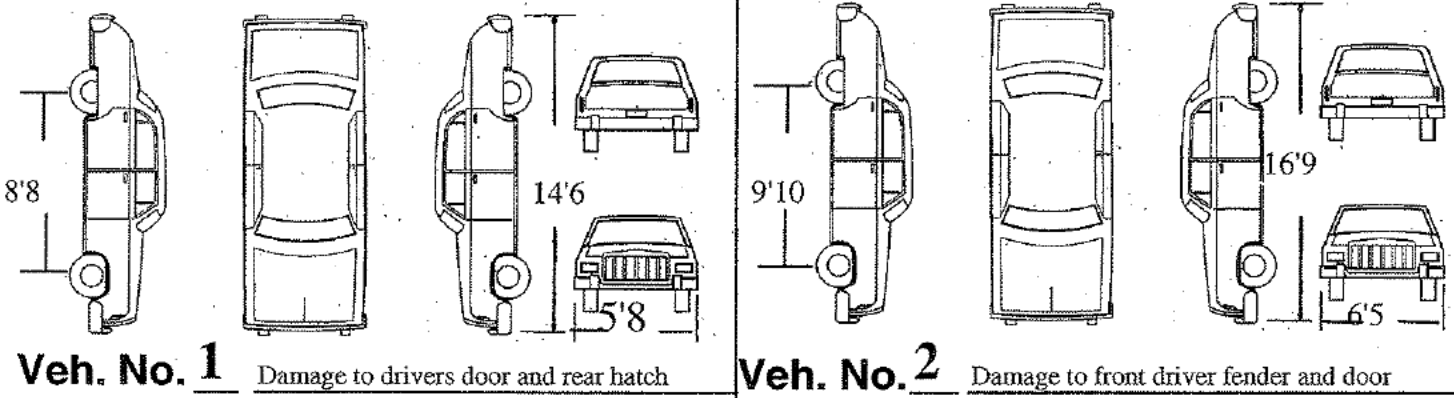
DESCRIPTION OF ACCIDENT

AT t/p/o pedestrian was removing child from car when the vehicle began to roll backwards. child was knocked out of pedestrians arms and under the vehicle which then struck vehicle #2.

SKIDMARK DATA			DECELEROMETER BRAKE TEST CALIBRATED AT 20 MPH					
REG. No.	VEH. No.	VEH. No.	TIME	DATE	GRADE	LOCATION		
	N/A							
FRONT LEFT								
FRONT RIGHT								
REAR LEFT								
REAR RIGHT								
LONGEST SKID								
COEFF. FRICTION								
COMPUTED SPEED								
LEGALSPEED								

PHYSICAL EXAMINATION OF BRAKE SYSTEM					
Veh. No.	Pedal Pressure		Fluid	Air	Leak

DAMAGE TO VEHICLES DESCRIBE AND SHADE DAMAGED AREAS



SAFETY EQUIPMENT INSPECTION

	Veh. No. 1	Reg. No. GNT 2002	Veh. No. 2	Reg. No. DWN2607
Inspection Stamp - Expiration Date.	IM73019330	03/08 PA	11295575	03/08 NY
Tires (Size & Condition)	225/75 R16 4-good		225/60/R17 4-good	
Type Transmission/ Position	PARK		GOOD	
Headlights /Condition	off working		locked	
Tail Lights/ Condition	GOOD		locked	
Brake Lights	WORKING		locked	
Directionals	WORKING		locked	
Steering Mechanism	Power assist		locked	
Windshield Wipers	2 GOOD		locked	
Mirror Locations	2 SIDEVIEW 1 REARVIEW ALL GOOD		locked	
Horn	GOOD		locked	
Safety Belts Installed	2 3pt front 3-3pt rear		locked	
Reflectors	8		locked	
Front Windshield	GOOD		locked	
Mileage	13857		locked	

POLICE ACTION

DEFENDANT _____ SUMMONS/ARREST No. _____ PCT _____

CHARGES _____

ACTION BY: RANK PO Carraro NAME [Signature] SHIELD _____ COMMAND _____

AI TECHNICIAN PO Carraro SHIELD 2532 COMMAND HWY 1

Type Name and Signature



... to ...

STATEMENT OF: [REDACTED] PCT. 45 ACCIDENT NO. 999 COMPLAINT NO. 3098

RESIDENCE ADDRESS: [REDACTED] *Brooklyn NY*

LOCATION OF INTERVIEW: SCENE OF ACCIDENT PRECINCT STATION HOUSE OTHER (DESCRIBE) *Jacobi Hospital* TIME OF REPORT: *1600* DATE: *5 3 07*

IDENTITY OF ABOVE NAMED PERSON: OPERATOR OF VEH. NO. *1* PASSENGER IN VEH. NO. PEDESTRIAN WITNESS DATE: [REDACTED]

DATE OF ACC. *5/03/07* TIME: LOCATION: ACCIDENT INVOLVED DEATH PERSONAL INJURY

QUESTIONS FOR WITNESS, PASSENGER OR PEDESTRIAN ONLY	QUESTIONS FOR OPERATOR OF VEHICLE ONLY
Did you see the accident? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	How many years have you driven?
Where were you at the time of the accident? <i>I was out of the car with my baby.</i>	How long have you driven the vehicle involved in the accident?
Do you know any of the persons involved in this accident? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was there any mechanical failure or defects with the vehicle you were driving?
If yes, whom? <i>My baby</i>	Did you consume any intoxicants or medication prior to the accident? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
At the time of the accident, was your visibility obstructed in any way? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, what, how much & where?
If yes, describe:	Where were you coming from or going to?
	Who was with you at time of accident?

BELOW QUESTIONS TO BE ANSWERED IN ALL CASES, WHETHER SUBJECT IS OPERATOR, PASSENGER, PEDESTRIAN OR WITNESS

Briefly describe this accident? *I parked my car in the driveway and opened garage door so that I can take my baby inside. The car was in park and I reached back and I took the baby out of the car seat. I got out with the baby and reached back in to get my bag. I think my bag got caught on the thing (transmission) and the car started to roll back. It dragged me and my baby down the driveway and I fell and the baby hit his head on the ground. The baby's arm was stuck under the front tire and my neighbors*

What was the cause of the accident? *came out to help me.*

Don't know

INSERT ANSWERS PERTAINING TO EACH VEHICLE UNDER APPROPRIATE COLUMN	VEHICLE NO. 1	VEHICLE NO. 2	VEHICLE NO. 3
License plate No.	[REDACTED] PA.		
Make, type and color of vehicle	<i>Jeep Liberty/04</i>		
Direction of travel and on what street	<i>Parked in driveway</i>		
Speed of vehicle(s) involved	<i>Don't know</i>		
Was vehicle subject to traffic control devices, signal lights, signs, pavement markings, etc.?	<i>NO</i>		
Did vehicle swerve or turn to avoid contact?	<i>NO</i>		
Immediately prior to accident, was any signal given? (horn - hand - other)	<i>NO</i>		
What lights on vehicle were lighted?	<i>None</i>		
What were the points of impact?	<i>Driver Door</i>		

At time of accident, were there any other vehicles on the street in the vicinity? Yes No If yes, describe: *Parked cars*

In what direction was pedestrian (if any) going? With signal light Against signal light Walking Running Standing

Accident occurred during Daylight Dawn Dusk Darkness Weather Condition: Clear Fog Rain Snow (Describe) Other

ROADWAY LIGHTED Yes No Road Condition: Dry Wet Muddy Snowy Icy Other

Obstructions of holes in street Yes No If yes, describe:

SIGNATURE OF WITNESS: *[Signature]* RANK: *[Signature]* SIGNATURE OF INVESTIGATING OFFICER: *[Signature]* TAX REG. NO. *92287AD* COMMAND *ALS*

POLICE ACCIDENT REPORT (NYC)

MV-104AN (7/01)

Precinct 045

Accident No. 1152

Complaint Number

AMENDED REPORT

Accident Date: Month 3, Day 2007, Thursday, 1429. No. of Vehicles: 2, No. Injured: 1, No. Killed: 1. Not Investigated at Scene, Left Scene, Police Photos.

VEHICLE 1 - Driver License ID Number, Driver Name, Address, City or Town, State, Zip Code. VEHICLE 2 - Driver License ID Number, Driver Name, Address, City or Town, State, Zip Code. Both vehicles are marked as 'Parked'.

Date of Birth, Sex, Unlicensed, No. of Occupants, Public Property Damaged. Includes fields for both vehicles and their occupants.

City or Town: ATTENTOWN PA, BROWN NY. State of Reg: PA, NY. Vehicle Year & Make: SUBU, 07-Toyota SUBU. Ins. Code: 341.

Ticket/Arrest Number(s), Violation Section(s).

VEHICLE DAMAGE CODING. Includes diagrams for vehicle damage and an ACCIDENT DIAGRAM showing vehicle positions and directions. Includes text: 'Cost of repairs to any one vehicle will be more than \$1000.' and checkboxes for 'Unknown/Unable to Determine', 'Yes', 'No'.

Reference Marker, Coordinates (if available), Place Where Accident Occurred: BRONX, Road on which accident occurred: miles Ave, at 1) Intersecting street: of 56, or 2) of Hosmer Ave.

Accident Description/Officer's Notes: AT 7110 Pedestrian (1) was removing child from vehicle (1) which was parked in Drive way, vehicle (1) then began to roll backward when drivers door struck pedestrian (1) & caused child to fall from her arms. vehicle (1) then rolled over child & struck vehicle (2) & they rolled forward & stopped.

Table with columns: Name, DOB, Sex, Race, Height, Weight, Eyes, Hair, Complexion, Address, City, State, Zip, Date of Death. Includes entries for EMS 7003.

Officer's Rank and Signature: PO CUSTRED. Tax ID No. 901285, NCIC No. 03030, Precinct HUSM. Date/Time Reviewed: 05/06/10 2312 2342.

DP14-004

CHRYSLER

9/15/2014

Legals and Cust Complaints

PUBLIC

03/06/2012

CT Log Number [REDACTED]

TO: Melissa Graylin
Chrysler Group LLC
Office Of General Counsel, 1000 Chrysler Drive
CIMS: 485-13-62
Auburn Hills, MI 48326-2766

RE: Process Served In Arizona

FOR: Chrysler Group LLC (Domestic State: DE)

ENCLOSED ARE COPIES OF LEGAL PROCESS RECEIVED BY THE STATUTORY AGENT OF THE ABOVE COMPANY AS FOLLOWS:

TITLE OF ACTION: [REDACTED], etc., Pltfs. vs. Chrysler Group, LLC, etc., et al., Drts.

DOCUMENT(S) SERVED: Summons, Complaint, Certificate

COURT/AGENCY: Maricopa County - Superior Court, AZ
Case # [REDACTED]

NATURE OF ACTION: Product Liability Litigation - Defective air bags pertaining to 2008 Jeep Grand Cherokee Laredo, VIN 1J8GR48K280 [REDACTED] resulting in fatal injuries

ON WHOM PROCESS WAS SERVED: C T Corporation System, Phoenix, AZ

DATE AND HOUR OF SERVICE: By Process Server on 03/06/2012 at 11:13

JURISDICTION SERVED : Arizona

APPEARANCE OR ANSWER DUE: Within 20 days after service, exclusive of the day of service

ATTORNEY(S) / SENDER(S): G. Lynn Shumway
Law Office of G. Lynn Shumway
4647 N. 32nd Street, Suite 230
Phoenix, AZ 85018
602-795-3720

ACTION ITEMS: CT has retained the current log, Retain Date: 03/06/2012, Expected Purge Date: 03/11/2012
Image SOP

SIGNED: C T Corporation System
PER: Issis Gonzalez
ADDRESS: 2390 E. Camelback Road
Phoenix, AZ 85016
TELEPHONE: 602-277-4792

3/6/12 11:13 AM
(2)

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[REDACTED]

Attorneys for Plaintiffs

**In the Superior Court of the State of Arizona
In And For The County Of Maricopa**

[REDACTED], individually and as surviving
wife of [REDACTED] deceased; and [REDACTED]
[REDACTED], a married woman;

Plaintiffs,

vs.

CHRYSLER GROUP, LLC, a Delaware
corporation; **CHAPMAN AUTO CENTER, L.L.C.**,
an Arizona corporation; and **JOHN DOE
ENTITIES I-X**,

Defendants.

No. [REDACTED]

S U M M O N S

IF YOU WANT THE ADVICE OF A
LAWYER, YOU MAY WISH TO CONTACT
THE LAWYER REFERRAL SERVICE AT
602-257-4434 OR ON-LINE AT
WWW.LAWYERFINDERS.ORG. LRS IS
SPONSORED BY THE MARICOPA
COUNTY BAR ASSOCIATION

THE STATE OF ARIZONA TO THE DEFENDANTS:

CHRYSLER GROUP, LLC

YOU ARE HEREBY SUMMONED and required to appear and defend, within the time applicable, in this action in this Court. If served within Arizona, you shall appear and defend within twenty (20) days after the service of the Summons and Complaint upon you, exclusive of the day of service. If served out of the State of Arizona -- whether by direct service, by registered or certified mail, or by publication -- you shall appear and defend within thirty (30) days after the service of the Summons and Complaint upon you is complete, exclusive of the day of service. Where process is served upon the Arizona Director of Insurance as an insurer's attorney to receive service of legal process against it in this state, the insurer shall not be required to appear, answer or plead until expiration of forty (40) days after date of such service upon the Director. Service by registered or certified mail without the State of Arizona is complete thirty (30) days after the date of filing the receipt and affidavit of service with the Court. Service by publication is complete thirty (30) days after the date of first publication.

LAW OFFICE OF G. LYNN SHUMWAY
4647 N. 32nd St., Suite 230
Phoenix, Arizona 85018-3345
Telephone: (602) 795-3720 ♦ Facsimile: (602) 795-3728

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Direct service is complete when made. Service upon the Arizona Motor Vehicle Superintendent is complete thirty (30) days after filing the Affidavit of Compliance and return receipt of Officer's Return. RCP 4; ARS §§ 20-222, 28-502, 28-503.

YOU ARE HEREBY NOTIFIED that in case of your failure to appear and defend within the time applicable, judgment by default may be rendered against you for the relief demanded in the Complaint.

YOU ARE CAUTIONED that in order to appear and defend, you must file an Answer or proper response in writing with the Clerk of this Court, accompanied by the necessary filing fee, within the time required, and you are required to serve a copy of any Answer or response upon the Plaintiffs' attorney. RCP 10(d); ARS §12-311; RCP 5.

Requests for reasonable accommodation for persons with disabilities must be made to the division assigned to the case by parties at least 3 judicial days in advance of a scheduled Court proceeding.

The name and address of Plaintiffs' attorney is: G. Lynn Shumway, LAW OFFICE OF G. LYNN SHUMWAY, 4647 N. 32nd Street, Suite 230, Phoenix, Arizona 85018, 602.795.3720.

SIGNED AND SEALED this date: _____

MICHAEL K. JEANES, CLERK

COPY

By _____
Deputy Clerk

MAR 05 2012



MICHAEL K. JEANES, CLERK
S. LaSPALUTO
DEPUTY CLERK

COPY

MAR 05 2012



MICHAEL K. JEANES, CLERK
S. LaSPALUTO
DEPUTY CLERK

1 G. Lynn Shumway (011714)
2 LAW OFFICE OF G. LYNN SHUMWAY
3 4647 N. 32nd Street, Suite 230
4 Phoenix, Arizona 85018-3345
5 Telephone : 602.795.3720
6 Facsimile : 602.795.3728

7 *Attorneys for Plaintiffs*

8 **In the Superior Court of the State of Arizona**
9 **In And For The County Of Maricopa**

10 *****

11 [REDACTED], individually and as surviving
12 wife of [REDACTED], deceased; and [REDACTED]
13 [REDACTED], a married woman;

14 Plaintiffs,

15 vs.

16 CHRYSLER GROUP, LLC, a Delaware
17 corporation; CHAPMAN AUTO CENTER, L.L.C.,
18 an Arizona corporation; and JOHN DOE
19 ENTITIES I-X,

20 Defendants.

No. [REDACTED]

COMPLAINT

(Tort: Motor Vehicle; Wrongful Death)

21 Plaintiffs, [REDACTED] [REDACTED] [REDACTED], hereby submit their Complaint against
22 Defendants, as follows:

23 1. Plaintiff [REDACTED] is a resident of the County of Gila, State of Arizona.
24 She is the wife of decedent [REDACTED] whose wrongful death on April 10, 2010 is
25 the subject of this action.

26 2. Plaintiff [REDACTED] is a married woman, residing in the County of Gila,
27 State of Arizona, and is the surviving daughter of [REDACTED].

28 3. Plaintiffs bring this action on behalf of themselves and all wrongful death
beneficiaries of decedent [REDACTED] pursuant to the Arizona Wrongful Death Act,
A.R.S. §12-611, et seq.

LAW OFFICE OF G. LYNN SHUMWAY
4647 N. 32nd St., Suite 230
Phoenix, Arizona 85018-3345
Telephone: (602) 795-3720 • Facsimile: (602) 795-3728

1 4. At all times relevant herein, Defendant CHRYSLER GROUP, LLC was and is a
2 corporation incorporated under the laws of the State of Delaware, with a principal place of
3 business in Auburn Hills, Michigan.

4
5 5. Defendant CHRYSLER GROUP, LLC is duly licensed and authorized to do
6 business in the State of Arizona. Defendant CHRYSLER GROUP, LLC has purposefully
7 directed its business activities toward the State of Arizona.

8
9 6. Defendant CHAPMAN AUTO CENTER, L.L.C. is an Arizona corporation,
10 engaged in the business of maintaining, selling, leasing and distributing automobiles in
11 Maricopa County, State of Arizona.

12 7. Defendant CHAPMAN AUTO CENTER, L.L.C., by selling the subject Jeep
13 Cherokee to Plaintiffs, put the vehicle into the stream of commerce with knowledge of the
14 defects in the subject Jeep Cherokee's airbag system, or with knowledge from which a
15 reasonable distributor of Jeep Cherokees should have known of the defects in the subject
16 Jeep Cherokee's front occupant restraint system, including but not limited to the vehicle's
17 driver and passenger airbag system.

18 8. At all times relevant herein, Defendants JOHN DOES ENTITIES 1-10 were
19 corporations, partnerships, limited liability companies, or other organizations and entities
20 who, upon information and belief, operate in and have substantial ties to Maricopa County,
21 State of Arizona. Said Defendants have, upon information and belief, helped to cause the
22 injuries alleged herein. The true names of JOHN DOE ENTITIES 1-10 are not presently
23 known but will be provided to this Court as they are learned.

24
25
26 9. This Court has jurisdiction of the parties and subject matter, and venue is
27 proper in this court.

28 ...

1 10. On or about the 9th day of April, 2010, [REDACTED] was the driver and
2 Plaintiff [REDACTED] the passenger of a 2008 Jeep Grand Cherokee Laredo, VIN No.
3 1J8GR48K28C [REDACTED] (the "Vehicle"), manufactured by Defendant CHRYSLER GROUP,
4 LLC.
5

6 11. The airbag system components in the Vehicle were primarily manufactured,
7 assembled and/or distributed by Defendant CHRYSLER GROUP, LLC.
8

9 12. Driver and passenger airbag systems with inflation and restraint features
10 substantially similar to those in the Vehicle, when they are deployed timely in frontal
11 collisions, are effective in reducing the severity of minor to severe injuries to front seat
12 passengers, compared to expected injuries without airbag deployment to similar occupants
13 in similar crash events, when the passenger's trajectory, during the collision event, takes
14 the driver and passenger into the middle section of the deployed driver and passenger
15 airbags during such frontal collision events.
16

17 13. On or about April 9, 2010, at approximately 3:07 p.m., [REDACTED]
18 and [REDACTED] were traveling southbound on State Route 87 outside the City of
19 Payson, Gila County, State of Arizona.
20

21 14. South of Milepost 249.1, the Vehicle experienced a "must fire" severity
22 frontal collision with a tree, but the front airbags of the Vehicle failed to deploy or
23 otherwise provide the protection the Vehicle's frontal airbags should have provided to
24 [REDACTED] [REDACTED]

25 15. As a proximate result of the airbag system defects causing the frontal airbags
26 to not deploy, [REDACTED] suffered fatal injuries and Plaintiff [REDACTED]
27 suffered serious and severe injuries.
28

...

1 16. If the frontal airbags had timely deployed during the “must fire” severity
2 collision, [REDACTED] would not have sustained serious or severe injuries during the
3 “must fire” frontal collision.

4
5 17. If the frontal airbags had timely deployed during the “must fire” severity
6 collision, [REDACTED] would not have sustained fatal injuries.

7
8 18. If the frontal airbags had timely deployed during the “must fire” severity
9 collision, [REDACTED] would not have sustained serious or severe injuries during the
10 “must fire” frontal collision.

11 19. The subject collision was a severe longitudinal frontal collision for the
12 JOHNSON Vehicle and required the Vehicle’s frontal airbag crash sensing system to order a
13 timely airbag deployment during that “must fire” frontal collision.

14
15 20. During the subject “must fire” frontal collision, the frontal airbags of the
16 JOHNSON Vehicle did not deploy.

17 21. A timely driver and passenger airbag deployment in the Vehicle during the
18 subject collision would have substantially mitigated or prevented the death of [REDACTED]
19 [REDACTED] and chest and torso injuries that [REDACTED] suffered during the subject
20 “must fire” frontal collision.

21
22 22. As a direct and proximate result of the Vehicle’s driver and passenger airbag
23 non-deployment during the subject collision, [REDACTED] died and [REDACTED]
24 suffered severe injuries.

25
26 23. The subject collision event was a “must fire” collision event for the
27 Vehicle’s frontal airbag crash sensing system.

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24. The collision had characteristics that make that collision a “must fire” event for the Vehicle’s driver and passenger airbag systems.

25. The non-deployment of the Vehicle’s driver and passenger airbags in the subject “must fire” frontal collision is evidence of a failure of the Vehicle’s airbag system to meet the performance requirements specified by CHRYSLER GROUP, LLC for the frontal airbag system.

COUNT I
(Negligence)

26. Plaintiffs hereby incorporate by this reference each and every allegation contained in paragraphs 1 through 25 as though fully set forth herein again.

27. Defendant CHRYSLER GROUP, LLC owed a duty of care to individuals driving and/or riding in vehicles manufactured in whole or in part by said Defendant.

28. Defendant CHRYSLER GROUP, LLC breached this duty of care by, among other things:

- a. Designing an unreasonably dangerous airbag crash sensing system (and its components) in the 2008 Jeep Grande Cherokee airbag system.
- b. Negligently designing the structure of the crush zone that fails to properly signal the severity of the crash to the sensing system in the 2008 Jeep Grande Cherokee airbag system.
- c. Negligently designing the airbag sensor placement, number of discriminating sensors and location of the sensors in the 2008 Jeep Grande Cherokee airbag crash sensing system.

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- d. Negligently designing the crash signal path to the crash sensor or sensors in the 2008 Jeep Grande Cherokee airbag system.
- e. Negligently designing the airbag warning system for the 2008 Jeep Grande Cherokee airbag system.
- f. Negligently failing to adequately test the performance of the airbag crash sensing system in the 2008 Jeep Grande Cherokee airbag system for the foreseeable crashes with objects, including collisions like the present "must fire" frontal collision.
- g. Negligently failing to timely seek, through its suppliers, or timely specify to its suppliers development of a sensing system to operate a two-stage or multiple level airbag inflation system.
- h. Negligently failing to timely seek development either internally or through its suppliers or to specify to its suppliers multiple stage airbag inflators for use in the 2008 Jeep Grande Cherokee.
- i. Negligently manufacturing the airbag crash sensing system in the 2008 Jeep Grande Cherokee in a way that caused it to malfunction and not deploy in a collision that was in the must fire range according to CHRYSLER's and automotive industry standards.
- j. Negligently committing other acts in connection with their design and/or manufacture of the subject 2008 Jeep Grande Cherokee crash sensing and/or airbag inflation systems which will be identified in the course of discovery.

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k. Negligently failing to provide adequate instructions or warnings about the Vehicle's airbag system.

29. As a direct and proximate result of Defendant's negligence as alleged herein, [REDACTED] suffered fatal injuries, and as a result thereof, the Plaintiffs and other wrongful death beneficiaries have been deprived of the care, companionship, protection, love, affection and guidance of [REDACTED], and have suffered pain, grief, sorrow, anguish, stress, shock and mental suffering, and will suffer such damages in the future, for which damages are sought herein at the time of trial, pursuant to A.R.S. §12-613.

30. As a further direct and proximate result of Defendant's negligence, [REDACTED] was seriously injured. Plaintiff [REDACTED] has incurred reasonable and necessary medical expenses for her and [REDACTED]'s medical care and treatment.

31. As a further result of Defendant's negligence as described herein, Plaintiff [REDACTED] has suffered injury, pain, suffering, anxiety, emotional distress and loss of enjoyment of life.

COUNT II

(Product Liability – Design Defect)

32. Plaintiffs hereby incorporate by this reference each and every allegation contained in paragraphs 1 through 31 as though fully set forth herein again.

33. Defendant CHRYSLER GROUP, LLC is liable to Plaintiffs because of the defective and unreasonably dangerous design of the driver and passenger airbags, airbag crash sensing systems and frontal restraint systems in the 2008 Jeep Grande Cherokee.

34. As a direct and proximate result of Defendant's design, that is defective and unreasonably dangerous, of the subject vehicle's frontal airbag system, including but not limited to the airbag crash sensing system, and the front restraint system, as alleged herein, [REDACTED] suffered fatal injuries, and as a result thereof, the Plaintiffs and other wrongful death beneficiaries have been deprived of the care, companionship, protection,

1 love, affection and guidance of [REDACTED] and have suffered pain, grief, sorrow,
2 anguish, stress, shock and mental suffering, and will suffer such damages in the future, for
3 which damages will be sought herein at the time of trial, pursuant to A.R.S. §12-613.

4 35. As a further direct and proximate result of Defendant's unreasonably
5 dangerous and defective design of its restraint system, [REDACTED] was seriously
6 injured. Plaintiff [REDACTED] has incurred reasonable and necessary medical expenses
7 for her and [REDACTED]'s medical care and treatment.

8 36. As a further result of Defendant's design defects as described herein,
9 Plaintiff [REDACTED] has suffered injury, pain, suffering, anxiety, emotional distress
10 and loss of enjoyment of life.

11 **COUNT III**

12 **(Product Liability – Manufacturing Defect)**

13 37. Plaintiffs hereby incorporate by this reference each and every allegation
14 contained in paragraphs 1 through 36 as though fully set forth herein again.

15 38. Defendant CHRYSLER GROUP, LLC negligently manufactured the airbag,
16 airbag crash sensing and restraint systems in the 2008 Jeep Grande Cherokee, causing one
17 or more of those systems, the front driver and passenger restraint system in general and the
18 Vehicle in general to be unreasonably dangerous and defective.

19 39. As a direct and proximate result of Defendant's manufacturing defects, as
20 alleged herein, [REDACTED] suffered fatal injuries, and as a result thereof, the
21 Plaintiffs and other wrongful death beneficiaries have been deprived of the care,
22 companionship, protection, love, affection and guidance of [REDACTED] and have
23 suffered pain, grief, sorrow, anguish, stress, shock and mental suffering, and will suffer
24 such damages in the future, for which damages will be sought herein at the time of trial,
25 pursuant to A.R.S. §12-613.
26
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28

1 love, affection and guidance of [REDACTED] and have suffered pain, grief, sorrow,
2 anguish, stress, shock and mental suffering, and will suffer such damages in the future, for
3 which damages will be sought herein at the time of trial, pursuant to A.R.S. §12-613.

4 46. As a further direct and proximate result of Defendant's information defects,
5 [REDACTED] was seriously injured. Plaintiff [REDACTED] has incurred reasonable
6 and necessary medical expenses for her and [REDACTED] medical care and
7 treatment.

8 47. As a further result of Defendant's information defects as described herein,
9 Plaintiff [REDACTED] has suffered injury, pain, suffering, anxiety, emotional distress
10 and loss of enjoyment of life.

11 **COUNT V**

12 **(Negligence and/or Product Liability)**

13 48. Plaintiffs hereby incorporate by this reference each and every allegation
14 contained in paragraphs 1 through 47 as though fully set forth herein again.

15 49. The Vehicle at issue was sold, supplied and/or placed into the stream of
16 commerce by Defendant CHAPMAN AUTO CENTER, L.L.C., an automobile dealership located
17 in Maricopa County, State of Arizona.

18 50. Defendant CHAPMAN AUTO CENTER, L.L.C. is liable to Plaintiffs for
19 supplying and placing a defective and unreasonably dangerous product into the stream of
20 commerce.

21 51. As a direct and proximate result of Defendant CHAPMAN AUTO CENTER,
22 L.L.C.'s sale, supply and/or placement of the vehicle into the stream of commerce, [REDACTED]
23 [REDACTED] suffered fatal injuries, and as a result thereof, the Plaintiffs and other wrongful
24 death beneficiaries have been deprived of the care, companionship, protection, love,
25 affection and guidance of [REDACTED] and have suffered pain, grief, sorrow,
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1 anguish, stress, shock and mental suffering, and will suffer such damages in the future, for
2 which damages will be sought herein at the time of trial, pursuant to A.R.S. §12-613.

3 **52.** As a further direct and proximate result of CHAPMAN AUTO CENTER, L.L.C.'s
4 supply and/or placement of the vehicle into the stream of commerce as described herein,
5 LYDIA JOHNSON was seriously injured. Plaintiff [REDACTED] has incurred reasonable
6 and necessary medical expenses for his medical care and treatment as a result thereof.

7 **53.** As a further result of CHAPMAN AUTO CENTER, L.L.C.'s supply and/or
8 placement of the vehicle into the stream of commerce as described herein, Plaintiff [REDACTED]
9 [REDACTED] has suffered injury, pain, suffering, anxiety, emotional distress and loss of
10 enjoyment of life.

11 **WHEREFORE,** Plaintiffs pray for damages against all Defendants as follows:

12 **1.** For a sum that is reasonable and just as and for Plaintiffs and all other
13 wrongful death beneficiaries' damages incurred that are compensable under the Arizona
14 Wrongful Death Act, A.R.S. §12-611, et seq.

15 **2.** For all actual and consequential damages, economic and non-economic
16 damages, pain and suffering, medical expenses, including those for both [REDACTED]
17 and [REDACTED] cost of care, loss of enjoyment of life, lost support, lost
18 companionship, lost services and society, as well as the profound grief, anguish and
19 emotional distress for [REDACTED] [REDACTED] [REDACTED]

20 **3.** Plaintiffs pray for damages for injuries to LYDIA JOHNSON that would not
21 have been suffered if the Vehicle's airbags had deployed.

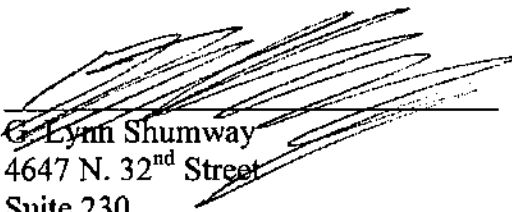
22 **4.** For costs and attorney's fees to the extent permitted by law.

23 **5.** For such other and further damages as may be awardable under the laws
24 applicable to this action.

25 **6.** For punitive damages against CHRYSLER GROUP, LLC.
26
27
28

DATED this 1st day of March, 2012.

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7 *Attorneys for Plaintiffs*

8 **In the Superior Court of the State of Arizona**
9 **In And For The County Of Maricopa**

10 *****

11 [REDACTED], individually and as surviving
12 wife of [REDACTED], deceased; and [REDACTED]

13 [REDACTED], married woman;

14 Plaintiffs,

15 vs.

16 CHRYSLER GROUP, LLC, a Delaware
17 corporation; CHAPMAN AUTO CENTER, L.L.C.,
18 an Arizona corporation; and JOHN DOE
19 ENTITIES I-X,

20 Defendants.

21 **CERTIFICATE ON**
22 **COMPULSORY ARBITRATION**

23 The undersigned certifies that he knows the dollar limits and any other
24 limitations set forth by the Local Rules of this Superior Court, and further certifies that this
25 case is not subject to compulsory arbitration, as provided by Rules 72 through 76 of the
26 Arizona Rules of Civil Procedure.

27 DATED this 1st day of March, 2012.

28 LAW OFFICE OF G. LYNN SHUMWAY


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IMPORTANT NOTICE: Robert Bosch LLC and the manufacturers whose vehicles are accessible using the CDR System urge end users to use the latest production release of the Crash Data Retrieval system software when viewing, printing or exporting any retrieved data from within the CDR program. Using the latest version of the CDR software is the best way to ensure that retrieved data has been translated using the most current information provided by the manufacturers of the vehicles supported by this product.

CDR File Information

User Entered VIN	1J8GR48K28[REDACTED]
User	mjr
Case Number	johnson
EDR Data Imaging Date	10/04/2012
Crash Date	04/09/2010
Filename	1J8GR48K28C[REDACTED].ACM.CDRX
Saved on	Thursday, October 4 2012 at 10:40:11
Collected with CDR version	Crash Data Retrieval Tool 6.0
Reported with CDR version	Crash Data Retrieval Tool 6.0
EDR Device Type	Airbag Control Module
Event(s) recovered	Most Recent Event

Comments

No comments entered.

Data Limitations

AIRBAG CONTROL MODULE (ACM) DATA LIMITATIONS:

GENERAL INFORMATION:

CAUTION: During Bench top imaging, make sure the ACM is not moved, tilted or turned over while connected to and powered by the CDR Interface Module. Also, after a CDR imaging process, wait 2 minutes after power is removed from the ACM before attempting to move the module. Not following these general ACM guidelines for bench top imaging could cause new events to be recorded in the ACM.

The ACM current fault status will be altered if the ACM is powered-up without having all of the other vehicle inputs connected (e.g., bench top imaging). This situation will occur when the CDR tool is connected directly to the ACM. This will not affect the stored fault data information in any of the Event Records. Always make a note in the CDR case comments section when an ACM bench top imaging process is being performed.

The recorded Event will contain Pre-Crash data.

- T0 (where '0' is subscript) (-0.1 sec.) is defined as either:
 - The last sample point in the vehicle data buffer when the ACM commanded a deployment
 - The algorithm wakeup.
 - Please note that the algorithm wakeup may be different for front, side, and roll-over events and their associated parameters.
- The VIN is captured by the ACM and then recorded as the Original VIN after 10 consecutive ignition cycles of capturing the same number. Once it has been recorded, this number cannot be modified.
- As the VIN may be used to determine the configuration of the restraint system, it is imperative that the correct VIN be entered into the CDR software during the imaging process.

CDR FILE INFORMATION:

Event(s) Recovered definitions:

- None - There are no stored events in the Airbag Control Module (ACM)
- Not Retrievable - Event Data may be stored in the ACM but is not retrievable by the CDR tool.
- For Continental ACMs:
 - Event Record 1 - Data from an event is stored in the ACM (not necessarily in chronological order)
 - Event Record 2 - Data from another event is stored in the ACM (not necessarily in chronological order)
 - Event Record 3 - Data from another event is stored in the ACM (not necessarily in chronological order) (for modules with 3 stored events)
- For all other ACMs:
 - Most Recent Event - Data of the most recent event is displayed in the report
 - 1st Prior Event - Two events are stored in the ACM, Data displayed is of the first prior event.
 - 2nd Prior Event - Three events are stored in the ACM, Data displayed is of the second prior event.
 - Etc., (for modules with 3 to 5 stored events)

CDR RECORD INFORMATION:

- The following table provides an explanation of the sign notation for data elements that may be included in this CDR report.

Data Element Name	Positive Sign Notation Indicates
Longitudinal Acceleration	Forward
Delta-V, Longitudinal	Forward
Maximum Delta-V, Longitudinal	Forward
Lateral Acceleration	Left to Right
Delta-V, Lateral	Left to Right
Maximum Delta-V, Lateral	Left to Right
Normal Acceleration	Upward
Vehicle Roll Angle	Left to Right Rotation

- If power to the ACM is lost during an event, all or part of the event data record may not be recorded. Two scenarios may be recorded under this condition:
- “None” may be displayed in the “Event(s) Recovered” section of the report indicating no pre-crash vehicle data.
- An event may be displayed in the “Event(s) Recovered” section of the report and “Interrupted” will be displayed for Vehicle Event Recorder Status.
- Note: For the 2010-2012 MY Dodge Journey, Dodge Grand Caravan, Chrysler Town and Country, and Chrysler Grand Voyager, “interrupted” in Vehicle Event Recorder Status/Event Recorder Status indicates either be a non-deployment event or an interrupted deployment event.
- For ACMs that store non-deployment events, the minimum delta V required to store an event is a delta V of 5 mph (8 km/h) within a 150 ms interval.
- Definitions for Data Blocks 1 - 7 and Overall Data Record Complete:
 - Crash Record (system status and DTCs)
 - NHTSA Table #1 Vehicle System data
 - NHTSA Table #1 Longitudinal delta-V
 - NHTSA Table #2 Vehicle System Data
 - NHTSA Table #2 Lateral delta-V - will be a NO if vehicle is not equipped with side sensing
 - ACM angular rate data - will be a NO if vehicle is not equipped with roll-over sensing
 - Other Vehicle System Data - Chrysler Specific Data
 Overall Data Record Complete - Yes, No is defined based on what the specific vehicle configuration. For example, a NO may be present for a non-applicable data block but a YES may be present for overall data record complete as all of the applicable data is complete.
- For non-NAFTA ACMs that control pedestrian protection devices, a non-deployment event will be also stored when the pedestrian protection devices are activated.
- The Airbag Control Module Configuration indicates the inputs and outputs that the ACM for a particular vehicle monitors and/or controls.
- “Event Number” in the System Status at Event section of the report:
 - Indicates the event number per vehicle ignition cycle for:
 - 2010 - 2012 Sebring, Avenger, Caliber, Nitro, Compass, Liberty, Patriot, Wrangler, and Ram
 - Indicates the overall order of the events for all other applicable vehicles.
- “Total Number of Events Recorded” in the System Status at Event section of the report:
 - Stops incrementing when each event record is recorded by the ACM for:
 - 2010 - 2012 Sebring, Avenger, Caliber, Nitro, Compass, Liberty, Patriot, Wrangler, and Ram
 - Indicates the total number of events that the ACM has recorded for all other applicable vehicles.
- “Operation System Time at Event (min)” in the System Status at Event section of the report is a lifetime timer for the ACM. It indicates the amount of time, over the ACM's lifetime that the ACM has been powered up.
- “Time from Event 1 to 2 (sec)” in the System Status at Event section of the report indicates the time from t0 of the first event to t0 of the second event. If the value is greater than 5 seconds, “>5” will be displayed.
- Active Head Restraint (AHR) - This refers to the active head restraint systems that are electronically controlled by the ACM.
- For applicable vehicles, a “Yes” for a particular item in the Deployment Command Data section of the report indicates that the ACM commanded the deployment of the associated device. Note: For 2010 MY vehicles equipped with AHR, the AHR deployment will not be recorded in the EDR.
- Vehicle Data (Pre-Crash) is transmitted to the Airbag Control Module, by various vehicle control modules, via the vehicle's communication network.
- On 2006-2009 Ram 2500/3500, the Engine RPM recorded is limited to a maximum of 4080 RPM. On the 2008 - 2010 Dodge Grand Caravan, 2008-2010 Chrysler Town and Country and 2009-2010 Dodge Journey, the engine RPM resolution is 256 rpm. On all other vehicles, the resolution is 32 rpm.
- If a recorded event has Engine RPM equal to SNA and Speed, Vehicle Indicated equals SNA for each time stamp, then the data is default data and the event stored in the ACM is not valid.
- The accuracy of the recorded Speed, Vehicle Indicated will be affected if the vehicle had the tire size or the final drive axle ratio changed from the factory build specifications.
- Speed, Vehicle Indicated is reported as an average of the drive wheels.
- On the 2008 - 2009 Dodge Grand Caravan, 2008-2009 Chrysler Town and Country and 2009 Dodge Journey, the vehicle speed resolution is 2 kph. On all other vehicles, the resolution is 1 kph.
- The MIL (Malfunction Indicator Lamp) Status for the various recorded systems indicates the state of the applicable malfunction indicator lamp at the time that the data was captured. Note: Some fault codes could be stored due to component/system damage from the accident.
- For correct polarity of Maximum Delta-V Longitudinal or Maximum Delta-V Lateral, reference the graph and the table of Delta-V values.
- On vehicles equipped with ETC, “Accelerator Pedal, % Full” and “Engine Throttle, % Full” are relative values - relative pedal position and

relative engine throttle. These parameters may record values of less than 100% when the pedal/throttle is actually at its maximum.

NOTE: The appropriate diagnostic tool should be used to read any stored Diagnostic Trouble Codes (DTC's) in the various electronic modules (ACM, PCM, ABS, TCM, etc., where applicable) for use in interpretation of some vehicle specific recorded data.

VEHICLE DATA DEFINITIONS:

Vehicle Event Recorder Status definitions:

- For additional definitions, please refer to the CDR Help File Glossary
- ABS MIL (if equip.) - This indicates the ABS fault indicator lamp status. It will only be "On" when there is a fault in the ABS system. The Electronic brake module DTC's should be read and recorded for final system interpretation.
- ESP MIL (if equip.) - This indicates the ESP/BAS fault indicator lamp status. It will only be "On" when there is a fault or thermal model shutdown in the ESP system. The ESP module DTC's should be read and recorded for final system interpretation.
- ESP Lamp (if equip.) - This is the status of the ESP symbol - "car with squiggly lines" indicator lamp. "On" indicates ESP has been turned off by the driver or has reduced performance and is not an indication of a fault in the system.
- ESP Lamp Flashing Requested (if equip.) - If "Yes", then an ESP, Traction Control or Trailer Sway Control (if equipped) event was active at the time of data capture.
- ESP Disabled (if equip.)- "Yes" indicates that ABS & ESP have been disabled by the driver or due to system performance.
- ESP Functional/Active (if equip.)- "YES" indicates that the ESP system is functional and has no faults.
- Panic Brake Assist Active (if equip.)- "Yes" indicates that all four of the brake circuits are under going ABS control.
- Steering Input (deg) (if equip.):
- Steering Input polarity is positive for right turns on:
 - o 2006 - 2007 Grand Cherokee
 - o 2006 - 2007 Commander
 - o 2005 - 2010 300, Magnum, and Charger
 - o 2008 - 2010 Challenger
- Steering Input polarity is negative for right turns on:
 - o All other vehicles and model years not specified above
- Yaw Rate (deg/sec) (if equip.): All vehicles have negative yaw rate when making a right turn.
- ETC Lamp - Lamp "ON" indicates there is an active Electronic Throttle DTC.
- ETC Lamp Flashing - If "Yes", then the ETC is in the limp-in mode.
- Engine Torque Applied - If "No", then no engine torque output was applied (as in Park/Neutral for Automatic transmissions or clutch depressed on manual or during an ESP/Traction Control event). If "Yes", then engine torque output was applied.
- Tire 1 (2) Location (if equip.)- This indicates the location of the tire pressure sensor data. Default is used to indicate that the location of the tire pressure sensor is unknown or there is no tire pressure sensor in the wheel. Vehicles with Base Tire Pressure Monitoring systems will display SNA for both Tire Locations as these vehicles do not send actual pressure values across the communication bus.
- Tire 1 (2) Pressure Status (if equip.)- This indicates the actual pressure status of the Tire Location defined in the previous column. Possible values are LOW, NORMAL, HIGH, or SNA for this parameter. Vehicles with Base Tire Pressure Monitoring systems will display NORMAL even though these vehicles do not send actual pressure values across the communication bus.
- Tire 1 (2) Pressure (psi) (if equip.)- This indicates the actual tire pressure value of the Tire Location defined. Vehicles with Base Tire Pressure Monitoring systems will display N/A for this parameter as these vehicles do not send actual pressure values across the communication bus.
- Cruise Control System - "On" indicates that the Cruise Control system is turned on.
- Cruise Control Active - "Yes" indicates the Cruise Control system is actively controlling vehicle speed. "No" indicates the system is NOT controlling vehicle speed.
- (if equip.) - If a parameter name is followed by the words (if equip.), then the parameter is only valid for vehicles equipped with the associated parameter/vehicle system.

APPLICATION INFORMATION:

- 2005 - 2009 Durango's equipped with side airbags have EDR data that can be imaged by the CDR tool. Durango's not equipped with side airbags have EDR Data that might be imaged by the CDR tool and can always be imaged by the supplier.
- For 2005 & 2006 MY, some Chrysler 300, Dodge Magnum, Dodge Charger, Jeep Grand Cherokee, and Jeep Commander models may contain EDR data that can not be imaged by the CDR tool.
- For 2006 & 2007 MY, some PT Cruiser models may contain EDR data that can not be imaged by the CDR tool.
- EDR Data is only recorded for frontal deployments in the following vehicles:
 - 2005-2007 Durango
 - 2006-2007 Ram 1500
 - 2006-2009 Ram 2500/3500 Heavy Duty
 - 2007 Aspen, Caliber, Compass, Patriot, Nitro, Sebring, Wrangler

03001_Chrysler_r012

System Status at Retrieval

Original VIN	1J8GR48K28C
Airbag Control Module Part Number	04896122AF
Airbag Control Module Serial Number	T52MD136802223
Airbag Control Module Supplier	Bosch

System Configuration at Retrieval

Configured for Driver Seatbelt Switch	No
Configured for Front Center Seatbelt Switch	No
Configured for Front Passenger Seatbelt Switch	No
Configured for 2nd Row Left Seatbelt Switch	No
Configured for 2nd Row Center Seatbelt Switch	No
Configured for 2nd Row Right Seatbelt Switch	No
Configured for 3rd Row Left Seatbelt Switch	No
Configured for 3rd Row Center Seatbelt Switch	No
Configured for 3rd Row Right Seatbelt Switch	No
Configured for Driver Knee Airbag	No
Configured for Left Curtain #1	Yes
Configured for Right Curtain #1	Yes
Configured for Left Curtain #2	No
Configured for Right Curtain #2	No
Configured for Front Driver Seatbelt Pretensioner	Yes
Configured for Front Center Seatbelt Pretensioner	No
Configured for Front Passenger Seatbelt Pretensioner	Yes
Configured for 2nd Row Left Seatbelt Pretensioner	No
Configured for 2nd Row Center Seatbelt Pretensioner	No
Configured for 2nd Row Right Seatbelt Pretensioner	No
Configured for 3rd Row Left Seatbelt Pretensioner	No
Configured for 3rd Row Center Seatbelt Pretensioner	No
Configured for 3rd Row Right Seatbelt Pretensioner	No
Configured for Left Side Sensor #1	Yes
Configured for Left Side Sensor #2	Yes
Configured for Left Side Sensor #3	No
Configured for Right Side Sensor #1	Yes
Configured for Right Side Sensor #2	Yes
Configured for Right Side Sensor #3	No
Configured for Left Up Front Sensor	Yes
Configured for Right Up Front Sensor	Yes
Configured for Front Driver Digressive Load Limiter	No
Configured for Front Passenger Digressive Load Limiter	No
Configured for Driver Seat Track Position Sensor	Yes
Configured for Front Passenger Seat Track Position Sensor	No
Configured for Driver Airbag Disable Switch	No
Configured for Passenger Airbag Disable Switch	No
Configured for Front Passenger Occupant Classification System	No
Configured for Right Side Thorax	No
Configured for Left Side Thorax	No
Configured for Passenger Knee Airbag	No
Configured for Passenger Belt Tension Sensor	No
Configured for Driver Belt Tension Sensor	No
Configured for Occupant Detection Sensor	No
Configured for DOC Disable Switch	No

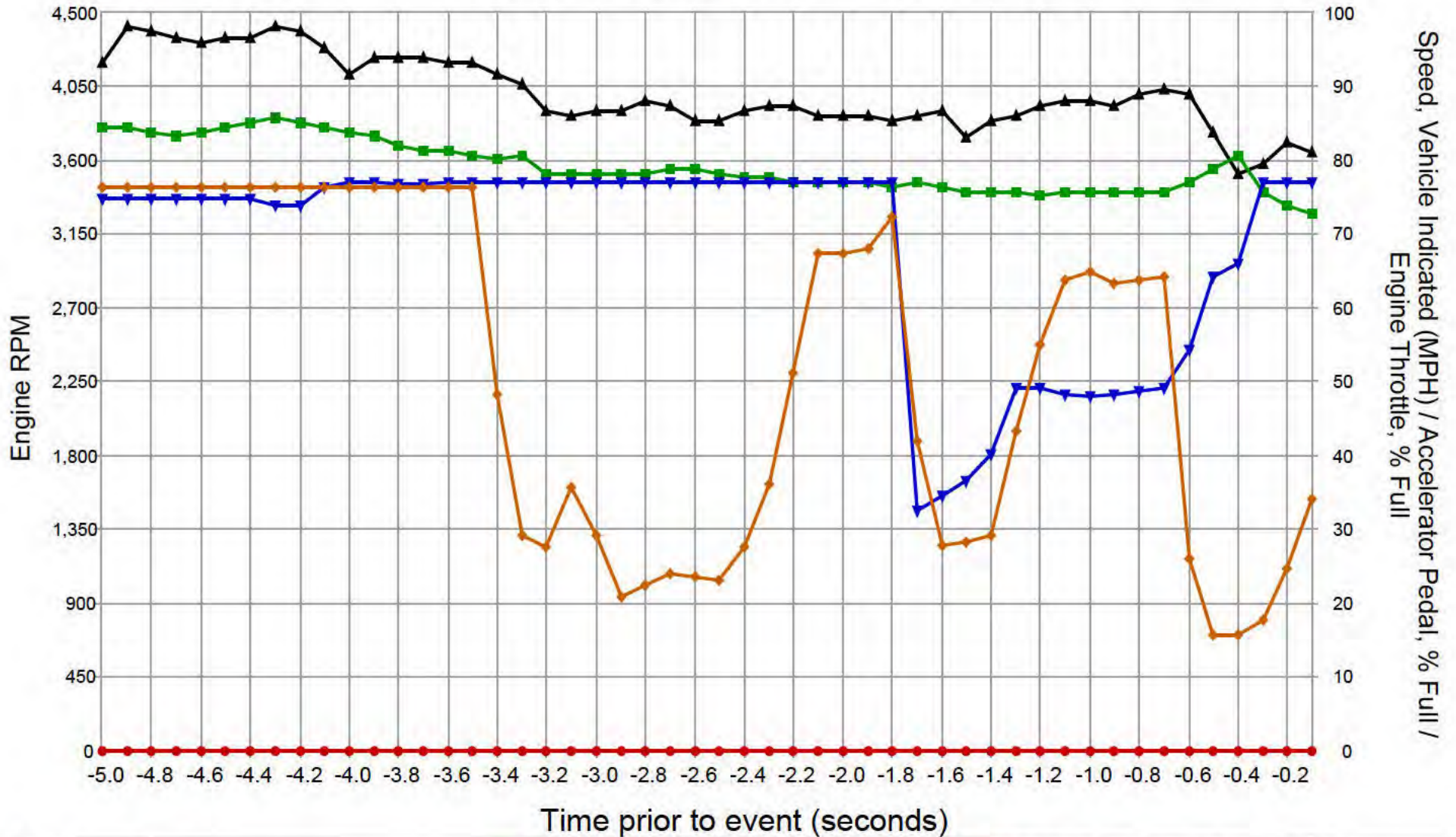
Longitudinal Crash Pulse (Most Recent Event)

Contains No Recorded data

Lateral Crash Pulse (Most Recent Event)

Contains No Recorded data

Pre-Crash Data (Most Recent Event)



▲ Engine RPM ■ Speed, Vehicle Indicated (MPH) ● Service Brake (0=Off/10=On)
 ▼ Accelerator Pedal, % Full ◆ Engine Throttle, % Full

Pre-Crash Data (Most Recent Event - table 1 of 5)

(the most recent sampled values are recorded prior to the event)

Time Stamp (sec)	Vehicle Event Recorder Status	Engine RPM	Speed, Vehicle Indicated (MPH [km/h])	Engine Throttle, % Full	Accelerator Pedal, % Full	Raw Manifold Pressure (kPa)	Service Brake	Brake Switch #2 Status	Brake Lamps On
-5.0	Complete	4,192	85 [136]	76.4	74.8	82	Off	Open	No
-4.9	Complete	4,416	85 [136]	76.4	74.8	82	Off	Open	No
-4.8	Complete	4,384	84 [135]	76.4	74.8	82	Off	Open	No
-4.7	Complete	4,352	83 [134]	76.4	74.8	82	Off	Open	No
-4.6	Complete	4,320	84 [135]	76.4	74.8	82	Off	Open	No
-4.5	Complete	4,352	85 [136]	76.4	74.8	82	Off	Open	No
-4.4	Complete	4,352	85 [137]	76.4	74.8	82	Off	Open	No
-4.3	Complete	4,416	86 [138]	76.4	74.0	82	Off	Open	No
-4.2	Complete	4,384	85 [137]	76.4	74.0	82	Off	Open	No
-4.1	Complete	4,288	85 [136]	76.4	76.4	82	Off	Open	No
-4.0	Complete	4,128	84 [135]	76.4	77.2	82	Off	Open	No
-3.9	Complete	4,224	83 [134]	76.4	77.2	82	Off	Open	No
-3.8	Complete	4,224	82 [132]	76.4	76.8	82	Off	Open	No
-3.7	Complete	4,224	81 [131]	76.4	76.8	82	Off	Open	No
-3.6	Complete	4,192	81 [131]	76.4	77.2	82	Off	Open	No
-3.5	Complete	4,192	81 [130]	76.4	77.2	82	Off	Open	No
-3.4	Complete	4,128	80 [129]	48.4	77.2	81	Off	Open	No
-3.3	Complete	4,064	81 [130]	29.1	77.2	74	Off	Open	No
-3.2	Complete	3,904	78 [126]	27.6	77.2	65	Off	Open	No
-3.1	Complete	3,872	78 [126]	35.8	77.2	75	Off	Open	No
-3.0	Complete	3,904	78 [126]	29.1	77.2	73	Off	Open	No
-2.9	Complete	3,904	78 [126]	20.9	77.2	57	Off	Open	No
-2.8	Complete	3,968	78 [126]	22.4	77.2	53	Off	Open	No
-2.7	Complete	3,936	79 [127]	24.0	77.2	57	Off	Open	No
-2.6	Complete	3,840	79 [127]	23.6	77.2	58	Off	Open	No
-2.5	Complete	3,840	78 [126]	23.2	77.2	58	Off	Open	No
-2.4	Complete	3,904	78 [125]	27.6	77.2	60	Off	Open	No
-2.3	Complete	3,936	78 [125]	36.2	77.2	74	Off	Open	No
-2.2	Complete	3,936	77 [124]	51.2	77.2	80	Off	Open	No
-2.1	Complete	3,872	77 [124]	67.3	77.2	82	Off	Open	No
-2.0	Complete	3,872	77 [124]	67.3	77.2	82	Off	Open	No
-1.9	Complete	3,872	77 [124]	68.1	77.2	83	Off	Open	No
-1.8	Complete	3,840	76 [123]	72.4	77.2	82	Off	Open	No
-1.7	Complete	3,872	77 [124]	42.1	32.7	82	Off	Open	No
-1.6	Complete	3,904	76 [123]	28.0	34.6	68	Off	Open	No
-1.5	Complete	3,744	76 [122]	28.3	36.6	64	Off	Open	No
-1.4	Complete	3,840	76 [122]	29.1	40.2	67	Off	Open	No
-1.3	Complete	3,872	76 [122]	43.3	49.2	79	Off	Open	No
-1.2	Complete	3,936	75 [121]	55.1	49.2	82	Off	Open	No
-1.1	Complete	3,968	76 [122]	63.8	48.4	82	Off	Open	No
-1.0	Complete	3,968	76 [122]	65.0	48.0	82	Off	Open	No
-0.9	Complete	3,936	76 [122]	63.4	48.4	82	Off	Open	No
-0.8	Complete	4,000	76 [122]	63.8	48.8	82	Off	Open	No
-0.7	Complete	4,032	76 [122]	64.2	49.2	82	Off	Open	No
-0.6	Complete	4,000	77 [124]	26.0	54.3	72	Off	Open	No
-0.5	Complete	3,776	79 [127]	15.7	64.2	48	Off	Open	No
-0.4	Complete	3,520	81 [130]	15.7	66.1	42	Off	Open	No
-0.3	Complete	3,584	76 [122]	17.7	77.2	48	Off	Open	No
-0.2	Complete	3,712	74 [119]	24.8	77.2	56	Off	Open	No
-0.1	Complete	3,648	73 [117]	34.3	77.2	72	Off	Open	No

Pre-Crash Data (Most Recent Event - table 2 of 5)

(the most recent sampled values are recorded prior to the event)

Time Stamp (sec)	Panic Brake Assist Active (if equip.)	ABS MIL (if equip.)	ESP MIL (if equip.)	ESP Lamp (if equip.)	ESP Lamp Flashing Requested (if equip.)	ESP Disabled (if equip.)	ESP Active (if equip.)
-5.0	No	Off	Off	Off	Yes	No	Yes
-4.9	No	Off	Off	Off	Yes	No	Yes
-4.8	No	Off	Off	Off	Yes	No	Yes
-4.7	No	Off	Off	Off	Yes	No	Yes
-4.6	No	Off	Off	Off	Yes	No	Yes
-4.5	No	Off	Off	Off	Yes	No	Yes
-4.4	No	Off	Off	Off	Yes	No	Yes
-4.3	No	Off	Off	Off	No	No	Yes
-4.2	No	Off	Off	Off	Yes	No	Yes
-4.1	No	Off	Off	Off	Yes	No	Yes
-4.0	No	Off	Off	Off	Yes	No	Yes
-3.9	No	Off	Off	Off	Yes	No	Yes
-3.8	No	Off	Off	Off	Yes	No	Yes
-3.7	No	Off	Off	Off	Yes	No	Yes
-3.6	No	Off	Off	Off	Yes	No	Yes
-3.5	No	Off	Off	Off	Yes	No	Yes
-3.4	No	Off	Off	Off	Yes	No	Yes
-3.3	No	Off	Off	Off	Yes	No	Yes
-3.2	No	Off	Off	Off	Yes	No	Yes
-3.1	No	Off	Off	Off	Yes	No	Yes
-3.0	No	Off	Off	Off	Yes	No	Yes
-2.9	No	Off	Off	Off	Yes	No	Yes
-2.8	No	Off	Off	Off	Yes	No	Yes
-2.7	No	Off	Off	Off	Yes	No	Yes
-2.6	No	Off	Off	Off	Yes	No	Yes
-2.5	No	Off	Off	Off	Yes	No	Yes
-2.4	No	Off	Off	Off	Yes	No	Yes
-2.3	No	Off	Off	Off	Yes	No	Yes
-2.2	No	Off	Off	Off	Yes	No	Yes
-2.1	No	Off	Off	Off	Yes	No	Yes
-2.0	No	Off	Off	Off	Yes	No	Yes
-1.9	No	Off	Off	Off	Yes	No	Yes
-1.8	No	Off	Off	Off	Yes	No	Yes
-1.7	No	Off	Off	Off	Yes	No	Yes
-1.6	No	Off	Off	Off	Yes	No	Yes
-1.5	No	Off	Off	Off	Yes	No	Yes
-1.4	No	Off	Off	Off	Yes	No	Yes
-1.3	No	Off	Off	Off	Yes	No	Yes
-1.2	No	Off	Off	Off	Yes	No	Yes
-1.1	No	Off	Off	Off	Yes	No	Yes
-1.0	No	Off	Off	Off	Yes	No	Yes
-0.9	No	Off	Off	Off	Yes	No	Yes
-0.8	No	Off	Off	Off	Yes	No	Yes
-0.7	No	Off	Off	Off	Yes	No	Yes
-0.6	No	Off	Off	Off	Yes	No	Yes
-0.5	No	Off	Off	Off	Yes	No	Yes
-0.4	No	Off	Off	Off	Yes	No	Yes
-0.3	No	Off	Off	Off	Yes	No	Yes
-0.2	No	Off	Off	Off	Yes	No	Yes
-0.1	No	Off	Off	Off	Yes	No	Yes

Pre-Crash Data (Most Recent Event - table 3 of 5)

(the most recent sampled values are recorded prior to the event)

Time Stamp (sec)	Steering Input (deg) (if equip.)	Yaw Rate (deg/sec) (if equip.)	Wheel Speed LF (RPM) (if equip.)	Wheel Speed RF (RPM) (if equip.)	Wheel Speed LR (RPM) (if equip.)	Wheel Speed RR (RPM) (if equip.)
-5.0	-50	-7	987	995	961	1,001
-4.9	-50	-9	996	1,003	958	1,001
-4.8	-52	-11	995	1,011	951	1,001
-4.7	-55	-11	992	1,000	948	1,006
-4.6	-55	-10	998	998	966	1,014
-4.5	-52	-11	990	1,005	958	1,030
-4.4	-49	-15	994	1,015	973	1,039
-4.3	-49	-19	990	1,030	979	1,023
-4.2	-53	-22	956	1,033	970	1,017
-4.1	-63	-20	899	1,048	932	1,007
-4.0	-63	-9	877	1,020	945	993
-3.9	-38	-7	942	1,013	931	1,002
-3.8	-22	-6	952	1,037	929	955
-3.7	-24	-10	948	1,039	918	966
-3.6	-28	-11	948	1,036	914	977
-3.5	-28	-8	929	1,050	923	953
-3.4	-27	-1	923	1,087	844	956
-3.3	-18	0	929	1,024	795	956
-3.2	-11	1	926	840	857	947
-3.1	-10	-4	929	741	881	963
-3.0	-18	-9	929	909	887	934
-2.9	-21	-14	898	925	915	918
-2.8	-3	-16	890	919	923	913
-2.7	7	-15	863	928	913	919
-2.6	4	-7	725	923	904	944
-2.5	19	1	895	892	884	922
-2.4	40	0	902	898	894	913
-2.3	33	5	900	899	896	908
-2.2	24	16	895	857	894	912
-2.1	24	16	892	885	893	903
-2.0	12	7	892	893	895	900
-1.9	0	-3	896	889	901	877
-1.8	-5	-27	891	882	897	887
-1.7	-10	-12	883	907	893	909
-1.6	-11	0	891	951	882	896
-1.5	-7	4	881	872	883	886
-1.4	-7	2	882	869	881	884
-1.3	-10	-3	880	870	883	883
-1.2	-4	-8	884	879	882	881
-1.1	-3	-6	880	882	886	882
-1.0	8	-2	873	882	884	867
-0.9	25	-1	889	886	888	889
-0.8	28	0	884	919	880	862
-0.7	22	-2	873	985	885	912
-0.6	24	-3	764	1,064	915	931
-0.5	14	-5	431	1,137	951	945
-0.4	-1	-4	532	915	999	921
-0.3	-7	-3	727	846	846	876
-0.2	-15	0	768	830	808	833
-0.1	-18	-12	817	794	880	875

Pre-Crash Data (Most Recent Event - table 4 of 5)

(the most recent sampled values are recorded prior to the event)

Time Stamp (sec)	ETC Lamp (if equip.)	ETC Lamp Flashing (if equip.)	Engine Torque Applied	Shift Gear Position (if equip.)	Cruise Control System	Cruise Control Active
-5.0	Off	No	Yes	Drive	Off	No
-4.9	Off	No	Yes	Drive	Off	No
-4.8	Off	No	Yes	Drive	Off	No
-4.7	Off	No	Yes	Drive	Off	No
-4.6	Off	No	Yes	Drive	Off	No
-4.5	Off	No	Yes	Drive	Off	No
-4.4	Off	No	Yes	Drive	Off	No
-4.3	Off	No	Yes	Drive	Off	No
-4.2	Off	No	Yes	Drive	Off	No
-4.1	Off	No	Yes	Drive	Off	No
-4.0	Off	No	Yes	Drive	Off	No
-3.9	Off	No	Yes	Drive	Off	No
-3.8	Off	No	Yes	Drive	Off	No
-3.7	Off	No	Yes	Drive	Off	No
-3.6	Off	No	Yes	Drive	Off	No
-3.5	Off	No	Yes	Drive	Off	No
-3.4	Off	No	Yes	Drive	Off	No
-3.3	Off	No	Yes	Drive	Off	No
-3.2	Off	No	Yes	Drive	Off	No
-3.1	Off	No	Yes	Drive	Off	No
-3.0	Off	No	Yes	Drive	Off	No
-2.9	Off	No	Yes	Drive	Off	No
-2.8	Off	No	Yes	Drive	Off	No
-2.7	Off	No	Yes	Drive	Off	No
-2.6	Off	No	Yes	Drive	Off	No
-2.5	Off	No	Yes	Drive	Off	No
-2.4	Off	No	Yes	Drive	Off	No
-2.3	Off	No	Yes	Drive	Off	No
-2.2	Off	No	Yes	Drive	Off	No
-2.1	Off	No	Yes	Drive	Off	No
-2.0	Off	No	Yes	Drive	Off	No
-1.9	Off	No	Yes	Drive	Off	No
-1.8	Off	No	Yes	Drive	Off	No
-1.7	Off	No	Yes	Drive	Off	No
-1.6	Off	No	Yes	Drive	Off	No
-1.5	Off	No	Yes	Drive	Off	No
-1.4	Off	No	Yes	Drive	Off	No
-1.3	Off	No	Yes	Drive	Off	No
-1.2	Off	No	Yes	Drive	Off	No
-1.1	Off	No	Yes	Drive	Off	No
-1.0	Off	No	Yes	Drive	Off	No
-0.9	Off	No	Yes	Drive	Off	No
-0.8	Off	No	Yes	Drive	Off	No
-0.7	Off	No	Yes	Drive	Off	No
-0.6	Off	No	Yes	Drive	Off	No
-0.5	Off	No	Yes	Drive	Off	No
-0.4	Off	No	Yes	Drive	Off	No
-0.3	Off	No	Yes	Drive	Off	No
-0.2	Off	No	Yes	Drive	Off	No
-0.1	Off	No	Yes	Drive	Off	No

Pre-Crash Data (Most Recent Event - table 5 of 5)

(the most recent sampled values are recorded prior to the event)

Time Stamp (sec)	Tire Pressure Monitor Faults (if equip.)	Tire 1 Location (if equip.)	Tire 1 Pressure Status (if equip.)	Tire 1 Pressure (psi) (if equip.)	Tire 2 Location (if equip.)	Tire 2 Pressure Status (if equip.)	Tire 2 Pressure (psi) (if equip.)
-5.0	No	LR	Normal	37	RR	Normal	40
-4.9	No	LR	Normal	37	RR	Normal	40
-4.8	No	LR	Normal	37	RR	Normal	40
-4.7	No	LR	Normal	37	RR	Normal	40
-4.6	No	LF	Normal	38	RF	Normal	38
-4.5	No	LF	Normal	38	RF	Normal	38
-4.4	No	LF	Normal	38	RF	Normal	38
-4.3	No	LF	Normal	38	RF	Normal	38
-4.2	No	LF	Normal	38	RF	Normal	38
-4.1	No	LF	Normal	38	RF	Normal	38
-4.0	No	LF	Normal	38	RF	Normal	38
-3.9	No	LF	Normal	38	RF	Normal	38
-3.8	No	LF	Normal	38	RF	Normal	38
-3.7	No	LF	Normal	38	RF	Normal	38
-3.6	No	LR	Normal	37	RR	Normal	40
-3.5	No	LR	Normal	37	RR	Normal	40
-3.4	No	LR	Normal	37	RR	Normal	40
-3.3	No	LR	Normal	37	RR	Normal	40
-3.2	No	LR	Normal	37	RR	Normal	40
-3.1	No	LR	Normal	37	RR	Normal	40
-3.0	No	LR	Normal	37	RR	Normal	40
-2.9	No	LR	Normal	37	RR	Normal	40
-2.8	No	LR	Normal	37	RR	Normal	40
-2.7	No	LR	Normal	37	RR	Normal	40
-2.6	No	LF	Normal	38	RF	Normal	38
-2.5	No	LF	Normal	38	RF	Normal	38
-2.4	No	LF	Normal	38	RF	Normal	38
-2.3	No	LF	Normal	38	RF	Normal	38
-2.2	No	LF	Normal	38	RF	Normal	38
-2.1	No	LF	Normal	38	RF	Normal	38
-2.0	No	LF	Normal	38	RF	Normal	38
-1.9	No	LF	Normal	38	RF	Normal	38
-1.8	No	LF	Normal	38	RF	Normal	38
-1.7	No	LF	Normal	38	RF	Normal	38
-1.6	No	LR	Normal	37	RR	Normal	40
-1.5	No	LR	Normal	37	RR	Normal	40
-1.4	No	LR	Normal	37	RR	Normal	40
-1.3	No	LR	Normal	37	RR	Normal	40
-1.2	No	LR	Normal	37	RR	Normal	40
-1.1	No	LR	Normal	37	RR	Normal	40
-1.0	No	LR	Normal	37	RR	Normal	40
-0.9	No	LR	Normal	37	RR	Normal	40
-0.8	No	LR	Normal	37	RR	Normal	40
-0.7	No	LR	Normal	37	RR	Normal	40
-0.6	No	LF	Normal	39	RF	Normal	38
-0.5	No	LF	Normal	39	RF	Normal	38
-0.4	No	LF	Normal	39	RF	Normal	38
-0.3	No	LF	Normal	39	RF	Normal	38
-0.2	No	LF	Normal	39	RF	Normal	38
-0.1	No	LF	Normal	39	RF	Normal	38

Hexadecimal Data

Data that the vehicle manufacturer has specified for data retrieval is shown in the hexadecimal data section of the CDR report. The hexadecimal data section of the CDR report may contain data that is not translated by the CDR program. The control module contains additional data that is not retrievable by the CDR system.

5A 87 02 03 03 03 80 00 00 0E 31 00 30 34 38 39 36 31 32 32 41 46

5A 88 31 4A 38 47 52 34 38 4B 32 38 43 32 33 37 32 34 30

5A 90 31 4A 38 47 52 34 38 4B 32 38 43 32 33 37 32 34 30

61 0D FF

61 E1 54 35 32 4D 44 31 33 36 38 30 32 32 32 33

61 EA 00 98 02 DB C0 91 40

71 02 01 00 CC 01 72 75 11 C6 D5 C6 E0 C6 62 C6 34 7B 19 00 80 00 00 01 72 8D E9 74 5A 57 C4 C0
00 44 01 01 27 02 26 00 FF 01 0F DB 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00

71 02 01 01 CC 01 74 77 11 C6 82 C6 4F C5 FF C6 7B 7F BE 00 80 00 00 01 59 A5 E9 74 46 3F C4 C0
01 44 01 01 27 02 26 00 FF 01 0F E1 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00

71 02 01 02 CC 01 70 7A 11 C6 D8 C6 9B C5 AD C6 9B 7E B5 00 80 00 00 01 48 B7 E9 74 3C 2D C4 C0
01 44 01 01 27 02 26 00 FF 01 0F F2 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00

71 02 01 03 CC 01 6E 82 11 C7 31 C7 CE C4 28 C7 26 7E 0E 00 80 00 00 01 43 BC CB 65 34 28 A8 C0
00 44 01 01 27 02 26 00 FF 01 0F FD 00

71 02 01 04 CC 01 76 7F 11 C7 62 C7 6D C3 5E C8 E2 7E 00 00 80 00 00 01 42 BC C3 61 3C 28 A3 C0
00 44 01 01 27 02 26 00 FF 01 10 1C 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00

71 02 01 05 CC 01 7D 7C 11 C7 45 C7 26 C5 F8 C8 50 7E C6 00 80 00 00 01 5C A2 AD 55 5A 42 8A C0
00 44 01 01 27 02 26 00 FF 01 10 30 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00

71 02 01 06 CC 01 7E 7A 11 C7 20 C6 E9 C6 D1 C7 B1 7E D6 00 80 00 00 01 BD 42 9E 4E 67 A3 7D C0
00 44 01 03 25 04 28 00 FF 01 10 2D 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00

71 02 01 07 CC 01 7D 7A 11 C6 BB C6 DF C6 E8 C7 2D 7F CE 00 80 00 00 01 BC 43 9C 4D 67 A2 7C C0
00 44 01 03 25 04 28 00 FF 01 10 38 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00

71 02 01 08 CC 01 7B 7A 11 C6 F2 C6 F0 C6 F2 C6 EB 7F 5B 00 80 00 00 01 BC 43 9C 4D 66 A1 7B C0
00 44 01 03 25 04 28 00 FF 01 10 32 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00

71 02 01 09 CC 01 7C 7A 11 C6 C5 C6 E7 C6 D1 C6 E4 7F 18 00 80 00 00 01 BF 3F 9B 4D 67 A5 7A C0
00 44 01 03 25 04 28 00 FF 01 10 11 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00

71 02 01 0A CC 01 7C 7A 11 C6 E4 C6 EB C6 DF C6 E4 7D 5B 00 80 00 00 01 BD 42 9B 4C 67 A2 7B C0
00 44 01 03 25 04 28 00 FF 01 0F FA 00

71 02 01 0B CC 01 7B 79 11 C6 E1 C6 E4 C6 E8 C6 DE 7C A5 00 80 00 00 01 A6 59 9D 4D 66 8C 7D C0
00 44 01 03 25 04 28 00 FF 01 0F F7 00

71 02 01 0C CC 01 79 7A 11 C6 E6 C6 E5 C6 DF C6 CC 7E 73 00 80 00 00 01 88 76 9D 4E 63 6E 7D C0
00 44 01 03 25 04 28 00 FF 01 0F EC 00

71 02 01 0D CC 01 78 7A 11 C6 E7 C6 E2 C6 E3 C6 C9 81 28 00 80 00 00 01 64 9A 8B 45 54 4A 66 C0
00 44 01 03 25 04 28 00 FF 01 0F F2 00

71 02 01 0E CC 01 75 7A 11 C6 EB C6 E6 C6 E1 C6 CF 81 DD 00 80 00 00 01 62 9C 7B 3D 50 48 5D C0
00 44 01 03 25 04 28 00 FF 01 0F F2 00

71 02 01 0F CC 01 7A 7B 11 C6 FF C6 E3 C6 F6 C7 6D 7F CE 00 80 00 00 01 61 9D 7F 3F 55 47 58 C0
00 44 01 03 25 04 28 00 FF 01 0F E9 00


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71 02 01 26 CC 01 84 86 11 C7 D4 C7 46 C7 5C C7 E9 7C F8 00 80 00 00 01 DC 22 E4 71 67 C2 C4 C0
01 44 01 01 26 02 26 00 FF 01 0F B4 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00

71 02 01 27 CC 01 81 87 11 C7 C1 C7 62 C6 DA C7 F8 7C 73 00 80 00 00 01 DC 22 E5 72 67 C2 C4 C0
00 44 01 01 26 02 26 00 FF 01 0F 81 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00

71 02 01 28 CC 01 86 88 11 C7 DD C7 48 C7 06 C8 2F 78 21 00 80 00 00 01 DC 22 E3 71 67 C2 C2 C0
00 44 01 01 26 02 26 00 FF 01 0F 81 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00

71 02 01 29 CC 01 89 89 11 C7 F2 C7 94 C7 77 C8 12 77 4A 00 80 00 00 01 DC 22 DD 6E 67 C2 BC C0
00 44 01 01 26 02 26 00 FF 01 0F 95 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00

71 02 01 2A CC 01 8A 8A 01 C7 FE C7 A6 C7 BC C8 0B 78 84 00 80 00 00 01 DC 22 DD 6E 67 C2 BC C0
00 44 01 01 26 02 26 00 FF 01 0F 9D 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00

71 02 01 2B CC 01 88 89 11 C8 1D C7 99 C7 C4 C7 EE 7A 00 00 80 00 00 01 DC 22 DE 6E 67 C2 BE C0
00 44 01 01 26 02 26 00 FF 01 0F 9D 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00

71 02 01 2C CC 01 88 88 11 C8 0B C7 7B C7 BB C7 D9 7B 8C 00 80 00 00 01 DC 22 DE 6F 67 C2 BE C0
00 44 01 01 26 02 26 00 FF 01 0F 98 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00

71 02 01 2D CC 01 87 87 11 C7 EC C7 8C C7 CC C7 CC 7B CE 00 80 00 00 01 DC 22 DF 6F 67 C2 BE C0
00 44 01 01 26 02 26 00 FF 01 0F 92 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00

71 02 01 2E CC 01 88 86 11 C7 DC C7 68 C7 C0 C7 D0 7B 8C 00 80 00 00 01 DC 22 DF 6F 67 C2 BE C0
00 44 01 03 25 04 28 00 FF 01 0F 92 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00

71 02 01 2F CC 01 89 87 11 C7 D2 C7 6E C7 C5 C7 E5 7B 8C 00 80 00 00 01 DD 22 DF 6F 67 C2 BE C0
00 44 01 03 25 04 28 00 FF 01 0F 98 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00

71 02 01 30 CC 01 8A 88 11 C7 D1 C7 7C C7 C8 C7 D5 7C 31 00 80 00 00 01 DD 22 DF 6F 67 C2 BE C0
00 44 01 03 25 04 28 00 FF 01 0F 9B 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00

71 02 01 31 CC 01 83 88 11 C7 D2 C7 82 C7 B5 C7 C6 7D 29 00 80 00 00 01 DD 22 DF 6F 66 C2 BE C0
00 44 01 03 25 04 28 00 FF 01 0F 9B 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00

71 02 FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF
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71 02 FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF
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71 02 FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF
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71 02 FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF
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71 02 FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF
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71 02 FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF
FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF

71 02 FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF
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4 Phoenix, Arizona 85018-3345
5 Telephone : 602.795.3720
6 Facsimile : 602.795.3728

7 *Attorneys for Plaintiffs*

8 **In the Superior Court of the State of Arizona**
9 **In And For The County Of Gila**

10 *****

11 [REDACTED] individually and as surviving
12 wife of [REDACTED], deceased; and [REDACTED]
13 [REDACTED] a married woman;

No. [REDACTED]

14 Plaintiffs,

15 vs.

16 **AMENDED**
17 **COMPLAINT**

18 **CHRYSLER GROUP LLC**, a Delaware
19 corporation; **ROBERT BOSCH GMBH**, a foreign
20 corporation; **ROBERT BOSCH LLC**, a Delaware
21 corporation; **CHAPMAN AUTO CENTER, L.L.C.**,
22 an Arizona corporation; and **JOHN DOE**
23 **ENTITIES I-X**,

(Tort: Motor Vehicle; Wrongful Death)

24 Defendants.

25 Plaintiffs, [REDACTED] hereby submit their Complaint against
26 Defendants, as follows:

27 1. Plaintiff [REDACTED] is a resident of the County of Gila, State of Arizona.
28 She is the wife of decedent [REDACTED] whose wrongful death on April 10, 2010 is
the subject of this action.

2. Plaintiff [REDACTED] is a married woman, residing in the County of Gila,
State of Arizona, and is the surviving daughter of [REDACTED]

3. Plaintiffs bring this action on behalf of themselves and all wrongful death
beneficiaries of decedent [REDACTED], pursuant to the Arizona Wrongful Death Act,

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1 A.R.S. §12-611, et seq.

2 4. At all times relevant herein, Defendant CHRYSLER GROUP LLC was and is a
3 corporation incorporated under the laws of the State of Delaware, with a principal place of
4 business in Auburn Hills, Michigan.

5 5. Defendant CHRYSLER GROUP LLC is duly licensed and authorized to do
6 business in the State of Arizona. Defendant CHRYSLER GROUP LLC has purposefully
7 directed its business activities toward the State of Arizona.
8

9 6. Plaintiffs are informed and believe, and thereupon allege, that at all times
10 relevant herein, Defendant ROBERT BOSCH GMBH is a foreign corporation authorized to do
11 business in the State of Arizona, which caused events herein complained of to occur in
12 Gila County, Arizona. Defendant ROBERT BOSCH GMBH is the supplier of automotive
13 safety systems, including airbag crash sensing components and systems, in Motor
14 Vehicles, including the vehicle at issue in the present lawsuit.

15 7. Plaintiffs are informed and believe, and thereupon allege, that at all times
16 relevant herein, Defendant ROBERT BOSCH LLC is a Delaware corporation authorized to do
17 business in the State of Arizona, which caused events herein complained of to occur in
18 Gila County, Arizona. Defendant ROBERT BOSCH LLC is the supplier of automotive safety
19 systems, including airbag crash sensing components and systems, in Motor Vehicles,
20 including the vehicle at issue in the present lawsuit.

21 8. Defendant CHAPMAN AUTO CENTER, L.L.C. is an Arizona corporation,
22 engaged in the business of maintaining, selling, leasing and distributing automobiles in
23 Gila County, State of Arizona.

24 9. Defendant CHAPMAN AUTO CENTER, L.L.C., by selling the subject Jeep
25 Cherokee to Plaintiffs, put the vehicle into the stream of commerce with knowledge of the
26 defects in the subject Jeep Cherokee's airbag system, or with knowledge from which a
27 reasonable distributor of Jeep Cherokees should have known of the defects in the subject
28

1 Jeep Cherokee's front occupant restraint system, including but not limited to the vehicle's
2 driver and passenger airbag system.

3 10. At all times relevant herein, Defendants JOHN DOES ENTITIES 1-10 were
4 corporations, partnerships, limited liability companies, or other organizations and entities
5 who, upon information and belief, operate in and have substantial ties to Maricopa County,
6 State of Arizona. Said Defendants have, upon information and belief, helped to cause the
7 injuries alleged herein. The true names of JOHN DOE ENTITIES 1-10 are not presently
8 known but will be provided to this Court as they are learned.
9

10 11. This Court has jurisdiction of the parties and subject matter, and venue is
11 proper in this court.
12

13 12. On or about the 9th day of April, 2010, [REDACTED] was the driver and
14 Plaintiff [REDACTED] the passenger of a 2008 Jeep Grand Cherokee Laredo, VIN No.
15 1J8GR48K28C [REDACTED] (the "Vehicle"), manufactured by Defendant CHRYSLER GROUP
16 LLC.
17

18 13. The airbag crash sensing system components in the Vehicle were primarily
19 manufactured, assembled and/or distributed by Defendants CHRYSLER GROUP LLC, ROBERT
20 BOSCH GMBH and ROBERT BOSCH LLC .
21

22 14. Driver and passenger airbag systems with inflation and restraint features
23 substantially similar to those in the Vehicle, when they are deployed timely in frontal
24 collisions, are effective in reducing the severity of minor to severe injuries to front seat
25 passengers, compared to expected injuries without airbag deployment to similar occupants
26 in similar crash events, when the passenger's trajectory, during the collision event, takes
27
28

1 the driver and passenger into the middle section of the deployed driver and passenger
2 airbags during such frontal collision events.

3 15. On or about April 9, 2010, at approximately 3:07 p.m., [REDACTED]
4 and [REDACTED] were traveling southbound on [REDACTED] outside the City of
5 Payson, Gila County, State of Arizona.

6 16. South of [REDACTED].1, the Vehicle experienced a “must fire” severity
7 frontal collision with a tree, but the front airbags of the Vehicle failed to deploy or
8 otherwise provide the protection the Vehicle’s frontal airbags should have provided to
9 [REDACTED]

10 17. As a proximate result of the airbag system defects causing the frontal airbags
11 to not deploy, [REDACTED] suffered fatal injuries and Plaintiff [REDACTED]
12 suffered serious and severe injuries.

13 18. If the frontal airbags had timely deployed during the “must fire” severity
14 collision, [REDACTED] would not have sustained serious or severe injuries during the
15 “must fire” frontal collision.

16 19. If the frontal airbags had timely deployed during the “must fire” severity
17 collision, [REDACTED] would not have sustained fatal injuries.

18 20. If the frontal airbags had timely deployed during the “must fire” severity
19 collision, [REDACTED] would not have sustained serious or severe injuries during the
20 “must fire” frontal collision.

21 21. The subject collision was a severe longitudinal frontal collision for the
22 [REDACTED] Vehicle and required the Vehicle’s frontal airbag crash sensing system to order a
23 timely airbag deployment during that “must fire” frontal collision.

1 whole or in part by said Defendants.

2 **30.** Defendants CHRYSLER GROUP LLC, ROBERT BOSCH GMBH and ROBERT BOSCH
3 LLC breached this duty of care by, among other things:

- 4 **a.** Designing an unreasonably dangerous airbag crash sensing system
5 (and its components) in the 2008 Jeep Grande Cherokee airbag
6 system.
7
- 8 **b.** Negligently designing the structure of the crush zone that fails to
9 properly signal the severity of the crash to the sensing system in the
10 2008 Jeep Grande Cherokee airbag system.
- 11 **c.** Negligently designing the airbag sensor placement, number of
12 discriminating sensors and location of the sensors in the 2008 Jeep
13 Grande Cherokee airbag crash sensing system.
- 14 **d.** Negligently designing the crash signal path to the crash sensor or
15 sensors in the 2008 Jeep Grande Cherokee airbag system.
- 16 **e.** Negligently designing the airbag warning system for the 2008 Jeep
17 Grande Cherokee airbag system.
- 18 **f.** Negligently failing to adequately test the performance of the airbag
19 crash sensing system in the 2008 Jeep Grande Cherokee airbag system
20 for the foreseeable crashes with objects, including collisions like the
21 present “must fire” frontal collision.
- 22 **g.** Negligently failing to timely seek, through its suppliers, or timely
23 specify to its suppliers development of a sensing system to operate a
24 two-stage or multiple level airbag inflation system.
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- h. Negligently failing to timely seek development either internally or through its suppliers or to specify to its suppliers multiple stage airbag inflators for use in the 2008 Jeep Grande Cherokee.
- i. Negligently manufacturing the airbag crash sensing system in the 2008 Jeep Grande Cherokee in a way that caused it to malfunction and not deploy in a collision that was in the must fire range according to CHRYSLER's, BOSCH's and automotive industry standards.
- j. Negligently committing other acts in connection with their design and/or manufacture of the subject 2008 Jeep Grande Cherokee crash sensing and/or airbag inflation systems which will be identified in the course of discovery.
- k. Negligently failing to provide adequate instructions or warnings about the Vehicle's airbag system.

31. As a direct and proximate result of Defendant's negligence as alleged herein, [REDACTED] suffered fatal injuries, and as a result thereof, the Plaintiffs and other wrongful death beneficiaries have been deprived of the care, companionship, protection, love, affection and guidance of [REDACTED] and have suffered pain, grief, sorrow, anguish, stress, shock and mental suffering, and will suffer such damages in the future, for which damages are sought herein at the time of trial, pursuant to A.R.S. §12-613.

32. As a further direct and proximate result of Defendant's negligence, [REDACTED] was seriously injured. Plaintiff [REDACTED] has incurred reasonable and necessary medical expenses for her and [REDACTED] medical care and treatment.

33. As a further result of Defendant's negligence as described herein, Plaintiff [REDACTED] has suffered injury, pain, suffering, anxiety, emotional distress and loss of enjoyment of life.

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COUNT II

(Product Liability – Design Defect)

34. Plaintiffs hereby incorporate by this reference each and every allegation contained in paragraphs 1 through 33 as though fully set forth herein again.

35. Defendants CHRYSLER GROUP LLC, ROBERT BOSCH GMBH and ROBERT BOSCH LLC are liable to Plaintiffs because of the defective and unreasonably dangerous design of the driver and passenger airbags, airbag crash sensing systems and frontal restraint systems in the 2008 Jeep Grande Cherokee.

36. As a direct and proximate result of Defendants' design, that is defective and unreasonably dangerous, of the subject vehicle's frontal airbag system, including but not limited to the airbag crash sensing system, and the front restraint system, as alleged herein, [REDACTED] suffered fatal injuries, and as a result thereof, the Plaintiffs and other wrongful death beneficiaries have been deprived of the care, companionship, protection, love, affection and guidance of [REDACTED] and have suffered pain, grief, sorrow, anguish, stress, shock and mental suffering, and will suffer such damages in the future, for which damages will be sought herein at the time of trial, pursuant to A.R.S. §12-613.

37. As a further direct and proximate result of Defendant's unreasonably dangerous and defective design of its restraint system, [REDACTED] was seriously injured. Plaintiff [REDACTED] has incurred reasonable and necessary medical expenses for her and [REDACTED] medical care and treatment.

38. As a further result of Defendant's design defects as described herein, Plaintiff [REDACTED] has suffered injury, pain, suffering, anxiety, emotional distress and loss of enjoyment of life.

COUNT III

(Product Liability – Manufacturing Defect)

1 45. As a proximate result of Defendants CHRYSLER GROUP LLC, ROBERT BOSCH
2 GMBH and ROBERT BOSCH LLC's failure to give Plaintiffs adequate warnings or instructions
3 on, with or about the Jeep Grande Cherokee airbag system involved in the subject accident,
4 the Jeep Grande Cherokee was defective and unreasonably dangerous for use in the
5 reasonably foreseeable way the vehicle was being used at the time of the subject accident.

7 46. Defendants CHRYSLER GROUP LLC, ROBERT BOSCH GMBH and ROBERT BOSCH
8 LLC knew, or should have known, that the subject Jeep Grande Cherokee would be used in
9 the way it was used by the JOHNSON's on the day of the accident described above.
10 Defendants CHRYSLER GROUP LLC, ROBERT BOSCH GMBH and ROBERT BOSCH LLC knew
11 that the product, without the adequate warnings or instructions, would be defective and
12 unreasonably dangerous.
13

14 47. As a direct and proximate result of the information defects as alleged herein,
15 [REDACTED] suffered fatal injuries, and as a result thereof, the Plaintiffs and other
16 wrongful death beneficiaries have been deprived of the care, companionship, protection,
17 love, affection and guidance of [REDACTED] and have suffered pain, grief, sorrow,
18 anguish, stress, shock and mental suffering, and will suffer such damages in the future, for
19 which damages will be sought herein at the time of trial, pursuant to A.R.S. §12-613.
20

21 48. As a further direct and proximate result of Defendant's information defects,
22 [REDACTED] was seriously injured. Plaintiff [REDACTED] has incurred reasonable
23 and necessary medical expenses for her and [REDACTED] medical care and
24 treatment.

25 49. As a further result of Defendant's information defects as described herein,
26 Plaintiff [REDACTED] has suffered injury, pain, suffering, anxiety, emotional distress
27 and loss of enjoyment of life.

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COUNT V

(Negligence and/or Product Liability)

50. Plaintiffs hereby incorporate by this reference each and every allegation contained in paragraphs 1 through 49 as though fully set forth herein again.

51. The Vehicle at issue was sold, supplied and/or placed into the stream of commerce by Defendant CHAPMAN AUTO CENTER, L.L.C., an automobile dealership located in Maricopa County, State of Arizona.

52. Defendant CHAPMAN AUTO CENTER, L.L.C. is liable to Plaintiffs for supplying and placing a defective and unreasonably dangerous product into the stream of commerce.

53. As a direct and proximate result of Defendant CHAPMAN AUTO CENTER, L.L.C.'s sale, supply and/or placement of the vehicle into the stream of commerce, [REDACTED] suffered fatal injuries, and as a result thereof, the Plaintiffs and other wrongful death beneficiaries have been deprived of the care, companionship, protection, love, affection and guidance of [REDACTED] and have suffered pain, grief, sorrow, anguish, stress, shock and mental suffering, and will suffer such damages in the future, for which damages will be sought herein at the time of trial, pursuant to A.R.S. §12-613.

54. As a further direct and proximate result of CHAPMAN AUTO CENTER, L.L.C.'s supply and/or placement of the vehicle into the stream of commerce as described herein, LYDIA JOHNSON was seriously injured. Plaintiff [REDACTED] has incurred reasonable and necessary medical expenses for his medical care and treatment as a result thereof.

55. As a further result of CHAPMAN AUTO CENTER, L.L.C.'s supply and/or placement of the vehicle into the stream of commerce as described herein, Plaintiff [REDACTED] has suffered injury, pain, suffering, anxiety, emotional distress and loss of enjoyment of life.

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Phoenix, Arizona 85018-3345
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WHEREFORE, Plaintiffs pray for damages against all Defendants as follows:

1. For a sum that is reasonable and just as and for Plaintiffs and all other wrongful death beneficiaries' damages incurred that are compensable under the Arizona Wrongful Death Act, A.R.S. §12-611, et seq.

2. For all actual and consequential damages, economic and non-economic damages, pain and suffering, medical expenses, including those for both [REDACTED] and [REDACTED], cost of care, loss of enjoyment of life, lost support, lost companionship, lost services and society, as well as the profound grief, anguish and emotional distress for [REDACTED] and [REDACTED]

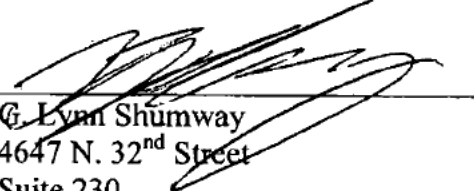
3. Plaintiffs pray for damages for injuries to [REDACTED] that would not have been suffered if the Vehicle's airbags had deployed.

4. For costs and attorney's fees to the extent permitted by law.

5. For such other and further damages as may be awardable under the laws applicable to this action.

DATED this 16 day of May, 2012.

LAW OFFICE OF G. LYNN SHUMWAY


G. Lynn Shumway
4647 N. 32nd Street
Suite 230
Phoenix, Arizona 85018
Attorneys for Plaintiffs

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COPY of the foregoing mailed
this 16 day of May, 2012,
to:

Negatu Molla
MONROE MCDONOUGH, ET AL.
4578 N. 1st Ave., Suite 160
Tucson, Arizona 85718
Attorneys for CHRYSLER GROUP

William A. Nebeker
John H. Kline
KOELLER NEBEKER, ET AL.
3200 N. Central Ave., Suite 2300
Phoenix, Arizona 85012
Attorneys for CHAPMAN AUTO CENTER



ADOT USE ONLY

ARIZONA CRASH REPORT		REPORT ID				Agency Report Number		Total No. of Sheets
1 POLICE ONLY - FORWARD COPY TO: ADOT TRAFFIC RECORDS SECTION 064R 206 S. 17TH AVE., PHOENIX, ARIZONA 85007-3233		YEAR	MONTH	DAY	HOUR	NCIC NO.	OFFICER ID NO.	15
		2010	04	09	15:07	0799	6393	

COMPLETE THE TRUCK/BUS SUPPLEMENT IF ANY (circle) AND ANY (diamond) ARE CHECKED

2 Total Units	3 Total Injuries	4 Total Fatalities	1 Estimated Total Damage Compared to Limit	<input type="checkbox"/> Over <input type="checkbox"/> Under	<input type="checkbox"/> Fatal <input type="checkbox"/> Hit / Run Unit #	<input checked="" type="checkbox"/> Persons Transported for Immediate Medical Care?	<input type="checkbox"/> Tow-away at least (one) vehicle from scene?	District or Grid No. 1101
3 LOCATION		On Highway/Road/Street		City		County		
SR-97		SR-97		Payson		Gila		
Intersecting Street, Road / M.P. or R.P.		<input type="checkbox"/> At <input type="checkbox"/> From 249.1		<input type="checkbox"/> North <input type="checkbox"/> South <input type="checkbox"/> Plus <input type="checkbox"/> East <input type="checkbox"/> West <input type="checkbox"/> Minus		Distance		<input type="checkbox"/> Measured <input type="checkbox"/> Miles <input checked="" type="checkbox"/> Approximate <input type="checkbox"/> Feet

Safety Device (SD)		Air Bag Status (ABS)		Injury Severity (IS)		Injured (Transported By)	
0 - Not Applicable	4 - Child Restraint System	0 - Not Applicable	4 - Deployed Other (knee, etc.)	1 - No Injury	5 - Fatal Injury	0 - Not Transported	97 - Other
1 - None Used	5 - Helmet Used	1 - Not Deployed	5 - Deployed - Combination	2 - Possible Injury	99 - Not Reported / Unknown	1 - EMS	99 - Unknown
2 - Lap Belt	6 - Other	2 - Deployed - Front	6 - Airbag Switch OFF	3 - Non Incapacitating Injury		2 - Law Enforcement	
3 - Shoulder & Lap Belt	99 - Unknown	3 - Deployed - Side	99 - Unknown	4 - Incapacitating Injury			

Ejection (Eject)	Extraction (Extr)	Direction of Travel (DoT) Before 1st Crash Event	Lane	Roadway Grade	Roadway Alignment	Seating Position
0 - Not Applicable	0 - Not Applicable	N - Northbound NW - Northwest	0 - Two-way Centered Left Turn	1 - Level	1 - Straight	18 - Front Seat - Other (Child in Lap)
1 - Not Ejected	1 - Extracted	S - Southbound NE - Northeast	1 - 9 thru (1 = Median)	2 - Downhill	2 - Curve Left	28 or 38 - Additional passenger in vehicle by row
2 - Ejected, Partially	99 - Unknown	E - Eastbound SW - Southwest	10 - Crosswalk	3 - Uphill	3 - Curve Right	51 - In enclosed or cargo area
3 - Ejected, Totally		W - Westbound SE - Southeast	L1 thru L4 - Left Turn (L1 = Median)	4 - Hillcrest	99 - Unknown	52 - In enclosed passenger / cargo area
4 - Unknown Degree		99 - Unknown	R1 thru R4 - Right Turn (R1 = Median)	5 - Sag (bottom)		55 - Riding on Vehicle Exterior
99 - Unknown			B1 - Bike Lane	99 - Unknown		99 - Unknown
			HOV - High Occupancy Vehicle			
			97 - Non-Roadway			
			99 - Unknown			

State	Class	End	<input type="checkbox"/> DL# <input type="checkbox"/> SSN <input type="checkbox"/> BOTH	<input type="checkbox"/> Driver/Driverless <input type="checkbox"/> Pedestrian <input type="checkbox"/> Pedalcyclist	Name (First, Middle, Last)	Sex
AZ	D				[REDACTED]	M
<input type="checkbox"/> No License / Permit		Restrictions		City		State
				Tonto Basin		AZ
Date of Birth		<input type="checkbox"/> Same as Driver		Owner/Carrier Name		Address
				[REDACTED]		City
				[REDACTED]		State
				[REDACTED]		Zip Code
Plate Number		State	Year	Body Style	Make	Color
[REDACTED]		AZ	1991	PU	Chev	Red
VIN		Trailer (Other Unit) Plate No.		State	Year	Description of Trailer or Other Unit
1GCCS14A7M		N/A				N/A
SD	ABS	IS	Trans	Eject	Extr	DoT
3	0	4	1	0	1	S
Removed to		<input type="checkbox"/> Disabled <input type="checkbox"/> Not Disabled		Removed by		Orders of
Tonto Basin				Four Peaks - Reg.		Driver
Insurance Company		Telephone Number (w/AC)		Policy Number		Name of Policy Holder
Dairyland Insurance		Unknown		[REDACTED]		[REDACTED]
						Eff. Date
						Exp. Date
						03/10/10
						04/10/10

State	Class	End	<input type="checkbox"/> DL# <input type="checkbox"/> SSN <input type="checkbox"/> BOTH	<input type="checkbox"/> Driver/Driverless <input type="checkbox"/> Pedestrian <input type="checkbox"/> Pedalcyclist	Name (First, Middle, Last)	Sex
<input type="checkbox"/> No License / Permit		Restrictions		City		State
						Zip Code
Date of Birth		<input type="checkbox"/> Same as Driver		Owner/Carrier Name		Address
				[REDACTED]		City
				[REDACTED]		State
				[REDACTED]		Zip Code
Plate Number		State	Year	Body Style	Make	Color
[REDACTED]						
VIN		Trailer (Other Unit) Plate No.		State	Year	Description of Trailer or Other Unit
[REDACTED]						
SD	ABS	IS	Trans	Eject	Extr	DoT
Removed to		<input type="checkbox"/> Disabled <input type="checkbox"/> Not Disabled		Removed by		Orders of
Insurance Company		Telephone Number (w/AC)		Policy Number		Name of Policy Holder
						Eff. Date
						Exp. Date

5 PASSENGERS	Unit No.	Seat Pos.	Saf. Dev.	ABS	IS	Trans	Eject	Extr	Name	Address	City	State	Zip Code	D.O.B. (MM/DD/YY)	Sex

6 Property Damaged (Other than Vehicles) Block 22B, Event 21 - 41)	Owner Code (OC)	1 - Private	2 - Public Utility (APS, etc.)	3 - Federal Government	4 - State of Arizona	5 - County in Arizona	6 - City in Arizona	7 - Tribal Nation	99 - Unknown	Inventory Tag No.
										No tag
4 Owner's Name	Address (or Bar Code ID Number)		City	State	Zip Code	Telephone No. w/Area Code				
AZ DOT	200 N. Colcord		Payson	AZ	85541	(928) 474-5911				

7 Photo Taken	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Photographer's Name	C. Dimbat	I.D. Number	5596	Agency	AZ DPS	Investigation at Scene	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date Investigated	04/09/2010	Time Investigated	15:15
Officer's Signature	J. Harold		Badge No.	6393	Supervisor's Signature	X	Badge No.	5701	Agency	AZ DPS	Date Completed	2010/04/15	

ARIZONA CRASH REPORT **ADOT USE ONLY** **REPORT ID**

1 POLICE ONLY - FORWARD COPY TO: ADOT TRAFFIC RECORDS SECTION 064R
296 S. 17th AVE., PHOENIX, ARIZONA 85007-3233

YEAR MONTH DAY: 2010/04/09
 HOUR: 15:07
 NCIC NO.: 0799
 OFFICER ID NO.: 6393

Agency Report Number: [Redacted]
 Total No. of Sheets: [Redacted]

COMPLETE THE TRUCK/BUS SUPPLEMENT IF ANY (circle) AND ANY (diamond) ARE CHECKED

Total Units: 3
 Total Injuries: 4
 Total Fatalities: 1
 Estimated Total Damage Compared to Limit: [Redacted]
 Over Under

Fatal Hit / Run Unit # [Redacted]

Persons Transported for Immediate Medical Care? Tow/Away at Least One Vehicle from Scene? District or Grid No. 1101

3 LOCATION

On Highway/Road/Street: [Redacted]
 Intersecting Street, Road / M.P. or R.P.: [Redacted]
 At From [Redacted]

Inside City Outside Payson
 North South Plus Distance Measured Miles
 East West Minus Approximate Feet

Safety Device (SD)
 0 - Not Applicable
 1 - None Used
 2 - Lap Belt
 3 - Shoulder & Lap Belt
 4 - Child Restraint System
 5 - Helmet Used
 6 - Other
 99 - Unknown

Air Bag Status (ABS)
 0 - Not Applicable
 1 - Not Deployed
 2 - Deployed - Front
 3 - Deployed - Side
 4 - Deployed Other (knee, etc.)
 5 - Deployed - Combination
 6 - Airbag Switch OFF
 99 - Unknown

Injury Severity (IS)
 1 - No Injury
 2 - Possible Injury
 3 - Non Incapacitating Injury
 4 - Incapacitating Injury
 5 - Fatal Injury
 99 - Not Reported / Unknown

Injured (Transported) By
 0 - Not Transported
 1 - EMS
 2 - Law Enforcement
 97 - Other
 99 - Unknown

Ejection (Eject)
 0 - Not Applicable
 1 - Not Ejected
 2 - Ejected, Partially
 3 - Ejected, Totally
 4 - Unknown Degree
 99 - Unknown

Extraction (Extr)
 0 - Not Applicable
 1 - Extracted
 99 - Unknown

Direction of Travel (DoT) Before 1st Crash Event
 N - Northbound NW - Northwest
 S - Southbound NE - Northeast
 E - Eastbound SW - Southwest
 W - Westbound SE - Southeast
 99 - Unknown

Lane
 0 - Two-way Continuous Left Turn
 1 - 9 thru (1 = Median)
 10 - Crosswalk
 L1 thru L4 - Left Turn (L1 = Median)
 R1 thru R4 - Right Turn (R1 = Median)
 BL - Bike Lane
 HDV - High Occupancy Vehicle
 N7 - Non-Roadway
 99 - Unknown

Roadway Grade
 1 - Level
 2 - Downhill
 3 - Uphill
 4 - Hillcrest
 5 - Sag (bottom)
 99 - Unknown

Roadway Alignment
 1 - Straight
 2 - Curve Left
 3 - Curve Right
 99 - Unknown

Seating Position
 31 21 11
 32 22 12 55
 33 23 13
 38 28 18
 18 - Front Seat - Other (Child in Lap)
 28 or 38 - Additional passenger in vehicle by row
 51 - In enclosed or cargo area
 52 - In unenclosed passenger / cargo area
 55 - Riding on Vehicle Exterior
 99 - Unknown

4 TRAFFIC UNIT NO. 1

State: AZ Class: D End: [Redacted] DL# [Redacted] SSN [Redacted] BOTH [Redacted]
 Driver/Driverless Pedestrian Pedalcyclist
 Name (First, Middle, Last): [Redacted] Sex: M

Restrictions: A Address: [Redacted] City: Tonto Basin State: AZ Zip Code: [Redacted] Telephone Number (w/Area Code): [Redacted]

Same as Driver: [Redacted] Owner/Carrier Name: [Redacted] Address: [Redacted] City: [Redacted] State: [Redacted] Zip Code: [Redacted]

Plate Number: [Redacted] State: AZ Year: 2008 Body Style: SW4D Make: Jeep Color: Slv Agency Use: [Redacted]

VIN: 1J8GR48K28C237240 Trailer (Other Unit) Plate No.: N/A State: [Redacted] Year: [Redacted] Description of Trailer or Other Unit: N/A
 G.V.W. (Registered) of Power Unit Greater than 10k pounds? Yes No HazMat Placard? Yes No

SD: 3 ABS: 1 IS: 5 Trans: 1 Eject: 0 Extr: 0 DoT: S Lane: 3 Grade: 2 Alignment: 3 Posted Speed Limit: 65 Officer Est. Speed: 70
 Transmitted To: Scottsdale Osborn Med. Ctr.

Removed to: LaForge Towing Disabled Not Disabled Removed by: LaForge Towing Orders of: AZ DPS
 Incident Number: 28312

Insurance Company: Crabtree Insurance Telephone Number (w/AC): (928) 474-2265 Eff. Date: 06/18/09 Exp. Date: 06/18/10

4 TRAFFIC UNIT NO. 2

State: AZ Class: D End: [Redacted] DL# [Redacted] SSN [Redacted] BOTH [Redacted]
 Driver/Driverless Pedestrian Pedalcyclist
 Name (First, Middle, Last): Travis Scott Magill Sex: M

Restrictions: [Redacted] Address: [Redacted] City: Payson State: AZ Zip Code: [Redacted] Telephone Number (w/Area Code): [Redacted]

Same as Driver: [Redacted] Owner/Carrier Name: [Redacted] Address: [Redacted] City: [Redacted] State: [Redacted] Zip Code: [Redacted]

Plate Number: [Redacted] State: AZ Year: 1999 Body Style: PU Make: Ford Color: Whi Agency Use: [Redacted]

VIN: 1FTNX21F8XED89161 Trailer (Other Unit) Plate No.: N/A State: [Redacted] Year: [Redacted] Description of Trailer or Other Unit: N/A
 G.V.W. (Registered) of Power Unit Greater than 10k pounds? Yes No HazMat Placard? Yes No

SD: 3 ABS: 1 IS: 1 Trans: 0 Eject: 0 Extr: 0 DoT: S Lane: 3 Grade: 2 Alignment: 3 Posted Speed Limit: 65 Officer Est. Speed: 60
 Transmitted To: N/A

Removed to: Service Disabled Not Disabled Removed by: Driver/Owner Orders of: Driver/Owner
 EMS I.D.: N/A Incident Number: N/A

Insurance Company: American Family Telephone Number (w/AC): (623) 876-1793 Name of Policy Holder: Anson Magill
 Eff. Date: 12/22/09 Exp. Date: 12/22/10

5 PASSENGERS

Unit No.	Seat Pos.	Saf. Dev.	ABS	IS	Trans	Eject	Extr	Name	Address	City	State	Zip Code	D.O.B. (MM/DDYY)	Sex
1	13	3	3	4	1	0	1	[Redacted]	[Redacted]	Tonto Basin	AZ	[Redacted]	[Redacted]	F
3	13	4	0	3	1	0	0	[Redacted]	[Redacted]	Tonto Basin	AZ	[Redacted]	[Redacted]	M

6 Property Damaged (Other than Vehicles) Block 22B, Event 21 - 41

Owner Code: 1 - Private 2 - Public Utility (APS, etc.) 3 - Federal Government 4 - State of Arizona 5 - County in Arizona 6 - City in Arizona 7 - Tribal Nation 99 - Unknown
 Inventory Tag No.: No tag

Owner's Name: [Redacted] Address (or Bar Code ID Number): [Redacted] City: Payson State: AZ Zip Code: [Redacted] Telephone Number (w/Area Code): [Redacted]

7 Photo Taken Yes No
 Officer's Signature: C. Dimbat
 Badge No.: 5596 Agency: AZ DPS
 Investigation at Scene: Yes No
 Date Investigated: 04/09/2010 Time Investigated: 15:15
 Officer's Signature: J. Harold
 Badge No.: 6393 Supervisor's Signature: X [Redacted]
 Badge No.: 5701 Agency: AZ DPS
 Date Completed: 2010/04/15

20100749
 8
 CITATION CHARGES

WITNESSES
 [Redacted]

City Peoria State AZ Zip Code [Redacted] Telephone No. w/Area Code [Redacted] Date of Birth [Redacted]
 Payson AZ [Redacted]

Unit No.	A.R.S. No. or City Code

Unit No. 1	Unit No. 2	SEQUENCE OF EVENTS
44	9	FIRST EVENT
45		SECOND EVENT
9		THIRD EVENT
33		FOURTH EVENT
33	9	MOST HARMFUL EVENT BY VEHICLE (Use Codes 1 to 49 ONLY)
ENTER FIRST HARMFUL EVENT OF CRASH (Use Codes 1 to 41 ONLY)		9

22B - CRASH EVENTS
FIRST HARMFUL, MOST HARMFUL AND SEQUENCE OF
NON-COLLISION
1 OVERTURN / ROLLOVER
2 FIRE / EXPLOSION
3 IMMERSION
4 JACKKNIFE
5 CARGO / EQUIPMENT LOSS / SHIFT
6 FELL / JUMPED FROM VEHICLE
7 THROWN OR FALLING OBJECT
8 OTHER NON-COLLISION
COLLISION WITH NON-FIXED OBJECT
9 MOTOR VEHICLE IN TRANSPORT
10 PEDESTRIAN
11 PEDALCYCLE
12 RAILWAY VEHICLE (TRAIN, ENGINE)
13 LIGHT RAILWAY / RAILCAR VEHICLE
14 ANIMAL, WILD - NON GAME
15 ANIMAL, WILD - GAME
16 ANIMAL - PET
17 ANIMAL - LIVESTOCK
18 PARKED MOTOR VEHICLE
19 WORK ZONE / MAINTENANCE EQUIPMENT
20 OTHER NON-FIXED OBJECT
COLLISION WITH FIXED OBJECT
21 IMPACT ATTENUATOR / CRASH CUSHION
22 BRIDGE / OVERHEAD STRUCTURE
23 BRIDGE RAIL
24 CULVERT
25 CURB
26 DITCH
27 EMBANKMENT
28 GUARDRAIL FACE
29 GUARDRAIL END
30 CONCRETE TRAFFIC BARRIER
31 CABLE TRAFFIC BARRIER
32 OTHER TRAFFIC BARRIER
33 TREE, BUSH, STUMP (STANDING)
34 TRAFFIC SIGN SUPPORT
35 TRAFFIC SIGNAL SUPPORT
36 UTILITY POLE / LIGHT SUPPORT
37 OTHER POST, POLE, OR SUPPORT
38 FENCE
39 MAILBOX
40 BUILDING
41 OTHER FIXED OBJECT
ADDITIONAL SEQUENCE EVENTS
42 EQUIPMENT FAILURE (TIRE, BRAKE, ETC.)
43 SEPARATION OF UNITS
44 RAN OFF ROAD, RIGHT
45 RAN OFF ROAD, LEFT
46 CROSS MEDIAN
47 CROSS CENTERLINE
48 DOWNHILL RUNAWAY
49 STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY ANOTHER VEHICLE
99 UNKNOWN

CHECK ONLY ONE OR ONE BLOCK PER UNIT UNLESS NOTED

- 10 - LIGHT CONDITION**
- 1 DAYLIGHT
 - 2 DAWN
 - 3 DUSK
 - 4 DARK, LIGHTED
 - 5 DARK, NOTLIGHTED
 - 6 DARK, UNKNOWN LIGHTING

- 11 - WEATHER CONDITIONS**
- 1 CLEAR
 - 2 CLOUDY
 - 3 SLEET / HAIL (freezing rain / drizzle)
 - 4 RAIN
 - 5 SNOW
 - 6 SEVERE CROSSWINDS
 - 7 BLOWING SAND, SOIL DIRT
 - 8 FOG, SMOG, SMOKE
 - 9 BLOWING SNOW
 - 97 OTHER
 - 99 UNKNOWN

- 12 - ROAD SURFACE CONDITIONS**
- 1 DRY
 - 2 WET
 - 3 SNOW
 - 4 SLUSH
 - 5 ICE / FROST
 - 6 WATER (standing, moving)
 - 7 SAND
 - 8 MUD, DIRT, GRAVEL
 - 9 OIL
 - 97 OTHER
 - 99 UNKNOWN

- 13 - RELATED TO JUNCTION**
- 0 NOT JUNCTION RELATED
 - 1 JUNCTION NON-INTERCHANGE AREA
 - 2 INTERSECTION
 - 3 ENTRANCE / EXIT RAMP
 - 4 RAILWAY GRADE CROSSING
 - 5 CROSSOVER - RELATED
 - 6 FRONTAGE ROAD
 - 7 DRIVEWAY
 - 8 ALLEY - ACCESS - RELATED
 - 9 OTHER NON-INTERCHANGE
 - 10 UNKNOWN NON-INTERCHANGE
 - 11 JUNCTION INTERCHANGE AREA
 - 12 THRU ROADWAY
 - 13 INTERSECTION - RELATED
 - 14 ENTRANCE / EXIT RAMP
 - 15 FRONTAGE ROAD
 - 16 OTHER PART OF INTERCHANGE
 - 17 UNKNOWN INTERCHANGE
 - 18 UNKNOWN JUNCTION
 - 99 UNKNOWN

- 14 - TYPE OF INTERSECTION**
- 0 NOT AT INTERSECTION
 - 1 FOUR-WAY INTERSECTION
 - 2 T-INTERSECTION
 - 3 Y-INTERSECTION
 - 4 INTERSECTION AS PART OF INTERCHANGE
 - 5 TRAFFIC CIRCLE
 - 6 ROUNDABOUT
 - 7 FIVE-POINT, OR MORE
 - 99 UNKNOWN

- 15 - TRAFFIC WAY DESCRIPTION**
- 1 ONE-WAY TRAFFICWAY
 - 2 TWO-WAY, NOT DIVIDED
 - 3 TWO-WAY, NOT DIVIDED WITH A CONTINUOUS LEFT TURN LANE
 - 4 TWO-WAY, DIVIDED, UNPROTECTED (painted > 4 feet) MEDIAN
 - 5 TWO-WAY, DIVIDED POSITIVE MEDIAN BARRIER
 - 99 UNKNOWN

- 16 - TRAFFIC CONTROL DEVICE**
- UNIT #
- 0 NO CONTROLS
 - 1 SIGNAL
 - 2 STOP SIGN
 - 3 YIELD SIGN
 - 4 WARNING SIGN
 - 5 RAILROAD CROSSING DEVICE
 - 6 FLASHING TRAFFIC SIGNAL
 - 7 PERSON (law enforcement, crossing guard, flagger, etc.)
 - 97 OTHER
 - 99 UNKNOWN

- 17 - MANNER OF CRASH IMPACT**
- 1 SINGLE VEHICLE
 - 2 ANGLE (front to side) SAME DIRECTION
 - 3 ANGLE (front to side) OPPOSITE DIRECTION
 - 4 ANGLE (front to side) RIGHT ANGLE
 - 5 ANGLE - DIRECTION NOT SPECIFIED
 - 6 REAR END (front to rear)
 - 7 HEAD-ON (front to front)
 - 8 SIDESWIPE, SAME DIRECTION
 - 9 SIDESWIPE, OPPOSITE DIRECTION
 - 10 REAR-TO-SIDE
 - 11 REAR-TO-REAR
 - 97 OTHER
 - 99 UNKNOWN

- 18 - CONTRIBUTING CIRCUMSTANCES**
- UP TO TWO CHOICES PER UNIT
- UNIT #

- 0 NO CONTRIBUTING CIRCUMSTANCES
- 1 ENVIRONMENTAL
 - 1 GLARE
 - A. SUNLIGHT
 - B. HEADLIGHTS
 - 2 PHYSICAL OBSTRUCTION(S)
 - A. STOPPED / PARKED VEHICLE
 - B. MOVING VEHICLE
 - C. LOAD ON VEHICLE
 - D. TREE / SHRUB / BUSH
 - E. EMBANKMENT
- 2 ROAD
 - 3 ROAD SURFACE CONDITION
 - 4 DEBRIS
 - 5 RUT, HOLES, BUMPS
 - 6 WORK ZONE
 - A. LANE CLOSURE
 - B. LANE SHIFT / CLOSURE
 - C. WORK ON SHOULDER OR MEDIAN
 - D. INTERMITTENT OR MOVING WORK
 - E. OTHER
 - 7 WORN, TRAVEL-POLISHED SURFACE
 - 8 OBSTRUCTION IN ROADWAY
 - 9 CHANGING ROAD WIDTH
 - 10 TRAFFIC CONTROL, DEVICE INOPERATIVE, MISSING OR OBSCURED
 - 11 SHOULDERS (none, low, soft, high)
 - 12 NON-HIGHWAY WORK
- 3 MOTOR VEHICLE
 - 13 BRAKES
 - 14 STEERING
 - 15 POWER TRAIN
 - 16 SUSPENSION
 - 17 TIRES
 - 18 WHEELS
 - 19 LIGHTS (head, signal, tail)
 - 20 WINDOWS / WINDSHIELD
 - 21 MIRRORS
 - 22 WIPERS
 - 23 TRUCK COUPLING / TRAILER / Hitch / SAFETY CHAINS
 - 97 OTHER
 - 99 UNKNOWN CONTRIBUTING

- 19 - VIOLATIONS / BEHAVIOR**
- UP TO TWO CHOICES PER PERSON
- UNIT #
- 0 NO IMPROPER ACTION
 - 1 SPEED TOO FAST FOR CONDITIONS
 - 2 EXCEEDED LAWFUL SPEED
 - 3 FAILED TO YIELD RIGHT-OF-WAY
 - 4 FOLLOWED TOO CLOSELY
 - 5 FAILED TO OBEY STOP SIGN
 - 6 FAILED TO STOP FOR RED SIGNAL
 - 7 DISREGARDED TRAFFIC SIGNAL
 - 8 MADE IMPROPER TURN
 - 9 DROVE / RODE IN OPPOSING TRAFFIC LANE
 - 10 KNOWINGLY OPERATED WITH FAULTY / MISSING EQUIPMENT
 - 11 REQUIRED MOTORCYCLE SAFETY EQUIPMENT NOT USED
 - 12 PASSED IN NO PASSING ZONE
 - 13 UNSAFE LANE CHANGE
 - 14 FAILED TO KEEP IN PROPER LANE
 - 15 DISREGARDED PAVEMENT MARKINGS
 - 16 OTHER UNSAFE PASSING
 - 17 INATTENTION / DISTRACTION
 - 18 DID NOT USE CROSSWALK
 - 19 WALKED ON WRONG SIDE OF ROAD
 - 20 ELECTRONIC COMMUNICATIONS DEVICE
 - 97 OTHER
 - 99 UNKNOWN

- 20 - CONDITIONS INFLUENCING DRIVER / PED / BICYCLIST**
- UP TO TWO CHOICES PER PERSON
- UNIT #
- 0 NO APPARENT INFLUENCE
 - 1 ILLNESS
 - 2 PHYSICAL IMPAIRMENT
 - 3 FELL ASLEEP / FATIGUED
 - 4 ALCOHOL
 - 5 DRUGS
 - 6 MEDICATIONS
 - 97 OTHER
 - 99 UNKNOWN CONDITION
- CHECK ONE IF BLOCKS 4, 5, OR 6 CHECKED
- A. NO TEST GIVEN
 - B. TEST GIVEN
 - C. TEST REFUSED
 - D. TESTING UNKNOWN

- 21 - TRAFFIC UNIT MANEUVER / ACTION**
- UNIT #
- 1 GOING STRAIGHT AHEAD
 - 2 SLOWING IN TRAFFICWAY
 - 3 STOPPED IN TRAFFICWAY
 - 4 MAKING LEFT TURN
 - 5 MAKING RIGHT TURN
 - 6 MAKING U TURN
 - 7 OVERTAKING / PASSING
 - 8 CHANGING LANES
 - 9 NEGOTIATING A CURVE
 - 10 BACKING
 - 11 AVOIDING VEH. / OBJECT / PEDCYCLIST / ANIMAL
 - 12 ENTERING PARKING POSITION
 - 13 LEAVING PARKING POSITION
 - 14 PROPERLY PARKED
 - 15 IMPROPERLY PARKED
 - 16 DRIVERLESS MOVING VEHICLE
 - 17 CROSSING ROAD
 - 18 WALKING WITH TRAFFIC
 - 19 WALKING AGAINST TRAFFIC
 - 20 STANDING
 - 21 LYING
 - 22 GETTING ON OR OFF VEHICLE
 - 23 WORKING ON / PUSHING VEHICLE
 - 24 WORKING ON ROAD
 - 97 OTHER
 - 99 UNKNOWN

- 23 - LOCATION OF FIRST HARMFUL EVENT**
- 1 ON ROADWAY
 - 2 SHOULDER
 - 3 ROADSIDE
 - 4 OUTSIDE RIGHT-OF-WAY (trafficway)
 - 5 MEDIAN
 - 6 GORE
 - 7 SEPARATOR
 - 8 IN PARKING LANE OR ZONE
 - 9 TUNNEL
 - 10 BRIDGE
 - 11 OFF ROADWAY (location unknown)
 - 99 UNKNOWN

- 24 - LOCATION OF PEDESTRAIN / CYCLIST**
- 1 MARKED CROSSWALK AT INTERSECTION
 - 2 AT INTERSECTION, BUT NO MARKED CROSSWALK
 - 3 NON-INTERSECTION CROSSWALK
 - 4 DRIVEWAY ACCESS CROSSWALK
 - 5 SCHOOL CROSSWALK
 - 6 IN ROADWAY (not in crosswalk / intersection)
 - 7 MEDIAN (but not on shoulder)
 - 8 ISLAND
 - 9 SHOULDER
 - 10 SIDEWALK
 - 11 ROADSIDE
 - 12 OUTSIDE OF TRAFFICWAY
 - 13 DEDICATED BIKE LANE
 - 14 SHARED-USE PATH
 - 15 INSIDE BUILDING
 - 97 OTHER
 - 99 UNKNOWN

J. Harold

City Peoria State AZ
Payson AZ

2010-017449
8 WITNESSES
9 CITATION CHARGES

Unit No.	A.R.S. No. or City Code	Unit No. 3	Unit No.	SEQUENCE OF EVENTS
		9		FIRST EVENT
		44		SECOND EVENT
		1		THIRD EVENT
		1		FOURTH EVENT
				MOST HARMFUL EVENT BY VEHICLE (Use Codes 1 to 49 ONLY)
				ENTER FIRST HARMFUL EVENT OF CRASH (Use Codes 1 to 41 ONLY) 9

22B - CRASH EVENTS

FIRST HARMFUL, MOST HARMFUL AND SEQUENCE OF NON-COLLISION

- OVERTURN / ROLLOVER
- FIRE / EXPLOSION
- IMMERSION
- JACKKNIFE
- CARGO / EQUIPMENT LOSS / SHIFT
- FELL / JUMPED FROM VEHICLE
- THROWN OR FALLING OBJECT
- OTHER NON-COLLISION

CHECK ONLY ONE OR ONE BLOCK PER UNIT UNLESS NOTED

- 10 - LIGHT CONDITION**
- DAYLIGHT
 - DAWN
 - DUSK
 - DARK, LIGHTED
 - DARK, NOT LIGHTED
 - DARK, UNKNOWN LIGHTING

- 11 - WEATHER CONDITIONS**
- CLEAR
 - CLOUDY
 - SLEET / HAIL (freezing rain / drizzle)
 - RAIN
 - SNOW
 - SEVERE CROSSWINDS
 - BLOWING SAND, SOIL DIRT
 - FOG, SMOG, SMOKE
 - BLOWING SNOW
 - 97 OTHER
 - 99 UNKNOWN

- 12 - ROAD SURFACE CONDITIONS**
- DRY
 - WET
 - SNOW
 - SLUSH
 - ICE / FROST
 - WATER (standing, moving)
 - SAND
 - MUD, DIRT, GRAVEL
 - OIL
 - 97 OTHER
 - 99 UNKNOWN

- 13 - RELATED TO JUNCTION**
- 0 NOT JUNCTION RELATED
- JUNCTION NON-INTERCHANGE AREA**
- INTERSECTION
 - INTERSECTION - RELATED
 - ENTRANCE / EXIT RAMP
 - RAILWAY GRADE CROSSING
 - CROSSOVER - RELATED
 - FRONTAGE ROAD
 - DRIVEWAY
 - ALLEY - ACCESS - RELATED
 - OTHER NON-INTERCHANGE
 - UNKNOWN NON-INTERCHANGE
- JUNCTION INTERCHANGE AREA**
- THRU ROADWAY
 - INTERSECTION
 - INTERSECTION - RELATED
 - ENTRANCE / EXIT RAMP
 - FRONTAGE ROAD
 - OTHER PART OF INTERCHANGE
 - UNKNOWN INTERCHANGE
 - UNKNOWN JUNCTION
 - 99 UNKNOWN

- 14 - TYPE OF INTERSECTION**
- NOT AT INTERSECTION
 - FOUR-WAY INTERSECTION
 - T-INTERSECTION
 - Y-INTERSECTION
 - INTERSECTION AS PART OF INTERCHANGE
 - TRAFFIC CIRCLE
 - ROUNDBOUT
 - FIVE-POINT, OR MORE
 - 99 UNKNOWN

- 15 - TRAFFIC WAY DESCRIPTION**
- ONE-WAY TRAFFICWAY
 - TWO-WAY, NOT DIVIDED
 - TWO-WAY, NOT DIVIDED WITH A CONTINUOUS LEFT TURN LANE
 - TWO-WAY, DIVIDED, UNPROTECTED (painted > 4 feet) MEDIAN
 - TWO-WAY, DIVIDED POSITIVE MEDIAN BARRIER
 - 99 UNKNOWN

- 16 - TRAFFIC CONTROL DEVICE**
- UNIT # 3
- NO CONTROLS
 - SIGNAL
 - STOP SIGN
 - YIELD SIGN
 - WARNING SIGN
 - RAILROAD CROSSING DEVICE
 - FLASHING TRAFFIC SIGNAL
 - PERSON (law enforcement, crossing guard, flagger, etc.)
 - 97 OTHER
 - 99 UNKNOWN

- 17 - MANNER OF CRASH IMPACT**
- SINGLE VEHICLE
 - ANGLE (front to side) SAME DIRECTION
 - ANGLE (front to side) OPPOSITE DIRECTION
 - ANGLE (front to side) RIGHT ANGLE
 - ANGLE - DIRECTION NOT SPECIFIED
 - REAR END (front to rear)
 - HEAD-ON (front to front)
 - SIDESWIPE, SAME DIRECTION
 - SIDESWIPE, OPPOSITE DIRECTION
 - REAR-TO-SIDE
 - REAR-TO-REAR
 - 97 OTHER
 - 99 UNKNOWN

- 18 - CONTRIBUTING CIRCUMSTANCES**
- UP TO TWO CHOICES PER UNIT
- UNIT # 3
- 0 NO CONTRIBUTING CIRCUMSTANCES
- ENVIRONMENTAL**
- GLARE
 - SUNLIGHT
 - HEADLIGHTS
 - PHYSICAL OBSTRUCTION(S)
 - STOPPED / PARKED VEHICLE
 - MOVING VEHICLE
 - LOAD ON VEHICLE
 - TREE / SHRUB / BUSH
 - EMBANKMENT

- ROAD**
- ROAD SURFACE CONDITION
 - DEBRIS
 - RUT, HOLES, BUMPS
 - WORK ZONE
 - LANE CLOSURE
 - LANE SHIFT / CLOSURE
 - WORK ON SHOULDER OR MEDIAN
 - INTERMITTENT OR MOVING WORK
 - OTHER
 - WORKERS PRESENT
 - WORN, TRAVEL-POLISHED SURFACE
 - OBSTRUCTION IN ROADWAY
 - CHANGING ROAD WIDTH
 - TRAFFIC CONTROL, DEVICE INOPERATIVE, MISSING OR OBSCURED
 - SHOULDERS (none, low, soft, high)
 - NON-HIGHWAY WORK

- MOTOR VEHICLE**
- BRAKES
 - STEERING
 - POWER TRAIN
 - SUSPENSION
 - TIRES
 - WHEELS
 - LIGHTS (head, signal, tail)
 - WINDOWS / WINDSHIELD
 - MIRRORS
 - WIPERS
 - TRUCK COUPLING / TRAILER / HITCH / SAFETY CHAINS
 - OTHER
 - 97 UNKNOWN CONTRIBUTING

- 19 - VIOLATIONS / BEHAVIOR**
- UP TO TWO CHOICES PER PERSON
- UNIT # 3
- NO IMPROPER ACTION
 - SPEED TOO FAST FOR CONDITIONS
 - EXCEEDED LAWFUL, SPEED
 - FAILED TO YIELD RIGHT-OF-WAY
 - FOLLOWED TOO CLOSELY
 - FAILED TO OBEY STOP SIGN
 - FAILED TO STOP FOR RED SIGNAL
 - DISREGARDED TRAFFIC SIGNAL
 - MADE IMPROPER TURN
 - DROVE / RODE IN OPPOSING TRAFFIC LANE
 - KNOWINGLY OPERATED WITH FAULTY / MISSING EQUIPMENT
 - REQUIRED MOTORCYCLE SAFETY EQUIPMENT NOT USED
 - PASSED IN NO PASSING ZONE
 - UNSAFE LANE CHANGE
 - FAILED TO KEEP IN PROPER LANE
 - DISREGARDED PAVEMENT MARKINGS
 - OTHER UNSAFE PASSING
 - INATTENTION / DISTRACTION
 - DID NOT USE CROSSWALK
 - WALKED ON WRONG SIDE OF ROAD
 - ELECTRONIC COMMUNICATIONS DEVICE
 - 97 OTHER
 - 99 UNKNOWN

- 20 - CONDITIONS INFLUENCING DRIVER / PED / BICYCLIST**
- UP TO TWO CHOICES PER PERSON
- UNIT # 3
- NO APPARENT INFLUENCE
 - ILLNESS
 - PHYSICAL IMPAIRMENT
 - FELL ASLEEP / FATIGUED
 - ALCOHOL
 - DRUGS
 - MEDICATIONS
- CHECK ONE IF BLOCKS 4, 5, OR 6 CHECKED
- NO TEST GIVEN
 - TEST GIVEN
 - TEST REFUSED
 - TESTING UNKNOWN
- 97 OTHER
- 99 UNKNOWN CONDITION

- 21 - TRAFFIC UNIT MANEUVER / ACTION**
- UNIT # 3
- GOING STRAIGHT AHEAD
 - SLOWING IN TRAFFICWAY
 - STOPPED IN TRAFFICWAY
 - MAKING LEFT TURN
 - MAKING RIGHT TURN
 - MAKING U TURN
 - OVERTAKING / PASSING
 - CHANGING LANES
 - NEGOTIATING A CURVE
 - BACKING
 - AVOIDING VEH. / OBJECT / PEDCYCLIST / ANIMAL
 - ENTERING PARKING POSITION
 - LEAVING PARKING POSITION
 - PROPERLY PARKED
 - IMPROPERLY PARKED
 - DRIVERLESS MOVING VEHICLE
 - CROSSING ROAD
 - WALKING WITH TRAFFIC
 - WALKING AGAINST TRAFFIC
 - STANDING
 - LYING
 - GETTING ON OR OFF VEHICLE
 - WORKING ON / PUSHING VEHICLE
 - WORKING ON ROAD
 - 97 OTHER
 - 99 UNKNOWN

- 22B - CRASH EVENTS**
- FIRST HARMFUL, MOST HARMFUL AND SEQUENCE OF NON-COLLISION
- OVERTURN / ROLLOVER
 - FIRE / EXPLOSION
 - IMMERSION
 - JACKKNIFE
 - CARGO / EQUIPMENT LOSS / SHIFT
 - FELL / JUMPED FROM VEHICLE
 - THROWN OR FALLING OBJECT
 - OTHER NON-COLLISION

- COLLISION WITH NON-FIXED OBJECT**
- MOTOR VEHICLE IN TRANSPORT
 - PEDESTRIAN
 - PEDALCYCLE
 - RAILWAY VEHICLE (TRAIN, ENGINE)
 - LIGHT RAILWAY / RAILCAR VEHICLE
 - ANIMAL, WILD - NON GAME
 - ANIMAL, WILD - GAME
 - ANIMAL - PET
 - ANIMAL - LIVESTOCK
 - PARKED MOTOR VEHICLE
 - WORK ZONE / MAINTENANCE EQUIPMENT
 - OTHER NON-FIXED OBJECT
- COLLISION WITH FIXED OBJECT**
- IMPACT ATTENUATOR / CRASH CUSHION
 - BRIDGE / OVERHEAD STRUCTURE
 - BRIDGE RAIL
 - CULVERT
 - CURB
 - DITCH
 - EMBANKMENT
 - GUARDRAIL FACE
 - GUARDRAIL END
 - CONCRETE TRAFFIC BARRIER
 - CABLE TRAFFIC BARRIER
 - OTHER TRAFFIC BARRIER
 - TREE, BUSH, STUMP (STANDING)
 - TRAFFIC SIGN SUPPORT
 - TRAFFIC SIGNAL SUPPORT
 - UTILITY POLE / LIGHT SUPPORT
 - OTHER POST, POLE, OR SUPPORT
 - FENCE
 - MAILBOX
 - BUILDING
 - OTHER FIXED OBJECT

- ADDITIONAL SEQUENCE EVENTS**
- EQUIPMENT FAILURE (TIRE, BRAKE, ETC.)
 - SEPARATION OF UNITS
 - RAN OFF ROAD, RIGHT
 - RAN OFF ROAD, LEFT
 - CROSS MEDIAN
 - CROSS CENTERLINE
 - DOWNHILL RUNAWAY
 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY ANOTHER VEHICLE
 - 99 UNKNOWN

- 23 - LOCATION OF FIRST HARMFUL EVENT**
- ON ROADWAY
 - SHOULDER
 - ROADSIDE
 - OUTSIDE RIGHT-OF-WAY (trafficway)
 - MEDIAN
 - GORE
 - SEPARATOR
 - IN PARKING LANE OR ZONE
 - TUNNEL
 - BRIDGE
 - OFF ROADWAY (location unknown)
 - 99 UNKNOWN

- 24 - LOCATION OF PEDESTRIAN / CYCLIST**
- MARKED CROSSWALK AT INTERSECTION
 - AT INTERSECTION, BUT NO MARKED CROSSWALK
 - NON-INTERSECTION CROSSWALK
 - DRIVEWAY ACCESS CROSSWALK
 - SCHOOL CROSSWALK
 - IN ROADWAY (not in crosswalk / intersection)
 - MEDIAN (but not on shoulder)
 - ISLAND
 - SHOULDER
 - SIDEWALK
 - ROADSIDE
 - OUTSIDE OF TRAFFICWAY
 - DEDICATED BIKE LANE
 - SHARED-USE PATH
 - INSIDE BUILDING
 - 97 OTHER
 - 99 UNKNOWN

J. Harold

25	Unit No. <u>1</u> Vehicle Damaged Area (circle up to three (3))		0 - NONE 10 - UNDERCARRIAGE 11 - TOTALED 97 - OTHER 99 - UNKNOWN	Unit No. <u>2</u> Vehicle Damaged Area (circle up to three (3))		0 - NONE 10 - UNDERCARRIAGE 11 - TOTALED 97 - OTHER 99 - UNKNOWN
----	---	--	---	---	--	--

26 GLOBAL POSITION

LATITUDE			LONGITUDE		
Degrees	Minutes	Seconds	Degree	Minutes	Seconds

27 **CRASH DIAGRAM**

MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE
 MEASUREMENTS ARE SCALED (SCALE =)

Click in the space below to insert an image.

See Attached Diagram

28 - INDICATE NORTH

29 **NARRATIVE (Describe what happened)**

See Attached Report Narrative

J. Harold

ARIZONA CRASH REPORT - Continued

ADOT USE ONLY

REPORT ID

Agency Report Number

Total No. of Sheets
15

POLICE ONLY - FORWARD COPY TO:

ADOT TRAFFIC RECORDS SECTION 064R
206 S. 17th AVE., PHOENIX, ARIZONA 85007-3233

YEAR MONTH DAY
2010/04/09

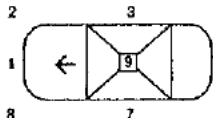
HOUR
15:07

NCIC NO.
0799

OFFICER ID NO.
6393

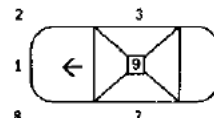
25

Unit No. 3
Vehicle Damaged Area
(circle up to three (3))



0 - NONE
10 - UNDERCARRIAGE
11 - TOTALED
97 - OTHER
99 - UNKNOWN

Unit No.
Vehicle Damaged Area
(circle up to three (3))



0 - NONE
10 - UNDERCARRIAGE
11 - TOTALED
97 - OTHER
99 - UNKNOWN

26

GLOBAL POSITION

LATITUDE
Degrees Minutes Seconds

LONGITUDE
Degrees Minutes Seconds

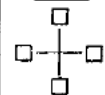
27

CRASH DIAGRAM

MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE
 MEASUREMENTS ARE SCALED (SCALE =)

Click in the space below to insert an image.

28 - INDICATE NORTH



See attached diagram

29

NARRATIVE (Describe what happened)

See Attached Report Narrative

J. Harold

1		ARIZONA CRASH REPORT			REPORT ID		NCIC NO.		OFFICERS ID NO.				
		FATAL SUPPLEMENT			YEAR	MONTH	DAY	HOUR					
		POLICE ONLY - FORWARD COPY TO TRAFFIC RECORDS SECTION, 064R ADOT TRAFFIC RECORDS SECTION, 064R 206 S. 12TH AVE., PHOENIX, ARIZONA 85007-3222			1	0	4	0	9	1	5		
					0	7	0	7	9	0	6		
					3								
											<input checked="" type="checkbox"/> Delayed Fatality		
											<input checked="" type="checkbox"/> DRIVER <input type="checkbox"/> PEDESTRIAN <input type="checkbox"/> PASSENGER <input type="checkbox"/> PEDALCYCLIST		
					CITY		STATE						
					Tombasa		AZ						
		SEX	WEIGHT	EYES	HEIGHT	HAIR	DATE						
		Male	190	GREEN	6'-00"	GRAY							
		VICTIM REMOVED TO				VICTIM REMOVED BY							
		SCOTTSDALE OSBORN MED. CENTER				LIFESTAR AND NATIVE AIR							
		DECEASED AT SCENE		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		TRANSPORTED TO HOSPITAL:		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		ARRIVAL TIME AT HOSPITAL			
2		SAFETY DEVICE FAILURE			SAFETY DEVICE - IMPROPER USAGE			EJECTION (Eject) PATH					
		<input checked="" type="checkbox"/> 0 - Not Applicable (Safety Device Worked) <input type="checkbox"/> 1 - Lap Failed <input type="checkbox"/> 2 - Shoulder Failed <input type="checkbox"/> 3 - Both Failed <input type="checkbox"/> 4 - Child Safety Seat Failed <input type="checkbox"/> 5 - Child Booster Seat Failed <input type="checkbox"/> 99 - Unknown			<input checked="" type="checkbox"/> 0 - Not Applicable (Safety Device Properly Used) <input type="checkbox"/> 1 - Lap <input type="checkbox"/> 2 - Shoulder <input type="checkbox"/> 3 - Both <input type="checkbox"/> 4 - Child Safety Seat <input type="checkbox"/> 5 - Child Booster Seat <input type="checkbox"/> 99 - Unknown			<input checked="" type="checkbox"/> 0 - Not Applicable (Non-Motorist)/Not Ejected <input type="checkbox"/> 1 - Through Side Door Opening <input type="checkbox"/> 2 - Through Side Window <input type="checkbox"/> 3 - Through Windshield <input type="checkbox"/> 4 - Through Back Window <input type="checkbox"/> 5 - Through Back Door/Tailgate Opening <input type="checkbox"/> 6 - Through Roof Opening (sunroof; convertible top down) <input type="checkbox"/> 7 - Through Roof (convertible top up) <input type="checkbox"/> 8 - Other Path (e.g., back of pickup truck) <input type="checkbox"/> 99 - Unknown					
		AIR BAG NOT AVAILABLE											
		<input checked="" type="checkbox"/> 0 - Not Applicable (Air Bag Available) <input type="checkbox"/> 1 - Previously Deployed - Not Replaced <input type="checkbox"/> 2 - Disabled <input type="checkbox"/> 3 - Removed											
3		DRIVER		NAME OF DRIVER									
				<input checked="" type="checkbox"/> SAME AS VICTIM									
4		EXTRACTION (Extr) SUPPLEMENT				5 COMPLETE IF ANY DRIVER IS TESTED FOR ALCOHOL/DRUGS							
		Unit # 1 2 <input type="checkbox"/> <input type="checkbox"/> 0 - Not Applicable (Non Motorist) / Not Extracted <input type="checkbox"/> <input type="checkbox"/> 1 - By Ambulance Attendant <input type="checkbox"/> <input type="checkbox"/> 2 - By Police <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> 3 - By Fire Department <input type="checkbox"/> <input type="checkbox"/> 4 - By Passerby <input type="checkbox"/> <input type="checkbox"/> 97 - Other <input type="checkbox"/> <input type="checkbox"/> 99 - Unknown				Driver # <u>1</u> Driver # _____ Alcohol Test Type <u>Unavailable</u> Alcohol Test Type _____ Alcohol Test Results <u>Unavailable</u> Alcohol Test Results _____ Drug Test Type <u>Unavailable</u> Drug Test Type _____ Drug Test Results <u>Unavailable</u> Drug Test Results _____							
6		MOTOR VEHICLE				UNDERRIDE / OVERRIDE				FIRE OCCURRENCE			
		Unit # 1 2 <input type="checkbox"/> <input type="checkbox"/> 0 - Not Applicable UNDERRIDING A MOTOR VEHICLE IN-TRANSPORT <input type="checkbox"/> <input type="checkbox"/> 1 - Underride (Compartment Intrusion) <input type="checkbox"/> <input type="checkbox"/> 2 - Underride (No Compartment Intrusion) <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> 3 - Underride (Compartment Intrusion Unknown) <input type="checkbox"/> <input type="checkbox"/> 7 - Overriding a Motor Vehicle In-Transport <input type="checkbox"/> <input type="checkbox"/> 8 - Overriding a Motor Vehicle Not In-Transport <input type="checkbox"/> <input type="checkbox"/> 9 - Through Roof Opening (sunroof) <input type="checkbox"/> <input type="checkbox"/> 99 - Unknown				UNDERRIDING A MOTOR VEHICLE NOT IN-TRANSPORT <input type="checkbox"/> <input type="checkbox"/> 4 - Underride (Compartment Intrusion) <input type="checkbox"/> <input type="checkbox"/> 5 - Underride (No Compartment Intrusion) <input type="checkbox"/> <input type="checkbox"/> 6 - Underride (Compartment Intrusion Unknown)				Unit # 1 2 <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> 0 - Not Applicable <input type="checkbox"/> <input type="checkbox"/> 1 - Fire Occurred in Vehicle During Accident <input type="checkbox"/> <input type="checkbox"/> 2 - Fire occurred in This Vehicle and Initiated Fire/Explosion in Another Vehicle <input type="checkbox"/> <input type="checkbox"/> 99 - Unknown			
7		EMS		EMS CALLED		1509		EMS ARRIVED					
8		COMMENTS											
9		OFFICER'S SIGNATURE				SUPERVISOR'S SIGNATURE				AGENCY		DATE COMPLETED	
		J. Harold				T. [Signature]				AZ DPS		04/15/10	



**ARIZONA DEPARTMENT OF PUBLIC SAFETY
CONTINUATION/SUPPLEMENTAL REPORT**

DR NUMBER: [REDACTED]

Enter (C)ont / (S)upp	Officer Name	ID No.	Location Code
C	T. Harold	6393	[REDACTED]
Supervisor Name	Date	Pending (Y)es / (N)o	Closed by (A)rrrest / (O)ther
Sgt. T. Lincoln	4/9/10	N	O

NARRATIVE:

On 04/09/2010 at approximately 1507 hours, I responded to an injury collision on [REDACTED] from the Payson Office, dispatched from Phoenix Operational Communications. This was a three vehicle collision with injuries to four of the five people involved, all four were transported to hospitals by medical units. One of the individuals was pronounced deceased the following day. Two of the three vehicles exited the roadway and had to be towed from the scene. One southbound lane was closed for use by Emergency personnel and Tow trucks.

INITIAL OBSERVATIONS:

All vehicles involved in the collision were off the roadway. [REDACTED] parked off right of the fog line on the west side of the roadway and, north of the other collision vehicles. [REDACTED] was down off the right side of the roadway approximately [REDACTED] feet and on its roof, facing in a northern direction. Traffic Unit #3 was south of Traffic [REDACTED] Continuing south, Traffic [REDACTED] was off right and in some trees a short distance from Traffic Unit #2. Traffic [REDACTED] was on its wheels and facing a southern direction. Emergency Personnel from Lifestar, Payson Fire Dept. and Gila County Sheriff's Office were all assisting on scene.

ENVIRONMENTAL AND ROAD FACTORS:

At the collision location [REDACTED], this is a divided highway area with an embanked and depressed median. There are two lanes of travel on the southbound and northbound sides of the highway. There is a solid yellow center line on the median side and a solid white fog line on the right roadway side with a broken white line between the two southbound traffic lanes. The southbound #1 traffic lane measures variable widths from 12' 6" to 13' 8", and the #2 traffic lane measures variable widths from 12' 2" to 13' 2". The roadway edge is uneven asphalt that becomes a dirt shoulder. From the narrow dirt shoulder the edge drops on a steep downward slope. The roadway is a gradual right-hand curve with a slight downhill grade to the point where the vehicles came to rest. The

T. Harold

[REDACTED]



ARIZONA DEPARTMENT OF PUBLIC SAFETY
CONTINUATION/SUPPLEMENTAL REPORT

Page 2 of 4

vehicles came to rest off right, at the bottom of the grade (sag) in the roadway before the grade begins upward. The roadway is constructed of asphalt and the weather conditions were those of a dry, warm, sunny day with blue skies with some scattered clouds. The posted speed limit for this area is 65 mph.

TRAFFIC UNIT INFORMATION:

Vehicle #1:

A 2008 silver Jeep Grand Cherokee, bearing the plate of "AZ" 057-XGX, with a registered owner [REDACTED] of Tonto Basin, AZ, sustained impact crush and induced damage to the entire vehicle. The right side airbags deployed. Vehicle #1 was removed from the scene by LaForge Towing and stored at their secured storage facility in Payson, AZ.

Driver of Vehicle #1:

[REDACTED] DOB of [REDACTED] was identified by his "AZ" driver's license with photo. [REDACTED] was alert, but not oriented on scene. He was treated by Lifestar personnel and flown by Native Air 7 to Scottsdale Osborn Medical Center. [REDACTED] did not survive surgery and was pronounced deceased at approximately 0115 hours on 04/10/10. Notification was made to the daughter and son-in-law, [REDACTED] and [REDACTED], by Scottsdale Osborn medical personnel. The driver was reported to be in use of a seatbelt.

Passenger of Vehicle #1:

[REDACTED]. Mrs. [REDACTED] was treated by Lifestar personnel and flown to Scottsdale Osborn Medical Center by Native Air 1, where she was assessed and admitted with multiple injuries. The Passenger was reported to be in use of a seatbelt.

Vehicle #2:

A 1999 white Ford pickup with a steel flatbed, bearing the plate of "AZ" [REDACTED], with a registered owner of [REDACTED] of Payson, AZ. Vehicle #2 sustained minor damage to the rear left back corner of the vehicle. The vehicle was not disabled, and later driven away from the scene.

Driver of Vehicle #2:

[REDACTED], was identified by his "AZ" driver's license with photo. Magill reported on scene that he was uninjured, was able to maintain control of the vehicle. The driver reported to have been in use of his seatbelt.

Vehicle #3:

A 1991 Chevrolet S-10 size pickup, bearing a plate of "[REDACTED]", with a registered owner of Thomas D. Lake II of Tonto Basin, AZ, sustained impact crush and induced

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**ARIZONA DEPARTMENT OF PUBLIC SAFETY
CONTINUATION/SUPPLEMENTAL REPORT**

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damage to the entire vehicle. Vehicle #3 was removed from the scene by request of the driver and family, using Four Peaks Towing which is located in Tonto Basin, AZ.

Driver of Vehicle #3:

████████████████████, was identified by his "AZ" driver's license with photo. ██████ was in use of his seatbelt, and had to be extricated from the vehicle. ██████ was treated by Lifestar and transported with his son to Payson Regional Medical Center. Mr. ██████ was treated and admitted to the hospital with fractured vertebrae

Passenger of Vehicle #3:

████████████████████, four years old, was restrained in a proper child restraint car seat. The child was transported with his father by Lifestar Ambulance to Payson Regional Medical Center. At the hospital, the child was treated and released.

INVESTIGATION:

Investigation revealed that all Traffic Units involved in this incident were traveling southbound on ████████████████████. 1. Both Traffic Units #1 and #2 were traveling in the #2 traffic lane. Traffic Unit #1 was southbound, gaining on Traffic Unit #2. The left rear corner of the Traffic Unit #2 was contacted by the Traffic Unit #1. After contacting the left rear corner of Traffic Unit #2, Traffic Unit #1 traveled partially into the left earthen shoulder in the median. Traffic Unit #1 traveled with the left wheels in the median for a distance before over-correcting to the right. Traffic Unit #1 over-corrected to the right, crossing from the left shoulder edge, traveling across both traffic lanes, and onto the right earthen side of the roadway. As Traffic Unit #1 crossed to the right side of the roadway, it contacted Traffic Unit #3 (traveling in the #2 traffic lane) in a sideswiping manner. Traffic Unit #3's left side was contacted by the right side of Traffic Unit #1. The sideswiping motion to the right, caused Traffic Unit #3 to travel off the right side of the roadway where it traveled down a steep embankment and rolled onto its roof. Traffic Unit #3 came to rest on its roof, facing a northern direction. After contacting Traffic Unit #3, Traffic Unit #1 also exited the right side of the roadway, traveling down an embanked area, contacting three trees before coming to rest against the third tree. Traffic Unit #1 came to rest off the right side of the roadway, facing a southern direction. The only airbag deployment was in Traffic Unit #1, which was the side airbag on the right side of the vehicle. Traffic Unit #2 pulled off the roadway and stopped.

PRE-COLLISION 24 HOUR HISTORY:

The deceased, ████████████████████, had been at home with his wife, ██████, in Tonto Basin the day prior and morning of the collision. ████████████████████ had traveled to ██████ and had lunch with their daughter and son-in-law, ████████████████████. The ██████ stated that both of them appeared well and in good moods during lunch. Their daughter ██████ stated, she was unaware of any health issues that might have been bothering her Father that day, and "he seemed fine." Before heading back home, they stopped at the

J. Harold



**ARIZONA DEPARTMENT OF PUBLIC SAFETY
CONTINUATION/SUPPLEMENTAL REPORT**

Page 4 of 4

Chapman Auto Dealership in Payson and spoke with a salesman/friend who works there. The salesman, [REDACTED], stated that both [REDACTED] appeared well and to be in good spirits that afternoon. They visited with him for a little while and then left the dealership. The collision occurred following the visit to Chapman Auto.

POST-COLLISION INFORMATION:

Officer C. Cook responded to my request for a blood draw on Mr. [REDACTED]. (See attached report from Officer C. Cook, #6622.)

WITNESS INFORMATION: (See witness statements attached.)

Witness #1:

[REDACTED], of Payson, AZ. Stated she was traveling 60-65mph in the right lane of southbound [REDACTED]. She documents observing Traffic Unit #1 come up behind her while riding her motorcycle, then pass her on the right. Traffic Unit #1 had to drive partially on the shoulder to pass on the right, causing dirt to be thrown at her and she moved to the left lane. [REDACTED] stated that there was another motorcycle unit ahead of her and Traffic Unit #1 passed on the right again. Both motorcycles were "non-contact" vehicles. Traffic Unit #1 was partially on the shoulder of the roadway, causing dirt/rocks to be thrown and the motorcyclist had to move to the left to avoid being "hit." Traffic Unit #1 traveled off the left side of the roadway, came back onto the roadway and contacted the left rear corner of Traffic Unit #2. Traffic Unit #1 again traveled off the left side of the roadway, then came back onto the roadway to the right and hit Traffic Unit #3. Traffic Unit #3 traveled off the right side of the road and rolled onto its roof. Traffic Unit #1 traveled off the right side of the road and stopped between trees.

Witness #2:

[REDACTED], of Phoenix, AZ. Documented observing Traffic Unit #1 traveling in excess of 70 mph, from the left shoulder, striking the left rear of Traffic Unit #2, and then going back to the left shoulder/median. Traffic Unit #1 traveled from the median, to the right traffic lane and struck Traffic Unit #3. Traffic Unit #3 went off the right side of the road and stopped on its roof with two occupants. Traffic Unit #1 also traveled off the right side of the roadway and stopped between trees, with two occupants.

Witness #3:

[REDACTED] of Payson, AZ is also the driver of Vehicle #2. [REDACTED] stated and documented, while he was traveling south in the right traffic lane [REDACTED] Traffic Unit #1 hit his truck, traveled across the traffic lanes of [REDACTED] and into the median while continuing to travel south. Traffic Unit #1 traveled back onto the roadway, hitting the Traffic Unit #3 and causing it to travel off the roadway and into a ravine.

J. Harold



**ARIZONA DEPARTMENT OF PUBLIC SAFETY
HIGHWAY PATROL DIVISION**

DR: 2010-017449

This is a supplemental report for an injury collision that occurred on 04/09/2010 on State [REDACTED] at milepost 249.1

On 04/09/2010 at approximately 1705 hours I was contacted by Phoenix Operational Communications (OpComm) regarding follow-up for a collision that occurred in District 11. OpComm said a phlebotomist was needed to draw blood on a white male driver, [REDACTED], that was involved in an injury collision earlier and was now at Scottsdale-Osborne Hospital. During my phone conversation OpComm advised that the investigating officer had probable cause to draw blood and there was serious injury to at least one person.

When I arrived at Scottsdale-Osborne I contacted the nurses at the Trauma Unit who told me [REDACTED] was in a CT scan and was expected back shortly. Eventually [REDACTED] was returned to the Trauma Unit and I identified him as [REDACTED].

I told [REDACTED] that he was not under arrest or in trouble in any way and [REDACTED] said he understood. [REDACTED] had several dried blood stains on his arms and hands. He had an open abrasion on his left elbow and IV's coming from both arms.

When I was talking with [REDACTED] he appeared to be disoriented in that he couldn't recall anything leading up to the collision and for several minutes after the collision. He could recall exactly where he was at the time of my contact or where his collision occurred. [REDACTED] told me he was taking several medications but could not remember them. The only medication he could recall taking was Depakote.

Two tubes of gray top blood were obtained by hospital staff and given to me. I took custody of the blood and submitted into the Property and Evidence Unit for analysis

Officer's Name	Badge	Location/Code	Supervisor
C. COOK	6622	26070300	SGT. LESLIE #4720

ARIZONA TRAFFIC ACCIDENT REPORT		YEAR MONTH DAY			REPORT ID HOUR		NCIC NO.		OFFICERS ID NO.		Agency Report Number									
ACCIDENT MEASUREMENT SUPPLEMENT FORWARD COPY TO ACCIDENT RECORDS ANALYSIS UNIT 064R ARIZONA DEPARTMENT OF TRANSPORTATION 206 S. 17th AVE., PHOENIX, ARIZONA 85007-3233		1	0	4	0	9	1	5	0	7	0	7	9	9	0	6	3	9	3	

ZERO POINT IS Median Drain - NW Corner

MEASUREMENTS ARE IN FEET AND TENTHS

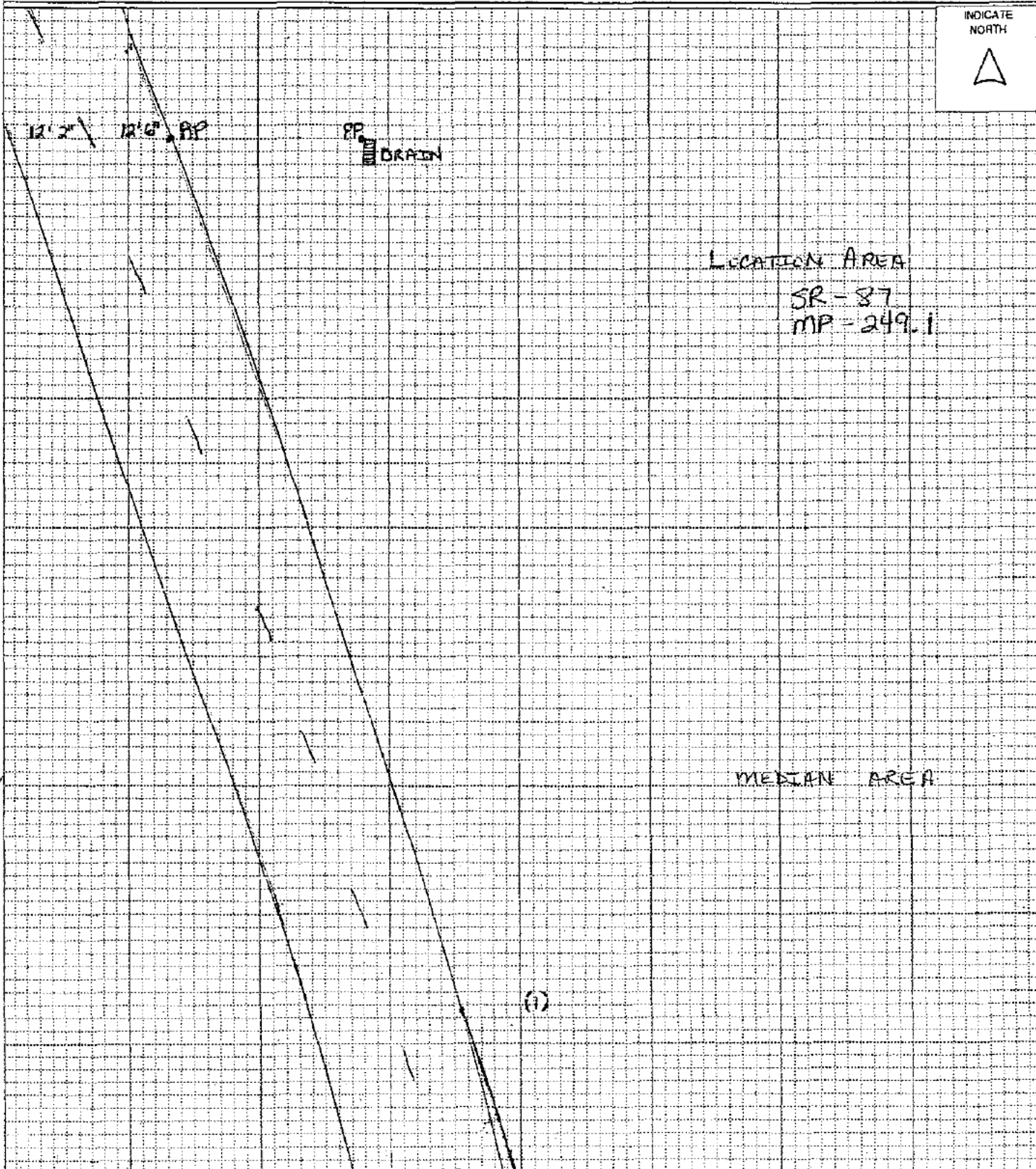
EDGE IS Solid Yellow Ctr. line REFERENCE POINT IS Intersection of Yellow Ctr line FEET AND INCHES
Drain

POINT	FROM EDGE	FROM RP	DESCRIPTION OF POINT MEASURED
---	---	---	Lane width at RP, #1 traffic lane 12' 6"
---	---	---	Lane width at RP, #2 traffic lane 12' 2"
RP	⊙	⊙	Intersection on yellow center line of NW Drain
Zero Pt	29' 6" E	⊙	NW Corner of Drain Grate - Permanent Pt. (Grate is 2' E-W + 4' N-S)
1	⊙	134' 3" S	Vehicle #1, Tires off left of roadway.
2	2' 7" E	164' 5" S	Tire mark off left of roadway.
3a	3' 3" E	200' S	LF tire mark in dirt.
3b	2' 11" E	200' S	LR tire mark in dirt.
4a	4' E	230' S	LR tire mark in dirt.
4b	4' 6" E	230' S	LF tire mark in dirt.
5a	4' 8" E	270' S	LR tire mark in dirt.
5b	5' 1" E	270' S	LF tire marks in dirt.
6a	5' 5" E	330' S	LR tire mark in dirt.
6b	6' 2" E	330' S	LF tire mark in dirt.
7a	5' 6" E	400' S	LR tire mark in dirt.
7b	5' 8" E	400' S	LF tire mark in dirt.
8a	4' 10" E	470' S	LR tire mark in dirt.
8b	4' 10" E	470' S	LF tire mark in dirt.
9a	2' 2" E	550' S	LR tire mark in dirt.
9b	3' 6" E	550' S	LF tire mark in dirt.
10	⊙	576' 9" S	LR tires mark crosses yellow median line
11	⊙	589' 5" S	LF tire mark crosses yellow median line
12	⊙	667' 6" S	Start of left turn lane
13	⊙	685' 5" S	width of lanes at delineator: #1 traffic lane is 13' 8" #2 traffic lane is 13' 2"

ARIZONA TRAFFIC ACCIDENT REPORT			REPORT ID		Agency Report Number	
SUPPLEMENT FORWARD COPY TO ACCIDENT RECORDS ANALYSIS UNIT 064R ARIZONA DEPARTMENT OF TRANSPORTATION 206 S. 17th AVE. PHOENIX, ARIZONA 85007-3233			YEAR	MONTH	DAY	HOUR
			10	04	09	15
			07	07	07	99
			06	39	3	

ACCIDENT DIAGRAM

- MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE
- MEASUREMENTS ARE SCALED (SCALE - _____)



INDICATE



ARIZONA DEPARTMENT OF PUBLIC SAFETY

TRAFFIC ACCIDENT WITNESS STATEMENT

DPS USE ONLY - DR NUMBER

WITNESS IS: DRIVER PASSENGER OTHER WITNESS LOCATION (STREET, HIGHWAY, MILE-OFF, INTERSECTION, ETC.) SR 87 MP 249

START HERE Please print all information

WITNESS INFORMATION NAME LAST FIRST MIDDLE CITY STATE PEORIA AZ PHOENIX AZ

WHAT WERE YOU DOING JUST PRIOR TO THE ACCIDENT? DRIVING SOUTHBOUND
WHAT CALLED YOUR ATTENTION TO THE ACCIDENT? (breaking glass, etc.) A SILVER JEEP CHEROKEE SPEEDING & STEERING OUT OF CONTROL.
HOW FAR AWAY FROM THE ACCIDENT WERE YOU WHEN IT OCCURRED?
HOW MANY VEHICLES WERE INVOLVED IN THE ACCIDENT? 3

PLEASE DESCRIBE THE VEHICLES INVOLVED IN THE ACCIDENT. Table with columns: VEHICLE, COLOR, MAKE (Ford, Chevy, etc.), MODEL (Mustang, Camaro, etc.), BODY STYLE (Station Wagon, etc.).

WEATHER CONDITIONS CLEAR RAIN SNOW DUST FOG STRONG WINDS CLOUDY OTHER

THIS SECTION TO BE COMPLETED ONLY BY DRIVERS OF VEHICLES INVOLVED IN THE ACCIDENT. INSURANCE COMPANY NAME POLICY NUMBER EFFECTIVE FROM/TO DATES

PLEASE LIST ALL PASSENGERS IN YOUR VEHICLE (EXCLUDING YOURSELF). Table with columns: NAME, ADDRESS, CITY, STATE, ZIP CODE, PHONE NUMBER, AGE, SEX.

WHAT WAS YOUR SPEED? 60 M.P.H. DIRECTION OF TRAVEL? NORTH SOUTH EAST WEST

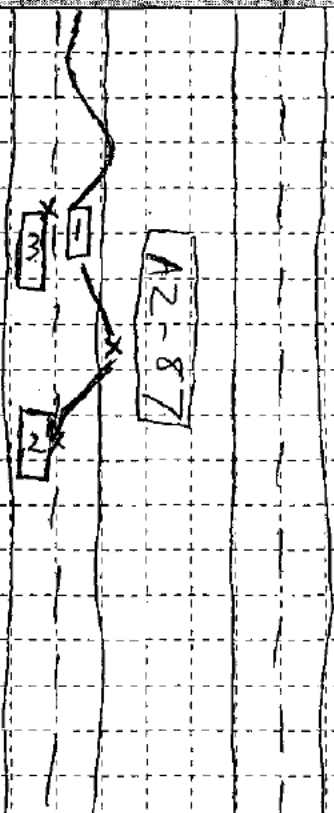
CONTINUE ON THE BACK

DESCRIPTION OF ACCIDENT

DPS USE ONLY

THE SILVER JEEP WAS SPEEDING SOUTHBOUND ON AZ-87 IN LEFT HAND LANE + SHOULDER IN EXCESS OF 70+ MPH. JEEP THEN STRUCK LEFT REAR OF WHT F-250 AND BOUNCED BACK TO LEFT SHOULDER. JEEP THEN BOUNCED OFF CENTER DIVIDER/MEDIAN RUT AND BACK INTO RIGHT HAND LANE AND STRUCK DRIVERS SIDE OF RED CHEVY S-10. AFTER THAT COLLISION BOTH JEEP + S-10 WENT OFF ROAD ON RIGHT SIDE INTO DITCH. RED S-10 LANDED ON ROOF CRUSHING IT FLAT WITH 1-CHILD AND 1-ADULT TRAPPED INSIDE. THE JEEP ALSO ROLLED ONTO ROOF, BUT TRAPPED BETWEEN 2- ~~TREES~~ TREES WITH 2- ELDERLY ADULTS TRAPPED INSIDE.

- (1) On the grid below indicate NORTH by placing an arrow pointing north in the box provided.
- (2) Using the grid area below, draw a diagram which shows the location of the vehicles at the time the accident occurred.
- (3) Use a solid line to show the path of the vehicles BEFORE the accident occurred.
- (4) Number each vehicle according to the numbers you used on the other side of this form.



FINAL RESTING PLACE (X¹)
(X²)

YOUR SIGNATURE <i>Steven Vollety</i>	WITNESSED BY (OFFICER) <i>J. Harold</i>	ID. NUMBER 6393
---	--	---------------------------



ARIZONA DEPARTMENT OF PUBLIC SAFETY

TRAFFIC ACCIDENT WITNESS STATEMENT

DPS USE ONLY
DR NUMBER
DATE

WITNESS IS: [X] DRIVER [] PASSENGER [X] OTHER WITNESS
LOCATION (STREET, HIGHWAY, AVENUE, POST OFFICE, INTERSECTION, ETC.) SR 87 MP 24.9

START HERE | Please print all information |

WITNESS INFORMATION: HOME PHONE, BUSINESS PHONE, BIRTH DATE (MO/DAY/YR), DRIVER'S LICENSE NUMBER, STATE (AZ), ZIP CODE

CIRCUMSTANCES: WHAT WERE YOU DOING JUST PRIOR TO THE ACCIDENT? Driving S on Hwy 87 R. Home

CIRCUMSTANCES: WHAT CALLED YOUR ATTENTION TO THE ACCIDENT? (breaking glass, etc.) SUV hit my truck from behind L. Rear

HOW FAR AWAY FROM THE ACCIDENT WERE YOU WHEN IT OCCURRED?
HOW MANY VEHICLES WERE INVOLVED IN THE ACCIDENT? 3

PLEASE DESCRIBE THE VEHICLES INVOLVED IN THE ACCIDENT. Table with columns: VEHICLE, COLOR, MAKE (Ford, Chevy, etc.), MODEL (Mustang, Camaro, etc.), BODY STYLE (Station Wagon, etc.)

WEATHER CONDITIONS: [X] CLEAR [] RAIN [] SNOW [] DUST [] FOG [] STRONG WINDS [] CLOUDY [] OTHER:

THIS SECTION TO BE COMPLETED ONLY BY DRIVERS OF VEHICLES INVOLVED IN THE ACCIDENT. INSURANCE COMPANY NAME, POLICY NUMBER, EFFECTIVE FROM/TO DATES

PLEASE LIST ALL PASSENGERS IN YOUR VEHICLE (EXCLUDING YOURSELF). Table with columns: NAME, ADDRESS, CITY, STATE, ZIP CODE, PHONE NUMBER, AGE, SEX (M/F)

WHAT WAS YOUR SPEED? 60 M.P.H. DIRECTION OF TRAVEL? [] NORTH [X] SOUTH [] EAST [] WEST

CONTINUE ON THE BACK

Silver SUV hit my truck swerved across 87 into the bar ditch continued south. SUV swerved back onto 87 hitting Red Truck off the road into A RAVEN.

- (1) On the grid below indicate **NORTH** by placing an arrow pointing north in the box provided.
- (2) Using the grid area below, draw a diagram which shows the location of the vehicles at the time the accident occurred.
- (3) Use a solid line to show the path of the vehicles **BEFORE** the accident occurred.
- (4) Number each vehicle according to the numbers you used on the other side of this form.

INDICATE NORTH
↓



YOUR SIGNATURE

[Handwritten Signature]

WITNESSED BY (OFFICER)

J. Harold

ID. NUMBER

6393



ARIZONA DEPARTMENT OF PUBLIC SAFETY

TRAFFIC ACCIDENT WITNESS STATEMENT

DPS USE ONLY

WITNESS IS: DRIVER PASSENGER OTHER WITNESS LOCATION (STREET, HIGHWAY, MILEPOST, INTERSECTION, ETC.) SR-87 MP 249

START HERE Please print all information

WITNESS INFORMATION

CITY Payson STATE AZ CITY Scottsdale STATE AZ

HOME PHONE BUSINESS PHONE BIRTH DATE (MO/DAY/YR) DRIVER'S LICENSE NUMBER STATE

WHAT WERE YOU DOING JUST PRIOR TO THE ACCIDENT? riding my motorcycle

WHAT CALLED YOUR ATTENTION TO THE ACCIDENT? (breaking glass, etc.) The driver in the silver SUV swerved around me in the right side dirt - see back

HOW FAR AWAY FROM THE ACCIDENT WERE YOU WHEN IT OCCURRED? saw first part of it

HOW MANY VEHICLES WERE INVOLVED IN THE ACCIDENT? 3

PLEASE DESCRIBE THE VEHICLES INVOLVED IN THE ACCIDENT

Table with 5 columns: VEHICLE, COLOR, MAKE (Ford, Chevy, etc.), MODEL (Mustang, Camaro, etc.), BODY STYLE (Station Wagon, etc.)

WEATHER CONDITIONS CLEAR RAIN SNOW DUST FOG STRONG WINDS CLOUDY OTHER

THIS SECTION TO BE COMPLETED ONLY BY DRIVERS OF VEHICLES INVOLVED IN THE ACCIDENT

INSURANCE COMPANY NAME POLICY NUMBER EFFECTIVE FROM/TO DATES

PLEASE LIST ALL PASSENGERS IN YOUR VEHICLE (EXCLUDING YOURSELF)

Table with 6 columns: NAME, ADDRESS, CITY, STATE, ZIP CODE, PHONE NUMBER, AGE, SEX

WHAT WAS YOUR SPEED? 60+ M.P.H. DIRECTION OF TRAVEL? NORTH SOUTH EAST WEST

CONTINUE ON THE BACK

DR NUMBER

I was on my motorcycle in the 1st lane. There is no shoulder on the 1st. The silver car (SUV) came up behind me, swerved around me on the right side dirt, which threw dirt all over me. I changed to left lane. There was another bike in 1st lane, silver vehicle swerved on dirt around him - came within 8" of hitting him. That bike changed to left lane. Silver vehicle then went to left side of road went completely off the road again, came back over into the road & hit the white truck, that caused him to veer left, he came back over the roadway to the right & hit the red truck, the truck went off the road to the right, turned over. The silver truck went off the road to

- (1) On the grid below indicate **NORTH** by placing an arrow pointing north in the box provided.
- (2) Using the grid area below, draw a diagram which shows the location of the vehicles at the time the accident occurred.
- (3) Use a solid line to show the path of the vehicles **BEFORE** the accident occurred.
- (4) Number each vehicle according to the numbers you used on the other side of this form.

the right & got lodged between the trees. I went to him & told he & lady to be still and man was griping at me & lady.

INDICATE NORTH



YOUR SIGNATURE

Sun Faircloth

WITNESSED BY OFFICER

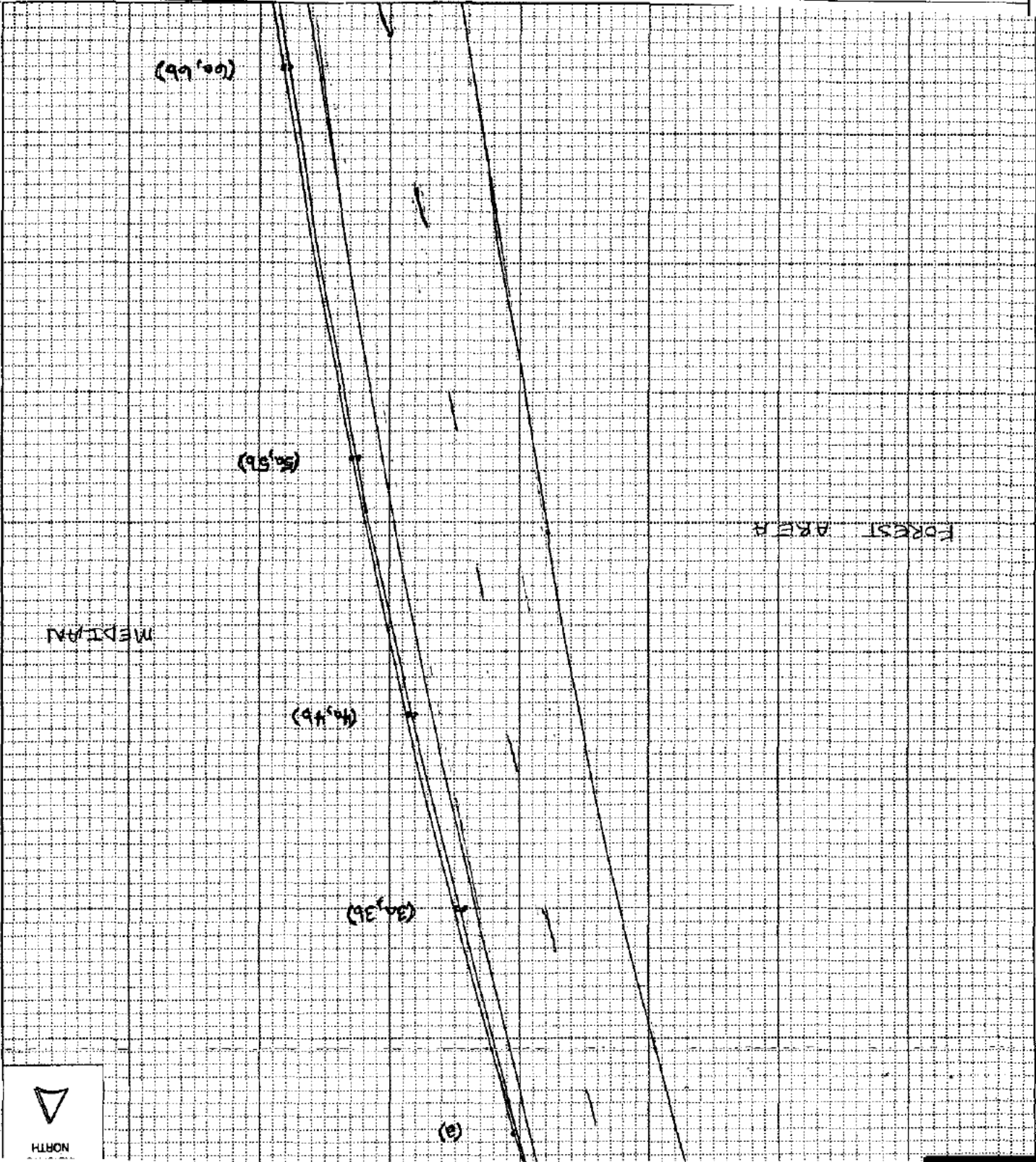
J. Harold

ID. NUMBER

6393

ARIZONA TRAFFIC ACCIDENT REPORT SUPPLEMENT FORWARD COPY TO ACCIDENT RECORDS ANALYSIS UNIT 064R ARIZONA DEPARTMENT OF TRANSPORTATION 206 S. 17TH AVE., PHOENIX, ARIZONA 85007-3233	YEAR	MONTH	DAY	REPORT ID HOUR	NDIC NO.	OFFICERS ID NO.	Agency Report Number

ACCIDENT DESCRIPTION
(Narrative)



ARIZONA TRAFFIC ACCIDENT REPORT

SUPPLEMENT

FORWARD COPY TO

ACCIDENT RECORDS ANALYSIS UNIT 064R
ARIZONA DEPARTMENT OF TRANSPORTATION
206 S. 17th AVE., PHOENIX, ARIZONA 85007-3233

YEAR MONTH DAY

1 0 0 4 0 9

REPORT ID

HOUR

1 5 0 7 0

NCIC NO.

0 7 9 9 0

OFFICERS ID NO.

0 6 3 9 3

ACCIDENT DIAGRAM

MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE

MEASUREMENTS ARE SCALED (SCALE = _____)

INDICATE NORTH



LOCATION AREA

SR-87
MP-249.1

MEDIAN AREA

100'

(1)

INDICATE

NORTH



400

(7a, 7b)

MEDIAN

FOREST AREA

3

(8a, 8b)

500

NORTH



(9a, 9b)

FOREST AREA

②
V

(10)

(11)

600

MEDIAN

(12)

(13)
- DELINEATOR

700

(14b, 14a)

NORTH



FOREST AREA

(15) ← (15b, 15a)

(16)

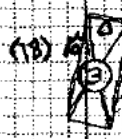
(16a)

(17b, 17a)

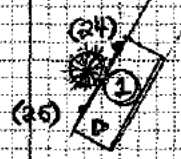
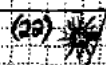
MEDIAN

300'

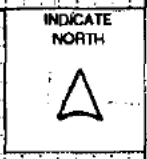
900'



(21b, 21a)



FOREST AREA



MEDIAN

6

1000



WRITTEN AND DRAWN
BY: T. HAROLD
#6393

† 01-2706 2/82
FORM A



ARIZONA DEPARTMENT OF PUBLIC SAFETY

VEHICLE REMOVAL REPORT

DATE 04/09/10 DAY OF WEEK (checkbox) Sun. Tue. Thu. Sat. Mon. Wed. Fri.

LICENSE/VEHICLE DESCRIPTION STATE AZ YEAR 10 TYPE 963 FRONT PLATE NEAR PLATE

IN/OUTSIDE CITY Parson COUNTY Gila

VEHICLE COLOR Silver YEAR 08 MAKE Jeep MODEL SW STYLE 4D

DPS VEHICLE YES NO STOLEN VEHICLE YES NO VEHICLE CONDITION DRIVABLE WRECKED VANDALIZED STRIPPED BURNED SEE REMARKS

VEHICLE IDENTIFICATION NO. (VIN) 1J8GK48K28C SPECIAL MARKINGS (damaged, customized, etc.) ODOMETER - no 10ths.

REASON (Check all that apply) COLLISION >2 hrs. METRO FWY. >4 hrs. RURAL FWY. >48 hrs. OTHER HWY. ARREST SEIZURE MOTORIST ASSIST IMPOUND VCU VTTF OTHER

DATE OF FIRST CONTACT WITH VEHICLE 04/09/10 TIME 1516 VEHICLE REMOVAL NOTICE AFFIXED

ACCESSORY CONDITION I = Installed M = Installed but missing D = Damaged

TOWING AND STORAGE INFORMATION TOWING COMPANY NAME LaForte Towing OFFICER ID NO. FROM STICKER

DRIVING LIGHTS GRILL HOOD RIGHT SIDE MIRROR RIGHT FRONT TIRE RIGHT REAR TIRE RIGHT SIDE TRUNK LID LEFT SIDE MIRROR LEFT FRONT TIRE LEFT REAR TIRE LEFT SIDE TOP GLASS TRUNK Locked SPARE JACK MECHANICAL ENGINE BATTERY TRANSMISSION Standard Automatic INTERIOR Locked GLOVEBOX Locked CB RADIO STEREO (Tape) RADIO AM FM CLOCK FRONT SEAT REAR SEAT REARVIEW MIRROR WHEEL TYPE HUBCAPS (#) IGNITION KEY REGISTRATION CARGO CAMPER VESSEL AS LOADED

STORAGE YARD ADDRESS Parson, AZ

TIME CALLED 1600 TIME ARRIVED 16 SERVICE TYPE ROTATION AGREEMENT OPERATOR'S REQUEST

CITY Parson STATE AZ ZIP CODE Tonito Basin, AZ

VEHICLE REMOVAL AUTHORIZATION

AS OWNER/PERSON IN CHARGE OF THE ABOVE, DESCRIBED VEHICLE, I REQUEST THAT THE VEHICLE BE: REMOVED TO SECURED AND LEFT TEMPORARILY AT THE SCENE

AUTHORIZED SIGNATURE: X TIME: AM PM RELEASED TO SIGNATURE X TIME NAME / ADDRESS DRIVER'S LICENSE NO. DATE OF BIRTH CONTACT PHONE

IMPOUND INFORMATION

NOTICE: FOR VIOLATIONS OF ARS 28-3511, YOUR VEHICLE IS IMPOUNDED FOR THIRTY (30) DAYS. ANY PARTIES HAVING AN INTEREST IN THIS VEHICLE MAY WITHIN TEN (10) DAYS RECEIPT OF THIS NOTICE REQUEST A HEARING TO DETERMINE THE VALIDITY OF IMPOUNDMENT.

DRIVER / OWNER SIGNATURE X DATE TO REQUEST A HEARING CONTACT THE ARIZONA DEPARTMENT OF PUBLIC SAFETY AT: ADDRESS PHONE ARIZONA

REMARKS / PERSONAL PROPERTY LEFT IN VEHICLE

Personal Items, clothing -> retrieved by (next of kin)

OFFICER'S NAME J. Harold BADGE NO. 0393 LOCATION CODE 21110100



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IMG_5669.JPG



IMG_5670.JPG



IMG_5671.JPG



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IMG_5701.JPG



IMG_5702.JPG



IMG_5703.JPG



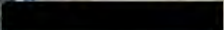
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JOHNSON000036



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JOHNSON000037

DP14-004

CHRYSLER

9/15/2014

Legals and Cust Complaints

PUBLIC



NOTICE OF CLAIM

RECEIVED

MAY 01 REC'D

SPECIAL INVESTIGATIONS

April 30, 2009

CERTIFIED/RETURN RECEIPT

CHRYSLER
1000 CHRYSLER DRIVE
CIMS: 485-13-62
AUBURN HILLS MI 48326

RE: Insured: [REDACTED]
Date of Loss: 4/27/2009
Our Claim Number: [REDACTED]
Your Product: 2008 DODGE RAM 2500
Your Case #: [REDACTED]

WARNING: YOUR ACCESS TO EVIDENCE MAY BE LIMITED UNLESS YOU RESPOND IMMEDIATELY!!!

YOU HAVE 8 DAYS FROM THE DATE OF THIS NOTICE TO EXAMINE THE AUTO BEFORE IT IS SUBSTANTIALLY CHANGED OR OTHERWISE DISRUPTED. PLEASE CONTACT US BY 5.8.09.

TO Legal Dept:

YOU ARE HEREBY PUT ON NOTICE that we, SECURA Insurance Company, on its own behalf and that of its insured, also identified herein above, may bring a claim against your company for property damage and injury arising out of an auto accident which occurred involving a 2008 Dodge Ram 2500 which caused damages currently believed to exceed \$1.9 million.

Our preliminary investigation indicates that your company, either alone or in conjunction with others, may be responsible for this loss inasmuch as the available evidence and preliminary investigation either points to a defect in your product as a cause of this loss, or does not allow us to rule out a defect in your product as a cause of this loss.

You are hereby given the opportunity to have a representative of your company examine the auto before restoration is begun. Due to our insured's need, there is only a limited period of time the 2008 Dodge can be left undisturbed for this examination. Accordingly, questions regarding this Notice, this claim, or directions to the scene can be directed to Attorney Rene Lapiere, at 4280 Sergeant Rd, Suite 290, Sioux City, IA 51106, telephone number 712-252-1866 ext: 245.

In addition to service via the U.S. Post office, this notice is also being sent via facsimile. You are strongly encouraged to acknowledge receipt of this Notice by return phone call as soon as possible if you wish to preserve your access to the auto or other evidence. However, your failure to acknowledge receipt of this Notice will not result in an extension of the time deadline set forth hereinabove, nor will it delay the time scheduled for restoration, cleanup, or any other material changes in the scene.

Sincerely,



Donna Vander Velden
Subrogation Representative
920.739.3161 Ext 4245

IMPORTANT!!

This is an important legal notice. Failure to respond to this Notice is likely to result in loss of your opportunity to view the scene and may result in the destruction of evidence necessary to any subsequent investigation or defense of the claim identified hereinabove. The time deadline specified herein above will expire without further notice or opportunity to examine the scene unless otherwise agreed in writing. The above information is offered solely to provide notice and should not be construed as legal advice. You are urged to consult your own legal counsel to answer any questions about this Notice or the above-referenced claim. We suggest you turn this matter in to your insurance carrier.

DP14-004

CHRYSLER

9/15/2014

Legals and Cust Complaints

PUBLIC

IMPORTANT NOTICE: Robert Bosch LLC and the manufacturers whose vehicles are accessible using the CDR System urge end users to use the latest production release of the Crash Data Retrieval system software when viewing, printing or exporting any retrieved data from within the CDR program. Using the latest version of the CDR software is the best way to ensure that retrieved data has been translated using the most current information provided by the manufacturers of the vehicles supported by this product.

CDR File Information

User Entered VIN	1GMDV33L75D [REDACTED]
User	P Weber
Case Number	13053
EDR Data Imaging Date	Wednesday, June 30 2010
Crash Date	Monday, April 5 2010
Filename	1GMDV33L75D [REDACTED].ACM.CDR
Saved on	Wednesday, June 30 2010 at 01:13:56 PM
Collected with CDR version	Crash Data Retrieval Tool 3.4
Reported with CDR version	Crash Data Retrieval Tool 3.4
EDR Device Type	airbag control module
Event(s) recovered	Non-Deployment

Comments

No comments entered.

Data Limitations

Recorded Crash Events:

There are two types of Recorded Crash Events. The first is the Non-Deployment Event. A Non-Deployment Event records data but does not deploy the air bag(s). It contains Pre-Crash and Crash data. The SDM can store up to one Non-Deployment Event. This event may be overwritten by another Non-Deployment Event. This event will be cleared by the SDM, after approximately 250 ignition cycle. This event can be overwritten by a second Deployment Event, referred to as a Deployment Level Event, if the Non-Deployment Event is not locked. The data in the Non-Deployment Event file will be locked, if the Non-Deployment Event occurred within five seconds before a Deployment Event. A locked Non Deployment Event cannot be overwritten or cleared by the SDM. The second type of SDM recorded crash event is the Deployment Event. It also contains Pre-Crash and Crash data. The SDM can store up to two different Deployment Events, if they occur within five seconds of one another. If a Deployment Level Event occurs within five seconds after the Deployment Event, the Deployment Level Event will overwrite any non-locked Non-Deployment Event. Deployment Events cannot be overwritten or cleared by the SDM. Once the SDM has deployed an air bag, the SDM must be replaced.

Data:

- SDM Recorded Vehicle Longitudinal Velocity Change reflects the change in longitudinal velocity that the sensing system experienced during the recorded portion of the event. SDM Recorded Vehicle Longitudinal Velocity Change is the change in velocity during the recording time and is not the speed the vehicle was traveling before the event, and is also not the Barrier Equivalent Velocity. For Deployment Events, the SDM will record 100 milliseconds of data after deployment criteria is met and up to 50 milliseconds before deployment criteria is met. For Non-Deployment Events, the SDM can record up to the first 150 milliseconds of data after algorithm enable. Velocity Change data is displayed in SAE sign convention.
- Event Recording Complete will indicate if data from the recorded event has been fully written to the SDM memory or if it has been interrupted and not fully written.
- SDM Recorded Vehicle Speed accuracy can be affected by various factors, including but not limited to the following:
 - significant changes in the tire's rolling radius
 - final drive axle ratio changes
 - wheel lockup and wheel slip
- Brake Switch Circuit Status indicates the open/closed state of the brake switch circuit.
- Pre-Crash data is recorded asynchronously.
- Pre-Crash Electronic Data Validity Check Status indicates "Data Invalid" if:
 - the SDM receives a message with an "invalid" flag from the module sending the pre-crash data
 - no data is received from the module sending the pre-crash data
 - no module present to send the pre-crash data
- Driver's Belt Switch Circuit Status indicates the status of the driver's seat belt switch circuit. If the vehicle's electrical system is compromised during a crash, the state of the Driver's Belt Switch Circuit may be reported other than the actual state.
- The Time between Non-Deployment to Deployment Events is displayed in seconds. If the time between the two events is greater than five seconds, "N/A" is displayed in place of the time.
- If power to the SDM is lost during a crash event, all or part of the crash record may not be recorded.
- All data should be examined in conjunction with other available physical evidence from the vehicle and scene.

Data Source:

All SDM recorded data is measured, calculated, and stored internally, except for the following:

- Vehicle Speed, Engine Speed, and Percent Throttle data are transmitted by the Powertrain Control Module (PCM), via the

vehicle's communication network, to the SDM.

-Brake Switch Circuit Status data is transmitted by either the ABS module or the PCM, via the vehicle's communication network, to the SDM. Depending on vehicle option content, the Brake Switch Circuit Status data may not be available.

-The SDM may obtain Belt Switch Circuit Status data a number of different ways, depending on the vehicle architecture. Some switches are wired directly to the SDM, while others may obtain the data from various vehicle control modules, via the vehicle's communication network.

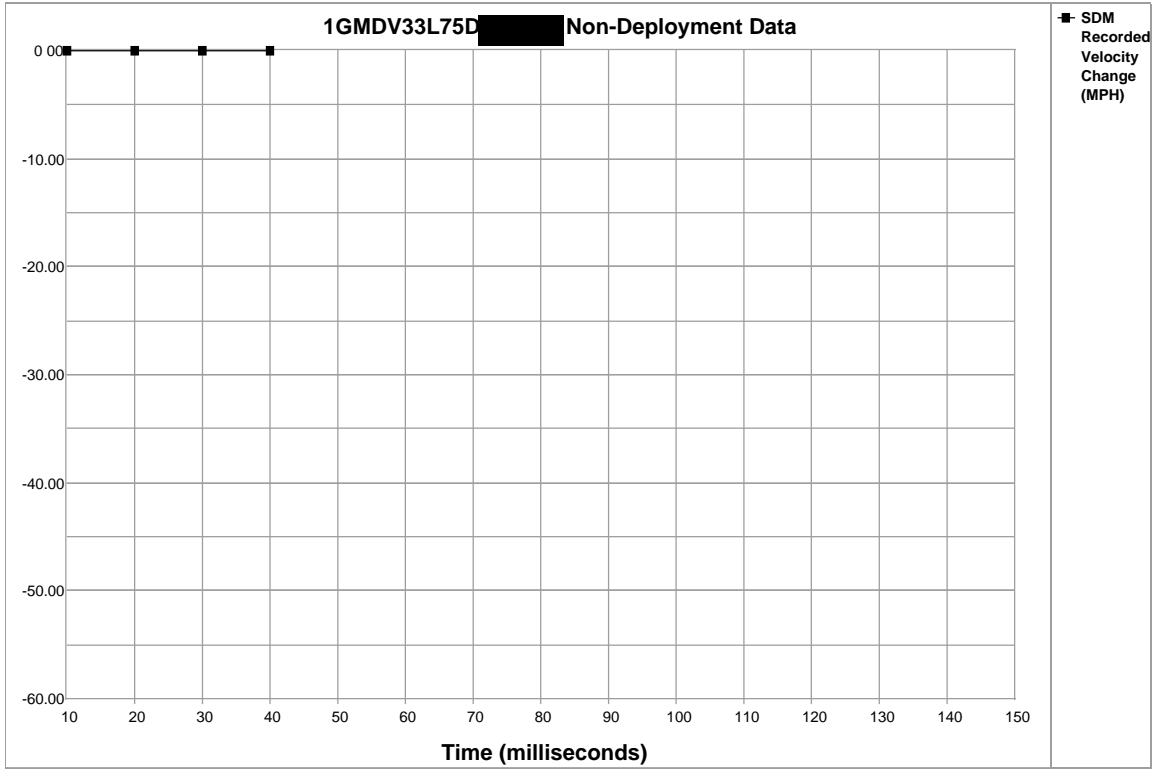
01014_SDMDW_r002

System Status At Non-Deployment

SIR Warning Lamp Status	OFF
Driver's Belt Switch Circuit Status	BUCKLED
Passenger Belt Switch Circuit Status (If Equipped)	BUCKLED
Driver Seat Position Status (If Equipped)	Forward
Passenger Seat Position Status (If Equipped)	Forward
Passenger SIR Suppression Switch Circuit Status (if equipped)	Air Bag Not Suppressed
Ignition Cycles At Non-Deployment	15785
Ignition Cycles At Investigation	15797
Maximum SDM Recorded Velocity Change (MPH)	-0.32
Algorithm Enable to Maximum SDM Recorded Velocity Change (msec)	7.5
A Deployment was Commanded Prior to this Event	No
Event Recording Complete	Yes

Seconds Before AE	Vehicle Speed (MPH)	Engine Speed (RPM)	Percent Throttle
-5	53	1472	0
-4	52	1472	5
-3	50	1728	0
-2	34	896	0
-1	24	704	0

Seconds Before AE	Brake Switch Circuit Status
-8	OFF
-7	OFF
-6	OFF
-5	OFF
-4	OFF
-3	ON
-2	ON
-1	ON



Time (milliseconds)	10	20	30	40	50	60	70	80	90	100	110	120	130	140	150
SDM Recorded Velocity Change	0.00	0.00	0.00	0.00	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Hexadecimal Data

Data that the vehicle manufacturer has specified for data retrieval is shown in the hexadecimal data section of the CDR report. The hexadecimal data section of the CDR report may contain data that is not translated by the CDR program. The control module contains additional data that is not retrievable by the CDR system.

```
$01 A0 3B 63 63 00 00
$02 C3 DE 00 00 00 00
$03 41 53 35 30 32 31
$04 4B 34 48 5A 41 31
$05 02 41 4F 4F 4A 00
$06 15 19 32 70 00 00
$10 F8 49 E0 00 00 00
$11 8F 00 00 00 00 82
$12 60 40 FF FF 00 00
$13 0A 00 00 00 00 00
$14 FF 55 ED 85 55 00
$18 81 81 82 7B 7B 7C
$1C FA FA FA FA FA FA
$1D FA FA FA FA FA FA
$1E FA FA 00 00 00 00
$1F 00 7D 00 00 00 00
$20 60 00 00 7D 80 00
$21 FF FF FF FF FF FF
$22 FF FF FF FF 00 00
$23 00 00 00 00 FF FF
$24 FF FF FF FF FF FF
$25 FF FF FF 04 00 00
$26 26 36 51 54 55 E0
$27 00 00 00 0D 00 00
$28 0B 0E 1B 17 17 00
$29 F8 4A FE 00 00 00
$2A 00 00 00 32 00 00
$2B 00 00 00 00 00 00
$2C 00 00 FF 06 00 17
$2D 00 00 00 00 00 00
$2E 00 00 00 00 00 00
$30 FF FF FF FF FF 00
$31 FF FF FF FF FF FF
$32 FF FF FF FF 00 00
$33 FF FF FF FF FF FF
$34 FF FF FF FF FF FF
$35 FF FF FF FF FF FF
$36 FF FF FF FF FF FF
$37 FF FF FF FF FF FF
$38 FF FF FF FF FF 00
$39 FF FF FF FF FF FF
$3A FF FF FF FF FF 00
$3B FF FF FF FF 00 00
$3C FF FF FF FF FF FF
$3D FF FF FF FF 00 00
$3E FF FF FF 00 00 00
$40 FF FF FF FF FF 00
$41 FF FF FF FF FF FF
$42 FF FF FF FF 00 00
$43 FF FF FF 00 00 00
$44 FF 00 00 00 00 00
$50 00 00 00 00 07 03
$51 03 AA 00 00 00 00
$60 FF FF FF FF FF FF
$61 FF 00 00 00 00 00
```


Disclaimer of Liability

The users of the CDR product and reviewers of the CDR reports and exported data shall ensure that data and information supplied is applicable to the vehicle, vehicle's system(s) and the vehicle ECU. Robert Bosch LLC and all its directors, officers, employees and members shall not be liable for damages arising out of or related to incorrect, incomplete or misinterpreted software and/or data. Robert Bosch LLC expressly excludes all liability for incidental, consequential, special or punitive damages arising from or related to the CDR data, CDR software or use thereof.

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CDR File Information

User Entered VIN	2D8HN54199R [REDACTED]
User	Bill Fischer
Case Number	
EDR Data Imaging Date	Tuesday, June 29 2010
Crash Date	Monday, April 5 2010
Filename	2D8HN54199 [REDACTED].ACM.CDR
Saved on	Tuesday, June 29 2010 at 12:36:05 PM
Collected with CDR version	Crash Data Retrieval Tool 3.4
Reported with CDR version	Crash Data Retrieval Tool 3.4
EDR Device Type	airbag control module
Event(s) recovered	Event Record 1

Comments

No comments entered.

Data Limitations

AIRBAG CONTROL MODULE (ACM) DATA LIMITATIONS:

GENERAL INFORMATION:

CAUTION: During Bench top imaging, make sure the ACM is not moved, tilted or turned over while connected to and powered by the CDR Interface Module. Also, after a CDR imaging process, wait 2 minutes after power is removed from the ACM before attempting to move the module. Not following these general ACM guidelines for bench top imaging could cause new events to be recorded in the ACM.

The ACM current fault status will be altered if the ACM is powered-up without having all of the other vehicle inputs connected (e.g., bench top imaging). This situation will occur when the CDR tool is connected directly to the ACM. This will not affect any of the stored fault data information in any of the Event Records. Always make a note in the CDR case comments page when an ACM bench top imaging process is performed.

The recorded Deployment Event will contain Pre-Crash data.

- T0 (where '0' is subscript) (-.01 sec.) is defined as the last sample point in the vehicle data buffer when the ACM commanded a deployment for all vehicles except the 2008 - 2010 Dodge Grand Caravan, 2008-2010 Chrysler Town and Country and 2009-2010 Dodge Journey. In these vehicles, T0 (where '0' is subscript) is defined as the algorithm wakeup. Please note that the algorithm wakeup may be different for front, side, and roll-over events and their associated parameters.
- The VIN is captured by the ACM and then recorded as the Original VIN after 10 consecutive ignition cycles of capturing the same number. Once it has been recorded, this number can not be modified.

CDR FILE INFORMATION:

Event(s) Recovered definitions:

- None - There are no stored events in the Airbag Control Module (ACM)
- Not Retrievable - Event Data is stored in the ACM but is not retrievable by the CDR tool.
- For Continental ACMs:
 - Event Record 1 - Data from an event is stored in the ACM (not necessarily in chronological order)
 - Event Record 2 - Data from another event is stored in the ACM (not necessarily in chronological order)
 - Event Record 3 - Data from another event is stored in the ACM (not necessarily in chronological order)
- For all other ACMs:
 - Most Recent Event - Data of the most recent event is displayed in the report
 - 1st Prior Event - Two events are stored in the ACM, Data displayed is of the first prior event.
 - 2nd Prior Event - Three events are stored in the ACM, Data displayed is of the second prior event.
 - Etc., (for modules with 3 to 5 stored events)

CDR RECORD INFORMATION:

- If power to the ACM is lost during a deployment event, all or part of the event data record may not be recorded. "Interrupted" will be

displayed for Vehicle Event Recorder Status.

- The Airbag Control Module Configuration indicates the inputs and outputs that the ACM for a particular vehicle monitors and/or controls.
- For applicable vehicles, the "Event Number" in the System Status at Event section of the report indicates the order of the events.
- For applicable vehicles, the "Total Number of Events Recorded" in the System Status at Event section of the report indicates the total number of events that the ACM has recorded.
- For applicable vehicles, a "Yes" for a particular item in the Deployment Command Data section of the report indicates that the ACM commanded the deployment of the associated device.
- Vehicle Data (Pre-Crash) is transmitted to the Airbag Control Module, by various vehicle control modules, via the vehicle's communication network.
- On 2006-2009 Dodge Ram 2500/3500, the Engine RPM recorded is limited to a maximum of 4080 RPM. On the 2008 - 2010 Dodge Grand Caravan, 2008-2010 Chrysler Town and Country and 2009-2010 Dodge Journey, the engine RPM resolution is 256 rpm. On all other vehicles, the resolution is 32 rpm.
- If a recorded event has Engine RPM equal to SNA and Speed, Vehicle Indicated equals SNA for each time stamp, then the data is default data and the event stored in the ACM is not valid.
 - The accuracy of the recorded Speed, Vehicle Indicated will be affected if the vehicle had the tire size or the final drive axle ratio changed from the factory build specifications.
 - Speed, Vehicle Indicated is reported as an average of the drive wheels.
- On the 2008 - 2010 Dodge Grand Caravan, 2008-2010 Chrysler Town and Country and 2009-2010 Dodge Journey, the vehicle speed resolution is 2 kph. On all other vehicles, the resolution is 1 kph.
- The MIL (Malfunction Indicator Lamp) Status for the various recorded systems indicates the state of the applicable malfunction indicator lamp at the time that the data was captured. Note: Some fault codes could be stored due to component/system damage from the accident.

NOTE: A StarScan Tool should be used to read any stored Diagnostic Trouble Codes (DTC's) in the various electronic modules (ACM, PCM, ABS, TCM, etc., where applicable) for use in interpretation of some vehicle specific recorded data.

VEHICLE DATA DEFINITIONS:

Vehicle Event Recorder Status definitions:

- For additional definitions, please refer to the CDR Help File Glossary
- ABS MIL status - This indicates the ABS fault indicator lamp status. It will only be illuminated when there is a fault in the ABS system. The Electronic brake module DTC's should be read and recorded for final system interpretation.
- ESP MIL status - This indicates the ESP/BAS fault indicator lamp status. It will only be illuminated when there is a fault or thermal model shutdown in the ESP system. The ESP module DTC's should be read and recorded for final system interpretation. This is only valid for vehicles equipped with ESP.
- ESP Lamp Steady State Requested - This is the status of the ESP symbol - "car with squiggly lines" indicator lamp. "Yes" indicates ESP has been turned off by the driver or has reduced performance and is not an indication of a fault in the system. This is only valid for vehicles equipped with ESP.
- ESP Lamp Flashing Requested - If "Yes", then an ESP, Traction Control or Trailer Sway Control (if equipped) event was active at the time of data capture. This is only valid for vehicles equipped with ESP.
- ESP Disabled - "Yes" indicates that ABS & ESP have been disabled by the driver or due to system performance. This is only valid for vehicles equipped with ESP.
- Traction Control Button - When the button is "ON", (driver has pushed the button), the Traction Control system is "Disabled". When the button is "OFF", the Traction Control system is "Enabled".
- ESP Active - "YES" indicates that the ESP system is intervening - with wheel specific braking/engine control. This is only valid for vehicles equipped with ESP.
- Panic Brake Assist Active - "Yes" indicates that all four of the brake circuits are under going ABS control. This is only valid for vehicles equipped with ESP.
- Steering Input (deg) if equipped:
 - Steering Input polarity is positive for right turns on:
 - o 2005 - 2007 Grand Cherokee
 - o 2006 - 2007 Commander
 - o 2005 - 2010 300, Magnum, and Charger
 - o 2008 - 2010 Challenger
 - Steering Input polarity is negative for right turns on:
 - o All other vehicles and model years not specified above
- Yaw Rate (Degrees) if equipped: All vehicles have negative yaw rate when making a right turn.
- ETC Lamp Status - Lamp "ON " indicates there is an active Electronic Throttle DTC. This is only valid for vehicles equipped with ETC.
- ETC Lamp Flashing - If "Yes", then the ETC is in the limp-in mode. This is only valid for vehicles equipped with ETC.
- Engine Torque Applied - If "No", then no engine torque output was applied (as in Park/Neutral for Automatic transmissions or clutch depressed on manual or during an ESP/Traction Control event), If "Yes", then engine torque output was applied.
- Tire 1 (2) Location - This indicates the location of the tire pressure sensor data. Default is used to indicate that the location of the tire pressure sensor is unknown or there is no tire pressure sensor in the wheel. Vehicles with Base Tire Pressure Monitoring systems will display SNA for both Tire Locations as these vehicles do not send actual pressure values across the communication bus.
- Tire 1 (2) Pressure Status - This indicates the actual pressure status of the Tire Location defined in the previous column. Possible values are LOW, NORMAL, HIGH, or SNA for this parameter. Vehicles with Base Tire Pressure Monitoring systems will display NORMAL even though these vehicles do not send actual pressure values across the communication bus.

- Tire 1 (2) Pressure (psi) - This indicates the actual tire pressure value of the Tire Location defined. Vehicles with Base Tire Pressure Monitoring systems will display N/A for this parameter as these vehicles do not send actual pressure values across the communication bus.
- Cruise Control System - "Yes" indicates that the Cruise Control system is turned on.
- Cruise Control Active - "Yes" indicates the Cruise Control system is actively controlling vehicle speed. "No" indicates the system is NOT controlling vehicle speed.

APPLICATION INFORMATION:

- 2005 - 2010 Durango's equipped with side airbags have EDR data that can be imaged by the CDR tool. Durango's not equipped with side airbags have EDR Data that might be imaged by the CDR tool and can always be imaged by the supplier.
- For 2006 MY, some Chrysler 300, Dodge Magnum, Dodge Charger, Jeep Grand Cherokee, and Jeep Commander models may contain EDR data that can not be imaged by the CDR tool.
- For 2007 MY, some PT Cruiser models may contain EDR data that can not be imaged by the CDR tool.
- EDR Data is only recorded for frontal deployments in the following vehicles:
 - 2005-2007 Durango
 - 2007 Aspen
 - 2006-2007 Ram 1500
 - 2006-2009 Ram 2500/3500 Heavy Duty
 - 2007 Caliber, Compass, Patriot
 - 2007 Sebring
 - 2007 Nitro
 - 2007 Wrangler

03001_Chrysler_r003

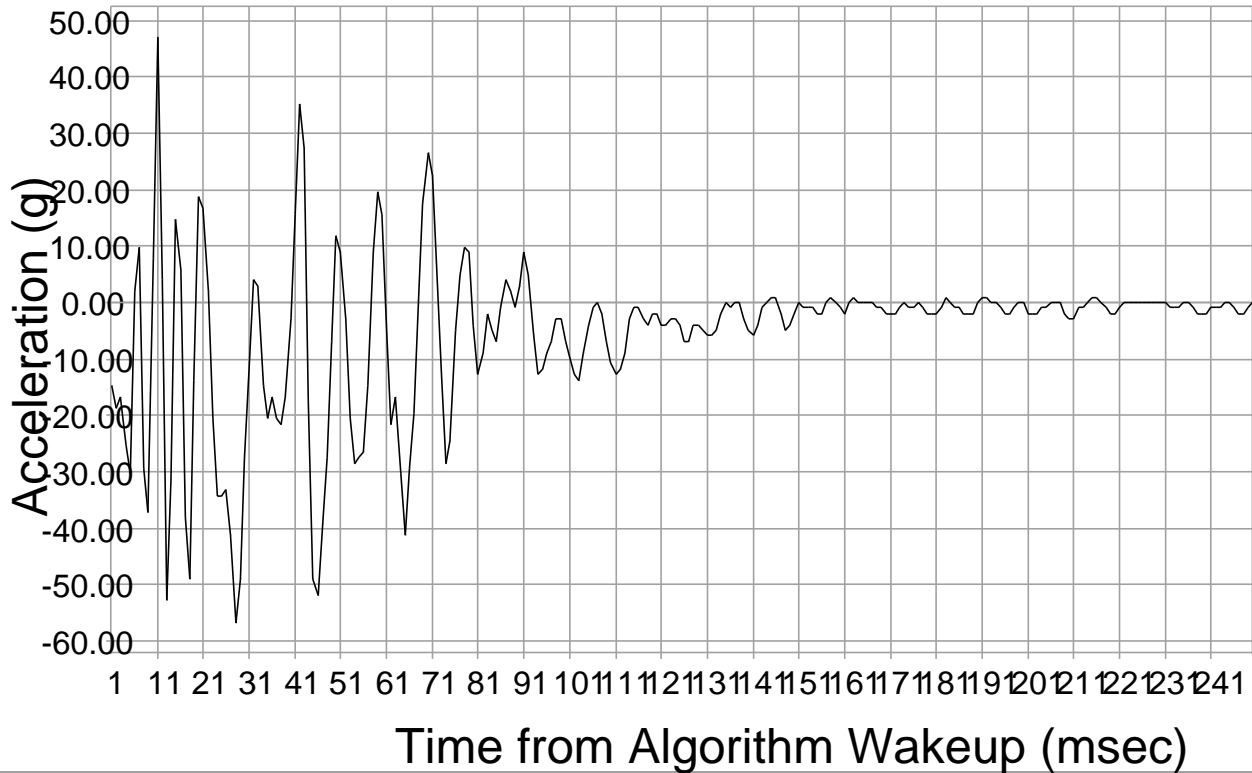
System Status at Retrieval

Original VIN	2D8HN54199R
Airbag Control Module Part Number	05094018AN
Airbag Control Module Serial Number	T19JF2958090YW
Airbag Control Module Supplier	Continental Corporation

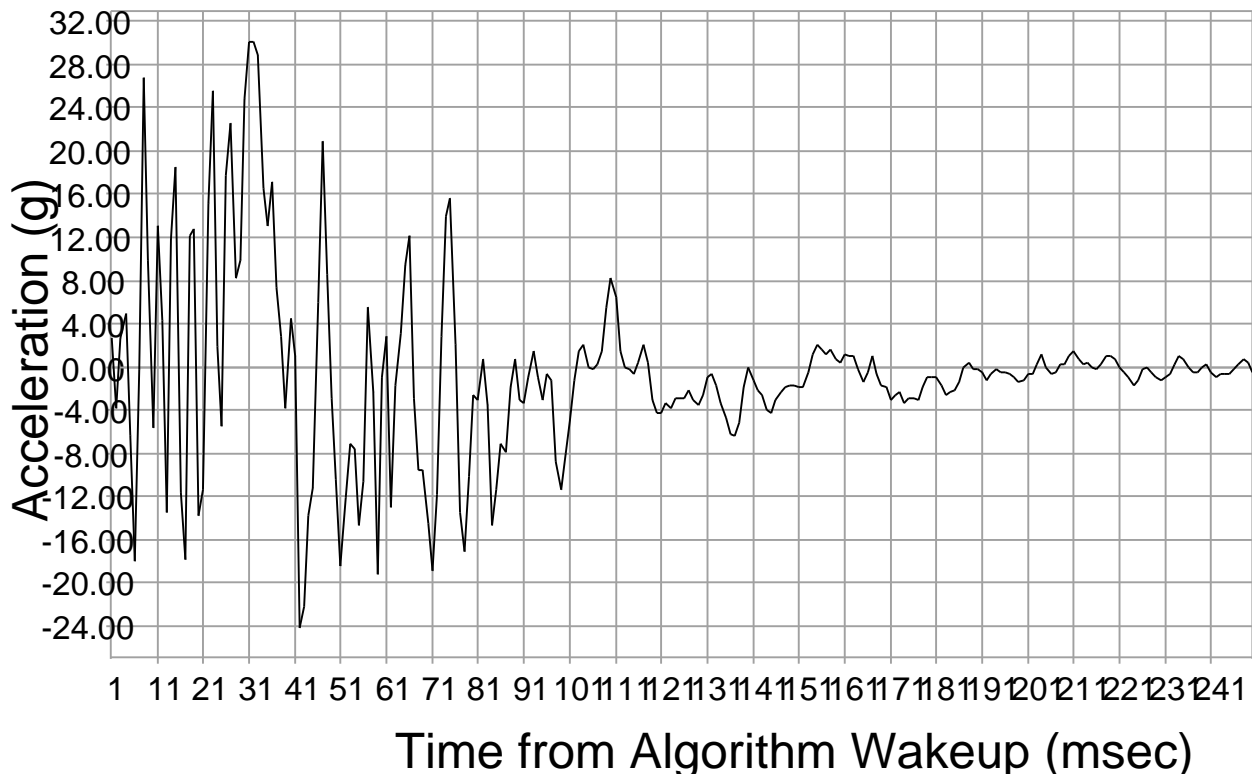
System Configuration at Retrieval

Configured for Front Driver Seatbelt Switch	No
Configured for Front Center Seatbelt Switch	No
Configured for Front Passenger Seatbelt Switch	No
Configured for 2nd Row Left Seatbelt Switch	No
Configured for 2nd Row Center Seatbelt Switch	No
Configured for 2nd Row Right Seatbelt Switch	No
Configured for 3rd Row Left Seatbelt Switch	No
Configured for 3rd Row Center Seatbelt Switch	No
Configured for 3rd Row Right Seatbelt Switch	No
Configured for Driver Inflatable Knee Bolster	No
Configured for Left Curtain #1	Yes
Configured for Right Curtain #1	Yes
Configured for Left Curtain #2	No
Configured for Right Curtain #2	No
Configured for Front Driver Seatbelt Pretensioner	Yes
Configured for Front Center Seatbelt Pretensioner	No
Configured for Front Passenger Seatbelt Pretensioner	Yes
Configured for 2nd Row Left Seatbelt Pretensioner	No
Configured for 2nd Row Center Seatbelt Pretensioner	No
Configured for 2nd Row Right Seatbelt Pretensioner	No
Configured for 3rd Row Left Seatbelt Pretensioner	No
Configured for 3rd Row Center Seatbelt Pretensioner	No
Configured for 3rd Row Right Seatbelt Pretensioner	No
Configured for Left Side Sensor #1	Yes
Configured for Left Side Sensor #2	Yes
Configured for Left Side Sensor #3	Yes
Configured for Right Side Sensor #1	Yes
Configured for Right Side Sensor #2	Yes
Configured for Right Side Sensor #3	Yes
Configured for Left Up Front Sensor	Yes
Configured for Right Up Front Sensor	Yes
Configured for Front Driver Digressive Load Limiter	No
Configured for Front Passenger Digressive Load Limiter	No
Configured for Driver Seat Track Position Sensor	Yes
Configured for Passenger Seat Track Position Sensor	No
Configured for Driver Airbag Disable Switch	No
Configured for Passenger Airbag Disable Switch	No
Configured for Passenger Occupant Classification System	No
Configured for Right Side Thorax	No
Configured for Left Side Thorax	No
Configured for Passenger Inflatable Knee Bolster	No
Configured for Passenger Belt Tension Sensor	No
Configured for Driver Belt Tension Sensor	No
Configured for Occupant Detection Sensor	No
Configured for DOC Disable Switch	No

Longitudinal Crash Pulse (Event Record 1)



Lateral Crash Pulse (Event Record 1)



Longitudinal Crash Pulse (Event Record 1)

Time from Algorithm Wakeup (msec)	Longitudinal Acceleration (g)
1	-14.71
2	-18.63
3	-16.67
4	-25.49
5	-30.39
6	1.96
7	9.80
8	-29.41
9	-37.26
10	7.84
11	47.06
12	3.92
13	-52.94
14	-31.37
15	14.71
16	5.88
17	-38.24
18	-49.02
19	-13.73
20	18.63
21	16.67
22	1.96
23	-20.59
24	-34.31
25	-34.31
26	-33.33
27	-41.18
28	-56.86
29	-49.02
30	-27.45
31	-11.76
32	3.92
33	2.94
34	-14.71
35	-20.59
36	-16.67
37	-20.59
38	-21.57
39	-16.67
40	-2.94
41	15.69
42	35.29
43	27.45
44	-17.65
45	-49.02
46	-51.96
47	-39.22
48	-27.45
49	-6.86
50	11.76

Time from Algorithm Wakeup (msec)	Longitudinal Acceleration (g)
51	8.82
52	-2.94
53	-20.59
54	-28.43
55	-27.45
56	-26.47
57	-14.71
58	8.82
59	19.61
60	15.69
61	-3.92
62	-21.57
63	-16.67
64	-30.39
65	-41.18
66	-29.41
67	-19.61
68	0.00
69	17.65
70	26.47
71	22.55
72	4.90
73	-12.75
74	-28.43
75	-24.51
76	-4.90
77	4.90
78	9.80
79	8.82
80	-3.92
81	-12.75
82	-8.82
83	-1.96
84	-4.90
85	-6.86
86	-0.98
87	3.92
88	1.96
89	-0.98
90	2.94
91	8.82
92	4.90
93	-5.88
94	-12.75
95	-11.76
96	-8.82
97	-6.86
98	-2.94
99	-2.94
100	-6.86

Time from Algorithm Wakeup (msec)	Longitudinal Acceleration (g)
101	-9.80
102	-12.75
103	-13.73
104	-8.82
105	-3.92
106	-0.98
107	0.00
108	-1.96
109	-6.86
110	-10.78
111	-12.75
112	-11.76
113	-8.82
114	-2.94
115	-0.98
116	-0.98
117	-2.94
118	-3.92
119	-1.96
120	-1.96
121	-3.92
122	-3.92
123	-2.94
124	-2.94
125	-3.92
126	-6.86
127	-6.86
128	-3.92
129	-3.92
130	-4.90
131	-5.88
132	-5.88
133	-4.90
134	-1.96
135	0.00
136	-0.98
137	0.00
138	0.00
139	-2.94
140	-4.90
141	-5.88
142	-3.92
143	-0.98
144	0.00
145	0.98
146	0.98
147	-1.96
148	-4.90
149	-3.92
150	-1.96

Longitudinal Crash Pulse (Event Record 1)

Time from Algorithm Wakeup (msec)	Longitudinal Acceleration (g)	Time from Algorithm Wakeup (msec)	Longitudinal Acceleration (g)
151	0.00	201	-1.96
152	-0.98	202	-1.96
153	-0.98	203	-1.96
154	-0.98	204	-0.98
155	-1.96	205	-0.98
156	-1.96	206	0.00
157	0.00	207	0.00
158	0.98	208	0.00
159	0.00	209	-1.96
160	-0.98	210	-2.94
161	-1.96	211	-2.94
162	0.00	212	-0.98
163	0.98	213	-0.98
164	0.00	214	0.00
165	0.00	215	0.98
166	0.00	216	0.98
167	0.00	217	0.00
168	-0.98	218	-0.98
169	-0.98	219	-1.96
170	-1.96	220	-1.96
171	-1.96	221	-0.98
172	-1.96	222	0.00
173	-0.98	223	0.00
174	0.00	224	0.00
175	-0.98	225	0.00
176	-0.98	226	0.00
177	0.00	227	0.00
178	-0.98	228	0.00
179	-1.96	229	0.00
180	-1.96	230	0.00
181	-1.96	231	0.00
182	-0.98	232	-0.98
183	0.98	233	-0.98
184	0.00	234	-0.98
185	-0.98	235	0.00
186	-0.98	236	0.00
187	-1.96	237	-0.98
188	-1.96	238	-1.96
189	-1.96	239	-1.96
190	0.00	240	-1.96
191	0.98	241	-0.98
192	0.98	242	-0.98
193	0.00	243	-0.98
194	0.00	244	0.00
195	-0.98	245	0.00
196	-1.96	246	-0.98
197	-1.96	247	-1.96
198	-0.98	248	-1.96
199	0.00	249	-0.98
200	0.00	250	0.00

Lateral Crash Pulse (Event Record 1)

Time from Algorithm Wakeup (msec)	Lateral Acceleration (g)
1	2.60
2	-3.79
3	2.60
4	4.97
5	-6.39
6	-17.99
7	-0.24
8	26.75
9	9.94
10	-5.68
11	13.02
12	4.26
13	-13.49
14	11.84
15	18.47
16	-11.60
17	-17.76
18	12.07
19	12.78
20	-13.73
21	-11.36
22	15.15
23	25.57
24	1.89
25	-5.45
26	17.76
27	22.49
28	8.29
29	9.94
30	24.86
31	30.07
32	30.07
33	28.88
34	16.57
35	13.02
36	17.05
37	7.34
38	2.84
39	-3.79
40	4.50
41	0.95
42	-24.15
43	-22.25
44	-13.73
45	-11.13
46	5.92
47	20.83
48	8.52
49	-2.84
50	-10.42

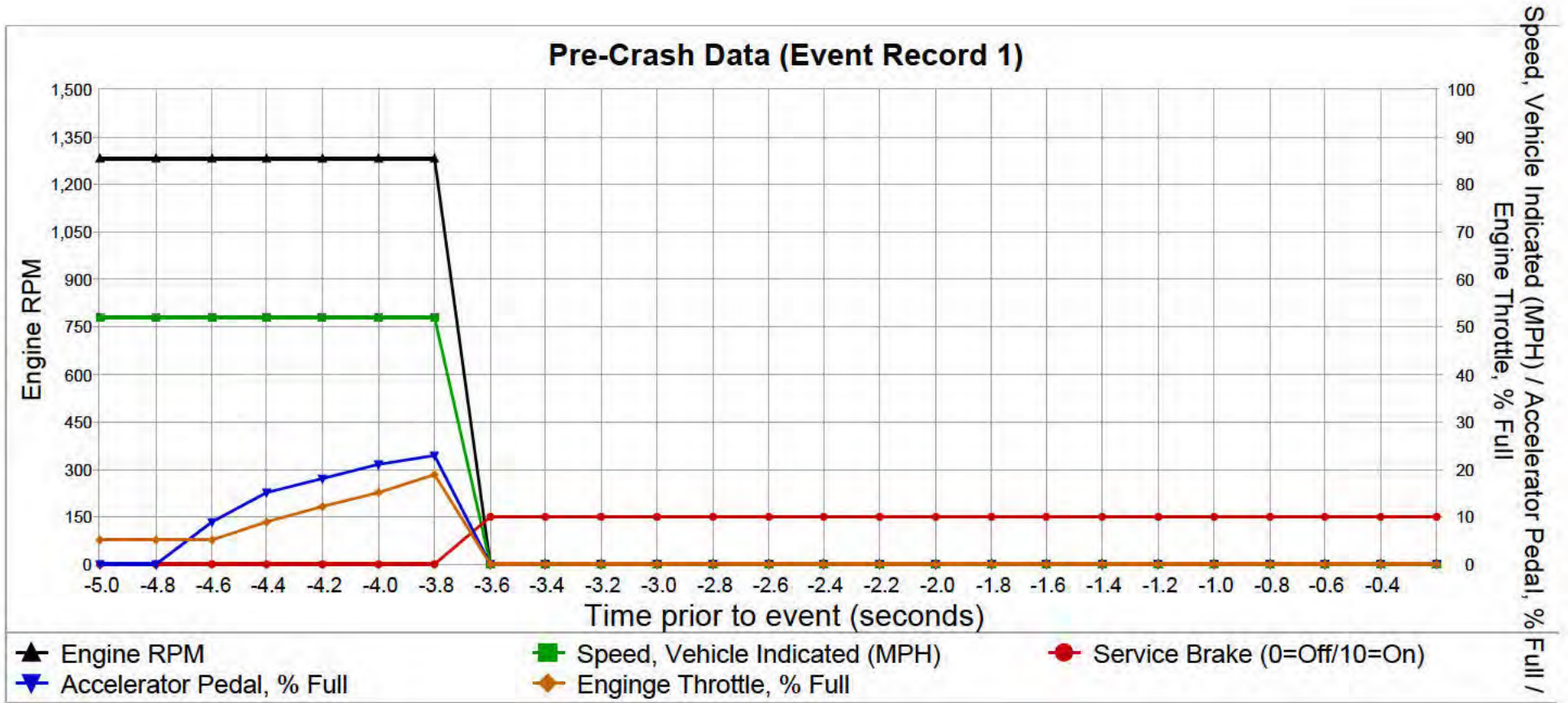
Time from Algorithm Wakeup (msec)	Lateral Acceleration (g)
51	-18.47
52	-12.07
53	-7.10
54	-7.58
55	-14.68
56	-10.65
57	5.45
58	-2.37
59	-19.18
60	-0.95
61	2.84
62	-13.02
63	-1.66
64	3.08
65	9.47
66	12.07
67	-2.84
68	-9.47
69	-9.47
70	-14.44
71	-18.94
72	-11.84
73	2.84
74	13.97
75	15.62
76	2.13
77	-13.49
78	-17.05
79	-10.18
80	-2.60
81	-3.08
82	0.71
83	-3.55
84	-14.68
85	-11.36
86	-7.10
87	-7.81
88	-1.89
89	0.71
90	-3.08
91	-3.31
92	-0.95
93	1.42
94	-0.95
95	-3.08
96	-0.71
97	-1.18
98	-8.76
99	-11.36
100	-8.05

Time from Algorithm Wakeup (msec)	Lateral Acceleration (g)
101	-4.97
102	-1.18
103	1.42
104	2.13
105	0.00
106	-0.24
107	0.24
108	1.42
109	5.45
110	8.29
111	6.39
112	1.42
113	0.00
114	-0.24
115	-0.71
116	0.47
117	2.13
118	0.47
119	-3.08
120	-4.26
121	-4.26
122	-3.31
123	-3.79
124	-2.84
125	-2.84
126	-2.84
127	-2.13
128	-3.08
129	-3.55
130	-2.60
131	-0.95
132	-0.71
133	-1.66
134	-3.31
135	-4.73
136	-6.16
137	-6.39
138	-5.21
139	-1.89
140	0.00
141	-1.18
142	-2.13
143	-2.60
144	-4.02
145	-4.26
146	-3.08
147	-2.37
148	-1.89
149	-1.66
150	-1.66

Lateral Crash Pulse (Event Record 1)

Time from Algorithm Wakeup (msec)	Lateral Acceleration (g)
151	-1.89
152	-1.89
153	-0.47
154	1.18
155	2.13
156	1.66
157	1.18
158	1.66
159	0.71
160	0.47
161	1.18
162	0.95
163	0.95
164	-0.24
165	-1.42
166	-0.47
167	0.95
168	-0.71
169	-1.66
170	-1.89
171	-3.08
172	-2.60
173	-2.37
174	-3.31
175	-2.84
176	-2.84
177	-3.08
178	-1.89
179	-0.95
180	-0.95
181	-0.95
182	-1.66
183	-2.60
184	-2.37
185	-2.13
186	-1.42
187	0.00
188	0.47
189	-0.24
190	-0.24
191	-0.47
192	-1.18
193	-0.71
194	-0.24
195	-0.47
196	-0.47
197	-0.71
198	-0.95
199	-1.42
200	-1.18

Time from Algorithm Wakeup (msec)	Lateral Acceleration (g)
201	-0.71
202	-0.71
203	0.24
204	1.18
205	0.00
206	-0.71
207	-0.47
208	0.24
209	0.24
210	0.95
211	1.42
212	0.71
213	0.24
214	0.47
215	0.00
216	-0.24
217	0.24
218	0.95
219	0.95
220	0.71
221	0.00
222	-0.47
223	-0.95
224	-1.66
225	-1.18
226	-0.24
227	0.00
228	-0.47
229	-0.95
230	-1.18
231	-0.95
232	-0.71
233	0.24
234	0.95
235	0.71
236	0.00
237	-0.47
238	-0.47
239	0.00
240	0.24
241	-0.47
242	-0.95
243	-0.71
244	-0.71
245	-0.71
246	-0.24
247	0.24
248	0.71
249	0.47
250	-0.47



Pre-Crash Data (Event Record 1 - table 1 of 5)

(the most recent sampled values are recorded prior to the event)

Time Stamp (sec)	Vehicle Event Recorder Status	Engine RPM	Speed, Vehicle Indicated (MPH [km/h])	Engine Throttle, % Full	Accelerator Pedal, % Full	Raw Manifold Pressure (kPa)	Service Brake	Brake Switch #2 Status	Brake Lamps On
-5.0	Interrupted	1,280	52 [84]	4.7	0.0	30	Off	Open	No
-4.8	Interrupted	1,280	52 [84]	4.7	0.0	30	Off	Open	No
-4.6	Interrupted	1,280	52 [84]	4.7	9.1	28	Off	Open	No
-4.4	Interrupted	1,280	52 [84]	9.4	15.4	37	Off	Open	No
-4.2	Interrupted	1,280	52 [84]	11.8	18.1	62	Off	Open	No
-4.0	Interrupted	1,280	52 [84]	14.6	20.9	79	Off	Open	No
-3.8	Interrupted	1,280	52 [84]	18.9	22.8	90	Off	Open	No
-3.6	Interrupted	SNA	SNA	SNA	SNA	SNA	On	Closed	SNA
-3.4	Interrupted	SNA	SNA	SNA	SNA	SNA	On	Closed	SNA
-3.2	Interrupted	SNA	SNA	SNA	SNA	SNA	On	Closed	SNA
-3.0	Interrupted	SNA	SNA	SNA	SNA	SNA	On	Closed	SNA
-2.8	Interrupted	SNA	SNA	SNA	SNA	SNA	On	Closed	SNA
-2.6	Interrupted	SNA	SNA	SNA	SNA	SNA	On	Closed	SNA
-2.4	Interrupted	SNA	SNA	SNA	SNA	SNA	On	Closed	SNA
-2.2	Interrupted	SNA	SNA	SNA	SNA	SNA	On	Closed	SNA
-2.0	Interrupted	SNA	SNA	SNA	SNA	SNA	On	Closed	SNA
-1.8	Interrupted	SNA	SNA	SNA	SNA	SNA	On	Closed	SNA
-1.6	Interrupted	SNA	SNA	SNA	SNA	SNA	On	Closed	SNA
-1.4	Interrupted	SNA	SNA	SNA	SNA	SNA	On	Closed	SNA
-1.2	Interrupted	SNA	SNA	SNA	SNA	SNA	On	Closed	SNA
-1.0	Interrupted	SNA	SNA	SNA	SNA	SNA	On	Closed	SNA
-0.8	Interrupted	SNA	SNA	SNA	SNA	SNA	On	Closed	SNA
-0.6	Interrupted	SNA	SNA	SNA	SNA	SNA	On	Closed	SNA
-0.4	Interrupted	SNA	SNA	SNA	SNA	SNA	On	Closed	SNA
-0.2	Interrupted	SNA	SNA	SNA	SNA	SNA	On	Closed	SNA

Pre-Crash Data (Event Record 1 - table 2 of 5)

(the most recent sampled values are recorded prior to the event)

Time Stamp (sec)	Panic Brake Assist Active (if equip.)	ABS MIL (if equip.)	ESP MIL (if equip.)	ESP Lamp (if equip.)	ESP Lamp Flashing Requested (if equip.)	ESP Disabled (if equip.)	Traction Control Button (if equip.)	ESP Active (if equip.)
-5.0	No	Off	Off	No	No	No	Off	Yes
-4.8	No	Off	Off	No	No	No	Off	Yes
-4.6	No	Off	Off	No	No	No	Off	Yes
-4.4	No	Off	Off	No	No	No	Off	Yes
-4.2	No	Off	Off	No	No	No	Off	Yes
-4.0	No	Off	Off	No	No	No	Off	Yes
-3.8	No	Off	Off	No	No	No	Off	Yes
-3.6	Yes	On	On	Yes	Yes	Yes	On	Yes
-3.4	Yes	On	On	Yes	Yes	Yes	On	Yes
-3.2	Yes	On	On	Yes	Yes	Yes	On	Yes
-3.0	Yes	On	On	Yes	Yes	Yes	On	Yes
-2.8	Yes	On	On	Yes	Yes	Yes	On	Yes
-2.6	Yes	On	On	Yes	Yes	Yes	On	Yes
-2.4	Yes	On	On	Yes	Yes	Yes	On	Yes
-2.2	Yes	On	On	Yes	Yes	Yes	On	Yes
-2.0	Yes	On	On	Yes	Yes	Yes	On	Yes
-1.8	Yes	On	On	Yes	Yes	Yes	On	Yes
-1.6	Yes	On	On	Yes	Yes	Yes	On	Yes
-1.4	Yes	On	On	Yes	Yes	Yes	On	Yes
-1.2	Yes	On	On	Yes	Yes	Yes	On	Yes
-1.0	Yes	On	On	Yes	Yes	Yes	On	Yes
-0.8	Yes	On	On	Yes	Yes	Yes	On	Yes
-0.6	Yes	On	On	Yes	Yes	Yes	On	Yes
-0.4	Yes	On	On	Yes	Yes	Yes	On	Yes
-0.2	Yes	On	On	Yes	Yes	Yes	On	Yes

Pre-Crash Data (Event Record 1 - table 3 of 5)

(the most recent sampled values are recorded prior to the event)

Time Stamp (sec)	Steering Input (deg) (if equip.)	Yaw Rate (deg/sec) (if equip.)	Wheel Speed LF (RPM) (if equip.)	Wheel Speed RF (RPM) (if equip.)	Wheel Speed LR (RPM) (if equip.)	Wheel Speed RR (RPM) (if equip.)
-5.0	4	0	668	667	664	666
-4.8	4	0	666	665	663	664
-4.6	3	0	663	666	661	662
-4.4	3	0	662	664	660	661
-4.2	3	0	663	664	660	659
-4.0	3	0	666	665	661	660
-3.8	Invalid	0	664	666	664	664
-3.6	Invalid	SNA	SNA	SNA	SNA	SNA
-3.4	Invalid	SNA	SNA	SNA	SNA	SNA
-3.2	Invalid	SNA	SNA	SNA	SNA	SNA
-3.0	Invalid	SNA	SNA	SNA	SNA	SNA
-2.8	Invalid	SNA	SNA	SNA	SNA	SNA
-2.6	Invalid	SNA	SNA	SNA	SNA	SNA
-2.4	Invalid	SNA	SNA	SNA	SNA	SNA
-2.2	Invalid	SNA	SNA	SNA	SNA	SNA
-2.0	Invalid	SNA	SNA	SNA	SNA	SNA
-1.8	Invalid	SNA	SNA	SNA	SNA	SNA
-1.6	Invalid	SNA	SNA	SNA	SNA	SNA
-1.4	Invalid	SNA	SNA	SNA	SNA	SNA
-1.2	Invalid	SNA	SNA	SNA	SNA	SNA
-1.0	Invalid	SNA	SNA	SNA	SNA	SNA
-0.8	Invalid	SNA	SNA	SNA	SNA	SNA
-0.6	Invalid	SNA	SNA	SNA	SNA	SNA
-0.4	Invalid	SNA	SNA	SNA	SNA	SNA
-0.2	Invalid	SNA	SNA	SNA	SNA	SNA

Pre-Crash Data (Event Record 1 - table 4 of 5)

(the most recent sampled values are recorded prior to the event)

Time Stamp (sec)	ETC Lamp	ETC Lamp Flashing	Engine Torque Applied	Shift Gear Position (if equip.)	Cruise Control System	Cruise Control Active
-5.0	Off	No	Yes	Drive	Off	No
-4.8	Off	No	Yes	Drive	Off	No
-4.6	Off	No	Yes	Drive	Off	No
-4.4	Off	No	Yes	Drive	Off	No
-4.2	Off	No	Yes	Drive	Off	No
-4.0	Off	No	Yes	Drive	Off	No
-3.8	Off	No	Yes	Drive	Off	No
-3.6	On	Yes	Yes	SNA	On	Yes
-3.4	On	Yes	Yes	SNA	On	Yes
-3.2	On	Yes	Yes	SNA	On	Yes
-3.0	On	Yes	Yes	SNA	On	Yes
-2.8	On	Yes	Yes	SNA	On	Yes
-2.6	On	Yes	Yes	SNA	On	Yes
-2.4	On	Yes	Yes	SNA	On	Yes
-2.2	On	Yes	Yes	SNA	On	Yes
-2.0	On	Yes	Yes	SNA	On	Yes
-1.8	On	Yes	Yes	SNA	On	Yes
-1.6	On	Yes	Yes	SNA	On	Yes
-1.4	On	Yes	Yes	SNA	On	Yes
-1.2	On	Yes	Yes	SNA	On	Yes
-1.0	On	Yes	Yes	SNA	On	Yes
-0.8	On	Yes	Yes	SNA	On	Yes
-0.6	On	Yes	Yes	SNA	On	Yes
-0.4	On	Yes	Yes	SNA	On	Yes
-0.2	On	Yes	Yes	SNA	On	Yes

Pre-Crash Data (Event Record 1 - table 5 of 5)

(the most recent sampled values are recorded prior to the event)

Time Stamp (sec)	Tire Pressure Monitor Faults (if equip.)	Tire 1 Location (if equip.)	Tire 1 Pressure Status (if equip.)	Tire 1 Pressure (psi) (if equip.)	Tire 2 Location (if equip.)	Tire 2 Pressure Status (if equip.)	Tire 2 Pressure (psi) (if equip.)
-5.0	No	LF	Normal	37	RF	Normal	36
-4.8	No	LR	Normal	37	RR	Normal	36
-4.6	No	LR	Normal	37	RR	Normal	36
-4.4	No	LR	Normal	37	RR	Normal	36
-4.2	No	LR	Normal	37	RR	Normal	36
-4.0	No	LR	Normal	37	RR	Normal	36
-3.8	No	SNA	SNA	SNA	SNA	SNA	SNA
-3.6	Yes	SNA	SNA	SNA	SNA	SNA	SNA
-3.4	Yes	SNA	SNA	SNA	SNA	SNA	SNA
-3.2	Yes	SNA	SNA	SNA	SNA	SNA	SNA
-3.0	Yes	SNA	SNA	SNA	SNA	SNA	SNA
-2.8	Yes	SNA	SNA	SNA	SNA	SNA	SNA
-2.6	Yes	SNA	SNA	SNA	SNA	SNA	SNA
-2.4	Yes	SNA	SNA	SNA	SNA	SNA	SNA
-2.2	Yes	SNA	SNA	SNA	SNA	SNA	SNA
-2.0	Yes	SNA	SNA	SNA	SNA	SNA	SNA
-1.8	Yes	SNA	SNA	SNA	SNA	SNA	SNA
-1.6	Yes	SNA	SNA	SNA	SNA	SNA	SNA
-1.4	Yes	SNA	SNA	SNA	SNA	SNA	SNA
-1.2	Yes	SNA	SNA	SNA	SNA	SNA	SNA
-1.0	Yes	SNA	SNA	SNA	SNA	SNA	SNA
-0.8	Yes	SNA	SNA	SNA	SNA	SNA	SNA
-0.6	Yes	SNA	SNA	SNA	SNA	SNA	SNA
-0.4	Yes	SNA	SNA	SNA	SNA	SNA	SNA
-0.2	Yes	SNA	SNA	SNA	SNA	SNA	SNA

Hexadecimal Data

Data that the vehicle manufacturer has specified for data retrieval is shown in the hexadecimal data section of the CDR report. The hexadecimal data section of the CDR report may contain data that is not translated by the CDR program. The control module contains additional data that is not retrievable by the CDR system.

```
5A 87 03 79 03 03 FF 08 23 08 19 00 30 35 30 39 34 30 31 38 41 4E
5A 88 32 44 38 48 4E 35 34 31 39 39 52 35 38 36 38 36 37
5A 90 32 44 38 48 4E 35 34 31 39 39 52 35 38 36 38 36 37
61 0D FF
61 E1 54 31 39 4A 46 32 39 35 38 30 39 30 59 57
61 EA 00 98 02 FF C0 D1 C0
71 02 01 00 66 00 05 2A 00 05 33 05 30 05 38 05 35 80 53 00 00 00 00 00 26 D9 16 0A 26 0C
00 C0 00 44 00 01 25 02 24 00 FF 00 10 08 00 FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF
71 02 01 01 66 00 05 2A 00 05 2F 05 2E 05 33 05 32 80 63 00 00 00 00 00 26 D9 1C 0D 26 0C
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71 02 01 02 66 00 05 2A 00 05 2B 05 29 05 2E 05 33 80 51 00 00 00 00 00 26 D9 39 00 23 0C
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71 02 01 03 66 00 05 2A 00 05 2A 05 27 05 2C 05 2F 80 51 00 00 00 00 00 32 CD 47 24 2E 18
27 C0 00 44 00 03 25 04 24 00 FF 00 10 07 00 FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF
71 02 01 04 66 00 05 2A 00 05 26 05 28 05 2E 05 2F 80 44 00 00 00 00 00 38 C7 4F 27 4E 1E
2E C0 00 44 00 03 25 04 24 00 FF 00 10 06 00 FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF
71 02 01 05 66 00 05 2A 00 05 28 05 2A 05 33 05 31 80 4A 00 00 00 00 00 3F C1 56 2B 63 25
35 C0 00 44 00 03 25 04 24 00 FF 00 10 06 00 FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF
71 02 01 06 66 00 05 2A 00 05 2F 05 2F 05 2F 05 34 80 4A 00 00 00 00 00 4A B5 5A 2D 71 30
3A C0 00 44 00 FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF
71 02 01 07 66 FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF
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71 02 01 08 66 FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF FF
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FF FF

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71 02 03 16 FF
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71 02 03 18 FF
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71 05 01 66 80 0F 13 11 1A 1F 7E 76 1E 26 78 50 7C 36 20 71 7A 27 32 0E 6D 6F 7E 15 23 23
22 2A 3A 32 1C 0C 7C 7D 0F 15 11 15 16 11 03 70 5C 64 12 32 35 28 1C 07 74 77 03 15 1D 1C
1B 0F 77 6C 70 04 16 11 1F 2A 1E 14 00 6E 65 69 7B 0D 1D 19 05 7B 76 77 04 0D 09 02 05 07
01 7C 7E 01 7D 77 7B 06 0D 0C 09 07 03 03 07 0A 0D 0E 09 04 01 00 02 07 0B 0D 0C 09 03 01
01 03 04 02 02 04 04 03 03 04 07 07 04 04 05 06 06 05 02 00 01 00 00 03 05 06 04 01 00 7F
7F 02 05 04 02 00 01 01 01 02 02 00 7F 00 01 02 00 7F 00 00 00 00 01 01 02 02 02 01 00 01
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71 05 02 FF 80 7F
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71 05 03 FF 80 7F
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7F 7F



PO BOX 970910
COCONUT CREEK, FL 33097
Tel: 954-949-3160 • Fax: 954-418-0946
May 18, 2010

Chrysler Group LLC
Office of the General Counsel

JUN 02 2010

By W. J. [Signature] Mail/Reg. Agent/
Sec. of State/Proc. Server

VIA CERTIFIED AND REGULAR MAIL

Chrysler Corporation
Attn: Special Investigations
PO Box 21-8004
Auburn Hills, MI 48321-8004

RECEIVED
MAY 24 2010
SPECIAL INVESTIGATIONS

RE: Your Claim No. : Unknown
Date of Loss : 4/5/10
Vehicle : 2009 Dodge Grand Caravan
VIN : 2D8HN54199R [Redacted]
Our File No. : [Redacted]

Dear Sirs:

Please be advised this office handles claims for [Redacted] of Florida, LLC (hereinafter "[Redacted]").

The above referenced accident resulted in the death of the [Redacted] as well as injuries to his passengers. The attorney representing the renter and passengers has asked to inspect the Enterprise vehicle and download the electronic data.

It is our intention to have the vehicle inspected on or after June 21, 2010. Please contact me upon receipt of this letter to inform me if you would like to have a representative attend the inspection or if you wish to arrange for your own independent inspection.

Enterprise reserves all rights of recovery relating to inspection costs, loss of use and storage fees which continue to increase each day the vehicle is held.

Please contact me at 954-949-3199 to discuss this matter further.

Sincerely,

Michael K. Willens
Sr. Liability Administrator
ELCO Administrative Services Company
Michael.k.willens@ehi.com





PO BOX 9709 10
COCONUT CREEK, FL 33097



02 1P
0004147212 MAY 18 2010
PITNEY BOWES
\$ 000.440
MAILED FROM ZIP CODE 33073

Chrysler Corporation
Attn: Special Investigations
PO Box 21-8004
Auburn Hills, MI 48321-8004

48321+8004



FLORIDA TRAFFIC CRASH REPORT LONG FORM

MAIL TO DEPT OF HIGHWAY SAFETY & MOTOR VEHICLES, TRAFFIC CRASH
RECORDS, NEIL KIRKMAN BUILDING, TALLAHASSEE, FL 32399-0537

DO NOT WRITE IN THIS SPACE

Time & Location	DATE OF CRASH 4/5/2010	TIME OF CRASH 03 55 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	TIME OFFICER NOTIFIED 4 19 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	TIME OFFICER ARRIVED 5 30 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	INVEST. AGENCY REPORT NUMBER	HSMV/CRASH REPORT NUMBER
	COUNTY / CITY CODE 64 / 40	FEET or MILE(S) 60 <input type="checkbox"/> FEET <input checked="" type="checkbox"/> MILE(S)	CITY OR TOWN NAPLES		COUNTY Collier	
	AT NODE NO or FEET or MILE(S) 5	FROM NODE NO 07501	NEXT NODE NO 01141	NO OF LANES 2	ON STREET, ROAD OR HIGHWAY US 41 (SR 90)	

DRIVER ACTION 1 Phantom 2 Hit & Run 3 N/A	YEAR 03	MAKE TOYO	TYPE 03	USE 01	VEH LICENSE NUMBER [REDACTED]	STATE MI	VEHICLE IDENTIFICATION NUMBER 5TDBT48A86S	18 Undercarriage 19 Overtum 20 Windshield 21 Trailer
TRAILER OR TOWED VEHICLE INFORMATION		TRAILER TYPE		EST TRAILER DAMAGE		SHOW FIRST POINT OF VEHICLE DAMAGE AND CIRCLE DAMAGED AREA(S)		14

VEHICLE TRAVELING <input checked="" type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input checked="" type="checkbox"/> W	ON AT	Est MPH 50	Posted Speed 60	EST VEHICLE DAMAGE \$ 10,000	1 Disabling 2 Functional 3 No Damage	01	EST TRAILER DAMAGE	18 Undercarriage 19 Overtum 20 Windshield 21 Trailer
MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP) AUTO OWNERS		POLICY NUMBER		VEHICLE REMOVED BY BALD EAGLE		1 Tow Rotation List 2 Tow Owner's Request		3 Driver 4 Other 01

NAME OF VEHICLE OWNER (Check Box if Same As Driver) <input type="checkbox"/>	TRAVERSE CITY LEASING	CURRENT ADDRESS (Number and Street) 3675 N US 31 S	CITY AND STATE TRAVERSE MI	ZIP CODE 49648
NAME OF OWNER (Trailer or Towed Vehicle)	CURRENT ADDRESS (Number and Street) CITY AND STATE ZIP CODE			
NAME OF MOTOR CARRIER (Commercial vehicle Only)	CURRENT ADDRESS (Number and Street) CITY, STATE AND ZIP CODE US DOT or ICC MC IDENTIFICATION NUMBERS			

NAME OF DRIVER (Take From Driver License) / PEDESTRIAN [REDACTED]	CURRENT ADDRESS (Number and Street) FORT MYERS FL	CITY & STATE / ZIP CODE FL	DATE OF BIRTH [REDACTED]
DRIVER LICENSE NUMBER [REDACTED]	STATE FL	DL TYPE 5	REQ. END 3
ALCOHOL/DRUG TEST TYPE 1 Blood 3 Urine 5 None 2 Breath 4 Refused	RESULTS 01	ALCO/DRUG 6	PHYS DEF 1
HAZARDOUS MATERIALS BEING TRANSPORTED 1 Yes 2 No 2	PLACARDED 1 Yes 2 No 2	IF YES INDICATE NAME OF 4 DIGIT NUMBER FROM DIAMOND OR BOX ON PLACARD AND 1 DIGIT NUMBER FROM BOTTOM OF DIAMOND	WAS HAZARDOUS MATERIAL SPILLED? 1 Yes 2 No 2
RECOMMEND DRIVER RE-EXAM. IF YES EXPLAIN IN NARRATIVE		DRIVER'S PHONE NO 239-267-1813	

DRIVER ACTION 1 Phantom 2 Hit & Run 3 N/A	YEAR 03	MAKE DODG	TYPE 02	USE 01	VEH LICENSE NUMBER [REDACTED]	STATE LA	VEHICLE IDENTIFICATION NUMBER 2D8HN54199R	18 Undercarriage 19 Overtum 20 Windshield 21 Trailer
TRAILER OR TOWED VEHICLE INFORMATION		TRAILER TYPE		EST TRAILER DAMAGE		SHOW FIRST POINT OF VEHICLE DAMAGE AND CIRCLE DAMAGED AREA(S)		14

VEHICLE TRAVELING <input checked="" type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input checked="" type="checkbox"/> W	ON AT	Est MPH 60	Posted Speed 60	EST VEHICLE DAMAGE \$ 10,000	1 Disabling 2 Functional 3 No Damage	01	EST TRAILER DAMAGE	18 Undercarriage 19 Overtum 20 Windshield 21 Trailer
MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP) SELF INSURED		POLICY NUMBER		VEHICLE REMOVED BY BALD EAGLE		1 Tow Rotation List 2 Tow Owner's Request		3 Driver 4 Other 01

NAME OF VEHICLE OWNER (Check Box if Same As Driver) <input type="checkbox"/>	ALAMO FINANCING LP	CURRENT ADDRESS (Number and Street) 6929N LAKEWOOD AVE STE100	CITY AND STATE TULSA OK	ZIP CODE 74117
NAME OF OWNER (Trailer or Towed Vehicle)	CURRENT ADDRESS (Number and Street) CITY AND STATE ZIP CODE			
NAME OF MOTOR CARRIER (Commercial vehicle Only)	CURRENT ADDRESS (Number and Street) CITY, STATE AND ZIP CODE US DOT or ICC MC IDENTIFICATION NUMBERS			

NAME OF DRIVER (Take From Driver License) / PEDESTRIAN [REDACTED]	CURRENT ADDRESS (Number and Street) FORT MYERS FL	CITY & STATE / ZIP CODE FL	DATE OF BIRTH [REDACTED]
DRIVER LICENSE NUMBER [REDACTED]	STATE FL	DL TYPE 5	REQ. END 3
ALCOHOL/DRUG TEST TYPE 1 Blood 3 Urine 5 None 2 Breath 4 Refused	RESULTS 05	ALCO/DRUG 1	PHYS DEF 1
HAZARDOUS MATERIALS BEING TRANSPORTED 1 Yes 2 No 2	PLACARDED 1 Yes 2 No 2	IF YES INDICATE NAME OF 4 DIGIT NUMBER FROM DIAMOND OR BOX ON PLACARD AND 1 DIGIT NUMBER FROM BOTTOM OF DIAMOND	WAS HAZARDOUS MATERIAL SPILLED? 1 Yes 2 No 2
RECOMMEND DRIVER RE-EXAM. IF YES EXPLAIN IN NARRATIVE		DRIVER'S PHONE NO 2	

VEHICLE TYPE	VEHICLE USE	TRAILER TYPE	RESIDENCE (Driver Only)	PHYSICAL DEFECTS	ALCOHOL / DRUG USE	LOCATION IN VEHICLE
01 Automobile	01 Private Transportation	01 Single Semi Trailer	1 County Of Crash	1 No Defects Known	1 Not Drinking or Using Drugs	1 Front Left
02 Van	02 Commercial Passengers	02 Tandem Semi Trailer	2 Elsewhere in State	2 Eyesight Defect	2 Alcohol - Under Influence	2 Front Center
03 Light Truck / P.U. - 2 or 4 rear tires	03 Commercial Cargo	03 Tank Trailer	3 Non-Resident Out of State	3 Fatigue / Asleep	3 Drugs - Under Influence	3 Front Right
04 Medium Truck - 4 rear tires	04 Public Transportation	04 Saddle Mount / Flatbed	4 Foreign - 5 Unknown	4 Hearing Defect	4 Alcohol & Drugs - Under Influence	4 Rear Left
05 Heavy Truck - 2 or more rear axles	05 Public School Bus	05 Boat Trailer	DL TYPE	5 Illness	5 Had Been Drinking	5 Rear Center
06 Truck Tractor (Cab-Boat)	06 Private School Bus	06 Utility Trailer	1 A 2 B 3 C	6 Seizure, Epilepsy, Blackout	6 Pending ALCO/DRUG Test Results	6 Rear Right
07 Motor Home (RV)	07 Ambulance	07 House Trailer	1 White	7 Other Physical Defect	1 Not in Use	7 In Body of Truck
08 Bus (driver + seats for 9-15)	08 Law Enforcement	08 Pole Trailer	2 Black	INJURY SEVERITY	2 Seat Belt / Shoulder Harness	8 Bus Passenger
09 Bus (driver + seats for over 15)	09 Fire/Rescue	09 Towed Vehicle	3 Hispanic	1 None	3 Child Restraint	9 Other
10 Bicycle	10 Military	10 Auto Transport	4 Other	2 Possible	4 Air Bag - Deployed	EJECTED
11 Motorcycle	11 Other Government	77 Other	5 E / Operator	3 Non-Incapacitating	5 Air Bag - Not Deployed	1 No
12 Moped	12 Dump		6 E / Oper-Rest	4 Incapacitating	6 Safety Helmet	2 Yes
13 All Terrain Vehicle	13 Concrete Mixer		7 Other	5 Fatal (Within 30 Days)	7 Eye Protection	3 Partial
14 Train	14 Garbage or Refuse		REQUIRED ENDORSEMENTS	6 Non-Traffic Fatality		
15 Low Speed Vehicle	15 Cargo Van		1 Yes			
77 - Other	77 Other		2 No			
			3 No Endorsement Required			

FLORIDA TRAFFIC CRASH REPORT

NARRATIVE / DIAGRAM

DO NOT WRITE IN THIS SPACE

MAIL TO DEPT OF HIGHWAY SAFETY & MOTOR VEHICLES TRAFFIC CRASH
RECORDS SECTION, NEIL KIRKMAN BUILDING, TALLAHASSEE, FL 32399-0500

TIME EMS NOTIFIED (FATALITIES ONLY) 3 57 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	TIME EMS ARRIVED (FATALITIES ONLY) 4 38 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	DATE OF CRASH 4/5/2010	COUNTY / CITY CODE 64 / 40	INVEST AGENCY REPORT NUMBER [REDACTED]	HSMV CRASH REPORT NUMBER [REDACTED]
--	---	---------------------------	-------------------------------	---	--

(NARRATIVE)

Vehicle-1(V-1) was westbound on [REDACTED] Vehicle-2 (V-2) was eastbound on [REDACTED] V-1 and V-2 were approaching each other
 Vehicle-3 (V-3) was eastbound on [REDACTED] behind V-2 V-1 drove left of the center of the road. V-1's left front area struck V-2's
 left front area. After collision, V-2 rotated counterclockwise V-2 traveled southwest V-2 exited the road, and entered the south
 grass shoulder V-2 overturned and came to final rest facing northwest, resting on it's right side After collision, V-1 rotated
 counterclockwise and traveled west V-1 came to final rest facing southwest partly on the north shoulder and westbound lane of
 US 41 During the collision of V-1 and V-2, V-3 turned to the right to avoid collision with V-2 V-3 exited eastbound [REDACTED] V-3
 came to final rest facing east on the south shoulder after it's front area struck shrubbery

Name of Decedent [REDACTED]
 Date of Birth [REDACTED]
 Date of Death 04/05/2010
 Time of Death 4 01 PM
 Death Pronounced By. Police Officer Jennifer Morato, Miccosukee Police Department
 Traffic Homicide Investigator Corporal Steven Devore, I D # 1223
 Traffic Homicide Case Number FHP710-64-010
 Photographs Taken By Corporal Steven Devore, I D # 1223

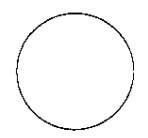
Latitude 25 818623333333 Longitude -80 888503333333

SEC#	PASS#	CITY	STATE	ZIP CODE	RACE	SEX	LOC	INJ	S	EQUIP	EJECT
2	02	THOMPSONVILLE	IL	[REDACTED]	2	1	6	3	2		1
2	01	MARION	IL	[REDACTED]	2	1	3	3	2	4	1
2	04	THOMPSONVILLE	IL	[REDACTED]	1	2	5	4	2		1
2	03	THOMPSONVILLE	IL	[REDACTED]	2	1	4	3	2		1
3	01	CUMMING	GA	[REDACTED]	1	2	3	1	2	5	1
3	03	TOMS RIVER	NJ	[REDACTED]	1	1	4	1	3		1

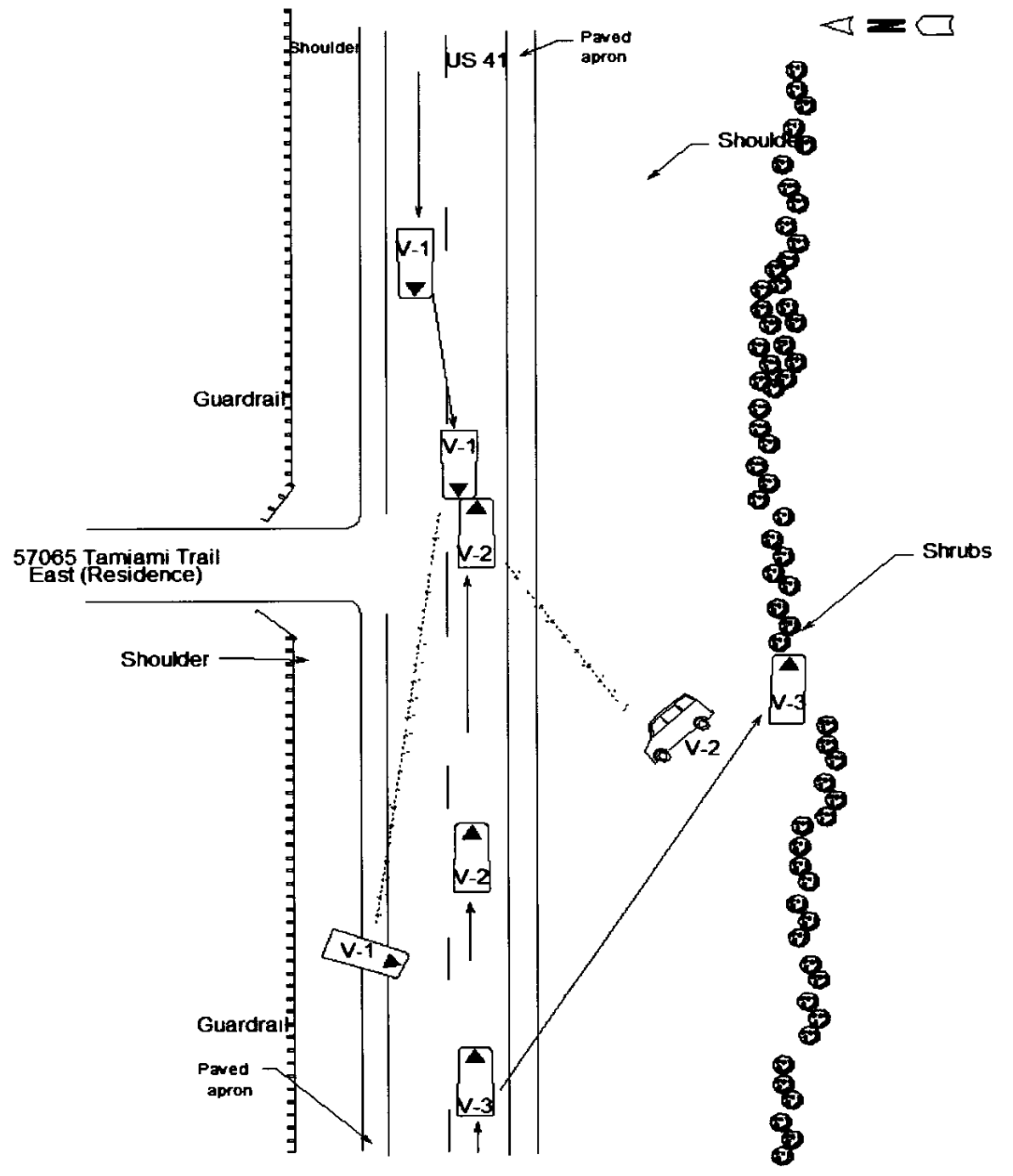
Violator(s)	SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER
		[REDACTED]			
		[REDACTED]			

WITNESS NAME (1) [REDACTED]	CURRENT ADDRESS [REDACTED]	CITY & STATE NAPLES FL	ZIP CODE [REDACTED]	WITNESS NAME (2) [REDACTED]	CURRENT ADDRESS [REDACTED]	CITY & STATE FAYETTEVILLE GA	ZIP CODE [REDACTED]			
FIRST AID GIVEN BY - NAME OCHOPEE FIRE RESCUE	1 Physician or Nurse 2 Paramedic or EMT 3 Police Officer 4 Certified 1st Aider 5 Other	INJURED TAKEN TO 02 JACKSON MEMORIAL HOSP	BY - NAME DADE AIR RESCUE	WAS INVESTIGATION MADE AT SCENE? 1 YES <input checked="" type="checkbox"/> 2 NO <input type="checkbox"/>	IF NO, THEN WHERE? 1	IS INVESTIGATION COMPLETE? 1 YES <input checked="" type="checkbox"/> 2 NO <input type="checkbox"/>	IF NO, THEN WHY? PEND INVEST	DATE OF REPORT 4/5/2010	PHOTOS TAKEN? 1 YES <input checked="" type="checkbox"/> 2 NO <input type="checkbox"/>	IF YES, BY WHOM? 1 INVEST AGENCY <input checked="" type="checkbox"/> 2 OTHER <input type="checkbox"/>
INVESTIGATOR - RANK & SIGNATURE TPR D F RODRIGUEZ	ID / BADGE NUMBER 1684	DEPARTMENT FHP	FHP <input checked="" type="checkbox"/> SO <input type="checkbox"/> CPD <input type="checkbox"/> OTHER <input type="checkbox"/>							

DIAGRAM



INDICATE NORTH
WITH ARROW



Not to scale


FLORIDA TRAFFIC CRASH REPORT

UPDATE CONTINUATION

DO NOT WRITE IN THIS SPACE

MAIL TO DEPT OF HIGHWAY SAFETY & MOTOR VEHICLES, TRAFFIC CRASH RECORDS SECTION, NEIL KIRKMAN BUILDING, TALLAHASSEE, FL 32399-0500

DATE OF CRASH 4/5/2010	COUNTY/CITY CODE 64 / 40	INVEST. AGENCY REPORT NUMBER [REDACTED]
----------------------------------	------------------------------------	--


S e c t i o n	DRIVER ACTION 1 Phantom <input type="checkbox"/> 2 Hit & Run <input type="checkbox"/> 3 N/A <input type="checkbox"/>	YEAR	MAKE	TYPE	USE	VEH LICENSE NUMBER	STATE	VEHICLE IDENTIFICATION NUMBER	 18 Undercarriage 19 Overturn 20 Windshield 21 Trailer SHOW FIRST POINT OF VEHICLE DAMAGE AND CIRCLE DAMAGED AREA(S)
	TRAILER OR TOWED VEHICLE INFORMATION			TRAILER TYPE					

V e h i c l e	VEHICLE TRAVELING N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/>	ON	At	Est MPH	Posted Speed	EST VEHICLE DAMAGE 1 Disabling 2 Functional 3 No Damage	EST TRAILER DAMAGE
	MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP)	POLICY NUMBER	VEHICLE REMOVED BY		1 Tow Rotation List 2 Tow Owner's Request	3 Driver 4 Other	
	NAME OF VEHICLE OWNER (Check if Same As Driver)	CURRENT ADDRESS (Number and Street)	CITY AND STATE	ZIP CODE			
	NAME OF OWNER (Trailer or Towed Vehicle)	CURRENT ADDRESS (Number and Street)	CITY AND STATE	ZIP CODE			

NAME OF MOTOR CARRIER (Commercial vehicle Only)	CURRENT ADDRESS (Number and Street)	CITY, STATE AND ZIP CODE	US DOT or ICC MC IDENTIFICATION NUMBERS
---	-------------------------------------	--------------------------	---

P e d e s t r i a n	NAME OF DRIVER (Take From Driver License) / PEDESTRIAN	CURRENT ADDRESS (Number and Street)	CITY, STATE & ZIP CODE	DATE OF BIRTH									
	DRIVER LICENSE NUMBER	STATE	DL TYPE	REC END	BAC TEST 3 Unne 1 Blood 4 Refused 2 Breath 5 None	RESULTS	AL / DRUG	PHYS DEF	RES	RACE	SEX	INJ	S EQUIP

HAZARDOUS MATERIALS BEING TRANSPORTED 1 Yes 2 No	PLACARDED 1 Yes 2 No	IF YES, INDICATE NAME OF 4 DIGIT NUMBER FROM DIAMOND OR BOX ON PLACARD, AND 1 DIGIT NUMBER FROM BOTTOM OF DIAMOND	WAS HAZARDOUS MATERIAL SPILLED? 1 Yes 2 No	RECOMMEND DRIVER RE-EXAM, IF YES EXPLAIN IN NARRATIVE 1 Yes 2 No	DRIVER'S PHONE NO
---	-------------------------	---	---	---	-------------------

S e c t i o n	DRIVER ACTION 1 Phantom <input type="checkbox"/> 2 Hit & Run <input type="checkbox"/> 3 N/A <input type="checkbox"/>	YEAR	MAKE	TYPE	USE	VEH LICENSE NUMBER	STATE	VEHICLE IDENTIFICATION NUMBER	 18 Undercarriage 19 Overturn 20 Windshield 21 Trailer SHOW FIRST POINT OF VEHICLE DAMAGE AND CIRCLE DAMAGED AREA(S)
	TRAILER OR TOWED VEHICLE INFORMATION			TRAILER TYPE					

V e h i c l e	VEHICLE TRAVELING N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/>	ON	At	Est MPH	Posted Speed	EST VEHICLE DAMAGE 1 Disabling 2 Functional 3 No Damage	EST TRAILER DAMAGE
	MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP)	POLICY NUMBER	VEHICLE REMOVED BY		1 Tow Rotation List 2 Tow Owner's Request	3 Driver 4 Other	
	NAME OF VEHICLE OWNER (Check if Same As Driver)	CURRENT ADDRESS (Number and Street)	CITY AND STATE	ZIP CODE			
	NAME OF OWNER (Trailer or Towed Vehicle)	CURRENT ADDRESS (Number and Street)	CITY AND STATE	ZIP CODE			

NAME OF MOTOR CARRIER (Commercial vehicle Only)	CURRENT ADDRESS (Number and Street)	CITY STATE AND ZIP CODE	US DOT or ICC MC IDENTIFICATION NUMBERS
---	-------------------------------------	-------------------------	---

P e d e s t r i a n	DRIVER (Exactly as on Driver License) / Pedestrian	CURRENT ADDRESS (Number and Street)	CITY & STATE / ZIP CODE	DATE OF BIRTH									
	DRIVER LICENSE NUMBER	STATE	DL TYPE	REC END	BAC TEST 3 Unne 1 Blood 4 Refused 2 Breath 5 None	RESULTS	AL / DRUG	PHYS DEF	RES	RACE	SEX	INJ	S EQUIP

HAZARDOUS MATERIALS BEING TRANSPORTED 1 Yes 2 No	PLACARDED 1 Yes 2 No	IF YES, INDICATE NAME OF 4 DIGIT NUMBER FROM DIAMOND OR BOX ON PLACARD, AND 1 DIGIT NUMBER FROM BOTTOM OF DIAMOND	WAS HAZARDOUS MATERIAL SPILLED? 1 Yes 2 No	RECOMMEND DRIVER RE-EXAM, IF YES EXPLAIN IN NARRATIVE 1 Yes 2 No	DRIVER'S PHONE NO
---	-------------------------	---	---	---	-------------------

PROPERTY DAMAGED - OTHER THAN VEHICLES	EST AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
PROPERTY DAMAGED - OTHER THAN VEHICLES	EST AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
PROPERTY DAMAGED - OTHER THAN VEHICLES	EST AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
PROPERTY DAMAGED - OTHER THAN VEHICLES	EST AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP

CITY & STATE FAYETTEVILLE GA	ZIP CODE	WITNESS NAME (2)	CURRENT ADDRESS	CITY & STATE	ZIP CODE
--	----------	------------------	-----------------	--------------	----------

WAS INVESTIGATION MADE AT SCENE? 1 Yes <input checked="" type="checkbox"/> 2 No <input type="checkbox"/>	IF NO, THEN WHERE?	IS INVESTIGATION COMPLETE? 1 Yes <input type="checkbox"/> 2 No <input checked="" type="checkbox"/>	IF NO, THEN WHY?	DATE OF REPORT 4/5/2010	PHOTOS TAKEN? 1 - Yes <input type="checkbox"/> 2 - No <input checked="" type="checkbox"/>	IF YES, BY WHOM? 1 Investigating Agency <input checked="" type="checkbox"/> 2 Other <input type="checkbox"/>
INVESTIGATOR - RANK AND SIGNATURE TPR D F RODRIGUEZ	ID / BADGE NUMBER 1684	DEPARTMENT FHP			FHP <input checked="" type="checkbox"/> SO <input type="checkbox"/> CPD <input type="checkbox"/> OTHER <input type="checkbox"/>	

█ v Traverse City Leasing -- 2289
Pontiac Photos -- 06/30/2010
Donald J. Fournier, Jr., P.E., ACTAR

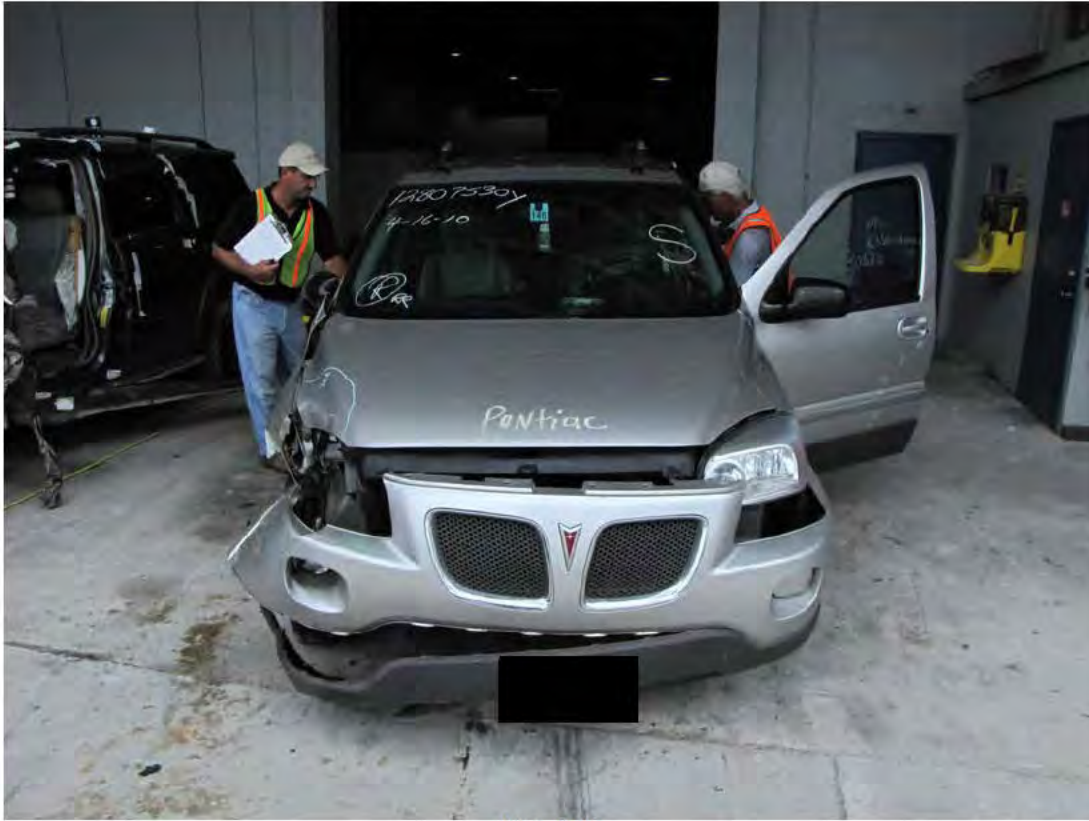


IMG_1040



IMG_1041

██████ v Traverse City Leasing -- 2289
Pontiac Photos -- 06/30/2010
Donald J. Fournier, Jr., P.E., ACTAR



IMG 1042



IMG_1043

█ v Traverse City Leasing -- 2289
Pontiac Photos -- 06/30/2010
Donald J. Fournier, Jr., P.E., ACTAR



IMG_1044



IMG_1045

█ v Traverse City Leasing -- 2289
Pontiac Photos -- 06/30/2010
Donald J. Fournier, Jr., P.E., ACTAR



IMG 1046



IMG_1048

██████ v Traverse City Leasing -- 2289
Pontiac Photos -- 06/30/2010
Donald J. Fournier, Jr., P.E., ACTAR



IMG 1049



IMG_1050

█ v Traverse City Leasing -- 2289
Pontiac Photos -- 06/30/2010
Donald J. Fournier, Jr., P.E., ACTAR



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█ v Traverse City Leasing -- 2289
Pontiac Photos -- 06/30/2010
Donald J. Fournier, Jr., P.E., ACTAR



IMG 1053



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IMG 1055



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IMG 1057



IMG_1058



IMG_1059



IMG_1060



IMG 1061



IMG_1062



IMG 1063



IMG_1064



IMG 1065



IMG_1066

█ v Traverse City Leasing -- 2289
Pontiac Photos -- 06/30/2010
Donald J. Fournier, Jr., P.E., ACTAR



IMG 1067



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█ v Traverse City Leasing -- 2289
Pontiac Photos -- 06/30/2010
Donald J. Fournier, Jr., P.E., ACTAR



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█ v Traverse City Leasing -- 2289
Pontiac Photos -- 06/30/2010
Donald J. Fournier, Jr., P.E., ACTAR



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█ v Traverse City Leasing -- 2289
Pontiac Photos -- 06/30/2010
Donald J. Fournier, Jr., P.E., ACTAR



IMG 1073



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█ v Traverse City Leasing -- 2289
Pontiac Photos -- 06/30/2010
Donald J. Fournier, Jr., P.E., ACTAR



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█ v Traverse City Leasing -- 2289
Pontiac Photos -- 06/30/2010
Donald J. Fournier, Jr., P.E., ACTAR



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█ v Traverse City Leasing -- 2289
Pontiac Photos -- 06/30/2010
Donald J. Fournier, Jr., P.E., ACTAR



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IMG_1080

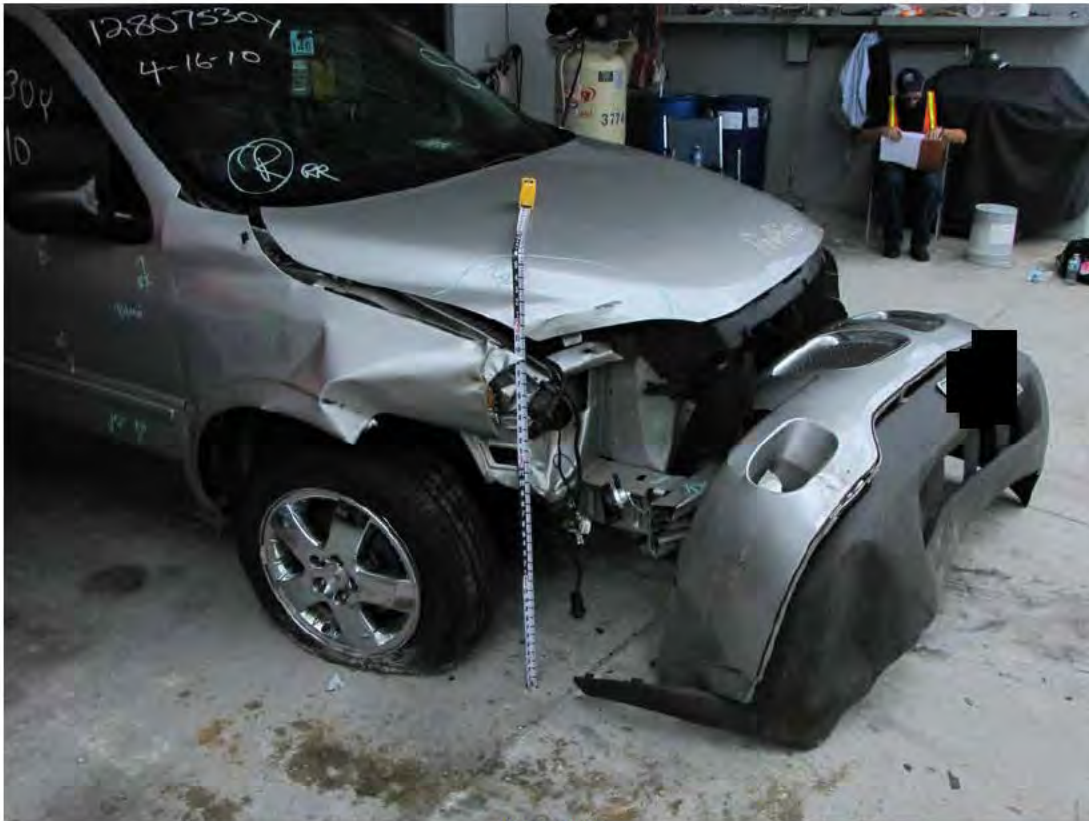


IMG_1081

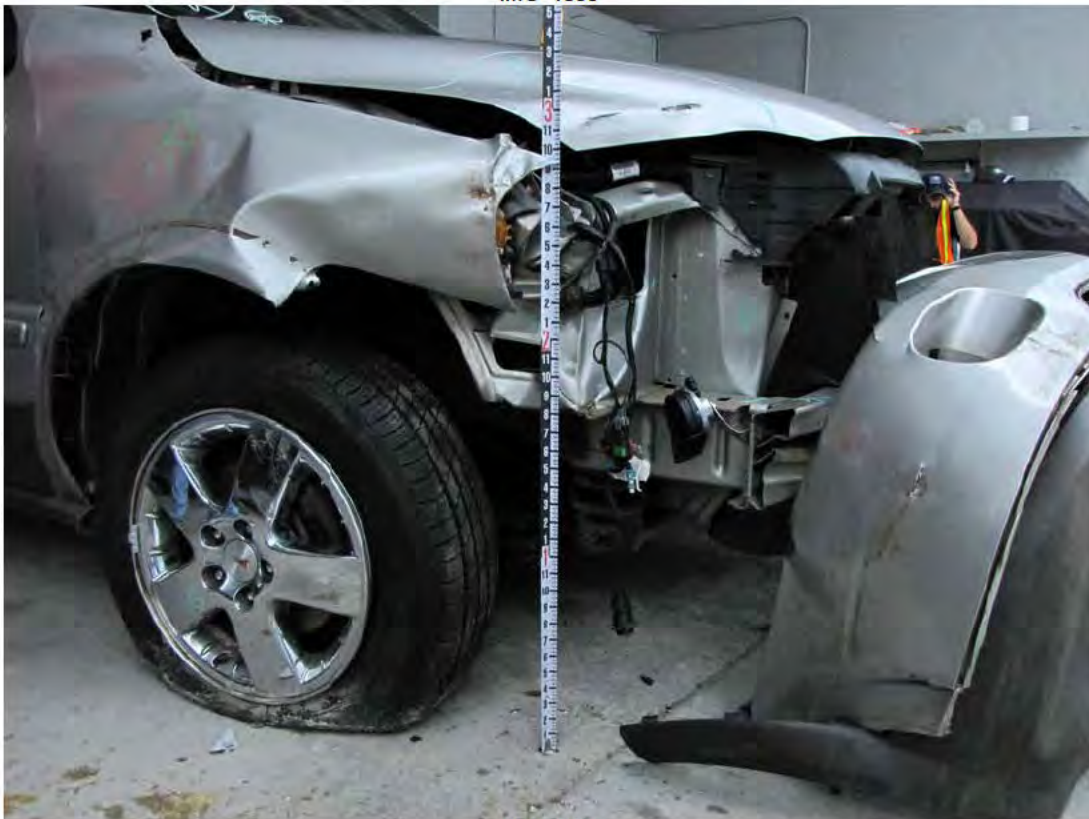


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██████ v Traverse City Leasing -- 2289
Pontiac Photos -- 06/30/2010
Donald J. Fournier, Jr., P.E., ACTAR



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██████ v Traverse City Leasing -- 2289
Pontiac Photos -- 06/30/2010
Donald J. Fournier, Jr., P.E., ACTAR



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█ v Traverse City Leasing -- 2289
Pontiac Photos -- 06/30/2010
Donald J. Fournier, Jr., P.E., ACTAR



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█ v Traverse City Leasing -- 2289
Pontiac Photos -- 06/30/2010
Donald J. Fournier, Jr., P.E., ACTAR



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█ v Traverse City Leasing -- 2289
Pontiac Photos -- 06/30/2010
Donald J. Fournier, Jr., P.E., ACTAR



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█ v Traverse City Leasing -- 2289
Pontiac Photos -- 06/30/2010
Donald J. Fournier, Jr., P.E., ACTAR



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█ v Traverse City Leasing -- 2289
Pontiac Photos -- 06/30/2010
Donald J. Fournier, Jr., P.E., ACTAR



IMG_1100



IMG_1101



IMG 1102



IMG_1103

█ v Traverse City Leasing -- 2289
Pontiac Photos -- 06/30/2010
Donald J. Fournier, Jr., P.E., ACTAR



IMG 1105



IMG_1106



IMG 1107



IMG_1108

██████ v Traverse City Leasing -- 2289
Pontiac Photos -- 06/30/2010
Donald J. Fournier, Jr., P.E., ACTAR



IMG 1109



IMG_1110



IMG_1111



IMG_1112

█ v Traverse City Leasing -- 2289
Pontiac Photos -- 06/30/2010
Donald J. Fournier, Jr., P.E., ACTAR



IMG 1113



IMG_1114

DP14-004

CHRYSLER

9/15/2014

Legals and Cust Complaints

PUBLIC

Customer Assistance Inquiry Record (CAIR)#**22390197**

VIN	3D4GG67VX	9T	Open Date	07/06/2012	Built Date	05/22/2008	
Model Year	2009	Body	JCDS49	DODGE JOURNEY R/T HATCHBACK			
In Service Dt	06/24/2008	Mileage	64,000	Dealer Zone	63	DALLAS	
Plant	T	TOLUCA ASSEMBLY PLANT	Market	U	US		
Color	PS2	BRIGHT SILVER METALLIC CLEAR COAT					
Engine	EGF	3.5L HIGH OUTPUT V6 24V MPI ENGINE					
Transmission	DG2	6-SPEED AUTOMATIC 62TE TRANSMISSION					
Dealer	43884	FIESTA AUTO CENTER					
Dealer Address	6320 BANDERA RD						
Dealer City	SAN ANTONIO			Dealer State	TX	Dealer Zip	78238
Owner					Contact Type	E-MAIL	
Address				#115	Home Phone		
	SAN ANTONIO TX				Country	UNITED STATES	

Product - Brakes - Unknown - Other - Unknown	Customer states he killed someone due to brakes not working.
Corporate - Property Damage - Default - Default - Default	
Dealer - By-Pass - Default - Default - Default	
Product - Brakes - Unknown - Complete Failure - Default	
Product - Unknown - Unknown - Accident - Default	
Recall - K07: FRONT DOOR WIRING HARNESES - Advise Owner/Incomplete Recall	

EMAIL BRIEF DESCRIPTION CONTENT

Car is the most unreliable death trap that I have ever owned!

END EMAIL BRIEF DESCRIPTION CONTENT

This is the second time I have contacted Chrysler on my 2009 Dodge Journey

in the past year. Since I bought the car I have had nothing but problems with it. I took it to my dealership several times to get looked at and nothing was ever found. Fiesta Dodge went out of business and I have not been back to a dealership since. I have a couple of issues. First the brakes are completely unsafe! I killed someone when she stepped out in front of my car last October. I didnt tell the police that I couldnt stop because I didnt want the huge court case as I had just lost my father and was dealing with that! I will be happy to get you the police report on that. So now that someone has died and I cant afford to get a new car I am

forced to drive this death trap that Chrysler has turned a cold shoulder to. I should get an attorney and open a can of worms! It is well documented

on the internet that chrysler knows that there are issues with the brakes on this vehicle and the only thing they offer now is free brakes! I wish free brakes could bring back a human life or take my stress away from driving this car. The second issue I have is that since I got the car it has a huge problem starting. I get in and click it over 15-20 times sometimes before it starts. This issue happened the 2nd day I had the car.

I took it to fiesta and they could find nothing. The car has 64000 on it now and I have become captive to a car that I can only drive to and from work. Now not only will it not start but the check engine light is on and the traction control light comes on ever time it starts. I now cant drive over 65mph or it shutters. Wow what a great quality product! I sent a message to you guys before which I recieved a check for a brake job. I have

The AnswerCONNECT article that was referenced to provide the answer to the customer was # 18819

'If a customer re-contacts CAC (Southfield and/or Chatham), the CAC agent will update the CAIR narrative, reassign the CAIR to 82S, and advise the customer their message will be forwarded to the person handling their case for follow -up.'

Dear Mark :

Thank you for contacting the Dodge Customer Assistance Center.

I have updated your file. I have forwarded the information to the person handling your case for follow -up.

Thanks again for your email.

Sincerely,

Eileen

Customer Service Representative

Dodge Customer Assistance Center

*****END OF CAC EMAIL RESPONSE*****

Customer has recontacted CAC regarding special investigation.

Reassigning to 82S as per answer connect ID 18819.

Per OGC Matrix, reassigned to 82T.

7/24/12 UPDATED CCRG FILE. _

From: [REDACTED]
To: customerassist@chrysler.com
Date: Thu Jul 05 08:54:38 EDT 2012
Subject: Chrysler Group LLC Customer Assistance
Form Selected:

Category: US Customer Service
Brief Description:

Car is the most unreliable death trap that I have ever owned!

Comments:

This is the second time I have contacted Chrysler on my 2009 Dodge Journey in the past year. Since I bought the car I have had nothing but problems with it. I took it to my dealership several times to get looked at and nothing was ever found. Fiesta Dodge went out of business and I have not been back to a dealership since. I have a couple of issues. First the brakes are completely unsafe! I killed someone when she stepped out in front of my car last October. I didnt tell the police that I couldnt stop because I didnt want the huge court case as I had just lost my father and was dealing with that! I will be happy to get you the police report on that. So now that someone has died and I cant afford to get a new car I am forced to drive this death trap that Chrysler has turned a cold shoulder to. I should get an attorney and open a can of worms! It is well documented on the internet that chrysler knows that there are issues with the brakes on this vehicle and the only thing they offer now is free brakes! I wish free brakes could bring back a human life or take my stress away from driving this car.

The second issue I have is that since I got the car it has a huge problem starting. I get in and click it over 15-20 times sometimes before it starts. This issue happened the 2nd day I had the car. I took it to fiesta and they could find nothing. The car has 64000 on it now and I have become captive to a car that I can only drive to and from work. Now not only will it not start but the check engine light is on and the traction control light comes on ever time it starts. I now cant drive over 65mph or it shutters. Wow what a great quality product! I sent a message to you guys before which I recieved a check for a brake job. I have now killed someone and that will be with me the rest of my life. I was diagnosed with PTSD from the accident and now I have to drive a car that I know is not safe because I have no other options. I never took it back to

From: customerassist@chrysler.com
To: [REDACTED]
Date: Fri Jul 06 09:12:49 EDT 2012
Subject: Re: Chrysler Group LLC Customer Assistance
Dear [REDACTED] :

Thank you for contacting the Dodge Customer Assistance Center.

Due to the nature of your email, your concerns have been escalated. A case manager will contact you by phone or mail within 2-5 business days.

Thanks again for your email.

Sincerely,

Eileen

Customer Service Representative
Dodge Customer Assistance Center

For any future communications related to this email, please refer to the following information:

REFERENCE NUMBER: 22390197

EMAIL CASE NUMBER: 2718704

REPLY LINK: http://www.chrysler.com/wccs/brand_forms/us/reply.jsp?trk_ID=KMM7784739V80369L0KM&

Original Message Follows:

US Customer Service - Chrysler Brand Site

Brief Description:

Car is the most unreliable death trap that I have ever owned!

Comments:

This is the second time I have contacted Chrysler on my 2009 Dodge Journey

in the past year. Since I bought the car I have had nothing but problems

with it. I took it to my dealership several times to get looked at and

nothing was ever found. Fiesta Dodge went out of business and I have not

been back to a dealership since. I have a couple of issues. First the

brakes are completely unsafe! I killed someone when she stepped out in

front of my car last October. I didnt tell the police that I couldnt stop

because I didnt want the huge court case as I had just lost my father and

was dealing with that! I will be happy to get you the police report on

that. So now that someone has died and I cant afford to get a new car I am

forced to drive this death trap that Chrysler has turned a cold shoulder

to. I should get an attorney and open a can of worms! It is well documented

on the internet that chrysler knows that there are issues with the brakes

on this vehicle and the only thing they offer now is free brakes! I

From: replyform@chrysler.com
To: customerassist@chrysler.com
Date: Mon Jul 23 09:11:19 EDT 2012
Subject: Reply to Chrysler Group LLC (KMM7784739V80369L0KM)
Reply Comments:

REFERENCE NUMBER: 22390197
EMAIL CASE NUMBER: 2718704

Ok so your awesome company sent me a letter stating that my accident was no fault of chrysler. It seems that your only intention was to clear yourself from a huge lawsuit. Now that you feel you are not to blame for the accident which is a no brainer because the cause was someone stepping in front of my car. You have left me out on an island with a product that I paid good money for that is broken and you wont back. Your "investigator" that took 3 hrs of my time an 7 dollars out of my pocket told me "trade this thing in" "I have been a chevy guy for years and this thing is a piece of crap!" I complained about other issues with your vehicle that you never mentioned in you response letter. So now here I am wasting my time again writing you a complaint to stand by your product and make this right! there were several issues that your investagator said that chrysler would be in contact with me about. Instead i get the WHEW it wasnt our fault letter and crap! I will be retaining a lawyer and will be presuing a lawsuit to get what I have paid for. I am meeting with our local news trouble shooters to expose the bad business practices that you use in an American tax payers bailout company. I have tried working with your company to make this right and you show no effort or concern to do so. You sent me a check to pay for brakes that shows there is a problem. I asked you to make these issues right and let me drive a quality product that I expected when I bought this unsafe death trap. I feel unsafe in this car and I would love for someone from chrysler to come drive it with thier family in it so they can feel dodge safe!

other complaints...

- 1) Never had an in cabin air filter installed from the facotry.
- 2) Back quarter panel is missing rivots from facotry.

this is on top of the other issues from my first email to you.

From: customerassist@chrysler.com
To: [REDACTED]
Date: Mon Jul 23 13:29:55 EDT 2012
Subject: Re: Reply to Chrysler Group LLC (KMM7784739V80369L0KM)
Dear [REDACTED]:

Thank you for contacting the Dodge Customer Assistance Center.

I have updated your file. I have forwarded the information to the person handling your case for follow -up.

Thanks again for your email.

Sincerely,

Eileen

Customer Service Representative
Dodge Customer Assistance Center

For any future communications related to this email, please refer to the following information:

REFERENCE NUMBER: 22390197

EMAIL CASE NUMBER: 2718704

REPLY LINK: http://www.chrysler.com/wccs/brand_forms/us/reply.jsp?trk_ID=KMM7803660V64595L0KM&

Original Message Follows:

Comments:

REFERENCE NUMBER: 22390197 EMAIL CASE NUMBER: 2718704 Ok so your awesome company sent me a letter stating that my accident was no fault of chrysler. It seems that your only intention was to clear yourself from a huge lawsuit. Now that you feel you are not to blame for the accident which is a no brainer because the cause was someone stepping in front of my car. You have left me out on an island with a product that I paid good money for that is broken and you wont back. Your "investigator" that took 3 hrs of my time an 7 dollars out of my pocket told me "trade this thing in" "I have been a chevy guy for years and this thing is a piece of crap!" I complained about other issues with your vehicle that you never mentioned in you response letter. So now here I am wasting my time again writing you a complaint to stand by your product and make this right! there were several issues that your investagator said that chrysler would be in contact with me about. Instead i get the WHEW it wasnt our fault letter and crap! I will be retaining a lawyer and will be presuing a lawsuit to get what I have paid for. I am meeting with our local news trouble shooters to expose the bad business practices that you use in an American tax payers

From:

07/12/2012 09:53

#816 P 002/003

CRASH

OCT 13 2011

FATALITY # 91

12309675.1

Law Enforcement Used T-2058T Use ONLY

FATAL CMV SCHOOL BUS RAILROAD MAB SUPPLEMENT ACTIVE SCHOOL ZONE

Total Num. Units 2 Total Num. Persons 2 TDOGT 20031754.1 Crash ID / 2011002107



Texas Peace Officer's Crash Report (Form CR-3 1/12/2010) Mail to: Texas Department of Transportation, Crash Records, P.O. Box 146949, Austin, TX 78714. Questions? Call (512) 486-5780 Refer to Attached Code Sheet for Numbered Fields

Page 2 of 2

*These fields are required on all additional sheets submitted for this crash (ex: additional vehicles, occupants, injured, etc.)

*Crash Date (MM/DD/YYYY) 10/06/2011		*Crash Time (24-HRMM) 0630		Case ID	Local Use 51-20
*County Name BEXAR		*City Name SAN ANTONIO		<input type="checkbox"/> Outside City Limit	
In your opinion, did this crash result in at least \$1,000 damage to any one person's property? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Latitude (decimal degrees)		Longitude (decimal degrees)	
ROAD ON WHICH CRASH OCCURRED					
*1 Hwy. Sys. 05	*1 Hwy. Num. 90	2 Hwy. Part 2	Block Num. 6700	3 Street Prefix W	*Street Name NEW BRY 90 WEST
<input type="checkbox"/> Crash Occurred on a Private Drive or Road/Private Property/Parking Lot		<input type="checkbox"/> Toll Road/Tol Lane	Speed Limit 45	Const. Zone <input checked="" type="checkbox"/> No	Workers Present <input checked="" type="checkbox"/> No
INTERSECTING ROAD, OR IF CRASH NOT AT INTERSECTION, NEAREST INTERSECTING ROAD OR REFERENCE MARKER					
At Int. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	1 Hwy. Sys. 2R	1 Hwy. Num. 2R	2 Hwy. Part 1	Block Num. 6700	3 Street Prefix
Distance from Int. or Ref. Marker <input type="checkbox"/> FT <input type="checkbox"/> MI		3 Dir. from Int. or Ref. Marker		Reference Marker	Street Desc.
5 Unit Num. 1	5 Unit Desc. 1	<input type="checkbox"/> Parked Vehicle	<input type="checkbox"/> Hit and Run	LP State TX	LP Num. JVF11D
VIN 31D4BCE57V2197		[REDACTED]			
Veh. Year 2009	8 Veh. Color SLX	Veh. Make DODGE	Veh. Model DODGE JOURNEX	7 Body Style 3V	[REDACTED]
8 DL/DL Type 1	DL/DL State TX	DL/DL Num. [REDACTED]	9 DL Class C	10 CDL Exp. 96	11 DL Rest. 96
Address (Street) 9026 OLD SKY HARBOR ST SAN ANTONIO, TX 78242		City, State, ZIP			
Name: Last, First, Middle Enter Driver or Primary Person for this Unit on first line					
Person Num. 1	12 Psn. Type 1	13 Seat Position 1	14 Injury Severity	15 Age 42	16 Ethnicity 80
				18 Sex 1	17 Eject 1
				19 Reestr. 2	18 Altbag 1
				20 Helmet 97	21 Sol. 2
				22 Alc. Spas. 96	23 Drug Spas. 96
				24 Drug Result 97	25 Drug Category 97
Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.					
<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Lessee					
SAN ANTONIO, TX [REDACTED]					
Proof of Fin. Resp. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Expired <input type="checkbox"/> Exempt	26 Fin. Resp. Type 1	Fin. Resp. Name STATE EARN	Num. 8311721780001	
Fin. Resp. Phone Num. [REDACTED]	27 Vehicle Damage Rating 1 1, 2, 3, 4, 5, 6, 7, 8, 9		27 Vehicle Damage Rating 2		Vehicle Inventoried <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Towed By			Towed To		
Unit Num. 2	5 Unit Desc. 3	<input type="checkbox"/> Parked Vehicle	<input type="checkbox"/> Hit and Run	LP State	LP Num.
VIN		[REDACTED]			
Veh. Year	5 Veh. Color	Veh. Make	Veh. Model	7 Body Style	<input type="checkbox"/> Pol. For EMS on Emergency (Explain in Narrative if checked)
8 DL/DL Type 2	DL/DL State TX	DL/DL Num. [REDACTED]	9 DL Class 3	10 CDL Exp. 96	11 DL Rest. 96
Address (Street) [REDACTED] TX [REDACTED]		City, State, ZIP			
Name: Last, First, Middle Enter Driver or Primary Person for this Unit on first line					
Person Num. 1	12 Psn. Type 1	13 Seat Position 1	14 Injury Severity	15 Age 57	16 Ethnicity 8
				18 Sex 2	17 Eject 97
				19 Reestr. 97	18 Altbag 97
				20 Helmet 97	21 Sol. 97
				22 Alc. Spas. 96	23 Drug Spas. 96
				24 Drug Result 97	25 Drug Category 97
Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.					
<input type="checkbox"/> Owner <input type="checkbox"/> Lessee					
Owner/Lessee Name & Address					
Proof of Fin. Resp. <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Expired <input type="checkbox"/> Exempt	26 Fin. Resp. Type	Fin. Resp. Name	Fin. Resp. Num.	
Fin. Resp. Phone Num.	27 Vehicle Damage Rating 1		27 Vehicle Damage Rating 2		Vehicle Inventoried <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Towed By			Towed To		

From:

07/12

CAUTION

FATALITY # 91

Law Enforcement and DOT Use ONLY. Form CR-3 1/1/2010

Case ID SAED11253118 TMDOT Crash ID 20031784.1/2011062107 Page 2 of 2

DISPOSITION OF INJURED/KILLED	Unit Num.	Prsn. Num.	Taken To	Taken By	Date of Death (MM/DD/YYYY)	Time of Death (24HRMM)

CHARGES	Unit Num.	Prsn. Num.	Charge	Citation/Reference Num.

DAMAGE

Damaged Property Other Than Vehicles: _____ Owner's Name: _____ Owner's Address: _____

Unit Num. 10,000+ LBS. TRANSPORTING HAZARDOUS MATERIAL 9+ CAPACITY 28 Veh. Oper. 29 Carrier ID Type 30 Carrier ID Num.

Carrier's Comp. Name: _____ Carrier's Primary Addr.: _____

30 Rwy. Access RGWW GVWR 31 Veh. Type RGWW GVWR HazMat Released Yes No 32 HazMat Class Num. 33 HazMat ID Num. 34 HazMat Class Num. 35 HazMat ID Num.

33 Cargo Body Style Trailer 1 Unit Num. RGWW GVWR 34 Trlr. Type Trailer 2 Unit Num. RGWW GVWR 36 Trlr. Type

Sequence Of Events 35 Seq. 1 35 Seq. 2 35 Seq. 3 35 Seq. 4 Total Num. Axles Total Num. Tires

FACTORS & CONDITIONS	36 Contributing Factors (Investigator's Opinion)		37 Vehicle Defects (Investigator's Opinion)		Environmental and Roadway Conditions							
	Unit Num.	Contributing	May Have Contrib.	Contributing	May Have Contrib.	38 Weather Cond.	39 Light Cond.	40 Entering Roads	41 Roadway Type	42 Roadway Alignment	43 Surface Condition	44 Traffic Control
	2	39				1	2	3	4	1	1	11

Investigator's Narrative Opinion of What Happened (Attach Additional Sheets if Necessary)

DRIVER OF UNIT #1 WAS TRAVELING EB ON NEW HWY 90 WEST ACCESS RD. AND ATTEMPTING TO TURN LEFT ONTO THE INTERSECTION OF SA OLD HWY 90 WEST. PED. #2 WAS ATTEMPTING TO CROSS NEW HWY 90 ACCESS RD. WHERE THERE ARE NO CROSSWALKS OR SIDEWALKS AND HAD MADE IT TO ONE OF TWO MEDIANS. PED. #1 THEN ATTEMPTED TO CROSS THE OLD HWY 90 LANE. DUE TO THE DARK AREA AND THE DARK CLOTHING PED. #2 WAS WEARING, UNIT #1 DRIVER DID NOT SEE PED #2 CROSS IN FRONT OF HIS VEHICLE AND STRUCK HER ONE TIME CAUSING LIGED INJURIES. DRIVER OF UNIT #1 SCARED DUE TO DARKNESS OF AREA AND THE DARK CLOTHING SHE WAS WEARING HE NEVER SAW HER AND NEVER HAD TIME TO HIT THE BRAKES. DRIVER #1 THEN STOPPED TO ASSIST PED #1 AND CALL EMS. THERE ARE NO KNOWN WITNESSES TO THE ACCIDENT AT THIS TIME. PED #2 WAS THEN TRANSPORTED BY EMS 8833 TO UNIVERSITY HOSPITAL.

Field Diagram - Not to Scale

NEW HWY 90 WEST E.S. ACCESS RD.

Exit to Old Hwy 90 via Park and Ride

PARKING LOT

AREA OF IMPACT

Enter via Old Hwy 90 via Park and Ride

OLD HWY 90 WEST

Not to Scale

INVESTIGATOR

Time Notified (24HRMM) 0630 How Notified Dispatched Time Arrived (24HRMM) 0636 Report Date (MM/DD/YYYY) 07/10/2012

Invest. Yes Investigator Name (Printed) Marquez, Frank E ID Num. 1286

Comp. No

ORI Num. 2100000003 Agency SAN ANTONIO POLICE DEPARTMENT District/Area 7.1.1.1

Chis

Texas Peace Officer's Crash Report - Code Sheet

Numbered fields on the CR-3 Refer to the Numbered List on this Code Sheet. Each list includes the codes that may be entered on the form and the description of each code.

Law Enforcement and TxDOT Use ONLY Form CR-3CS, 1/17/2010

1. Roadway System IH = Interstate US = US Highway SH = State Highway FM = Farm to Market RR = Ranch Road RM = Ranch to Market BI = Business Interstate BU = Business US BS = Business State BF = Business FM SL = State Loop TL = Toll Road AL = Alternate SP = Spur CR = County Road PR = Park Road RV = Private Road RC = Recreational Road LR = Local Road/Street (Street, Road, Ave., Blvd., Pl., Tr., Beach, Alley, Boat Ramp, etc.)		2. Roadway Part 1 = Main/Proper Lane 2 = Service/Frontage Road 3 = Entrance/On Ramp 4 = Exit/Off Ramp 5 = Connector/Flyover 98 = Other (Explain in Narrative)		3. Street Prefix Direction from Int. or Ref. Marker N = North NE = Northeast E = East SE = Southeast S = South SW = Southwest W = West NW = Northwest		4. Street Suffix RD = Road ST = Street DR = Drive AVE = Avenue BLVD = Boulevard PKWY = Parkway LN = Lane FWY = Freeway HWY = Highway WAY = Way TRL = Trail LOOP = Loop EXPY = Expressway CT = Court CIR = Circle PL = Place PARK = Park CV = Cove	
5. Unit Description 1 = Motor Vehicle 2 = Train 3 = Pedalcyclist 4 = Pedestrian 5 = Motorized Conveyance 6 = Towed/Trailer 7 = Non-Contact 98 = Other (Explain in Narrative)		6. Vehicle Color BGE = Beige BLK = Black BLU = Blue BRZ = Bronze BRO = Brown CAM = Camouflage CPR = Copper GLD = Gold GRY = Gray GRN = Green MAR = Maroon MUL = Multicolored ONG = Orange PNK = Pink PUR = Purple RED = Red SIL = Silver TAN = Tan TEA = Teal (green) TRG = Turquoise (blue) WHI = White YEL = Yellow 98 = Other (Explain in Narrative) 99 = Unknown		7. Body Style P2 = Passenger Car, 2-Door P4 = Passenger Car, 4-Door PK = Pickup AM = Ambulance BU = Bus SB = Yellow School Bus FE = Farm Equipment FT = Fire Truck MC = Motorcycle SV = Sport Utility Vehicle PC = Police Car/Truck PM = Police Motorcycle TR = Trailer, Semi-Trailer, or Pole Trailer TRC = Tractor TT = Truck Tractor VN = Van 98 = Other (Explain in Narrative) 99 = Unknown		8. Driver License/ID Type 1 = Driver License 2 = Commercial Driver Lic. 3 = Occupational 4 = ID Card 5 = Unlicensed 98 = Other 99 = Unknown	
9. Driver License Class A = Class A AM = Class A and M B = Class B BM = Class B and M C = Class C CM = Class C and M M = Class M 5 = Unlicensed 98 = Other/Out of State 99 = Unknown		10. Commercial Driver License Endorsements H = Hazardous Materials N = Tank Vehicles P = Passengers S = School Bus T = Double/Trip Trailer X = Tank Vehicle with HazMat 5 = Unlicensed 98 = Other/Out of State 99 = Unknown		11. Driver License Restrictions A = With Corrective Lenses B = LOPS Age 21 or Over C = Daytime Only D = Not to Exceed 45 MPH E = No Expressway Driving F = Must Hold Valid Learner Lic. to MM/DD/YY G = TRC 545.424 Applies until MM/DD/YY H = Vehicle Not to Exceed 26,000 lbs. GVWR I = Motorcycle Not to Exceed 250 CC J = Licensed Motorcycle Operator Age 21 or Over in Sight K = Moped L = Vehicle w/o Air Brakes - Applies to Vehicles Requiring CDL M = CDL Intrastate/Commercial Only N = Ignition Interlock Required O = Occ./Essent. Need DL No CMV - See Court Order P = Stated on License Q = LOPS 21 or Over Vehicle Above Class B R = LOPS 21 or Over Vehicle Above Class C S = Outside Rear View Mirror or Hearing Aid T = Automatic Transmission U = Applicable Prosthetic Devices V = Applicable Vehicle Devices W = Power Steering X = Vehicle Not to Exceed Class C Y = Valid TX Vision or Limb Waiver Req'd. Z = Valid Fed. Vision or Limb Waiver Req'd. 5 = Unlicensed 96 = None 98 = Other/Out of State 99 = Unknown			
12. Person Type 1 = Driver 2 = Passenger/Occupant 3 = Pedalcyclist 4 = Pedestrian 5 = Driver of Motorcycle Type Vehicle 6 = Passenger/Occupant on Motorcycle Type Vehicle 98 = Other (Explain in Narrative) 99 = Unknown		13. Seat Position 1 = Front Left 2 = Front Center 3 = Front Right 4 = Second Seat Left 5 = Second Seat Center 6 = Second Seat Right 7 = Third Seat Left 8 = Third Seat Center 9 = Third Seat Right 10 = Cargo Area 11 = Outside Vehicle 13 = Other in Vehicle 14 = Passenger in Bus 16 = Pedestrian, Pedalcyclist or Motorized Conveyance 98 = Other (Explain in Narrative) 99 = Unknown		14. Injury Severity A = Incapacitating Injury B = Non-Incapacitating Injury C = Possible Injury K = Killed N = Not Injured 98 = Unknown		15. Ethnicity W = White B = Black H = Hispanic A = Asian I = Amer. Indian/Alaskan Native 98 = Other 99 = Unknown	
16. Sex 1 = Male 2 = Female 99 = Unknown		17. Ejected 1 = No 2 = Yes 3 = Yes, Partial 97 = Not Applicable 99 = Unknown		18. Restraint Used 1 = Shoulder and Lap Belt 2 = Shoulder Belt Only 3 = Lap Belt Only 4 = Child Seat Facing Forward 5 = Child Seat Facing Rear 6 = Child Seat Unknown 7 = Child Booster Seat 96 = None 97 = Not Applicable 98 = Other (Explain in Narrative) 99 = Unknown		19. Airbag 1 = Not Deployed 2 = Deployed, Front 3 = Deployed, Side 4 = Deployed, Rear 5 = Deployed, Multiple 97 = Not Applicable 99 = Unknown	
20. Helmet Use 1 = Not Worn 2 = Worn, Damaged 3 = Worn, Not Damaged 4 = Worn, Unk. Damage 97 = Not Applicable 98 = Unknown if Worn		21. Solicitation Y = Solicit N = No Solicit		22. Alcohol Specimen Type 1 = Breath 2 = Blood 3 = Urine 4 = Refused 96 = None 98 = Other (Explain in Narrative)		23. Drug Specimen Type 2 = Blood 3 = Urine 4 = Refused 96 = None 98 = Other (Explain in Narrative)	
24. Drug Test Result 1 = Positive 2 = Negative 97 = Not Applicable 98 = Unknown		25. Drug Category 2 = CNS Depressants 3 = CNS Stimulants 4 = Hallucinogens 6 = Narcotic Analgesics 7 = Inhalants 8 = Cannabis 10 = Dissociative Anesthetics 11 = Multiple Drugs (Explain in Narrative) 97 = Not Applicable 98 = Other Drugs (Explain in Narrative) 99 = Unknown		26. Financial Responsibility Type 1 = Liability Insurance Policy 2 = Proof of Liability Insurance 3 = Insurance Binder 4 = Surety Bond 5 = Certificate of Deposit with Comptroller 6 = Certificate of Deposit with County Judge 7 = Certificate of Self-Insurance		27. Vehicle Damage Rating In most cases, enter in the format: XX-ABC-Y, where: XX is the Direction of Force (1,12) ABC is the Damage Description Z or S letter code and Y is the Damage Severity (0-7) In special cases, use: VB-1 = vehicle burned, NOT due to collision VB-7 = vehicle catches fire due to the collision TP-0 = top damage only VX-0 = undercarriage damage only MC-1 = motorcycle, moped, scooter, etc. NA = Not Applicable (Farm Tractor, etc.) 	

DP14-004

CHRYSLER

9/15/2014

Legals and Cust Complaints

PUBLIC

Customer Assistance Inquiry Record (CAIR)# 20784994

VIN	3D7JB1EK2	AG [REDACTED]	Open Date	05/06/2011	Built Date	10/14/2009
Model Year	2010	Body	DS1L61	DODGE RAM ST 4X2 1500 REG CAB		
In Service Dt	05/10/2010	Mileage	4,000	Dealer Zone	42	DETROIT
Plant	G	SALTILLO TRUCK ASSEMBLY PLANT	Market	U	US	
Color	PW7	BRIGHT WHITE CLEAR COAT				
Engine	EKG	3.7L V6 ENGINE				
Transmission	DGV	4-SPD. AUTOMATIC VLP 42RLE TRANS				

Owner	[REDACTED]	Contact Type	TELEPHONE
Address	[REDACTED]	Home Phone	[REDACTED]
	RICHMOND KY [REDACTED]	Country	UNITED STATES

Product - Unknown - Unknown - Accident - Single Vehicle Rollover	air bag non-deployment
Corporate - Property Damage - Default - Default - Default	
Dealer - By-Pass - Default - Default - Default	
Product - Body / Trim / Paint Finish - Air Bag - Failed to Deploy - Front - Driver	
Product - Unknown - Unknown - Accident - Default	

****Begin structured narrative T2 - Beginning Narrative
 Briefly summarize why the customer is contacting Chrysler: Mrs [REDACTED] said her husband die due to his air bag did not deploy.
 Briefly summarize what the customer is expecting: Report to investigate.

****End structured narrative T2 - Beginning Narrative
 1. Who is calling and what is their contact information? Mrs [REDACTED]
 Preferred: [REDACTED]
 2. What happened? An animal went in front of him served to miss it and hit a tree, head on air bags did not deploy
 3. What is the current location of the vehicle? Insurance Company
 Saveguard Storage
 5801 Kasp port, Lot # 17012491
 Lexington Kentucky 40509
 859-264-7401

05.09.11
 >> case is being forwarded to Chrysler Legal (CCRG) (2-5 days contact)
 VEHICLE LOCATED AT:
 Copart Salvage Auto Auctions
 5801 Kasp Court
 Lexington, KY 40509-9458
 859-264-7401
 Lot# 17012491
 Per OGC Matrix, reassigned to 82T. MG17
 INCOMPLETE RECALL: K17 REPROGRAM HVAC CONTROL HEAD & INSP./REPL. ACTUATOR

5/9/11 ASSIGN TO KSS28.
 CAIR NUMBER 20784994 REQUEST EAA INSPECTION 05-09-2011 10:52
 CAIR NUMBER 20784994 E-MAIL SENT TO EAA 05-09-2011 10:52
 5/9/11 INSPECTION CANCELLED. FORWARD TO PRODUCT LIABILITY.
 CCRG Open Date: 05/09/2011 09:31:02



**KENTUCKY UNIFORM POLICE
TRAFFIC COLLISION REPORT**

MASTER FILE #

INVESTIGATING AGENCY

MADISON COUNTY SHERIFF DEPT.

AGENCY ORI NUMBER

LOCAL CODE

116230

ROADWAY NAME
RED HOUSE RD

PARKING LOT: N

INTERSECTION WITH: N

BETWEEN STREETS: N

ROADWAY #	DISTANCE FROM MILEPOINT	MILEPOINT #	INJURED	KILLED	# UNITS INVOLVED	HIT & RUN	ONE WAY	SPEED LIMIT
		6.9		001	1	NO	NO	055 MPH

IN CITY LIMITS? NO	LATITUDE DEG: 37 MIN: 50.37	COLLISION DATE AND TIME 05/02/2011 02:22
MILES FROM CITY 7 MILES EAST	LONGITUDE DEG: 84 MIN: 15.93	

CITY/TOWN: 07602 - RICHMOND	RAMP: NO	DIR:
COUNTY: 076 - MADISON	FROM:	DIR:
SECONDARY COLLISION: NO	MEDIAN CROSSOVER: NO	TO:

MANNER OF COLLISION 09 - SINGLE VEHICLE	LOCATION 1ST EVENT 04 - OUTSIDE SHOULDER-LEFT	TRAFFIC CONTROL 99 - NONE
--	--	------------------------------

ROADWAY TYPE 07 - STATE	TOTAL LANES 2	ROADWAY CHARACTER 06 - STRAIGHT & LEVEL	ROADWAY SURFACE 01 - ASPHALT	ROADWAY CONDITION 01 - DRY
----------------------------	------------------	--	---------------------------------	-------------------------------

WEATHER 02 - CLEAR	LIGHT CONDITION 06 - DARK-HWY NOT LIGHTED	LAND USE 07 - RURAL	SCHOOL BUS RELATED 03 - NOT APPLICABLE
-----------------------	--	------------------------	---

FIRST AID AT SCENE NO FIRST AID GIVEN BY

INJURED REMOVED TO
00097 - MADISON COUNTY MORGUE

EMS AGENCY AND RUN #			EMS AGENCY AND RUN #			EMS AGENCY AND RUN #		
126805232								
NOTIFIED TIME	ARRIVED TIME	TIME AT HOSPITAL	NOTIFIED TIME	ARRIVED TIME	TIME AT HOSPITAL	NOTIFIED TIME	ARRIVED TIME	TIME AT HOSPITAL
02:18	02:31	:						

INJURED OR DECEASED REMOVED BY
03 - MUNICIPAL/COUNTY EMERGENCY VEHICLE

1 PROPERTY DAMAGE - OTHER THAN VEHICLES	PROPERTY
OWNER/ADDRESS	
2 PROPERTY DAMAGE - OTHER THAN VEHICLES	PROPERTY
OWNER/ADDRESS	
3 PROPERTY DAMAGE - OTHER THAN VEHICLES	PROPERTY
OWNER/ADDRESS	

INV. COMPLETE YES	PHOTOS YES	PHOTOGRAPHER UNIT NO. 2005
INVESTIGATOR CRUTCHER K	ID NUMBER 2030	BEAT OR POST NO. COUNTY
REVIEWED BY M MARCUM	TIME NOTIFIED 02:22	TIME ARRIVED 02:29
	RDWY OPENED 04:39	PAGE 1 OF 3

KENTUCKY UNIFORM POLICE TRAFFIC COLLISION REPORT - NARRATIVE

KSP 74 Revised 1/2000

MASTER FILE # [REDACTED]

INVESTIGATING AGENCY MADISON COUNTY SHERIFF DEPT.

AGENCY ORI NUMBER 0760000

LOCAL CODE 116230

Unit #1- Driver was headed east on [REDACTED] about a quarter mile past [REDACTED] when he suddenly drove off the left hand side of the road, driving approximately 265 feet along the tree line hitting several tree branches before coming to rest partially over an embankment by hitting a tree. There were no skid marks on the roadway prior to leaving the roadway or any signs of braking. It is unknown at this time why the driver had ran off the roadway.

KENTUCKY UNIFORM POLICE TRAFFIC COLLISION REPORT - UNIT

MASTER FILE # [REDACTED]

INVESTIGATING AGENCY **MADISON COUNTY SHERIFF DEPT.** AGENCY ORI NUMBER [REDACTED] LOCAL CODE [REDACTED]

UNIT # **1** TOWED? **YES - MADISON TOWING** TOWED DUE TO DISABLED? **YES** # OCCUPANTS **1** PEDESTRIAN FACTORS

OPERATOR'S LIC. NO. [REDACTED] STATE **KY** LIC. CLASS **D** ENDORSEMENT OPERATORS LICENSE RESTRICTIONS

CDL **NO** CO. RESIDENT **YES** OWNER **YES**

OPERATOR NAME (L.N. FN, MI) [REDACTED]

DATE OF BIRTH [REDACTED] ADDRESS [REDACTED] **RICHMOND, KY** COMPLIANT **YES**

A. PRE-COLLISION VEHICLE ACTION **05 - GOING STRAIGHT AHEAD** B. UNIT TYPE **08-LT TRUCK(VAN/SPORTS UTILITY/PICKUP)** C. FIRE **NO** D. OVERTURNED **NO**

E. HUMAN FACTORS **10 - FELL ASLEEP**
15 - LOST CONSCIOUSNESS/FAINTED

F-H. EVENT COLLISION **1ST: 30 - TREE**

I. VEHICULAR FACTORS **99 - NONE DETECTED** J. ENVIRONMENTAL FACTORS **99 - NONE DETECTED**

K. UNDERRIDE/OVERRIDE **01 - NO UNDERRIDE/OVERRIDE**

INVOLVED PERSONS: NAME, ADDRESS, CITY, STATE AND ZIP	DOB/DOD	14	15	16	17	18	19	20	21	22	23
[REDACTED] MALE RICHMOND, KY	[REDACTED]	08,01	YES	01	01	02	02	01	02	01	01

VEH YEAR **2010** MAKE **DODGE** MODEL **RAM PICKUP** TYPE **PK** STATE **KY** REGISTRATION NUMBER [REDACTED] YEAR **2011**

VEHICLE ID NUMBER **3D7JB1EK2A** VEHICLE INSURED **YES** NAME OF INSURANCE CO. **UNKNOWN** INSURANCE POLICY # [REDACTED] COLOR OF VEH **WHITE**

1ST AREA OF CONTACT **01 - FRONT VEHICLE** 1ST AREA CONTACT - COMBINATION VEHICLE EXTENT OF DAMAGE **SEVERE** AIR BAG SWITCH **OFF** TRAVEL DIRECTION **EAST**

ESTIMATED TRAVEL SPEED **BETWEEN 50 & 55 MPH** MOST HARMFUL EVENT **30 - TREE**

COMMERCIAL VEH. **NO** LARGE TRUCK OR BUS **NO** PLACARD PRESENT HAZ. CARGO HAZ. SPILL HAZ. MAT. # TYPE CARGO/COMMODITY NAS SAFETY REPORT #

HM CLASS CARRIER TYPE SINGLE/COMBINATION/BOBTAIL NO. AXLES NO. TRAILERS US DOT # ICC MC # CRASH AVOIDANCE (Fatal Only) **NO AVOIDANCE MANEUVER REPORTED**

VEHICLE CONFIGURATION CARGO BODY TYPE BUS USE

GVWR TOTAL MOTOR CARRIER NAME CARRIER NAME SOURCE

MOTOR CARRIER ADDRESS

VIOLATION CODES CITATION NUMBER CASE NUMBER SUSPECTED DRINKING DRIVER **NO** METHOD OF DETERMINATION **02 - OBSERVATION**

TAKEN BY

TEST OFFERED **NO** CHEMICAL TEST TESTED FOR SENT TO RESULTS PAGE

KSP 74 Revised 7/2008



NOT TO SCALE

Unit 1



DP14-004

CHRYSLER

9/15/2014

Legals and Cust Complaints

PUBLIC

Attorneys at Law

111 Monument Circle
Suite 3500
Indianapolis, Indiana 46204-2030
317-636-5401
facsimile 317-686-3288
online hbclaw.com

HACKMAN
HULETT &
CRACRAFT LLP

September 13, 2012

ELCO
Administrative Services
Post Office Box 360200
Strongsville, OH 44136

Chrysler Group, LLC
CIMS 485-L3-30
1000 Chrysler Drive
Auburn Hills, MI 48326

Re: [REDACTED] et al. v. John T. Dubois

Cause No. [REDACTED]

VIN: IJ4RR4GG4BC [REDACTED] Your File No.: [REDACTED]

Dear Sirs:

Attorney Mark Alderfer of our office represents Defendant, [REDACTED] in a lawsuit brought against him by [REDACTED]. On April 29, 2011, Chrysler performed an inspection of the above-referenced vehicle subsequent to the December 20, 2010 motor vehicle versus pedestrian collision in Fishers, Indiana, which gives rise to this lawsuit. I would ask that you please forward each of your respective investigative files concerning this matter. Please contact me if you require anything further in order to fulfill this request.

Thank you for your assistance in this matter.

Very truly yours,

Jessica McCullough
Jessica McCullough
Litigation Paralegal

JAM/

RECEIVED

SEP 17 2012

CCRG
Office of the General Counsel

RECEIVED

SEP 17 2012

CCRG
Office of the General Counsel



PO Box 360200
Strongsville, OH 44136
Tel: 216-265-9440 • Fax: 216-265-9441

20708971
415

April 15, 2011

Sent via US, Certified Mail along with Facsimile (914)578-2180

RECEIVED
APR 18 2011
SPECIAL INVESTIGATIONS

Chrysler Corporation
PO Box 21-8004
Auburn Hills, MI 48321-8004

ATTN: Customer Assistance

RE: Date of Loss: December 20, 2010
 Vehicle: 2011 Jeep Grand Cherokee
 VIN: 1J4RR4GG4BC [REDACTED]
 Our File No.: [REDACTED]
 Your Case No.: [REDACTED]

To Whom It May Concern:

Please be advised this office handles claims for National Car Rental.

The above listed vehicle was involved in a loss which resulted in the death of [REDACTED]
[REDACTED]

Please see attached Subpoena filed by counsel representing the Estate of [REDACTED]
[REDACTED] requesting that we produce the above vehicle to allow for inspection. By way of
this correspondence we are advising you of our intent to make the above vehicle
available. We will notify you when additional information (date, time) is obtained.

Please contact the undersigned directly at (216) 265-1471 upon receipt of this letter to
advise if you will be attending the inspection.

Sincerely,
ELCO Administrative Services Company

Amber Cononico
Liability Administrator

Via Certified Mail No.: 7005 1820 0007 2775 7246



PO Box 360200
Strongsville, OH 44136
Tel: 216-285-9440 • Fax: 216-266-9441

April 20, 2011

Sent via US Certified Mail and Facsimile (248)512.1322

Chrysler Corporation
PO Box 21-8004
Auburn Hills, MI 48321-8004

Attn: Special Investigations

RE: Date of Loss: December 20, 2010
Vehicle: 2011 Jeep Grand Cherokee
VIN: 1J4RR4GG4BC [REDACTED]
Our File No.: [REDACTED]
Your Case No.: [REDACTED]

RECEIVED
APR 20 2011
SPECIAL INVESTIGATIONS

To Whom It May Concern:

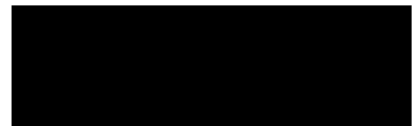
As you are aware, this office handles claims for National Car Rental.

The above listed vehicle was involved in a loss which resulted in the death of [REDACTED] a pedestrian.

An inspection on the above referenced vehicle has been scheduled for Friday, April 29, 2011 at 10:00am at Collision Solutions, Westfield, Indiana. The following individuals will be present at the inspection: National Car Rental representative Dale Resler; Jason Reese and/or Chuck Stratis representing the Estate of [REDACTED]; and [REDACTED] as specialist on behalf of [REDACTED]

We have also been notified that a representative from Chrysler has requested to inspect the vehicle as well however details related to this inspection are pending. We will notify you with additional information once it has been obtained.

- This will be a non-invasive/non-teardown inspection and will include the following:
- Photographing the inside and outside of the vehicle including the driver's perspective
 - Evaluation of the mechanical condition
 - Measurements will be taken with a total station device and with a tape measure
 - Downloading any and all black box data
 - Possible videotaping of the inspection process.



PO Box 360200
Strongsville, OH 44136
Tel: 216-265-9440 • Fax: 216-265-9441

April 20, 2011

4-00

Sent via US, Certified Mail and Facsimile (248)512.1322

Chrysler Corporation
PO Box 21-8004
Auburn Hills, MI 48321-8004

Attn: Special Investigations

RE: Date of Loss: December 20, 2010
Vehicle: 2011 Jeep Grand Cherokee
VIN: 1J4RR4GG4BC [REDACTED]
Our File No.: [REDACTED]
Your Case No.: [REDACTED]

To Whom It May Concern:

As you are aware, this office handles claims for National Car Rental.

The above listed vehicle was involved in a loss which resulted in the death of [REDACTED] a pedestrian.

An inspection on the above referenced vehicle has been scheduled for Friday, April 29, 2011 at 10:00am at Collision Solutions, Westfield, Indiana. The following individuals will be present at the inspection: National Car Rental representative Dale Resler; Jason Reese and/or Chuck Stratis representing the Estate of [REDACTED] as specialist on behalf of [REDACTED]. We have also been notified that a representative from Chrysler has requested to inspect the vehicle as well however details related to this inspection are pending. We will notify you with additional information once it has been obtained.

- This will be a non-invasive/non-teardown inspection and will include the following:
- Photographing the inside and outside of the vehicle including the driver's perspective
 - Evaluation of the mechanical condition
 - Measurements will be taken with a total station device and with a tape measure
 - Downloading any and all black box data
 - Possible videotaping of the inspection process.

RECEIVED
APR 25 2011
SPECIAL INVESTIGATIONS



PO Box 360200
Strongsville, OH 44138
Tel: 216-265-9440 • Fax: 216-265-9441

April 26, 2011

Sent via US, Certified Mail and Facsimile (248)512.1322

Chrysler Corporation
PO Box 21-8004
Auburn Hills, MI 48321-8004

Attn: Special Investigations

RE: Date of Loss: December 20, 2010
Vehicle: 2011 Jeep Grand Cherokee
VIN: 1J4RR4GG4BC [REDACTED]
Our File No.: [REDACTED]
Your Case No.: [REDACTED]

RECEIVED
APR 26 2011
SPECIAL INVESTIGATIONS

To Whom It May Concern:

As you are aware, this office handles claims for National Car Rental.

The above listed vehicle was involved in a loss which resulted in the death of [REDACTED] a pedestrian.

This is an addendum to the previous correspondence dated April 20, 2011 regarding the inspection of the above vehicle to take place Friday, April 29, 2011 at 10:00am at Collision Solutions, Westfield, Indiana. The following additional representatives will be present: [REDACTED] on behalf of Chrysler Corporation; a representative from a local Chrysler dealership that will be named later.

The [REDACTED] representative will be performing the following tasks at the inspection:

- Documenting the mechanical integrity of the vehicle
- Diagnostic testing

Enterprise reserves all rights of recovery relating to inspection costs, loss of use and storage fees which continue to increase each day the vehicle is held.



PO Box 360200
Strongsville, OH 44138
Tel: 216-265-9440 • Fax: 216-265-9441

April 27, 2011

Sent via Facsimile Only (248)512.1322

Chrysler Corporation
PO Box 21-8004
Auburn Hills, MI 48321-8004

Attn: Special Investigations

RE: Date of Loss: December 20, 2010
 Vehicle: 2011 Jeep Grand Cherokee
 VIN: 1J4RR4GG4BC [REDACTED]
 Our File No.: [REDACTED]
 Your Case No.: [REDACTED]

RECEIVED
APR 27 2011
SPECIAL INVESTIGATIONS

To Whom It May Concern:

As you are aware, this office handles claims for National Car Rental.

The above listed vehicle was involved in a loss which resulted in the death of [REDACTED]
[REDACTED] a pedestrian.

This is an addendum to the previous correspondence dated April 26, 2011 regarding the inspection of the above vehicle to take place Friday, April 29, 2011 at 10:00am at Collision Solutions, Westfield, Indiana. We have been made aware that there will not be a representative from a local Chrysler dealership attending at this time.

DEKRA Magoo's on behalf of Chrysler Corporation has inquired into placing the above vehicle on a lift to possibly remove the wheels to verify the brake condition. Pending any objection from the parties involved, we will be allowing same.

Enterprise reserves all rights of recovery relating to inspection costs, loss of use and storage fees which continue to increase each day the vehicle is held.

Should you have any questions please contact me directly at (216) 265-1471 and reference the above file number.





PO Box 360200
Strongsville, OH 44136
Tel: 216-265-9440 • Fax: 216-265-9441

April 26, 2011

Sent via US, Certified Mail and Facsimile (248)512.1322

Chrysler Corporation
PO Box 21-8004
Auburn Hills, MI 48321-8004

Attn: Special Investigations

RE: Date of Loss: December 20, 2010
 Vehicle: 2011 Jeep Grand Cherokee
 VIN: 1J4RR4GG4BC [REDACTED]
 Our File No.: [REDACTED]
 Your Case No.: [REDACTED]

4-26
RECEIVED
APR 28 2011
SPECIAL INVESTIGATIONS

To Whom It May Concern:

As you are aware, this office handles claims for National Car Rental.

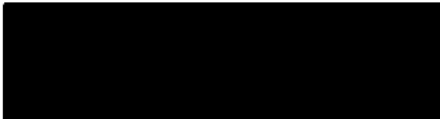
The above listed vehicle was involved in a loss which resulted in the death of [REDACTED], a pedestrian.

This is an addendum to the previous correspondence dated April 20, 2011 regarding the inspection of the above vehicle to take place Friday, April 29, 2011 at 10:00am at Collision Solutions, Westfield, Indiana. The following additional representatives will be present: Robert Coulter for DEKRA Magoo's on behalf of Chrysler Corporation; a representative from a local Chrysler dealership that will be named later.

The DEKRA Magoo's representative will be performing the following tasks at the inspection:

- Documenting the mechanical integrity of the vehicle
- Diagnostic testing

Enterprise reserves all rights of recovery relating to inspection costs, loss of use and storage fees which continue to increase each day the vehicle is held.



PO BOX 360200
STRONGSVILLE, OH 44136
Tel: 216-265-9440 • Fax: 216-265-9441

May 17, 2011

Sent via US, Certified Mail and Facsimile (248)512.1322

Chrysler Corporation
PO Box 21-8004
Auburn Hills, MI 48321-8004

Attn: Special Investigations

RECEIVED
MAY 17 2011
SPECIAL INVESTIGATIONS

RE: Date of Loss: December 20, 2010
Vehicle: 2011 Jeep Grand Cherokee
VIN: 1J4RR4GG4BC [REDACTED]
Our File No.: [REDACTED]
Your Case No.: [REDACTED]

To Whom It May Concern:

As you are aware, this office handles claims for National Car Rental.

We intend to release the above vehicle on Tuesday, May 24, 2011 and allow National Car Rental to repair, rent or sell the vehicle as they see fit. If you need National Car Rental to continue holding this vehicle, please notify us in writing no later than the stated release date.

Should you have any questions please contact me directly at (216) 265-1471 and reference the above file number.

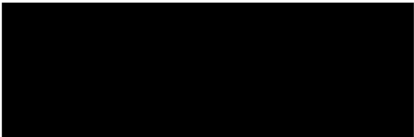
Sincerely,
ELCO Administrative Services Company

Amber Cononico
Liability Administrator
Certified Mail No.: 7005 1820 0007 2775 7567





PO BOX 360200
STRONGSVILLE, OH 44136
Tel: 216-265-9440 • Fax: 216-265-9441



5-17

May 17, 2011

Sent via US, Certified Mail and Facsimile (248)512.1322

Chrysler Corporation
PO Box 21-8004
Auburn Hills, MI 48321-8004

RECEIVED
MAY 19 2011
SPECIAL INVESTIGATIONS

Attn: Special Investigations

RE: Date of Loss: December 20, 2010
Vehicle: 2011 Jeep Grand Cherokee
VIN: 1J4RR4GG4BC [REDACTED]
Our File No.: [REDACTED]
Your Case No.: [REDACTED]

To Whom It May Concern:

As you are aware, this office handles claims for National Car Rental.

We intend to release the above vehicle on Tuesday, May 24, 2011 and allow National Car Rental to repair, rent or sell the vehicle as they see fit. If you need National Car Rental to continue holding this vehicle, please notify us in writing no later than the stated release date.

Should you have any questions please contact me directly at (216) 265-1471 and reference the above file number.

Sincerely,
ELCO Administrative Services Company

Amber Cononico
Liability Administrator
Certified Mail No.: 7005 1820 0007 2775 7567



[REDACTED] called for a mailing address and fax number to submit documents, agent provided the fax number shown in Answer connect document 18819 and the customer assistance address.

POSTMARK DATE: 042011; DATE RECEIVED: 042011

=====

04.21.11

Letter rec d regarding what additional info they need.

Per OGC Matrix, reassigned to 82T. MG17

4/21/11 UPDATED CCRG FILE.

POSTMARK DATE: 042011; DATE RECEIVED: 042511

=====

04.25.11

Rec d 2 more copies of 04.20.11 letter.

NAN Attached to file.

POSTMARK DATE: 042611; DATE RECEIVED: 042611

=====

04.26.11

ELCO

Amber Cononico 216-265-1471

Addendum to 04.20.11 letter

Inspection by Dekra Magoo on Fri 04.29.11

Per OGC Matrix, reassigned to 82T. MG17

4/26/11 UPDATED CCRG FILE. LSE6

POSTMARK DATE: 042711; DATE RECEIVED: 042711

POSTMARK DATE: 042611; DATE RECEIVED: 042811

=====

04.30.11

[REDACTED]
[REDACTED]
Rec d 2 more copies of 04.26.11 letter
Attached to file.

PHOTOGRAPHIC IMAGES POSTED TO THIS CAIR ON 04/29/11 AT 20:07:17 20708971

Letter Sent: Denial 05/04/2011

Customer requesting information for this case. Agent advised line 73.

Customer would like to speak to someone about this. Agent transferred call to case management for further assistance.

Caller requesting to speak with Case Manager.

Writer informed that it does not idicated which address letter was sent to. Writer provided MG17 number. AnswerConnect ID 18819

=====

05.10.11

Amber ELCO

Asking for cc of letter be faxed to: 216-265-9441

and hard copy mailed to:

[REDACTED]
[REDACTED]
[REDACTED]

STRONGSVILLE OH [REDACTED]

Letter Sent: Denial 05/04/2011

Per OGC Matrix, reassigned to 82T. MG17

5.10.11 Updated Law Manager and Case Manager. MJK

POSTMARK DATE: 051711; DATE RECEIVED: 051711

=====

05.17.11 Letter dated 05.17.11

[REDACTED]
[REDACTED]
Intend to release vehicle on 05.24.11 - If we need a hold notify in writing
Per OGC Matrix, reassigned to 82T. MG17

5.17.11 Updated Law Manager and Case Manager. MJK

POSTMARK DATE: 051711; DATE RECEIVED: 051911

=====

05.19.11

Rec d two copies of 05.17.11 letter. NAN attached to file.

DP14-004

CHRYSLER

9/15/2014

Legals and Cust Complaints

PUBLIC

