

1 - GENERAL CRASH INFORMATION

AGENCY NAME AND ORI

NEOSHO POLICE DEPARTMENT - MO0730300



SPACE USED FOR BARCODE

LEFT THE SCENE DRIVER NO. CLEARED CRASH CLASSIFICATION PROPERTY DAMAGE ONLY NO. INJURED NO. KILLED REPORT / CASE / INCIDENT NUMBER

NO. VEH. INV. CRASH DATE CRASH TIME (MIL.) NOTIFIED DATE TIME NOTIFIED (MIL.) INVESTIGATION DATE TIME ARRIVED (MIL.) INVEST. AT SCENE

ROADWAY NON-COLLISION COLLISION INVOLVING DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE

COMMERCIAL MOTOR VEHICLE INVOLVEMENT CRITERIA - Answer the following to determine if the 'Commercial Vehicle' fields in Section 7G must be completed.

EVIDENTIARY PHOTOS TAKEN BY WHOM AVAILABLE FROM RECONSTRUCTION BY WHOM AVAILABLE FROM

2 - LOCATION

COUNTY MUNICIPALITY BEAT / ZONE TRP/DIST/PCT GPS COORDINATES (DD MM SS.S FORMAT)

ON RDWY. DIR. DISTANCE FROM LOCATION INTERSECTING

TRAFFICWAY ROAD ALIGNMENT ROAD PROFILE

INTERSECTION TYPE ROAD CONDITION

ROAD SURFACE WEATHER CONDITION

LIGHT CONDITION

3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES LIST OWNER'S NAME & ADDRESS, DESCRIPTION OF PROPERTY, AND DAMAGE.

4 - WITNESS

NAME ADDRESS (Street, City, State, Zip) PHONE NUMBER

5 - PEDESTRIAN

NO. NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) PHONE NUMBER

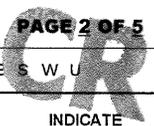
DATE OF BIRTH SEX STRUCK BY VEH # INJ TRANS-PORT SAFETY DEVICES LOCATION

CROSSING ROAD OTHER ACTIONS SCHOOL INFO.

PROBABLE CONTRIBUTING CIRCUMSTANCES DISTRACTED / INATTENTIVE CODE(S) ALCOHOL USE

6. COLLISION DIAGRAM
Compass Direction Before Crash Event(s)
(Circle One)

V1 N E **Ⓢ** W U V2 N E **Ⓢ** W U V3 N E S W U V4 N E S W U V5 N E S W U V6 N E S W U



INDICATE NORTH

INDICATE ROAD NAMES

DIAGRAM NOT TO SCALE

7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

NO. 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) 1 TESTERMAN, SHANTELL MAE 1409 HILLCREST TR - NEOSHO, MO 64850 PHONE NUMBER (417) 454-4742

DRIVER LICENSE / ID NUMBER Z202011016 STATE MO LIC STATUS Valid Expired Susp / Rev / Denied Disqual CDL Unknown NA Canceled / Oth Invalid Unknown LIC TYPE Operator Class F Permit Unknown (Explain) CDL Class MC Only Interm / Grad Unlicensed MC ENDORSEMENT Yes No NA Unknown (Explain)

DATE OF BIRTH 12-21-1997 SEX F SEAT LOC FL INJ 5 TRANS-PORT 1 EJEC-TION 2 AIR BAG 03 SAFETY DEVICES 05 VISION OBSTRUCTED NA Not Obstructed Windshield Load on Veh Trees / Brush Building Embankment Sign Hillcrest Parked Veh Moving Veh Stopped Veh Glare Other (Explain) Unknown (Explain)

PROOF OF INSURANCE Yes No Not Required INSURANCE COMPANY VIKING INS GROUP Expired PHONE NO. (Optional) POLICY NUMBER 254567218 NA Driver Vehicle

7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) GRAHAM, MICHAEL N 13115 FALCON RD - NEOSHO, MO 64850 PHONE NUMBER (417) 451-4790

YEAR 2002 MAKE Mazda MODEL PROTEGE COLOR MAR VEH. TYPE 1 TOTAL NO. OF OCC. 2

LICENSE - PLATE NO AF7P4S STATE MO YEAR 2015 VIN JM1BJ225920508769 TOWED FROM SCENE Yes No TOWED DUE TO DIS. DAMAGE Yes No

VEHICLE DAMAGE (Mark all damaged areas) None / No Damage INITIAL IMPACT NO. 2 TOWED BY Unknown NA

18 - Undercarriage	22 - Cargo
19 - Windshield	23 - Unknown
20 - Burned	24 - Other (Explain)
21 - Towed Unit	

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles Vehicle Used As Public Conveyance

<input checked="" type="checkbox"/> Passenger Car	<input type="checkbox"/> Small Bus (9-15 W/Driver)	<input type="checkbox"/> Motorcycle	<input type="checkbox"/> Motor Home	<input type="checkbox"/> Single-unit Truck; 2 axles, 6 tires	GVW / GCVV RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only) <input type="checkbox"/> Less than or equal to 10,000 lbs. <input type="checkbox"/> 10,001 - 26,000 lbs. <input type="checkbox"/> Greater than 26,000 lbs. <input type="checkbox"/> Unknown
<input type="checkbox"/> Van (< 9 W/Driver)	<input type="checkbox"/> Large Bus (16+ W/Driver)	<input type="checkbox"/> ATV	<input type="checkbox"/> Farm Implements	<input type="checkbox"/> Single-unit Truck; 3 or more axles	
<input type="checkbox"/> Passenger Van (9+ W/Driver)	<input type="checkbox"/> School Bus	<input type="checkbox"/> 2 Wh	<input type="checkbox"/> Construction Equip. Heavy Mach.	<input type="checkbox"/> Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)	
<input type="checkbox"/> Sport Utility Vehicle	<input type="checkbox"/> Intercity	<input type="checkbox"/> 3 Wh	<input type="checkbox"/> Other Vehicle (Code) _____	<input type="checkbox"/> Truck Tractor With No Units	
<input type="checkbox"/> Limousine (7-8 W/Driver)	<input type="checkbox"/> Transit / Commuter	<input type="checkbox"/> 4 Wh	<input type="checkbox"/> Cargo Van	<input type="checkbox"/> Pickup	
<input type="checkbox"/> Limousine (9-15 W/Driver)	<input type="checkbox"/> Charter / Tour	<input type="checkbox"/> 5 Wh / More	<input type="checkbox"/> Other Heavy Truck	<input type="checkbox"/> Truck Tractor With One Unit	
<input type="checkbox"/> Motorized Bicycle	<input type="checkbox"/> Other	<input type="checkbox"/> Unknown	<input type="checkbox"/> Unknown (Explain)	<input type="checkbox"/> Truck Tractor With Two Units	
<input type="checkbox"/> Pedalcycle <input type="checkbox"/> To / From School				<input type="checkbox"/> Truck Tractor With Three Units	

EMERGENCY VEHICLE INVOLVEMENT NA Police Ambulance Fire Other (Must check "A" / "B") A. Emergency Vehicle on Emergency Run B. Stationary With Emergency Equip. Activated CONTRIBUTING TRAFFIC CONDITIONS NA Congestion Ahead Crash Ahead Other Incident Ahead Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES Additional Codes Listed in Narrative (See Codes in Section 8) SEQUENCE OF EVENTS CODES 01 | 14 | 34 ANIMAL CODE(S) FIXED OBJECT CODE(S) ALCOHOL USE Yes Unk No NA

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES None

<input type="checkbox"/> Vehicle Defects (Explain)	<input type="checkbox"/> Vision Obstructed	<input type="checkbox"/> Failed To Dim Headlights	<input type="checkbox"/> Improper Towing / Pushing	<input type="checkbox"/> Object / Obstruction in Roadway
<input type="checkbox"/> Speed - Exceeded Limit	<input type="checkbox"/> Driver Fatigue / Asleep	<input type="checkbox"/> Failed To Use Lights	<input type="checkbox"/> Improperly Stopped On Roadway	<input type="checkbox"/> Distracted / Inattentive (Designate Type)
<input type="checkbox"/> Too Fast For Conditions	<input type="checkbox"/> Improper Signal	<input type="checkbox"/> Following Too Close	<input type="checkbox"/> Improper Lane Usage / Change	<input checked="" type="checkbox"/> Unknown (Explain)
<input type="checkbox"/> Violation Signal / Sign	<input type="checkbox"/> Improper Backing	<input type="checkbox"/> Wrong Side (Not Passing)	<input type="checkbox"/> Overcorrected	<input type="checkbox"/> Other (Explain)
<input type="checkbox"/> Failed To Yield	<input type="checkbox"/> Improper Turn	<input type="checkbox"/> Wrong Side (One-Way)	<input type="checkbox"/> Improper Riding / Clinging To Veh. Exterior	DISTRACTED / INATTENTIVE CODE(S) <input checked="" type="checkbox"/> NA (See Codes in Section 8)
<input type="checkbox"/> Alcohol	<input type="checkbox"/> Improper Passing	<input type="checkbox"/> Physical Impairment (Explain)	<input type="checkbox"/> Failed To Secure Load / Improper Loading	
<input type="checkbox"/> Drugs	<input type="checkbox"/> Improperly Parked	<input type="checkbox"/> Improper Start From Park	<input type="checkbox"/> Animal(s) In Roadway	

7E. WORK ZONE Yes No Unknown TRAFFIC CONTROL None Unknown Electric: Green/Yellow/Red Flashing Red Flashing Yellow Ramp Meter Other (Explain) Workers Present Yes No Unknown Other: Stop Sign No Passing Zone Turn Restricted Officer / Flagman Signal On School Bus Controls: Warning Sign / Device Railway Crossing Sign / Device School Zone Yield Sign Other (Explain) CONTROL MALFUNCTIONING / INOPERATIVE / MISSING Yes (Explain) No Unknown NA

7F. OCCUPANTS - NAME (Last, First, MI)	DATE OF BIRTH MM-DD-YYYY	SEX	SEAT LOC	INJ	TRANS-PORT	EJEC-TION	AIR BAG	SAFETY DEVICES	PHONE NUMBER
TESTERMAN, BRETTLEY HOWARD	02-14-2000	M	FR	5	1	2	03	05	(417) 454-4742
1409 HILLCREST TR - NEOSHO, MO 64850									

7G. COMMERCIAL MOTOR VEHICLE NA Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) SAO PHONE NUMBER SAO

COMMERCIAL / NON-COMMERCIAL Interstate Carrier Intrastate Carrier Not In Commerce - Government Vehicle Not In Commerce - Rental Vehicle Not In Commerce - Other Vehicle MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE Enclosed Box Flatbed Concrete Mixer Garbage / Refuse Pole Trailer Vehicle Towing Another Veh. Intermodal Container Chassis NA (No Cargo Body) Other Cargo Tank Dump Auto Transporter Grain / Chip / Gravel Log Unknown

HAZARDOUS MATERIALS PLACARD DISPLAYED Yes No Unknown 4-DIGIT NO. CLASS HM CARGO PRESENT Yes No Unknown HM CARGO RELEASED Yes No Unknown HAZARDOUS MATERIAL NAME

7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip)
2 SANDOVAL, MARCO ANTONIO 13557 JESSUP LN - NEOSHO, MO 64850
PHONE NUMBER (417) 389-1239

DRIVER LICENSE / ID NUMBER Z078050004
STATE MO
LIC STATUS [X] Valid [] Expired [] Susp / Rev / Denied [] Disqual CDL [] Unknown
[] NA [] Canceled / Oth Invalid [] Unknown

DATE OF BIRTH 12-16-1995
SEX M SEAT LOC FL INJ 5 TRANS-PORT 1 EJECT-TION 2 AIR BAG 03 SAFETY DEVICES 05
VISION OBSTRUCTED [] NA [] Not Obstructed [] Windshield [] Load on Veh [] Trees / Brush [] Building [] Embankment [] Sign [] Hillcrest [] Parked Veh [] Moving Veh [] Stopped Veh [] Glare [] Other (Explain) [] Unknown (Explain)

PROOF OF INSURANCE [X] Yes [] No [] Not Required
INSURANCE COMPANY STATE FARM
PHONE NO. (Optional) POLICY NUMBER 280 7682-B27-25
[] Driver [X] Vehicle

7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) [X] SAD
PHONE NUMBER [X] SAD

YEAR 1997 MAKE Chevrolet MODEL CAVALIER COLOR GRN
VEH. TYPE 1 TOTAL NO. OF OCC. 2

LICENSE - PLATE NO SL1L1B STATE MO YEAR 2015 VIN 1G1JC1246V7185860
TOWED FROM SCENE [] Yes [X] No TOWED DUE TO DIS. DAMAGE [] Yes [X] No

VEHICLE DAMAGE (Mark all damaged areas) [] None / No Damage
INITIAL IMPACT NO 9
18 - Undercarriage 22 - Cargo
19 - Windshield 23 - Unknown
20 - Burned 24 - Other (Explain)
21 - Towed Unit

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles [] Vehicle Used As Public Conveyance
[X] Passenger Car [] Small Bus (9-15 W/Driver) [] Motorcycle [] Motor Home
[] Van (< 9 W/Driver) [] Large Bus (16+ W/Driver) [] ATV [] Farm Implements
[] Passenger Van (9+ W/Driver) [] School Bus [] 2 Wh [] Construction Equip. Heavy Mach.
[] Sport Utility Vehicle [] Intercity [] 3 Wh [] Other Vehicle (Code)
[] Limousine (7-8 W/Driver) [] Transit / Commuter [] 4 Wh [] Cargo Van
[] Limousine (9-15 W/Driver) [] Charter / Tour [] 5 Wh / More [] Pickup
[] Motorized Bicycle [] Other [] Unknown [] Other Heavy Truck
[] Pedalcycle [] To / From School [] Unknown (Explain) [] Truck Tractor With No Units
[] Truck Tractor With One Unit
[] Truck Tractor With Two Units
[] Truck Tractor With Three Units
GVW / GCVV RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
[] Less than or equal to 10,000 lbs.
[] 10,001 - 26,000 lbs.
[] Greater than 26,000 lbs.
[] Unknown

EMERGENCY VEHICLE INVOLVEMENT [X] NA
[] Police [] Ambulance [] A. Emergency Vehicle on Emergency Run
[] Fire [] Other (Must check "A" / "B") [] B. Stationary With Emergency Equip. Activated
CONTRIBUTING TRAFFIC CONDITIONS [] NA
[X] Congestion Ahead [] Other Incident Ahead
[] Crash Ahead [] Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES [] Additional Codes Listed in Narrative (See Codes in Section 8)
SEQUENCE OF EVENTS CODES 01 14 08 34
ALCOHOL USE [] Yes [] Unk [X] No [] NA

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES [] None
[] Vehicle Defects (Explain) [] Vision Obstructed [] Failed To Dim Headlights [] Improper Towing / Pushing [] Object / Obstruction in Roadway
[] Speed - Exceeded Limit [] Driver Fatigue / Asleep [] Failed To Use Lights [] Improperly Stopped On Roadway [] Distracted / Inattentive (Designate Type)
[] Too Fast For Conditions [] Improper Signal [] Following Too Close [] Improper Lane Usage / Change [] Unknown (Explain)
[] Violation Signal / Sign [] Improper Backing [] Wrong Side (Not Passing) [] Overcorrected [] Other (Explain)
[] Failed To Yield [] Improper Turn [] Wrong Side (One-Way) [] Improper Riding / Clinging To Veh. Exterior
[] Alcohol [] Improper Passing [] Physical Impairment (Explain) [] Failed To Secure Load / Improper Loading
[] Drugs [] Improperly Parked [] Improper Start From Park [] Animal(s) In Roadway
DISTRACTED / INATTENTIVE CODE(S) [X] NA (See Codes in Section 8)

7E. WORK ZONE [] Yes [X] No [] Unknown
TRAFFIC CONTROL [X] None [] Unknown
Electric: [] Green/Yellow/Red [] Flashing Red [] Flashing Yellow [] Ramp Meter [] Other (Explain)
Other: [] Stop Sign [] No Passing Zone [] Turn Restricted [] Officer / Flagman [] Signal On School Bus
Workers Present [] Yes [X] No [] Unknown
Controls: [] Warning Sign / Device [] Railway Crossing Sign / Device [] School Zone [] Yield Sign [] Other (Explain)
CONTROL MALFUNCTIONING / INOPERATIVE / MISSING [] Yes (Explain) [X] No [] Unknown [] NA

Table with 10 columns: OCCUPANTS - NAME (Last, First, MI), ADDRESS (Street, City, State, Zip), DATE OF BIRTH MM-DD-YYYY, SEX, SEAT LOC, INJ, TRANS-PORT, EJECT-TION, AIR BAG, SAFETY DEVICES, PHONE NUMBER. Row 1: SANDOVAL, SEAN MIGUEL, 13557 JESSUP LN - NEOSHO, MO 64850, 02-14-1998, M, FR, 5, 1, 2, 03, 05, (417) 389-1239.

7G. COMMERCIAL MOTOR VEHICLE [X] NA Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.
MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) [] SAO
PHONE NUMBER [] SAO

COMMERCIAL / NON-COMMERCIAL [] Interstate Carrier [] Not In Commerce - Government Vehicle [] Not In Commerce - Other Vehicle
[] Intrastate Carrier [] Not In Commerce - Rental Vehicle
MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE [] Enclosed Box [] Flatbed [] Concrete Mixer [] Garbage / Refuse [] Pole Trailer [] Vehicle Towing Another Veh. [] Intermodal Container Chassis [] NA (No Cargo Body) [] Other
[] Cargo Tank [] Dump [] Auto Transporter [] Grain / Chip / Gravel [] Log

HAZARDOUS MATERIALS PLACARD DISPLAYED [] Yes [] No [] Unknown
4-DIGIT NO. CLASS HM CARGO PRESENT [] Yes [] No [] Unknown
HM CARGO RELEASED [] Yes [] No [] Unknown
HAZARDOUS MATERIAL NAME

8 - CODES

SEAT LOCATION XX - Not Known B - Pedalcycle M - Motorcycle CP - Commercial Passenger OE - Occupant - Enclosed Load Area OU - Occupant - Unenclosed Load Area RC - Rail Crew SV - Other (Explain in Narrative) NA - Not Applicable	FR SR TR	INJURY 1. Fatal 2. Disabling 3. Evident - Not Disabling 4. Probable - Not Apparent 5. None Apparent U. Unknown N. NA	TRANSPORTED (For Medical Treatment) 1. No 2. EMS 3. Other U. Unknown N. NA	EJECTION 1. NA 2. No 3. Partially 4. Totally U. Unknown	AIR BAG 1. None / NA 3. Not Deployed 4. Removed 5. Deployed - Front 6. Deployed - Side 7. Deployed - Curtain 8. Deployed - Other (Knee, Air Belt, etc.)	9. Deployed - Combination 10. Deployment Unknown U. Air Bag Presence Unknown	SAFETY DEVICES 1. None 2. Not Used 3. Shoulder Belt Only 4. Lap Belt Only 5. Shoulder and Lap Belt 7. DOT Compliant MC Helmet 8. No Helmet	10. Booster Seat 11. Child Restraint - Forward Facing 12. Child Restraint - Rear Facing 13. Other Helmet 14. Reflective Clothing 15. Other U. Use Unknown N. Not Applicable
	FC SC TC							
	FL SL TL							

VEHICLE ACTION / SEQUENCE OF EVENTS (Items with double-asterisk (**)) require additional coding)

1. Going Straight	10. Start From Parked	19. Airborne	28. Separation Of Units	37. Collision Inv. Other Object (Explain)	44. Thrown/Falling Object
2. Overtaking	11. Backing	20. Ran Off Roadway - Right	29. Returned To Roadway	38. Other Non-collision	45. Struck By Falling, Shifting Cargo, Object Set In Motion By Own MV
3. Making Right Turn	12. Stopped In Traffic	21. Ran Off Roadway - Left	30. Collision Inv. Pedestrian	39. Collision Inv. Bicycle/Pedalcycle In Bicycle Lane	46. Ran Off Roadway - Other (Explain)
4. Right Turn on Red	13. Parked	22. Overturn / Rollover	31. Collision Inv. Bicycle/Pedalcycle	40. Collision Inv. Animal Drawn Vehicle / Animal Ridden For Transportation	47. Cross Separator
5. Making Left Turn	14. Changing Lanes	23. Fire / Explosion	32. Collision Inv. Railway Veh.	41. Collision Inv. Working MV	
6. Making U-Turn	15. Avoiding	24. Immersion	33. Collision Inv. Animal (**)	42. Downhill Runaway	
7. Skidding / Sliding	16. Cross Median	25. Jackknife	34. Collision Inv. MV in Transport	43. Fell/Jumped From MV	
8. Slowing / Stopping	17. Cross Center Of Road	26. Cargo Loss / Shift	35. Collision Inv. Parked MV		
9. Start In Traffic	18. Cross Road	27. Equipment Failure	36. Collision Inv. Fixed Object (**)		

ANIMAL CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

60. Deer	61. Farm Animal	62. Dog	63. Other Animal	U. Unknown
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FIXED OBJECT CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS

20. Tree / Stump (Standing)	26. Culvert	32. Building	38. Bridge Rail	44. Wall
21. Embankment / Driveway / Ground / Rock Bluff	27. Highway Traffic Sign Post / Support	33. Traffic Signal Support	39. Guardrail End	45. Cable Barrier
22. Guardrail Face	28. Bridge Pier / Abutment / Support	34. Impact Attenuator / Crash Cushion	40. Other Traffic Barrier	46. Bridge Overhead Structure
23. Utility Pole	29. Curb	35. Fire Hydrant	41. Overhead Sign Support	47. Overhead Line / Cable
24. Fence	30. Mail Box	36. Other (Explain)	42. Ditch	U. Unknown
25. Street Light Support	31. Concrete Traffic Barrier	37. Bridge Parapet End	43. Other Post / Pole / Support	

DISTRACTED / INATTENTIVE CODES

1. External Distraction	5. Communication Device - Hand-held	9. Eating / Drinking	13. Computer Equipment / Electronic Games / etc.
2. Passengers	6. Communication Device - Hands Free	10. Reading	14. Adjusting Vehicle Controls
3. Stereo / Audio / Video Equipment	7. Communication Device - Texting / E-mailing	11. Tobacco Use	15. Other (Explain)
4. Navigation Device	8. Communication Device - Web Browsing	12. Grooming	

VEHICLE TYPE CODES

1. Motor Vehicle In Transport	3. Working Motor Vehicle	5. Animal Drawn Vehicle / Animal Ridden For Transport Purposes
2. Parked Motor Vehicle	4. Pedalcycle	U. Unknown

OTHER VEHICLE CODES

1. Riding Mower / Garden Tractor	3. Snowmobile	5. Animal Drawn Vehicle / Animal Ridden For Transportation	6. Low Speed Vehicle
2. Golf Cart	4. Forklift		7. Other (Explain)

9 - NARRATIVE / STATEMENTS (If additional room is necessary, use Section 11 - Narrative / Statements Continuation)

On 09-17-2014 around 15:49hrs I received a report from Driver two of a motor vehicle accident that occurred on Neosho Boulevard around or about 15:25hrs.

Driver two stated he was traveling south on Neosho Boulevard from Stadium Dr. area in the #01 passing lane. Driver two said as he approached the cross walk signal light area on the Boulevard, he made a lane change and almost struck vehicle one traveling south in the #02 outside lane. Driver two said he did not see vehicle one in his blind spot as he was changing lanes.

Driver two said once he noticed he had almost struck vehicle one during the lane change, he sped up to put distance between his vehicle and vehicle one. Driver two said soon after he sped up, a vehicle in front of his vehicle was making a right turn and he had to slow down and as he slowed his vehicle down, he said vehicle one started to pass him on the left and as vehicle one was passing vehicle two, vehicle one clipped the left rear of his vehicle. Driver two said vehicle one continued to drive on without stopping. Driver two also indicated both vehicles were still in motion at the time of the impact.

After speaking with Driver two, around 16:00hrs I received a report from Driver one who stated she was also traveling south on Neosho Boulevard from the Stadium Dr. area and was traveling in the #02 outside lane. Driver one said she noticed vehicle two was traveling faster than she was and almost hit her vehicle as vehicle two made a quick lane change. Driver one said she had to slam on her brakes to avoid being hit by vehicle two during the lane change.

Driver one indicated a short distance later she went to change lanes and as she was changing lanes, vehicle two hit his brakes to slow ahead of her in the lane and she struck the left rear driver side of vehicle two with the right front side of her vehicle. Driver one said she did not think any damage was done and proceeded on without stopping. Drive one indicated driver two also continued on without stopping.

Written statements have been obtained from both drivers and have been attached with this report. No diagram was completed due the delayed report from both drivers. It is unknown the distance between both vehicles at the time of this accident making it difficult to determine the contributing circumstances of the accident or violation.

Nothing further.

10. REPORTING AND REVIEWING OFFICER INFORMATION

REPORTING OFFICER NAME PI BRANDON BESHEARS	DSN / BADGE NO. 110	BEAT / ZONE N	TROOP / DISTRICT / PRECINCT NA
REVIEWING OFFICER NAME SGT JASON BAIRD	DSN / BADGE NO. 104	REVIEWING OFFICER 2 NAME	DSN / BADGE NO.