

1 - GENERAL CRASH INFORMATION

AGENCY NAME AND ORI

NEOSHO POLICE DEPARTMENT - MO0730300

SPACE USED FOR BARCODE

LEFT THE SCENE DRIVER NO. 1 CLEARED YES CRASH CLASSIFICATION PROPERTY DAMAGE ONLY NO. INJURED 0 NO. KILLED 0 REPORT / CASE / INCIDENT NUMBER 1014-049

NO. VEH. INV. 2 CRASH DATE 10-07-2014 CRASH TIME (MIL) 1447 NOTIFIED DATE 10-07-2014 TIME NOTIFIED (MIL) 1450 INVESTIGATION DATE 10-07-2014 TIME ARRIVED (MIL) 1451 INVEST AT SCENE YES

CRASH TYPE ROADWAY ON ROADWAY COLLISION INVOLVING COLLISION INVOLVING ANIMAL MOTOR VEHICLE IN TRANSPORT DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE FRONT TO REAR

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 KENNEDY AVAILABLE FROM INVESTIGATING AGENCY RECONSTRUCTION BY WHOM AVAILABLE FROM INVESTIGATING AGENCY

2 - LOCATION

COUNTY NEWTON MUNICIPALITY NEOSHO BEAT / ZONE NE TRP/DIST/PCT NA GPS COORDINATES (DD MM SS.S FORMAT) LAT: N LONG: W NA

ON CST W MCCORD ST RDWY. DIR. W DISTANCE FROM 10 FEET LOCATION INTERSECTING CST JEFFERSON ST SPEED LIMIT 15 ROAD MAINTAINED BY MUNICIPAL

TRAFFICWAY ONE-WAY TWO-WAY; NOT DIVIDED ROAD ALIGNMENT STRAIGHT ROAD PROFILE LEVEL

INTERSECTION TYPE 4-WAY INTERSECTION ROAD CONDITION DRY

ROAD SURFACE ASPHALT WEATHER CONDITION CLEAR

LIGHT CONDITION DAYLIGHT

3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES NONE

LIST OWNER'S NAME & ADDRESS, DESCRIPTION OF PROPERTY, AND DAMAGE.

4 - WITNESS NONE IDENTIFIED

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

5 - PEDESTRIAN NA

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

DATE OF BIRTH SEX STRUCK BY VEH # INJ TRANSPORT SAFETY DEVICES LOCATION ON ROADWAY

CROSSING ROAD WITH SIGNAL OTHER ACTIONS NA SCHOOL INFO. NA

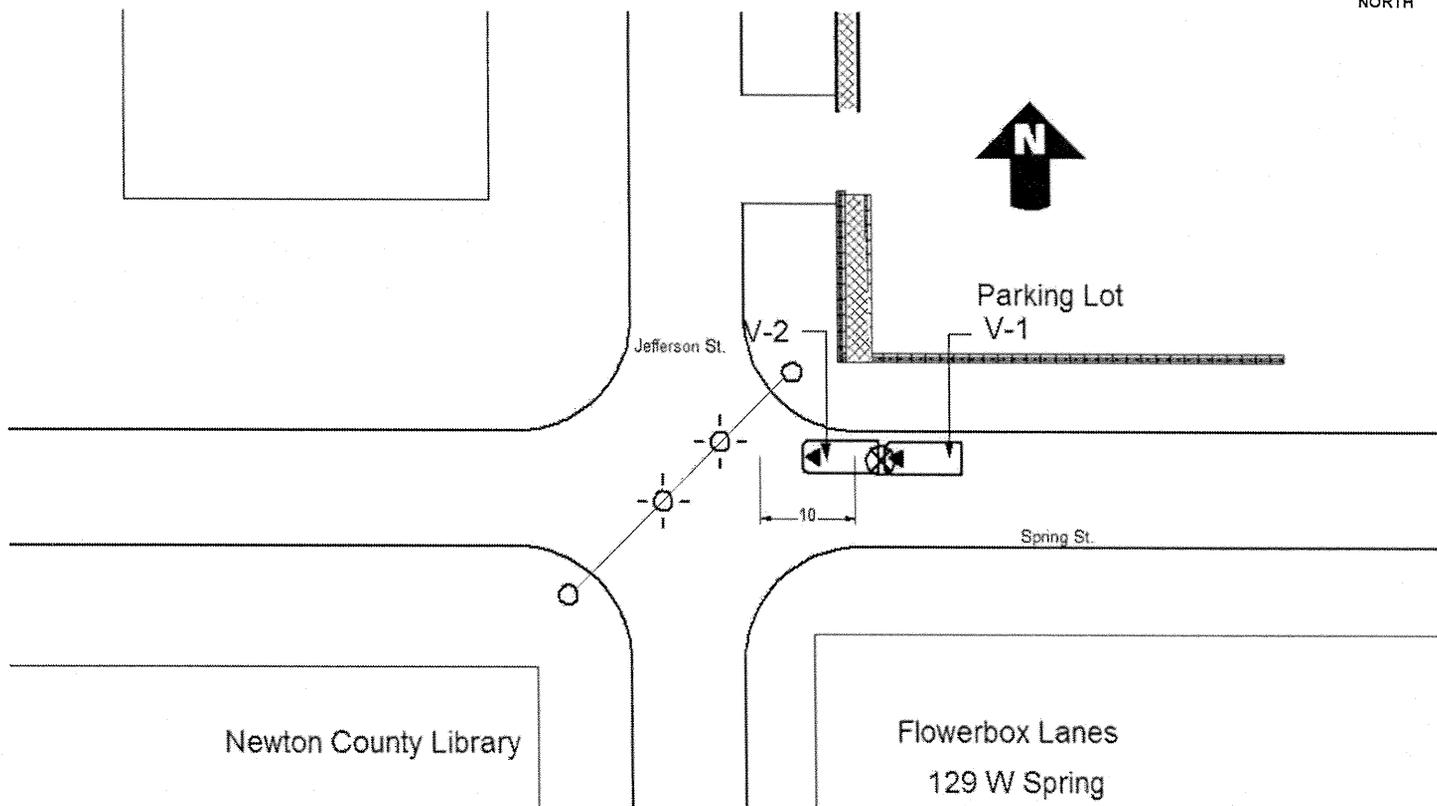
PROBABLE CONTRIBUTING CIRCUMSTANCES NONE DISTRACTED / INATTENTIVE CODE(S) NA ALCOHOL USE

6. COLLISION  
DIAGRAM

Compass Direction  
Before Crash Event(s)  
(Circle One)

V1 NES **W** U V2 NES **W** U V3 NES W U V4 NES W U V5 NES W U V6 NES W U

INDICATE  
NORTH



INDICATE ROAD NAMES

DIAGRAM TO SCALE



7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

NO. 1 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) O'BERRY, TONI LOUISE 122 W MAIN ST UPSTAIRS - NEOSHO, MO 64850 PHONE NUMBER (417) 451-6500

DRIVER LICENSE / ID NUMBER J078322003 STATE MO LIC STATUS Valid Expired NA Susp / Rev / Denied Disqual CDL Canceled / Oth Invalid Unknown NA Operator Class F Permit Unknown MC ENDORSEMENT CDL Class MC Only Unlicensed MC Only Unknown (Explain) Yes No NA Unknown (Explain)

DATE OF BIRTH 07-09-1980 SEX F SEAT LOC FL INJ 5 TRANS-PORT 1 EJECT-TION 2 AIR BAG 03 SAFETY DEVICES U VISION OBSTRUCTED Not Obstructed Trees / Brush Sign Moving Veh Other (Explain) Windshield Building Hillcrest Stopped Veh Unknown (Explain) Load on Veh Embankment Parked Veh Glare

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

7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) CAR MART OF NEOSHO, 311 S NEOSHO BD - NEOSHO, MO 64850 PHONE NUMBER (417) 455-1111 SAD

YEAR 2006 MAKE ISUZU MODEL RODEO COLOR SIL VEH. TYPE 1 TOTAL NO. OF OCC. 1

LICENSE - PLATE NO. 00DKTT STATE MO YEAR 2014 VIN 4S12DM58W444316760 TOWED FROM SCENE Yes No TOWED DUE TO DIS. DAMAGE Yes No

VEHICLE DAMAGE (Mark all damaged areas) None / No Damage TOWED BY Unknown NA INITIAL IMPACT NO. 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 - Undercarriage 22 - Cargo 19 - Windshield 23 - Unknown 20 - Burned 24 - Other (Explain) 21 - Towed Unit RON'S WRECKER SERVICE

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles Vehicle Used As Public Conveyance Passenger Car Van (< 9 W/Driver) Passenger Van (9+ W/Driver) Sport Utility Vehicle Limousine (7-8 W/Driver) Limousine (9-15 W/Driver) Motorized Bicycle Pedalcycle To / From School Small Bus (9-15 W/Driver) Large Bus (16+ W/Driver) School Bus Intercity Transit / Commuter Charter / Tour Other Motorcycle ATV 2 Wh 3 Wh 4 Wh 5 Wh / More Unknown Motor Home Farm Implements Construction Equip. Heavy Mach. Other Vehicle (Code) Cargo Van Other Heavy Truck Unknown (Explain) Single-unit Truck; 2 axles, 6 tires Single-unit Truck; 3 or more axles Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors) Truck Tractor With No Units Truck Tractor With One Unit Truck Tractor With Two Units Truck Tractor With Three Units GVW / GCW 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 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 Unknown ANIMAL CODE(S) FIXED OBJECT CODE(S) ALCOHOL USE Yes Unk No NA

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

7E. WORK ZONE Yes No Unknown Traffic Control None Unknown Electric Green/Yellow/Red Flashing Red Flashing Yellow Ramp Meter Other (Explain) Workers Present 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

Table with 7F. 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

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 - Other Vehicle MC / MX / ICC NO. USDOT NO. Not In Commerce - Rental Vehicle

CARGO BODY TYPE Enclosed Box Cargo Tank Flatbed Dump Concrete Mixer Auto Transporter Garbage / Refuse Grain / Chip / Gravel Pole Trailer Log Vehicle Towing Another Veh. Intermodal Container Chassis NA (No Cargo Body) Other 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 WINN, RYAN KEITH 17666 LOCUST RD - NEOSHO, MO 64850 PHONE NUMBER (417) 389-7934

DRIVER LICENSE / ID NUMBER: N068290005 STATE: MO LIC STATUS: [X] Valid [ ] Expired [ ] Susp / Rev / Denied [ ] Disqual CDL [ ] Canceled / Oth Invalid [ ] Unknown [ ] Operator Class [ ] Permit [ ] Unknown (Explain) [ ] MC ENDORSEMENT [ ] Yes [ ] No [X] NA [ ] CDL Class [ ] MC Only [ ] Unknown (Explain) [ ] Interm / Grad [ ] Unlicensed [ ] Unknown (Explain)

DATE OF BIRTH: 02-24-1974 SEX: M SEAT LOC: FL INJ: 5 TRANS-PORT: 1 EJECT-TION: 2 AIR BAG: 03 SAFETY DEVICES: U VISION OBSTRUCTED: [X] NA [ ] 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: GEICO PHONE NO. (Optional): (800) 841-8000 - POLICY NUMBER: 4365-19-74-92 [ ] Driver [X] Vehicle

7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip): NORRELL, DONALD E 719 CLINTON - CARTHAGE, MO 64836 PHONE NUMBER (417) 237-0931

YEAR: 2006 MAKE: Ford MODEL: TAURUS COLOR: PEW VEH. TYPE: 1 TOTAL NO. OF OCC.: 1

LICENSE - PLATE NO: AU05E STATE: MO YEAR: 2015 VIN: 1FAFP53U46A262498 TOWED FROM SCENE: [ ] Yes [X] No TOWED DUE TO DIS. DAMAGE: [ ] Yes [X] No

VEHICLE DAMAGE (Mark all damaged areas): [ ] None / No Damage TOWED BY: [ ] Unknown [X] NA INITIAL IMPACT NO: 8

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles: [X] Passenger Car [ ] Small Bus (9-15 W/Driver) [ ] Motorcycle [ ] Motor Home [ ] Single-unit Truck; 2 axles, 6 tires [ ] GVW / GCW RATING (Not Licensed Weight) [ ] Van (< 9 W/Driver) [ ] Large Bus (16+ W/Driver) [ ] ATV [ ] Farm Implements [ ] Single-unit Truck; 3 or more axles [ ] Passenger Van (9+ W/Driver) [ ] School Bus [ ] 2 Wh [ ] Construction Equip. Heavy Mach. [ ] Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors) [ ] Sport Utility Vehicle [ ] Intercity [ ] 3 Wh [ ] Other Vehicle (Code) [ ] Truck Tractor With No Units [ ] Less than or equal to 10,000 lbs. [ ] Limousine (7-8 W/Driver) [ ] Transit / Commuter [ ] 4 Wh [ ] Cargo Van [ ] Truck Tractor With One Unit [ ] 10,001 - 26,000 lbs. [ ] Limousine (9-15 W/Driver) [ ] Charter / Tour [ ] 5 Wh / More [ ] Other Heavy Truck [ ] Truck Tractor With Two Units [ ] Greater than 26,000 lbs. [ ] Motorized Bicycle [ ] Other [ ] Unknown [ ] Other Heavy Truck [ ] Unknown (Explain) [ ] Truck Tractor With Three Units [ ] Unknown [ ] Pedalcycle [ ] To / From School [ ] Unknown (Explain)

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

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES: SEQUENCE OF EVENTS CODES: 12 34 [ ] Unknown ANIMAL CODE(S): FIXED OBJECT CODE(S): ALCOHOL USE: [X] No [ ] Yes [ ] Unk [ ] NA

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES: [X] 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 [ ] Failed To Secure Load / Improper Loading [ ] Alcohol [ ] Improper Passing [ ] Physical Impairment (Explain) [ ] Failed To Secure Load / Improper Loading [ ] Failed To Yield [ ] Improperly Parked [ ] Improper Start From Park [ ] Animal(s) In Roadway [ ] Drugs [ ] Improperly Parked [ ] Improper Start From Park [ ] Animal(s) In Roadway

7E. WORK ZONE: [X] No [ ] Yes [ ] Unknown TRAFFIC CONTROL: [X] Green/Yellow/Red [ ] Flashing Red [ ] Flashing Yellow [ ] Ramp Meter [ ] Other (Explain) CONTROL MALFUNCTIONING / INOPERATIVE / MISSING: [X] No [ ] Yes (Explain) [ ] Unknown [ ] NA

7F. 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

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 [ ] 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:

Handwritten signature or initials in a circle.

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 FC SC TC FL SL TL	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
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VEHICLE ACTION / SEQUENCE OF EVENTS (Items with double-asterisk (\*\*)) require additional coding)

1. Going Straight 2. Overtaking 3. Making Right Turn 4. Right Turn on Red 5. Making Left Turn 6. Making U-Turn 7. Skidding / Sliding 8. Slowing / Stopping 9. Start In Traffic	10. Start From Parked 11. Backing 12. Stopped In Traffic 13. Parked 14. Changing Lanes 15. Avoiding 16. Cross Median 17. Cross Center Of Road 18. Cross Road	19. Airborne 20. Ran Off Roadway - Right 21. Ran Off Roadway - Left 22. Overturn / Rollover 23. Fire / Explosion 24. Immersion 25. Jackknife 26. Cargo Loss / Shift 27. Equipment Failure	28. Separation Of Units 29. Returned To Roadway 30. Collision Inv. Pedestrian 31. Collision Inv. Bicycle/Pedalcycle 32. Collision Inv. Railway Veh. 33. Collision Inv. Animal (**) 34. Collision Inv. MV in Transport 35. Collision Inv. Parked MV 36. Collision Inv. Fixed Object (**)	37. Collision Inv. Other Object (Explain) 38. Other Non-collision 39. Collision Inv. Bicycle/Pedalcycle In Bicycle Lane 40. Collision Inv. Animal Drawn Vehicle / Animal Ridden For Transportation 41. Collision Inv. Working MV 42. Downhill Runaway 43. Fell/Jumped From MV	44. Thrown/Falling Object 45. Struck By Falling, Shifting Cargo, Object Set In Motion By Own MV 46. Ran Off Roadway - Other (Explain) 47. Cross Separator
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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) 21. Embankment / Driveway / Ground / Rock Bluff 22. Guardrail Face 23. Utility Pole 24. Fence 25. Street Light Support	26. Culvert 27. Highway Traffic Sign Post / Support 28. Bridge Pier / Abutment / Support 29. Curb 30. Mail Box 31. Concrete Traffic Barrier	32. Building 33. Traffic Signal Support 34. Impact Attenuator / Crash Cushion 35. Fire Hydrant 36. Other (Explain) 37. Bridge Parapet End	38. Bridge Rail 39. Guardrail End 40. Other Traffic Barrier 41. Overhead Sign Support 42. Ditch 43. Other Post / Pole / Support	44. Wall 45. Cable Barrier 46. Bridge Overhead Structure 47. Overhead Line / Cable U. Unknown
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DISTRACTED / INATTENTIVE CODES

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

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

1. Riding Mower / Garden Tractor 2. Golf Cart	3. Snowmobile 4. Forklift	5. Animal Drawn Vehicle / Animal Ridden For Transportation	6. Low Speed Vehicle 7. Other (Explain)
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9. NARRATIVE / STATEMENTS (If additional room is necessary, use Section 11 - Narrative / Statements Continuation)

I was sent to the intersection of Jefferson and McCord Streets for a motor vehicle accident.

Upon arrival, it was determined vehicle # 1 had left the scene traveling northbound on Jefferson Street.

I met with the driver of vehicle # 2, Mr. Ryan Winn. Mr. Winn stated he was sitting at the traffic light waiting to continue westbound on McCord Street. Mr. Winn stated then next thing he knew his vehicle was struck from behind. Mr. Winn stated the force of the accident had pushed him out into the intersection. Mr. Winn stated the vehicle engine had died so he coasted across Jefferson Street and parked in a nearby parking lot. Mr. Winn stated this is when he seen vehicle # 1 traveling northbound on Jefferson Street at a high rate of speed.

A short time later, vehicle # 1 was located and the information was added into this report. A statement was obtained and will be provided by Ofc. Coon.

10. REPORTING AND REVIEWING OFFICER INFORMATION

REPORTING OFFICER NAME LT DAVID KENNEDY	DSN / BADGE NO. 103	BEAT / ZONE NE	TROOP / DISTRICT / PRECINCT NA
REVIEWING OFFICER NAME CHF DAVID MCCRACKEN	DSN / BADGE NO. 101	REVIEWING OFFICER 2 NAME	DSN / BADGE NO.

1014-049



NINTON COUNTY GOVERNMENT CENTER

USE ANNEX

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