

MISSOURI UNIFORM CRASH REPORT

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 (ML) NOTIFIED DATE TIME NOTIFIED (ML) INVESTIGATION DATE TIME ARRIVED (ML) INVEST. AT SCENE

CRASH TYPE 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

1. Does this crash involve any of the following? 2. Examine each vehicle to determine if it is a commercial vehicle based upon the following:

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 SPEED LIMIT ROAD MAINTAINED BY

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.

OWNER: ACCESS FAMILY CARE - 475 NELSON AV NEOSHO, MO 64850 - (417) 451-0619

PROPERTY: CHAIN LINK FENCE - CHAIN LINK FENCE - Estimated Damages: \$200.00

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 (S) W U

V2 N (E) S W U

V3 N E S W U

V4 N E S W U

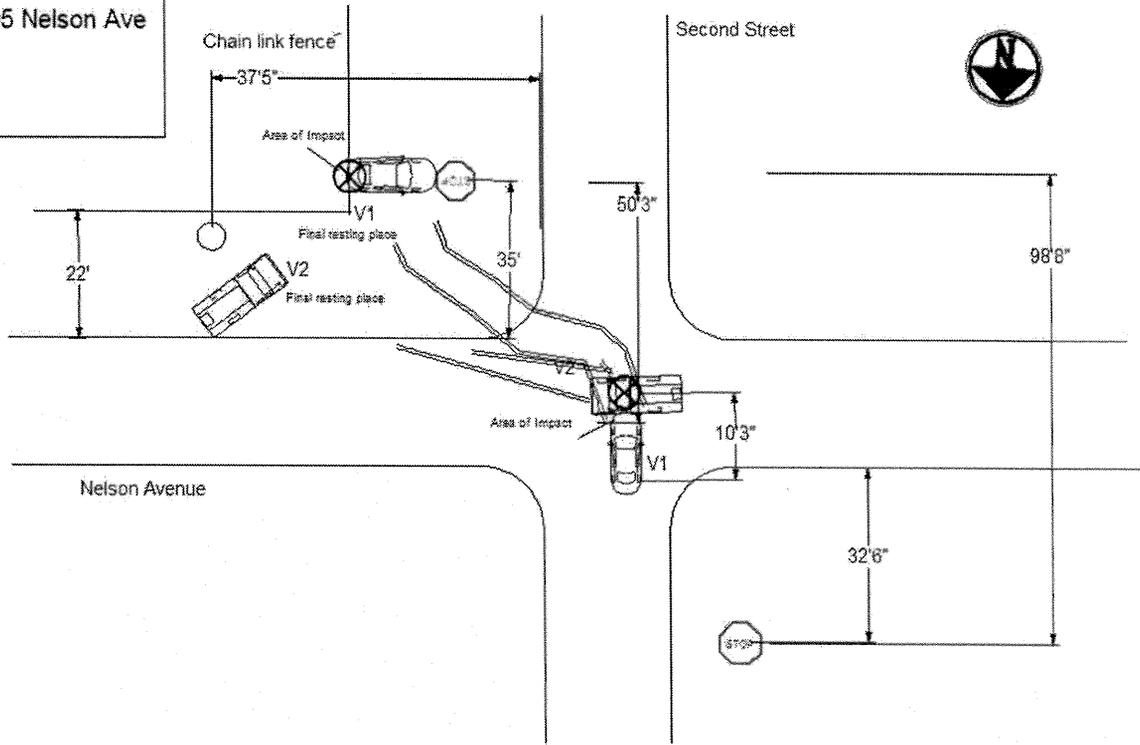
V5 N E S W U

V6 N E S W U



INDICATE NORTH

475 Nelson Ave



Nelson Avenue

Second Street

INDICATE ROAD NAMES

DIAGRAM NOT TO SCALE

7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip)
1 PORTER, BRADLEY VERNON 3690 SECOND ST - NEOSHO, MO 64850
PHONE NUMBER (417) 454-5937

DRIVER LICENSE / ID NUMBER T980619398
STATE MO
LIC STATUS Valid
LIC TYPE Operator Class F

DATE OF BIRTH 02-13-1980
SEX M SEAT LOC FL
INJ 3 TRANS-PORT 2 EJECT-TION 2 AIR BAG 03 SAFETY DEVICES 02
VISION OBSTRUCTED Not Obstructed

PROOF OF INSURANCE
INSURANCE COMPANY Expired
PHONE NO. (Optional) POLICY NUMBER NA

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

YEAR 1999 MAKE Ford MODEL CONTOUR
COLOR MAR VEH. TYPE 1 TOTAL NO. OF OCC. 1

LICENSE - PLATE NO. WH6Z5E
STATE MO YEAR 2015
VIN 1 F A F P 6 6 L 3 X K 1 9 4 6 6 6
TOWED FROM SCENE Yes
TOWED DUE TO DIS. DAMAGE Yes

VEHICLE DAMAGE (Mark all damaged areas)
INITIAL IMPACT NO. 1
TOWED BY Poore's Truck Salvage & Towing 451-4442

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles
Passenger Car
Small Bus (9-15 W/Driver)
Motorcycle
Motor Home

EMERGENCY VEHICLE INVOLVEMENT NA
CONTRIBUTING TRAFFIC CONDITIONS NA

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES
SEQUENCE OF EVENTS CODES 01 07 34 07 21 36
ALCOHOL USE No

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES
Vehicle Defects (Explain)
Vision Obstructed
Failed To Dim Headlights
Improper Towing / Pushing

7E. WORK ZONE
TRAFFIC CONTROL None
CONTROL MALFUNCTIONING / INOPERATIVE / MISSING No

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

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
Not In Commerce - Government 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
Intermodal Container Chassis
NA (No Cargo Body)
Other

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

7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) 2 BASS, ROBERT RAY 207 W SOUTH ST - NEOSHO, MO 64850 PHONE NUMBER (417) 592-9851

DRIVER LICENSE / ID NUMBER T202208014 STATE MO LIC STATUS [X] Valid [] Expired [] Susp / Rev / Denied [] Disqual CDL [] Canceled / Oth Invalid [] Unknown [] Operator Class F [] Permit [] Unknown (Explain) MC ENDORSEMENT [] Yes [] No [X] NA [] Unknown (Explain)

DATE OF BIRTH 05-29-1990 SEX M SEAT LOC FL INJ 3 TRANS-PORT 2 EJECTION 4 AIR BAG 03 SAFETY DEVICES 01 VISION OBSTRUCTED [] NA [X] 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 [X] No [] Not Required INSURANCE COMPANY [] Expired PHONE NO. (Optional) POLICY NUMBER [X] NA [] Driver [] Vehicle

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

YEAR 1995 MAKE Ford MODEL F150 COLOR BRN VEH. TYPE 1 TOTAL NO. OF OCC. 1

LICENSE - PLATE NO 1PX170 STATE MO YEAR 2015 VIN 1FMDA41X8SZA58580 TOWED FROM SCENE [X] Yes [] No TOWED DUE TO DIS. DAMAGE [X] Yes [] No

VEHICLE DAMAGE (Mark all damaged areas) [] None / No Damage TOWED BY [] Unknown [] NA Poore's Truck Salvage & Towing 451-4442 INITIAL IMPACT NO: 12

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 [] Pickup [] 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 [] GWV / GCWV RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only) [X] 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 [] 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 [X] Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES [] Additional Codes Listed in Narrative (See Codes in Section 8) SEQUENCE OF EVENTS CODES [] Unknown 01 34 07 ALCOHOL USE [] Yes [X] Unk [] No [] NA

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES [X] 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) [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 Controls: [] Warning Sign / Device [] Railway Crossing Sign / Device [] School Zone [] Yield Sign [] Other (Explain) CONTROL MALFUNCTIONING / INOPERATIVE / MISSING [] Yes (Explain) [X] No [] 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 EJECTION 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 (Lessee, 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 [] 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

8 - CODES

SEAT LOCATION	FR SR TR FC SC TC FL SL TL	INJURY	TRANSPORTED (For Medical Treatment)	EJECTION	AIR BAG	SAFETY DEVICES
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		1. Fatal 2. Disabling 3. Evident - Not Disabling 4. Probable - Not Apparent 5. None Apparent U. Unknown N. NA	1. No 2. EMS 3. Other U. Unknown N. NA	1. NA 2. No 3. Partially 4. Totally U. Unknown	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	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

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)

See Supplemental Narrative Page

10. REPORTING AND REVIEWING OFFICER INFORMATION

REPORTING OFFICER NAME PI JOHN MILLER	DSN / BADGE NO. 119	BEAT / ZONE CR	TROOP / DISTRICT / PRECINCT NFD2-C
REVIEWING OFFICER NAME SGT JOSHUA BUCKNER	DSN / BADGE NO. 105	REVIEWING OFFICER 2 NAME	DSN / BADGE NO.

SUPPLEMENTAL REPORT NO.		SUPPLEMENTAL REPORT DATE		AGENCY NAME AND ORI	
				NEOSHO POLICE DEPARTMENT - MO0730300	
CRASH DATE	TRP / DIST / PCT	COUNTY			
04-26-2015	NFD2-C	NEWTON			
REPORTING OFFICER NAME		DSN / BADGE NO.	SUPPLEMENTAL REVIEWING OFFICER NAME		DSN / BADGE NO.
PI JOHN MILLER		119	SGT JOSHUA BUCKNER		105

NARRATIVE / STATEMENTS CONTINUATION / SUPPLEMENT

MAIN NARRATIVE

Prior to my arrival to the traffic crash at Nelson Avenue and Second Street, Neosho Fire Department was already on scene. Upon my arrival to the scene, I observed a brown pickup truck, vehicle 2 (V2), with Missouri registration 1PX170 facing west on Nelson Avenue in the ditch. The pickup truck had a large amount of damage to the driver side and a male subject was lying on the ground next to the vehicle. The male was later identified by his Missouri driver license as Robert Bass. Mr. Bass was incoherent due to a head injury and was unable to provide a statement to what happened.

I also observed a maroon passenger car, vehicle 1 (V1), with Missouri registration WH6Z5E facing the west on Second Street with the rear end in the air resting against a chain link fence with heavy damage to the front end and passenger side of the vehicle. I observed a male standing against the chain link fence with blood on his face and he was stating that he may have broke his leg. I made contact with the male and learned his was the driver of V1. He was identified by his Missouri driver license as Bradley Porter.

Mr. Porter said he was traveling south on Second Street toward the stop sign at Nelson Avenue. He said he applied his breaks but nothing happened. He explained he drove through the intersection and struck V2. Mr. Porter was unsure of which direction V2 was traveling on Nelson Avenue. I requested Mr. Porter submit to a preliminary breath test (PBT) and he agreed to do so. The PBT showed negative for the presence of alcohol.

Due to the damage to vehicle 1, I asked Mr. Porter who he would like to tow his vehicle. Mr. Porter said he would like to have Poore's Towing to come and get his vehicle. Due to Mr. Bass not being able to communicate with me I also asked for a non preference tow for his pickup truck. Poore's Towing responded to the scene and removed both vehicles from the scene.

Both Mr. Porter and Mr. Bass were taken to the Freeman West Hospital from the scene by the Newton County Ambulance to be treated for their injuries.

Photographs were taken of the scene and they are attached to this report.

While on scene I was approached by a male identified as Dale Bowman; he said he did not witness the accident itself but witnessed V1 traveling at a high rate of speed on Second Street. He said while he was weed eating he heard tires squealing and heard vehicles collide. He said when he looked up he saw the vehicles come to a stop. He said he ran up to the vehicles and noticed Mr. Bass was lying on the ground with blood coming from his head. He said he took off his jacket and placed it under the drivers head to prop it up. He said he went to V1 and Mr. Porter was already out of the vehicle walking around.

I spoke with a witness identified by his Missouri driver license as Charles Williams. Mr. Williams said V1 was traveling south on Second Street at a high rate of speed. He explained V1 did not attempt to stop at the stop sign and ran through the intersection. He stated V2 was traveling east on Nelson Avenue and was stuck on the driver side by V1. I had Mr. Williams complete a voluntary statement form which is attached to this report.

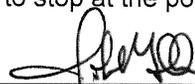
As I was about to the leave the scene, I was approached by multiple people from the surrounding houses. They all said they recognized Mr. Porter as the individual that is always driving V1. They explained he is always driving too fast and has "Blown" through the stop sign on multiple occasions. They said there have been many complaints about V1 and they have always been afraid V1 would hit a child playing or another vehicle but never had called it in.

I later made contact with personnel at Access Family Care at 475 Nelson Avenue. I spoke with Chief Finance officer Shelia Long. I informed Ms. Long about the accident and of the damage to the chain link fence. I informed her that the vehicles involved did not have insurance and she stated she understood.

As of this time I have been unable to speak with the driver of V2, Mr. Bass, about the incident.

Based on the vehicle damage and statements, I believe V1 was traveling south on Second Street and V2 was traveling east on Nelson Avenue. V1 failed to stop at the posted stop sign and struck the driver side of V2.

Nothing else follows.




SUPPLEMENTAL NARRATIVE - SUBPOENA / SPOKE WITH DRIVER OF VEHICLE

OFFICER: JLM

4/28/2015

On 04-26-2015, I responded to the intersection of Nelson Avenue and Second Street for an injury traffic crash. Drivers from

SUPPLEMENTAL REPORT NO.		SUPPLEMENTAL REPORT DATE		AGENCY NAME AND ORI	
CRASH DATE		TRP / DIST / PCT	COUNTY	NEOSHO POLICE DEPARTMENT - MO0730300	
04-26-2015		NFD2-C	NEWTON		
REPORTING OFFICER NAME			DSN / BADGE NO.	SUPPLEMENTAL REVIEWING OFFICER NAME	DSN / BADGE NO.
PI JOHN MILLER			119	SGT JOSHUA BUCKNER	105

NARRATIVE / STATEMENTS CONTINUATION / SUPPLEMENT

both vehicles were sent to Freeman West Hospital to be treated for their injuries. Before the driver of V1 left the scene; a preliminary breath test (PBT) was conducted and it showed negative for the presence of alcohol. Due to the injuries of the driver of V2 a sample could not be obtain. I completed a subpoena to produce medical result documents for the driver of V2 and it has been sent to the Freeman West Hospital Medical Records Division via email.

On 04-28-2015, I went to an updated address for the driver of V2, Robert Bass and was able to speak with him about the traffic crash. Mr. Bass said all he could remember was leaving his sisters apartment and he was traveling east on Nelson Avenue; in order to go to his residence on South Street. He said he could not remember anything about the wreck and was not sure what happened. I asked Mr. Bass if he had insurance on his pickup truck and he stated he did not.

Nothing else follows.

