

1 - GENERAL CRASH INFORMATION

SPACE USED FOR BARCODE

AGENCY NAME AND ORI

NEOSHO POLICE DEPARTMENT - MO0730300



LEFT THE SCENE Yes No DRIVER NO. _____ CLEARED Yes No CRASH CLASSIFICATION _____ PROPERTY DAMAGE ONLY NO. INJURED 1 NO. KILLED 0 REPORT / CASE / INCIDENT NUMBER 0615-096

NO. VEH. INV. 1 CRASH DATE 06-12-2015 CRASH TIME (MIL) 0155 NOTIFIED DATE 06-12-2015 TIME NOTIFIED (MIL) 0157 INVESTIGATION DATE 06-12-2015 TIME ARRIVED (MIL) 0200 INVEST. AT SCENE Yes No

CRASH TYPE On Roadway Off Roadway

NON-COLLISION Overturning Fire / Explosion Immersion Jackknife

COLLISION INVOLVING Animal Pedalcycle Fixed Object Other Object Pedestrian

Railway Vehicle Animal Drawn Veh / Animal Ridden Trans. Motor Vehicle in Transport Parked Motor Vehicle Working Motor Vehicle

DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE Front to Front Front to Rear Rear to Rear Rear to Side Angle Sideswipe (Same Dir.) Sideswipe (Opp. Dir.) Falling / Shifting Cargo (Set in motion by MV) Other (Explain) Unknown (Explain)

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?
 1a. A person fatally injured; OR
 1b. A person transported for medical attention; OR
 1c. A vehicle towed due to disabling damage. No - No commercial vehicle fields need completion. Yes - Go to number 2. →

2. Examine each vehicle to determine if it is a commercial vehicle based upon the following:
 2a. A truck / cargo van with GVWR / GCWR of more than 10,000 lbs; OR No - No commercial vehicle fields need completion.
 2b. A motor vehicle with seating for 9 or more including driver; OR Yes - Complete Section 7G for appropriate vehicle.
 2c. A vehicle with a hazardous materials placard.

EVIDENTIARY PHOTOS TAKEN Yes No BY WHOM 113 AVAILABLE FROM Investigating Agency

RECONSTRUCTION Yes No BY WHOM _____ AVAILABLE FROM Investigating Agency

2 - LOCATION

COUNTY NEWTON MUNICIPALITY NEOSHO BEAT / ZONE S TRP/DIST/PCT NFD2-S GPS COORDINATES (DD MM SS S FORMAT) LAT. N LONG. W NA

ON CST 1094 S NEOSHO BLVD RDWY. DIR. N DISTANCE FROM 200 Feet LOCATION After NA INTERSECTING N of CST WALDO HATLER MEMORAL DR

SPEED LIMIT 45 ROAD MAINTAINED BY State County Municipal Private Property Other SPEED LIMIT 25 INT. DIR. W GEO-CODE NA

TRAFFICWAY One-Way Two-Way; Not Divided Two-Way; Divided; Unprotected Median Other Two-Way; Not Divided; Continuous Center Turn Lane Two-Way; Divided; Positive Median Barrier Unknown

ROAD ALIGNMENT Straight Curve Unknown (Explain) ROAD PROFILE Level Downhill Dip Uphill Hillcrest Unknown (Explain)

INTERSECTION TYPE NA 4-way Intersection Y-Intersection 5-way / More Unknown (Explain) T-Intersection Roundabout Other (Explain)

ROAD CONDITION Dry Snow Slush Standing Water Sand / Gravel Unknown (Explain) Wet Ice / Frost Mud / Dirt Moving Water Other (Explain)

ROAD SURFACE Concrete Brick Dirt / Sand Cobblestone Asphalt Gravel Multi-Surface Unknown (Explain)

WEATHER CONDITION Clear Rain Sleet / Hail Fog / Mist Other (Explain) Cloudy Snow Freezing (Temp) Severe Crosswind Unknown (Explain)

LIGHT CONDITION Daylight Dark-Lighted Dark-Unlighted Dark-Unknown Lighting Other (Explain) Unknown (Explain)

3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES None

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

4 - WITNESS None Identified Additional Witnesses In Narrative

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

5 - PEDESTRIAN NA Law Enforcement Officer Other Emergency Services Personnel MoDOT Worker Other Trafficway Worker Other 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 On Roadway In Driveway Access On Median / Crossing Island On Sidewalk Off Roadway Unknown

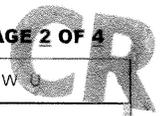
CROSSING ROAD NA With Signal Against Signal No Signal Unknown

OTHER ACTIONS NA / None Getting On / Off Vehicle Standing / Lying / Sitting In Trafficway Pushing / Working On Vehicle Behind / In Front of Parked / Stopped Veh. Working in Trafficway Playing In Trafficway Walking / Running In Trafficway With Traffic Against Traffic

SCHOOL INFO. NA Going To / From School Getting On / Off School Bus Both Of The Above Unknown (Explain)

PROBABLE CONTRIBUTING CIRCUMSTANCES None Failed To Yield Alcohol Vision Obstructed (Explain) Distracted / Inattentive Drugs Physical Impairment (Explain) Other (Explain) Unknown (Explain)

DISTRACTED / INATTENTIVE CODE(S) NA ALCOHOL USE Yes No Unknown



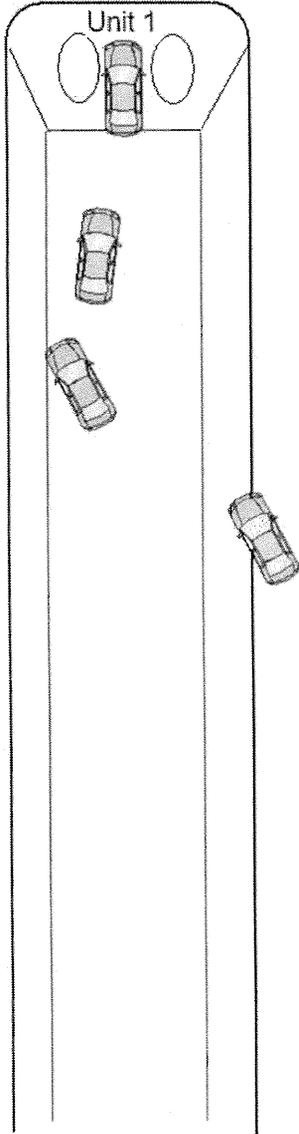
6. COLLISION DIAGRAM

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

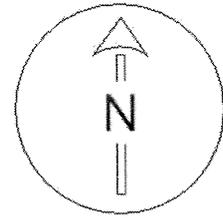
V1 NESWU V2 NESWU V3 NESWU V4 NESWU V5 NESWU V6 NESWU

INDICATE NORTH

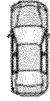
Private Driveway
1088 S Neosho Blvd



S Neosho Blvd



Unit 1



INDICATE ROAD NAMES

DIAGRAM NOT TO SCALE

7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

NO. **1** 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) **TURNER, SHAUN MICHAEL 373 W CEDAR ST - GRANBY, MO 64844** PHONE NUMBER

DRIVER LICENSE / ID NUMBER **X078300002** STATE **MO** LIC STATUS Valid Expired Susp / Rev / Denied Disqual CDL Canceled / Oth Invalid Unknown

LIC TYPE Operator Class **F** Permit Unknown (Explain) MC Endorsement Yes No NA Unknown (Explain)

DATE OF BIRTH **09-16-1995** SEX **M** SEAT LOC **FL** INJ **3** TRANS-PORT **2** EJECTION **2** AIR BAG **05** SAFETY DEVICES **05** VISION OBSTRUCTED Not Obstructed Trees / Brush Sign Moving Veh Other (Explain)

PROOF OF INSURANCE Yes No Not Required INSURANCE COMPANY **NATIONWIDE** PHONE NO. (Optional) POLICY NUMBER **PPNM0051588** Driver Vehicle

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

YEAR **2000** MAKE **Ford** MODEL **FOCUS** COLOR **RED** VEH. TYPE **1** TOTAL NO. OF OCC. **1**

LICENSE - PLATE NO **CK1C3H** STATE **MO** YEAR **2016** VIN **1 F A F P 3 4 P 7 Y W 2 3 3 8 5 5** TOWED FROM SCENE Yes No TOWED DUE TO DIS. DAMAGE Yes No

VEHICLE DAMAGE (Mark all damaged areas) None / No Damage INITIAL IMPACT NO: **14** NA

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

TOWED BY Unknown NA **REINGIER TOWING**

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

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 Other Incident Ahead Crash Ahead Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES Additional Codes Listed in Narrative (See Codes in Section 8) ALCOHOL USE Yes Unk No NA

SEQUENCE OF EVENTS CODES Unknown **01 17 21 36** ANIMAL CODE(S) FIXED OBJECT CODE(S) **26**

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)

Other: Stop Sign No Passing Zone Turn Restricted Officer / Flagman Signal On School Bus 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	SEX	SEAT LOC	INJ	TRANS-PORT	EJECTION	AIR BAG	SAFETY DEVICES	PHONE NUMBER
ADDRESS (Street, City, State, Zip)	MM-DD-YYYY								

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 (Lease, 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 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	INJURY	TRANSPORTED	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	(For Medical Treatment) 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 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 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)

On 6/12/2015 at around 0157 hours, officers responded to the 1000 Block of South Neosho Boulevard in reference to a single vehicle crash. One male subject was transported by EMS.

I arrived on scene in front of US Bank at 1094 South Neosho Boulevard and observed a red passenger car in the culvert.

I made contact with driver 1 (D1) Shaun Turner who was in operation of vehicle 1 (V1) a red 2000 Ford Focus bearing Missouri registration CK1C3H. D1 stated he had left work to pick up his mother. D1 stated he thought he fell asleep driving. D1 added the last thing he remembered was driving northbound on South Neosho Boulevard, and then woke up when the air bag deployed.

I was advised by EMS personal that D1's blood sugar level read "HIGH" on a test and explained "HIGH" means it was over 600mg/dL. D1 was transported to the Freeman West by Newton County EMS.

No witnesses were identified on scene.

Photographs of the scene were taken and have been attached to this report.

Vehicle was towed from the scene by Rieniger Towing as per owner.

Nothing further.

10. REPORTING AND REVIEWING OFFICER INFORMATION

REPORTING OFFICER NAME OFF DUSTIN DOTY	DSN / BADGE NO. 113	BEAT / ZONE S	TROOP / DISTRICT / PRECINCT NFD2-S
REVIEWING OFFICER NAME SGT REECE HIMMELSBACH	DSN / BADGE NO. 104	REVIEWING OFFICER 2 NAME	DSN / BADGE NO.