

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 0915-064

NO. VEH. INV. 2 CRASH DATE 09-07-2015 CRASH TIME (MIL) 2021 NOTIFIED DATE 09-08-2015 TIME NOTIFIED (MIL) 2021 INVESTIGATION DATE 09-09-2015 TIME ARRIVED (MIL) 2023 INVEST. AT SCENE YES NO

ROADWAY ON ROADWAY COLLISION INVOLVING Motor Vehicle in Transport DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE Front to Front Angle Other

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 RECONSTRUCTION BY WHOM AVAILABLE FROM Investigating Agency

2 - LOCATION

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

ON CST W COLER ST RDWY. DIR. W DISTANCE FROM NA LOCATION INTERSECTING CST N VALLEY ST

TRAFFICWAY One-Way Two-Way; Not Divided ROAD ALIGNMENT Straight ROAD PROFILE Level

INTERSECTION TYPE 4-way Intersection ROAD CONDITION Dry WEATHER CONDITION Clear

ROAD SURFACE Concrete WEATHER CONDITION Clear LIGHT CONDITION Dark-Unlighted

3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES None LIST OWNER'S NAME & ADDRESS, DESCRIPTION OF PROPERTY, AND DAMAGE.

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 TRANSPORT SAFETY DEVICES LOCATION

CROSSING ROAD With Signal OTHER ACTIONS NA / None 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 N E **S** W U

V2 N E **S** W U

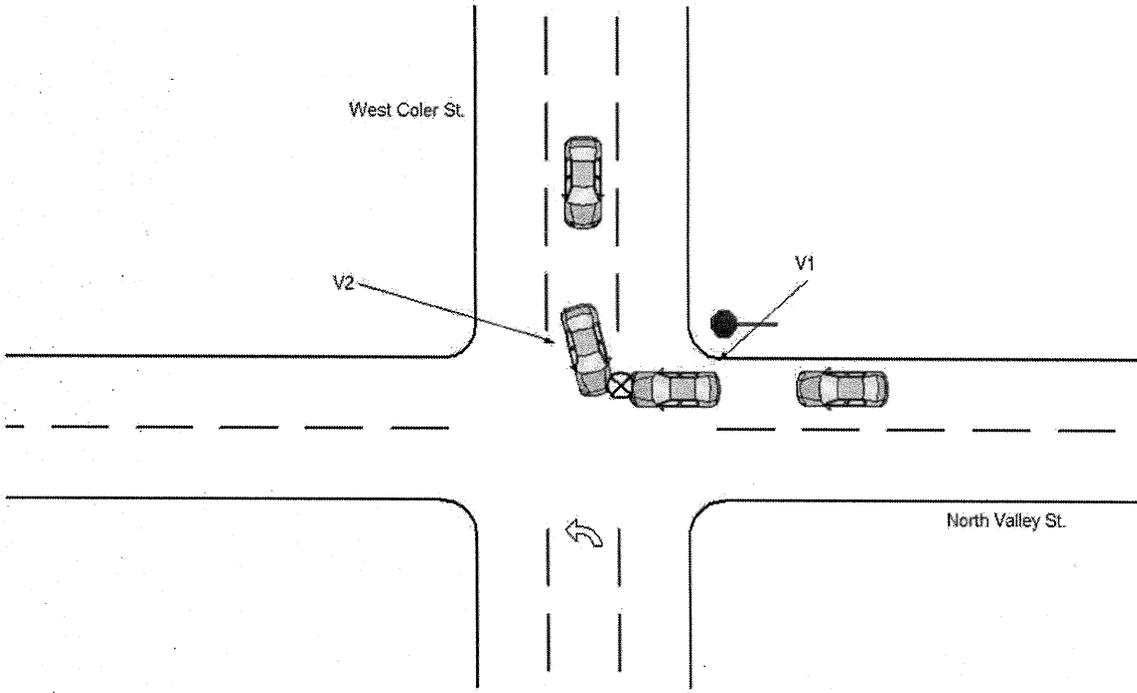
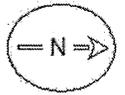
V3 N E S W U

V4 N E S W U

V5 N E S W U

V6 N E S W U

INDICATE NORTH



INDICATE ROAD NAMES

DIAGRAM NOT TO SCALE

7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip)
1 WAGNER, TRAVIS EUGENE 309 VETA ST - NEOSHO, MO 64850
PHONE NUMBER (417) 455-5323

DRIVER LICENSE / ID NUMBER T980366949
STATE MO
LIC STATUS [X] Valid [] Expired [] Susp / Rev / Denied [] Disqual CDL [] Canceled / Oth Invalid [] Unknown
LIC TYPE [X] Operator Class F [] Permit [] Unknown (Explain)
[] CDL Class [] MC Only [] NA
[] Interm / Grad [] Unlicensed

DATE OF BIRTH 04-22-1980
SEX M SEAT LOC FL INJ 5 TRANS-PORT 1 EJECTION 2 AIR BAG 03 SAFETY DEVICES 05
VISION OBSTRUCTED [X] NA [] Windshield [] Load on Veh [] Trees / Brush [] Building [] Embankment [] Sign [] Hillcrest [] Parked Veh [] Moving Veh [] Stopped Veh [] Glare [] Other (Explain)

PROOF OF INSURANCE [X] Yes [] No [] Not Required
INSURANCE COMPANY SELBY GRANGER
PHONE NO. (Optional) (417) 451-2240 - POLICY NUMBER 255724289
[] Driver [X] Vehicle

7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip)
PATRUM, DAVID WAYNE 309 VETA ST - NEOSHO, MO 64850
PHONE NUMBER (417) 451-6234

YEAR 2007 MAKE Chevrolet MODEL IMPALA COLOR GRY
VEH. TYPE 1 TOTAL NO. OF OCC. 1

LICENSE - PLATE NO SC8M1S STATE MO YEAR 2015
VIN 1G1ZS58F97F275891
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. 1
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 [] Other Heavy Truck
[] Motorized Bicycle [] Other [] Unknown [] Unknown (Explain)
[] 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

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 [X] NA
[] Congestion Ahead [] Other Incident Ahead
[] Crash Ahead [] Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES
SEQUENCE OF EVENTS CODES 10 01 34
ALCOHOL USE [] Yes [X] Unk [] No [] NA

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES
[] 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)
[X] 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

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: [X] 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)

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, EJECTION, AIR BAG, SAFETY DEVICES, PHONE NUMBER. Multiple empty rows.

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)
PHONE NUMBER

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 [] Intermodal Container Chassis [] NA (No Cargo Body) [] Other
[] Cargo Tank [] Dump [] Auto Transporter [] Grain / Chip / Gravel [] Log [] Another Veh.

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 ROBERTSON, SHELDON CRAIG 1007 REID RD APT A - NEOSHO, MO 64850
PHONE NUMBER (405) 999-8511

DRIVER LICENSE / ID NUMBER S078214013 STATE MO
LIC STATUS [X] Valid [] Expired [] Susp / Rev / Denied [] Disqual CDL [] Unknown
LIC TYPE [X] Operator Class F [] Permit [] Unknown (Explain)
[] NA [] CDL Class [] MC Only [] NA
[] NA [] Interm / Grad [] Unlicensed [] Unlicensed

DATE OF BIRTH 02-15-1984 SEX M SEAT LOC FL INJ 5 TRANS-PORT 1 EJECT-TION 2 AIR BAG 03 SAFETY DEVICES 05
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 SAFEAUTO INSURANCE
PHONE NO. (Optional) 1) 800-7233 - 288 POLICY NUMBER OK 00126098A-00
[] Driver [X] Vehicle

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

YEAR 2003 MAKE Toyota MODEL COROLLA COLOR PEW VEH. TYPE 1 TOTAL NO. OF OCC. 1

LICENSE - PLATE NO. 618HSQ STATE OK YEAR 2015 VIN JTDBR32E430023021
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. 13 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

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 [] Pick-up
[] Motorized Bicycle [] Other [] Unknown [] Other Heavy Truck
[] Pedalcycle [] To / From School [] Unknown (Explain)
[] Truck Tractor With No Units [] Less than or equal to 10,000 lbs.
[] Truck Tractor With One Unit [] 10,001 - 26,000 lbs.
[] Truck Tractor With Two Units [] Greater than 26,000 lbs.
[] Truck Tractor With Three Units [] 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 [X] 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)
SEQUENCE OF EVENTS CODES [] Unknown ANIMAL CODE(S) FIXED OBJECT CODE(S)
08 05 34 ALCOHOL USE [] Yes [] Unk [X] No [] 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
[] Alcohol [] Improper Passing [] Physical Impairment (Explain) [] Failed To Secure Load / Improper Loading
[] Drugs [] Improperly Parked [] Improper Start From Park [] Animal(s) In Roadway

7E. WORK ZONE [] Yes [] 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 [] 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

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 (Lessee, 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.
[] Intrastate Carrier [] Not In Commerce - Rental Vehicle 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
[] 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	<table border="1"> <tr><td>FR</td><td>SR</td><td>TR</td></tr> <tr><td>FC</td><td>SC</td><td>TC</td></tr> <tr><td>FL</td><td>SL</td><td>TL</td></tr> </table> 1. Fatal 2. Disabling 3. Evident - Not Disabling 4. Probable - Not Apparent 5. None Apparent U. Unknown N. NA	FR	SR	TR	FC	SC	TC	FL	SL	TL	(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 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
FR	SR	TR												
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 09/07/2015 at 2021 hours, I arrived at the intersection of West Coler and North Valley Street to take a report of a traffic crash.

I arrived at North Valley Street and West Coler Street. I saw a silver Toyota Camry bearing Oklahoma registration (618HSQ) parked on the east side of North Valley Street. I spoke with the driver, Sheldon Robertson who stated a vehicle had hit him and the driver (Travis Wagner) left before I arrived. Mr. Wagner only provided Mr. Robertson with his insurance card and not his personal information as required by law. I learned Mr. Wagner's identity later during my investigation.

Mr. Robertson stated he was on West Coler Street in the turn lane waiting to turn north onto North Valley Street. He said Mr. Wagner was in a silver 2003 Chevrolet Impala bearing Missouri registration (SC8M1S). Mr. Robertson said Mr. Wagner was on North Valley Street stopped at the intersection at West Coler Street. Mr. Robertson said as he turned left, Mr. Wagner attempted to go straight and hit his vehicle in the driver front corner.

Mr. Robertson stated he was not injured. He said after the crash, Mr. Wagner stopped to make sure he was okay. Mr. Robertson said they exchanged insurance information. Mr. Robertson then said Mr. Wagner stated he wanted to leave before the police showed up.

I later spoke with Mr. Wagner at his residence. He stated he took off before police arrived because his driver license was revoked and he did not want to get into trouble. Mr. Wagner told me he was at the stop sign on North Valley Street and he was planning to go across. He said he took off from the stop sign but did not notice Mr. Robertson's vehicle in the turn lane. He stated he struck Mr. Robertson's vehicle in the driver front corner with the front of the vehicle he was driving.

I saw a small amount of damage to the front end of the Impala. The owner of the vehicle, David Patrum stated the damage to the passenger side was there prior to letting Mr. Wagner borrow his vehicle.

Nothing further at this time.

10. REPORTING AND REVIEWING OFFICER INFORMATION

REPORTING OFFICER NAME OFF CALEB COOPER	DSN / BADGE NO. 115	BEAT / ZONE N	TROOP / DISTRICT / PRECINCT NA
REVIEWING OFFICER NAME PII RUSTY SCHLESSMAN	DSN / BADGE NO. 112	REVIEWING OFFICER 2 NAME	DSN / BADGE NO.