

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 (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 RECONSTRUCTION BY WHOM AVAILABLE FROM

2 - LOCATION

COUNTY MUNICIPALITY BEAT / ZONE TRP/DIST/PCT GPS COORDINATES 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

7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

NO. 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip)
2 LANKFORD, JEREMY JAMES 5869 OLD 60 RD - NEOSHO, MO 64850 PHONE NUMBER (417) 451-8870

DRIVER LICENSE / ID NUMBER M078170003 STATE MO LIC STATUS Valid Expired Susp / Rev / Denied Disqual CDL NA Canceled / Oth Invalid Unknown LIC TYPE Operator Class F Permit Unknown (Explain) CDL Class MC Only Interm / Grad Unlicensed MC ENDORSEMENT Yes No Unknown (Explain)

DATE OF BIRTH 06-06-1975 SEX M SEAT LOC FL INJ 5 TRANS-PORT 1 EJECT-ION 2 AIR BAG 03 SAFETY DEVICES 05 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 1ST AUTO PHONE NO. (Optional) POLICY NUMBER PMPO-000025682 NA Driver Vehicle

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

YEAR 2016 MAKE Chevrolet MODEL TAHOE COLOR BLK VEH. TYPE 1 TOTAL NO. OF OCC. 2

LICENSE - PLATE NO. FK5N8C STATE MO YEAR 2016 VIN 2, C, N, D, L, 7, 3, F, 7, 5, 6, 1, 6, 5, 1, 8, 3 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. 9

2	3	4	5	6	7	18 - Undercarriage	22 - Cargo
1	15	16	17	8		19 - Windshield	23 - Unknown
14	13	12	11	10	9	20 - Burned	24 - Other (Explain)
						21 - Towed Unit	

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

<input 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 / GCW 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 - 28,000 lbs. <input type="checkbox"/> Greater than 28,000 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 checked="" type="checkbox"/> Sport Utility Vehicle	<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"/> Limousine (7-8 W/Driver)	<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 (9-15 W/Driver)	<input type="checkbox"/> Transit / Commuter	<input type="checkbox"/> 4 Wh	<input type="checkbox"/> Cargo Van	<input type="checkbox"/> Truck Tractor With One Unit	
<input type="checkbox"/> Motorized Bicycle	<input type="checkbox"/> Charter / Tour	<input type="checkbox"/> 5 Wh / More	<input type="checkbox"/> Pickup	<input type="checkbox"/> Truck Tractor With Two Units	
<input type="checkbox"/> Pedalcycle <input type="checkbox"/> To / From School	<input type="checkbox"/> Other	<input type="checkbox"/> Unknown	<input type="checkbox"/> Other Heavy Truck	<input type="checkbox"/> Truck Tractor With Three Units	
			<input type="checkbox"/> Unknown (Explain)		

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)

SEQUENCE OF EVENTS CODES 12 | 34 Unknown ANIMAL CODE(S) FIXED OBJECT CODE(S) ALCOHOL USE No Yes Unk 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 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)

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	EJECT-ION	AIR BAG	SAFETY DEVICES	PHONE NUMBER
LANKFORD, VALERIE EVALYN	06-09-1971	F	FR	5	1	2	03	05	(417) 000-0000
5869 OLD 60 DR - 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 - Other Vehicle 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 NA (No Cargo Body) Other Cargo Tank Dump Auto Transporter Grain / Chip / Gravel Log Another Veh. Container Chassis 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 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	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 Thursday, January 15, 2015 at approximately 1509 hours, I responded to the area of Highway 60 near Kodiak Road in reference to a traffic crash. I arrived on scene and located a silver SUV (V1) in the middle of the road facing east and a black SUV (V2) in the east bound lane, also facing east. I made contact with the driver of the V1 and identified him as Wayne Leggett.

Mr. Leggett said he was traveling east on Highway 60 approaching the stop light at Kodiak Road. He said he saw V2 and "attempted to stop but apparently didn't do it fast enough". He said he struck V2 in the rear driver's side bumper with the front passenger side bumper of his vehicle. Mr. Leggett said he did not have any apparent injuries and refused the need for medical treatment. Mr. Leggett's vehicle was towed from the scene by Poore's Salvage.

I made contact with the driver of V2 and identified him as Jeremy Lankford. Mr. Lankford said he saw V1 approaching behind him and it did not appear they were going to stop. He said he looked to his right to try to switch lanes, but there was another vehicle in that lane. Mr. Lankford said V1 struck his vehicle in the rear driver's side bumper. Mr. Lankford had no apparent injuries and refused the need for medical attention. His passenger, Valerie Lankford, was also not injured and refused the need for medical treatment. She told me the same story as Mr. Lankford. Their vehicle sustained minimal damage and was able to be driven away from the scene.

I have nothing further at this time.

10. REPORTING AND REVIEWING OFFICER INFORMATION

REPORTING OFFICER NAME OFF KYLER WILSON	DSN / BADGE NO. 117	BEAT / ZONE NA	TROOP / DISTRICT / PRECINCT NFD2-A
REVIEWING OFFICER NAME SGT BRADLEY FIENEN	DSN / BADGE NO. 106	REVIEWING OFFICER 2 NAME	DSN / BADGE NO.