

<b>1 - GENERAL CRASH INFORMATION</b>  SPACE USED FOR BARCODE	AGENCY NAME AND OR <b>NEOSHO POLICE DEPARTMENT - MO0730300</b>
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LEFT THE SCENE	DRIVER NO.	CLEARED	CRASH CLASSIFICATION	PROPERTY DAMAGE ONLY	NO. INJURED	NO. KILLED	REPORT / CASE / INCIDENT NUMBER
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/>	0	0	0616-245

NO. VEH. INV.	CRASH DATE	CRASH TIME (MIL)	NOTIFIED DATE	TIME NOTIFIED (MIL)	INVESTIGATION DATE	TIME ARRIVED (MIL)	INVEST. AT SCENE
2	06-23-2016	1009	06-23-2016	1011	06-23-2016	1013	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

CRASH TYPE	ROADWAY	NON-COLLISION			COLLISION INVOLVING			DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE			
	<input checked="" type="checkbox"/> On Roadway <input type="checkbox"/> Off Roadway	<input type="checkbox"/> Overturning <input type="checkbox"/> Fire / Explosion <input type="checkbox"/> Immersion <input type="checkbox"/> Jackknife	<input type="checkbox"/> Fell/Jumped From MV <input type="checkbox"/> Cargo / Equip Loss / Shift <input type="checkbox"/> Other Non-Collision	<input type="checkbox"/> Animal <input type="checkbox"/> Pedalcycle <input type="checkbox"/> Fixed Object <input type="checkbox"/> Other Object <input type="checkbox"/> Pedestrian	<input type="checkbox"/> Railway Vehicle <input type="checkbox"/> Animal Drawn Veh / Animal Ridden Trans. <input checked="" type="checkbox"/> Motor Vehicle in Transport <input type="checkbox"/> Parked Motor Vehicle <input type="checkbox"/> Working Motor Vehicle	<input type="checkbox"/> Front to Front <input type="checkbox"/> Front to Rear <input type="checkbox"/> Rear to Rear <input type="checkbox"/> Rear to Side	<input checked="" type="checkbox"/> Angle <input type="checkbox"/> Sideswipe (Same Dir.) <input type="checkbox"/> Sideswipe (Opp. Dir.) <input type="checkbox"/> Falling / Shifting Cargo (Set in motion by MV)	<input type="checkbox"/> Other (Explain) <input type="checkbox"/> 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.	2. Examine each vehicle to determine if it is a commercial vehicle based upon the following: 2a. A truck / cargo van with GVWR / GCWVR of more than 10,000 lbs; OR 2b. A motor vehicle with seating for 9 or more including driver; OR 2c. A vehicle with a hazardous materials placard.
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EVIDENTIARY PHOTOS TAKEN	BY WHOM	AVAILABLE FROM
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	RS 112	<input type="checkbox"/> Investigating Agency
RECONSTRUCTION	BY WHOM	AVAILABLE FROM
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Investigating Agency

**2 - LOCATION**

COUNTY	MUNICIPALITY	BEAT / ZONE	TRP/DIST/PCT	GPS COORDINATES (DD MM SS.S FORMAT)			
NEWTON	NEOSHO	NW	NA	LAT: N	LONG: W	NA	
ON: MO E HIGHWAY 86		RDWY. DIR: E	DISTANCE FROM: NA	LOCATION: NA	INTERSECTING: CRD KODIAK RD		
SPEED LIMIT: 45	ROAD MAINTAINED BY: <input checked="" type="checkbox"/> State <input type="checkbox"/> County <input type="checkbox"/> Municipal <input type="checkbox"/> Private Property <input type="checkbox"/> Other	Feet: _____	Miles: _____	After: <input type="checkbox"/> Before: <input type="checkbox"/> At: <input checked="" type="checkbox"/>	SPEED LIMIT: 35	INT. DIR: S	GEO-CODE: NA
TRAFFICWAY			ROAD ALIGNMENT		ROAD PROFILE		
<input type="checkbox"/> One-Way <input checked="" type="checkbox"/> Two-Way; Not Divided <input type="checkbox"/> Two-Way; Not Divided; Continuous Center Turn Lane			<input type="checkbox"/> Straight <input type="checkbox"/> Curve <input type="checkbox"/> Two-Way; Divided; Unprotected Median <input type="checkbox"/> Two-Way; Divided; Positive Median Barrier <input type="checkbox"/> Other <input type="checkbox"/> Unknown (Explain)		<input checked="" type="checkbox"/> Level <input type="checkbox"/> Downhill <input type="checkbox"/> Dip <input type="checkbox"/> Uphill <input type="checkbox"/> Hillcrest <input type="checkbox"/> Unknown (Explain)		
INTERSECTION TYPE			ROAD CONDITION				
<input type="checkbox"/> 4-way Intersection <input checked="" type="checkbox"/> T-Intersection <input type="checkbox"/> Y-Intersection <input type="checkbox"/> Roundabout <input type="checkbox"/> 5-way / More <input type="checkbox"/> Other (Explain)			<input checked="" type="checkbox"/> Dry <input type="checkbox"/> Snow <input type="checkbox"/> Slush <input type="checkbox"/> Standing Water <input type="checkbox"/> Wet <input type="checkbox"/> Ice / Frost <input type="checkbox"/> Mud / Dirt <input type="checkbox"/> Moving Water <input type="checkbox"/> Sand / Gravel <input type="checkbox"/> Unknown (Explain) <input type="checkbox"/> Other (Explain)				
ROAD SURFACE			WEATHER CONDITION				
<input type="checkbox"/> Concrete <input type="checkbox"/> Brick <input type="checkbox"/> Dirt / Sand <input type="checkbox"/> Cobblestone <input checked="" type="checkbox"/> Asphalt <input type="checkbox"/> Gravel <input type="checkbox"/> Multi-Surface <input type="checkbox"/> Unknown (Explain)			<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Rain <input type="checkbox"/> Sleet / Hail <input type="checkbox"/> Fog / Mist <input type="checkbox"/> Other (Explain) <input type="checkbox"/> Cloudy <input type="checkbox"/> Snow <input type="checkbox"/> Freezing (Temp) <input type="checkbox"/> Severe Crosswind <input type="checkbox"/> Unknown (Explain)				
LIGHT CONDITION							
<input checked="" type="checkbox"/> Daylight <input type="checkbox"/> Dark-Lighted <input type="checkbox"/> Dark-Unlighted <input type="checkbox"/> Dark-Unknown Lighting <input type="checkbox"/> Other (Explain) <input type="checkbox"/> 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
BRIXEY, WILMA E	310 N LINCOLN ST - NEOSHO, MO 64850	(417) 451-7009
BERG, KARANA LYN	13948 HAMMER RD - NEOSHO, MO 64850	(417) 592-9756

**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
						<input type="checkbox"/> On Roadway <input type="checkbox"/> In Driveway Access <input type="checkbox"/> On Median / Crossing Island <input type="checkbox"/> On Sidewalk <input type="checkbox"/> Off Roadway <input type="checkbox"/> Unknown

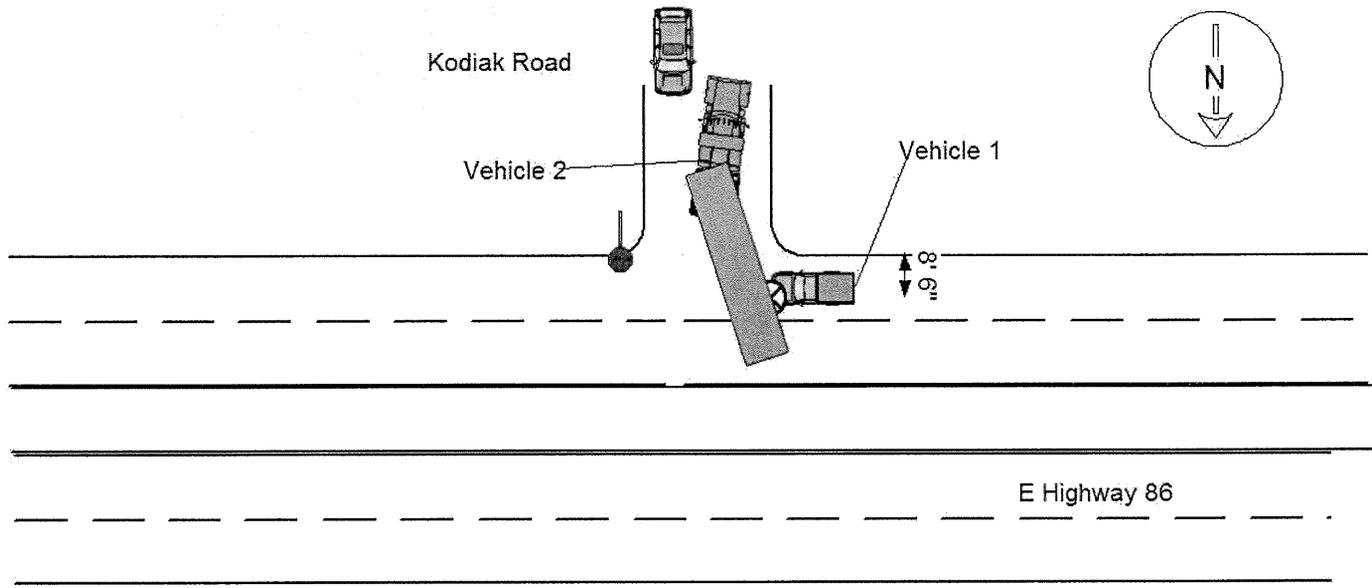
CROSSING ROAD	OTHER ACTIONS	SCHOOL INFO.
<input checked="" type="checkbox"/> NA <input type="checkbox"/> With Signal <input type="checkbox"/> Not At Crosswalk <input type="checkbox"/> Against Signal <input type="checkbox"/> In Marked Crosswalk <input type="checkbox"/> No Signal <input type="checkbox"/> In Unmarked Crosswalk <input type="checkbox"/> Unknown <input type="checkbox"/> Unknown	<input checked="" type="checkbox"/> NA / None <input type="checkbox"/> Getting On / Off Vehicle <input type="checkbox"/> Standing / Lying / Sitting In Trafficway <input type="checkbox"/> Pushing / Working On Vehicle <input type="checkbox"/> Behind / In Front of Parked / Stopped Veh.	<input checked="" type="checkbox"/> NA <input type="checkbox"/> Going To / From School <input type="checkbox"/> Getting On / Off School Bus <input type="checkbox"/> Both Of The Above <input type="checkbox"/> Unknown (Explain)

PROBABLE CONTRIBUTING CIRCUMSTANCES	DISTRACTED / INATTENTIVE CODE(S)	ALCOHOL USE
<input type="checkbox"/> Failed To Yield <input type="checkbox"/> Alcohol <input type="checkbox"/> Vision Obstructed (Explain) <input type="checkbox"/> Other (Explain) <input type="checkbox"/> Distracted / Inattentive <input type="checkbox"/> Drugs <input type="checkbox"/> Physical Impairment (Explain) <input type="checkbox"/> Unknown (Explain)	<input checked="" type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown

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



7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip)
1 MCDANIEL, ABBY ARLENE 13290 OAKWOOD TR - NEOSHO, MO 64850
PHONE NUMBER (417) 592-9756
DRIVER LICENSE / ID NUMBER S202257023 STATE MO LIC STATUS Valid
EXPIRED Expired LIC TYPE Operator Class F
PERMIT Permit MC ENDORSEMENT NA
DATE OF BIRTH 09-15-1984 SEX F SEAT LOC FL INJ 5 TRANS-PORT 1 EJECT-ION 2 AIR BAG 03 SAFETY DEVICES 05
VISION OBSTRUCTED Not Obstructed
TOWED FROM SCENE TOWED DUE TO DIS. DAMAGE

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

YEAR 2015 MAKE General Motor Corp. MODEL SIERRA COLOR GRY VEH. TYPE 1 TOTAL NO. OF OCC. 4

LICENSE - PLATE NO. 0SX577 STATE MO YEAR 2016 VIN 1GTT12YEG2FF159319
TOWED FROM SCENE TOWED DUE TO DIS. DAMAGE

VEHICLE DAMAGE (Mark all damaged areas) None / No Damage
INITIAL IMPACT NO. 14
18 - Undercarriage 22 - Cargo
19 - Windshield 23 - Unknown
20 - Burned 24 - Other
21 - Towed Unit

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles
Passenger Car
Van (< 9 W/Driver)
School Bus
Intercity
Transit / Commuter
Charter / Tour
Other
Motorcycle
ATV
2 Wh
3 Wh
4 Wh
5 Wh / More
Unknown
Single-unit Truck; 2 axles, 6 tires
Single-unit Truck; 3 or more axles
Veh. Pulling Another Unit(s)
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)
Less than or equal to 10,000 lbs.
10,001 - 26,000 lbs.
Greater than 26,000 lbs.
Unknown

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

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES
SEQUENCE OF EVENTS CODES: 01 08 11 34
ALCOHOL USE No

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES
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

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

7F. OCCUPANTS - NAME (Last, First, MI) ADDRESS (Street, City, State, Zip) DATE OF BIRTH SEX SEAT LOC INJ TRANS-PORT EJECT-ION AIR BAG SAFETY DEVICES PHONE NUMBER
MCDANIEL, BOWEN 13290 OAKWOOD TRAIL - NEOSHO, MO 64850 06-04-2015 M TL 5 1 2 03 12 (417) 434-4444
RENFRO, HOYT 13290 OAKWOOD TRAIL - NEOSHO, MO 64850 07-25-2007 M TC 5 1 2 03 10 (417) 434-4444
RENFRO, EDEN 13290 OAKWOOD TRAIL - NEOSHO, MO 64850 07-16-2010 F TR 5 1 2 03 10 (417) 434-4444

7G. COMMERCIAL MOTOR VEHICLE NA
MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip) SAO
COMMERCIAL / NON-COMMERCIAL Interstate Carrier Not In Commerce - Government Vehicle Not In Commerce - Other Vehicle MC / MX / ICC NO. USDOT NO.

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

7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

NO. **7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip)**  
**2 RUDISILL, DANIEL JOSEPH 713 W PECAN ST - WEIR, KS 66781**

PHONE NUMBER **(620) 875-1845**

DRIVER LICENSE / ID NUMBER **K02533989** STATE **KS**

LIC STATUS  Valid  Expired  Susp / Rev / Denied  Disqual CDL  Canceled / Oth Invalid  Unknown

LIC TYPE  Operator Class  Permit  Unknown (Explain)  CDL Class **A**  MC Only  Unlicensed

MC ENDORSEMENT  Yes  No  NA  Unknown (Explain)

DATE OF BIRTH **04-20-1963** SEX **M** SEAT LOC **FL** INJ **5** TRANS-PORT **1** EJECTION **2** AIR BAG **03** SAFETY DEVICES **05**

VISION OBSTRUCTED  Not Obstructed  Trees / Brush  Sign  Moving Veh  Other (Explain)  
 NA  Windshield  Building  Hillcrest  Stopped Veh  Unknown (Explain)  
 Load on Veh  Embankment  Parked Veh  Glare

PROOF OF INSURANCE  Yes  No  Not Required

INSURANCE COMPANY  Expired **CINCINNATI INSURANCE** PHONE NO. (Optional) **(620) 231-3500 -** POLICY NUMBER  NA **COP2315472**  Driver  Vehicle

**7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip)**  SAD  
**UNIQUE METAL FABRICATION INC, 2888 N ROTARY TR - PITTSBURGH, KS 66762**

PHONE NUMBER **(620) 232-3060**

YEAR **2008** MAKE **Peterbilt** MODEL **389** COLOR **RED** VEH. TYPE **1** TOTAL NO. OF OCC. **1**

LICENSE - PLATE NO. **99678** STATE **KS** YEAR **2016** VIN **1 X P X D B 9 X 9 8 D 7 6 2 6 8 1**

TOWED FROM SCENE  Yes  No TOWED DUE TO DIS. DAMAGE  Yes  No

VEHICLE DAMAGE (Mark all damaged areas)  None / No Damage

INITIAL IMPACT NO. **21**

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

TOWED BY  Unknown  NA

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 / GCWW 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)

SEQUENCE OF EVENTS CODES  Unknown **01 08 03 34** ANIMAL CODE(S)  FIXED OBJECT CODE(S)

ALCOHOL USE  Yes  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)

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	EJECTION	AIR BAG	SAFETY DEVICES	PHONE NUMBER
ADDRESS (Street, City, State, Zip)									

**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  
**UNIQUE METAL FABRICA 2888 N ROTARY TER - PITTSBURGH, KS 66762**

PHONE NUMBER **620-232-3060**

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. **337695**

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

Cargo Tank  Dump  Auto Transporter  Grain / Chip / Gravel  Log

HAZARDOUS MATERIALS  Yes  No  Unknown

PLACARD DISPLAYED  Yes  No  Unknown

4-DIGIT NO.  CLASS  HM CARGO PRESENT  Yes  No  Unknown  HM CARGO RELEASED  Yes  No  Unknown

HAZARDOUS MATERIAL NAME

SEAT LOCATION		INJURY		TRANSPORTED	EJECTION	AIR BAG		SAFETY DEVICES	
XX - Not Known	FR SR TR	1. Fatal	2. Disabling	(For Medical Treatment)	1. NA	1. None / NA	9. Deployed - Combination	1. None	10. Booster Seat
B - Pedalcycle	FC SC TC	3. Evident - Not Disabling	4. Probable - Not Apparent	1. No	2. No	3. Not Deployed	10. Deployment Unknown	2. Not Used	11. Child Restraint - Forward Facing
M - Motorcycle	FL SL TL	5. None Apparent	U. Unknown	2. EMS	3. Partially	4. Removed	U. Air Bag Presence Unknown	3. Shoulder Belt Only	12. Child Restraint - Rear Facing
CP - Commercial Passenger		N. NA	N. NA	3. Other	4. Totally	5. Deployed - Front		4. Lap Belt Only	13. Other Helmet
OE - Occupant - Enclosed Load Area				U. Unknown	U. Unknown	6. Deployed - Side		5. Shoulder and Lap Belt	14. Reflective Clothing
OU - Occupant - Unenclosed Load Area						7. Deployed - Curtain		7. DOT Compliant MC Helmet	15. Other
RC - Rail Crew						8. Deployed - Other (Knee, Air Belt, etc.)		8. No Helmet	N. Not Applicable
SV - Other (Explain in Narrative)									
NA - 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

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
2. Golf Cart	4. Forklift	6. Low Speed Vehicle
		7. Other (Explain)

9. NARRATIVE / STATEMENTS (If additional room is necessary, use Section 11 - Narrative / Statements Continuation)

On 06-23-2016, at approximately 1011 hours, I was dispatched to a non-injury traffic crash at East Highway 86 and Kodiak Road. Upon arrival, I noticed a black GMC Sierra truck parked on the shoulder of east bound Highway 86, just east of Kodiak Road. I noticed a tractor trailer unit parked on Kodiak Road, just south of Highway 86.

I spoke with Driver 2, Daniel Rudisill, identified from his Kansas driver's license. Mr. Rudisill said he was traveling east on Highway 86 and got into the inside lane with his right turn signal on to turn onto Kodiak Road. Mr. Rudisill said there was a vehicle at the stop sign on Kodiak Road so he waited for the vehicle to move then he started turning right. Mr. Rudisill said there was nobody coming. He said he looked back at his trailer in his mirror and noticed a truck traveling east on Highway 86 that wasn't slowing down. Mr. Rudisill said as the front duals of his trailer got into the outside lane of Highway 86 the truck struck his trailer. Mr. Rudisill said after the collision the truck started backing up to get away from his trailer. Mr. Rudisill said his tractor was on Kodiak, so he didn't know how the driver of the truck didn't see him turning. Mr. Rudisill said he was not injured.

I spoke with Driver 1, Abby McDaniel, identified from her Missouri driver's license. Ms. McDaniel said she was traveling east on Highway 86 and she saw the tractor trailer unit in the inside lane so she moved to the outside lane. Ms. McDaniel said she didn't see the tractor trailer's turn signal on. Ms. McDaniel said she all of a sudden noticed the tractor trailer making a right turn in front of her. Ms. McDaniel said she slowed down and put her truck into reverse to back up from the semi. Ms. McDaniel said her truck hadn't stopped yet when she put it into reverse. Ms. McDaniel said she did not strike the trailer, but the trailer hit her truck as she was trying to back up. Ms. McDaniel said her brakes did not lock up. Ms. McDaniel said her and her three passengers, her children, were not injured.

Both vehicles were driven from the scene. I took pictures of both vehicles.

Mr. Rudisill said he was contacted by a female that was on the north side of Highway 86 that said she saw the accident. I spoke with Karana Berg and she said she was outside her business. Ms. Berg said she noticed a large farm tractor sprayer unit that was pulling out from Kodiak Road and she saw the tractor trailer unit stopped on Highway 86 with its right turn signal on. Ms. Berg said the sprayer pulled out and the semi started turning when she saw the truck going on the outside lane and she heard the truck hit the semi trailer. Ms. Berg said the semi tractor was already onto Kodiak Road and she didn't know how the driver of the truck did not see the tractor trailer turning.

I spoke with Wilma Brixey and she said she was standing outside with Ms. Berg. Ms. Brixey described the same actions Ms. Berg described. Ms. Brixey said she did not hear any screeching tires from the brakes locking up.

10. REPORTING AND REVIEWING OFFICER INFORMATION			
REPORTING OFFICER NAME PIII RUSTY SCHLESSMAN	DSN / BADGE NO. 112	BEAT / ZONE NW	TROOP / DISTRICT / PRECINCT NA
REVIEWING OFFICER NAME SGT MICHAEL WHITEHEAD	DSN / BADGE NO. 107	REVIEWING OFFICER 2 NAME	DSN / BADGE NO.