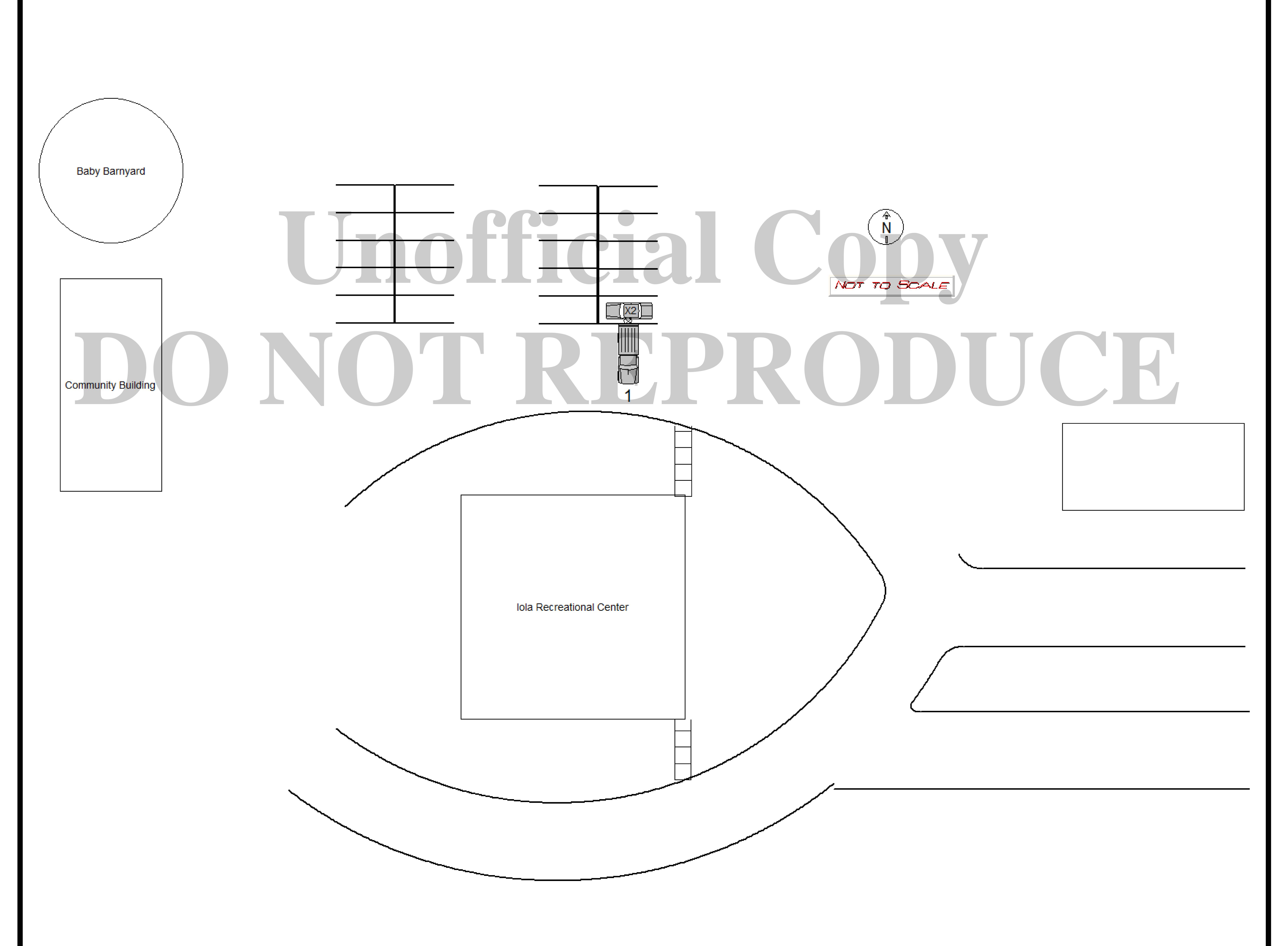
	Investigating Department	Reviewed by	Local C	Page of	Amended Report			
Kansas Motor Vehicle	Iola Police Department	Robert Droess	sler IPD16-0)625 11,5	DUI			
Accident Report	Investigating Officer Name	Badge Number C	County City Name					
KDOT Form 850A Rev 1-2009	Officer Brian Plumlee		AL IOLA		Hit & Run			
Milepost Block No Dir Pfx On Ro		Dir Sfx SpdLmt Date of A		Time Occur. Day	PO Accident Severity			
500 PAI			3/2016	15:52 FR	Fatal			
From Dist Ft/Mi From Dir FROM Dir Pfx Refe	Ference or At Road Name Road Type		otified (mm/dd/yyyy)	Time Notif. Day	Injury			
	ate	35 05/13	3/2016	15:54 FR	PDO >= \$1,000 PDO < \$1,000			
Narrative: Describe each traffic unit's pre-crash move	ment and direction of travel		rrived (mm/dd/yyyy)	Time Arriv. Day				
Vehicle 1, facing south, backed no	orth into legally parked vehicle	2. WNICh	3/2016	15:58 FR	Private Property			
was facing west.		Latitude ((AOI)	00 on WORK	XZONE TYPE AT 00			
		Longitue	1~ (A () T)	- 00 None Apply	y			
		Longitude	e (AUI)	01 Construction				
		Photos by	\mathbf{V}	02 Maintenan				
				03 Utility Zone				
KDOT? Object 1 Damaged & Nature of Damage (show	w in diagram) Owner Street Address	${ m P}\epsilon$	ersonal Phone	99 Unknown				
				- LOCATION IN WORK ZONE (AOI)				
Owner Last Name First Name Mid	ddle Name City	State Zip We	ork Phone					
				01 Before first warning sign				
KDOT? Object 2 Damaged & Nature of Damage (show	w in diagram) Owner Street Address	Pe	ersonal Phone	02 Advance warning area				
				03 Transition area				
Owner Last Name First Name Mid	ddle Name City	State Zip We	ork Phone	"04 Activity are				
				05 Termination	n area 99 Unknown			
	ONE CODE PER CATEGORY UNLESS SPECIFICATION				ONE CATEGORY			
01 LIGHT CONDITIONS	14 ACC. LOCATION (of 1st Harmful Event)	O4 ACCIDENT (mark 1 box 1		01 Lane closur	re			
01 Daylight 04 Dark: street lights on	ON ROADWAY: (within travel lanes)	→ St	Most Harmful Event	02 Lane shift /	crossover			
or baying it or bank. Strock lights on	11 Non-intersection	00 Other non-colli	ision	03 Work on shoulder / median				
02 Dawn 05 Dark: no street lights	12 Intersection +	01 Overturned/Ro	ollover	04 Intermittent or moving vehicle				
03 Dusk 99 Unknown	13 Intersection-related +	COLLISION WIT	TH:	88 Other:				
OO ADVERSE WEATHER CONDITIONS	13 Intersection-related + 14 Access to Parking lot/Drvwy	02 Pedestrian		99 Unknown				
00 No adverse conditions		03 Motor vehicle i	in-transport*		N WITH VEHICLE			
00 No adverse conditions 01 Rain, mist, drizzle	15 Interchange Area +	04 Legally Parked	d Vehicle		per side if applicable)			
01 Kain, mist, drizzie 02 Sleet, hail	16 On Crossover	05 Railway train		1st Harmful Event	Most Harmful Event			
	17 Toll Plaza	06 Pedal cyclist		01 Head on				
03 Snow	OFF ROADWAY:	O7 Animal Type: _		01 Read on 02 Rear end				
04 Fog	20 Shoulder	08 Fixed object**		02 Real end 03 Angle - sid				
05 Smoke	21 Roadside (not shoulder)	09 Other object:						
06 Strong wind	22 Median	99 Unknown			e: opposite direction a: Samo direction			
07 Blowing dust, sand, etc.	23 Parking lot or Rest area	**FIXED OBJE	ECT TYPE		e: Same direction			
08 Freezing rain, mist, drizzle	88 Other:	(mark 1 box per side		06 Backed in	to			
14 Rain & fog	99 Unknown		Most Harmful Event					
16 Rain & wind 88 Other:	+INTERSECTION TYPE	01 Bridge structure02 Bridge rail		99 Unknown				
24 Sleet & fog	01 Four-way intersection	02 Driuge rain 03 Crash cush./Im	nact attenuator	TRAFFI	IC CONTROLS			
36 Snow & wind 99 Unknown	02 Five-way or more	04 Divider, mediar		(On / At	Road) O/A			
02 SURFACE TYPE 02	02 Trivo way of more 03 T - intersection	05 Overhead sign			Type Present OK/NF			
ON AT UZ	03 1 - Intersection 04 Y - intersection	06 Utility devices:		00 None				
01 Concrete		07 Other post or p	ole	01 Officer, flagger				
02 Blacktop (Asphalt)	05 L - intersection	08 Building		02 Traffic signal	3 3 3			
03 Gravel 88 Other:	06 Roundabout (See Manual of Troffic Circle for Definitions)	09 Guardrail		03 Stop sign				
04 Dirt	07 Traffic Circle lor Delinitions)	10 Sign post		04 Flasher	4 4 4 1 1 1 1 1 1 1			
05 Brick 99 Unknown	08 Part of an interchange	11 Culvert			5 5			
	99 Unknown	12 Curb		05 Yield sign				
01 SURFACE CONDITIONS AT 01	ROAD SPECIAL FEATURES (up to 3)	13 Fence/Gate		06 RR gates / sign	al			
01 Dry 88 Other:	00 None 100 2 3	14 Hydrant		07 RR crossing sig	gns			
02 Wet		15 Barricade		08 No passing zor	ne			
	01 Bridge	16 Mailbox 17 Ditch		09 Center/Edge lin				
03 Snow 99 Unknown	02 Bridge Overhead	17 Ditch 18 Embankment						
04 Ice	03 Railroad Bridge	18 Embankment 19 Wall		10 Warning signs				
05 Mud/dirt/sand	04 RRXING	19 vvaii 20 Tree		11 School zone signs				
06 Debris (oil, etc.)	05 Interchange	20 Tree 21 RRXING fixture		12 Parking lines				
07 Standing/ moving water	06 Ramp	21 RRAING IIXture 88 Other:	35	88 Other:				
08 Slush	99 Unknown	99 Unknown		99 Unknown				
OO OIGSII	J 33 CHRIIOWH	JJ OHKHOWH						

Accident Diagram	SPECIAL EVE	INT		SPEC	IAL DATA	Local Case No.	Page of		
850A continued							IPD16-0625	2 / 5	
O2 ROADWAY NUMBER OF LANES O2 AT AT 01 One 02 Two 03 Three 04 Four to Six 05 Seven or more 88 Other: 99 Unknown		ROAD CHARACTER ON AT 01 Straight & Level 02 Straight on grade/slope 03 Straight on hillcrest 04 Curved & level 05 Curved on grade/slope 06 Curved on hillcrest 88 Other: 99 Unknown	0 0 0	SPECIAL JURI O Normal Jurisdic O National Park S O Military O Indian Reservat O College / Univer O Other Federal p O Other: O Unknown	tion (Not Special) ervice ion rsity Campus	of all traffic units in relati	ements, direction, and polionship to the trafficway. t(s) and traffic unit(s) alorgan) where possible. Reans by unique numbers	positions y. long Refer	
		Draw scene as observed o	rec	ereate per statem	ents and evidence	e available			



	upants &								vestigating Off	<i>A</i> —		Local Case No.		Page of 3 / 5			
	Form 850B F		(record pedestrians on supplement CITATION#											IPD16-0625 narrative			
TU#	VIOLATIONS	CHARGED				LIAIIUN#	TU#	VIULA		NS CHARGE	IVIOLE VIC	nations ii			LUN#		
OFFICER'S OPINION OF APPARENT CONTRIBUTING CIRCUMSTANCES - ENTER AS MANY AS APPLY TO THIS ACCIDENT (FACTOR TYPE, TU#, CC CODE)																	
													", CC CODE)				
Unit #	DRIVER Last Na	me	Middle Na	me	DRIVER A	DDRESS (Number,	Street, Su	ffix, etc.)	P	Personal Phone	Number	Gender	SE Used	Inj Severity	Transpt Unit		
	DRIVER First Na		Date of Bir		City		State	Zip	V	Work Phone Nu					Extrication?		
1	Holloway		David					Vew address?		Personal		M	S	N			
ST 01	Ethan		DOB						V	Vork		16	N				
TU			MN					Vew address?	Р	Personal							
ST			DOB							Vork							
TRAFF	IC UNIT#	1 (01, 03,	N3, X3, et	tc)			TRAF	FIC UNI	T#		2, 04, N2, X	(4, etc)					
DL State	Driver's License N	Number		DL C	Class Drivin Emplo		DL Stat	e Driver's 1	Licen	nse Number				Driving for Employer?	CDL?		
01 L	DR LICENSE COMPLY	RESTRICT C		COMM.	ERCIAL EN	NDORSEMENTS 4		DR LICE COMPI			RICT COMPI	Y C (OMMERCI 1 2	AL ENDOR 3	SEMENTS 14		
	licensed	Restrictions?						lot license		Restrict	tions?						
	id License spended	Driver's Lic Restrictions	Complied? Y N	Z - N T - D	one ouble/Trip	le Trailer		alid Licensuspended		Driver's Restricti		ied?	Z - None T - Double	e/Triple Tra	iler		
02 Gus	•	1			assenger			evoked		1				nger Vehic			
04 Exp	oired			N-T	ank Vehic	e	04 E	xpired					N - Tank \	Vehicle			
	ncld or Denied					Haz. Material	05 Cancld or Denied 2 H - Placarded Haz. Material										
	qualified stricted	3			ombination chool Bus	n Tank/HazMat	06 Disqualified 3 X - Combination Tank/HazMat 07 Restricted S - School Bus										
99 Unk		4			nknown		99 Unknown 4 S - School Bus U - Unknown										
	Alcohol indoc	SUBSTAN			IIIoaal dri	ugs contributed			lina		BSTANCE U		1 DC III.	and druge of	ntributod		
	Alcohol ingesAlcohol contri		hat apply)			on ingested	AP - Alcohol ingested (mark all that apply) DC - Illegal drugs contributed DC - Alcohol contributed DMP - Medication ingested										
	- Illegal drugs i	ngested				on contributed		DP - Illegal drugs ingested MC - Medication contributed									
M	ETHOD OF DET (mark all th				MPAIRMEN (mark all tha					ETERMINA' all that apply)	TION			RMENT TE all that apply			
ALCOHO			RUGS		Test give		ALCO		aik a	m mat appry)	DRUGS		G - No Tes				
	o evidence of im			TR - Te	st Refused	(Alcohol/Drug)		No eviden	ce o	of impairmen				efused (Alco			
		Breath, Blood, etc		PT - Pro	elim Positiv	e Test (PBT)							T - Prelim F	Positive Tes	st (PBT)		
	reliminary Breat	h Test PBT			ridentiary T		02 Preliminary Breath Test PBT03 Behavioral							tiary Test g	iven		
	ehavioral HGN, walk-and-turn	n, one leg stand, etc.			esults pend		Tes			-turn, one leg st	and, etc.			pending			
	assive Alcohol S			Evide	ntiary Breat	h Eye Fluid	□ 04 Passive Alcohol Sensor □ Control □ Evidentiary Breath □ Eye							Eye Fluid			
	etects alcohol from c		CO	<u>U.</u>			(detects alcohol from driver's mouth)							<u>U.</u>			
	bserved dor, staggering, slur	red speech, etc)		■ Blood	(BAC)	Other	O5 Observed (Odor, staggering, slurred speech, etc) Blood (BAC) O] Other			
	ther (e.g. saliva			<u>U.</u>				Other (e.g					<u>U.</u>		<u>U.</u>		
					screen resu								Drug scree				
	PASSENGER La PASSENGER Fir		Middle Nan Date of Bir		PASSENG City	ER ADDRESS (Nun	nber, Stree State	· • • • • • • • • • • • • • • • • • • •		Personal Phone Work Phone Nu			SE Used Eject/Trap	Inj Severity Eject Path	Transpt Unit Extrication?		
TU 1	HARR		MN THOM	AS				Vew address?	P	Personal		M	S				
ST			DOB						V	Vork			 				
TT T	BLAKE		MN				No.	Vew address?	ת	Personal		14					
										OI SUIIAI							
ST			DOB							Vork							
TU			MN				ľ	Vew address?	P	Personal							
										x 71_							
ST			DOB						V	Vork							
TU			MN				l	Vew address?	Р	Personal							
ST			DOB							Vork							
Transpor Unit	t EMS Time No	otified Injured tak	en by:				Transp Unit	ort EMS	1 1m	e Notified Inj	urea taken by:						
EMS Arriv	ved EMS Time@	Hosp Injured tak	ten to:				EMS A	rrived EMS	S Tim	ne@Hosp Inj	ured taken to:						

Occupants & Vehicles	VEHICLE#	1 SPECIAL DAT	TA	VEHICLE# X2 SPECIAL DATA				Local Case No.	Page of		
850B Continued	(01, 03, N3, X3, e			(02, 04, N2, X4, etc)				IPD16-0625	4 / 5		
	NER First Name	Middle Name M		OWNER Last Name ("Same" if Driver)		R First Name				
OWNER ADDRESS (Number, Street)	REDRICK OWNER ADDRESS (Number, Street) New address? Personal Phone										
OWNER ADDRESS (Number, Succe)	New address?	Personal Phone		OWINER ADDITION (Nulliuel, Succe		INCW audions	S: LEISUIIAI I IIUIIU			
CITY	ZIP	Work Phone		CITY		ST	ZIP	Work Phone			
COLOR YEAR MAKE	MODEL B	BODY STYLE	ST	COLOR YEAR	MAKE		ODEL	BODY STYLE			
		4DYSTYLE	51	RED 2005	CHEV			4DYSTYLE			
LICENSE PLATE # County Exp YR F	Removed by:		IC CCs	LICENSE PLATE #	County Exp	YR Rer	moved by:		MC CCs		
	OWNER				201		WNER				
VEHICLE IDENTIFICATION NUMBER		Dir of Travel # Occ 2	cupants	VEHICLE IDENTIFIC	CATION NUMBER	R		Dir of Travel #	# Occupants		
Insurance Company	Policy Number			Insurance Company	Insurance Company Policy Number						
SPECIAL CONDITIONS FOR TRAFFIC UNITS	3 4 5	Odometer 300000	Fire?	SPECIAL CONDITION TRAFFIC UNITS		2	5	5 Odometer 190000	Fire?		
1 Hit & Run 2 Non-Contact		Towed a	away	1 Hit & Run	2 Non-Cc	ontact	3 Sto		ed away		
4 Legally Parked 5 Pursued by L	LE 6 Driverles		_	4 Legally Parke	ed 5 Pursue	d by LE	6 Driv		damage		
O5 VEHICLE BODY TYPE LARGE	E/HEAVY VEHICI	CLE (GCVWR over 10,00	00lbs)	O1 VEHICLE BO	ODY TYPE	LARGE /	HEAVYV	ZEHICLE (GCVWR over	10,000lbs)		
	Single heavy truc	1ck >10,000 lbs		01 Automobile 10 Single heavy truck >10,000 lbs							
	Truck & trailer(s)	Calculated sp	peed	02 Motorcycle			ruck & trai	Calculate	ed speed		
	2 Tractor-trailer(s)	at impact		03 Motor scoot	ter or Moped		ractor-trail	iler(s) at impact	1		
	3 Cross country bu	US		04 Van 05 Pickup truck	1. 110 001 lhe		challbuc				
	1 School bus 5 Transit (city) bus	Bus Seat Capacity		05 Pickup truck06 Sport utility			chool bus	Dus Seat			
	5 Transit (city) bus 6 Other bus			00 Sport utility 07 Camper or			ransit (city) Other bus	/) DUS			
	Train (Power Source		07 Camper of 100 100 100 100 100 100 100 100 100 10		25 Ti	••••••	Power Source			
	3 Other:	99 Unkn	nown	00 Harrinacii 09 All-terrain v		88 0			Jnknown		
		ICLE DAMAGE			CLE USE)2	VEHICLE DAMAGE			
01 No special use 06 Police	02 00 None	04 Destroye	ed	01 No special use			00 None	04 Dest	roved		
02 Taxi / Limo 07 Ambulance	01 Damage (m			02 Taxi / Limo	07 Ambula			ge (minor) 88 Othe			
03 School bus 08 Fire	02 Functional			03 School bus	08 Fire		02 Function				
04 Other bus 09 Mail/Parcel 05 Military 99 Unknown	03 Disabling	99 Unknown		04 Other bus05 Military	09 Mail/Pa	arcel	03 Disabli		^\\/n		
U5 Military 99 Unknown DAMAGE LOCATION AREA		NU. BEFORE UNSTAB			99 Unknow CATION AREA			. MANU. BEFORE UNS			
06	01 Straight/	11 Stopped		\cap			01 Straigh				
First Impact Major Impact	following roa		turn	First Impact	Major Impact _				ng turn		
1 2 3A 3B 4 5	02 Left Turn	12 Stopped in		1 2 3	A 3B 4	5	02 Left Tu	4111	ed in traf		
$\begin{bmatrix} 2 & 12B \\ 12C \end{bmatrix}$ $\begin{bmatrix} 13 & 13 \\ \hline & 13 \end{bmatrix}$ $\begin{bmatrix} 6A \\ \hline & 7A \\ \hline & 7$	03 Right Turn	13 Illegally pa			13	6A	03 Right T	I GIII	lly parked		
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	04 U Turn	14 Disabled i roadway	in	$\frac{2}{2} \frac{12C}{12A}$		6B	04 U Turn	14 Disab roadw			
11 10 9B 9A 8 7	05 Passing	15 Slowing o)r	11 10	\$ 9A 8	'	05 Passing	ng 15 Slowir			
☐ 14 Undercarriage ☐ 15 Windshield		16 Nogotiotio		14 Undercarriage	e 15 Windsh	shield	06 Changi	16 Naaat			
16 Other windows 99 Unknown	07 Avoidance m	curve	19 4	16 Other windows)WN	07 Avoida 08 Morain	Curve			
☐ 17 Entire vehicle damaged☐ 88 Other:	08 Merging 09 Parking	88 Other:		17 Entire vehicle 88 Other:	damaged		08 Mergin 09 Parking				
Trailer: Present / Damaged	10 Backing	99 Unknown			sent / Damaged	_	10 Backing				
		in the order of occuren	nce)	VEHICLE SEQUE				r unit in the order of occ	urence)		
1 88 2 23 3 4	The exac	ct sequence is unkno	JWN	1 23 2	2	4		e exact sequence is un			
NON-COLLISION		COLLISION WITE			ION-COLLISION			COLLISION V			
01 Ran off road right 10 Downhill	Il runaway 21	1 Pedestrian		01 Ran off road rig		ownhill ru	unaway	21 Pedestrian			
02 Ran off road left 11 Trailer st	swing 22	2 Motor veh in-trans	sport	02 Ran off road le	eft 11 Tra	ailer swi	ng	22 Motor veh in-tr	ransport		
03 Crossed centerline 12 Separati	03 Crossed centerline 12 Separation of units 23 Legally Parked Vehicle										
04 Overturn/Rollover 13 Jackknife	fe $\parallel 2^{2}$	4 Train		04 Overturn/Rollov	ver 13 Ja	ckknife		24 Train			
05 Crossed median 14 Fire	25	5 Pedal cycle (bike,	etc)	05 Crossed media	an 14 Fir	re		25 Pedal cycle (b	ike, etc)		
06 Fell/Jumped from veh 15 Explosion		6 Animal		06 Fell/Jumped from		(plosion		26 Animal			
07 Thrown or falling object 16 Immersion	ion in water 27	7 Fixed Object		07 Thrown or falling object 16 Immersion in water 27 Fixed Object							
08 Cargo loss or shift 88 Other ev	vent:	8 Other moveable of				ther ever		28 Other moveab	le object		
09 Equipment failure BACKI				09 Equipment failu							
(tire, brakes, etc.) 98 Unknow	/n non-coll. \mathcal{I}^{95}	9 Unknown object		(tire, brakes, et		ıknown	non-coll.	99 Unknown obje	ct		