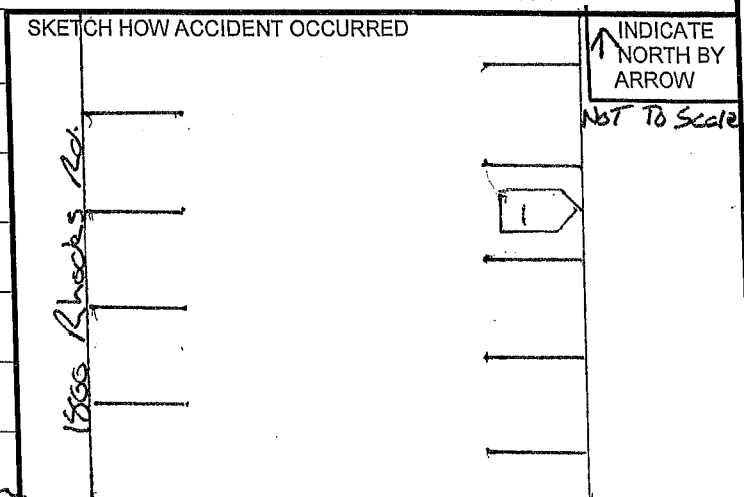


CR NUMBER 23-19716	ACCIDENT DATE 12-14-23	ACCIDENT TIME 0848	DAY OF WEEK Thursday	<input checked="" type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK
------------------------------	----------------------------------	------------------------------	--------------------------------	--

LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 1800 Rhodes Rd.	WEATHER No Adverse
--	------------------------------

VEHICLE NO. 1					VEHICLE NO. 2 (OR PROPERTY DAMAGED)				
DRIVER LAST FIRST MIDDLE DOB Parked	DRIVER LAST FIRST MIDDLE DOB Unknown								
ADDRESS	ADDRESS								
CITY, STATE, ZIP PHONE NUMBER	CITY, STATE, ZIP PHONE NUMBER								
DRIVER'S LICENSE NUMBER STATE	DRIVER'S LICENSE NUMBER STATE								
VEHICLE OWNER'S NAME LAST FIRST MIDDLE Benthimer, David	VEHICLE OWNER'S NAME LAST FIRST MIDDLE Unknown								
ADDRESS 1800 Rhodes Rd. # 609	ADDRESS								
CITY, STATE, ZIP PHONE NUMBER Kent OH 44240	CITY, STATE, ZIP PHONE NUMBER								
VEHICLE YEAR MAKE MODEL COLOR 2004 Toyota Corolla Silver	VEHICLE YEAR MAKE MODEL COLOR								
LICENSE PLATE NUMBER STATE IXA 3006 OH	LICENSE PLATE NUMBER STATE								
INSURANCE COMPANY Progressive	INSURANCE COMPANY								
PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT Bumper, Trunk	PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT								

DESCRIBE HOW ACCIDENT OCCURRED
Unit #1 was parked facing East behind 1800 Rhodes Rd.
Unit #1 was struck from behind by an unknown vehicle.



OFFICER/SUPERVISOR SIGNATURE
T. Cole *[Signature]*