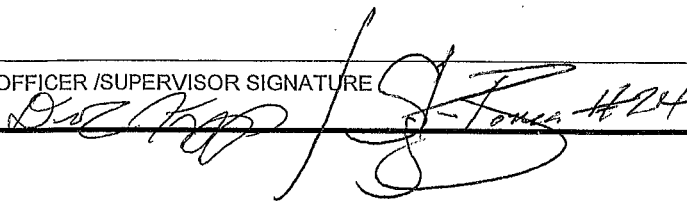
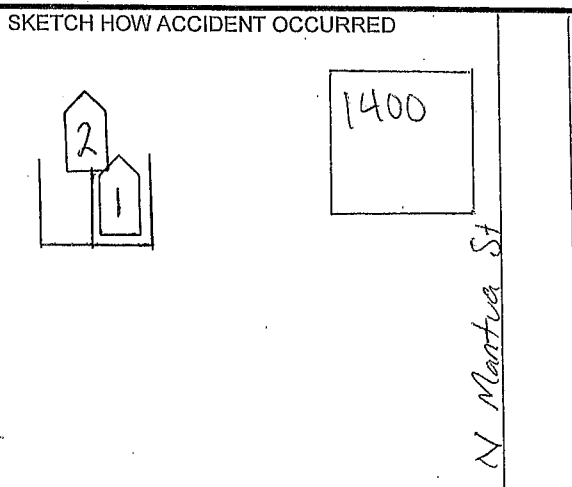



CR NUMBER 23-6131	ACCIDENT DATE 4/20/2023	ACCIDENT TIME 20:00	DAY OF WEEK Thurs	<input type="checkbox"/> DAYLIGHT <input checked="" type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 1400 N Mantua St, Kent OH 44240			WEATHER Clear	
VEHICLE NO. 1			VEHICLE NO. 2 (OR PROPERTY DAMAGED)	
DRIVER LAST FIRST MIDDLE DOB Unoccupied			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 Coughtry, Corey, Aaron			VEHICLE OWNER'S NAME LAST FIRST MIDDLE Unknown	
ADDRESS 410 Stow St			ADDRESS	
CITY, STATE ZIP PHONE NUMBER Kent, OH 44240			CITY, STATE, ZIP PHONE NUMBER	
VEHICLE YEAR MAKE MODEL COLOR 2011 Subaru Legacy White			VEHICLE YEAR MAKE MODEL COLOR	
LICENSE PLATE NUMBER STATE JNU 6774 OH			LICENSE PLATE NUMBER STATE	
INSURANCE COMPANY Progressive 57829516			INSURANCE COMPANY	
PARTS OF VEHICLE DAMAGED <input checked="" type="checkbox"/> FRONT <input type="checkbox"/> REAR <input checked="" type="checkbox"/> LEFT <input type="checkbox"/> RIGHT			PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT	
DESCRIBE HOW ACCIDENT OCCURRED				
<p>Vehicle 1 was parked and unoccupied when it was struck by vehicle 2.</p>				
OFFICER /SUPERVISOR SIGNATURE 			SKETCH HOW ACCIDENT OCCURRED 	
			INDICATE NORTH BY ARROW  Not to Scale	