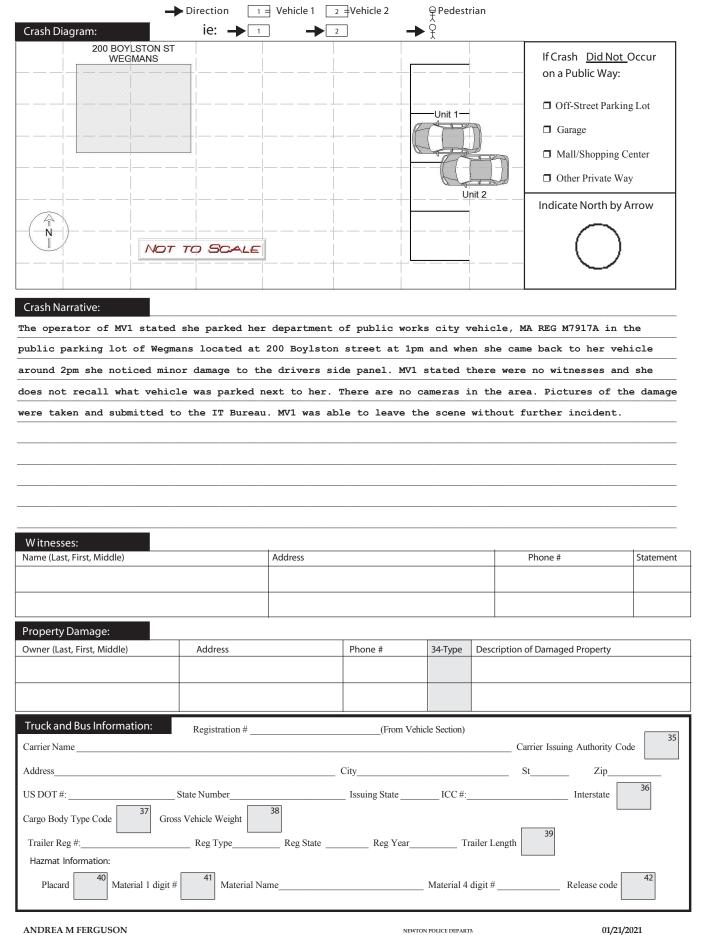
Route# Direction   Name of Roadway/Street   At   Name of Roadway/Street   At   Name of Roadway/Street   At   Name of Roadway/Street   At   Name of Intersecting Roadway/Street   Feet   N   S   W   of   Mile Marker   Exit Number   Exit Number   Name of Intersecting Roadway/Street   Feet   N   S   E   W   of   Route# Direction   Name of Intersecting Roadway/Street   Feet   N   S   E   W   of   Route# Directing Roadway/Street   Feet   N   S   E   W   of   Route# Directing Roadway/Street   Landmark   License # - St   MA   DOB/Age Reg #   M7917A   Reg Type MVN   Reg State   MA   Sex   F   Lic Class   D   M   M   Lic. Restrictions   B   ODL   Veh Year 2012   Veh Make   FORD   Veh Config   1   Operator   RITCEY   KIMBERLY   Roadway/Street   Roadway/Street   N   S   E   W   Owner   PUBLIC WORKS   CITY OF NEWTON   City   Maddless   110 CRAFTS ST   Address   101 CRAFTS ST   Address   101 CRAFTS ST   Address   101 CRAFTS ST   Address   101 CRAFTS ST   Owner   N   S   E   W   Responding to Emergency? N   Event   Sequence   2   22   22   22   22   22   23   4   Oundercarriage   S   11 Totaled		Poli	ce Use Only		<u>Com</u> monweal	lth o	f Massa	achu	ısetts	<b>;</b>		RMV	/ Docum	ient Number		
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Sex F Lic Class D M Lic Restrictions B CDL Veh Year 2012 Veh Make FORD Veh Config. 1  Operator RITCEY KIMBERLY True:  Address 101 CENTRAL ST  City WALTHAM State MA Zip 02453  Insurance Company SELF-CITY OF NEWTON  Vehicle Travel Direction: N S E W Responding to Emergency? N  Vehicle Action Prior to Crish  Vehicle Action Prior to Crish  Vehicle Travel Direction: N S E W Responding to Emergency? N  State MA Zip 02458  Vehicle Action Prior to Crish  Vehicle Travel Direction: N S E W Responding to Emergency? N  State MA Zip 02458  Vehicle Action Prior to Crish  Vehicle Action Prior to Crish  1 Vehicle Travel Direction: N S E W Responding to Emergency? N  State MA Zip 02458  Vehicle Action Prior to Crish  Vehicle Action Prior to Crish  1 Vehicle Travel Direction: N S E W Responding to Emergency? N  State MA Zip 02458  Vehicle Action Prior to Crish  1 Vehicle Travel Direction: N S E W Responding to Emergency? N  State M Zip 02458  Vehicle Action Prior to Crish  1 Vehicle Travel Direction: N S E W Responding to Emergency? N  State M Zip 02458  Vehicle Action Prior to Crish  1 Di Undercarriage  5 11 Totaled  1 Di Undercarriage	- 1		18 1	0									Reg S		_	
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Please fill out for operator and all occupants involved Name (Last First Middle)  Operator  See Above  Address Age/DOB See System Status Switch Status Tool Status T														6		
Operator    Please   See Above   See Above	$\frac{1}{1}$						de/Override		Towe		29   30			33	$\dashv$	
Please Select One of the Following:  Vehicle  #Occupants  Non-Motorist A Type	-	Name (Last Firs			Address		Age/DOB	Sex		Airbag Air Status Sw	bag Eject itch Code	t Trap e Code	Status Coo	nsp. de Medical Facili	ity 2	
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Operator Owner Owner Last First Middle Address Address Address  City State Zip City State Zip Damaged Area Code: (Circle Up to Three)  Vehicle Travel Direction: NSEW Responding to Emergency? Event Sequence 22 22 22 22 22 3 4 10 Undercarriage 5 11 Totaled  Violation 1: Ch Sec Violation 2: Ch Sec Driver Contributing Code 24 24 24 24 24 24 24 24 24 24 24 24 24		Sex Lic. Class Lic. Restrictions CDL														
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Please fill out for operator and all occupants involved Name (Last First Middle)  Address  Age/DOB  Sex  Age/DOB  Age/DOB  Sex  Age/DOB  Sex  Age/DOB  Sex  Age/DOB  Age/DOB  Age/DOB  Age/DOB  Age/DOB  Age/DOB  Age/DOB  Age/DOB  Age/DOB  Age	-	Name (Last Fi	rst Middle)	operator and all oc	Address				Seat Safety Pos. System	Airbag Air n Status Sv	bag Eject	t Trap de Code	Injury [Fra:	nsp.	lity	
Operator/Non-Motorist See Above	-	Operator/	Non-Motorist		See Above						+	+				
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Police Officer Name (Please Print)