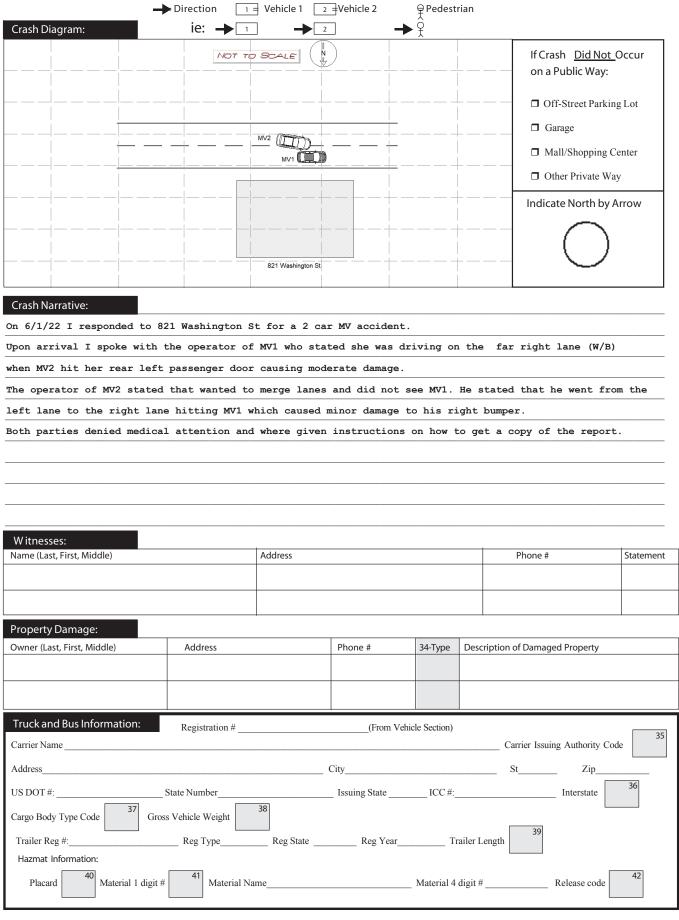
Poli	ce Use Only		Common	wealth	of Massa	achus	etts		RI	MV Doc	ument l	Number	
Date of Crash 06/01/2022	Time of Crash 14:53	City/To	Mo Mo	otor Ve	hicle Cra	sh $\begin{bmatrix} N \\ V \end{bmatrix}$		Number Injured	Speed Li Latitude		Stat	te Police al Police TA Police	□ Xi
00/01/2022	14:55 24HR			Police	Report		2	0	Longitud		Oth	TA Police er:	
	AT INTER	RSECTION:	<	LOC	ATION :	>		NOT	AT IN	TERSI	ECTIO	ON:	╗
					WEST	821	V	VASHIN	IGTON S	Т			╌
Route# Direction Name of Roadway/Street					Route# Direction Address # Name of Roadway/Street							t	_
			At		Feet N	N S E W	of		_ • _	- or			╌
Route# Direc	tion N	Name of Intersection	ng Roadway/Street					Mile Ma	irker		Exi	t Number	_
		Also at Inter	section with		Feet [1	N S E W		Route#	Inter	secting Re	oadwav/	Street	-
Route# Direc					Feet [S E W				0	,		
Route# Direc	tion	Name of Interse	cting Roadway/Street				_			Landmark			_
XVehicle1	1_#Occupants	X Hit/Run	Moped	Case Numb	er	2200	0475						-
License#		St M	A DOB/Age	Reg	# 1MSN55			Reg Tyne	e PAN	Re	eg State	MA	_
Sex_F Lic.	18 1		19		Year_2019							20	-
	DN Last		Endorsm	ent									┢
Address 66 G	ARDEN PKWY		Owner (Same as operator) Last First Middle Address										
City NORWO			ate MA Zip 02062							ate	Zip		-
1	_{pany} LM GENE		CityStateZip								- 1		
Vahiala Traval			onding to Emergency	y? N Ever	nt Sequence 1 2	22 22		2 2		3	4		
	ssued)				t Harmful Event	1 23			. \			0 Undercarr	iage
			2: ChSec		er Contributing Co		24	24	-)	9	5 1	1 Totaled	
			4: Ch Sec		erride/Override	25	Towed_	N 8		O	6		
	fill out for opera	ator and all occu	pants involved			26 Seat			30 Eject Tra Code Coo	31 32 p Injury	33 Fransp.		\dashv
Name (Last Fir	st Middle)		Address See Abov		Age/DOB	Sex Pos.			Code Code	le Status	Code !	Medical Facili	ty
1								+					\dashv
													_
Please Select C of the Followi		2 <u>1</u> #Occupan	ts Non-Motoris	st A Type	14 Action 1	5 Locatio	n 16	Conditi	ion 1	7	Hit/Run	Мор	ed
License# St MADOB/Age					# 1MYD16		Reg Type	_e PAN	— ∎ Re	Reg State MA			
Sex_M Lic. Class D 18 18 Lic. Restrictions 19 CDL											Config.	20	_
Operator FORGIONE STEVEN C					Owner (Same as operator)								
Address 201 C	ENTRE LN	First	Middle	Add	ress			First		Mid	dle		
City WALPO	LE	St	ate_MA Zip_02081	City					Sta	ate	Zip_		
Insurance Com	pany GRAPHIC	ARTS MUTUA	L	Veh	icle Action Prior to	Crash	5 21	Da	maged Ar	ea Code:	(Circle	Up to Thre	ee)
Vehicle Travel			sponding to Emergenc	y?N Ever	nt Sequence 1 2	22 22	_	22 0		3	4		
Citation # (If I	ssued)	1 1 2 3		Mos	t Harmful Event	1 23		_ (.			0 Undercarri 1 Totaled	iage
Violatio	n 1: Ch Se	ec Violatio	on 2: Ch Sec	Driv	er Contributing Co	ode 19	24	24	- <i>)</i>	9	ا د	i iotaicu	
Violatio	n 3: Ch Se	ec Violatio	on 4: Ch Sec	Und	erride/Override	25	Towed_	N 8		7	6		
		operator and al	occupants involved			26 Seat	Safety Air	28 29 bag Airbag	30 Eject Tra	31 32 p Injury	33 Transp.		\dashv
Name (Last Fi	rst Middle) Non-Motorist		Addres See Abov		Age/DOB	Sex Pos	System S - 0 4	tatus Switch	h Code Co	ode Status 10		Medical Facil	.ity
Speratori			230 / 100 /				1	1	0	10	-		\dashv
													\dashv



ELMER ACUNA 06/01/2022 NEWTON POLICE DEPARTM Police Officer Name (Please Print) Signature ID/Badge # Department Precinct/Barracks Date