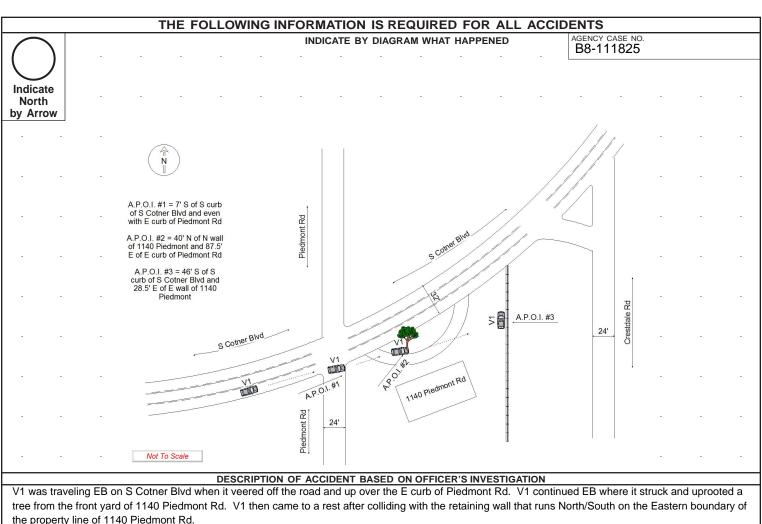
2180 2677	51204 68		State of Nebraska Investigator's Motor Vehicle Accident Report Sheet 1 of 2																
1	Total Nu of Vehi		Local No./ District Agency Case No. B8-111825								HIT & RUN	l .	INVESTIGATION MADE AT SCENE? XYES NO						
A/1 04 A/2	DATE OF ACCIDENT	M M	1/20	M / D D / Y Y Y Y S M T W TH F S TIME OF ACCIDENT 0100										STATE US	_				
В	PLACE OF ACCIDENT	CITY		Lancaste coln		r					NOTIF				12/01/2018				
39		Lincoln N WHICH OCCURRED N W								LATITUDE									
4	DISTANCE MILEPO									HIGHWAY NO.					LONGITUE				
D 4		IF AT INTERSECTION NAME OF INTERSECTING ROADWAY X						X FE	ET C	IF NO	T AT IN	TERS E	W OF N	EAREST STREE	T, BRIDGE	, BRIDGE, RAILROAD CROSSING			
V1/M								46.							otner E				
10 V2/M	IF ACCIDENT WAS OUTSIDE CITY LIMITS, INDICATE DISTANCE FROM NEAREST TOWN N S E W AND N S E W OF NEAREST CITY OR TOWN D WORK R1 R2 R3 R4 C REPERTINAL S1 S2 S3 S4 S5-a S5-b S6-a S6-b DOES ACCIDENT INVOLVE DAMAGE TO											TO							
E 2	R. WORK R1 R2 R3 R4 S. PEDESTRI CLASSIFIC CODES						S1	S2	S3	S4 S5	-a S5-b	S6-a	a S6-b	PROPERT	PROPERTY?				
								VEI	HICLE	NO. 1									1
F 2 V1/N	DRIVER LICENSE DRIVER	ICENSE NO. 1113020197								PHONE					NE LOCAL N			> FEMALE > MALE	
1	ROCKY DRIVER ADDRI	ESS					STATE, Z	ZIP			402	2416	3917	DATE OF	00/4	-//-			V1/1
V2/N	6737 FA	AIRFA.	FAX AVE, LINCOLN, NE 68505 PHONE BIRTH 06/17/1992 LOCAL NO.											37					
G	SHANN OWNER ADDR		DU	MAIS		CITY,	STATE, Z	ZIP			402		7650	X ∵YES	CITATION	NO.			V1/2 42
2			ax Ave, Lincoln, NE 68505								○ PENDI		1	LB609923					
н 4	LICENSE PLATE	PA	NO.	UIB180	MAKE	Ti I	MODEL			BODY ST	VIF	(Pla	YEAR ate Expires)	2018	STIMATED	(Of P	late)	NE	43 V1/4
V1/O 3	VEHICLE ID	T -	2005	5	Buick			dezvo	us		um/lar	ge ι	white	E COMPANY	X TOTALE				V1/5
V2/O	NO. (VIN) TOWED TO	TOWED BY											POLICY NO						
	101 Cha	rlesto	n			Capita	al Tov		HICI F	NO. 2			2986	6086					√1/6 35
2	DRIVER LICENSE	RIVER							STA					STATE (Of License)	SEX FEMALE				
V1/P	DRIVER						PHONE					LOCAL NO.				V2/1			
6 V2/P	DRIVER ADDRI	ESS	CITY, STATE, ZIP					ZIP						DATE OF BIRTH (MM / DD / YYY)F I				
	OWNER	WNER						PHONE					(MINIT DD / TTT		LOCAL NO.				
01	OWNER ADDR	VNER ADDRESS CITY, STATE, ZIP					ZIP	CITATION PENDIN					YES					V2/3	
V1/Q 1	LICENSE PLATE		NO.									(Pla	YEAR ate Expires)			STA (Of P	late)		V2/4
V2/Q	VEHICLE	YEAR	R MAKE MODEL						BODY STYLE COLOR INSURANCE CO					(ESTIMATED DAMAGE TOTALED \$				
K	VEHICLE ID NO. (VIN) TOWED TO		TOWED BY							POLICY NO.									
01	Complete this section for all injured persons										DATE	OF BIRTH	1	2	3	4 5	5 eev		
VEH. #					on report, if r									DD / YYYY)	Seat Position	Eject	Body Region	Injury Sev. Tra	ns. M F
	LOCAL NO. MEDICAL FACILITY NAME								EMS SERVICE NAME						EMS RU	N REP	ORT NO.		
VEH. #	NAME ADDRESS																		
	LOCAL NO.		MEDI	CAL FACILITY N	NAME				EMS SE	RVICE NAM	ИE				EMS RU	N REP	ORT NO.		
VEH. #	NAME				AC	DDRESS													
	LOCAL NO. MEDICAL FACILITY NAME								EMS SERVICE NAME						EMS RU				



the property line of 1140 Piedmont Rd.

D1 was taken into custody and processed for DUI after he was contacted leaving the accident. D1 informed officers that he crashed because of inoperable windshield wipers, which forced him to drive with his head out of the window, "Like Ace Ventura," due to the rain.

ERTY					OWNER NAME \ Terrance \	/ Schoor	over 114	68510 PHONE 402416860		\$ 500							
PROPERTY	OBJECT DAMAGED OWNER NAME							ADDRESS	3	PHONE		APPROX. COST OF DAMAGE					
SSES	NAME							ADDRESS	3		PHONE						
WITNESSES	NAME ADDRESS											PHONE					
	E	BEF	ORI	MOVEMENT COLLISION ROAD OR		MOST DAM	MPACT AND	A	AIRBAG DEPLOYED VEHICLE 1	RESTRAINT USE VEHICLE 1		TAL JPANT	S VEH		/EH 2		
NO). IN	+	E W	HIGHWAY NAME	` `		for each vel	,	_		ALC:	OHOL TING	Driver No. 1	Driver No. 2			
2	+	- :	X 	S Cotner Blv	POINT OF IMPACT	01	POINT OF IMPACT	CLE 2	1 Deployed - front	2 1 None used - vehicle occupar	ALCC LEV It TES	/EL	Y X	Y	Y N		
1	+	1		06 Turning left	MOST	MOST DAMAGED		Deployed - fide Deployed - side Deployed - both front/side	2 Lap & shoulder belt used 3 Shoulder belt only used 4 Lap belt only used	BAC L	.EVEL	.137					
2				07 Making U-tu 08 Entering traffic lane	rn AREA 00 None		2 03	04	Not deployed Not applicable/ No airbag available	5 Child safety seat used 6 Child booster seat used 7 DOT approved helmet used		LCOH DRUG	S	Driver No. 1	Driver No. 2		
11 Essentially 09 Leaving straight ahead 102 Backing 10 Parked 103 Changing lanes 11 Slowing or 04 Overtaking/ Passing 12 Other 15 Turning right 13 Unknown				09 Leaving traffic lane 10 Parked s 11 Slowing or stopped in to 12 Other	09 Top & v 10 Underca 11 Total (a	09 Top & windows 10 Undercarriage 01 - 11 Total (all areas)			6 Unknown VEHICLE 2	8 Costume helmet used 9 Restraint use unknown VEHICLE 2	1 Ne 2 Ye 3 Ye 4 Ye	SUSPECTED 1 Neither alcohol nor 2 Yes - alcohol suspe 3 Yes - drugs suspec 4 Yes - alcohol & dru 5 Unknown		ected ted			
OFFICER NO. TROOP/ TEAM/ BEAT						=		Lince	^{MENT} OIn Police Departme	nt	Photograpl taken?			hs 🔇	Ó YES ⊃ NO		
INVESTIGATOR NAME (Print or Type) Alex Stahl								roved by	ATURE y Officer Alex Stahl		DATE REPC		12/0	1/201	8		