[DO NOT WRITE IN THIS SPACE]

Pg 1 of 4

Incident Report	Y	N
Investigation Completed	X	
Investigation Made at Scene	X	
Photographs		X
Revised		X
Fatality		X
Hit and Run		X

OFFICIAL OKLAHOMA TRAFFIC COLLISION REPORT

COMPLETE

(1) Reporting Agency: NORMAN POLICE DEPARTMENT
Case Number (Agency Use): 2013-055539
Motor Vehicles Involved: 02 | Number Injured: 00 | Number Killed: 00

(2) Date of Collision (mm/dd/yyyy): 04/25/2013 | Time: 1744 | County Number and Name: 14 CLEVELAND | Nearest City or Town Number and Name: In [X] 20 NORMAN | Near [ ]

(3) Distance from Nearest City or Town Limits: Mi. Ft. N S Mi. Ft. E W | Control # | Int ID | Location | East Grid | North Grid | Administrative

(4) Street, Road or Highway: ROBINSON STREET | Distance from: At [ ] 0500 Mi. [ ] Ft. [X] N [ ] S [ ] E [ ] W [X] of | (Nearest) Intersecting Street, Road or Highway: WOODS AVE

(5) Unit: 01 | Occupants: 01 | Type: D | Hit & Run [ ] | CMV [ ]
Last Name: SAVAGE | First: SAMUEL | Middle: MONROE | Date of Birth (mm/dd/yyyy) | Sex

(6) Address: 17526 BIG JIM CIR | City: NORMAN | State: OK | Zip: 73026 | Telephone (Use Area Code): 4054427762

(7) Driver License Number | State: OK | Class: A | Endorsement(s): NM | Restriction(s) | Inj. Sev.: 1 | Type of Injury: 0 | Drv./Ped. Cond.: 01 | OP Use: 04

(8) Air Bag: 1 | Ejected: 1 | Extricated: 1 | Test: 5 | (% BAC): 0. | Transported by | To Medical Facility | License Plate Number | State: OK | Month: 12 | Year: 2013

(9) VIN | Vehicle Year: 1992 | Color: WHI | 2nd Color: 0 | Make: FORD | Model: F350 | Veh. Conf.: 04 | Extent of Damage: 1

(10) Insurance Verification: 4 | Insurance Company Name: EXEMPT - CITY OF NORMAN | Policy Number | Insurance Telephone (Use Area Code)

(11) Vehicle Removed by | Owner's Last Name | First | Middle Initial
Driver [X] | Same as Driver [ ] | CITY OF NORMAN

(12) Owner's Address: PO BOX 370 | City: NORMAN | State: OK | Zip: 73069 | Oversized Load: 0 | Towed Veh. Type: 00 | Rolled [ ] | Burned [ ] | Phone present [X] | Phone in use [ ]

(13) Citation Number | Statute/Ordinance Number | Citation Number | Statute/Ordinance Number

05539-13

(14) Unit: 02 | Occupants: 02 | Type: D | Hit & Run [ ] | CMV [ ]
Last Name: WATSON | First: ROBERT | Middle: K | Date of Birth (mm/dd/yyyy) | Sex: M

(15) Address: 1711 QUAIL CREEK DR | City: NORMAN | State: OK | Zip: 73026 | Telephone (Use Area Code): 4056159908

(16) Driver License Number | State: OK | Class: D | Endorsement(s) | Restriction(s): 1 | Inj. Sev.: 1 | Type of Injury: 0 | Drv./Ped. Cond.: 01 | OP Use: 04

(17) Air Bag: 1 | Ejected: 1 | Extricated: 1 | Test: 5 | (% BAC): 0. | Transported by | To Medical Facility | License Plate Number | State: OK | Month: 05 | Year: 2013

(18) VIN | Vehicle Year: 2010 | Color: SIL | 2nd Color: 0 | Make: TOYO | Model: TACO | Veh. Conf.: 04 | Extent of Damage: 2

(19) Insurance Verification: 2 | Insurance Company Name: USAA | Policy Number: 01372 96 36U 7102 4 | Insurance Telephone (Use Area Code): 8005318111

(20) Vehicle Removed by | Owner's Last Name | First | Middle Initial
Driver [X] | Same as Driver [X]

(21) Owner's Address | City | State | Zip | Oversized Load: 0 | Towed Veh. Type: 00 | Rolled [ ] | Burned [ ] | Phone present [X] | Phone in use [ ]

(22) Citation Number | Statute/Ordinance Number | Citation Number | Statute/Ordinance Number

(23) Investigating Officer: COOK | Badge Number: 1008 | Troop/Div.: DIUZ | Reviewed by (Init.): DW | Reviewer Badge Number: 0200 | Date of Report (mm/dd/yyyy): 04/25/2013

Unit Type: 0 Driver, 1 Pedestrian, 2 Pedestrian Conveyance, 3 Bicyclist, 4 Motorcycle, 5 Parked Car, 6 Animal, 7 Train, 8 Other Cyclist

Injury Severity: 0 N/A, 1 No Injury, 2 Possible, 3 Non-Incapacitating, 4 Incapacitating, 5 Fatal, 9 Unknown

Type of Injury: 0 N/A, 1 Head, 2 Trunk - External, 3 Trunk - Internal, 4 Arms, 5 Legs, 8 Unknown

Driver/Pedestrian Condition: 00 Not Applicable, 01 Apparently Normal, 02 Drinking - Ability Impaired, 03 Odor of Alcohol Beverage, 04 Illegal Drugs, 05 Under the Influence of Medications, 06 Very Tired, 07 Sleepy, 08 Ill (Sick), 09 Dizzy/Faint, 10 Emotional, 11 Other, 99 Unknown

Occupant Protection (OP) In Use: 00 Not Applicable, 01 None Used, 02 Lap Belt Only, 03 Shoulder Belt Only, 04 Shoulder and Lap Belt, 05 Child Restraint Type Unknown, 06 Restraint Used - Type Unknown, 07 Helmet, 08 Child Restraint - Forward Facing, 09 Child Restraint - Rear Facing, 10 Booster Seat, 11 Other, 99 Unknown

Air Bag Deployed: 0 Not Applicable, 1 Not Deployed, 2 Deployed - Front, 3 Deployed - Side, 4 Deployed - Other (knee, air bel., etc.), 5 Deployed - Combination, 9 Deployment Unknown

Ejected: 0 Not Applicable, 1 Not Ejected, 2 Ejected, Partially, 3 Ejected, Totally, 9 Unknown

Extricated: 0 N/A, 1 No, 2 Yes

Chemical Test: 0 N/A, 1 Blood, 2 Breath, 3 Blood/Breath, 4 Test Refused, 5 None Given, 6 Other

Extent of Damage: 0 N/A, 1 None, 2 Minor, 3 Functional, 4 Disabling, 9 Unknown

Insurance Verification: 0 N/A, 1 No, 2 Owner, 3 Operator, 4 Exempt

Oversized Load: 0 N/A, N Not Permitted, P Permitted

Towed Vehicle Type: 00 N/A, 01 Boat Trailer, 02 House Trailer, 03 Farm Trailer, 04 Horse Trailer, 05 Another Vehicle, 06 Utility Trailer, 07 Homemade Trailer, 08 Box Trailer, 09 Stock Trailer, 10 Camping Trailer, 11 Combination, 12 Other, 99 Unknown

WARNING - STATE LAW Use of contents for commercial solicitation is unlawful

DPS: 0192-01 REV 0107

Case Number 2013-05539

(24) Unit	Injured / Witness	Passenger / Prop. Owner	Pos in Veh.	Last Name	First	Middle Initial	Date of Birth (mm/dd/yyyy)	Sex
02		X	13	WATSON	ERIN			

(25) Address	City	State	Zip	Telephone (Use Area Code)
Same as Driver: X				4056154441

(26) Injury Severity / Type	OP Use	Air Bag Ejected	Extricated	Transported by	To Medical Facility	Property Type
10	04	1	1	1		

(27) Unit	Injured / Witness	Passenger / Prop. Owner	Pos in Veh.	Last Name	First	Middle Initial	Date of Birth (mm/dd/yyyy)	Sex

(28) Address	City	State	Zip	Telephone (Use Area Code)
Same as Driver				

(29) Injury Severity / Type	OP Use	Air Bag Ejected	Extricated	Transported by	To Medical Facility	Property Type

(30) Unit	Injured / Witness	Passenger / Prop. Owner	Pos in Veh.	Last Name	First	Middle Initial	Date of Birth (mm/dd/yyyy)	Sex

(31) Address	City	State	Zip	Telephone (Use Area Code)
Same as Driver				

(32) Injury Severity / Type	OP Use	Air Bag Ejected	Extricated	Transported by	To Medical Facility	Property Type

(33) Unit	Injured / Witness	Passenger / Prop. Owner	Pos in Veh.	Last Name	First	Middle Initial	Date of Birth (mm/dd/yyyy)	Sex

(34) Address	City	State	Zip	Telephone (Use Area Code)
Same as Driver				

(35) Injury Severity / Type	OP Use	Air Bag Ejected	Extricated	Transported by	To Medical Facility	Property Type

Complete information below if this vehicle is being used for COMMERCE/BUSINESS and has a GVWR/GCWR IN EXCESS OF 10,000 LBS., or has a HAZMAT PLACARD, or is a BUS WITH SEATING FOR NINE OR MORE INCLUDING THE DRIVER.

(36) Unit	Carrier Name	Address

(37) City	State	Zip	GVWR / GCWR	0 - 10K lbs. / 10,001 - 26K lbs. / 26K+ lbs.	Axle Qty.	Cargo Body	Vehicle Use: Interstate Commerce / Intrastate Commerce / Other Non-Commercial / Government

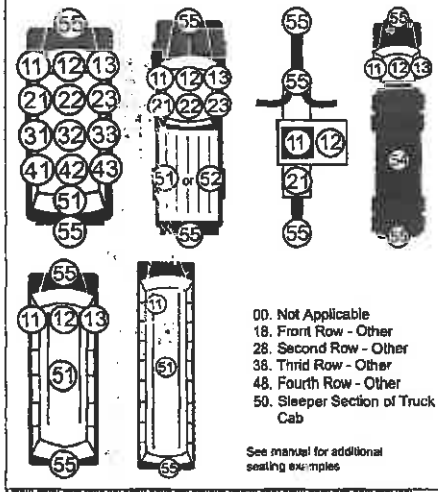
(38) U.S. DOT Number	NASI Report Number	Placard Number	Haz. Mat. Class	Haz. Mat. Involved (Yes / No)	Haz. Mat. Release (Yes / No)
	OK				

(39) Unit	Carrier Name	Address

(40) City	State	Zip	GVWR / GCWR	0 - 10K lbs. / 10,001 - 26K lbs. / 26K+ lbs.	Axle Qty.	Cargo Body	Vehicle Use: Interstate Commerce / Intrastate Commerce / Other Non-Commercial / Government

(41) U.S. DOT Number	NASI Report Number	Placard Number	Haz. Mat. Class	Haz. Mat. Involved (Yes / No)	Haz. Mat. Release (Yes / No)
	OK				

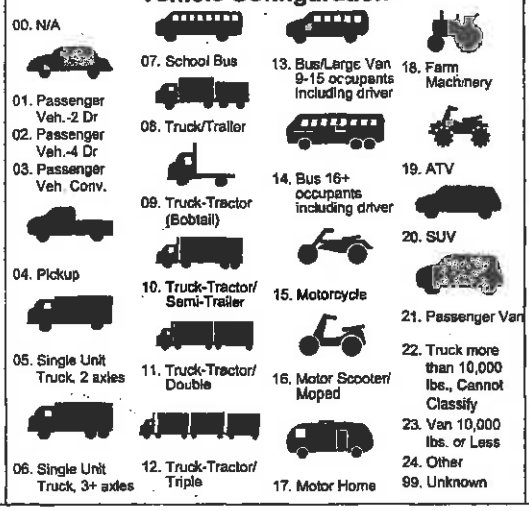
Position in Vehicle



00. Not Applicable
18. Front Row - Other
28. Second Row - Other
38. Third Row - Other
48. Fourth Row - Other
50. Sleeper Section of Truck Cab

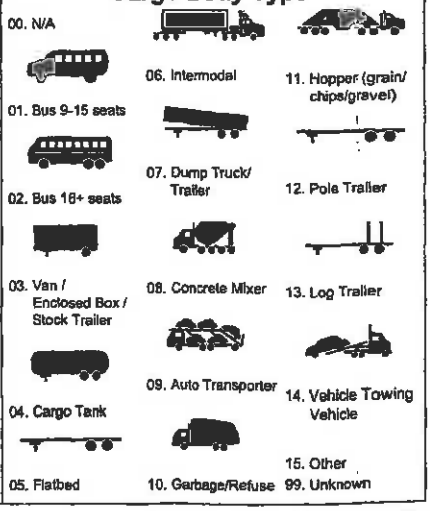
See manual for additional seating examples

Vehicle Configuration



00. N/A
01. Passenger Veh.-2 Dr
02. Passenger Veh.-4 Dr
03. Passenger Veh. Conv.
04. Pickup
05. Single Unit Truck, 2 axles
06. Single Unit Truck, 3+ axles
07. School Bus
08. Truck/Trailer
09. Truck-Tractor (Bobtail)
10. Truck-Tractor/ Semi-Trailer
11. Truck-Tractor/ Double
12. Truck-Tractor/ Triple
13. Bus/Large Van 9-15 occupants including driver
14. Bus 16+ occupants including driver
15. Motorcycle
16. Motor Scooter/ Moped
17. Motor Home
18. Farm Machinery
19. ATV
20. SUV
21. Passenger Van
22. Truck more than 10,000 lbs., Cannot Classify
23. Van 10,000 lbs. or Less
24. Other
99. Unknown

Cargo Body Type



00. N/A
01. Bus 9-15 seats
02. Bus 16+ seats
03. Van / Enclosed Box / Stock Trailer
04. Cargo Tank
05. Flatbed
06. Intermodal
07. Dump Truck/ Trailer
08. Concrete Mixer
09. Auto Transporter
10. Garbage/Refuse
11. Hopper (grain/ chips/gravel)
12. Pole Trailer
13. Log Trailer
14. Vehicle Towing Vehicle
15. Other
99. Unknown

Case Number 2013-05539

OFFICIAL OKLAHOMA TRAFFIC COLLISION REPORT

	Unit	Total Lanes In Roadway	Legal Speed
This unit will correspond to 'Unit 1'	01	02	40
This unit will correspond to 'Unit 2'	02	02	40

Pedestrian / Pedalcyclist Only

Actions Prior to Collision	Location at Time of Collision	Safety Equip.	Unit Number of Vehicle Striking

Was the collision in or near a construction, maintenance or utility work zone? (If yes, complete this section) Yes ☐ No ☒

Type of Work Zone
1 Lane Closure
2 Lane Shift/Crossover
3 Work on Shoulder or Median
4 Intermittent or Moving Work
9 Unknown

Location of the Work Zone Collision
1 Before the First Work Zone Warning Sign
2 Advance Warning Area
3 Transition Area
4 Activity Area
5 Termination Area
9 Unknown

Workers Present Yes ☐ No ☐ Unknown ☐

Light 1
1 Daylight
2 Dark-Not Lighted
3 Dark-Lighted
4 Dawn
5 Dusk
6 Dark-Unknown Lighting
7 Other
9 Unknown

Weather 01
01 Clear
02 Fog/Smog/Smoke
03 Cloudy
04 Rain
05 Snow
06 Sleet/Hail (Freezing Rain/Drizzle)
07 Severe Crosswind
08 Blowing Snow
09 Blowing Sand, Soil, Dirt
10 Other
99 Unknown

Locality 1
1 Residential
2 Business
3 Industrial
4 School
5 Not Built-up
6 Mixed Use
7 Other
9 Unknown

Type of Intersection 0
0 Not an Intersection
2 Y-Intersection
3 T-Intersection
4 Four-Way Intersection
5 Five-Point or More
6 Intersection as Part of Interchange
7 Traffic Circle
8 Roundabout
9 Unknown

Incident Type 00
00 Not an Incident
51 Private Property
52 Deliberate Intent
53 Medical Condition
54 Legal Intervention
55 Suicide
57 Drowning
58 Other

Location of First Harmful Event 01
01 On Roadway
02 Shoulder
03 Median
04 Roadside
05 Gore
06 Separator
07 Parking Lane/Zone
08 Off Roadway, Location Unknown
09 Outside Right-of Way
10 Other
99 Unknown

What Vehicle Was Going to Do	Unit 1	Unit 2
	01	01

00 Not Applicable
01 Go Ahead
02 Turn Left
03 Turn Right
04 Make "U" Turn
05 Stop
06 Slow for Cause
07 Start from Park/Stop
08 Change Lanes
09 Overtake
10 Pass
11 Back
12 Remain Stopped
13 Remain Parked
14 Enter/Merge in Traffic
15 Negotiate a Curve
16 Park
17 Other
99 Unknown

What Vehicle Did	Unit 1	Unit 2
	01	01

00 Not Applicable
01 Went Ahead
02 Turned Left
03 Turned Right
04 Entered "U" Turn
05 Stopped
06 Slowed
07 Started From Park/Stop
08 Entered Other Lane
09 Overtaking
10 Passing
11 Backed
12 Remained Stopped
13 Remained Parked
14 Entered/Merged
15 Departed Rdwy-Right
16 Departed Rdwy-Left
17 Swerved Right
18 Swerved Left
19 Parked
20 Other
99 Unknown

Visibility Obscured by	Unit 1	Unit 2
	00	00

00 Not Applicable
01 Trees
02 Embankment
03 Building
04 Signs
05 Parked Vehicles
06 High Weeds
07 Fences
08 Shrubbery
09 Ice, Snow or Frost on Windows
10 Smoke
11 Fog
12 Dust
13 Rain
14 Sun
15 Other
99 Unknown

Driver Distracted by	Unit 1	Unit 2
	0	0

0 Not Applicable/None
1 Electronic Communication Devices
2 Other Electronic Device
3 Other Inside Vehicle
4 Other Outside Vehicle
9 Unknown

Underride/ Override	Unit 1	Unit 2

0 Not Applicable
1 No Underride or Override
2 Underride, Compartment Intrusion
3 Underride, No Compartment Intrusion
4 Underride, Compartment Intrusion Unknown
5 Override, Motor Vehicle in Transport
6 Override, Other Motor Vehicle
9 Unknown

Traffic Control	Unit 1	Unit 2
	00	00

00 No Control
01 Stop Sign
02 Traffic Signal
03 Flashing Traffic Signal
04 School Zone Signs
05 Yield Sign
06 Warning Sign
07 Railroad Advance Warning Sign
08 Railroad Cross Bucks
09 Railroad Gates
10 Railroad Signal
11 No Passing Zone
12 Person (including flagger, law enforcement, crossing guard, etc.)
13 Abnormal Control
14 Other
99 Unknown

Road Surface Conditions	Unit 1	Unit 2
	01	01

01 Dry
02 Wet
03 Ice/Frost
04 Snow
05 Mud, Dirt, Gravel
06 Slush
07 Water (standing, moving)
08 Sand
09 Oil
10 Other
99 Unknown

Road Character

Grade	Unit 1	Unit 2
	1	1

1 Level
2 Hillcrest
3 Uphill
4 Downhill
5 Sag (bottom)

Road Alignment	Unit 1	Unit 2
	1	1

1 Straight
2 Curve - Left
3 Curve - Right

Road Surface Type	Unit 1	Unit 2
	2	2

1 Concrete
2 Asphalt
3 Gravel
4 Dirt
5 Brick
6 Other
9 Unknown

Trafficway	Unit 1	Unit 2
	3	3

0 Not Applicable
1 One Way
2 Two-Way - Not Divided
3 Two-Way - Divided
4 Two-Way - Divided - Positive Median Barrier
5 Turn Lane
6 Ramp / Loop
7 Driveway
8 Alley / Parking Lot
9 Unknown

Vehicle Removal	Unit 1	Unit 2
	4	4

0 Not Applicable
1 Towed Due to Vehicle Damage
2 Towed For Reasons Other Than Damage
3 Remained at Scene
4 Driven from Scene
9 Unknown

Vehicle Condition	Unit 1	Unit 2
	01	01

00 Not Applicable
01 Apparently Normal
02 Brakes
03 Headlights
04 Steering
05 Tail Lights
06 Brake Lights
07 Tires/Wheels
08 Suspension
09 Signal lights
10 Windows
11 Truck Coupling/Trailer Hitch/Safety Chains
12 Mirrors 15 Other
13 Wipers 99 Unknown
14 Power Train

Special Function of Vehicle	Unit 1	Unit 2
	00	00

00 Not Applicable
01 School Bus
02 Transit Bus
03 Intercity Bus
04 Charter Bus
05 Other Bus
06 Military
07 OHP
08 Other Police
09 Other Law Enforcement
10 Ambulance
11 Fire Truck
12 Public Owned Vehicle
13 Highway Equipment
14 Special Mobilized Machine
15 Other 99 Unknown

Emergency Vehicle Responding to an Emergency	Unit 1	Unit 2
	0	0

0 N/A 2 No
1 Yes 9 Unknown

Unsafe / Unlawful Contributing Factors	Unit 1	Unit 2
	87	98

FAILED TO YIELD
01 From Stop Sign
02 From Yield Sign
03 Private Drive
04 County Road at Through Highway
05 From Signal Light
06 From Alley
07 To Pedestrian
08 To Vehicle on Right
09 To Vehicle in Intersection
10 To Emergency Vehicles
12 Other

FOLLOWED TOO CLOSELY
13 Human Element
14 Traffic Condition
15 Weather Condition

UNSAFE SPEED
16 Driver's Ability (Aged)
17 Inexperienced Driver - Young
18 Exceeding Legal Limit
19 For Traffic Conditions
20 For Type of Roadway (Gravel, Dirt, etc.)
21 For Ice or Snow on Roadway
22 Rain or Wet Roadway
23 Wind
24 Other Weather Conditions
25 Vehicle Condition
26 View Obstruction
27 On Curve/Turn
28 Impeding Traffic
29 Other

IMPROPER TURN
30 From Wrong Lane
31 From Direct Course
32 Right
33 Left
34 Turn About/U-Turn
35 To Enter Private Drive
36 In Front of Oncoming Traffic
37 Other
38 **CHANGED LANES UNSAFELY**
39 **STOPPED IN TRAFFIC LANE**

FAILED TO STOP
40 For Stop Sign
41 For Traffic Signal
42 For School Bus
43 For Railroad Gates/ Signal
44 For Officer/Flagman
45 At Sidewalk/Stopline
46 Other

UNSAFE VEHICLE
47 Brakes
48 Steering
49 Tires
50 Suspension
51 Headlights
52 Tail Lights
53 Stop Lights
54 Wheel
55 Exhaust System
56 Windshield Wipers
57 Other Mechanical Defects

LEFT OF CENTER
58 In Meeting
59 No Passing Zone (Unmarked)
60 Marked Zone
61 Other

IMPROPER OVERTAKING
62 In Marked Zone
63 On Hill/Curve
64 At Intersection
65 Without Sufficient Clearance
66 Other

IMPROPER PARKING
67 On Roadway
68 Where Prohibited
69 Other

INATTENTION
70 Distracted by Passenger in Vehicle
71 Other Distraction Inside Vehicle
72 Distraction From Outside Vehicle
73 Other

WRONG WAY
74 On One Way
75 On Exit Ramp
76 On Entrance Ramp
77 Other

IMPROPER START FROM
78 Parked Position
79 Other
80 **ALCOHOL-DUI/DWI**
81 **DRUG-DUI**

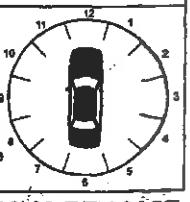
OTHER IMPROPER ACT/ MOVEMENT
82 Failed to Signal
83 Disregarded Warning Signal
84 Improper Use of Lane
85 Improper Backing
86 Apparently Sleepy
87 Failed to Secure Load
88 Other/Unknown

UNKN./NO IMPROPER ACT
89 Deer in Roadway
90 Animal in Roadway
91 Domestic Animal in Rdwy
92 Avoiding Other Vehicle
93 Avoiding Pedestrian
94 Object/Debris in Roadway
95 Defect in Roadway
96 Abnormal Traffic Control
97 Improper Bicyclist Action
98 **NO IMPROPER ACTION BY DRIVER**
99 **PEDESTRIAN ACTION**

Point of First Contact on Vehicle	Unit 1	Unit 2
	00	11

Most Damaged Area	Unit 1	Unit 2
	00	11

00 Not Applicable 14 Undercarriage
13 Top 99 Unknown



Case Number 2013-05539

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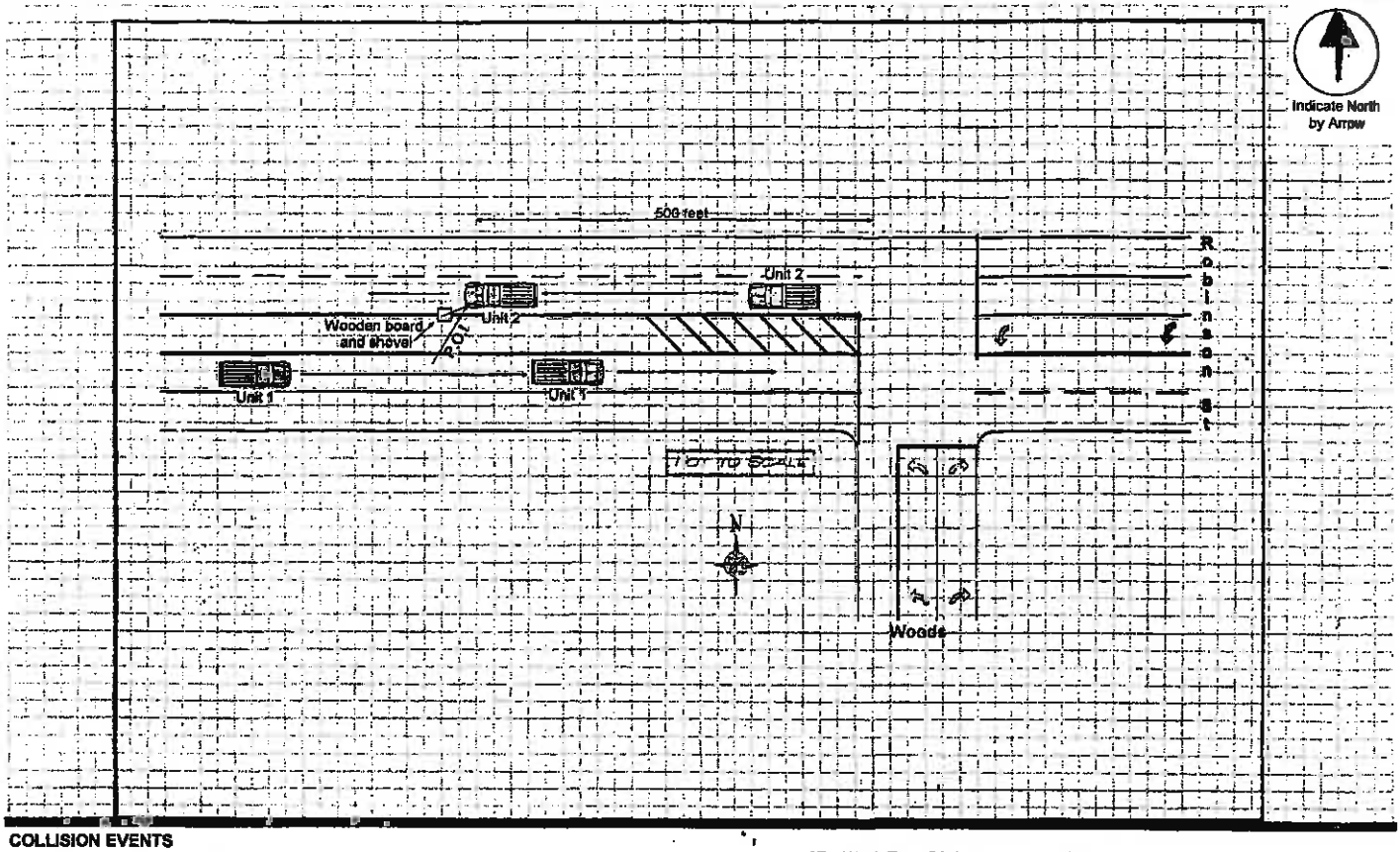
Latitude ____.____ N Longitude ____.____ W Railroad Crossing Number ____ Roadway Orientation

Unit Number 01 N E S W E Unit Number 02 N E S W W



COLLISION EVENTS

Unit	First Event	Second Event	Third Event	Fourth Event	Most Harmful Event	First Harmful Event for the Entire Collision
01	34	00	00	00	34	36
02	36	00	00	00	36	

00 Not Applicable
10 Overturn/Rollover
11 Fire/Explosion
12 Immersion
13 Jackknife
14 Cargo/Equipment Loss or Shift
15 Equipment Failure (Blown Tire, Brake Failure, etc.)
16 Separation of Units
17 Departed Road Right
18 Departed Road Left
19 Cross Median/Centerline
20 Downhill Runaway
21 Fell/Jumped From Motor Vehicle
22 Thrown Or Falling Object
23 Other Non-Collision

PERSON, MOTOR VEHICLE, OR NON-FIXED OBJECT:

30 Pedestrian
31 Pedal Cycle
32 Railway Vehicle (train, engine)
33 Animal
34 Motor Vehicle in Transport
35 Parked Motor Vehicle
36 Struck by Falling, Shifting Cargo or Anything Set in Motion by Motor Vehicle
37 Work Zone/Maintenance Equipment
38 Other Non-Fixed Object

FIXED OBJECT:

40 Barrier (Cable)
41 Barrier (Concrete)
42 Barrier (Other)
43 Fence Pole
44 Fence
45 Traffic Signal Support
46 Traffic Sign Support
47 Utility Pole/Light Support
48 Other Post/Pole/Support
49 Guardrail/Guardrail Face
50 Guardrail End
51 Culvert
52 Curb
53 Island
54 Sand Barrels
55 Impact Attenuator/ Crash Cushion
56 Pavement Drop-Off
57 Ditch
58 Embankment
59 Tree (Standing)
60 Dividing Strip
61 Retaining Wall
62 Bridge Abutment
63 Bridge Pier or Support
64 Bridge Rail
65 Bridge Post
66 Bridge Curb
67 Bridge Super Structure (Beams)
68 Bridge Overhead Structure
69 Delineator
70 Mailbox
71 Other Fixed Object
72 Other Highway Structure
73 Ground
99 Unknown

Remarks

UNIT 2 WAS TRAVELING WESTBOUND. UNIT 1 WAS HEADING EASTBOUND AS THE TWO UNITS PAST SOME TOOLS FELL OUT OF THE BED OF UNIT 1. THE ITEMS STRUCK UNIT 2 AT THAT TIME. THE ITEMS CAUSED DAMAGE TO UNIT 2. UNIT 1 STATED THAT THE WIND BLEW THE ITEMS OUT OF THE BED AND HE THOUGHT THEY WERE TIED DOWN.

This report is based on the officer's investigation of this collision. This report may contain the opinion of the officer.

DPS: 0192-04 REV 0107