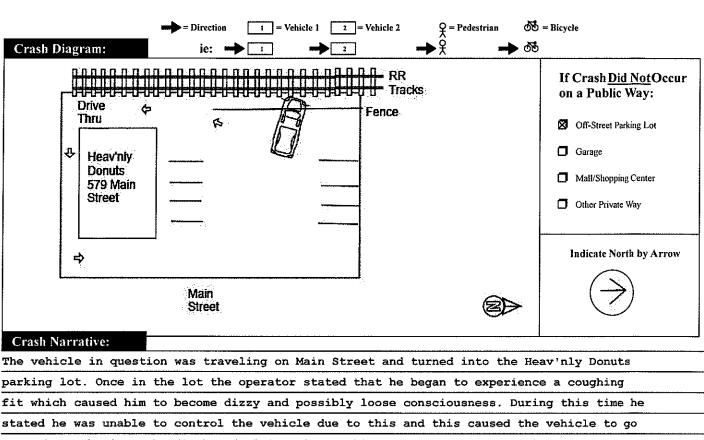
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The vehicle in question was traveling on Main Street and turned into the Heav'nly Donuts parking lot. Once in the lot the operator stated that he began to experience a coughing fit which caused him to become dizzy and possibly loose consciousness. During this time he stated he was unable to control the vehicle due to this and this caused the vehicle to go over the curb, into the ditch and ultimately crashing through a plastic white fence and coming to rest. When speaking with the operator he stated that he was not feeling well and was experiencing numbness. He was transported by Action Paramedics to Lahey Hospital. No airbags were deployed. No injuries were reported from the crash. The vehicle was towed by Cains Towing. Immediate Threat to be filed, see attached supplemental report.

Name (Last, First, Middle)		Address			Phe	one #		Statement
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Property Damage:								
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Address			City			_ St Zip_		
US DOT #:	State Number		_ Issuing State	MC/MX	/ICC #:			
Interstate 43 Cargo Body Ty	pe Code	GVWR/GCWR	45			hvern verteral		
Trailer Reg #:	Reg Type	Reg State	Reg Year	Trai	iler Length	46		
Hazmat Information:								
Placard Material 1 digit #	Material Name			_Material 4 dig	git #	Release	code	49

Patrol Officer Michael R DiLorenzo

217

Wilmington Police Department

03/17/2025

Department

Witnesses:

#### Wilmington Police Department

SUPPLEMENTAL NARRATIVE FOR PATROL OFFICER BRIAN TAVARES

Page: 1

Ref: 25-79-AC

On Monday, March 17, 2025, I, Officer Tavares, was assigned to the 8:00 AM to 4:00 PM shift in uniformed patrol, in marked cruiser 33 in sector 3. At approximately 9:35 AM, I was dispatched to 579 Main St., Heavenly Donuts, for a reported crash involving a vehicle and a fence. Officers Skinner and DiLorenzo also responded.

Upon arrival, I observed a black Ford Ranger with NH registration 5522210 positioned on an embankment atop a broken white plastic fence. The operator, later identified as David Amaral, was standing outside with the reporting party and property owner, Stephen Cain, along with Officer DiLorenzo. Officer Skinner arrived shortly after. As I arrived, Officer DiLorenzo requested Fire and EMS to evaluate David.

While Officers Skinner and DiLorenzo investigated the crash scene, I spoke with David to determine the events leading up to the crash and his condition afterward. David stated that he was driving into the parking lot, traveling westbound, when he experienced a coughing fit that caused him to lose consciousness. He awoke to find himself on top of the white fence in a ditch. It should be noted that at the time of the crash, the business was open, with multiple customers and vehicles moving throughout the parking lot.

I inquired about David's medical history, asking if he had experienced similar incidents before. David confirmed that since undergoing open-heart surgery a year ago, he has had periodic coughing attacks that can become so intense they cause dizziness and, at times, loss of consciousness. When asked if he was taking any medications, narcotics, or alcohol, David stated that he was on five different medications related to his heart condition and had last consumed alcohol on Saturday. I did not observe any signs of impairment, such as slurred speech, the odor of an alcoholic beverage emanating from his breath, bloodshot glassy eyes, or being unsteady on his feet.

The Wilmington Fire Department and Action Ambulance Paramedics arrived on the scene, evaluated David, and transported him to Lahey. Based on these findings, I am requesting an immediate threat suspension of David's driver's license through the Massachusetts RMV.

Officer Tavares #206

Wilmington Police Dept.

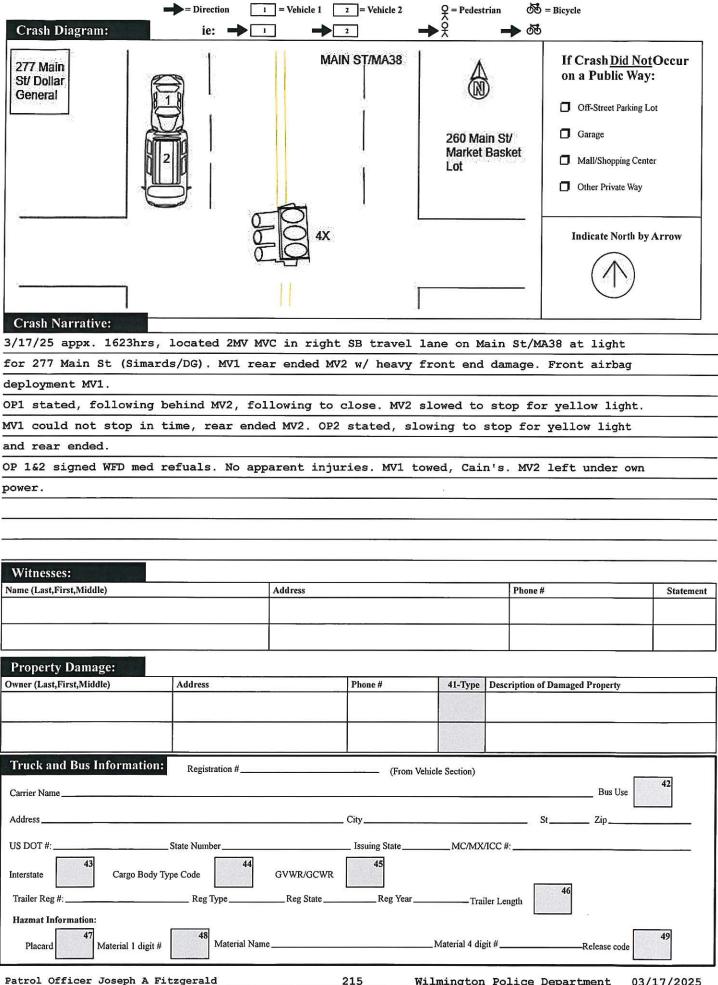
Attachments for 25-79-AC	
Description	Туре
IMMEDIATE THREAT	PDF
Attachment#: 7EDCDF4B9BB8480D8C72FF8E69A6749E	

# Wilmington Police Department Images Associated with 25-79-AC





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Patrol Officer Joseph A Fitzgerald

Wilmington Police Department

03/17/2025

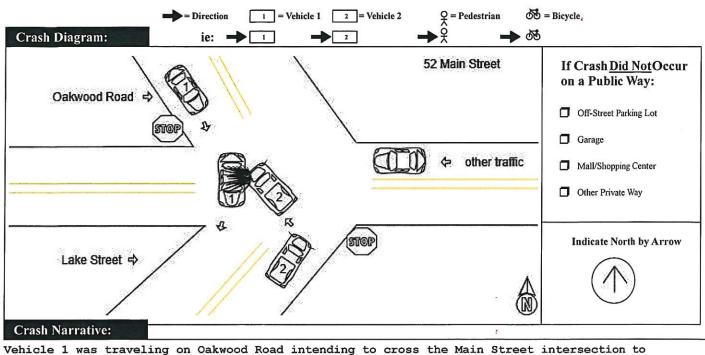
# Wilmington Police Department Images Associated with 25-80-AC







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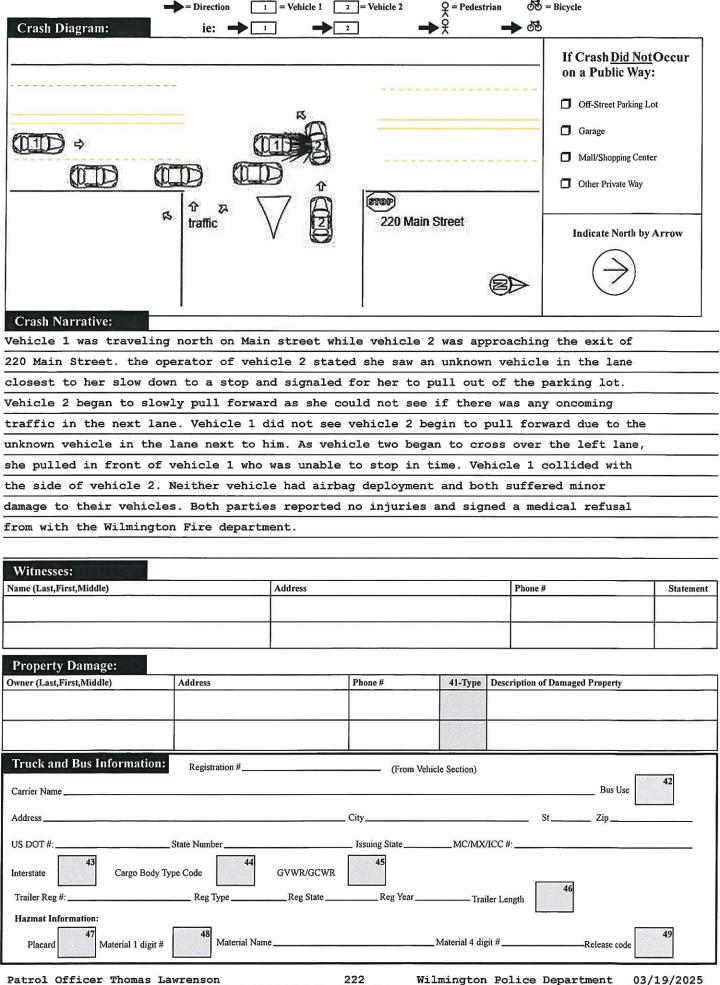


Vehicle 1 was traveling on Oakwood Road intending to cross the Main Street intersection to continue onto Lake Street. Vehicle 2 reach the end of Lake Street intending to turn left onto Main Street. The operator of vehicle 1 stated she noticed a vehicle traveling north on Main street slow down to a stop and signaling her to pass which is when she attempted to cross the intersection. Vehicle two stated he saw that the way on Main street was clear and attempted to pull out himself. Both operators stated they did not see each other when they attempted to pull out onto the intersection. Vehicle two collided its front left tire and bumper to the left side of vehicle one in the middle of the intersection. Neither vehicle suffered airbag deployment and both operators reported no injuries from the crash. Both vehicles had to be towed by Forest Towing.

Witnesses:								
Name (Last,First,Middle)		Address			P	hone #		Statement
			067					
Property Damage:								
Owner (Last,First,Middle)	Address		Phone #	41-Type	Descrip	tion of Damage	d Property	
Truck and Bus Information:	Registration #		(2.011)	icle Section)			Bus Use	42
Address			City			St	Zip	
US DOT #:S	State Number		Issuing State	MC/MX/	ICC #: _			
Interstate 43 Cargo Body Typ	e Code	GVWR/GCWR	45			46		
Trailer Reg #:	Reg Type	Reg State	Reg Year	———Trai	ler Lengtl	h 46		
Hazmat Information:								
Placard 47 Material 1 digit #	48 Material Name			_Material 4 dig	rit #		-Release code	49

Attachments for 25-81-AC	
Description	Туре
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Attachment#: 421CCB7807D24E07BC335AEB7599D263	

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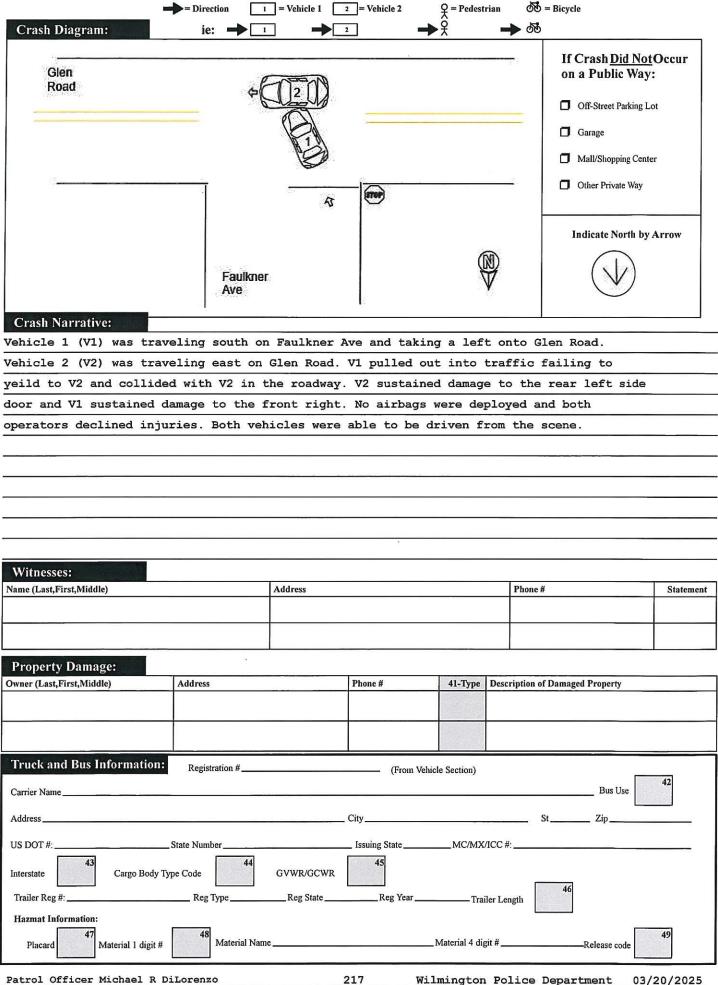


Patrol Officer Thomas Lawrenson

Wilmington Police Department

Attachments for 25-82-AC	
Description	Туре
DASH CAM FOOTAGE	MOV
Attachment#: 789DEC26D1F44A58B8A7E8B0E51167B8	

	Pol	ice Use Only		Comi	monwea	lth o	of Mass	ach	lus	etts	\$			RM	V Doc	cument Nu	olga gul tikuri ili k	
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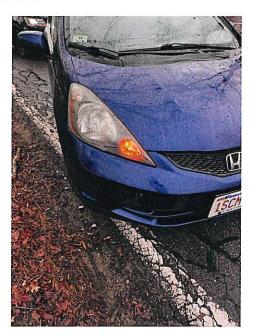
Patrol Officer Michael R DiLorenzo

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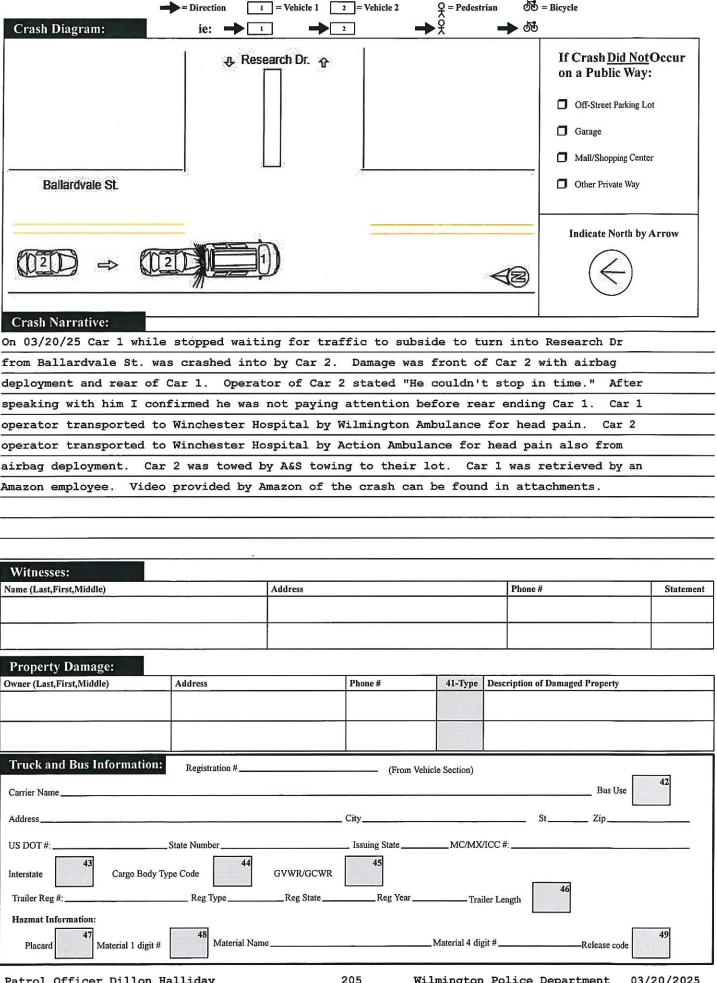
03/20/2025

# Wilmington Police Department Images Associated with 25-83-AC





	Pol	ice Use Only		C	ommo	nwea	lth (	of Mass	ach	ıus	etts	Š			RM	V Doc	cument Number	
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	City <b>MALDE</b>			<b>MA</b> Zip 0			City_	SEATTLE	E		Sugar	33					8109-5210	-
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Patrol Officer Dillon Halliday

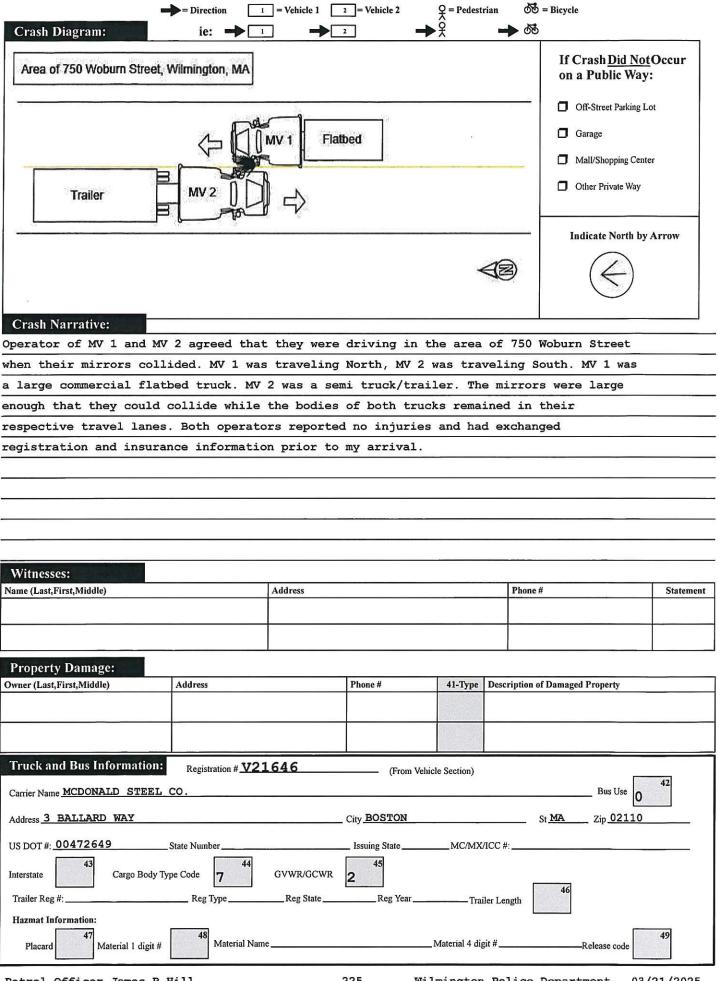
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Wilmington Police Department

03/20/2025

Attachments for 25-84-AC	
Description	Туре
AMAZON VAN VIDEO	MP4
Attachment#: 60982F0C2DF645D6A2D14107C495482D	

Date of Create   Trace of Crash   Date of Crash   Date of Control   Seeker   Land   30   Seeker   Se	Police Use Only	Comp	nonwealth	of Massac	chuse	etts	}	0.000 0.000 0.000 0.000	RM	IV Doci	ument Number	
AT INTERSECTION:    LOCATION   Note at INTERSECTION:	1 1	,	Motor Vel	nicle Cras	h N		1	المراد		30	State Police Local Police MBTA Police	
Routed Direction  Name of Readway/Street  Name of Intersection Readway/Street  Alors at Intersection with Alors at Intersection Readway/Street  Alors at Intersection with Alors at Intersection Readway/Street  Feet NS EW of Noted Intersecting Readway/Street  Feet NS EW of Note Intersect Only 12 25 - 85 - AC  Contains SEW of Note Intersection Readway/Street  Feet NS EW of Note Intersect Only 25 - 85 - AC  Owner RYDER TRUCK RENTAL LIT  South Search Feet Noted Intersection Readway/Street  Feet NS EW of Note Intersect Only 25 - 85 - AC  Owner RYDER TRUCK RENTAL LIT  South Search Feet Noted Intersection Readway/Street  Feet NS EW of Note Intersection Readway/Street  Feet NS EW of Note Intersection Readway/Street  Feet NS EW of Note Intersection Readway/Street  Feet NS EW	1 1	iriig con	Police	Report	2		1.	Lan			Campus Police Other:	ă
Routed Direction Name of Intersection State Routed N	AT INTERSECTI	ON:	< LOC	ATION >			ТОИ	'AT IN	TER	SEC	TION:	
Route   Direction   Name of Roadway/Sheet   All   Route   Direction   All   Route   Roadway/Sheet   Route   Feet   N.   E.   W of the Route   Roadway/Sheet   Route   Feet   N.   E.   W of the Route   Roadway/Sheet   Route   Feet   N.   E.   W of the Route   Roadway/Sheet   Route   Feet   N.   E.   W of the Route   Roadway/Sheet   Roadway/Sheet   Route   Roadway/Sheet   Route   Roadway/Sheet   Roadway/Sheet   Route   Roadway/Sheet   Ro					75	Λ	TaT (	DIIDK	r en			2
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See March   Lic Class   Lic Restrictions   Lic Class	License #	DOB/Age	Reg	# <u>V21646</u>			Reg	Туре <u>С</u> С	2	Re	eg State <b>MA</b>	
Operator FUENTES MAURICIO S  Address 32 NELSON ST  Address 5000 WINDWARD PRWY  City LAWRENCE State MA Ztp 01841-4018 City LAWRENCE State MA Ztp 01841-4018 City LAWRENCE State MA Ztp 01841-4018 City Lawrence Company UTICA MUTUAL INSURANCE CO  Vehicle Travel Direction: S E W  Responding to Emergency? 2  Event Sequence 23 23 123 23 23 23 23 23 23 23 23 23 23 23 23 2	Sex.M Lic. Class D 19 Lic. Re	estrictions 1 20 CI	DL Veh	Year 2020	Velı M	ake <u>F</u>	rei	ghtl	ine:	<b>C</b> Veh	Config 6 21	1
Address 32 NELSON ST  Address 4000 WINDWARD PRWY  City LAWRENCE  State MA Zip 01841-4018  Insurance Company UTICA MOTUAL INSURANCE CO  Vehicle Action Prior to Crash  [1 22]  Damaged Area Code [8 27] 27] 27]  Vehicle Action Prior to Crash  [1 24]  Wehicle Action Prior to Crash  Driver Contributing Code [19 25]  Sup, Alcoholt [2 31] Sup, Drug [2 32]  Towed from secret [2 33]  Wehicle Action Prior to Crash  Please fill out for operator and all occupants involved  Address 29 In Make Work Prior to Crash  Figure 19 19 Lic. Restrictions M 20 CDL T Complete the Vulnerable User section.  Reg # P1872HY  Wehicle Action Prior to Crash  Well Year 2022 Veh Make VOIVO Veh Config. 10 31]  Owner SHAW TRANSPORT INC  Address 29 In Reg Type AP  Well Year 2022 Veh Make VOIVO Veh Config. 10 31]  Owner SHAW TRANSPORT INC  Address PO BOX 2128  City DALTON  State GA Zip 30722-2128 1  Damaged Area Code [8 27] 27] 27]  Wehicle Action Prior to Crash  Wehicle Action Prior to Crash  Well Year 2022 Veh Make VOIVO Veh Config. 10 31]  Owner SHAW TRANSPORT INC  Address PO BOX 2128  City DALTON  State GA Zip 30722-2128 1  Damaged Area Code [8 27] 27] 27]  Wehicle Action Prior to Crash  Well Carlos Prior	Operator FUENTES, MAURI		Owi	er RYDER T	RUCK	RE	NTA	L LI	1			_
Insurance Company UTICA MUTUAL INSURANCE CO Vehicle Travel Direction: SEW Responding to Emergency? 2 Citation # (If Issued)  Nost Hamful Event  1 24  Most Hamful Event  1 24  BAC Test Result: 38  Susp. Alcohol. 2 31 Susp. Drug. 2 32  1 Viol. 3: Ch/Sec/Sub  Viol. 4: Ch/Sec/Sub  Driver Distracted by 0 26  Nose Above  Please fill out for operator and all occupants involved Address Po Box 2128  Citation # (If Issued)  Driver Distracted by 0 26  Towed from scene? 2 33  Damaged Area Code 6 27 27 27  Test Status: 128  Type of Test: 30  Susp. Alcohol. 2 31 Susp. Drug. 2 32  Towed from scene? 2 33  Towed from scene? 3 30 722 2 2128  Towed from scene? 2 33  Towed from scene? 3 33  Towed from scene? 2 33  Towed from scene? 3 33  Towed	Address 32 NELSON ST	1.61221		ress 6000 WI	NDWA	RD	PKV	Y Y		Mis	ddle	_
Vehicle Travel Direction:   S   E   W   Responding to Emergency?   2   Event Sequence   23   23   23   23   23   23   23   2	City <b>LAWRENCE</b> State	MA Zip 01841	-4018 City	ALPHARET	ľA			State <b>G</b>	<b>A</b> :	Zip <b>30</b>	005-4181	L
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DOUNGE   Sex   S	Viol. 3: Ch/Sec/Sub ———— V	iol. 4: Ch/Sec/Sub	Driv	er Distracted by	26	2	6				Co Colombia	'  -
Please Solect One of the Following:   Vehicle 21 #Occupants   Hit/Run   Moped   Vulnerable User   Complete the Vulnerable User section.	•	•			Seat	Safety	Airbag	37 38 Eject Traj	39 Injury	Transp.		7
Please Solvert One of the Following:    Vehicle 21				DOB/Age S			ft-		1	1	Medical Facility	
License:  S DB/Age.  Reg # P1872HY  Reg Type AP  Reg State TN  Veh Year 2022 Veh Make VOLVO  Veh Config.  Owner SHAW TRANSPORT INC  Last  First  Address 291 RUSSELLS MILLS RD  City S DARTMOUTH  State MA Zip 02748  City S DARTMOUTH  State MA Zip 02748  City S DARTMOUTH  State MA Zip 02748  City DALTON  State GA Zip 30722-2128  Test Status:  1 28  Type of Test:  Owner SHAW TRANSPORT INC  Last  First  Middle  Address PO BOX 2128  City DALTON  State GA Zip 30722-2128  1 Damaged Area Code:  1 22  Vehicle Action Prior to Crash  Wehicle Travel Direction:  N E W Responding to Emergency? 2  Event Sequence  1 23 23 23 23  Test Status:  Type of Test:  Owner SHAW TRANSPORT INC  Last  First  Middle  Address PO BOX 2128  City DALTON  State GA Zip 30722-2128  1 Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Last  First  Middle  Address PO BOX 2128  City DALTON  State GA Zip 30722-2128  1 Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Last  First  Middle  Address PO BOX 2128  City DALTON  State GA Zip 30722-2128  1 Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Last  First  Middle  Address PO BOX 2128  City DALTON  State GA Zip 30722-2128  1 Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged	· · · · · · · · · · · · · · · · · · ·				<del>\</del>				-			$\dashv$
License:  S DB/Age.  Reg # P1872HY  Reg Type AP  Reg State TN  Veh Year 2022 Veh Make VOLVO  Veh Config.  Owner SHAW TRANSPORT INC  Last  First  Address 291 RUSSELLS MILLS RD  City S DARTMOUTH  State MA Zip 02748  City S DARTMOUTH  State MA Zip 02748  City S DARTMOUTH  State MA Zip 02748  City DALTON  State GA Zip 30722-2128  Test Status:  1 28  Type of Test:  Owner SHAW TRANSPORT INC  Last  First  Middle  Address PO BOX 2128  City DALTON  State GA Zip 30722-2128  1 Damaged Area Code:  1 22  Vehicle Action Prior to Crash  Wehicle Travel Direction:  N E W Responding to Emergency? 2  Event Sequence  1 23 23 23 23  Test Status:  Type of Test:  Owner SHAW TRANSPORT INC  Last  First  Middle  Address PO BOX 2128  City DALTON  State GA Zip 30722-2128  1 Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Last  First  Middle  Address PO BOX 2128  City DALTON  State GA Zip 30722-2128  1 Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Last  First  Middle  Address PO BOX 2128  City DALTON  State GA Zip 30722-2128  1 Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Last  First  Middle  Address PO BOX 2128  City DALTON  State GA Zip 30722-2128  1 Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged		:			_							4
License:  S DB/Age.  Reg # P1872HY  Reg Type AP  Reg State TN  Veh Year 2022 Veh Make VOLVO  Veh Config.  Owner SHAW TRANSPORT INC  Last  First  Address 291 RUSSELLS MILLS RD  City S DARTMOUTH  State MA Zip 02748  City S DARTMOUTH  State MA Zip 02748  City S DARTMOUTH  State MA Zip 02748  City DALTON  State GA Zip 30722-2128  Test Status:  1 28  Type of Test:  Owner SHAW TRANSPORT INC  Last  First  Middle  Address PO BOX 2128  City DALTON  State GA Zip 30722-2128  1 Damaged Area Code:  1 22  Vehicle Action Prior to Crash  Wehicle Travel Direction:  N E W Responding to Emergency? 2  Event Sequence  1 23 23 23 23  Test Status:  Type of Test:  Owner SHAW TRANSPORT INC  Last  First  Middle  Address PO BOX 2128  City DALTON  State GA Zip 30722-2128  1 Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Last  First  Middle  Address PO BOX 2128  City DALTON  State GA Zip 30722-2128  1 Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Last  First  Middle  Address PO BOX 2128  City DALTON  State GA Zip 30722-2128  1 Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Last  First  Middle  Address PO BOX 2128  City DALTON  State GA Zip 30722-2128  1 Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged Area Code:  8 27 27 27  Type of Test:  Owner SHAW TRANSPORT  Damaged												_
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Sex M Lic. Class A 19 19 Lic. Restrictions M 20 CDL T Endorsement Operator COPPINGER, MICHAEL PAUL Last First Middle Address 291 RUSSELLS MILLS RD Address PO BOX 2128  City S DARTMOUTH State MA Zip 02748  City DALTON State GA Zip 30722-2128  City DALTON State GA Zip 30722-2128  City DALTON State GA Zip 30722-2128  Test Status: 1 28  Type of Test: 0 29  Most Harmful Event 1 24  Most Harmful Event 1 24  Whole Action Prior to Crash 1 30  Type of Test: 0 29  Most Harmful Event 1 24  Not. 1; Ch/Sec/Sub Driver Contributing Code 1 9 25  Viol. 3; Ch/Sec/Sub Viol. 4; Ch/Sec/Sub Driver Distracted by 99 26  Please fill out for operator and all occupants involved Name (Last First Middle)  Address PO BOX 2128  City DALTON State GA Zip 30722-2128  Test Status: 1 28  Type of Test: 0 29  Most Harmful Event 1 24  Driver Contributing Code 1 9 25  Susp. Alcohol: 2 31 Susp. Drug 2 32  Towed from some PO Towed from States Code Medical Facility  Medical Facility  Medical Facility		Occupants Hit/R	tun   Moped	Uulnerable	User C	omplet	te the Vi	ılnerable	User se	ction.		
Lic. Class   Lic. Restrictions   M   CDL T   Endorsement   CDPINGER   MICHAEL PAUL   Endorsement   Copping   Coppi	License S	OB/Age	Reg	# P1872HY			Reg	Гуре А	2	Re	eg State <b>TN</b>	
Operator COPPINGER, MICHAEL PAUL  Address 291 RUSSELLS MILLS RD  Address PO BOX 2128  City S DARTMOUTH State MA Zip 02748  Insurance Company STARR INDEMNITY & LIABIL  Wehicle Travel Direction: NEW Responding to Emergency? 2  Citation # (If Issued)  Most Harmful Event  Driver Contributing Code  Note 1 1 24  Driver Contributing Code  Note 1 2 25  Susp. Alcohol: 2 31  Susp. Drug 2 32  Susp. Alcohol: 2 31  Susp. Drug 2 32  Name (Last First Middle)  Name (Last First Middle)  Address PO BOX 2128  City DALTON  State GA Zip 30722-2128  1 28  Type of Test: 0 29  Driver Contributing Code  1 9 25  Susp. Alcohol: 2 31  Susp. Drug 2 32  Towed from scene? 2 33  Please fill out for operator and all occupants involved  Name (Last First Middle)  Address  DOB/Age  Sex Set Safety Airbog System Status Status Code  DOB/Age Sex Sex Sex System Status Status Code  Medical Facility	Sex. M Lic. Class A Lic. Re	strictions M CD		Year <b>2022</b>	Veh Ma	ake <b>V</b>	OLV	<u> </u>		Veli	Config. 10 21	
Address 291 RUSSELLS MILLS RD  Address PO BOX 2128  City DALTON  State GA Zip 30722-2128 1  Insurance Company STARR INDEMNITY & LIABIL  Vehicle Action Prior to Crash  Vehicle Action Prio	Operator COPPINGER, MIC	HAEL PAUL	Own	er SHAW TR	ANSP	ORT	IN	C				_
resurance Company STARR INDEMNITY & LIABIL  Vehicle Travel Direction: NXEW Responding to Emergency? 2  Event Sequence 1 23 23 23 23 23  For the Status: 1 28  Type of Test: 0 29  Most Harmful Event 1 24  For Contributing Code 1 9 25  For Diver Contributing Code 1 9 25  For Diver Distracted by 1 34 35 36 37 38 39 40  For Please fill out for operator and all occupants involved Name (Last First Middle)  Please fill out for operator and all occupants involved Name (Last First Middle)  Possible Action Prior to Crash 1 22  Event Sequence 1 23 23 23 23  Test Status: 1 28  Type of Test: 0 29  BAC Test Result: 1 30  Susp. Alcohol: 2 31 Susp. Drug: 2 32  Towed from scene? 2 33  Please fill out for operator and all occupants involved Name (Last First Middle)  Possible Action Prior to Crash 1 22  Towed from scene? 2 33  Please fill out for operator and all occupants involved Name (Last First Middle)  Possible Action Prior to Crash 1 22  Towed from scene? 2 33  Medical Facility	Address 291 RUSSELLS MI			ess PO BOX	2128		First			Mid	Idle	L
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Pelicic Travel Direction:   N   X   E   W   Responding to Emergency? 2   Event Sequence   1   23   23   23   23   23   23   23	nsurance Company STARR INDE	MNITY & L	IABIL Vehi	cle Action Prior to Cra	ısh	1	22	Damag	ed Area	Code:	9 10 10 10 10 10 10 10 10 10 10 10 10 10	]
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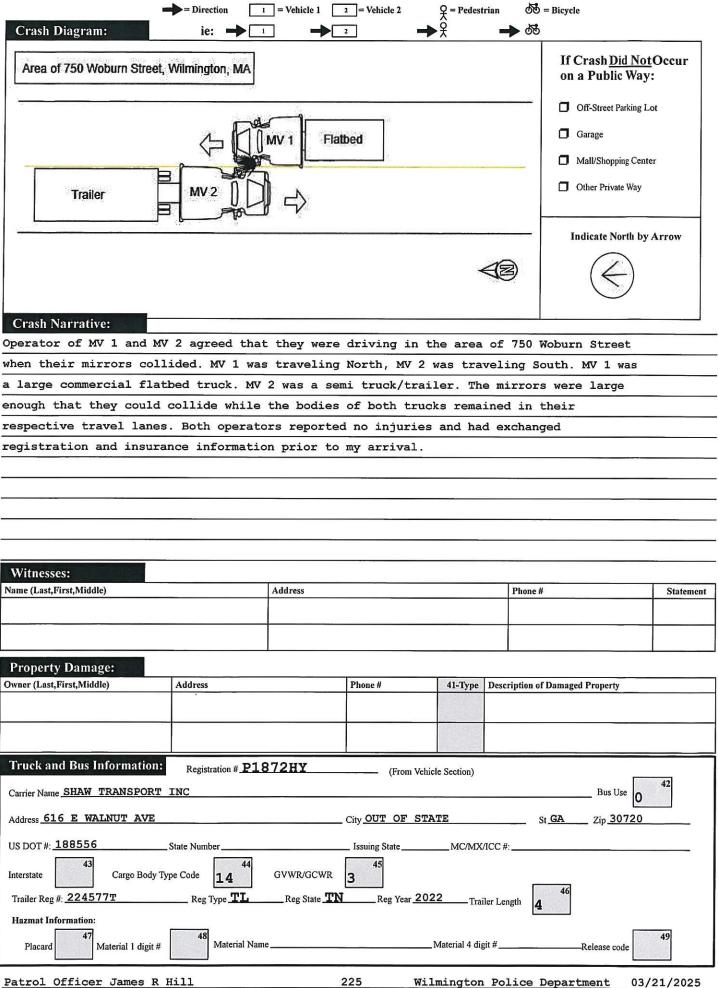


Patrol Officer James R Hill

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Wilmington Police Department

03/21/2025



03/21/2025

### Wilmington Police Department Images Associated with 25-85-AC



