



**OFFICIAL MEDIA RELEASE**  
**KENT COUNTY SHERIFF DEPARTMENT**



**Traffic Crash Supplement**

Incident # 17-226108 Date: 06/01/2017 Time of Incident: 0633 Township: 05 - Byron  
 Type of Incident: Car vs. Bus Accident Location: 7300 Block Division Ave Sw  
 Reporting Officer: Tim VanHouten Assisting Departments: AMR, Cutlerville Fire  
 Release Completed By: Sgt. Sal Vitale

Fire \_\_\_ Ambulance \_\_\_ Helicopter \_\_\_ Other Police Agencies \_\_\_ Utilities etc.

**ALCOHOL Contributing Factor?**  
Y  N  UNK

**Vehicles**

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Y  N  UNK

Veh: 1 Make: Thomas Model: Bus Yr: 2015  
 Driver: Robert Caruso Age: 56  
 City: Wyoming Twp: \_\_\_\_\_ State: MI  
 Injuries: None Seatbelt: Y  N  UNK   
 \_\_\_\_\_ Direction of Travel: S/B  
 Hospital: \_\_\_\_\_ Transport By: \_\_\_\_\_

Veh: 2 Make: Cadillac Model: 4 door Yr: 1995  
 Driver: Ray Anthony Dunbar Age: 50  
 City: Grand Rapids Twp: Gaines State: MI  
 Injuries: Non-life threatening Seatbelt: Y  N  UNK   
 \_\_\_\_\_ Direction of Travel: S/B  
 Hospital: Spectrum/Blodgett Transport By: AMR

Relatives Notified  YES Names Can Be Released  YES

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**Passengers**

Name: Dominic Russell Age: 21  
 City: Cutlerville Twp: \_\_\_\_\_ State: MI  
 Injuries: NONE Seatbelt:   
 Hospital: \_\_\_\_\_ Transport By: \_\_\_\_\_

**Passengers**

Name: \_\_\_\_\_ Age: \_\_\_\_\_  
 City: \_\_\_\_\_ Twp: \_\_\_\_\_ State: \_\_\_\_\_  
 Injuries: \_\_\_\_\_ Seatbelt:   
 Hospital: \_\_\_\_\_ Transport By: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_  
 City: \_\_\_\_\_ Twp: \_\_\_\_\_ State: \_\_\_\_\_  
 Injuries: \_\_\_\_\_ Seatbelt:   
 Hospital: \_\_\_\_\_ Transport By: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_  
 City: \_\_\_\_\_ Twp: \_\_\_\_\_ State: \_\_\_\_\_  
 Injuries: \_\_\_\_\_ Seatbelt:   
 Hospital: \_\_\_\_\_ Transport By: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_  
 City: \_\_\_\_\_ Twp: \_\_\_\_\_ State: \_\_\_\_\_  
 Injuries: \_\_\_\_\_ Seatbelt:   
 Hospital: \_\_\_\_\_ Transport By: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_  
 City: \_\_\_\_\_ Twp: \_\_\_\_\_ State: \_\_\_\_\_  
 Injuries: \_\_\_\_\_ Seatbelt:   
 Hospital: \_\_\_\_\_ Transport By: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_  
 City: \_\_\_\_\_ Twp: \_\_\_\_\_ State: \_\_\_\_\_  
 Injuries: \_\_\_\_\_ Seatbelt:   
 Hospital: \_\_\_\_\_ Transport By: \_\_\_\_\_

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 City: \_\_\_\_\_ Twp: \_\_\_\_\_ State: \_\_\_\_\_  
 Injuries: \_\_\_\_\_ Seatbelt:   
 Hospital: \_\_\_\_\_ Transport By: \_\_\_\_\_