



# OFFICIAL MEDIA RELEASE KENT COUNTY SHERIFF DEPARTMENT



## Traffic Crash Supplement

Incident # \_\_\_\_\_ Date: \_\_\_\_\_ Time of Incident: \_\_\_\_\_ Township: \_\_\_\_\_

Type of Incident: \_\_\_\_\_ Location: \_\_\_\_\_

Reporting Officer: \_\_\_\_\_ Assisting Departments: \_\_\_\_\_

Release Completed By: \_\_\_\_\_

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

ALCOHOL Contributing Factor?  
Y  N  UNK

### Vehicles

ALCOHOL Contributing Factor?  
Y  N  UNK

Veh: \_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Yr: \_\_\_\_\_

Driver: \_\_\_\_\_ Age: \_\_\_\_\_

City: \_\_\_\_\_ Twp: \_\_\_\_\_ State: \_\_\_\_\_

Injuries: \_\_\_\_\_ Seatbelt: Y  N  UNK

\_\_\_\_\_ Direction of Travel: \_\_\_\_\_

Hospital: \_\_\_\_\_ Transport By: \_\_\_\_\_

Veh: \_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Yr: \_\_\_\_\_

Driver: \_\_\_\_\_ Age: \_\_\_\_\_

City: \_\_\_\_\_ Twp: \_\_\_\_\_ State: \_\_\_\_\_

Injuries: \_\_\_\_\_ Seatbelt: Y  N  UNK

\_\_\_\_\_ Direction of Travel: \_\_\_\_\_

Hospital: \_\_\_\_\_ Transport By: \_\_\_\_\_

Relatives Notified  Names Can Be Released

Relatives Notified  Names Can Be Released

### Passengers

### 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: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

City: \_\_\_\_\_ Twp: \_\_\_\_\_ State: \_\_\_\_\_

Injuries: \_\_\_\_\_ Seatbelt:

Hospital: \_\_\_\_\_ Transport By: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

City: \_\_\_\_\_ Twp: \_\_\_\_\_ State: \_\_\_\_\_

Injuries: \_\_\_\_\_ Seatbelt:

Hospital: \_\_\_\_\_ Transport By: \_\_\_\_\_