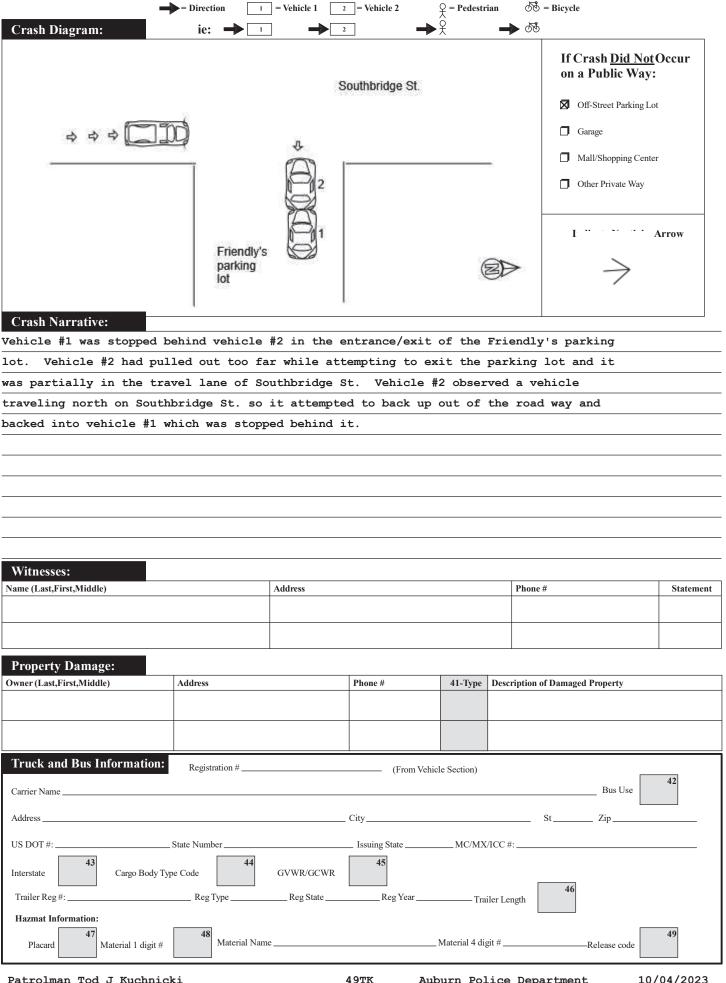
	Police Use Only	Commonwealth of Massachusetts RMV Document Number										
	Date of Crash Time of Crash		otor Veh	icle Cra	sh	Number Vehicles		mod	peed Lii		5 State Police Local Police	
	10/04/2023 1318 Aub	ourn	Police 1	Report	:	2	0	L	atitude _ ongitude		MBTA Police Campus Police Other:	8
	AT INTERSECT	NON: <	LOCA		>						CTION:	
												2 10
						97	SC	DUTE		DGE		_ 2
1 1	Route# Direction	Name of Roadway/Street At		Route# Direct	ion A	ddress #			Name	e of Roady	way/Street	
1		At		Feet	N S E	w of				or		_
	Route# Direction N	Name of Intersecting Roadway/Street	:				Mi	le Mark	er		Exit Number	8 11
		Also at Intersection with		Feet	N S E	W of	Route		In	tersecting	Roadway/Street	-
2	Route# Direction N	Name of Intersecting Roadway/Street		Feet	N S E	W of	rtout	<i>-</i> 11		terseeting	reducting/ Street	
² 1	Route# Direction IV	ame of intersecting Roadway/Street								Landmar	·k	
2	Please Select One Vehicle 12	#Occupants Hit/Run	Moped	Crash R	eport ID#	23	-3	30	- A	C		
³ 97	of the Following:											_
	License # S40049457 St 1	MA DOB/Age 03/20/19		869TK8							21	_ 7 12
	Sex F Lic. Class D Lic.	Restrictions CDL Endorseme	Veh Y	ear 2021	Veh	Make <u></u>	ONE	A		Vel	h Config. 1] [
	Operator FRANZESE, EVE		Owne	er MCGUIR I	K, R	EBEC	CA	EIL	EEN		fiddle	_
⁴ 1	Address 36 PILGRIM RD	1 Hot Middle		ss <u>364 W</u>			- 1	irst		IV	nadie	_
	City MEDFORD Sta	tte MA Zip 02155	City]	MILLBURY	7			State	MA	_ Zip_ 0	1527	_
	Insurance Company ARBELLA M			le Action Prior to C		2	22				1 27 2 27 2	7
	Vehicle Travel Direction: N S E	_			23 23	23	23		t Status:		28	-
⁵ 1		•				_ ī		Тур	e of Test	t:	29	
_	Citation # (If Issued)	_	Most	Harmful Event	_		25		C Test R	esult:	30	13
	Viol. 1: Ch/Sec/Sub	- Viol. 2: Ch/Sec/Sub	Drive	r Contributing Cod		25	25	Susp	p. Alcoh	ol: 31	Busp. Drug.	2 1
⁶ 1	Viol. 3: Ch/Sec/Sub	_Viol. 4: Ch/Sec/Sub	Drive	r Distracted by	0 20	<u>'</u>		Tow	ved from	scene?	2 33	
1		erator and all occupants involved		DODA	S	4 35 eat Safety os. System	36 Airbag Status	37 Eject Code	Trap In	39 40 ijury Transp. tatus Code	. M.E. JE Te	
	Name (Last First Middle) Operator	See Above		DOB/Age	Sex P		4		0 1		Medical Facility	
	Орегиног	364 W MAIN ST				-	-	(1		
	REBECCA MCGUIRK	MILLBURY, MA 01527		08/25/1989	F 3	1	4	0 (0 1	0 1		
	DI CI (O T			15	16		17			18		
⁷ 9	Please Select One of the Following:	#Occupants Non-Motoris	st A Type	Action		ition		Conditio	on		Hit/Run Mop	ed
	License # S43997780 St.	MA DOB/Age 09/20/19	67 Reg#	2JVZ64			Re	g Type _	PAN	F	Reg State MA	
	Sex M Lic. Class D Lic.	_	Reg # 2JVZ64 Reg Type PAN Reg State MA Veh Year 2006 Veh Make HYUNDAI Veh Config.									
	Operator MALLOY, JOSEF	ent	Owner MALLOY, JOSEPH F									
⁸ 1	Address 16 LINDA AVE	Address 16 LINDA AVE							fiddle	_		
	1	NA 01501 100			DA A	VE			147		1501 100/	$ \frac{1}{1}$
		ate MA Zip 01501-192	•	AUBURN			22			-	1501-1926 - 27 27 2	- I
	Insurance Company PLYMOUTH ROCK ASSURANCE			Vehicle Action Prior to Crash Z Damaged Field Code. 5								
	Vehicle Travel Direction: N S E	Responding to Emergency? 2	Event	Sequence 1	23 23	23	23		e of Test		29	
⁹ 2	Citation # (If Issued)		Most	Harmful Event	1 24	ł			C Test R		30	
2	Viol. 1: Ch/Sec/Sub	_ Viol. 2: Ch/Sec/Sub	Drive	r Contributing Cod	e 1	9 25 9	7 25		p. Alcoh	2:	1 Susp. Drug: 3	2
	Viol. 3: Ch/Sec/SubViol. 4: Ch/Sec/Sub									d from scene? 2 33		
		non-motorist and all occupants involv			3	4 35	36 Airbag	37 Figat	38 Tra-	39 40 Transp		
	Name (Last First Middle)	Address		DOB/Age	Sex Po	eat Safety System	Airbag Status	Eject Code	Trap In Code St	ijury Transp. Code	Medical Facility	
	Operator/Non-Motoris	See Above	·	\sim	X 1	1	4	0 (0 1	0 1		
						+						
						+	-		_			
				1	1	- 1	1					



Patrolman Tod J Kuchnicki

49TK

Auburn Police Department

10/04/2023

Police Officer Name (Please Print)

Signature

ID/Badge #

Precinct/Barracks Department

Date