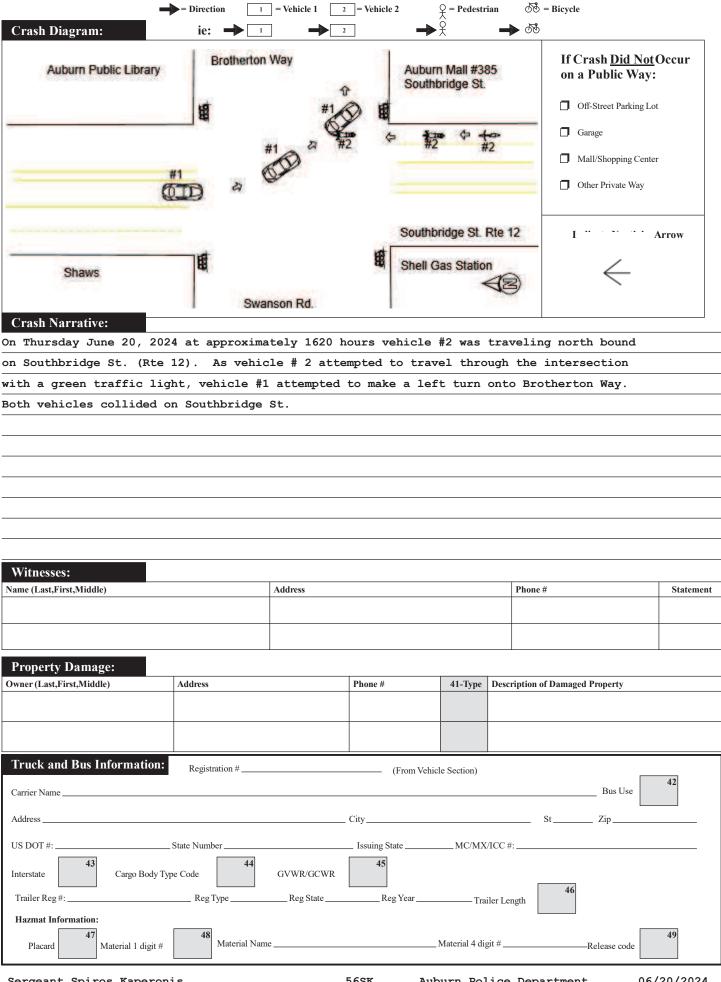
	Police Use Only	f Massa	ichus	etts		RMV Document Number					
	Date of Crash Time of Crash		Iotor Vehi	icle Cra	\mathbf{sh} $\begin{bmatrix} \mathbf{N} \\ \mathbf{V} \end{bmatrix}$		urad		State Police Local Police) 	
	06/20/2024 1620 Aubu	.rn	Police F	Report	2	1	Latit	ude zitude	MBTA Police Campus Police Other:	8	
	AT INTERSECTION:		< LOCATION >		>	NOT AT INTERSECT			CTION:		
										2	10
	Route# Direction BROTHERTON WAY Name of Roadway/Street			Route# Directi	ion Add	ress #	1	Name of Roa	ndway/Street	$-\vdash$	
¹ 1	At									\neg	
	SOUTHBRIDGE ST			Feet N S E W of or or Exit Number							11
	Route# Direction Name of Intersecting Roadway/Street Also at Intersection with			Feet N S E W of							11
			Feet N S			Route# Intersecting Roadway/Street					
² 1	Route# Direction Nan	treet	Landmark								
2	Please Select One Vehicle 11	#Occupants Hit/Run	Moped	Crash Re	enort ID#	24-2	206-	- AC		\neg	
3	of the Following:		<u> </u>							_	
	License # St	DOB/Age		7YC191					2	1	12
		estrictions CDL_ Endors	sement	ear <u>2018</u>					/eh Config. 1	┛┝	
4_	Operator	First Mid	idle	r TAVARE 2 L	ast	SHUA	First		Middle	-	
⁴ 3	Address			s 6 VAN						-	
	CityState	Zip _	_ City_ V	ORCESTE	ER	22			01602-291		
	Insurance Company GEICO GENE	RAL INSURANC	CE C Vehicle	e Action Prior to C		4 22		ed Area Cod	e: 27 27 4	27	
⁵ 1	Vehicle Travel Direction: N E W	Responding to Emergency	? 2 Event	Sequence 1	23 23	23 23	Test Sta Type of		29		
1	Citation # (If Issued)	_	Most I	Harmful Event	1 24			est Result:	30	L	
	Viol. 1: Ch/Sec/SubV	/iol. 2: Ch/Sec/Sub	Driver	Contributing Code	e 4	25 25	Susp. A	Icohol:	31 Susp. Drug:	32 1	13
6 .	Viol. 3: Ch/Sec/SubV	/iol. 4: Ch/Sec/Sub	Driver	Distracted by	99 ²⁶	26	Towed	from scene?	2 33	一卜	
⁶ 1	Please fill out for opera	tor and all occupants involved		DOB/Age	34 Seat Sex Pos.	35 36 Safety Airbag System Status	37 38 Eject Traj Code Cod	39 40 Injury Tran e Status Co	nsp.		
	Operator	See Al		DOB/Age	1	99 4	0 0	10 1	Nicureal Facility		
	1										
⁷ 2	Please Select One of the Following:	_#Occupants	Moped	Vulnerab	ole User Co	omplete the Vi	ılnerable Us	er section.			
	License # S48030515 St M 2	A DOB/Age 10/15/	1977 Reg#	<u>і</u> 3в9953		Re	g Type MC		Reg State MA	\dashv	
	Sex M Lic. Class D M Lic. Ro	_	# 3B9953 Reg Type MCN Reg State MA Year 2004 Veh Make HARLEY-DAVIDSON Veh Config. 3								
	Endorsement			ner CARTER, JOHN R							
⁸ 1	Last First Middle Address 70 LIECESTER ST APT 3L			Last First Middle Address 70 LIECESTER ST APT 3L							
	City NORTH OXFORD State		ORTH OX					01537-000	00 1	14	
				chicle Action Prior to Crash 1 22 Damaged Area Code: 27 1 27 2 27							
				ent Sequence 1 23 23 23 23 Test Status: 28							
0				Type of Test: 29							
⁹ 1				Contributing Code		25 25	5	est Result:	30	32	
<u> </u>				3usp. Arconol. 3usp. Brug.							
	Viol. 3: Ch/Sec/Sub Please fill out for opera		34	35 36	37 38	39 40		—			
	Name (Last First Middle)	Addr		DOB/Age	Sex Pos.	Safety Airbag System Status	Code Cod	e Status Co			
	Operator/Occupants	See Al	bove	\nearrow	X^1	5 5	2 0	8 1			



Sergeant Spiros Kaperonis

56SK

Auburn Police Department

06/20/2024

Signature

ID/Badge #

Department

Precinct/Barracks

Date

Police Officer Name (Please Print)