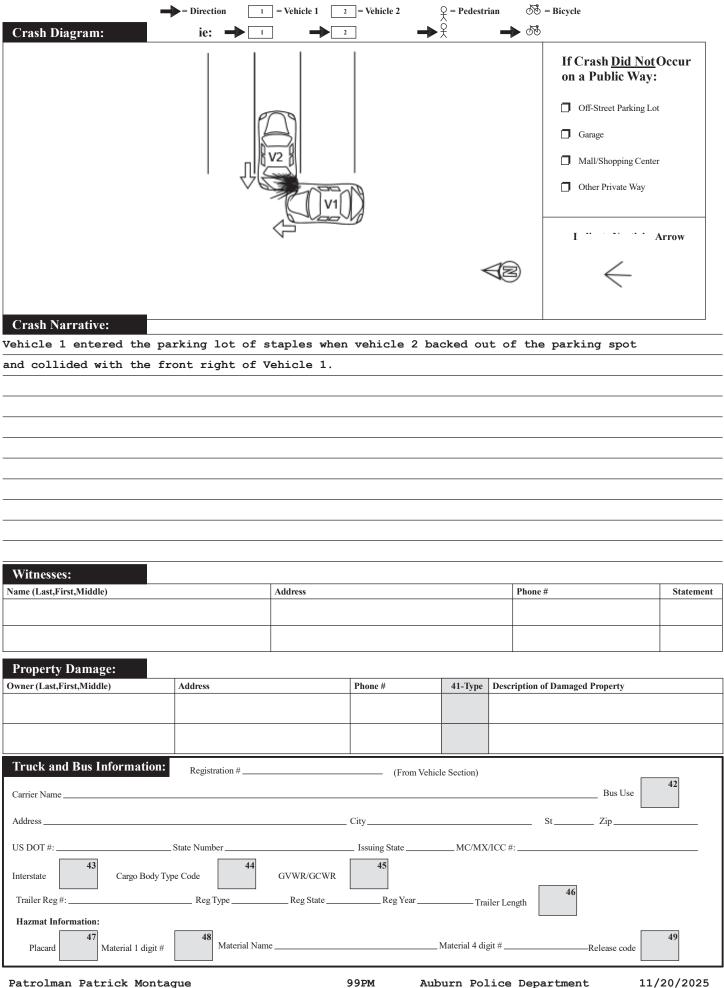
Police Use Only	Comm	Commonwealth of Massachusetts RMV Document Number										
Date of Crash Time of Crash 11/20/2025 1421 Auk	City/Town	Motor Veh		$\mathbf{h} \begin{bmatrix} \mathbf{N} \\ \mathbf{V} \end{bmatrix}$	umber ehicles	Nun Inju	irod	peed Li atitude		15	State Police Local Police MBTA Police Campus Police	
24HR	Julii	Police 1	Report	2		0		ongitud		Campus Police Other:		
AT INTERSEC	ΓΙΟΝ:	< LOCA	TION >			NO	ГАТ	INT	ERS	ECT	ION:	
				43	6	80	OUTH	IBR	נחפי	ਸ S	יחי	2 10
Route# Direction	Name of Roadway/Stree	et	Route# Direction		ress #		7011				//Street	_
	At		Feet X	SEW	of			- •	(or		
Route# Direction	Name of Intersecting Roadwa	y/Street				Mi	le Mark				Exit Number	8 11
	Also at Intersection with	n		SEW	_	Route	 e#	Iı	ntersec	ting Ro	padway/Street	<u> </u>
Route# Direction	Name of Intersecting Roadwa	ny/Street	Feet N	SEW	of							_
N 01 10			<u> </u>							lmark		4
Please Select One of the Following:	#Occupants Hit/R	Run Moped	Crash Rep	ort ID#	25	-4	13	-A	7C			
License # 207898064 St	CT DOB/Age 08/0	7/1966 Reg #	BA65172			Reg	g Type _	PC		Reg		12
Sex F Lic. Class D Lic	. Restrictions CD	DL Veh Y	Year 2015	Veh M	ake J	EEP	•			Veh C	config. 21	7
Operator MADISON, AIM			er MADISON	, AI	MEE	AN	N					
Address 61 VALLEY VIE	W RD		ess 61 VALI	EY V	TEW	RI)			Middl	ie	.
City WOODSTOCK VALLEY St	ate CT Zip 06282	City _	WOODSTOC	K VA	LLE	Y	_ State	CT	Zip	06	282	.
Insurance Company GECIO Sec	cure Insuran	ce Co Vehic	ele Action Prior to Cr	ash	1	22	Dan	naged A	Area Co	ode: 2		
Vehicle Travel Direction: S E W	Responding to Emerge	ncy? 2 Even	t Sequence 1	3 23	23	23		t Status:		1		
Citation # (If Issued)		Most	Harmful Event	1 24			• • •	e of Tes C Test I		0	30	
Viol. 1: Ch/Sec/Sub	Viol. 2: Ch/Sec/Sub	Drive	er Contributing Code	1	25	25]	p. Alcol			Susp. Drug: 2 32	1 13
Viol. 3: Ch/Sec/Sub	Viol. 4: Ch/Sec/Sub	Drive	er Distracted by	26	2	26	-	ved from			22	\vdash
•	perator and all occupants invol			34 Seat	35 Safety	36 Airbag	37 Eject	38 Trap I	Injury Ti	40 ransp.		7
Name (Last First Middle) Operator		Address e Above	DOB/Age	Sex Pos.	System 99	Status 4			Status C	Code	Medical Facility OT TRANSPORTED	-
Орегии	30	e Above		1	33	-			-	+		_
										_		_
Please Select One of the Following:	#Occupants Hit/R	Run Moped	Vulnerable	e User Co	mplete	the Vu	lnerable	User s	ection.			
3	MA DOB/Age 08/27	 7/1993 Reg #	 4KYW94			Rec	Tyne	PC:		Reg	State MA	┨
19 19	Restrictions CD		Year 2012								21	
Operator BONNEAU, TERI	Ene	dorsement	er CARPENT							, ven c	omig.	
Address 1103 TREASURE	First	Middle	ess 1103 TF	it		Fi	irst			Middl	le	
City WEBSTER St			WEBSTER							01	570-1576	1 14
Insurance Company THE COMME	-		ele Action Prior to Cr	ash	10	22		naged A				-
Vehicle Travel Direction: N X E W	7		t Sequence 1 23		23	23		t Status		1	28	
Citation # (If Issued)		•	. [+	1 24			• • •	e of Tes		0		
Viol. 1: Ch/Sec/Sub			er Contributing Code	4	25	25]	C Test I p. Alcol			30 Susp. Drug: 2 32	
Viol. 3: Ch/Sec/Sub				99 26	2	26		p. Aicoi ved fron			22 Prug. 2	
	perator and all occupants invol			34 Seat	35 Safety	36 Airbag	37 Eject	38	39	40 Transp.		-
Name (Last First Middle)		Address	DOB/Age	Sex Pos.	System	Status	Code	Code S	Status (Code	Medical Facility OT TRANSPORTED	_
Operator/Occupants	Se	e Above		X^1	99	4	0 (0 1	10 1	-		_
										_		
												7



Patrolman Patrick Montague

Auburn Police Department

Department

11/20/2025