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2813

LEGAL

SCREEN PRINT

OGC

DAN HUTKO

2112

MEDIATION AND LITIGATION SECTION

92 APR 15 8:39

51301

ISCR0003 MOR3 II Basic Information 04/14/1990 14:20:24

File Type: LEGAL CONTACT NBR: _____

VIN: INTER10A5DU _____

LAST NAME: _____ ZIP/PC: _____

Title: _____ First Name: _____ MI: _____

Address: _____ ID _____

City: AURORA ST/PV: IL

Home Phone: _____ Business Phone: _____ Ext: _____

Fax: 88 Model: RANGER

Package/Kit: 70000_

Dealer Name: _____ SALES CODE: _____

District Code: DE _____ Systems: 901000

Year/Season: 1 (1 of 2)

Work Code: _____

Form Type: _____ Micro Nbr: _____

Customer says that he got into an accident in his vehicle and customer says that his seat belt came undone. Customer says that as a result of the seat belt he has a broken collar bone and other injuries. Customer is seeking an investigation from Ford. Accident took place on 4-10-92 at 4am.

RECALL #1-ADD #2-RECALL #3-DEF #10-CASIS #11-WARRANTY #12-DEALER

NOTE VIN INVALID - PLEASE RE-ENTER

NIP 4123

2

92-3050



'92 JUN 24 A9:44

MEDIATION AND LITIGATION SECTION

*J. Hollis
Ext. 2111*

5B01

CSCR0003 MORS II Basic Information 03/03/1992 16:34:47

File Type: *Legal* CONTACT NBR: _____

VIN: *Not available*

LAST NAME: _____ ZIP/PL: _____

Title: _____ First Name: _____ MI: _____

Address: _____

City: *Lawton* ST/PV: *OK*

Home Phone: _____ Business Phone: _____ Ext: _____

Year: *92 or 91 Customer not sure* Model: *7-Seven*

Mileage/Km: *Customer doesn't have*

Dealer Name: _____ SALES CODE: _____

Causal Code: _____ Symptoms: _____

Serv Sales: *1 (1 or 2)*

Ack Code: _____

C Trans: _____ Micro Nbr: _____

*NIF
6130*

Call says owner of vehicle is [redacted]. Customer says vehicle was in an accident in April sometime (customer could not remember date) due to road conditions. customer alleges that the seat belts let loose & did not restrain passengers. customer says that she & her son received medical attention. Customer wanted to know who tested the seat belts & certified and passed them for inspection. CPE explained this was

F1=HELP F3=EXIT F5=ADD F8=RECALL F9=ESP F10=OASIS F11=WARRANTY F12=DEALER

LFIM604

3

4

Court Records

IN THE CIRCUIT COURT OF THE 18TH
JUDICIAL CIRCUIT IN AND FOR
BREVARD COUNTY, FLORIDA

CASE NO. 90-17857 CA-S

JACQUELINE WHISENANT,
individually and as Personal
Representative of the Estate
of RAYMOND WHISENANT,

Plaintiff,

vs.

PATRICIA DAIGNAULT, THOMAS
DAIGNAULT, JOHN DAIGNAULT,
TRW, INC., and FORD MOTOR
COMPANY,

Defendants.

MOTION FOR LEAVE TO AMEND COMPLAINT

COMES NOW the Plaintiff, by and through her undersigned attorney, and files this
her Motion for Leave to Amend the Complaint in the form attached hereto as Exhibit "A".

I HEREBY CERTIFY that a true and correct copy of the foregoing was mailed this
21 day of September, 1992 to: COUNSEL OF RECORD LISTED ON SHEET
ATTACHED HERETO.

COLSON, HICKS, EIDSON,
COLSON & MATTHEWS, P.A.
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Suite 4700 SE Financial Center
Miami, FL 33131
Telephone: 305-373-5400

By

Mike Eidson

MIKE EIDSON
#151088

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IN THE CIRCUIT COURT OF THE 18TH
JUDICIAL CIRCUIT IN AND FOR
BREVARD COUNTY, FLORIDA

CASE NO. 90-17857 CA-S

JACQUELINE WHISENANT,
individually and as Personal
Representative of the Estate
of RAYMOND WHISENANT,

Plaintiff,

vs.

PATRICIA DAIGNAULT, THOMAS
DAIGNAULT, JOHN DAIGNAULT,
TRW, INC., and FORD MOTOR
COMPANY,

Defendants.

THIRD AMENDED COMPLAINT

THE PLAINTIFF sues the Defendants and alleges that this is an action for damages in excess of Fifteen Thousand (\$15,000.00) Dollars brought pursuant to the terms of the Florida Wrongful Death Act. Further allegations are as follows:

1. The Plaintiff is the Personal Representative of the Estate of Raymond Whisenant, deceased.

2. The Defendant TRW, INC., was and is an Ohio corporation authorized to do and doing business in the State of Florida which corporation, among other things, manufactures automobile seatbelts and seatbelt assemblies.

3. The Defendant, FORD MOTOR COMPANY, was and is a Delaware corporation authorized to do and doing business in the State of Florida which company manufactures automobiles.

4. The following individuals constitute all of the survivors of Raymond Whisenant as defined by the Florida Wrongful Death Act:

a) Jacqueline Whisenant

"A"

- b) Christopher Whisenant; age 21; and
- c) Cassondra Whisenant; age 19.

5. At the time of the accident sued upon, the Plaintiff, JACQUELINE WHISENANT, and the Decedent, RAYMOND WHISENANT, were both utilizing and wearing their seatbelts in the manner prescribed by Florida law.

COUNT I

CLAIM OF THE PERSONAL REPRESENTATIVE AGAINST THE OWNERS AND OPERATOR OF THE DEFENDANT'S MOTOR VEHICLE, FOR COMPENSATORY DAMAGES ARISING OUT OF THE WRONGFUL DEATH OF RAYMOND WHISENANT

6. The Plaintiffs reallege and reaver each of the allegations contained in paragraphs 1 through 5 and further state as follows:

7. On or about October 6, 1990, RAYMOND WHISENANT died as a result of an automobile accident which occurred at the intersection of State Road 5 and Cross Road approximately one (1) mile north of Cocoa, Brevard County, Florida.

8. At that time and place, the defendant, PATRICIA DAIGNAULT and defendant, JOHN DAIGNAULT were the owners of a 1980 Toyota which was operated by THOMAS DAIGNAULT so that it collided with a vehicle operated by RAYMOND WHISENANT and occupied by JACQUELINE WHISENANT.

9. The Defendant, THOMAS DAIGNAULT, was operating the motor vehicle with the consent and permission of the owners at the time of the accident.

10. At that time and place, the Defendant, THOMAS DAIGNAULT, negligently operated the motor vehicle so that it collided with the motor vehicle operated by RAYMOND WHISENANT, as a consequence of which RAYMOND WHISENANT died from the injuries sustained in the accident.

11. Following the accident, the Defendant, Thomas Daignault, then proceeded to flee the scene notwithstanding his knowledge that he had caused an accident that resulted in serious and fatal injuries to JACQUELINE and RAYMOND WHISENANT.

12. As a direct and proximate result of the actions of Defendant, THOMAS DAIGNAULT, the Plaintiff, JACQUELINE WHISENANT, sues on behalf of the Estate of the decedent and the survivors, claiming the following damages:

a) On behalf of the estate, the Personal Representative claims loss of prospective net accumulations of the estate and medical and funeral expenses due to the injury and death of the decedent.

b) On behalf of JACQUELINE WHISENANT, the surviving spouse, the value of future loss of support and services from the date of death, loss of the decedent's companionship and protection and mental pain and suffering from the date of injury and medical and/or funeral expenses paid by JACQUELINE WHISENANT.

c) On behalf of the minor children of the decedent, the Personal Representative claims damages for future loss of support and services from the date of death, loss of parental companionship, instruction and guidance, and mental pain and suffering from the date of death.

WHEREFORE, the Plaintiff, JACQUELINE WHISENANT, individually and as Personal Representative, sues the Defendants for damages together with costs and interest and demands trial by jury.

COUNT II

CLAIM OF JACQUELINE WHISENANT, INDIVIDUALLY, AGAINST THE OWNERS AND OPERATOR OF DEFENDANT'S MOTOR VEHICLE, FOR COMPENSATORY DAMAGES

13. The Plaintiff JACQUELINE WHISENANT realleges and reavers the allegations contained in paragraphs 1 through 5 and further states as follows:

14. On or about October 6, 1990, the Defendant, PATRICIA DAIGNAULT was the legal owner and the Defendant, JOHN DAIGNAULT had beneficial ownership of a motor vehicle that was operated with their consent and permission by THOMAS DAIGNAULT at or near the intersection of State Road 5 and Cross Road, approximately one (1) mile north of Cocoa, Brevard County, Florida.

15. At that time and place, the Defendant, THOMAS DAIGNAULT, negligently operated or maintained the motor vehicle so that it collided with the motor vehicle in which the Plaintiff, JACQUELINE WHISENANT, was a passenger.

16. Following the accident, the Defendant, Thomas Daignault, then proceeded to flee the scene notwithstanding his knowledge that he had caused an accident that resulted in serious and fatal injuries to JACQUELINE WHISENANT and RAYMOND WHISENANT.

17. As a direct and proximate result of the negligence of the Defendant, the Plaintiff, JACQUELINE WHISENANT, suffered bodily injury and resulting pain and suffering, disability, disfigurement, mental anguish, loss of capacity for the enjoyment of life, expense of hospitalization, medical and nursing care and treatment, loss of earnings, loss of ability to earn money, aggravation of previously existing conditions, and said injuries are permanent within a reasonable degree of medical probability and the Plaintiff will suffer losses and impairment in the future.

WHEREFORE, the Plaintiff, JACQUELINE WHISENANT, in her individual capacity, sues John and Patricia Daignault for compensatory damages, and Thomas Daignault for compensatory damages, together with costs and interest and demands trial by jury.

COUNT III

CLAIM OF THE PLAINTIFF, INDIVIDUALLY, AND AS PERSONAL REPRESENTATIVE AGAINST DEFENDANT, TRW, INC., FOR NEGLIGENCE

18. The Plaintiffs reallege and reaver the allegations contained in paragraphs 1 through 5 and further state as follows:

19. On or about October 6, 1990, RAYMOND WHISENANT, died as a result of an automobile accident which occurred at the intersection of State Road 5 and Cross Road, approximately one mile north of Cocoa, Brevard County, Florida.

20. At that time and place, the Plaintiff, JACQUELINE WHISENANT, was a passenger in the automobile driven by her husband which vehicle was a 1988, Ford Ranger,

VIN #1FTBR10AdJUD93287, which had installed in it shoulder and lap belt assemblies for both the driver and front seat passenger which assemblies were manufactured by Defendant, TRW, INC.

21. After the initial impact, during the course of the accident, Plaintiff, JACQUELINE WHISENANT and the decedent were ejected from their vehicle as a result of a failure of the seatbelt assemblies manufactured by Defendant, TRW, INC.

22. The seatbelt assemblies were negligently produced, manufactured or designed by Defendant, TRW, INC., in that they failed allowing the ejection from the vehicle of the Plaintiff JACQUELINE WHISENANT and RAYMOND WHISENANT.

23. Furthermore, Defendant, TRW, INC., before placing the seatbelt assemblies in the stream of commerce failed to make reasonable tests and inspections to discover the defect.

24. As a proximate result of the negligent production, the manufacture or design of the seatbelt assemblies, Plaintiffs, JACQUELINE WHISENANT and RAYMOND WHISENANT were ejected from the vehicle resulting in severe injury to JACQUELINE WHISENANT and in the death of RAYMOND WHISENANT.

25. As a direct and proximate result of the actions of Defendant, TRW, the Plaintiff, JACQUELINE WHISENANT, sues on behalf of the Estate of the decedent and the survivors, claiming the following damages:

a) On behalf of the estate, the Personal Representative claims loss of prospective net accumulations of the estate, medical and funeral expenses due to the injury and death of the decedent.

b) On behalf of JACQUELINE WHISENANT, the surviving spouse, the value of future loss of support and services from the date of death, loss of the decedent's companionship and protection and mental pain and suffering from the date of injury and medical and/or funeral expenses paid by JACQUELINE WHISENANT.

c) On behalf of the minor children of the decedent, the Personal Representative claims damages for future loss of support and services from the date of death, loss of parental companionship, instruction and guidance, and mental pain and suffering from the date of death, and funeral expenses due to the death of their father.

26. As a direct and proximate result of the negligence of the Defendant, the Plaintiff, JACQUELINE WHISENANT, suffered bodily injury and resulting pain and suffering, disability, disfigurement, mental anguish, loss of capacity for the enjoyment of life, expense of hospitalization, medical and nursing care and treatment, loss of earnings, loss of ability to earn money, aggravation of previously existing conditions, and said injuries are permanent within a reasonable degree of medical probability and the Plaintiff will suffer losses and impairment in the future.

WHEREFORE, the Plaintiff, JACQUELINE WHISENANT, individually and as Personal Representative of the Estate of RAYMOND WHISENANT, sues the Defendant for damages together with costs and interest and demands trial by jury.

COUNT IV

CLAIM OF PLAINTIFF, INDIVIDUALLY, AND AS PERSONAL REPRESENTATIVE, AGAINST DEFENDANT, TRW, INC., FOR STRICT LIABILITY

27. The Plaintiffs reallege and reaver the allegations contained in paragraphs 1 through 5 and further state as follows:

28. On or about October 6, 1990, Defendant, TRW, INC., was engaged in the business of designing, manufacturing and selling automobile seatbelt assemblies.

29. Defendant, TRW, INC., sold the seatbelt assemblies, which were placed in the Plaintiffs' automobile in a defective condition, and unreasonably dangerous to the Plaintiff and the Decedent, in that they failed to restrain both JACQUELINE and RAYMOND WHISENANT, following their automobile accident causing their injury and death, respectively.

30. The seatbelt assemblies left the Defendant's possession in a defective condition

and were still in such condition when the vehicle was purchased by Plaintiff, RAYMOND WHISENANT and at the time of the accident.

31. As a result of the defective condition of the seatbelt assemblies, Plaintiff, JACQUELINE WHISENANT sustained bodily injury and resulting pain and suffering, disability, disfigurement, mental anguish, loss of capacity for the enjoyment of life, expense of hospitalization, medical and nursing care and treatment, loss of earnings, loss of ability to earn money, aggravation of previously existing conditions, and said injuries are permanent within a reasonable degree of medical probability and the Plaintiff will suffer losses and impairment in the future.

32. As a result of the defective condition of the seatbelt assembly, RAYMOND WHISENANT died and Plaintiff, JACQUELINE WHISENANT sues on behalf of the estate of the decedent and the survivors and claims the following damages:

a) On behalf of the estate, the Personal Representative claims loss of prospective net accumulations of the estate, medical and funeral expenses due to the injury and death of the decedent.

b) On behalf of JACQUELINE WHISENANT, the surviving spouse, the value of future loss of support and services from the date of death, loss of the decedent's companionship and protection and mental pain and suffering from the date of injury and medical and/or funeral expenses paid by JACQUELINE WHISENANT.

c) On behalf of the minor children of the decedent, the Personal Representative claims damages for future loss of support and services from the date of death, loss of parental companionship, instruction and guidance, and mental pain and suffering from the date of death and funeral expenses due to the death of their father.

WHEREFORE, the Plaintiff, JACQUELINE WHISENANT, individually and as Personal Representative, demands judgment for damages against this Defendant together with costs and interest and further demands trial by jury of all issues triable as of right by a jury.

COUNT V

CLAIM OF PLAINTIFF, INDIVIDUALLY, AND AS PERSONAL
REPRESENTATIVE, AGAINST DEFENDANT, FORD MOTOR COMPANY,
FOR NEGLIGENCE

33. The Plaintiffs reallege and reaver the allegations contained in paragraph 1 through 5 and further state as follows:

34. On or about October 6, 1990, RAYMOND WHISENANT, died as a result of an automobile accident which occurred at the intersection of State Road 5 and Cross Road, approximately one mile north of Cocoa, Brevard County, Florida. Mr. Whisenant's vehicle was struck in the right rear by Mr. Daignault's vehicle. Upon impact, RAYMOND WHISENANT's vehicle began to rotate in a clockwise direction until it rolled over several times coming to rest on its wheels on the shoulder of the highway.

35. At that time and place, the Plaintiff, JACQUELINE WHISENANT, was a passenger in the automobile driven by her husband which vehicle was a 1988, Ford Ranger, VIN #1FTBR10A3JUD93287, which had installed in it shoulder and lap belt assemblies for both the driver and front seat passenger.

36. After the initial impact, during the course of the accident, Plaintiff, JACQUELINE WHISENANT, and the decedent, RAYMOND WHISENANT, were ejected from their vehicle as a result of a failure of the seatbelt assemblies and the rollover of the vehicle.

37. The said vehicle was negligently and carelessly designed, tested, manufactured, produced, advertised and sold in that:

- a) The vehicle was unreasonably prone to roll over under ordinary and reasonably foreseeable operating conditions;
- b) The seatbelts of said vehicle opened during this accident permitting Plaintiffs to be ejected;
- c) The vehicle was inherently unstable in a side impact thereby contributing to

the inability of RAYMOND WHISENANT to control the vehicle and the rollover;

- d) The wheels were not proper size for the vehicle;
- e) The tires were not proper size for the vehicle.

38. Defendant Ford negligently and carelessly failed to warn or advise Plaintiff of the dangerous and unreasonable design and manufacture of the vehicle as described herein above.

39. As a direct and proximate result of the above described negligence of Defendant, FORD, the vehicle went out of control, rolled over, the Plaintiffs were ejected and RAYMOND WHISENANT was killed and JACQUELINE WHISENANT was seriously and permanently injured.

40. Furthermore, Defendant, FORD MOTOR COMPANY, failed to make reasonable tests and inspections to discover the defect before placing the automobile in the stream of commerce.

41. As a direct and proximate result of the actions of Defendant, FORD MOTOR COMPANY, the Plaintiff, JACQUELINE WHISENANT, sues on behalf of the Estate of the decedent and the survivors, claiming the following damages:

- a) On behalf of the estate, the Personal Representative claims loss of prospective net accumulations of the estate, medical and funeral expenses due to the injury and death of the decedent.
- b) On behalf of JACQUELINE WHISENANT, the surviving spouse, the value of future loss of support and services from the date of death, loss of the decedent's companionship and protection and mental pain and suffering from the date of injury and medical and/or funeral expenses paid by JACQUELINE WHISENANT.
- c) On behalf of the minor children of the decedent, the Personal Representative claims damages for future loss of support and services from the date of death, loss of parental companionship, instruction and guidance, and mental pain and suffering from the date of death and funeral expenses due to the death of their father.

42. As direct and proximate result of the negligence of the Defendant, the Plaintiff, JACQUELINE WHISENANT, suffered bodily injury and resulting pain and suffering, disability, disfigurement, mental anguish, loss of capacity for the enjoyment of life, expense of hospitalization, medical and nursing care and treatment, loss of earnings, loss of ability to earn money, aggravation of previously existing conditions, and said injuries are permanent within a reasonable degree of medical probability and the Plaintiff will suffer losses and impairment in the future.

WHEREFORE, the Plaintiff, JACQUELINE WHISENANT, individually and as Personal Representative of the Estate of RAYMOND WHISENANT, sues the Defendant for damages together with costs and interest and demands trial by jury.

COUNT VI

CLAIM OF PLAINTIFF, INDIVIDUALLY, AND AS PERSONAL REPRESENTATIVE, AGAINST DEFENDANT FORD MOTOR COMPANY, FOR STRICT LIABILITY

43. The Plaintiff realleges and reavers the allegations contained in paragraphs 1 through 5 and further states as follows:

44. On or about October 6, 1990, Defendant, FORD MOTOR COMPANY, was engaged in the business of designing, manufacturing and selling automobiles.

45. Defendant, FORD MOTOR COMPANY, sold the Plaintiff's automobile in a defective condition which was unreasonably dangerous to the Plaintiffs in that the seatbelt assemblies contained within the automobile failed to restrain both JACQUELINE and RAYMOND WHISENANT, following their automobile accident, causing their injury and death, respectively. Furthermore, the vehicle was defective because of its inherent instability and unreasonable proneness to rollover, because its wheels and tires were not adequate to prevent rollover in foreseeable accidents such as the one involved herein and because of inherent steering deficiencies which contributed to the rollover and for failure to advise and warn about the above defects and unreasonably dangerous deficiencies in the vehicle.

46. The automobile, including the seatbelt assemblies, left the Defendant's possession in a defective condition and reached the Plaintiffs without substantial change in the condition in which they were sold.

47. As a result of the defective condition of the automobile, including the seatbelt assemblies, Plaintiff, JACQUELINE WHISENANT sustained bodily injury and resulting pain and suffering, disability, disfigurement, mental anguish, loss of capacity for the enjoyment of life, expense of hospitalization, medical and nursing care and treatment, loss of earnings, loss of ability to earn money, aggravation of previously existing conditions, and said injuries are permanent within a reasonable degree of medical probability and the Plaintiff will suffer losses and impairment in the future.

48. As a result of the defective condition of the automobile, including the seatbelt assemblies, RAYMOND WHISENANT died and Plaintiff, JACQUELINE WHISENANT sues on behalf of the estate of the decedent and the survivors and claims the following damages:

a) On behalf of the estate, the Personal Representative claims loss of prospective net accumulations of the estate, medical and funeral expenses due to the injury and death of the decedent.

b) On behalf of JACQUELINE WHISENANT, the surviving spouse, the value of future loss of support and services from the date of death, loss of the decedent's companionship and protection and mental pain and suffering from the date of injury and medical and/or funeral expenses paid by JACQUELINE WHISENANT.

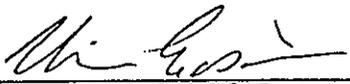
c) On behalf of the minor children of the decedent, the Personal Representative claims damages for future loss of support and services from the date of death, loss of parental companionship, instruction and guidance, and mental pain and suffering from the date of death and funeral expenses due to the death of their father.

WHEREFORE, the Plaintiff, JACQUELINE WHISENANT, individually and as Personal Representative, demands judgment for damages against this Defendant together with costs and

interest and further demands trial by jury.

DATED THIS 21 Day of September, 1992.

COLSON, HICKS, EIDSON,
COLSON & MATTHEWS, P.A.
Attorneys for Plaintiff
200 South Biscayne Boulevard
Suite 4700
Miami, Florida 33131-2351
(305) 373-5400

By 
MIKE EIDSON
Florida Bar No. 151088

Whisenant file

FLORIDA HIGHWAY PATROL



TRAFFIC HOMICIDE INVESTIGATION

PREPARED BY: C. R. JONES, L.E.I.1
Law Enforcement Investigator I

CASE NO. FHP-790-19-40

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Investigation Reviewed by: SERGEANT T. P. O'Neill *Sgt. TP O'Neill* 10-13-90
Supervisor Date

INVESTIGATIVE REPORT

IDENTIFICATION

This fatal traffic crash occurred within Brevard County, Florida on Saturday, October 6, 1990, at approximately 5:45 PM. The crash occurred on State Road 5 (US1) at the intersection of Cross Road, 1 mile north of Cocoa, Florida. The crash involved two motor vehicles, with one vehicle sideswiping the second, causing the second vehicle to overturn and eject its occupants. There was one known injury and one fatality in this crash.

AMBIENCE

The atmospheric condition at the time of this crash consisted of daylight, clear skies with no anticipated precipitation. The ambient temperature was 89 degrees F. There were light winds from the southwest at 5 MPH. The existing weather conditions did not effect this crash.

HIGHWAY

This crash involves two highways which make a T-Intersection. The first and primary roadway is State Road 5. State Road 5, in the area of the crash, is a four-lane, divided roadway. State Road 5 is divided for northbound and southbound traffic by a 37 foot, unpaved, grass median. The southbound roadway consists of two lanes, the outside lane being 11 feet 9 inches wide and the inside lane being 11 feet 6 inches wide. The northbound roadway consists of two lanes, the outside lane being 11 feet 4 inches wide and the inside lane being 11 feet 6 inches wide. State Road 5 runs in a predominately north-south direction. Northbound

INVESTIGATIVE REPORT

State Road 5 also has a 12 foot wide, paved turn lane for traffic to turn west onto Cross Road. An open paved area exists 37 feet 6 inches long in the median at the intersection of State Road 5 with Cross Road. State Road 5, in the area of the crash, is also a curve, but level. The curve of the roadway has a radius of 3,753 feet. The pavement of State Road 5 is composed of asphalt in good condition and has a 0% grade and superelevation. A second roadway is also involved in this crash. It is Cross Road, which is a two-lane secondary roadway which runs in a predominately east-west direction. Both eastbound and westbound lanes are 11 feet 9 inches wide. The roadway is composed of asphalt in good condition and the roadway is straight and level, preceding its intersection with State Road 5.

TRAFFIC CONTROL

On State Road 5, traffic control consists of a 55 MPH speed limit sign placed 4.1 miles north of the intersection of State Road 5 and Cross Road for southbound traffic. The southbound lanes of State Road 5 have a solid white roadway edgeline along the outside shoulder and yellow line along the median edge. The two southbound lanes are separated by an alternating black and white line. There are also white reflectors with red backs placed along this line. The northbound lanes of State Road 5 have a solid white roadway edgeline along the outside and yellow line along the median edge. The two northbound lanes are separated by an alternating white and black line. There are also white

INVESTIGATIVE REPORT

reflectors with red backs placed along this line. At the intersection of State Road 5 and Cross Road there is a paved area of median. This area is separated from the traffic way lanes with broken yellow lines. The other roadway, Cross Road, is a two-lane highway and the two lanes are divided by double yellow lines. For eastbound traffic on Cross Road there is a 25 MPH speed limit sign 1/10 of a mile west of the intersection of Cross Road and State Road 5. There is also a stop sign placed 21 feet from the intersection of Cross Road and State Road 5 for eastbound traffic and a stop line painted across the eastbound lane of Cross Road, 18 feet west of the intersection of Cross Road and State Road 5.

VEHICLE: V-1

V-1 is a 1980, Toyota Celica, two-door, with a Vehicle Identification Number of RA42[REDACTED]. V-1 is currently registered in Florida with a Tag Number of [REDACTED] and is a light tan in color. V-1 is owned by [REDACTED] [REDACTED] Merritt Island, Florida. V-1 is equipped with a manual 5-speed transmission and manual steering. V-1 also has power assisted front disc brakes and power assisted rear drum brakes. V-1 is equipped with lap and shoulder seatbelts for front seat occupants and lap seatbelts for back seat passengers. There is no special equipment installed on V-1.

OCCUPANT: V-1: DRIVER: V-1 driver is [REDACTED] [REDACTED] Merritt Island, Florida. He is a 27 year old,

INVESTIGATIVE REPORT

white male. He is currently licensed with a valid Florida Operators License. He is familiar with V-1, the area and route being traveled. It is unknown if Mr. Daignault was using a seatbelt or received any injuries due to him having left the scene of the crash and later contact has been through his Attorney, who advises no questions will be answered.

VEHICLE: V-2:

V-2 is a 1988, Ford Ranger, Pickup, with a Vehicle Identification Number of 1FTBR10A3JU [REDACTED] V-2 is currently registered in Florida with a Tag Number of [REDACTED] and is silver and red in color. V-2 is owned by [REDACTED] Cocoa, Florida. V-2 is equipped with a manual 4-speed transmission. V-2 is equipped with power assisted steering, front disc brakes and rear drum brakes. V-2 is equipped with lap and shoulder type seatbelts. There is no special equipment installed on V-2.

OCCUPANT: V-2: DRIVER: Driver of V-2 is [REDACTED] residing at [REDACTED] Cocoa, Florida. He is a 53 year old, white male. He is currently licensed in Florida with a valid Operators License. He is familiar with V-2, the area and route being traveled. He received serious injuries in the crash and was transported by Brevard Fire Rescue Ambulance to Wuesthoff Hospital in Rockledge, Florida where he later died. He was not wearing seatbelts and was ejected from V-2.

OCCUPANT: V-2: RIGHT FRONT: [REDACTED] is a 48

INVESTIGATIVE REPORT

year old, white female. She was not wearing seatbelts and was ejected from V-2. She received incapacitating injuries in the crash and was transported to Wuesthoff Hospital in Rockledge, Florida by Brevard Fire Rescue Ambulance.

PRE-CRASH

V-1 was eastbound on Cross Road and approaching the intersection of Cross Road and State Road 5. Witnesses stated V-1 approached the intersection at a steady rate of speed, but not overly fast, except that it did not slow as it came close to the intersection. Witnesses stated V-1 appeared to be preparing to make a right turn onto State Road 5. Under advise of counsel, Mr. [REDACTED] would not give his account of the events which took place before, during or after this crash. V-2 was southbound on State Road 5 in the outside lane. Witnesses stated traffic on State Road 5 was moderate and V-2 was traveling along within speed limits. Family members of V-2's occupants advised that V-2's occupants had left home and were going out to dinner which was customary for them on Saturday evenings. As V-2 was approaching the intersection of State Road 5 at Cross Road, V-1 was doing likewise from Cross Road. V-1, for reasons unknown at this time, failed to stop for the posted stop sign and started to make a right turn maneuver as it encroached upon the intersection. Witnesses stated it appeared that Mr. [REDACTED] driver of V-2, may have seen V-1 entering the intersection at the last second, because V-2 moved to its left just moments before V-1 made

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contact with V-2. There were no surface marks left by either vehicle prior to collision. There were no visual obstructions or environmental factors which contributed prior to the collision.

AT-CRASH

V-1 came to the intersection as V-2 was almost through it. V-1 collided with V-2 at an angle with V-1's left front making contact to V-2 at the rear of V-2's right rear fender well. The collision caused V-2 to rotate in a clockwise manner. V-2 continued southbound in a sideways skid and still rotating. V-2 left side scuff marks from its left front and left rear tires up to the point where V-2 overturned. V-2 overturned in a sideways manner and made its first contact with the right side of roof and right front fender contacting the pavement. V-2 skidded for a short distance and continued to overturn. V-2 completed its first roll half on, half off the roadway, but continuing its momentum in a southwest direction. V-2 again overturned in a sideways manner on the west shoulder. V-2's left side made contact with the west shoulder and continued to overturn. As V-2 was completing its second roll, the right front passenger was ejected. V-2 continued southwest in direction and began its third overturning event with the left side and roof area making contact with the west shoulder. The driver was ejected at this point and V-2 came upright on its tires, coming to rest on the west shoulder, facing north. V-1 only traveled for a short distance in a southwest direction from the point of contact and

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came to rest, facing southeast, across the southbound lanes. V-1's contact damage was limited to the left front corner of V-1 along with bumper cover, headlights and turn signals being torn away.

POST-CRASH

On October 6, 1990 I was at the Florida Highway Patrol Station in Cocoa, Florida completing reports when the Duty Officer advised me of a crash in which Trooper Ritchie was enroute. The Duty Officer was advised that the crash appeared to have two serious and maybe critical injuries. Moments later, the Duty Officer advised me that the Paramedics were advising one of the two injured people was critical and was being transported to Wuesthoff Hospital in Rockledge, Florida. I advised the Duty Officer I would be enroute to begin helping Trooper Ritchie and in the event of there being a fatality, I would be close by. Before leaving the station however, the Duty Officer was overwhelmed by phone calls of people reporting this crash, that I assisted for a few minutes before I left. Of the numerous calls I took reporting the crash, I took three calls in which people who stated they did not want to give their name, gave me a Florida Tag Number of EUD-41K and that the car was a light tan or cream colored Toyota that had hit the truck, but it left the scene. I then departed the Florida Highway Patrol Station and upon arriving at the scene, I met with Trooper Ritchie and he briefed me on the details that he accumulated at that point. Shortly

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after my arrival, Wuesthoff Hospital notified our office that one of the occupants from our crash had expired. Due to the full obstruction of State Road 5's southbound lanes by vehicle debris and physical evidence, I had Trooper I, T. D. Callin to assist with traffic control while I began my on scene investigation and give Trooper Ritchie time to gather information for his Florida Traffic Crash Report. I began my on scene investigation by locating any witnesses on hand and getting written statements and contact information for later follow up. I next documented all physical evidence on the roadway and throughout the scene. I then photographed and took measurements of the roadway, physical evidence and surrounding scene. I established a "0" point reference line, from which all measurements are made. The "0" point will be an imaginary point and is the northwest intersecting point of State Road 5 at Cross Road. The reference line is the west roadway edgeline of southbound State Road 5. Independent witnesses give the primary information as to where V-1 and V-2 had been traveling prior to, during and after the crash. The witnesses stated V-1 was eastbound on Cross Road and approaching the intersection at State Road 5. The witnesses continued that V-2 was southbound on State Road 5 in the outside lane. They continued that as V-1 was approaching the intersection, V-1 was moving at a normal rate of speed for the road it was on except it was not slowing down as it came to the stop sign. Several witnesses stated it looked like V-1 was going

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to make a right turn onto State Road 5. They continued that V-2 was in this intersection at this point and that V-2 appeared to move to its left slightly to get away from V-1. V-1 made contact with V-2 at this point. V-1's area of contact with V-2 was V-1's left front to V-2's right rear at the rear of the right rear fender well. V-1's damage to its left front begins in front of the left front fender well and continues to front edge of fender. The fender is crushed inward 4 inches at its forward edge. The left front of V-1's hood is crushed inward 4 inches. The bumper cover is torn off along with the left front headlights and left front turn signal. V-1 comes to final rest a short distance from contact point and sits in a southeast direction across the southbound lanes. V-1's final rest is as described by witnesses due to V-1 leaving the scene before our arrival. An exact point of contact between V-1 and V-2 could not be found on the roadway itself. V-2 received contact damage at its right rear beginning at the rear of the right rear fender well and continuing rearward to the bumper. The right rear of V-1 had 4 inches of crush damage which began at the rear of the right rear fender well. The right end of the rear bumper was bent rearward 4 inches. The contact from V-1 to V-2 caused V-2 to start to rotate in a clockwise manner. As V-2 began to rotate, V-2's left front and left rear tires began to scuff on the roadway. The two tires left scuff marks in a yawing pattern as V-2 was rotating and moving southbound. The left front tire marks began 39 feet

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6 inches south of "0" point and 12 feet east of reference line. The left front tire marks end at 32 feet 6 inches south of "0" point and 6 feet east of reference line. The left rear tire marks begin 38 feet 6 inches south of "0" point and 15 feet east of reference line. The left rear tire mark ends 76 feet 6 inches south of "0" point and 12 feet east of reference line. V-2 begins to lift on its right side and starts to overturn in a sideways manner. V-2 overturns and makes its first contact with the roadway with V-2's right front area of its roof and right front fender 96 feet 6 inches south of "0" point and 7 feet east of reference line. The right front area of the roof at the support post is crushed downward 11 inches and the right front fender is crushed inward 4 inches. Both the roof and right front fender received deep abrasions from skidding on the asphalt roadway. The hood had abrasions from the roadway. V-2 bounced from this point and again made contact with the roadway and left gouges made by the right front corner of the roof and the corner of the right front fender. These gouges are: First gouge is 112 feet 6 inches south of "0" point and 7 feet east of the reference line; second gouge is 112 feet 6 inches south of "0" point and 5 feet east of the reference line; third gouge is 118 feet 6 inches south of "0" point and 3 feet east of reference line; fourth gouge is 118 feet 6 inches south of "0" point and on reference line. V-2 begins to complete its first roll and the right rear wheel gouges pavement 137 feet 6 inches south of "0"

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point and 8 feet east of reference line. V-2 completes its first roll as the left side tires contact the ground, the left front tire gouges the unpaved shoulder 150 feet 6 inches south of "0" point and 4 feet west of reference line. The left rear tire scuffs the asphalt 155 feet 6 inches south of "0" point and 5 feet east of the shoulder. V-2 begins a second roll and is still continuing in a southwest direction. V-2 next makes contact with the west shoulder with the left side of roof which leaves a disturbed area on the shoulder 192 feet 6 inches south of "0" point and 9 feet west of reference line. The left side of V-2's roof is crushed inward 3 inches from this impact. V-2 continued its roll leaving a faint trail of disturbed earth and grass as it rolled. As V-2 was completing this second roll, the right front passenger was ejected onto the shoulder 200 feet 6 inches south of "0" point and 12 feet west of reference line. V-2 began a third roll and the left side of V-2 left a large area of disturbed earth 217 feet 6 inches and 7 feet west of reference line. V-2 completed the third roll and while completing this last roll, the driver of V-2 was ejected on the shoulder and was 262 feet 6 inches south of "0" point and 9 feet west of reference line. After completing the third roll, V-2 finished by skidding to a stop on the west shoulder of State Road 5. V-2's placement at final rest was: Right front tire 237 feet 6 inches south of "0" point and 29 feet west of reference line; right rear tire was 247 feet 6 inches south of "0" point and 28 feet

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west of reference line. Other physical evidence was left at the scene, due to being torn off during the collision. V-2 left a damaged wheel trim ring from the right rear wheel 43 feet 6 inches south of "0" point and 11 feet east of reference line. V-2 also left a plastic bumper pad from its rear bumper, right side, 65 feet 6 inches south of "0" point and 16 feet east of reference line. Three other pieces of physical evidence which were later matched to V-1 when it was located are a headlight casing 30 feet 6 inches south of "0" point and 6 feet east of reference line. V-1 also left a turn signal casing 79 feet 6 inches south of "0" point and 20 feet east of reference line. Also found was a piece of shaped foam used under the plastic bumper cover as a crash attenuator 49 feet 6 inches south of "0" point and 11 feet east of reference line. As the vehicles came to final rest, many of the witnesses stopped to render aid. The witnesses stated the driver of V-1 exited V-1 and came over to the right front passenger of V-2 and asked her condition. The witnesses stated the driver of V-1 then went over next to V-1, picked up a bumper and put it into V-1 and got into V-1 himself. The witnesses stated the next thing they knew he was gone. The witnesses were asked to give a description of V-1 and its driver. They stated V-1 was a light tan or cream Toyota, two-door, with a hatch back and that it was a Celica model. They also stated it had two canvas covered inner tubes, the type you pull behind a boat, in the back of the car, one was red and the other was blue.

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The witnesses also stated that the driver of V-1 was a white male late 20's to early 30's, under 6 feet tall, dirty blonde to light brown hair and the most noticeable thing was he had an artificial leg. After clearing the roadway and the scene, I went to Wuesthoff Hospital to take care of the Medical Examiner information of the deceased and check on the status of the other injured party. Trooper Ritchie departed the scene to make notification of next of kin of the deceased. I gave Trooper Callin the description information of V-1 and its driver along with the registration information obtained from the tag number given me before I had left the Cocoa Florida Highway Patrol Station, before arriving at the crash scene. The information obtained from the tag registration and the description given by witnesses were very similar as to the type of vehicle we would be looking for. Trooper Callin proceeded to the address listed on the tag registration, [REDACTED] Merritt Island, Florida. Trooper Callin there met [REDACTED] and apprised them of the crash and if they still owned the vehicle registered to [REDACTED] which fit the description of V-1 we were looking for. They confirmed they did still own it, but the vehicle is used by their son, [REDACTED]. [REDACTED] Trooper Callin gave them the description of the driver for V-1 we were looking for and they confirmed it to be the same as their son, [REDACTED]. They gave Trooper Callin [REDACTED] address of [REDACTED] Merritt Island, Florida.

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Mr. [REDACTED] and Trooper Callin went to [REDACTED] address to attempt to locate him, but neither he nor the vehicle were home. The [REDACTED] advised they would attempt to locate [REDACTED] and make contact with us as soon as possible. Trooper Callin was contacted Sunday, 10-07-90, by the [REDACTED] family Attorney, Frank Molica, reference letting us know they had not located [REDACTED] or the vehicle. On Sunday, 10-07-90 I contacted the [REDACTED] residence and left messages to please call, but they were not returned. In the evening on Sunday, 10-07-90, I had received Mr. Molica's phone number from Trooper Callin and called him and he advised that he had heard no word about [REDACTED] location, but that he had advised the [REDACTED] family they should consult a Criminal Attorney due to the serious nature of the crash. He also advised that the Law Firm of Daniel Ciener had been consulted by the [REDACTED] family. On Monday, 10-08-90, the Daniel Ciener Law Firm was contacted and I was referred to Blaise Trettis, an associate of the firm. Mr. Trettis stated that a meeting could be arranged, so we could meet with [REDACTED] but he will not answer any questions or make comments reference the crash even with Counsel present. It was arranged later in the day, 10-08-90, however, to inspect and process V-1 at [REDACTED] residence. On Monday, 10-08-90 with the presence of Trooper Ritchie, V-1 was processed and photographed. The physical damage to V-1 matched that previously stated in Post Crash. The physical evidence gathered at the

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scene was matched to V-1. The headlight casing found at the scene matched the type found on V-1. The turn signal casing found at the scene matched the type found on V-1 and it matched the one still on V-1 due to having been oversprayed with a light tan paint, which while inspecting V-1, it was found that V-1 had been previously repainted and the turn signal casings must have been inadvertently not covered before painting. The piece of form shaped foam found at the scene matched perfectly to the piece of foam still attached to the inside of the front bumper which was in the back of V-1. Also, red transfer paint was found on the left front fender of V-1, which is similar to the red paint that is in the area of contact made between V-1 and V-2.

PRE-CONCLUSION

This traffic fatality crash appears to be the result of several possible conclusions. First is by the general disregard of a posted Stop sign and the violation of right of way within an intersection. Second is that Mr. [REDACTED] is handicapped, having only one lower limb and relies on an artificial one for the other. His vehicle, V-1, has a manual transmission which means he must operate 3 floor pedals to accelerate and decelerate V-1. Given the situation, an operator with his handicap, it can be adverse to him being able to react to an emergency without special equipment or by operating an automatic transmission vehicle. Third is that one witness, Mr. [REDACTED] did get in close proximity to Mr. [REDACTED] after the crash and Mr. [REDACTED]

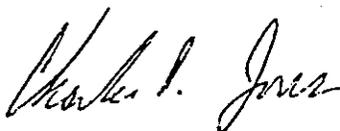
INVESTIGATIVE REPORT

stated he did notice an odor of an alcoholic beverage on Mr.

Alcohol impairment at any level, combined with Mr. physical handicap, would have greatly diminished his capability to properly react to the situation about to occur in front of him.

CONCLUSION

Based upon witness statements and physical evidence at the scene, as compared to the vehicles involved, I conclude that the V-1 listed in this report is the hit and run vehicle involved in this crash. That based upon witness statements and description of the driver of V-1, that was the driver of V-1 in this crash. That Mr. through his reckless operation of a motor vehicle by disregarding a stop sign, by violating the right of way of a vehicle he should have yielded to and by operating a motor vehicle that, given his handicap, he could not properly control in an emergency, did cause this crash to occur. The resulting crash caused the death of and serious injury to

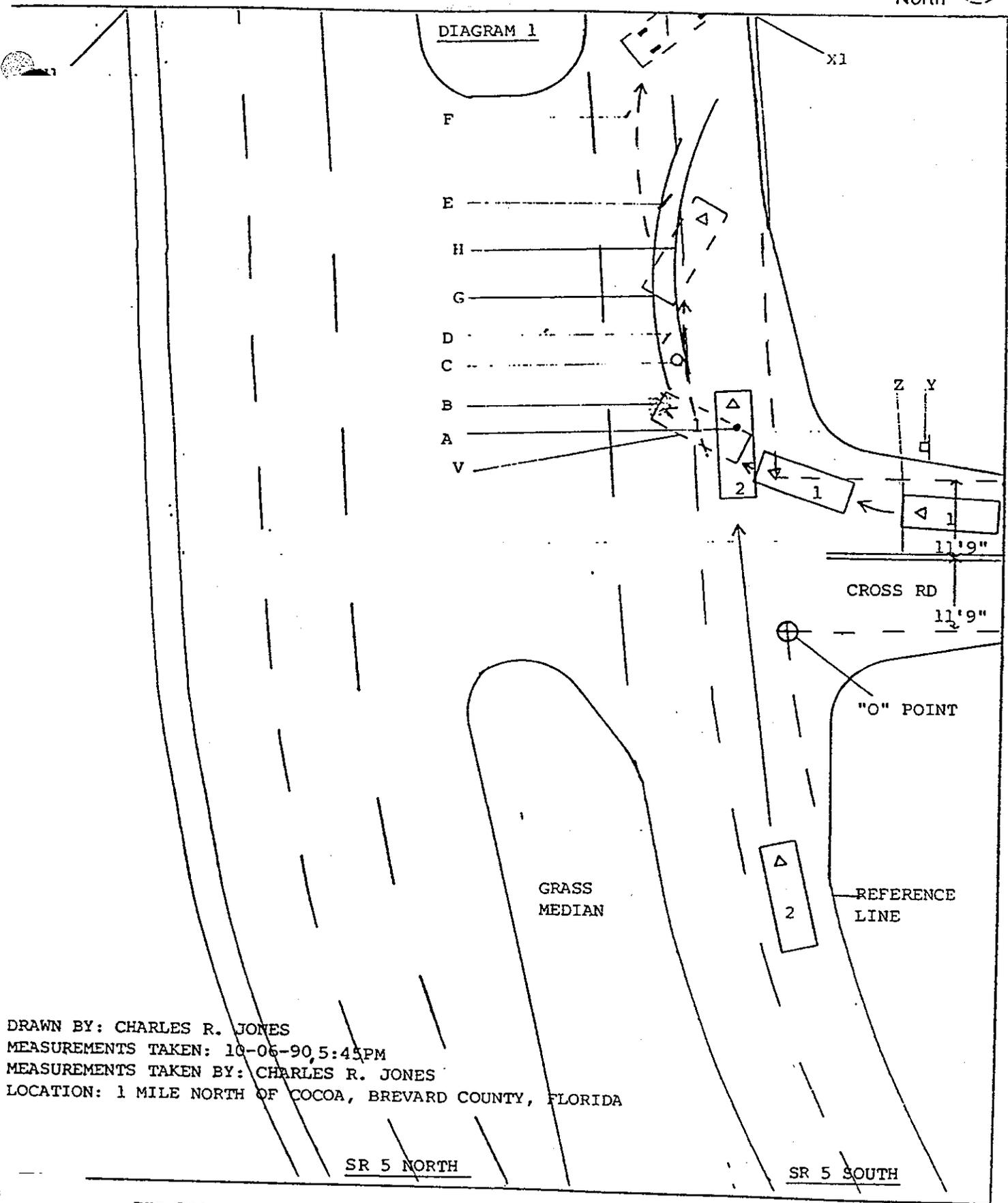


10-13-90

C. R. JONES

LAW ENFORCEMENT INVESTIGATOR I

CONSTRUCTION DIAGRAM



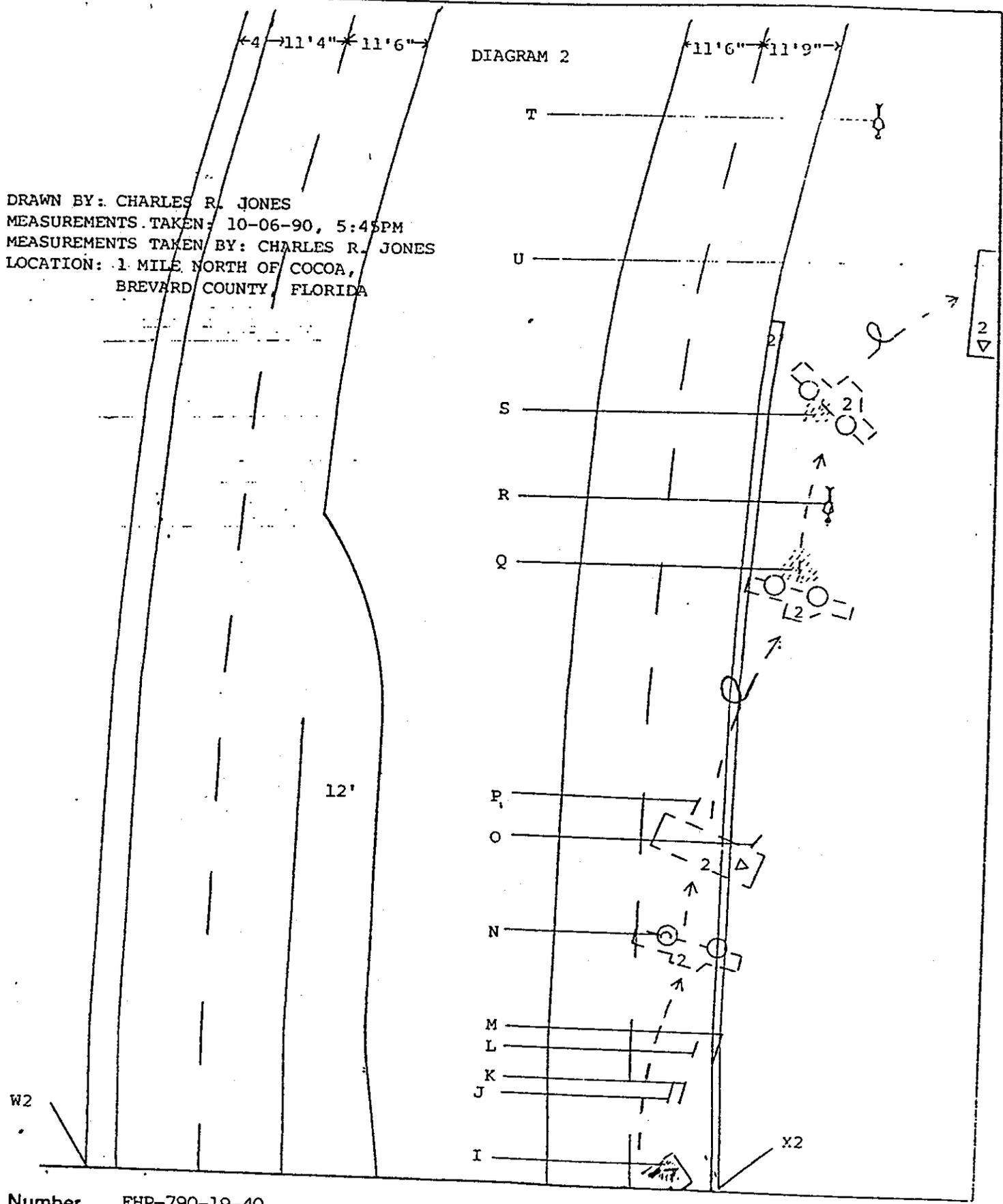
DRAWN BY: CHARLES R. JONES
MEASUREMENTS TAKEN: 10-06-90, 5:45PM
MEASUREMENTS TAKEN BY: CHARLES R. JONES
LOCATION: 1 MILE NORTH OF COCOA, BREVARD COUNTY, FLORIDA

R. ONSTRUCTION DIAGRAM

North 

DRAWN BY: CHARLES R. JONES
MEASUREMENTS TAKEN: 10-06-90, 5:45PM
MEASUREMENTS TAKEN BY: CHARLES R. JONES
LOCATION: 1 MILE NORTH OF COCOA,
BREVARD COUNTY, FLORIDA

DIAGRAM 2



RECO. RUCTION DIAGRAM LEGEND SH

- A. Headlight casing from V-1 30 feet 6 inches south of "0" point, 6 feet east of reference line.
- B. Broken glass on roadway 36 feet 6 inches south of "0" point, 16 feet east of reference line.
- C. Damaged wheel trim ring of V 2 48 feet 6 inches south of "0" point, 11 feet east of reference line.
- D. Form shaped bumper attenuator foam from V-1 49 feet 6 inches south of "0" point, 11 feet east of reference line.
- E. Plastic bumper cover from V-2 65 feet 6 inches south of "0" point, 16 feet east of reference line.
- F. Turn signal casing from V-1 79 feet 6 inches south of "0" point, 20 feet east of reference line.
- G. Left rear tire yaw mark begins 38 feet 6 inches south of "0" point, 15 feet east of reference line, ends 76 feet 6 inches south of "0" point and 12 feet east of reference line.
- H. Left front tire yaw mark begins 39 feet 6 inches south of "0" point and 12 feet east of reference line, ends 82 feet 6 inches south of "0" point and 6 feet east of reference line.
- I. Scratches left by V-2's roof and hood while overturning 98 feet 6 inches south of "0" point and 7 feet east of reference line.
- J. Gouge left by V-2 overturning 112 feet 6 inches south of "0" point and 7 feet east of reference line.
- K. Gouge left by V-2 overturning 112 feet 6 inches south of "0" point and 5 feet east of reference line.
- L. Gouge left by V-2 overturning 188 feet 6 inches south of "0" point and 3 feet east of reference line.
- M. Gouge left by V-2 overturning 118 feet 6 inches south of "0" point on reference line.
- N. Gouge left by V-2's right rear wheel 137 feet 6 inches south of "0" point and 8 feet east of reference line.
- O. Gouge left by V-2's left front tire 150 feet 6 inches south of "0" point and 4 feet west of reference line.
- P. Gouge left by V-2's left rear tire 155 feet 6 inches south of "0" point and 5 feet east of reference line.
- Q. Area of disturbed earth left by V-2 while overturning 192 feet 6 inches south of "0" point and 9 feet west of reference line.

- R. Right front passenger of V-2 ejected on shoulder 200 feet 6 inches south of "0" point and 12 feet west of reference line.
- S. Area of disturbed earth left by V-2 while overturning 217 feet 6 inches south of "0" point and 7 feet west of reference line.
- T. Driver of V-2 ejected onto shoulder 232 feet 6 inches south of "0" point 9 feet west of reference line.
- U. Final rest of V-2 with right front tire 277 feet 6 inches south of "0" point and 29 feet west of reference line and right rear tire 247 feet 6 inches south of "0" point and 28 feet west of reference line.
- V. Final rest of V-1, as estimated by witnesses.
- W1. Line up mark on Diagram 1 with V-2 on Diagram 2.
- W2. Line up mark on Diagram 2 with W1 on Diagram 1.
- X1. Line up mark on Diagram 1 with X2 on Diagram 2.
- X2. Line up mark on Diagram 2 with X1 on Diagram 1.
- Y. Stop sign on Cross Road 21 feet west of intersection.
- Z. Stop line for eastbound traffic on Cross Road 18 feet west of intersection.

Location

DATE OF ACCIDENT: 1/06/90 TIME OF ACCIDENT: 5:45 AM
 TIME OFFICER NOTIFIED: 5:50 PM TIME OFFICER ARRIVED: 5:56 PM
 INVEST. AGENCY REPORT NUMBER: 90-26-07559-19
 HSMV ACCIDENT REPORT NUMBER: 115774325

COUNTY/CITY CODE: 19-00 CITY OR TOWN (Check if in City or Town): COCOA COUNTY: BREVARD

AT NODE NO. 01444 OR FEET/MILES FROM NODE NO. ROAD 01445 NO. OF LANES 4 DIVIDED 2 UNDIVIDED SR 5

AT INTERSECTION OF CROSS RD. OF INTERSECTION OF

Vehicle 1

DRIVER 1: PHOENIX ACTION 2: 80/3/81 YEAR: 80 MAKE: TOYO TYPE: 01 VEH. LICENSE NUMBER: RA42 STATE: FL VEHICLE IDENTIFICATION NUMBER: [REDACTED]

HAZARDOUS MATERIALS BEING TRANSPORTED: 1 None 2 Flammable Liquid 3 Explosives 4 Poisonous Gas 5 Corrosive Materials 6 Radioactive Materials 7 Other

HAZARDOUS MATERIALS BEING TRANSPORTED: 1 None 2 Flammable Liquid 3 Explosives 4 Poisonous Gas 5 Corrosive Materials 6 Radioactive Materials 7 Other

HAZARDOUS MATERIALS BEING TRANSPORTED: 1 None 2 Flammable Liquid 3 Explosives 4 Poisonous Gas 5 Corrosive Materials 6 Radioactive Materials 7 Other

HAZARDOUS MATERIALS BEING TRANSPORTED: 1 None 2 Flammable Liquid 3 Explosives 4 Poisonous Gas 5 Corrosive Materials 6 Radioactive Materials 7 Other

Vehicle 2

DRIVER 1: PHOENIX ACTION 2: 88/3/81 YEAR: 88 MAKE: FORD TYPE: 04 VEH. LICENSE NUMBER: 1FTBR10A3JU STATE: FL VEHICLE IDENTIFICATION NUMBER: [REDACTED]

HAZARDOUS MATERIALS BEING TRANSPORTED: 1 None 2 Flammable Liquid 3 Explosives 4 Poisonous Gas 5 Corrosive Materials 6 Radioactive Materials 7 Other

HAZARDOUS MATERIALS BEING TRANSPORTED: 1 None 2 Flammable Liquid 3 Explosives 4 Poisonous Gas 5 Corrosive Materials 6 Radioactive Materials 7 Other

HAZARDOUS MATERIALS BEING TRANSPORTED: 1 None 2 Flammable Liquid 3 Explosives 4 Poisonous Gas 5 Corrosive Materials 6 Radioactive Materials 7 Other

HAZARDOUS MATERIALS BEING TRANSPORTED: 1 None 2 Flammable Liquid 3 Explosives 4 Poisonous Gas 5 Corrosive Materials 6 Radioactive Materials 7 Other

Code Information

01 Passenger Vehicle	15 Taxicab	RESIDENCE (DRIVER ONLY)	PHYSICAL DEFECTS	ALCOHOL/DRUG USE	LOCATION ON VEHICLE
02 Passenger Van	16 Public School Bus	1 County of Accident	1 No Defects Known	1 Not Drinking or Using Drugs	1 Front Left
03 Recreational	17 Private School Bus	2 Elsewhere in State	2 Eyesight Defect	2 Alcohol-Under Influence	2 Front Center
04 Truck (Light) Pickup	18 City Transit Bus	3 Non-Resident State	3 Fatigue/Asleep	3 Drugs-Under Influence	3 Front Right
05 Truck (Heavy)	19 Commercial Bus	4 Foreign 5 Unknown	4 Hearing Defect	4 Alcohol & Drugs-Under Influence	4 Rear Left
06 Truck-Tractor	20 Other Type Bus	LICENSE TYPE	5 ILL	5 Had Been Drinking	5 Rear Center
07 Motorcycle	21 Special Mobile Equipment	1 Operator 4 Motor-cycle	6 Seizure, Epilepsy, Blackout	6 Pending BAC Test Result	6 Rear Right
08 Off-Road Vehicle	22 Farm Equipment	2 Chauffeur	7 Other Physical Defect	SAFETY EQUIPMENT IN USE	7 In Body of Truck
09 Moped	23 Government	3 Res Operator 5 None	INJURY SEVERITY	1 Not in Use	8 Bus Passenger
10 Bicycle	24 Military	RACE	1 No Injury	2 Seat Belt/Shoulder Harness	9 Other
11 Law Enforcement Vehicle	25 Train	1 White	2 Possible Injury	3 Child Restraint	EJECTED
12 Fire Vehicle	26 Trailer	2 Black	3 Non-Incapacitating Injury	4 Safety Helmet/Eye Protection	1 No
13 Ambulance	27 Towed Vehicle	3 Hispanic	4 Incapacitating Injury	5 Air Bag	2 Yes
14 Rescue Unit	28 Other	4 Other	5 Fatal (Within 90 Days) Injury	6 Other	3 Partial
			6 Non-Traffic Fatality		

REPORTOR - RANK AND SIGNATURE: D. R. RITCHIE
 ID/BADGE NUMBER: 1222/1354 DEPARTMENT: [REDACTED]

DRIVER 1 ACTION 2 3/4	YEAR	MAKE	TYPE	LICENSE NUMBER	STATE	VEHICLE IDENTIFICATION	PORT OF IMPACT
VEHICLE TRAVELING <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> OH				Est. MPH	Postal Speed	EST. VEHICLE DAMAGE	EST. TRAILER DAMAGE
INSURANCE CO. (LIABILITY OR PIP)				POLICY NUMBER		VEHICLE REMOVED BY	
OWNER'S FULL NAME (Check if Driver <input type="checkbox"/>)				CURRENT ADDRESS (Number and Street)		CITY AND STATE	
OWNER'S FULL NAME (Trailer or Towed Vehicle)				CURRENT ADDRESS (Number and Street)		CITY AND STATE	
DRIVER (Exactly as on Driver's License)/Pedestrian				CURRENT ADDRESS (Number and Street)		CITY AND STATE	
DRIVER'S LICENSE NUMBER				STATE	LIC. TYPE	BAC TEST RESULTS	
HAZARDOUS MATERIALS BEING TRANSPORTED				DRIVING ABILITY QUESTIONABLE		DRIVER'S PHONE NO.	
PASSENGER'S NAME				CURRENT ADDRESS		CITY & STATE/ZIP CODE	
PASSENGER'S NAME				CURRENT ADDRESS		CITY & STATE/ZIP CODE	
PASSENGER'S NAME				CURRENT ADDRESS		CITY & STATE/ZIP CODE	

PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP

CONTRIBUTING CAUSES-DRIVER/PED.		VEHICLE DEFECT		VEHICLE MOVEMENT		VEHICLE FUNCTION	
01 No Improper Driving/Action	02 Careless Driving	03 Failed to Yield Right-of-Way	04 Improper Backing	05 Improper Lane Change	06 Improper Turn	07 Alcohol-Under Influence	08 Drugs-Under Influence
09 Alcohol & Drugs-Under Influence	10 Followed Too Closely	11 Disregarded Traffic Signal	12 Exceeded Safe Speed Limit	13 Exceeded Stop Sign	14 Improper Passing	15 Drove Left of Center	16 Exceeded Stated Speed Limit
17 Obstructing Traffic	18 Improper Load	19 Disregarded Other Traffic Control	20 Driving Wrong Side/Way	21 All Other			
VEHICLE MODIFIED		LOCATION ON ROADWAY		PEDESTRIAN ACTION			
01 Yes	02 No	03 Not Applicable	01 On Road	02 Not On Road	03 Shoulder	04 Median	05 Turn Lane/Safety Zone
				01 Crossing Not at Intersection	02 Crossing at Intersection	03 Walking Along Road With Traffic	04 Walking Along Road Against Traffic
				05 Pushing/Working on Vehicle in Road	06 Other Working in Road	07 Stopping/Paying in Road	08 Other

FIRST/SUBSEQUENT HARMFUL EVENT		ROAD SYSTEM IDENTIFIER		LIGHTING CONDITION	
01 Collision With MV in Transport (Head-on)	02 Collision With MV in Transport (Angle)	03 Collision With MV in Transport (Left Turn)	04 Collision With Parked Car	05 Collision With MV in Transport (Struck)	06 Collision With MV in Transport (Backed into)
07 Collision With MV in Transport (Right Turn)	08 MV Hit Other Fixed Object	09 MV Hit Utility Pole/Light Pole	10 Collision With MV in Transport (Head-on)	11 Collision With Pedestrian	12 Collision With Moped
13 MV Hit Tree/Shrubbery	14 Collision With Bicycle	15 Collision With Bicycle (Bike Lane)	16 MV Ran into Ditch/Culvert	17 Ran Off Road into Water	18 Overturned
19 MV Hit Fence	20 Collision With MV on Other Roadway	21 MV Hit Sign/Sign Post	22 MV Hit Guardrail	23 Collision With Fixed Object Above Road	24 Fire
25 Collision With Animal	26 Collision With Moveable Object On Road	27 MV Hit Concrete Barrier Wall	28 MV Hit Bridge/Per/Abutment Rail	29 Occupant Fell From Vehicle	30 Tractor/Trailer Jackknifed
		31 Collision With Construction Barricade/Sign in Road	32 Collision With Traffic Gate	33 Collision With Crash Attenuators	34 Collision With Train
		35 Explosion	36 All Other		
		ROAD SURFACE/CONDITION		WEATHER	
		01 Dry	02 Wet	03 Slippery	04 Icy
		05 All Other	01 Clear	02 Cloudy	03 Rain
				04 Fog	05 All Other
		ROAD SURFACE TYPE		TRAFFICWAY CHARACTER	
		01 Slag/Gravel/Stone	02 Blacktop	03 Brick/Block	04 Concrete
		05 Concrete	06 Dirt	77 All Other	

CONTRIBUTING CAUSES-ROAD		CONTRIBUTING CAUSES-ENVIRONMENT		TRAFFIC CONTROL		SITE LOCATION		TRAFFICWAY CHARACTER	
01 No Defects	02 Obstruction With/Without Warning	03 Road Under Repair/Construction	04 Loose Surface Materials	05 Shoulders-Soft/Low/High	06 Holes/Ruts/Uneven Paved Edge	07 Standing Water	08 Worn/Polished Road Surface	09 All Other	01 Straight-Level
02 Straight-Upgrade/Downgrade	03 Curve-Level	04 Curve-Upgrade/Downgrade			01 Private Property	02 All Other	01 Paved	02 Unpaved	
		01 Vision Not Obscured	02 Inclement Weather	03 Parked/Stopped Vehicle	04 Trees/Crops/Bushes	05 Load on Vehicle	06 Bulking/Fixed Object	07 Signs/Billboards	08 Fog
		09 Smoke	10 Glare	77 All Other					
				01 No Control	02 Speed Control Zone	03 Traffic Signal	04 Stop Sign	05 Yield Sign	06 Flashing Light
				07 Railroad Signal	08 Officer/Guard/Flagman	09 Posted No U-Turn	77 All Other		01 Not At Intersection/RR X'ing/Bridge
								02 At Intersection	
								03 Influenced By Intersection	
								04 Driveway Access	
								05 Railroad Crossing	
								06 Bridge	
								07 Entrance Ramp	
								08 Exit Ramp	
								09 Parking Lot-Public	
								10 Parking Lot-Private	

WITNESS NAME	ADDRESS	CITY & STATE	ZIP
1		COCOA, FL	
2		COCOA, FL	
VIOLATOR	FL STATUTE NUMBER	NAME	CHARGE
			CITATION NUMBER

FLORIDA TRAFFIC ACCIDENT REPT.

DATE CONTINUATION

AL. TR. DEPT. OF HIGHWAY SAFETY & MOTOR VEHICLES TRAFFIC ACCIDENT RECORDS

COL. / CITY CODE 19-00 DATE OF ACCIDENT 10-06-90 INVEST. AGENCY RE. NUMBER 90-26-07559-19

FLSMV ACCIDENT REPORT NUMBER 115774325

Vehicle information section including driver action, year, make, type, license number, state, and vehicle identification number.

Insurance and damage section including insurance co., policy number, vehicle damage, and trailer damage.

Owner information section including owner's full name, current address, city and state, and zip code.

Owner information section for trailer or towed vehicle.

Driver information section including driver's name, current address, city and state, zip code, and date of birth.

Driver's license section including license number, state, license type, BAC test results, and other details.

Hazardous materials section including types of materials being transported and driver's phone number.

Passenger information section including passenger's name, current address, city and state, zip code, age, sex, and other details.

Passenger information section for another passenger.

Vehicle information section for a second vehicle, including driver action, year, make, type, license number, state, and vehicle identification number.

Insurance and damage section for the second vehicle.

Owner information section for the second vehicle.

Owner information section for trailer or towed vehicle of the second vehicle.

Driver information section for the second vehicle.

Driver's license section for the second vehicle.

Hazardous materials section for the second vehicle.

Passenger information section for the second vehicle.

Passenger information section for another passenger of the second vehicle.

Vehicle information section for a third vehicle.

Insurance and damage section for the third vehicle.

Owner information section for the third vehicle.

Owner information section for trailer or towed vehicle of the third vehicle.

Driver information section for the third vehicle.

Driver's license section for the third vehicle.

Hazardous materials section for the third vehicle.

Passenger information section for the third vehicle.

Officer information section including rank and signature (D. R. RITCHIE), ID/badge number (1222/1354), and department.

PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP

CONTRIBUTING CAUSES-DRIVER/PEO		DEFECT VEHICLE			VEHICLE MOVEMENT			VEHICLE FUNCTION		
01 No Improper Driving/Action	<input type="checkbox"/>	01 No Defects	<input type="checkbox"/>	01 Straight Ahead	<input type="checkbox"/>	01 None	<input type="checkbox"/>	01 None	<input type="checkbox"/>	
02 Careless Driving	<input type="checkbox"/>	02 Def. Brakes	<input type="checkbox"/>	02 Starting/Stopped/Stopped	<input type="checkbox"/>	02 Pulling Semi-Trailer	<input type="checkbox"/>	02 Pulling Semi-Trailer	<input type="checkbox"/>	
03 Failed to Yield Right-of-Way	<input type="checkbox"/>	03 Worn/Smooth Tires	<input type="checkbox"/>	03 Making Left Turn	<input type="checkbox"/>	03 Pulling Other Veh.	<input type="checkbox"/>	03 Pulling Other Veh.	<input type="checkbox"/>	
04 Improper Backing	<input type="checkbox"/>	04 Defective/Improper Lights	<input type="checkbox"/>	04 Backing	<input type="checkbox"/>	04 Emergency Operation	<input type="checkbox"/>	04 Emergency Operation	<input type="checkbox"/>	
05 Improper Lane Change	<input type="checkbox"/>	05 Puncture/Blowout	<input type="checkbox"/>	05 Making Right Turn	<input type="checkbox"/>	05 Pulling Tanker/Trailer/Scrubber/Bulldozer	<input type="checkbox"/>	05 Pulling Tanker/Trailer/Scrubber/Bulldozer	<input type="checkbox"/>	
06 Improper Turn	<input type="checkbox"/>	06 Steering Mech.	<input type="checkbox"/>	06 Changing Lanes	<input type="checkbox"/>	06 Pulling House Trailer	<input type="checkbox"/>	06 Pulling House Trailer	<input type="checkbox"/>	
07 Alcohol-Under Influence	<input type="checkbox"/>	07 Windshield Wipers	<input type="checkbox"/>	07 Entering/Leaving Parking Space	<input type="checkbox"/>	07 Pulling Small Trailer	<input type="checkbox"/>	07 Pulling Small Trailer	<input type="checkbox"/>	
08 Drugs-Under Influence	<input type="checkbox"/>	08 Equipment/Vehicle Defect	<input type="checkbox"/>	08 Properly Parked	<input type="checkbox"/>	08 Veh Being Towed/Pushed	<input type="checkbox"/>	08 Veh Being Towed/Pushed	<input type="checkbox"/>	
09 Alcohol & Drugs-Under Influence	<input type="checkbox"/>	77 All Other (Explain in Narrative)	<input type="checkbox"/>	09 Improperly Parked	<input type="checkbox"/>	09 Pulling Pole Trailer	<input type="checkbox"/>	09 Pulling Pole Trailer	<input type="checkbox"/>	
10 Followed Too Closely	<input type="checkbox"/>			10 Making U-Turn	<input type="checkbox"/>					
11 Disregarded Traffic Signal	<input type="checkbox"/>									
12 Exceeded Safe Speed Limit	<input type="checkbox"/>									
13 Disregarded Stop Sign	<input type="checkbox"/>									
14 Failed to Maintain Equip/Vehicle	<input type="checkbox"/>									
15 Improper Passing	<input type="checkbox"/>									
16 Drove Left of Center	<input type="checkbox"/>									
17 Exceeded Stated Speed Limit	<input type="checkbox"/>									
18 Obstructing Traffic	<input type="checkbox"/>									
19 Improper Load	<input type="checkbox"/>									
20 Disregarded Other Traffic Control	<input type="checkbox"/>									
21 Driving Wrong Side/Way	<input type="checkbox"/>									
22 All Other (Explain in Narrative)	<input type="checkbox"/>									

VEHICLE MODIFIED	LOCATION ON ROADWAY	PEDESTRIAN ACTION
01 Yes	01 On Road	01 Crossing Not at Intersection
02 No	02 Not On Road	02 Crossing at Intersection
03 Not Applicable	03 Shoulder	03 Walking Along Road With Traffic
	04 Median	04 Walking Along Road Against Traffic
	05 Turn Lane/Safety Zone	05 Pushing/Working on Vehicle in Road
		06 Other Working in Road
		07 Stopping/Parking in Road
		08 Unlawful

ISS-NAME	ADDRESS	CITY & STATE	ZIP
	SHARPES, FL		
	COCOA, FL		
INVESTIGATION MADE AT SCENE?	INVESTIGATION COMPLETE?	DATE OF REPORT	PHOTOS TAKEN?
Yes	<input type="checkbox"/> 1 Yes	10/016/910	<input type="checkbox"/> 1 Yes
No-Where?	<input checked="" type="checkbox"/> 2 No-Why?		<input type="checkbox"/> 2 No
FL STATUTE NUMBER	NAME	CHARGE	CITATION NUMBER

EMS INFO: FATALS MAY	TIME EMS NOTIFIED 5:47	TIME EMS ARRIVED AM 5:53	COUNTY/CITY CODE 19-00	DATE OF ACCIDENT 10-06-90	INVEST. AGENCY REPORT NUMBER 90-26-07559-19	HSMV ACCIDENT REPORT NUMBER 115774325
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V-1 WAS TRAVELING EAST ON CROSS ROAD, WEST OF SR 5. V-2 WAS TRAVELING SOUTH ON SR 5 IN THE RIGHT HAND LANE, NORTH OF CROSS ROAD. V-1 WAS SAID TO HAVE RAN STOP SIGN BY WITNESSES. V-1 STRUCK V-2 IN THE RIGHT REAR WITH FRONT OF V-1. V-2 ROTATED CLOCKWISE APPROXIMATELY 90 DEGREES. V-2 SLID SIDWAYS PRIOR TO V-2 ROLLING. V-2 ROLLED APPROXIMATELY FOUR TIMES. DRIVER AND PASSENGER OF V-2 WERE EJECTED ONTO SHOULDER WHILE V-2 ROLLED. V-2 CAME TO REST ON WEST SIDE OF DITCH ON WEST SIDE OF SR 5 SOUTH OF CROSS ROAD. V-1 STOPPED TO PICK UP FRONT BUMPER AND LEFT SCENE, TRAVELING NORTH ON SR 5.

NAME OF DECEASED: [REDACTED]

DATE OF BIRTH: [REDACTED]

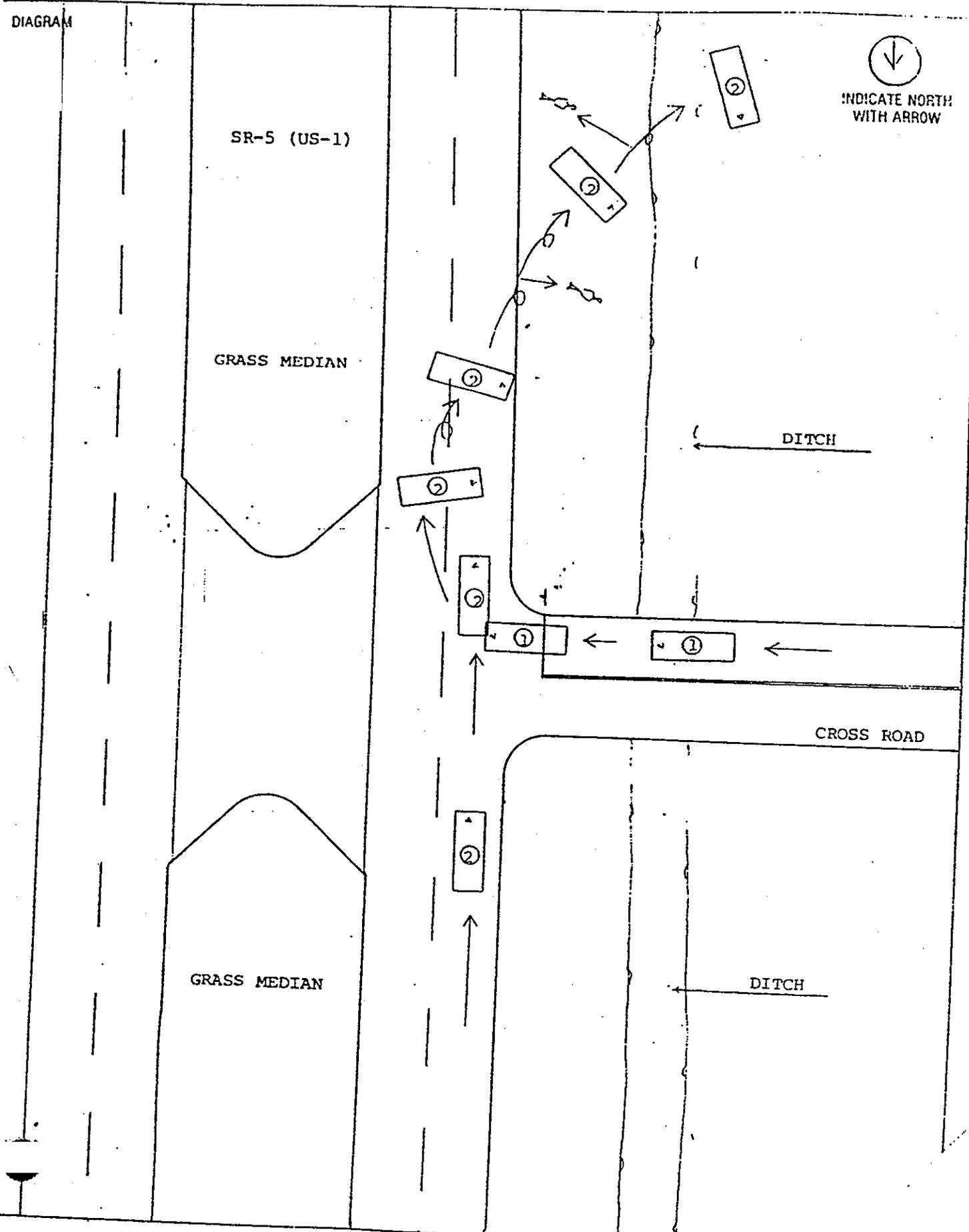
DATE OF DEATH: 10-06-90

TIME OF DEATH: 6:30 PM

TRAFFIC HOMICIDE INVESTIGATOR AND PHOTOS BY L.E.I.1 C. R. JONES, ID#858

TRAFFIC HOMICIDE CASE NUMBER FHP 790-19-40

EMERGENCY AID GIVEN BY - NAME: REWARD E.M.S.	<input type="checkbox"/> 1 Physician or Nurse <input checked="" type="checkbox"/> 2 Paramedic Or EMT	<input type="checkbox"/> 3 Police Officer <input type="checkbox"/> 4 Certified 1st Aider <input type="checkbox"/> 5 Other	INJURED TAKEN TO: WUESTHOFF HOSPITAL	BY - NAME: B.A.S.
AS INVESTIGATION MADE AT SCENE? 1 Yes 2 No-Where?	IS INVESTIGATION COMPLETE? <input type="checkbox"/> 1 Yes <input checked="" type="checkbox"/> 2 No-Why?	PENDING LOCATION OF DRIVER-1	DATE OF REPORT 11 0 0 16 9 10	PHOTOS TAKEN? <input checked="" type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No
INVESTIGATOR - RANK AND SIGNATURE D. R. RITCHIE	ID/BADGE NUMBER 1222/1354	DEPARTMENT	<input checked="" type="checkbox"/> 3 Investigating Agency <input type="checkbox"/> 4 Other	<input checked="" type="checkbox"/> 1 FHP <input type="checkbox"/> 2 SO <input type="checkbox"/> 3 CPD <input type="checkbox"/> 4 OTHER



SR-5 (US-1)

GRASS MEDIAN

GRASS MEDIAN

INDICATE NORTH
WITH ARROW

DITCH

CROSS ROAD

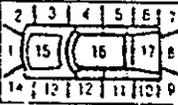
DITCH

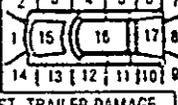
FLORIDA TRAFFIC CRASH REPORT

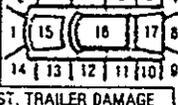
UPDATE CONTINUATION

MAIL TO: DEPT. OF HIGHWAY SAFETY & MOTOR VEHICLES
TRAFFIC CRASH RECORDS
TALLAHASSEE, FLORIDA 32399-0500

DO NOT WRITE IN THIS SPACE

COUNTY/CITY CODE 19-00		DATE OF CRASH 10-05-90		INVEST. AGENCY REPORT NUMBER 90-26-07559-19		HSMV CRASH REPORT NUMBER 115774325		
DRIVER 1 ACTION 2 M/A 3	YEAR	MAKE	TYPE	VEH. LICENSE NUMBER	STATE	VEHICLE IDENTIFICATION NUMBER		
TRAILER OR TOWED VEHICLE INFORMATION								
VEHICLE TRAVELING <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W ON			At	Est. MPH	Posted Speed	EST. VEHICLE DAMAGE	EST. TRAILER DAMAGE	
INSURANCE CO. (LIABILITY OR PIP)			POLICY NUMBER		VEHICLE REMOVED BY:			
OWNER'S FULL NAME (Check if Driver <input type="checkbox"/>)			CURRENT ADDRESS (Number and Street)		CITY AND STATE		ZIP CODE	
OWNER'S FULL NAME (Trailer or Towed Vehicle)			CURRENT ADDRESS (Number and Street)		CITY AND STATE		ZIP CODE	
DRIVER (Exactly as on Driver's License)/Pedestrian			CURRENT ADDRESS (Number and Street)		CITY AND STATE		ZIP CODE	
DRIVER'S LICENSE NUMBER			STATE	LIC. TYPE	BAC TEST	RESULTS	AL/DRUG	
HAZARDOUS MATERIALS BEING TRANSPORTED			1 None		3 Explosives		5 Corrosive Materials	
# PASSENGER'S NAME			CURRENT ADDRESS		CITY & STATE/ZIP CODE		AGE	
# PASSENGER'S NAME			CURRENT ADDRESS		CITY & STATE/ZIP CODE		AGE	

COUNTY/CITY CODE		DATE OF CRASH		INVEST. AGENCY REPORT NUMBER		HSMV CRASH REPORT NUMBER		
DRIVER 1 ACTION 2 M/A 3	YEAR	MAKE	TYPE	VEH. LICENSE NUMBER	STATE	VEHICLE IDENTIFICATION NUMBER		
TRAILER OR TOWED VEHICLE INFORMATION								
VEHICLE TRAVELING <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W ON			At	Est. MPH	Posted Speed	EST. VEHICLE DAMAGE	EST. TRAILER DAMAGE	
INSURANCE CO. (LIABILITY OR PIP)			POLICY NUMBER		VEHICLE REMOVED BY:			
OWNER'S FULL NAME (Check if Driver <input type="checkbox"/>)			CURRENT ADDRESS (Number and Street)		CITY AND STATE		ZIP CODE	
OWNER'S FULL NAME (Trailer or Towed Vehicle)			CURRENT ADDRESS (Number and Street)		CITY AND STATE		ZIP CODE	
DRIVER (Exactly as on Driver's License)/Pedestrian			CURRENT ADDRESS (Number and Street)		CITY AND STATE		ZIP CODE	
DRIVER'S LICENSE NUMBER			STATE	LIC. TYPE	BAC TEST	RESULTS	AL/DRUG	
HAZARDOUS MATERIALS BEING TRANSPORTED			1 None		3 Explosives		5 Corrosive Materials	
# PASSENGER'S NAME			CURRENT ADDRESS		CITY & STATE/ZIP CODE		AGE	
# PASSENGER'S NAME			CURRENT ADDRESS		CITY & STATE/ZIP CODE		AGE	

COUNTY/CITY CODE		DATE OF CRASH		INVEST. AGENCY REPORT NUMBER		HSMV CRASH REPORT NUMBER		
DRIVER 1 ACTION 2 M/A 3	YEAR	MAKE	TYPE	VEH. LICENSE NUMBER	STATE	VEHICLE IDENTIFICATION NUMBER		
TRAILER OR TOWED VEHICLE INFORMATION								
VEHICLE TRAVELING <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W ON			At	Est. MPH	Posted Speed	EST. VEHICLE DAMAGE	EST. TRAILER DAMAGE	
INSURANCE CO. (LIABILITY OR PIP)			POLICY NUMBER		VEHICLE REMOVED BY:			
OWNER'S FULL NAME (Check if Driver <input type="checkbox"/>)			CURRENT ADDRESS (Number and Street)		CITY AND STATE		ZIP CODE	
OWNER'S FULL NAME (Trailer or Towed Vehicle)			CURRENT ADDRESS (Number and Street)		CITY AND STATE		ZIP CODE	
DRIVER (Exactly as on Driver's License)/Pedestrian			CURRENT ADDRESS (Number and Street)		CITY AND STATE		ZIP CODE	
DRIVER'S LICENSE NUMBER			STATE	LIC. TYPE	BAC TEST	RESULTS	AL/DRUG	
HAZARDOUS MATERIALS BEING TRANSPORTED			1 None		3 Explosives		5 Corrosive Materials	
# PASSENGER'S NAME			CURRENT ADDRESS		CITY & STATE/ZIP CODE		AGE	
# PASSENGER'S NAME			CURRENT ADDRESS		CITY & STATE/ZIP CODE		AGE	

FLORIDA TRAFFIC CRASH REPORT

DO NOT WRITE IN THIS SPACE

UPDATE CONTINUATION

MAIL TO: DEPT. OF HIGHWAY SAFETY & MOTOR VEHICLES

TRAFFIC CRASH RECORDS
TALLAHASSEE, FLORIDA 32399-0500

COUNTY/CITY CODE 19-00	DATE OF CRASH 10-05-90	INVEST. AGENCY REPORT NUMBER 90-26-07559-19	HSMV CRASH REPORT NUMBER 115774325
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DRIVER 1 <input type="checkbox"/> Pedestrian ACTION 2 <input type="checkbox"/> Hit & Run 3 <input type="checkbox"/> B/A	YEAR	MAKE	TYPE	VEH. LICENSE NUMBER	STATE	VEHICLE IDENTIFICATION NUMBER	POINT OF IMPACT CIRCLE AREA OF DAMAGE
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VEHICLE TRAVELING <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W ON	At	Est. MPH	Posted Speed	EST. VEHICLE DAMAGE \$	1 Disabling 2 Functional 3 No Damage	EST. TRAILER DAMAGE \$	17 Undercarriage 18 Overturn 19 Windshield 21 Fire 22 Trailer
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INSURANCE CO. (LIABILITY OR PIP)	POLICY NUMBER	VEHICLE REMOVED BY:	1 Tow 2 Tow Owner's Request 3 Driver 4 Other
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OWNER'S FULL NAME (Check if Driver <input type="checkbox"/>)	CURRENT ADDRESS (Number and Street)	CITY AND STATE	ZIP CODE
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OWNER'S FULL NAME (Trailer or Towed Vehicle)	CURRENT ADDRESS (Number and Street)	CITY AND STATE	ZIP CODE
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DRIVER (Exactly as on Driver's License)/Pedestrian	CURRENT ADDRESS (Number and Street)	CITY AND STATE	ZIP CODE	DATE OF BIRTH
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DRIVER'S LICENSE NUMBER	STATE	LC TYPE	BAC TEST 1 Blood 3 Urine 2 Breath 4 Refused 5 None	RESULTS	AL/DRUG	PHYS. DEF.	RES	RACE	SEX	HU	S EQUIP.	ELECT.
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HAZARDOUS MATERIALS BEING TRANSPORTED	1 None 2 Flammable Liquid 3 Explosives 4 Poisonous Gas 5 Corrosive Materials 6 Radioactive Materials 7 Other	Driving Ability Questionable 1 YES 2 NO RECOMMEND RE-EXAM 3 NOT APPLICABLE	11 YES, Explain in Narrative	Driver's Phone No
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PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE/ZIP CODE	AGE	LOC	HU	S EQUIP.	ELECT.
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PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE/ZIP CODE	AGE	LOC	HU	S EQUIP.	ELECT.
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DRIVER 1 <input type="checkbox"/> Pedestrian ACTION 2 <input type="checkbox"/> Hit & Run 3 <input type="checkbox"/> B/A	YEAR	MAKE	TYPE	VEH. LICENSE NUMBER	STATE	VEHICLE IDENTIFICATION NUMBER	POINT OF IMPACT CIRCLE AREA OF DAMAGE
---	------	------	------	---------------------	-------	-------------------------------	--

TRAILER OR TOWED VEHICLE INFORMATION	VEHICLE TRAVELING <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W ON	At	Est. MPH	Posted Speed	EST. VEHICLE DAMAGE \$	1 Disabling 2 Functional 3 No Damage	EST. TRAILER DAMAGE \$	17 Undercarriage 18 Overturn 19 Windshield 21 Fire 22 Trailer
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INSURANCE CO. (LIABILITY OR PIP)	POLICY NUMBER	VEHICLE REMOVED BY:	1 Tow 2 Tow Owner's Request 3 Driver 4 Other
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OWNER'S FULL NAME (Check if Driver <input type="checkbox"/>)	CURRENT ADDRESS (Number and Street)	CITY AND STATE	ZIP CODE
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OWNER'S FULL NAME (Trailer or Towed Vehicle)	CURRENT ADDRESS (Number and Street)	CITY AND STATE	ZIP CODE
--	-------------------------------------	----------------	----------

DRIVER (Exactly as on Driver's License)/Pedestrian	CURRENT ADDRESS (Number and Street)	CITY AND STATE	ZIP CODE	DATE OF BIRTH
--	-------------------------------------	----------------	----------	---------------

DRIVER'S LICENSE NUMBER	STATE	LC TYPE	BAC TEST 1 Blood 3 Urine 2 Breath 4 Refused 5 None	RESULTS	AL/DRUG	PHYS. DEF.	RES	RACE	SEX	HU	S EQUIP.	ELECT.
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HAZARDOUS MATERIALS BEING TRANSPORTED	1 None 2 Flammable Liquid 3 Explosives 4 Poisonous Gas 5 Corrosive Materials 6 Radioactive Materials 7 Other	Driving Ability Questionable 1 YES 2 NO RECOMMEND RE-EXAM 3 NOT APPLICABLE	11 YES, Explain in Narrative	Driver's Phone No
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PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE/ZIP CODE	AGE	LOC	HU	S EQUIP.	ELECT.
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PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE/ZIP CODE	AGE	LOC	HU	S EQUIP.	ELECT.
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DRIVER 1 <input type="checkbox"/> Pedestrian ACTION 2 <input type="checkbox"/> Hit & Run 3 <input type="checkbox"/> B/A	YEAR	MAKE	TYPE	VEH. LICENSE NUMBER	STATE	VEHICLE IDENTIFICATION NUMBER	POINT OF IMPACT CIRCLE AREA OF DAMAGE
---	------	------	------	---------------------	-------	-------------------------------	--

TRAILER OR TOWED VEHICLE INFORMATION	VEHICLE TRAVELING <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W ON	At	Est. MPH	Posted Speed	EST. VEHICLE DAMAGE \$	1 Disabling 2 Functional 3 No Damage	EST. TRAILER DAMAGE \$	17 Undercarriage 18 Overturn 19 Windshield 21 Fire 22 Trailer
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INSURANCE CO. (LIABILITY OR PIP)	POLICY NUMBER	VEHICLE REMOVED BY:	1 Tow 2 Tow Owner's Request 3 Driver 4 Other
----------------------------------	---------------	---------------------	---

OWNER'S FULL NAME (Check if Driver <input type="checkbox"/>)	CURRENT ADDRESS (Number and Street)	CITY AND STATE	ZIP CODE
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OWNER'S FULL NAME (Trailer or Towed Vehicle)	CURRENT ADDRESS (Number and Street)	CITY AND STATE	ZIP CODE
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DRIVER (Exactly as on Driver's License)/Pedestrian	CURRENT ADDRESS (Number and Street)	CITY AND STATE	ZIP CODE	DATE OF BIRTH
--	-------------------------------------	----------------	----------	---------------

DRIVER'S LICENSE NUMBER	STATE	LC TYPE	BAC TEST 1 Blood 3 Urine 2 Breath 4 Refused 5 None	RESULTS	AL/DRUG	PHYS. DEF.	RES	RACE	SEX	HU	S EQUIP.	ELECT.
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HAZARDOUS MATERIALS BEING TRANSPORTED	1 None 2 Flammable Liquid 3 Explosives 4 Poisonous Gas 5 Corrosive Materials 6 Radioactive Materials 7 Other	Driving Ability Questionable 1 YES 2 NO RECOMMEND RE-EXAM 3 NOT APPLICABLE	11 YES, Explain in Narrative	Driver's Phone No
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PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE/ZIP CODE	AGE	LOC	HU	S EQUIP.	ELECT.
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INVESTIGATOR - RANK AND SIGNATURE D. R. RITCHIE <i>[Signature]</i>	TROOPER I	ID/BADGE NUMBER 1192	DEPARTMENT
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5

IN THE COURT OF COMMON PLEAS
CUYAHOGA COUNTY, OHIO

JUDITH AGNELLO
2131 Prestwick Drive
Uniontown, Ohio 44685

and

ANTHONY AGNELLO
2131 Prestwick Drive
Uniontown, Ohio 44685

Plaintiffs

vs.

THE FORD MOTOR COMPANY
c/o C. T. Corporation System
815 Superior Avenue, NE
Cleveland, Ohio 44114

Defendant

CASE NO.

JUDGE

215256

091 LESLEY E. WELLS

COMPLAINT

(Personal Injury -

Trial By Jury Demanded)

SPANGENBERG, SHIBLEY, TRACI & LANCIONE • CLEVELAND, OHIO

Now come the Plaintiffs, Judith and Anthony Agnello, and for their Claim
for Relief, state as follows:

First Claim for Relief

1. Plaintiffs, Judith Agnello and Anthony Agnello, are natural persons and residents of the State of Ohio.
2. Defendant, The Ford Motor Company, is a Delaware corporation with its principal place of business in Dearborn, Michigan, licensed to conduct and conducting business in the State of Ohio.

3. On or about January 23, 1986, Plaintiffs purchased a 1986 Mercury Cougar VIN IMEBP9232GH638017, which automobile was designed, manufactured, tested, inspected, and distributed into the stream of commerce by the Defendant The Ford Motor Company, through its Lincoln-Mercury division.

4. On or about January 20, 1988, Plaintiff, Judith Agnello, was operating her Cougar in a lawful manner, wearing the occupant restraining system provided by Defendant The Ford Motor Company, properly adjusted and buckled. At approximately 3:00 p.m. on that date, Plaintiff was travelling southbound on Interstate 77 in Coventry Township, Summit County, Ohio when her lane of travel was entered by a tractor-trailer. The tractor-trailer forced her car into a guard rail underneath a bridge overpass, after which her car spun around and left the roadway and rolled over into the median. Before the vehicle came to rest, its occupant restraint system failed, and the glass in the driver's side door shattered and fell out.

5. As a direct result of the restraint system failure, and Ford's failure to provide proper laminated safety glass in the driver's door, Mrs. Agnello was forcibly ejected from the vehicle. As a direct result of such ejection, Plaintiff Judith Agnello suffered severe personal injuries, including permanent quadriplegia, underwent great pain and suffering of body and mind, suffered extreme emotional distress and the loss of the pleasures of life, and incurred medical expenses. All such injuries are permanent and continuing in nature.

6. The 1986 Lincoln-Mercury Cougar driven by Plaintiff Judith Agnello at the time of the accident was defective in design and formulation, and/or manufacture and construction, as those terms are defined in Ohio Revised Code Sections 2307.74 and 2307.75 respectively, for which Defendant is strictly liable in tort. As a direct and proximate result of the aforescribed defect(s), Plaintiff Judith Agnello suffered the aforescribed injuries, including quadriplegia.

7. This action was previously filed against Defendant The Ford Motor Company in Summit County, Ohio as Case No. CV 90 010149, and voluntarily dismissed on August 29, 1990 pursuant to Ohio Civil Rule 41(A).

WHEREFORE, Plaintiff, Judith Agnello, prays for judgment against the Defendant The Ford Motor Company, for full, fair and just compensation pursuant to all existing law in an amount in excess of TWENTY-FIVE THOUSAND DOLLARS (\$25,000.00) in accordance with Ohio Revised Code Section 2309.01(B)(2) together with interest and costs.

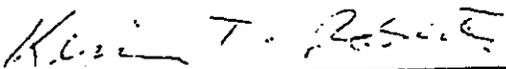
SECOND CLAIM FOR RELIEF

8. Plaintiff Anthony Agnello incorporates all the preceding allegations of the Complaint as if fully rewritten herein and says that as a direct and proximate result of the defective design and formulation, and/or the defect(s) in manufacture and construction of the 1986 Lincoln-Mercury Cougar driven by his wife on January 20, 1988, he has been deprived of the love, services and consortium of his wife Judith Agnello, and has incurred certain medical expenses

on her behalf. Plaintiff Anthony Agnello further says that he will suffer further deprivation, losses and incur medical expenses on her behalf in the future.

WHEREFORE, Plaintiff, Anthony Agnello, prays for judgment against the Defendant The Ford Motor Company, for full, fair and just compensation pursuant to all existing law in an amount in excess of TWENTY-FIVE THOUSAND DOLLARS (\$25,000.00) in accordance with Ohio Revised Code Section 2309.01(B)(2) together with interest and costs.

A TRIAL BY JURY IS HEREBY DEMANDED.



JOHN D. LIBER (0012807)
KEVIN T. ROBERTS (0037479)
Attorneys for Plaintiff

OF COUNSEL:

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(216)696-3232

SPANGENBERG, SHIBLEY, TRACI & LANCIONE • CLEVELAND, OHIO

DIANA ZALESKI

JAN 15 11 02 AM '90

SUMMIT COUNTY
CLERK OF COURTS

IN THE COURT OF COMMON PLEAS
SUMMIT COUNTY, OHIO

JUDITH AGNELLO
2131 Prestwick Drive
Uniontown, Ohio 44685

and

ANTHONY AGNELLO
2131 Prestwick Drive
Uniontown, Ohio 44685

Plaintiffs

vs.

TOM BOTZUM LINCOLN MERCURY, INC.
c/o James R. Webner,
Statutory Agent
328 W. Market Street
Akron, Ohio 44303

and

FORD MOTOR COMPANY
c/o C.T. Corporation System
815 Superior Avenue, N.E.
Cleveland, Ohio 44114

Defendants

CASE NO: CV 90 01 0149

JUDGE: ASGND. TO JUDGE WINTER

COMPLAINT

Type: Personal Injury

JURY TRIAL DEMAND

Now come Plaintiffs, and for their claim for relief, state as follows:

COUNT I

1. Plaintiffs, Judith Agnello and Anthony Agnello, are natural persons and residents of the State of Ohio. Defendant, Tom Botzum Lincoln Mercury, Inc., is a for profit Ohio corporation

licensed to and conducting business in the State of Ohio. Defendant, Ford Motor Company, is a Delaware corporation licensed to and conducting business in the State of Ohio.

2. The motor vehicle involved in this cause was designed, manufactured, tested, inspected, serviced and distributed into the stream of commerce by the Defendants, Ford Motor Company and Tom Botzum Lincoln Mercury, Inc.

3. On or about January 23, 1986, Plaintiffs purchased a 1986 Mercury Cougar VIN IMEBP9232GH638017 from Defendant Tom Botzum Lincoln Mercury, Inc.

4. On or about January 20, 1988, Plaintiff, Judith Agnello, while operating her Cougar in a lawful manner was forced off the road, causing the Cougar to roll over several times, ejecting Plaintiff from the vehicle.

5. Defendant, Ford Motor Company, failed to properly design, manufacture, assemble and test the Cougar's crashworthiness and seat belt system. Said failures directly and proximately causing Plaintiff to suffer severe, pain, suffering and permanent injuries including quadriplegia and to incur certain medical expenses which are expected to continue indefinitely.

6. Defendant, Tom Botzum Lincoln Mercury, Inc., failed to properly test, service and evaluate the subject Cougar. Said failure directly and proximately causing Plaintiff to suffer severe injuries, damages and harm as previously alleged.

ARONSON &
WALLER

385 W. MARKET STREET
SUITE 130
COLUMBUS, OHIO 44313
TELEPHONE 216/836-5506
FAX 216/836-1085

COUNT II

7. Plaintiff, Judith Agnello, realleges each and every allegation contained in paragraphs one (1) through six (6) as if fully rewritten herein.

8. That Defendants Ford Motor Company and Tom Botzum Lincoln Mercury, Inc., failed to adequately warn Plaintiff that the subject 1986 Cougar was not crashworthy and the seatbelt would not, prevent Plaintiff from being ejected in a roll-over collision.

9. That as a direct and proximate cause of Defendants failure to provide adequate warnings, Plaintiff sustained severe injuries, damages and harm alleged.

COUNT III

10. Plaintiff, Judith Agnello, realleges each and every allegation contained in paragraphs one (1) through nine (9) as if fully rewritten herein.

11. Defendant, Ford Motor Company, expressly warranted that the 1986 Cougar was merchantable and reasonably fit for its ordinary purpose.

12. That Defendants breached the express warranty, in that the 1986 Cougar was defective in design, manufacture and/or assembly. Said breach being the direct and proximate cause of Plaintiff's injuries, damages and harm as previously alleged.

COUNT IV

13. Plaintiff, Judith Agnello, realleges each and every allegation contained in paragraphs one (1) through thirteen (13)

as if fully rewritten herein.

14. When the Cougar was sold by Defendant, Tom Botzum Lincoln Mercury, Inc., to Plaintiff, Defendant, Ford Motor company and Tom Botzum Lincoln Mercury, Inc., impliedly warranted that said vehicle was safe for its ordinary and reasonably intended purpose(s).

15. That Ford Motor Company and Tom Botzum Lincoln Mercury, Inc., breached the implied warranties.

16. As a direct and proximate result of the breach of implied warranties, Plaintiff sustained severe injuries, damages and harm as previously alleged.

COUNT V

17. Plaintiff, Judith Agnello, realleges each and every allegation contained in paragraphs one (1) through sixteen (16) as if fully rewritten herein.

18. When Defendant, Ford Motor Company, designed, manufactured and sold the subject Cougar it was more dangerous than the ordinary consumer would expect, when used in a reasonably foreseeable manner.

19. As a direct and proximate result of the unreasonably dangerous condition of the subject Cougar when it left the hands of Defendant, Ford Motor Company, Plaintiff sustained severe injuries, damages and harm as previously alleged.

COUNT VI

20. Plaintiff, Anthony Agnello, realleges each and every allegation contained in paragraphs one (1) through twenty (20) as

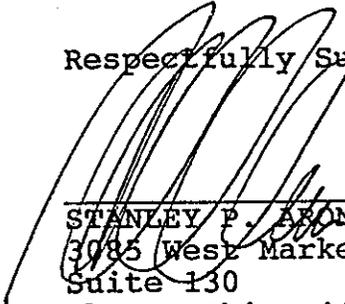
if fully rewritten herein.

21. At all times material herein, Plaintiff, Anthony Agnello, was and is the husband of Plaintiff, Judith Agnello.

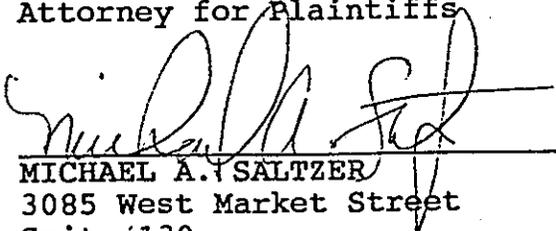
22. As a direct and proximate result of Defendants' negligence, breach of warranty and strict liability, Plaintiff, Anthony Agnello, has been deprived of the society, companionship, assistance and consortium of his wife, Judith Agnello, and has incurred medical and other expenses which will continue indefinitely.

WHEREFORE, Plaintiffs demand judgment against the Defendants, jointly and severally, in the amount of Five Million Dollars (\$5,000,000.00) as to Counts I through V and Five Hundred Thousand (\$500,000.00) as to Count VI, in damages, fees, costs and interest and whatever other relief this Honorable Court deems just and proper.

Respectfully Submitted,



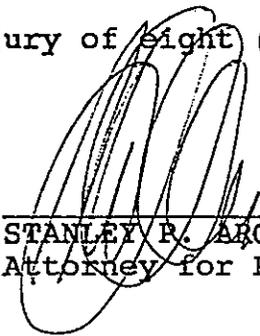
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(216) 836-5506
Attorney for Plaintiffs



MICHAEL A. SALTZER
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Suite 130
Akron, Ohio 44313
(216) 836-5506
Attorney for Plaintiff

JURY TRIAL DEMAND

Plaintiffs demand a trial by jury of eight (8) in the within
action.



STANLEY R. ARONSON
Attorney for Plaintiffs

ARONSON &
WALLER

85 W. MARKET STREET

SUITE 130

OHIO 44313

TELEPHONE 216/836-5506

FAX 216/836-1085

OHIO TRAFFIC ACCIDENT REPORT

LOCAL REPORT NO. 77-118-77
 REPORTING AGENCY STA HIGHWAY PATROL OHP 77
 ACCIDENT SEVERITY (CHECK MOST SEVERE) FATAL INJURY PROPERTY DAMAGE ONLY
 COMBINED VEH/PROP LOSS OVER \$150 UNDER \$150
 HIT SKIP SOLVED UNSOLVED
 IN COUNTY OF SUMMIT IN CITY VILLAGE TWP OF COVENTRY M 1 ID 20 11 88 DAY WED TIME: MILITARY 1505
 ACCIDENT OCCURRED ON IS 77 WITHIN THE INTERSECTION OF

IF NOT IN INTERSECTION (LIST NEAREST INTERSECTING STREET, MILEPOST, HOUSE NO.)
 5/16 MILES: _____ FEET W N E OF MILE POST 122 CITY CODE

LOG-1	LOG-2	LOG	JUR	FHE	FLT	DESC

DRIVER-PEDESTRIAN-VEHICLE SECTION

A UNIT NO. 1 NO. OF OCCUPANTS 1 OPERATING PARKED DRIVERLESS HIT & RUN NON-CONTACT INSURANCE CO. OR AGENT PRENTISS-DEMOSS

DRIVER/PEDESTRIAN NAME (LAST, FIRST, MI) [REDACTED] ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) UNIONTOWN OH [REDACTED]

PHONE NO. [REDACTED] BIRTHDATE [REDACTED] AGE [REDACTED] SEX F SOCIAL SECURITY NO. [REDACTED] STATE OH DRIVER'S LICENSE NO. [REDACTED] OCCUPATION HOUSEWIFE

OWNER (IF SAME AS DRIVER, WRITE SAME) SAME ADDRESS [REDACTED] PHONE [REDACTED]

VEH YR 19 86 MAKE MERC MODEL COUGAR COLOR RED STYLE 2DR OH LICENSE PLATE NO. [REDACTED] TOWING SERVICE MILLER'S VEH/PED DIR FROM N TO S

CIRCLE DAMAGE AREAS

DAMAGE SEVERITY NON-FUNCTIONAL FUNCTIONAL DISABLING
 DAMAGE SCALE NONE MODERATE LIGHT HEAVY
 VEHICLE DISPOSITION DRIVEN AWAY REMAINED AT SCENE TOWED
 FIRE NO FIRE FIRE DUE TO CRASH OTHER FIRE

B UNIT NO. 2 NO. OF OCCUPANTS 2 OPERATING PARKED DRIVERLESS HIT & RUN NON-CONTACT INSURANCE CO. OR AGENT CAROLINA INS

DRIVER/PEDESTRIAN NAME (LAST, FIRST, MI) [REDACTED] ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) SEMINARY MS [REDACTED]

PHONE NO. [REDACTED] BIRTHDATE [REDACTED] AGE [REDACTED] SEX M SOCIAL SECURITY NO. [REDACTED] STATE MS DRIVER'S LICENSE NO. [REDACTED] OCCUPATION TRUCK DRIVER

OWNER (IF SAME AS DRIVER, WRITE SAME) [REDACTED] ADDRESS [REDACTED] PHONE [REDACTED]

VEH YR 19 84 MAKE FREIGHT MODEL COE COLOR WHIT TK STATE MS LICENSE PLATE NO. [REDACTED] TOWING SERVICE NONE VEH/PED DIR FROM N TO S

CIRCLE DAMAGE AREAS

DAMAGE SEVERITY NON-FUNCTIONAL FUNCTIONAL DISABLING
 DAMAGE SCALE NONE MODERATE LIGHT HEAVY
 VEHICLE DISPOSITION DRIVEN AWAY REMAINED AT SCENE TOWED
 FIRE NO FIRE FIRE DUE TO CRASH OTHER FIRE

OCCUPANT SECTION

C FROM UNIT NO. 2 NAME (LAST, FIRST, MI) [REDACTED] BIRTHDATE [REDACTED] AGE [REDACTED] SEX F POSITION A B C D E F INJURIES 1 2 3 4 5

D FROM UNIT NO. WIT NAME (LAST, FIRST, MI) SILVER WILLIAM H BIRTHDATE [REDACTED] AGE [REDACTED] SEX M ADDRESS [REDACTED] PHONE [REDACTED]

E FROM UNIT NO. WIT NAME (LAST, FIRST, MI) AKRON OH BIRTHDATE [REDACTED] AGE [REDACTED] SEX M ADDRESS [REDACTED] PHONE [REDACTED]

F FROM UNIT NO. WIT NAME (LAST, FIRST, MI) CANTON OH BIRTHDATE [REDACTED] AGE [REDACTED] SEX M ADDRESS [REDACTED] PHONE [REDACTED]

P-PEDESTRIAN

CONDITION 1 APPARENTLY NORMAL 2 SICK 3 FATIGUED 4 APPARENTLY ASLEEP 5 PHYSICAL DEFECT 6 OTHER CONDITION 7 UNKNOWN

RESTRAINTS A B C D E F ALCOHOL A TESTED B TESTED

1 NOT USED 2 NONE AVAILABLE 3 LAP BELT USED 4 LAP/SHOULDER BELT USED 5 SHOULDER BELT USED 6 CHILDO SAFETY SEAT 7 AIR BAG USED 8 USE NOT REPORTED

1 NO ALCOHOL DETECTED 2 HBD ABILITY IMPAIRED 3 HBD ABILITY NOT IMPAIRED 4 HBD ABILITY UNKNOWN

OFFENSE CHARGED AND DESCRIPTION

A O.R.C. CITY ORD: OFFENSE CHARGED AND DESCRIPTION

B O.R.C. CITY ORD: 4571.33 Improper Lane Change

RECEIVED CALL ON PATROL DISPATCHED ARRIVED 1505 CLEARED 1810 OTHER TIME 60 TOTAL MINUTES 245

DATE REPORT FILED 1 20 1988 PHOTOS YES NO OFFICER'S NAME TPR CP WILSON BADGE NO. 1272 CHECKED BY 1459

EJECTION A B C D E F DRUGS A TESTED B TESTED

1 NOT EJECTED 2 PARTIAL 3 TOTAL 4 TRAPPED INSIDE VEHICLE

1 NO DRUGS DETECTED 2 USING PRESCRIBED DRUG 3 USING ILLICIT DRUG

LOCAL REPORT NUMBER 77-118-77

STATE HIGHWAY PATROL

DATE OF ACCIDENT M 1 10 20 1988

FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL ACCIDENTS

I, [REDACTED] (PRINTED) HEREBY MAKE THIS VOLUNTARY STATEMENT TO

TPR CP WILSON (OFFICERS NAME) AT 77 South 11 1/2 N of Exit 120 (LOCATION)

WHILE DRIVING HOME TO CANTON AT APPROX 3:10 P.M. I WAS DIRECTLY BEHIND A RED (LATE MODEL COUGAR). THE CAR WAS IN THE FAR LEFT LANE, A TRACTOR TRAILER FLAT BED WAS IN THE CENTER LANE. I WAS IN THE TRUCK ATTEMPTING TO CHANGE LANES TO THE LEFT LANE. AT THIS POINT THE RED COUGAR CAR BECAME PREVENTED BETWEEN THE OVERPASS BRIDGE EMBANKMENT. THE TRUCK CONTINUED TO CHANGE LANES CAUSING THE RED COUGAR (DRIVEN BY A WOMAN) TO LOSE CONTROL AND FLIP END OVER END. I WAS THE FIRST PERSON TO ARRIVE AT THE SCENE. THE WOMAN WHO WAS DRIVING THE CAR WAS THROWN OUT. THE TRUCKER IMMEDIATELY STOPPED AND RETURNED TO THE SCENE. I OBSERVED NO TURN SIGNALS BEING USED BY THE TRUCKER. IT APPEARS TO ME THE CAR WAS IN THE (IE DEAD ZONE) WHERE THE TRUCKER COULDN'T SEE HER

ADDRESS OF WITNESS CANTON OHIO [REDACTED] PHONE [REDACTED] SIGNATURE OF WITNESS [REDACTED] OFFICERS SIGNATURE [Signature]

LOCAL REPORT NO. 77-118-77

DESCRIBE WHAT HAPPENED REFER TO UNITS BY NUMBER

UNIT #1 SOUTHBOU

ON IS 77 IN

LEFT LANE UNIT #2 SOUTHBOUND IS 77 IN CENTER LANE UNIT #1 CHANGED LANES STRIKING UNIT #1 CAUSING DRIVER TO LOSE CONTROL AND STRIKE A BRIDGE UNIT #1 THEN ROTATED ON ROAD STRIKING UNIT #2 AGAIN AND OVERTURNING EJECTING THE DRIVER

WEATHER 1 NO ADVERSE WEATHER 2 RAIN 3 SNOW 4 FOG 5 HIGH WIND 6 OTHER	1	FIRST HARMFUL EVENT 6 TWO MV IN TRANSPORT 1 HEAD ON 2 REAR-END 3 BACKING 4 SIDESWIPE MEETING 5 SIDESWIPE PASSING 6 ANGLE	IS 77 SOUTHBOUND LANES 	ROAD CONDITIONS 1 DRY 2 WET 3 SNOW 4 ICE 5 DIRT/SAND 6 OTHER	1	ONE MV IN TRANSPORT (COLLISION) 7 PARKED MOTOR VEH 8 PEDESTRIAN 9 ANIMAL 10 TRAIN 11 PEDALCYCLE 12 OTHER NON-M V 13 FIXED OBJECT 14 OTHER OBJECT	LIGHT 1 DAYLIGHT 2 DAWN 3 DUSK 4 DARK NO LIGHTS 5 DARK-LIGHTED 6 OTHER	1	ROAD CONTOUR 1 STRAIGHT LEVEL 2 STRAIGHT GRADE 3 CURVE LEVEL 4 CURVE GRADE	1	LOCATION 7 1 INTERSECTION 2 OFF RAMP 3 OFF RAMP 4 RAMP 5 RAMP 6 RAMP 7 RAMP 8 RAMP	OCURRENCE 1 ON ROADWAY 2 OFF LEFT SIDE 3 OFF RIGHT SIDE 4 ON OPPOSING LANE OF A DIVIDED HIGHWAY	1	SPECIAL AREA 1 ROAD CONSTRUCTION 2 MAINTENANCE AREA 3 SCHOOL ZONE	RAMP LETTER CODE
---	---	--	-------------------------------	---	---	--	---	---	---	---	---	--	---	---	-------------------------

TYPE OF UNIT CAR: 1 SUB-COMPACT, 2 COMPACT, 3 MID SIZE, 4 FULL SIZE TRUCK: 5 PICKUP, 6 PANEL/VAN, 7 STRAIGHT TRUCK, 8 STRAIGHT TRUCK AND TRAILER, 9 TRUCK TRACTOR, 10 TRACTOR & SEMI-TRAILER, 11 TRACTOR & DOUBLE TRAILER MOTORCYCLE: 12 MC UP TO 350CC, 13 MC351CC TO 750CC, 14 MC OVER 751CC, 15 MOTORIZED BICYCLE BUS: 16 SCHOOL, 17 CHURCH, 18 PUBLIC BUS EMERGENCY: 19 POLICE VEHICLE, 20 FIRE TRUCK, 21 AMBULANCE/RESCUE OTHER: 22 TAXI, 23 MOTOR HOME, 24 TRAIN, 25 FARM VEHICLE, 26 FARM EQUIPMENT, 27 SNOWMOBILE, 28 CONSTRUCTION EQUIP, 29 ANIMAL W/DRIVER, 30 ANIMAL W/BUGGY, 31 BICYCLE, 32 ALL OTHERS P = PEDESTRIAN	A 1 3 B 2 10	PRE-ACCIDENT ACTIONS DRIVER ACTIONS: 1 GOING STRAIGHT, 2 TURNING RIGHT, 3 TURNING LEFT, 4 TURNING ON RED LIGHT, 5 U TURN, 6 STOPPED TO TURN, 7 STOPPED IN TRAFFIC, 8 PARKING/UNPARKING, 9 PARKED, 10 BACKING, 11 PASSING, 12 CHANGING LANES, 13 MERGING/EXITING RAMP, 14 OUT OF CONTROL, 15 SWERVING, 16 DRIVERLESS VEH, 17 OTHER DRV ACTIONS PEDESTRIAN ACTIONS: 18 CROSSING IN X-WALK, 19 CROSSING OTHER THAN X-WALK, 20 WALKING IN ROAD (WITH TRAFFIC), 21 WALKING IN ROAD (AGAINST TRAFFIC), 22 PLAYING IN ROAD, 23 WORKING ON ROAD, 24 ENTERING OR LEAVING VEHICLE, 25 PUSHING/WORKING ON VEH IN ROAD, 26 OTHER IN ROAD, 27 ON SIDEWALK OR SHOULDER	A 1 B 12	CONTRIBUTING FACTOR DRIVER ERROR: 1 NONE, 2 FAILURE TO YIELD, 3 UNSAFE SPEED, 4 FOLLOWING TOO CLOSELY OR ACDA, 5 RAN RED LIGHT, 6 RAN STOP OR YIELD SIGN, 7 IMPROPER TURN, 8 IMPROPER PASSING, 9 IMPROPER LANE CHANGE, 10 IMPROPER BACKING, 11 IMPROPER START FROM PARKED POSITION, 12 STOPPED OR PARKED ILLEGALLY, 13 LEFT OF CENTER, 14 FAILURE TO CONTROL, 15 DRIVER INATTENTION, 16 DROVE OFF ROAD REASON UNKNOWN, 17 OTHER DRIVER ERROR TRUCK LOAD: 1 EMPTY, 2 PERISHABLE GOODS, 3 GENERAL FREIGHT, 4 METAL/HEAVY MACHINERY, 5 HAZARDOUS GAS, 6 HAZARDOUS LIQUID, 7 HAZARDOUS SOLID, 8 RADIOACTIVE MATERIAL TRUCK AXLES: 1 NONE, 2 UTILITY POLE, 3 TRAFFIC SIGN, 4 BRIDGE/CULVERT, 5 GUARD RAIL, 6 FENCE, 7 TREE, 8 SHRUBBERY, 9 CURB, 10 DITCH, 11 EMBANKMENT, 12 BUILDING, 13 MAIL BOX, 14 CONSTRUCTION BARRICADE, 15 FIRE HYDRANT, 16 OTHER OBJECT	A 1 B 9	VEHICLE DEFECTS CODE IF CONTRIBUTING FACTOR IS 18 PRIMARY: A - B - SECONDARY: A - B - 1 TURN SIGNALS, 2 HEAD LAMPS, 3 TAIL LAMPS, 4 BRAKES, 5 STEERING, 6 TIRE BLOWOUT, 7 WORN OR SLICK TIRES, 8 TRAILER EQUIPMENT DEFECTIVE, 9 MOTOR TROUBLE, 10 DISABLED FROM PRIOR ACCIDENT, 11 OTHER DEFECTS
SPEED UNIT EST. LEGAL A 55 55 B 50 55	MC HELMET USE UNIT DRIVER PASS A - - B - -	DRIVER 1 NO CONTROLS, 2 STOP SIGN, 3 YIELD SIGN, 4 TRAFFIC SIGNAL, 5 TRAFFIC FLASHERS, 6 SCHOOL ZONE, 7 RAILROAD CROSSBUCKS, 8 RAILROAD FLASHERS, 9 RAILROAD GATES, 10 CONSTR BARRICADES, 11 POLICE OFFICER, 12 PAVEMENT MARKINGS, 13 OTHER	PEDESTRIAN 14 NO CONTROLS, 15 CROSSWALK LINES, 16 WALK/DCNT WALK DEVICE	TRUCK-TRAILER RIGS		

PLEASE CHECK TO SEE IF ALL BOXES ARE FAR ENOUGH TO BE MICROFILMED.

LOCAL REPORT NUMBER 77-118-77

REPO. NO. 10 STATE HIGHWAY PA 72

DATE OF ACCIDENT M 1 10 20 1988

IN COUNTY OF Summit

ACCIDENT LOCATION IS 77 5/10 South of MP 122

DAMAGE:

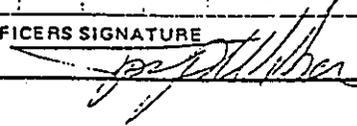
UNIT #1 ROOF. WINDSHIELD. BOTH DOORS - WINDOWS. GRILL
RADIATOR. BOTH FRONT FENDERS. HOOD. NOSE PIECE RIGHT
REAR QUARTER PANEL. BOTH BUMPERS.

UNIT #2. FUEL TANK. MOUNTING BRACKET. MUD FLAP. T
HOLDER. FRONT HUB COVER. TIRE.

TRAILED INTO UNIT #2

1984 UTILITY TRAILED. MISS REG 389 7719 Temp
LIGHTS WORKING PROPERLY. NO DAMAGE.

OFFICERS SIGNATURE



BADGE NO.

1271

LOCAL REPORT NUMBER 77-118-77

REPORTING BY STATE HIGHWAY PATROL

DATE OF ACCIDENT M 1 10 20 1988

FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL ACCIDENTS

I, [REDACTED] HEREBY MAKE THIS VOLUNTARY STATEMENT TO

(PRINTED) Tpr CP Wilson
(OFFICERS NAME)

AT IS 77- MD 122
(LOCATION)

I-77 SOUTHBOUND AT ABOUT 3:10 PM WITNESSED
- ACCIDENT OF RED 2 DOOR COUGAR AND A FAT BEAR
TRACTOR TRAILER IN PASSING LANE SOUTHBOUND.

I WAS 2ND CAR BEHIND ACCIDENT VEHICLES. A
RED CHEVY WAS IN FRONT OF ME.

TRUCK MOVED FROM CENTER LANE OF 3 LANE SOUTHBOUND
TO LEFT PASSING LANE. RED COUGAR PULLED OFF
TO ~~THE~~ LEFT SHOULDER TO AVOID TRUCK, TRUCK FORCED
OFF TO SHOULDER BUT PROBABLY DID NOT SEE.

COUGAR TRIED TO GET IN FRONT OF TRUCK
BUT WENT OUT OF ROADWAY AT BRIDGE ABUTMENT
AND FLIPPED IN FRONT OF TRUCK, THEN INTO MEANS.

NEVER SAW VICTIM FLIP OUT OF CAR. ONLY FOUND
UPON INSPECTION AND TRYING TO HELP AT SITE.

WEATHER CONDITIONS GOOD, SUNNY DAY.

OFFICE 535-2108.

ADDRESS OF WITNESS [REDACTED]

AKRON, OHIO [REDACTED]

PHONE [REDACTED]

SIGNATURE OF WITNESS [REDACTED]

OFFICERS SIGNATURE
CP Wilson

LOCAL REPORT NUMBER 77-118-77

REPORTING AGENCY STATE HIGHWAY PATROL

DATE OF ACCIDENT M 1 10 20 1988

FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL ACCIDENTS

I, [REDACTED] (PRINTED) HEREBY MAKE THIS VOLUNTARY STATEMENT TO

TPR CP Wilson (OFFICERS NAME) AT AKRON POST 77-1-23-88 3:00 PM (LOCATION)

Pg 2- STATEMENT TAKEN BY PHONE

- Q DID YOU SEE A TURN SIGNAL FROM THE TRUCK?
 - A I DON'T RECALL ONE.
- Q YOU STATE THE RED COUGAR PULLED OFF THE LEFT SHOULDER TO AVOID THE TRUCK. HOW FAR FROM THE BRIDGE WAS THIS?
 - A WELL I'M NOT A GOOD JUDGE OF DISTANCE IN THIS CASE BUT I'D SAY ABOUT 100 TO 200 YARDS
- Q YOU ALSO STATE THAT THE "COUGAR TRIED TO GET IN FRONT OF TRUCK" WHAT DO YOU MEAN?
 - A WHEN THE TRUCK CAME OVER INTO THE LEFT LANE THE COUGAR PULLED OFF THE ROAD INTO THE MEDIUM IT LOOKED AS THOUGH THE COUGAR TRIED TO SPEED UP TO GET IN FRONT OF THE TRUCK BEFORE THE BRIDGE, INSTEAD OF SLOWING DOWN. AS THE CAR SPED UP IT APPEARED AS THOUGH THERE WERE TWO OF ITS WHEELS IN THE GRASS. IT TRIED TO CUT OVER IN FRONT OF THE TRUCK BEFORE IT GOT TO THE BRIDGE. BUT HIT THE FRONT OF THE TRUCK AND BEGAN TO BOUNCE OFF THE BRIDGE AND THE TRUCK. ONCE IT GOT TO THE END OF THE BRIDGE IT FLIPPED UP IN THE AIR.

- Q DID YOU SEE THE TRUCK EVER TRY TO MOVE BACK TO THE RIGHT?
 - A YES A LITTLE. BUT I DON'T THINK HE KNEW WHAT WAS HAPPENING

ADDRESS OF WITNESS [REDACTED] AKRON OH [REDACTED] PHONE [REDACTED]

SIGNATURE OF WITNESS [REDACTED] OFFICERS SIGNATURE [Signature]

LOCAL REPORT NUMBER 77-118-77

REPORTING AGENCY

STATE HIGHWAY PATROL

DATE OF ACCIDENT M 1 10 20 1988

FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL ACCIDENTS

I, [REDACTED] (PRINTED) HEREBY MAKE THIS VOLUNTARY STATEMENT TO

TPR CP Wilson (OFFICERS NAME)

AT AKRON Post 77 2:30pm 1-24-88 (LOCATION)

Pg 3 - Taken By Phone.

YESTERDAY WHEN WE TALKED I REMEMBER A QUESTION YOU ASKED ABOUT THE TRUCK CHANGING LANES BEFORE THE BRIDGE. I THOUGHT ABOUT IT AND I REMEMBER SEEING THE TRUCK BEGINING TO CHANGE LANES BEFORE THE BRIDGE. I'D SAY IT WAS 10 TO 12 CAR LENGTHS BEFORE THE BRIDGE. THE TRUCK CAME OVER AND HIT THE CAR ONCE KNOCKING IT INTO THE MEDIAN.

Q. WAS THE CAR FORCED COMPLETELY INTO THE MEDIAN?

A. NO NOT COMPLETELY, IT WASN'T HIT REAL HARD.

Q. WHERE WAS THE CAR WHEN THE TRUCK BEGAN TO CHANGE LANES?

A. IT WAS HALF WAY BACK IN THE MIDDLE OF THE TRAILER

Q. DID YOU SEE THE CAR SPEED UP AT ALL TO PASS THE TRUCK?

A. NO I'M NOT SURE I SAW IT SPEED UP.

Q. DID YOU SEE ANY BRAKE LIGHTS ON THE COUGAR?

A. NO. I DON'T RECALL SEEING BRAKE LIGHTS EITHER

ADDRESS OF WITNESS

[REDACTED]

CANTON OH

[REDACTED]

PHONE/

[REDACTED]

SIGNATURE OF WITNESS

OFFICERS SIGNATURE

[Signature]

LOCAL REPORT NUMBER 77-118-77

REPORTING AGENCY STATE HIGHWAY PATROL

STATE HIGHWAY PATROL

DATE OF ACCIDENT M 1 10 20 1988

FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL ACCIDENTS

I, [REDACTED] (PRINTED) HEREBY MAKE THIS VOLUNTARY STATEMENT TO

TPR CP Wilson (OFFICERS NAME)

AT Accident Scene (LOCATION)

I WAS GO SOUTH ON RT 77 AT ABOUT 50 MPH IN THE CENTER LANE, AND I WENT TO PASS A CAR. I LOOKED IN MY MIRROR AND DID NOT SEE ANYTHING. WHEN I MOVED INTO LEFT LANE I SAW THE CAR. I DON'T KNOW HOW THE CAR GOT ON MY LEFT SIDE OF MY TRUCK.

Q Which car were you going to pass - where was this car?

A A vehicle directly in front of me.

Q Did you see the Red car as you were changing lanes?

A I looked before changing lanes and saw nothing. I moved to the left lane and saw her just before I felt the impact. I pulled back to the right but it was too late.

Q How far from the bridge were you when you changed lanes?

A I was just at the beginning of it.

Q Did you use your turn signal?

A Yes

PLAINTIFF'S EXHIBIT

1 SAW 10-19-88

ADDRESS OF WITNESS

[REDACTED]

Seminole, MS

PHONE

[REDACTED]

SIGNATURE OF WITNESS

[REDACTED]

OFFICERS SIGNATURE

[Signature]

LOCAL REPORT NUMBER 77-118-77

REPORTING AGENCY STATE HIGHWAY PATROL

DATE OF ACCIDENT M 1 10 20 1988

FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL ACCIDENTS

I, [REDACTED] (PRINTED) HEREBY MAKE THIS VOLUNTARY STATEMENT TO

TPR CP Wilson (OFFICERS NAME) AT AKRON Post 77- 2:30pm - 1-22-88 (LOCATION)

Pg 2 QUESTIONED BY Phone

Q - How far away from the Red Car were you?

A - ABOUT 3 OR 4 CAR LENGTHS.

Q - WHEN YOU FIRST SAW THE TRUCK BEGIN TO CHANGE LANES WHERE WAS THE RED CAR?

A - IT WAS BESIDE THE TRUCK. TOWARDS THE FRONT OF THE TRAILER

Q - WERE BOTH OF THE VEHICLES ON THE BRIDGE AT THE TIME?

A - NO THEY WERE ABOUT 2 OR 3 CAR LENGTHS NORTH OF THE BRIDGE

Q - DID YOU SEE A TURN SIGNAL FROM THE TRUCK?

A - NO I DON'T RECALL SEEING ONE.

Q - DID THE RED COUGAR EVER GO INTO THE MEDIAN TO AVOID THE TRUCK?

A - NO WHEN I SAW IT SHE WAS JUST BEFORE THE BRIDGE AND WAS COMMITTED TO STAYING BETWEEN THE BRIDGE AND THE TRUCK.

Q - DID YOU EVER SEE THE CAR SPEED UP TO GET IN FRONT OF THE TRUCK EITHER BEFORE OR DURING THE ACCIDENT?

A - NO, SHE WAS ON THE BRAKES STUCK BETWEEN THE BRIDGE AND THE TRUCK

Q - HOW FAST WERE YOU AND THE COUGAR GOING?

A - 5.5 mph. WE WERE BOTH GOING THE SAME BECAUSE OF TRAFFIC.

ADDRESS OF WITNESS [REDACTED]

CANTON OH

PHONE [REDACTED]

SIGNATURE OF WITNESS

OFFICERS SIGNATURE [Signature]

6



LEGAL

NEGOTIATION AND
LITIGATION
SECTION

92 SEP 18 A9:28

SB06

00003 MORS II Basic Information 09/17/1992 09:20:46

File Type: _____ CONTACT NBR: _____

VIN: 1FABP40A3HF [REDACTED]

LAST NAME: [REDACTED] First Name: [REDACTED] ZIP/PC: [REDACTED]

Title: _____ MI: _____

Address: [REDACTED]

City: LINDEN ST/PRV: TN

Home Phone: [REDACTED] Business Phone: [REDACTED]

Year: 87 Model: MUSTANG

Mileage/Km: 100000

Dealer Name: _____ SALES CODE: _____

Causal Code: _____ Symptoms: _____

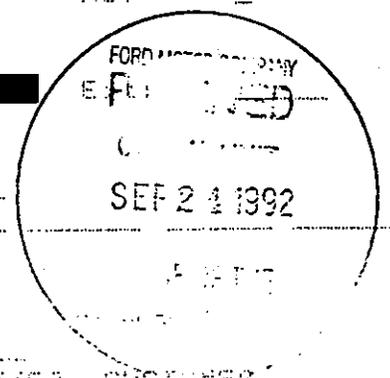
Inquiry Code: _____

Serv Sales: (1 of 2)

ack Code: _____

Comm Type: _____

Micro Nbr: _____



CUSTOMER SAYS HER SON WAS INVOLVED IN AN ACCIDENT ON 9/15/92, CUSTOMER ALLEGES SEAT BELT CAME UNDONE AND AS A RESULT HER SON WAS INJURED. CUSTOMER'S SON IS [REDACTED] HE WAS TREATED AT DECATUR COUNTY HOSPITAL. CUSTOMER [REDACTED] LOCAL POLICE DEPARTMENT. ACCIDENT REPORT FILLED OUT.

FL=HELP F2=EXIT F3=ADD F8=RECALL F9=ESP F10=CASIS F11=WARRANTY F12=DEALER

NIF 9/25

7

Legal:

USE KRISTZ WORKBOOK 92-4018
X-2414

DAVIS

Customer called in to say that he and his wife were involved in an accident. Another vehicle pulled out in front of them. Wife hit the windshield because seat buckle broke. Customer says he has the buckle in glove box now. Customer would appreciate the legal department involvement. He feels it's a malfunction in seat belt. Wife was taken to hospital and is ~~not~~ experiencing pain still.

MEDIATION AND LITIGATION SECTION

92 SEP 22 A9:37

5306

CSOR0016

MORS II Legal Contact
CONTACT NBR:

09/21/1992 12:34:59

VIN: 1FABP29U6GG [REDACTED]
Last Name: [REDACTED]
Title: [REDACTED]
Address: [REDACTED]
City: PASCO
Home Phone: [REDACTED]
Year: 86
Mileage/Km: 97000
Dealer Name: _____
Casual Code: 02
Origin: _____
Veh Repl: _____
Case Type: 1
Atty Name: _____
Claimed Amt: _____
CANADA ONLY:
Court Code: _____

Zn/Tr

First Name: [REDACTED]

ST/PV: WA
Business Phone: [REDACTED]
Model: TAURUS

Opened:
Closed:
Status:
MI: _____

Zip/PC: [REDACTED]
Ext: _____

WSD: _____
Sales Code: _____ P&A: _____
Symptoms: 104000
Trans Date: _____
Means Code: a
Atty Memo: _____
Award Amt: _____

Award Code: _____

F1=HELP F3=EXIT F4=COMMENT F5=ADD F6=UPD F9=CLOSE F12=CANCEL
E389 CONTACT DOES NOT EXIST - CANNOT BE CANCELLED



NK 9/25

8

LEGAL - - SERIOUS INJURY

MIKE USHER XBT

customer says she was involved in a head-on collision on 7/25/91 with both vehicles travelling approximately 40 mph (each). she says the vehicle's seat belt did not hold her in place and she was thrown against the steering column. she says police, fire, and ambulance were called to the scene and she was transported to Univ. Cal.-Davis trauma center by ambulance with serious injuries. she says she suffered a severe concussion, broken nose, bilateral TMJ, scalp lacerations, bilateral knee injuries, and a crushed foot. she says she lapsed into a brief coma and suffered dizzy spells (she says she still does to this day). she says she always wore her seat belt, and feels it disengaged during the accident. customer call was prompted by her receiving a recall notice (92 s 46) in the mail yesterday relating to the vehicle's seat belt mechanism (cac confirmed vehicle's inclusion). customer says her medical insurance has covered her medical expenses, but she has been financially strained by being out of work for a year. she notes that the man who hit her was uninsured. customer says she is seeking financial support from ford for the year she has been out of work. customer wishes to note that she cannot walk properly and she probably will not be able to re-enter the nursing profession as a result. customer says the vehicle was totalled and was subsequently scrapped.

CSQR0016

VIN: 1FABP27M3EF [redacted]
Last Name: [redacted] First Name: [redacted]
Title: [redacted]
Address: [redacted]
City: SACRAMENTO ST/PV: CA
Home Phone: [redacted] Business Phone: [redacted]
Year: 84 Model: MUSTANG
Mileage/Km: No estimate WSD:
Dealer Name: UNKNOWN DEALER FOR 72 Sales Code: 172000 P&A: _____
Causal Code: LEGL _____ Symptoms: 104200 _____
Origin: _____ Trans Dst/Rgn: _____ Trans Date: _____
Veh Repl: _____ Means Code: A
Case Type: 1 Atty Memo: _____
Atty Name: _____ Award Amt: _____
Claimed Amt: _____
CANADA ONLY:
Court Code: _____ Award Code: _____

5301

FORD MOTOR COMPANY BY
RECEIVED
09/29/92 CLAIMS UNIT: 13:56
Opened:
Closed: **OCT 06 1992**
Status:
MI: OFFICE OF THE
GENERAL COUNSEL
Zip/PC: [redacted]
Ext: _____

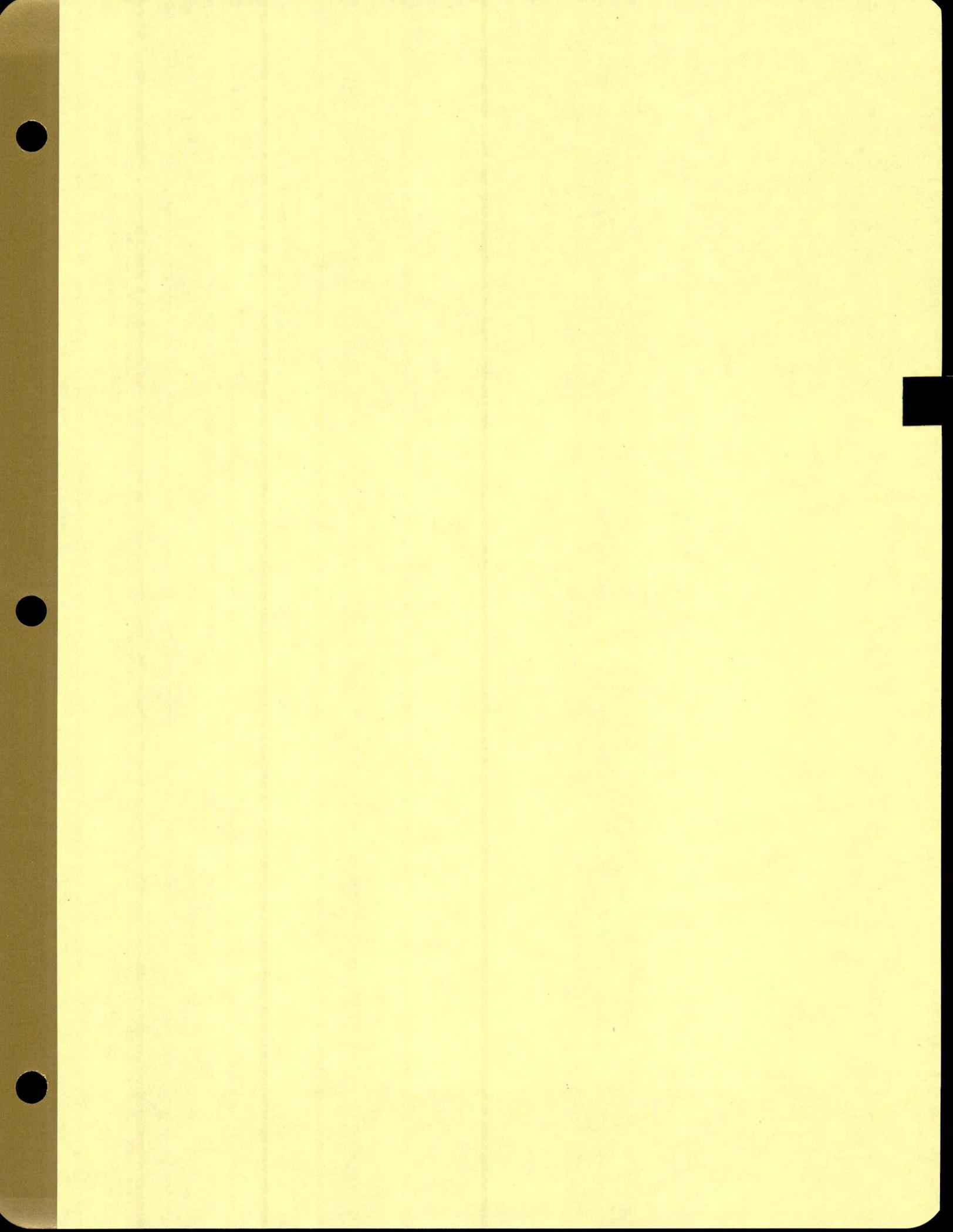
F1=HELP F3=EXIT F4=COMMENT F5=ADD F6=UPD F9=CLOSE F12=CANC
E001 INCORRECT KEY HAS BEEN SELECTED, CHECK AND TRY AGAIN

LPIM273

'92 OCT -1 09:38

MEDIATION AND LITIGATION SECTION

4287
NIF 1017



STATE OF MICHIGAN

IN THE CIRCUIT COURT FOR THE COUNTY OF GENESEE

WENDY SUZANNE WIITALA,

Plaintiff,

Case No. 90-2895-NP

vs.

HON. ROBERT M. RANSOM

FORD MOTOR COMPANY,
a Delaware Corporation,

Defendant.

GOODMAN, LISTER, SEIKALY
& PETERS, P.C.
DARREL PETERS (P27156)
Attorneys for Plaintiff
1394 E. Jefferson
Detroit, Michigan 48207
(313) 567-6165

DICKINSON, WRIGHT, MOON
VAN DUSEN & FREEMAN
KELVIN W. SCOTT (P41023)
Attorneys for Defendant

PLAINTIFF'S BRIEF IN SUPPORT OF MOTION

Plaintiff contends that the type of seat belt buckle installed in the 1982 Mercury Lynx is subject to inadvertent, unintentional, accidental or inertial opening when the back of the buckle is struck. This type of restraint system, and particularly the single button buckle and latch plate, has been utilized by Ford since at least the 1974 model year. Ford has known of the buckle and latch plate's propensity to disengage from a fully latched position since at least October 1983. (Exhibit 4, excerpts from the deposition of Ford Motor Co. agent/employee Roger C. Wagner, taken October 4, 1983, in the case of Miller v. Ford Motor Company, Wayne County Circuit Court Case No. 80-018-997-NP).

Plaintiff has established sufficient and reasonable basis for further discovery regarding the effectiveness of and Ford's

knowledge of defects in the type of occupant restraint system installed in virtually all domestic passenger cars since 1974, including the 1982 Lynx. Documents and materials (memoranda, test reports, test requests, video tape, motion pictures, photographs and the like) which pertain to and/or depict inadvertent, unintentional, accidental or inertial openings of seat belt buckle(s) and latch plate(s) also fall within the scope of discovery and clearly relevant to plaintiff's claim of defect.

As stated by the court in Fireman's Fund American Ins Cos. v. General Electric Co., 74 Mich App 318, 328-329; 253 NW2d 748 (1977):

An issue as to the existence or occurrence of particular fact, condition, or event, may be proved by evidence as to the existence or occurrence of similar facts, conditions, or events, under the same, or substantially similar, circumstances. [Fireman's Fund, supra quoting Savage v. Peterson Distributing Co., Inc., 379 Mich 197, 202; 150 NW2d 804 (1967)]

WHEREFORE, plaintiff Wendy Wiitala respectfully requests this Honorable Court to:

A. Enter the Order attached hereto as Exhibit 2, compelling Defendant Ford Motor Company to produce certain documents, memoranda, test reports, test requests, video tape, motion pictures, photographs and the like, which depict and/or pertain to inadvertent, unintentional, accidental or inertial openings of seat belt buckle(s) and latch plate(s), within ten days from the date of entry of the order; and

B. Produce to plaintiff all reports, complaints, claims, inquiries, warranties, and the like, in defendant Ford

Motor Company's possession, which relate to a seat belt
inadvertently, unintentionally, accidentally or inertially opening,
whether or not said event resulted in physical injury.

GOODMAN, LISTER, SEIKALY
& PETERS, P.C.

BY: Darrel Peters
DARREL PETERS (P 27156)
Attorney for Plaintiff
1394 E. Jefferson
Detroit, Michigan 48207
(313) 567-6165

DATED: December 9, 1991

STATE OF MICHIGAN
IN THE CIRCUIT COURT FOR THE COUNTY OF GENESEE

WENDY SUZANNE WIITALA,

Plaintiff,

Case No. 90-2895-NP

vs.

HON. ROBERT M. RANSOM

FORD MOTOR COMPANY,
a Delaware Corporation,

Defendant.

GOODMAN, LISTER, SEIKALY
& PETERS, P.C.
DARREL PETERS (P27156)
Attorneys for Plaintiff
1394 E. Jefferson
Detroit, Michigan 48207
(313) 567-6165

DICKINSON, WRIGHT, MOON
VAN DUSEN & FREEMAN
KELVIN W. SCOTT (P41023)
Attorneys for Defendant

**BRIEF IN SUPPORT OF PLAINTIFF'S MOTION
TO COMPEL PRODUCTION OF DOCUMENTS**

FACTS

Plaintiff Wendy Wiitala sustained quadriplegic injuries in a multi-vehicle accident which occurred on July 14, 1988. Ms. Wiitala was driving a 1982 Mercury Lynx manufactured by Defendant Ford Motor Company at the time of this accident. She was wearing the occupant restraint system supplied by Ford.

Plaintiff contends that her injuries were the result of a defect in the restraint system which caused it to inertially open during the impact, allowing Ms. Wiitala to be ejected from the vehicle. Plaintiff further contends that at the time of this accident, Ford was aware of alternative designs for occupant restraint systems which could reasonably have been employed and

which would have avoided this tragedy.

On or about November 18, 1991, plaintiff served her Second Request for Production of Documents and Things upon defendant Ford Motor Company ("Ford"). This request sought documents which pertained to "alternative designs," i.e., seat belt buckles and latch plates utilized by Ford in its European, South American, South African and Australian Escort/Lynx¹ automobiles, as follows:

REQUEST NO. 1.

All engineering drawings, still photographs, motion pictures, videotapes, point-of-sale literature, memoranda and all other documents and materials which illustrate, describe or otherwise allow a determination of the design of the seat belt buckles and latch plates used in production 1982 Ford Escort/Mercury Lynx-type vehicles sold in Europe, South America, South Africa and/or Australia. (By the phrase "Ford Escort/Mercury Lynx-type" vehicles, plaintiff means vehicles with essentially the same body style and/or wheel base as the domestic 1982 Ford Escort/Mercury Lynx, even if marketed under a different model name overseas.)

REQUEST NO. 2.

All specifications, guidelines, memoranda and all other documents and materials which relate, in whole or in part, to any design and/or performance specifications, criteria and/or requirements for the seat belt buckles and latch plates used in production 1982 Ford Escort/Mercury Lynx-type vehicles sold in Europe, South America, South Africa and/or Australia.

¹ The request pertained to vehicles which were substantially similar to the body style and/or wheel base as the domestic 1982 Ford Escort/Mercury Lynx, which is the subject of this litigation, but which may have been marketed under different model names overseas.

REQUEST NO. 3.

All test reports, test requests, engineering drawings, still photographs, motion pictures, videotapes, memoranda and all other documents and materials which relate, in whole or in part, to any analysis, study, consideration, evaluation or testing relating to the inadvertent, accidental, inertial or unintended opening of a seat belt buckle and latch plate assembly of the type used in production 1982 Ford Escort/Mercury Lynx-type vehicles sold in Europe, South America, South Africa and/or Australia.

REQUEST NO. 4.

All piece cost analyses, tooling cost analyses, memoranda and all other documents and materials which relate, in whole or in part, to the unit cost and tooling cost of the seat belt buckle and latch plate assembly used in the 1982 Ford Escort/Mercury Lynx-type vehicles sold in Europe, South America, South Africa and/or Australia.

Upon information and belief, the seat belt buckles and latch plates installed by Ford in vehicles sold in foreign markets differ in design from those utilized by Ford in its domestic market and are less susceptible or impervious to inertial release in an accident.

During a telephone conversation on or about November 25, 1991, counsel for Ford indicated that defendant would not produce the requested documents.

ARGUMENT

MCR 2.302(B)(1) provides in pertinent part:

(1) In General. Parties may obtain discovery regarding any matter, not privileged, which is relevant to the subject matter involved in the pending action, . . . [Emphasis added].

As noted earlier, plaintiff's second request for production of documents and things seeks information relating to alternative restraint system designs utilized by Ford in substantially similar automobiles distributed in foreign markets. These documents are relevant to the instant action and under case law, clearly discoverable.

In the case of Boatland of Houston, Inc. v. Bailey, 609 S.W. 2d 743 (Tex. Sup. Ct., 1980), the Texas Supreme Court wrote:

[The jury's] finding on defectiveness may be influenced by evidence of a safer design that would have prevented the injury. [Citations omitted] . . .

Whether a product was defectively designed must be judged against the technological context existing at the time of its manufacture. . . . [T]he more scientifically and economically feasible the alternative was, the more likely that a jury may find that the product was defectively designed. A plaintiff may advance the argument that a safer alternative was feasible with evidence that it was in actual use or was available at the time of manufacture. Feasibility may be shown with evidence of the scientific and economic capacity to develop the safer alternative.

Id., at 746.

* * *

Logically, the plaintiff's strongest evidence of feasibility of an alternative design is its actual use by the defendant or others at the time of manufacture. Even if a safer alternative was not being used, evidence that it was available, known about, or capable of being developed is relevant in determining its feasibility.

Id., at 748.

In a product liability case, part of plaintiff's burden is to show the existence or availability of feasible alternative designs. Showing a defendant's knowledge of such designs is persuasive evidence on the issue of the defendant's negligence.

The Eighth Circuit wrote in Hoppe v Midwestern Conveyor Co, 485 F2d 1196, 1201 (CA 8th Cir, 1973):

Liability alleged from defective design encompasses many factors not generally relevant to ordinary negligence in tort cases. The comparative design with similar and competitive machinery in the field, alternative designs and post-accident modification of the machine, the frequency or infrequency of use of the same product with or without mishap, and the relative cost and feasibility in adopting the designs are all relevant to proof of defective design.

Plaintiff is therefore entitled to receive documents and evidence of the Ford's knowledge of "alternative designs," and in particular, the documents and materials concerning seat belt buckles and latch plate assemblies utilized by Ford in its European, South American, South African and Australian markets.

For the foregoing reasons, plaintiff respectfully requests that this Honorable Court to issue an order compelling Defendant Ford Motor Company to produce the documents and things requested in plaintiff's Second Request for Production of Documents

and Things.

GOODMAN, LISTER, SEIKALY
& PETERS, P.C.

BY: Darrel Peters

DARREL PETERS (P 27156)
Attorney for Plaintiff
1394 E. Jefferson
Detroit, Michigan 48207
(313) 567-6165

DATED: December 9, 1991

CIRCLE THE APPROPRIATE SELECTION

"X" IF CORRECTED COPY

Department Name: OTISVILLE Police LEIN Number: 640 Department/Complaint No.: 64-971-75 Area: _____
 Precinct: _____
 Time: _____
 County No.: 25 City No.: _____ Twp. No.: 09 Section No.: _____ Day of Week: S M T W T F S Accident Date: Mo: 7/14/88 Ca: 71 Yr: 88 Time: 5:25 PM
 Route No.: _____ Intersection: 3rd MI. (N S E W) Dodge Rd Route No.: _____
 WEATHER: Clear or Cloudy Rain Day Street Lights Dry Snowy or Icy Fog Snow Dawn or Dusk Dark Wet Other
 ROAD SURFACE: Dry Snowy or Icy Wet Other
 TOTAL LANES: 2 Divided Limited Access Other
 Y Construction Zone
 Y Investigated at Scene
 TOTAL NO. VEHICLES: 3
 No. Inj.: _____
 No. Killed: _____

State: MI Driver's License: _____ DOB: Mo/Da/Yr Hazardous Action No.: 6 Citation Charge: _____ HBD: Test: Helmet:
 Driver's Name: MT ROSE MI City: _____ State: MI Age: 38 Sex: F Inj.: 0
 Year/Make/Mod/Type: 80/05/1 Trailer: _____ VIN (Make Letters Larger Than Numbers): 84MI6H45FAY Removed to/by: OWNER
 Y Haz. Citation Y Driver Re-exam Y Vehicle Defect Y Fuel Leakage Y Vehicle Fire
 Y Other Citation Y Vision Obstruct Y Veh. Driveable Y Veh. Fire
 Impact: 6 Severity: 3 Truck Cargo: _____ Class: _____
 Y Cargo Spillage
 Cargo Description: _____

Restraints by Occupants pos.	Name	Address	Pos.	Age	Sex	Inj.	Helmet
1	[Redacted]	[Redacted]	3	32	F	0	Y <input checked="" type="checkbox"/>
2	[Redacted]	[Redacted]	4	4	F	0	Y <input checked="" type="checkbox"/>
3	[Redacted]	[Redacted]	5	10	F	0	Y <input checked="" type="checkbox"/>

Local Use/Owner, Phone (if Veh. Type 7 or 8, List Carrier): _____ Insurance Co.: CITIZENS Agency Address: _____ Injured taken to/by: _____
 State: MI Driver's License: _____ DOB: _____ Hazardous Action No.: 0 Citation Charge: _____ HBD: Test: Helmet:
 Driver's Name: Witala City: MONTROSE MI Age: 19 Sex: F Inj.: A
 Year/Make/Mod/Type: 82/10/1 Trailer: _____ VIN (Make Letters Larger Than Numbers): 84MI1MEBP638CW Removed to/by: M-15 TOWING
 Y Haz. Citation Y Driver Re-exam Y Vehicle Defect Y Fuel Leakage Y Vehicle Fire
 Y Other Citation Y Vision Obstruct Y Veh. Driveable Y Veh. Fire
 Impact: 8 Severity: 7 Truck Cargo: _____ Class: _____
 Y Cargo Spillage
 Cargo Description: _____

Restraints by Occupants pos.	Name	Address	Pos.	Age	Sex	Inj.	Helmet
1	[Redacted]	[Redacted]	6	3	F	0	Y <input checked="" type="checkbox"/>
2	[Redacted]	[Redacted]	7	11	M	0	Y <input checked="" type="checkbox"/>
3	[Redacted]	[Redacted]	8	11	M	0	Y <input checked="" type="checkbox"/>

Local Use/Owner, Phone (if Veh. Type 7 or 8, List Carrier): _____ Agency Address: ALL STATE Injured taken to/by: Hudson/Hurly
 ACCIDENT DESCRIPTION AND REMARKS ("Explain")
 Veh #1 was attempting to make a west bound turn from north bound Irish. Driver #1 stated that Veh #2 had a turn signal on but other witness stated that they didn't see one. Veh #1 hit Veh #2 causing Veh #2 to skid out of control into the north bound lane and hit Veh #3.
 Road Align. _____
 Traffic _____
 Road Loc. _____
 Acc. Type _____
 Where _____
 How _____
 Tags _____
 Road Def. _____
 1 Veh. Def. _____
 1 Vision Obs. _____
 2 Veh. Def. _____
 2 Vision Obs. _____
 MALI _____
 Coord _____
 File _____

Reported Mo/Da/Yr: 7/17/88 Time: 5:33 A.M. P.M. Investigator: [Signature] Badge No.: 12 Damaged Property Other Than Vehicle: None
 by: _____ Comp. Disposition: Open Reviewer: [Signature] Person Advised of Damaged Traffic Control Device: _____ Name: _____ Date: _____ Time: _____
 Owner: _____ Address: _____

OTISVILLE POLICE DEPARTMENT
300 East Street
Otisville, Mi. 48463

Venue: 09

File Class: 93001

Date: 07-14-88

Complaint # 64-: 0971-88

Time: 5:33 P

Complainant: [REDACTED]

Type: P.I.A.

Investigating Officer: COLEMAN

Victim: [REDACTED]

D.O.B.: [REDACTED]

Tx: [REDACTED]

Address: [REDACTED]

City: [REDACTED]

State: [REDACTED]

Zip: [REDACTED]

Information: [REDACTED]

SEE UD-10 FOR ACCIDENT INFO.

Attachment:
ON 7-14-88 AT APPROX 5:30 PM, I WAS DISPATCHED BY CENTRAL TO A P.I.A. AT DODGE AND IRISH RD.

ON ARRIVAL I OBSERVED A FEMALE LAYING IN THE MIDDLE OF IRISH RD. SOUTH OF DODGE RD. I APPROACHED THE FEMALE AND SHE WAS ALERT AND CONSCIOUS. I ASKED HER NAME AND SHE STATED HER NAME WAS [REDACTED] AND TO PLEASE GET HER OFF THE HOT PAVEMENT. AT THIS TIME HUDSON AMBULANCE ARRIVED AND ATTENDED VICTIM.

RETURNED TO MY CRUISER AND REQUESTED AN E-UNIT AND ASSISTANCE FOR TRAFFIC CONTROL.

ASSISTED BY RICHFIELD TWP. PD.

VEHICLE #1: 1980 DODGE REG. 961 GNJ

DRIVER: [REDACTED]

MONTROSE, MI.

DRIVER #1 STATED: THAT SHE WAS NORTH BOUND ON IRISH RD. ATTEMPTING TO TURN WEST

Attachment:
ONTO DODGE RD. SHE STATED THAT SHE OBSERVED VEHICLE #2 COMING TOWARD HER WITH HER LEFT TURN SIGNAL ON AND SHE ATTEMPTED TO MAKE HER TURN AND WAS STRUCK BY VEHICLE #2.

VEHICLE #2 1982 MERCURY REG. # 146 WVT

DRIVER: [REDACTED]

MONTROSE, MI.

NO STATEMENT FROM DRIVER #2 BECAUSE OF SERIOUS INJURIES.

VEHICLE #3 1988 CHEV S-10 F/U REG. # 368 KBX

DRIVER: [REDACTED]

MILLINGTON MI.

DRIVER #3 STATED THAT [REDACTED] VEHICLE #1 HIT VEHICLE #2.

Attachment:

HITTING HER VEHICLE. I ASKED IF SHE SEEN IF VEHICLE #2 HAD HER LEFT TURN SIGNAL ON? SHE STATED SHE DIDN'T REMEMBER SEEING ONE.

WITNESS:

[REDACTED]
OTISVILLE MI. TX [REDACTED]

STATEMENT: [REDACTED] STATED THAT VEHICLE #1 HIT VEHICLE #2 AS VEHICLE #1 WAS MAKING A LEFT TURN IN FRONT OF VEHICLE #2. VEHICLE #2 WENT OUT OF CONTROL AND HIT VEHICLE #3. THE DRIVER OF VEHICLE #2 WAS THROWN FROM THE VEHICLE. I ASKED [REDACTED] IF VEHICLE #2 HAD HER LEFT TURN SIGNAL ON? [REDACTED] STATED THAT SHE DID NOT SEE VEHICLE #2 HAVE A TURN SIGNAL ON.

WITNESS:

[REDACTED]
FOSTORIA, MI. TX [REDACTED]

WITNESS:

[REDACTED]

Attachment:

MILLINGTON MI. TX 271 2626

[REDACTED] AND [REDACTED] WERE IN THE SAME VEHICLE, THEY STATED THAT VEHICLE #1 MADE A LEFT HAND TURN INTO VEHICLE #2. VEHICLE #2 WENT OUT OF CONTROL HITTING VEHICLE #3. I ASKED IF THEY SAW A LEFT TURN SIGNAL ON, ON VEHICLE #2. THEY STATED THAT THEY DIDN'T SEE ONE.

RAN DRIVER #1 THROUGH LEIN. LEIN STATED THAT THE DRIVER OF VEHICLE #1 WAS SUSPENDED OUT OF FLUSHING COURT SINCE 8-24-87 FOR FAC PLATES AND INSURANCE.

I ADVISED DRIVER #1 THAT SHE WAS SUSPENDED AND THAT I WOULD CONTACT HER AT A LATER TIME TO NOTIFY HER OF THE CHARGES AGAINST HER.

A FEW DAYS LATER I ATTEMPTED TO CONTACT DRIVER #1 BY PHONE WITH THE PHONE NUMBER THAT SHE GAVE ME. I FOUND THAT THE PHONE HAD BEEN DISCONNECTED. I WENT TO THE ADDRESS AND RECEIVED NO ANSWER AT THE DOOR. A NEIGHBOR ADVISED ME THAT THE PERSONS AT THAT ADDRESS MOVED OUT YESTERDAY. DRIVER #1 LOCATION UNKNOWN.

IN THE CIRCUIT COURT OF KANAWHA COUNTY, WEST VIRGINIA

DORINA YOUNG, next friend
of JINNEE YOUNG and DAVID
YOUNG, infants, and YVONNE
SMITH, next friend of
LORIE SMITH, infant,

Plaintiffs.

VS.

CASE NO. 89-C-1121

FORD MOTOR, CO., a
Corporation, B. F. GOODRICH COMPANY, a Corporation,
PERFORMANCE TIRE & WHEEL, INC.,
a Corporation, CHAMPION CAR SALES, INC.,
A Corporation, doing
business as BUDGET CAR SALES, A
Budget System Licensee,
RANCHO INDUSTRIES, INC., a Corporation,
doing business as RANCHO SUSPENSIONS PRODUCTS,
TRAIL MASTER PRODUCTS, INC., A
Corporation, RUGGED TRAIL, INC., A Corporation,
INLAND MOLD CRAFT, INC., a corporation,
ART HALE INDUSTRIES, A corporation now merged with
AMERICAN RACING EQUIPMENT, INC., A California
Corporation, and a wholly owned
subsidiary of NORANDA ALUMINUM, INC.,
A Corporation, and
MILTON YOUNG and DORINA YOUNG.

Defendants.

COMPLAINT

Now come your Plaintiffs, and for their Complaint
against the Defendant respectfully state as follows:

COUNT I

1. Plaintiff Dorina Young is a resident of Roane
County, West Virginia, and the next friend of David Young
and Jinnee Young.

2. Yvonne Smith is a resident of Roane County and the next friend of Lorie Smith.

3. On the 14th day of January, 1989, Jinnee Young, David Young and Lorie Smith were passengers in a certain 1987 Ford Bronco, II owned by Defendant Dorina Young and operated by Defendant Milton Young, in a southerly direction on Interstate 79 in Kanawha County, West Virginia.

4. That at said time and place, the said Ford Bronco in which the three infant Plaintiffs were passengers left the roadway, flipped over, causing said infant Plaintiffs to be thrown in, about and from said vehicle.

5. That as a direct and proximate result of said accident, Jinnee Young suffered a broken pelvis, ruptured spleen, punctured intestines, broken clavical, severe concussion, and other various bruises, cuts, lacerations, and other injuries.

6. That as a direct and proximate result of said accident, David Young suffered a broken back, blood clot in the brain, amputation by force of his right ear, and various bruises, cuts, lacerations, and other injuries.

7. That as a direct and proximate result of said accident, Lorie Smith suffered a broken back, broken left arm and other various bruises, cuts, lacerations, and other injuries.

8. That as a result of the injuries incurred by her in said accident, Jinnee Young has to date incurred medical

expenses and will incur additional medical expenses in the future incident to the treatment of the injuries received.

9. That as a result of the injuries received in said accident, Jinnee Young incurred considerable pain and suffering, and will continue to suffer pain and discomfort in the future, and will suffer mental and emotional anguish now, and in the future.

10. That many of the injuries incurred by the said Jinnee Young as a result of the accident will be permanent in nature, and will cause a diminution in her ability to earn income in the future, and will have a diminished capacity to enjoy life.

11. That as a result of the injuries incurred by him in said accident, David Young has to date incurred medical expenses and will incur additional medical expenses in the future incident to the treatment of the injuries received.

12. That as a result of the injuries received in said accident, David Young incurred considerable pain and suffering, and will continue to suffer pain and discomfort in the future, and will suffer mental and emotional anguish now, and in the future.

13. That many of the injuries incurred by the said David Young as a result of the accident will be permanent in nature, and will cause a diminution in his ability to earn income in the future, and will have a diminished capacity to enjoy life.

14. That as a result of the injuries incurred by her

in said accident, Lorie Smith has to date incurred medical expenses and will incur additional medical expenses in the future incident the treatment of the injuries received.

15. That as a result of the injuries received in said accident, Lorie Smith incurred considerable pain and suffering, and will continue to suffer pain and discomfort in the future, and will suffer mental and emotional anguish now, and in the future.

16. That many of the injuries incurred by the said Lorie Smith as a result of the accident will be permanent in nature, and will cause a diminution in her ability to earn income in the future, and will have a diminished capacity to enjoy life.

17. That the accident aforesaid, and the resulting in injuries to the infant Plaintiffs were a direct and proximate result of the negligence of Defendant Milton Young, individually, in the operation of the said Ford Bronco, II, in that the said Milton Young operated said vehicle in such a careless and negligent manner that he was unable to maintain control of same causing it to leave the roadway.

18. That at the time of the accident as aforesaid, Defendant, Dorina Young was the registered owner of said motor vehicle, and permitted Defendant Milton Young to operate said vehicle with her full knowledge and consent.

19. That said Ford Bronco, II at all times relevant herein, was being operated by Defendant Milton Young under

the family purpose doctrine.

20. That all of the injuries of the infant Plaintiffs as described herein were a direct and proximate result of the negligence of Defendant Milton young, as operator of said vehicle, which said negligence is imputed to Defendant Dorina Young.

WHEREFORE, Your Plaintiffs respectfully pray for judgment against the Defendants, Milton Young and Dorina Young, named herein, as set forth hereinafter in the Prayer at the conclusion of this Complaint.

COUNT II

21. Plaintiffs hereby incorporate the allegations in Paragraphs 1 through 16, of Count 1 of Plaintiffs' complaint.

22. Defendant, Ford Motor Co., a Delaware Corporation, is a corporation authorized to do business in West Virginia and doing business in Kanawha County, West Virginia, hereinafter referred to as Ford.

23. Prior to the 14th day of January, 1989, the said Ford Bronco II was equipped with a body lift kit and oversized tires with modifications made to the steering as a result of which the height of said vehicles was dangerously raised rendering the same more difficult to control.

24. That Defendant, Ford, manufactured the said Ford Bronco II being driven at the time of the accident described herein.

25. That Defendant, Ford, well knew that modifications to the said vehicle with equipment such as, and including, body lift kit, oversized tires, steering modifications, and similar products, would render said vehicle difficult and dangerous to control.

26. That notwithstanding knowledge of Defendant, Ford, that such modifications to the said Ford Bronco, II, would render said vehicle unsafe, Defendant, Ford, failed to provide adequate warning to potential consumers, purchasers, users and passengers of said vehicle, through marketing, advertising, and other public dissemination of information, that modifications to said vehicle as aforesaid, would render the same unsafe.

27. Defendant, Ford, well knew that modifications to vehicles such as the Ford Bronco, II, in the manner described herein were common and had a duty to take affirmative steps to notify the public that such modifications would render vehicles such as the Ford Bronco, II, unsafe.

28. That the Defendant, Ford, manufactured the same Ford Bronco, II, and further, the Defendant, Ford, has promoted, marketed, and advertised modifications to vehicles of this nature to be equipped with body lift kit, oversized rims, oversized tires, and has sponsored shows and like events featuring monster trucks and car crusher shows and events attracting large numbers of spectators and generating considerable publicity promoted,

advertised, marketed and sold modifications of these vehicles on both national and local radio and television as well as national and local print media.

29. That Defendant, Ford, designed, manufactured, produced, sold said vehicle with a defective and inherently dangerous back seat and did fail to provide the necessary shoulder restraints and seat belts for the passengers occupying said vehicle and the seatbelt and shoulder harness as designed and placed upon said Ford Bronco, II, used by Plaintiff, DORINA Young failed to work as advertised.

30. That as a result of the design, manufacture, assembly, marketing, promotion, distribution, selling, or placing in the stream of commerce, said Ford Bronco, II, in a defective condition, the Defendant, Ford, is strictly in tort for the injuries to the Plaintiffs.

31. That the failure of Defendant, Ford, to warn, inform, instruct, and appraise the general public that said modifications to the Ford Bronco, II, would render said vehicle unsafe constitutes gross negligence and/or strict liability in tort.

32. That as a direct and proximate result of the acts or failures to act by Defendant, Ford, the Plaintiffs were injured and said injuries are permanent in nature.

33. That Plaintiffs Jinnee Young and David Young did, prior to the accident described herein, fasten their lap seat belts in the rear seat of the said Ford Bronco, II,

installed by Defendant Ford at the time of the manufacture and assembly of said vehicle.

34. That notwithstanding the fact that Jinnee Young and David Young had properly fastened their lap seat belts, said seat belts failed to retain them in the vehicle, and as a result thereof they were thrown from the vehicle.

35. That Defendant Ford was careless and negligent in the installation and design of said rear seat, rear seat restraints and lap seat belts, and as result of said negligence, said seats, restraints and seat belts failed to hold the passengers within the vehicle.

36. That Plaintiff Lorie Smith was seated in the middle rear passenger seat of the said Ford Bronco, II at the time of the accident as described herein. Notwithstanding the fact that the manufacture and design of the said Ford Bronco, II by Defendant Ford contemplated accommodation of three passengers in the rear seat of said vehicle, no rear seat restraint for a person seated in the middle of the back seat were provided, therefore denying the said Lorie Smith the opportunity to protect herself against injury in the event of an accident.

37. That a majority of the injuries received by the infant Plaintiffs herein were a direct and proximate result of the gross negligence of Defendant Ford in the installation of the rear lap seat belts, and the failure to install a lap seat belt for the middle rear passenger.

38. That notwithstanding the allegations contained hereinabove, in this Count, Defendant, Ford, did cause and allow the Ford Bronco, II, mentioned hereinbefore, to be placed for sale to, and use by, the general public and your Plaintiff, in particular, for the benefit of Ford and the detriment of the Plaintiffs.

39. That by reason of all of the foregoing, Defendant Ford violated express warranties, implied warranty of fitness for a particular purpose, and implied warranty of merchantability.

WHEREFORE, Your Plaintiffs respectfully pray for judgment against the Defendant, Ford Motor Co., named herein as set forth hereinafter in the Prayer at the conclusion of this Complaint.

COUNT III

40. Plaintiffs hereby incorporate the allegations in Paragraphs 1 through 16, of Count 1 of Plaintiffs' complaint.

41. Defendant, B. F. Goodrich Company, a Delaware Corporation, authorized to do business in the State of West Virginia, and doing business in Kanawha County, West Virginia, hereinafter known as B. F. G.

42. Prior to the 14th day of January, 1989, the said B.F.G., did provide, sale, design, produce, manufacture and distribute Radial All-Terrain 1/A tires to the general public and for such tires were sold and placed on the Ford Bronco, II, referred to hereinabove.

WEST VIRGINIA UNIFORM TRAFFIC ACCIDENT REPORT

DATE	1977 01 14	TIME	1050 AM	REPORTED BY	1055 AM 1/14/77	89-51
LOCATION	RAVENS		RAVENS			
TYPE OF ACCIDENT	Rear End		Rear End			
WEATHER	Clear		Clear			

DRIVER	Name	[REDACTED]		Address	[REDACTED]	89-51	
	SEX	[REDACTED]	HAIR	[REDACTED]	DOB		[REDACTED]
	HT	[REDACTED]	WT	[REDACTED]	EDUCATION		[REDACTED]
	OC	[REDACTED]	EXPIRES	[REDACTED]	CLASSIFICATION		[REDACTED]

VEHICLE	Year	1976	Make	Ford	Model	Mustang	89-51
	TYPE	Passenger	DRIVE	Rear	REG	[REDACTED]	
	REG	[REDACTED]	EXPIRES	[REDACTED]	CLASSIFICATION	[REDACTED]	
	OC	[REDACTED]	EXPIRES	[REDACTED]	CLASSIFICATION	[REDACTED]	

WEST VIRGINIA UNIFORM TRAFFIC ACCIDENT REPORT - Form No. 1 (1976) - Revised 1/77
 Copyright © 1976 by the West Virginia State Police

UNIT	NO. OF PASSENGERS	TYPE OF PASSENGERS	AGE

CARRIER	FLIGHT NO.	CLASS	CARRIER	CLASS	SEAT	AGE

NAME	LAST	FIRST	MIDDLE	SEX	HAIR	EYES	COMPLEXION	HEIGHT	WEIGHT	BUILD	DATE OF BIRTH	PLACE OF BIRTH

NO.	NAME	LAST	FIRST	MIDDLE	SEX	HAIR	EYES	COMPLEXION	HEIGHT	WEIGHT	BUILD	DATE OF BIRTH	PLACE OF BIRTH

NO.	NAME	LAST	FIRST	MIDDLE	SEX	HAIR	EYES	COMPLEXION	HEIGHT	WEIGHT	BUILD	DATE OF BIRTH	PLACE OF BIRTH

NO.	NAME	LAST	FIRST	MIDDLE	SEX	HAIR	EYES	COMPLEXION	HEIGHT	WEIGHT	BUILD	DATE OF BIRTH	PLACE OF BIRTH

NO.	NAME	LAST	FIRST	MIDDLE	SEX	HAIR	EYES	COMPLEXION	HEIGHT	WEIGHT	BUILD	DATE OF BIRTH	PLACE OF BIRTH

NO. OF PASSENGERS	TYPE OF PASSENGERS	AGE

DESIGNATE AS REFERRED BY THE FIELD OFFICER IN CHARGE OF THE INVESTIGATION IN THE
CHECK THESE CONTROL DEVICES, ETC. (SEE INSTRUCTIONS ON THE FRONT PAGE)
SUBJECT'S NAME AND ADDRESS INCLUDING THE VEHICLE NUMBER ON THE FRONT PAGE

DATE AND TIME OF
REPORT BY OFFICER



No Drawing Due to
The Limited Conditions
of Roadway

DESCRIBE WHAT HAPPENED (Refer to Vehicles by Number)

Vehicle 1 was northbound on road with
accident to driver and the other vehicle
on road and stopped at scene. Vehicle 2 was
southbound on road and stopped at scene. The
motor company to receive it when they
come to the scene. Both vehicles were

COLLECTION OF EVIDENCE

NARRATIVE

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SAM J. SMITH, ESQ.
GOLDEN & SMITH
495 South Pastoria Avenue
Sunnyvale, California 94088
Telephone: (408) 736-9551

Attorney for Plaintiff

Discovery by Ford

IN THE SUPERIOR COURT OF THE STATE OF CALIFORNIA
IN AND FOR THE COUNTY OF SACRAMENTO

GAYLE ALLEN SMITH,
Plaintiff,
vs.
FORD MOTOR COMPANY, et al.
Defendant.

No: 522406
PLAINTIFF'S ANSWERS
TO DEFENDANT'S FORM
INTERROGATORIES

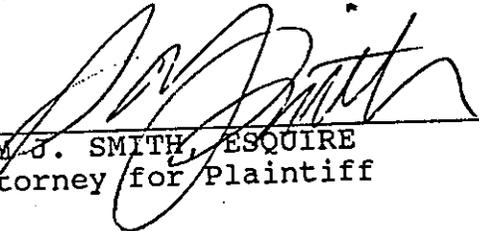
Propounding Party: Defendant, FORD MOTOR COMPANY

Responding Party: Plaintiff, GAYLE ALLEN SMITH

Set Number: One

Plaintiff, in the above matter hereby answers the
Interrogatories propounded by Defendant, in writing and under oath,
pursuant to Code of Civil Procedure Section 2030 as follows.

Dated: June 12, 1992


SAM J. SMITH, ESQUIRE
Attorney for Plaintiff

- 1 1.1. Gayle Allen Smith, 402 Atkinson Street, Roseville, CA 95678
2 (916) 773-3357.
- 3 2.1. a. Gayle Allen Smith
4 b. n/a
5 c. n/a
- 6 2.2. 06/27/58, San Jose, California.
- 7 2.3. Yes.
8 a. California.
9 b. Class C - N4601544
10 c. 6/27/89
11 d. None.
- 12 2.4. No.
- 13 2.5 a. 12-90 to present, 402 Atkinson St., Roseville, CA 95678
14 b. 11-88 to 12-90, 701 Mulberry Lane, Lincoln, CA;
15 c. 5/88 to 11/88, 402 Atkinson Street, Roseville, CA
16 1/86 to 5/88, 3132 Hurley Way, Sacramento, CA.
- 17 2.6. a. California Army National Guard, 2829 Watt Avenue,
18 Sacramento, CA 95821, (916) 854-3394.
19 b. Same as above. March, 1985 to present, Present rank -
20 Sergeant.
- 21 2.7. a. Cupertino High School, Cupertino, CA
22 b. Graduated June, 1976.
23 c. DeAnza Junior College, Cupertino, CA, June 1976-January,
24 1977.
25 Modesto Junior College, September, 1982 to January, 1983.
26 Total of 15 units of Junior College - credits completed.
27 d. No degrees.
28

- 1 2.8. No.
- 2 2.9. Yes.
- 3 2.10. Yes.
- 4 2.11. No.
- 5 2.12. No.
- 6 2.13. Yes.
- 7 a. One beer - myself.
- 8 Margaret Smith, Route 1, Box 187, Silesia, Montana 59014
- 9 (406) 962-3939.
- 10 b. Beer.
- 11 c. Exact amount unknown by me.
- 12 d. Evening, 8/24/90.
- 13 e. 4141 Palm Ave., Apt. 401
- 14 Sacramento, CA 95842
- 15 f. Willie Clark, Dorothy Clark and Marie Clark,
- 16 4635 Antelope Rd. - 4900 Marconi Ave., Sacramento, CA
- 17 g. N/A. (916) 722-9327
- 18 4.1. Yes.
- 19 a. Full coverage, E-Z-READER CAR POLICY.
- 20 b. Farmers Insurance Company by Mid-Century, 4680 Wilshire
- 21 Blvd., Los Angeles, CA 90010.
- 22 c. Gayle Smith, Margaret Smith.
- 23 d. 951262706, 95128811389.
- 24 e. \$15,000.00/\$30,000.00.
- 25 f. Yes. The insurance company claims there is no obligation
- 26 to pay for my injuries because of the family exclusion clause in
- 27 the policy.
- 28

1 g. Bob Nielson, agent, Auburn Blvd., Sacramento, California.
2 I do not know if the agent still has the policy.
3 4.2. No.
4 6.1. Yes.
5 6.2. Fractured right femur; fractured 2 fingers of left hand;
6 severely lacerated forehead and brow; fractured rib.
7 6.3. Yes.
8 a. Soreness right hip and thigh, walking or running is
9 extremely painful, fingers of left hand are stiff and sore, brow
10 and forehead is partially numb and severely scarred.
11 b. The complaints seem to have stabilized and are not
12 improving.
13 c. The soreness is constant in my right hip and thigh and
14 left hand. The numbness in my brow and forehead is always there.
15 6.4. Yes.
16 a & b. U.C. Davis Medical Center, Davis, California, Trauma
17 care and surgery.
18 Letterman Army Medical Center, Presidio of San
19 Francisco, San Francisco, California. Miscellaneous medical
20 procedures.
21 U.S. Air Force Hospital, Mather Air Force Base,
22 Sacramento, California. Surgery and miscellaneous medical
23 procedures.
24 c. Exact dates unknown.
25 d. The total charges have yet to be determined.
26 6.5. Yes.
27 a through e. All medications were given by the hospitals
28

1 listed in 6.4 above. The exacts dates and amounts and costs are
2 not known by me at this time.

3 6.6. Yes.

4 a through d. Ambulance, 8-24-90 to U.C. Davis Medical Center,
5 Foothill Ambulance Company, Sacramento, California.

6 Ambulance, 9-7-90 or 9-8-90, from U.C. Davis Medical Center to
7 Letterman Hospital, San Francisco Presidio, California.

8 Exact addresses and costs are unknown.

9 6.7. Yes.

10 a through c. Dr. Anderson, orthopedist at U.S.A.F. Hospital,
11 Mather AFB, indicated surgery to remove bone growth may be needed.

12 Cost unknown.

13 Further surgery to brow and forehead contemplated to remove
14 scarring. Cost unknown.

15 7.1. No.

16 7.2. N/A.

17 7.3. N/A.

18 8.1. Disability leading to future loss of earnings has not been
19 determined at this time.

20 8.2. a. Records Manager, State of California National Guard.

21 b. Readiness NCO.

22 c. March, 1985.

23 8.3. 8/24/90

24 8.4. \$2,100.00 per month, salary.

25 8.5. 11/1/90.

26 8.6. 8/27/90 through 11/1/90. No loss of income.

27 8.7. None.

28

- 1 8.8. a. If discharged as being disabled, I would lose the
2 difference between active duty pay and disability pay, if any. It
3 is unknown at this time if this will happen.
- 4 b. Unknown at this time.
- 5 c. Unknown at this time.
- 6 d. Unknown at this time.
- 7 9.1. No.
- 8 9.2. N/A.
- 9 10.1. No.
- 10 10.2. None.
- 11 10.3. No.
- 12 11.1. No.
- 13 11.2. No.
- 14 12.1. a & b. Margaret Smith, Route 1, Box 187, Silesia, Montana
15 59041, (406) 962-3939.
- 16 Chris Drake, 5316 President Avenue, N. Highlands, CA 95660,
17 (916) 349-0909.
- 18 c. Policeman who took statements at scene of accident.
- 19 d. No.
- 20 12.2. No.
- 21 12.3. No.
- 22 12.4. Not personally. There were probably photos taken by the
23 police investigators of the scene of the accident.
- 24 12.5. Only the police report made by the investigators at the
25 scene of the accident.
- 26 12.6. I am only aware of the police report made by the policemen
27 at the scene of the accident.
- 28

- 1 12.7. No.
- 2 20.1. 8/24/90, at approximately 10:30 p.m., Roseville Road, at or
3 near the intersection with Oak Hollow Drive.
- 4 20.2. a. 1984 Ford Tempo, Cal. Lic. # 1HCZ557.
5 1989 Chev. S10 Pickup, Cal. Lic. #3W02405.
- 6 b. Tempo - Gayle A Smith, Driver. Other information
7 previously given.
8 Chev. Pickup - Margaret A. Smith, Driver. Other
9 information previously given.
- 10 c. Tempo - Brandy Smith (address same as driver)
11 Chev. Pickup - Jeremy Wootan, (address same as driver).
- 12 d. Tempo - Gayle Smith
13 Chev. Pickup - Margaret Smith (other information
14 previously given.
- 15 e. No lessees.
16 f. None.
17 g. N/A.
- 18 20.3. Started at: 3250 Meadowview Road, Sacramento, California.
19 Destination: 402 Atkinson Street, Roseville, California.
- 20 20.4. Meadowview Road to I-5, North to I-80, North East to Watt
21 Avenue, North to Roseville Road, North to Palm Avenue, East,
22 stopped at the apartment to pick-up Brandy, went West on Palm
23 Avenue to Roseville Road North. Incident occurred on Roseville
24 Road near Oak Hollow Drive.
- 25 20.5. Roseville Road, Northbound in right lane, both vehicles.
- 26 20.6. No.
- 27 20.7. no.
- 28

1 20.8. I was Northbound on Roseville Road when my vehicle was
2 struck in the rear by another vehicle. I lost control of my
3 vehicle and it veered to the right and struck a utility pole. My
4 speed was approximately 35 miles per hour at the time of the
5 collision. The vehicle that struck me from behind overturned.
6 Both vehicles ended up on the right shoulder of the roadway.

7 20.9. No.

8 20.10. Yes.

9 a. The Ford Tempo that I was driving is described
10 previously above.

11 b. Upon impact with the utility pole, the seat belt,
12 which I had fastened when I entered the vehicle just prior to the
13 incident, disconnected, which allowed my body to smash into the
14 steering wheel, the dash board, and the windshield of the vehicle
15 which I was driving. The seat belt connecting device was
16 defective, either in its design, in its construction, or in its
17 installation, which allowed and permitted the connecting device to
18 disconnect upon the impact of the vehicle with the utility pole
19 which caused my body to be thrown forward against the seat belt
20 restraining system.

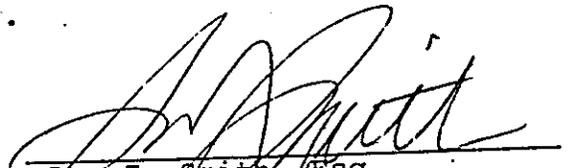
21 c. Herbert Jackson, Esquire, 1112 21st Street,
22 Sacramento, California 95814 (916) 448-4888.

23 d. Sam J. Smith, Esquire, 495 S. Pastoria Avenue,
24 Sunnyvale, CA 94086, (408) 736-9551.

25 20.11. The Ford Tempo which I was driving at the time of the
26 incident was taken to: Sacramento Salvage Pool, 11499 Douglas
27 Road, Sacramento, California (916) 635-4271. VIN #1FABP22RXEK,
28

1 California License Number: 1HCZ557.

2 Dated: June 10, 1992



Sam J. Smith, Esq.
Attorney for Plaintiff

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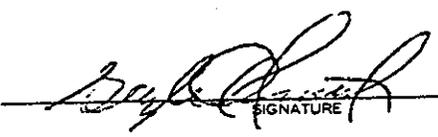
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VERIFICATION (Standard) CCP 446, 2015.5

I declare that:

I am the plaintiff in the above entitled action; I have read the foregoing Plaintiff's Answers to Defendant's Form Interrogatories - Set one and know the contents thereof; the same is true of my own knowledge, except as to those matters which are therein stated upon my information or belief, and as to those matters I believe it to be true.

I declare under penalty of perjury that the foregoing is true and correct and that this verification was executed on June 10, 1992, at Sacramento, California.

Gayle Allen Smith 
(TYPE OR PRINT NAME) (SIGNATURE)

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DECLARATION OF SERVICE BY MAIL

I am over the age of eighteen years and not a party to the within action, employed in the County of Santa Clara, State of California. My business address is 495 South Pastoria Avenue, Sunnyvale, California 94088. I served a copy of the PLAINTIFF'S ANSWERS TO DEFENDANT'S FORM INTERROGATORIES on the following:

Stephen J. Gay, Esquire
McKINLEY, GAY & KEITGES
1000 G Street, Suite 500
Sacramento, California 95814

by placing true copies in envelopes addressed to said persons at their respective address, which envelopes were then sealed and postage fully prepaid thereon, and were on June 11, 1992, deposited in the United States Mail in San Jose, California.

I declare under penalty of perjury that the foregoing is true and correct. Executed at San Jose, California on June 11, 1992.



SAM J. SMITH

STATE OF CALIFORNIA
TRAFFIC COLLISION REPORT

Carded
 Copies: HQ PAGE 1 OF 9

SPECIAL CONDITIONS	NUMBER INJURED 4	HT & RUN FELONY <input type="checkbox"/>	CITY UNIC.	JUDICIAL DISTRICT ACTO	LOCAL REPORT NUMBER 120 Co. Rd.
	NUMBER KILLED 0	HT & RUN M.S.D. <input type="checkbox"/>	COUNTY SARTO.	REPORTING DISTRICT 10	DOT 4 Coroner Misc SMUD

LOCATION	COLLISION OCCURRED ON ROSEVILLE RD.	DAY 0	DATE 24/90	TIME (2400) 2340	NCIC # 7250	OFFICER I.D. 4627
	MILEPOST INFORMATION	DAY OF WEEK SMTWTFSS	TOW AWAY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	PHOTOGRAPHS BY: 40 BY GARY HARSH		
	FEET/MILES OF 1100	AT INTERSECTION WITH W. OAK HOLLOW DR.	STATE HWY REL. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	STATE HWY REL. NO. 4217530		

PARTY 1	DRIVER'S LICENSE NUMBER	STATE	CLASS	SAFETY EQUIP.	VEH YEAR	MAKE / MODEL / COLOR	LICENSE NUMBER	STATE
DRIVER	[REDACTED]	CA	3	H	89	CHEV PLS10 GREY	[REDACTED]	CA
PEDESTRIAN	STREET ADDRESS [REDACTED]							
PARKED VEHICLE	CITY / STATE / ZIP ROSEVILLE CA							
BICYCLIST	SEX	HAIR	EYES	HEIGHT	WEIGHT	BIRTHDATE	RACE	DISPOSITION OF VEHICLE ON ORDERS OF: HIRST AUTO CHP 180
OTHER	HOME PHONE [REDACTED]							
	INSURANCE CARRIER MID CENTURY				POLICY NUMBER [REDACTED]			
	DIR. OF TRAVEL R		ON STREET COMMUNITY ROSEVILLE RD		SPEED LIMIT 50	PCF 2315260(B)	PRIOR MECHANICAL DEFECTS: NONE APPARENT <input checked="" type="checkbox"/> REFER TO NARRATIVE <input type="checkbox"/>	
	CHP USE ONLY VEHICLE TYPE		DESCRIBE VEHICLE DAMAGE		SHADE IN DAMAGED AREA			
	[REDACTED]		[REDACTED]		[REDACTED]			

PARTY 2	DRIVER'S LICENSE NUMBER	STATE	CLASS	SAFETY EQUIP.	VEH YEAR	MAKE / MODEL / COLOR	LICENSE NUMBER	STATE
DRIVER	[REDACTED]	CA	3	H	84	FORD TEMPO 4D Red	[REDACTED]	CA
PEDESTRIAN	STREET ADDRESS [REDACTED]							
PARKED VEHICLE	CITY / STATE / ZIP ROSEVILLE CA							
BICYCLIST	SEX	HAIR	EYES	HEIGHT	WEIGHT	BIRTHDATE	RACE	DISPOSITION OF VEHICLE ON ORDERS OF: HIRST AUTO CHP 180
OTHER	HOME PHONE [REDACTED]							
	INSURANCE CARRIER MID CENTURY				POLICY NUMBER [REDACTED]			
	DIR. OF TRAVEL R		ON STREET COMMUNITY ROSEVILLE RD		SPEED LIMIT 50	PCF [REDACTED]	PRIOR MECHANICAL DEFECTS: NONE APPARENT <input checked="" type="checkbox"/> REFER TO NARRATIVE <input type="checkbox"/>	
	CHP USE ONLY VEHICLE TYPE		DESCRIBE VEHICLE DAMAGE		SHADE IN DAMAGED AREA			
	[REDACTED]		[REDACTED]		[REDACTED]			

PARTY 3	DRIVER'S LICENSE NUMBER	STATE	CLASS	SAFETY EQUIP.	VEH YEAR	MAKE / MODEL / COLOR	LICENSE NUMBER	STATE
DRIVER	[REDACTED]							
PEDESTRIAN	STREET ADDRESS [REDACTED]							
PARKED VEHICLE	CITY / STATE / ZIP [REDACTED]							
BICYCLIST	SEX	HAIR	EYES	HEIGHT	WEIGHT	BIRTHDATE	RACE	DISPOSITION OF VEHICLE ON ORDERS OF: <input type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER
OTHER	HOME PHONE [REDACTED]							
	INSURANCE CARRIER [REDACTED]				POLICY NUMBER [REDACTED]			
	DIR. OF TRAVEL		ON STREET COMMUNITY		SPEED LIMIT	PCF	PRIOR MECHANICAL DEFECTS: NONE APPARENT <input type="checkbox"/> REFER TO NARRATIVE <input type="checkbox"/>	
	[REDACTED]		[REDACTED]		[REDACTED]	[REDACTED]	[REDACTED]	
	CHP USE ONLY VEHICLE TYPE		DESCRIBE VEHICLE DAMAGE		SHADE IN DAMAGED AREA			
	[REDACTED]		[REDACTED]		[REDACTED]			

TRAFFIC COLLISION CODING

DAY 24 YEAR 90 TIME (24H) 2340 IN X NUMBER 7250 OFFICER ID 4627 NUMBER

PROPERTY [REDACTED] NOTIFIED YES NO

DESCRIPTION OF DAMAGE: **POLE, 75' WIRE FENCE**

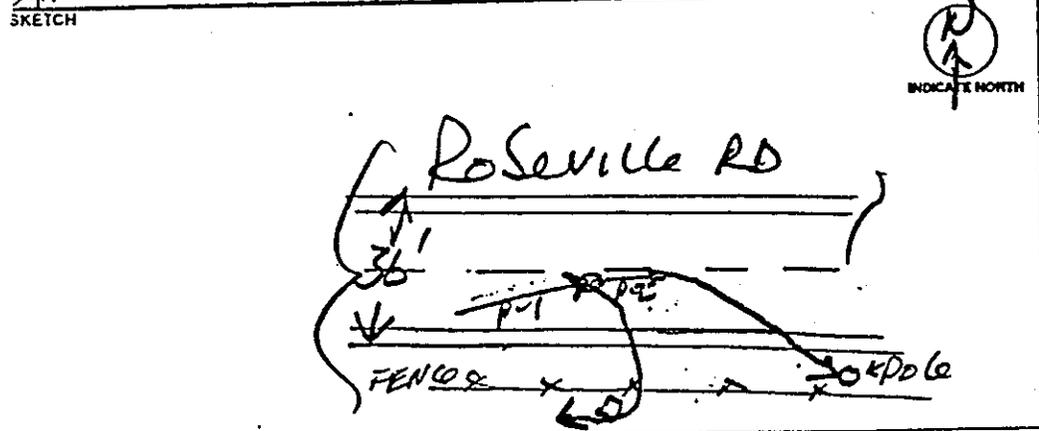
SEATING POSITION: 1 - DRIVER, 2 TO 6 - PASSENGERS, 7 - STATION WAGON REAR, 8 - REAR OCC. TRK. OR VAN, 9 - POSITION UNKNOWN, 0 - OTHER

SAFETY EQUIPMENT: L - AIR BAG DEPLOYED, M - AIR BAG NOT DEPLOYED, N - OTHER, P - NOT REQUIRED, M/C BICYCLE - HELMET, DRIVER (V - NO, W - YES), PASSENGER (X - NO, Y - YES)

EJECTED FROM VEHICLE: 0 - NOT EJECTED, 1 - FULLY EJECTED, 2 - PARTIALLY EJECTED, 3 - UNKNOWN

ITEMS MARKED BELOW FOLLOWED BY AN ASTERISK (*) SHOULD BE EXPLAINED IN THE NARRATIVE.

PRIMARY COLLISION FACTOR LIST NUMBER (#) OF PARTY AT FAULT	TRAFFIC CONTROL DEVICES	1	2	3	TYPE OF VEHICLE	1	2	3	MOVEMENT PRECEDING COLLISION
A VC SECTION VIOLATED: 231526(A)	A CONTROLS FUNCTIONING				A PASSENGER CAR / STATION WAGON				A STOPPED
B OTHER IMPROPER DRIVING *	B CONTROLS NOT FUNCTIONING *				B PASSENGER CAR W / TRAILER				B PROCEEDING STRAIGHT
C OTHER THAN DRIVER *	C CONTROLS OBSCURED				C MOTORCYCLE / SCOOTER				C RAN OFF ROAD
D UNKNOWN *	D NO CONTROLS PRESENT / FACTOR *				D PICKUP OR PANEL TRUCK				D MAKING RIGHT TURN
E FELL ASLEEP *	E REAR END				E PICKUP / PANEL TRUCK W / TRAILER				E MAKING LEFT TURN
WEATHER (MARK 1 TO 2 ITEMS)	TYPE OF COLLISION				F TRUCK OR TRUCK TRACTOR				F MAKING U TURN
A CLEAR	A HEAD - ON				G TRUCK / TRUCK TRACTOR W / TRLR.				G BACKING
B CLOUDY	B SIDESWIPE				H SCHOOL BUS				H SLOWING / STOPPING
C RAINING	C REAR END				I OTHER BUS				I PASSING OTHER VEHICLE
D SNOWING	D BROADSIDE				J EMERGENCY VEHICLE				J CHANGING LANES
E FOG / VISIBILITY FT.	E HT OBJECT				K HIGHWAY CONST. EQUIPMENT				K PARKING MANUEVER
F OTHER *	F OVERTURNED				L BICYCLE				L ENTERING TRAFFIC
LIGHTING	G VEHICLE / PEDESTRIAN				M OTHER VEHICLE				M OTHER UNSAFE TURNING
A DAY LIGHT	H OTHER *				N PEDESTRIAN				N XING INTO OPPOSING LANE
B DUSK - DAWN	I MOTOR VEHICLE INVOLVED WITH				O MOPED				O PARKED
C DARK - STREET LIGHTS	A NON-COLLISION								P MERGING
D DARK - NO STREET LIGHTS	B PEDESTRIAN								Q TRAVELING WRONG WAY
E DARK - STREET LIGHTS NOT FUNCTIONING *	C OTHER MOTOR VEHICLE								R OTHER *
ROADWAY SURFACE	D MOTOR VEHICLE ON OTHER ROADWAY	1	2	3	OTHER ASSOCIATED FACTOR(S) (MARK 1 TO 2 ITEMS)				
A DRY	E PARKED MOTOR VEHICLE				A VC SECTION VIOLATION: 2350				
B WET	F TRAIN				B VC SECTION VIOLATION:				
C SNOWY - ICY	G BICYCLE				C VC SECTION VIOLATION:				
D SLIPPERY (MUDDY, OILY, ETC.)	H ANIMAL:								
ROADWAY CONDITIONS (MARK 1 TO 2 ITEMS)	I FIXED OBJECT:								
A HOLES, DEEP RUT *	J OTHER OBJECT:								
B LOOSE MATERIAL ON ROADWAY *	PEDESTRIAN'S INVOLVED								
C OBSTRUCTION ON ROADWAY *	A NO PEDESTRIAN INVOLVED								
D CONSTRUCTION - REPAIR ZONE	B CROSSING IN CROSSWALK AT INTERSECTION								
E REDUCED ROADWAY WIDTH	C CROSSING IN CROSSWALK - NOT AT INTERSECTION								
F FLOODED *	D CROSSING - NOT IN CROSSWALK								
G OTHER *	E IN ROAD - INCLUDES SHOULDER								
H NO UNUSUAL CONDITIONS	F NOT IN ROAD								
SKETCH	G APPROACHING / LEAVING SCHOOL BUS								



MISCELLANEOUS
 P1 CITED 23153 (A) (A) (A)
 2315 (D) (U) (C).
 P2 CITED 23152 (A) (A) (A)
 2315 (D) (U) (E).

INJURED / WITNESSES / PASSENGERS

DATE OF COLLISION: 8/24/90 TIME (2400): 2340 NCIC NUMBER: 4250 OFFICER I.D. NUMBER: 4627

WT. ON	PASSENGER ONLY	AGE	SEX	EXTENT OF INJURY ("X" ONE)				INJURED WAS ("X" ONE)					PARTY NUMBER	SEAT POS.	SAFETY EQUIP.	EJECTED	
				FATAL INJURY	SEVERE INJURY	OTHER VISIBLE INJURY	COMPLAINT OF PAIN	DRIVER	PASS.	PED.	BICYCLIST	OTHER					
	<input type="checkbox"/>	26	F	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1	1	H	0				

TELEPHONE: [REDACTED]

NAME / D.O.B. / ADDRESS: [REDACTED] P-1
 (INJURED ONLY) TRANSPORTED BY: TO MED CENTER BY FOOTHILL AMB.
 DESCRIBE INJURIES: MINOR SCRATCHES, NO TREATMENT

VICTIM OF VIOLENT CRIME NOTIFIED

<input type="checkbox"/>	<input type="checkbox"/>	7	M	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	3	H	1
--------------------------	--------------------------	---	---	--------------------------	--------------------------	-------------------------------------	--------------------------	--------------------------	-------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	---	---	---	---

TELEPHONE: [REDACTED]

NAME / D.O.B. / ADDRESS: UNK DOB [REDACTED] P-1
 (INJURED ONLY) TRANSPORTED BY: SAME AS P-1 (SON OF P-1)
 DESCRIBE INJURIES: TO MED CENTER BY FOOTHILL AMB.
 LACERATIONS, UNK. EXTENT OF INJURY

VICTIM OF VIOLENT CRIME NOTIFIED

<input type="checkbox"/>	<input type="checkbox"/>	32	M	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2	1	H	0
--------------------------	--------------------------	----	---	--------------------------	-------------------------------------	--------------------------	--------------------------	--------------------------	-------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	---	---	---	---

TELEPHONE: [REDACTED]

NAME / D.O.B. / ADDRESS: [REDACTED] P-2
 (INJURED ONLY) TRANSPORTED BY: TO MED CENTER BY FOOTHILL
 DESCRIBE INJURIES: FRACTURE RIGHT LEG
 MAJOR HEAD LACERATIONS TO BE ADMITTED

VICTIM OF VIOLENT CRIME NOTIFIED

<input type="checkbox"/>	<input type="checkbox"/>	10	F	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2	3	H	0
--------------------------	--------------------------	----	---	--------------------------	--------------------------	-------------------------------------	--------------------------	--------------------------	-------------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	---	---	---	---

TELEPHONE: [REDACTED]

NAME / D.O.B. / ADDRESS: UNK DOB [REDACTED] (DAUGHTER OF P-2)
 (INJURED ONLY) TRANSPORTED BY: P-2
 DESCRIBE INJURIES: TO MED CENTER BY FOOTHILL
 LACERATIONS

VICTIM OF VIOLENT CRIME NOTIFIED

<input checked="" type="checkbox"/>	<input type="checkbox"/>	17	M	<input type="checkbox"/>													
-------------------------------------	--------------------------	----	---	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--	--	--	--

TELEPHONE: [REDACTED]

NAME / D.O.B. / ADDRESS: [REDACTED]
 (INJURED ONLY) TRANSPORTED BY: N. HIGHLANDS CO.
 DESCRIBE INJURIES: [REDACTED]

VICTIM OF VIOLENT CRIME NOTIFIED

<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>													
--------------------------	--------------------------	--	--	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--	--	--	--

TELEPHONE: [REDACTED]

NAME / D.O.B. / ADDRESS: [REDACTED]
 (INJURED ONLY) TRANSPORTED BY: [REDACTED]
 DESCRIBE INJURIES: [REDACTED]

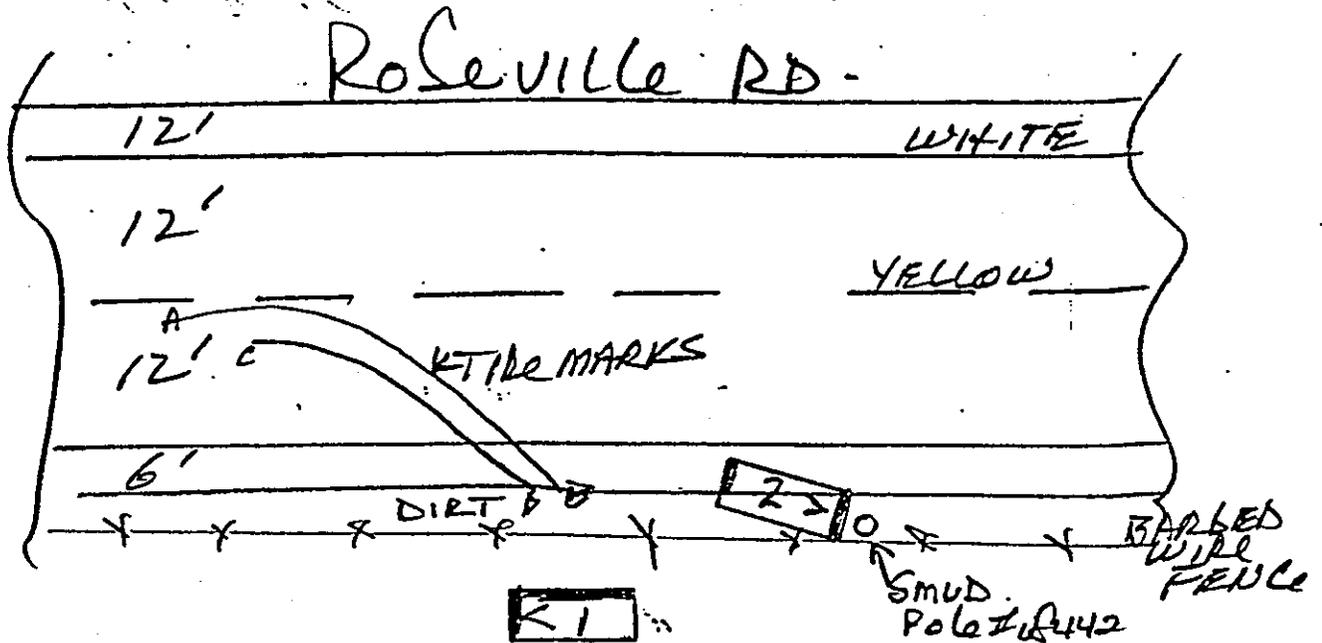
DATE OF COLLISION: DAY 24 YR 90 TIME (24:0) 2340 POLICE NUMBER 9250 OFFICER I.D. NUMBER 4627

ALL MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE UNLESS STATED (SCALE)

POD V-1
L/R WHEEL 1027' W/OAK HOLLOW 20' S/S EDGE ROSEVILLE RD
L/R 4 18' S/S EDGE ROSEVILLE RD



POD V-2
R/L WHEEL 10' S/S EDGE ROSEVILLE RD 1003' W/OAK HOLLOW
OAK HOLLOW R/R WHEEL 7' S/S EDGE ROSEVILLE RD



TILE MARKS
A TO B 60' / C TO D 45'
A IS 1100' W/OAK HOLLOW 17' N/S EDGE ROSEVILLE RD
B IS 1040' " " " " AT THE " "
C IS 1085' " " " " 12' N/S EDGE " "
D IS 1045' " " " " AT THE " "

DRAWN BY R. Catlow I.D. NUMBER 4627 NO. DAY YR 24 90 REVIEWER'S NAME NO. DAY YR.

DATE OF INCIDENT/OCCURRENCE 8/24/90	TIME (24H) 2340	NGIC NUMBER 9250	OFFICER'S NUMBER 4627	NUMBER
<input checked="" type="checkbox"/> NARRATIVE <input type="checkbox"/> SUPPLEMENTAL	<input checked="" type="checkbox"/> COLLISION REPORT <input type="checkbox"/> OTHER	TYPE SUPPLEMENTAL (IF APPLICABLE) <input type="checkbox"/> BA UPDATE <input type="checkbox"/> FATAL <input type="checkbox"/> HT & RUN UPDATE <input type="checkbox"/> HAZARDOUS MATERIALS <input type="checkbox"/> SCHOOL BUS <input type="checkbox"/> OTHER		

CITY/COUNTY/JUDICIAL DISTRICT	REPORTING DISTRICT/BEAT	CITATION NUMBER
LOCATION/SUBJECT	STATE HIGHWAY RELATED <input type="checkbox"/> YES <input type="checkbox"/> NO	

1. FACTS: NOTIFICATION - RECD. CALL OF
2. AN INJURY T/C 2345 HRS. RESPONDED FROM
3. 244/AUBURN, ARRIVING 2350 HRS. ALL
4. MEASUREMENTS, SPEEDS, APPROX.
5.
6. SCOME ROSEVILLE RD. IS AN E/W 2LW.
7. LEVEL ASPHALT ROAD W/ SHOULDERS,
8. POSTED 50 MPH, NO LIGHTING, SEE PG 4.
9.
10. PARTIES WERE AT POST, PARTIES AT
11. SCOME, BOTH DRIVERS WERE H.B.D.,
12. BOTH HAD VALID CALIF. DRS. LIC.
13.
14. PHYSICAL EVIDENCE TIRE MARKS IN THE
15. E/B TRAFFIC LANE

16. STATEMENTS
17.
18.
19. WIT. #1 [REDACTED] RELATED AT SCOME NO
20. WAS E/B ROSEVILLE RD. APPROX. 100'
21. BEHIND P-1 AT APPROX. 45 TO 50 MPH. W-1
22. STATES NO OBS. P-2, THE RED CAR,
23. WEAVING INTO THE W/B LANE AS P-1
24. ATTEMPTED TO PASS ON THE LEFT. W-1
25. STATES THAT P-1 COLLIDED WITH THE
26. LEFT REAR OF V-2 AND THEN P-1 OVERTURNED
27. W-1 CAN I.D. P-1 AND P-2.
28.
29.

32. PREPARED'S NAME R. La Pook	ID. NUMBER 4627	MONTH/DAY/YEAR 8/24/90	REVIEWER'S NAME	MONTH/DAY/YEAR
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8124790	TIME (2400) 2340	AGENCY NUMBER 9250	OFFICER ID 4627	NUMBER
<input type="checkbox"/> SUPPLEMENTAL <input checked="" type="checkbox"/> COLLISION REPORT <input type="checkbox"/> OTHER		TYPE SUPPLEMENTAL (IF APPLICABLE) <input type="checkbox"/> BA UPDATE <input type="checkbox"/> FATAL <input type="checkbox"/> HIT & RUN UPDATE <input type="checkbox"/> HAZARDOUS MATERIALS <input type="checkbox"/> SCHOOL BUS <input type="checkbox"/> OTHER		
COUNTY/JUDICIAL DISTRICT			REPORTING DISTRICT/BEAT	CITATION NUMBER
CITATION/SUBJECT				STATE HIGHWAY RELATED <input type="checkbox"/> YES <input type="checkbox"/> NO

1. STATEMENTS (CONT.)

2. P-1 ([REDACTED]) RELATED AT THE

3. SCENE UPON FIRST CONTACT BY P-1, THAT

4. SHE HAD BEEN DRIVING E13 ROSEVILLE RD

5. AT AN UNK. SPEED FOLLOWING HER

6. HUSBAND (P-2), WHOM HE STOPPED AND

7. SHE RAN INTO HIM.

8. Q. HOW FAST WERE YOU GOING?

9. A. I DON'T KNOW.

10. Q. WERE YOU RACING WITH YOUR HUSBAND?

11. A. NO.

12. Q. WERE YOU OR YOUR SON WEARING A

13. SEAT BELT? ✓

14. A. NO.

15. Q. HOW MUCH HAVE YOU HAD TO DRINK?

16. A. 4 OR 5 BEERS.

17. Q. HAS YOUR HUSBAND BEEN DRINKING?

18. A. YES.

19. Q. HOW MUCH?

20. A. I DON'T KNOW.

21. P-2 ([REDACTED]) RELATED AT THE

22. HOSPITAL THAT HE WAS E13 ROSEVILLE

23. RD. APPROX. 3500 FT WHEN SOMEBODY

24. RAN ENDED HIS VEHICLE.

25. (DUE TO SEVERITY OF INJURIES NO

26. FURTHER STATEMENT, P-2 TO XRAY)

31.

32. PREPARED BY [Signature] ID NUMBER 4627 MONTH/DAY/YEAR 8/24/90 REVIEWER'S NAME MONTH/DAY/YEAR

REPORTIVE/SUPPLEMENTAL

FILE NO. 2154190	TIME (CALC) 2340	NO. N. U. S. C. 7250	OFFICER'S ID 4627	NUMBER
<input checked="" type="checkbox"/> COLLISION REPORT <input type="checkbox"/> OTHER		TYPE SUPPLEMENTAL (X) APPLICABLE: <input type="checkbox"/> SA UPDATE <input type="checkbox"/> FATAL <input type="checkbox"/> HIT & RUN UPDATE <input type="checkbox"/> HAZARDOUS MATERIALS <input type="checkbox"/> SCHOOL BUS <input type="checkbox"/> OTHER		
COUNTY/JUDICIAL DISTRICT	REPORTING DISTRICT / BEAT	CITATION NUMBER		
DATE/TIME	STATE HIGHWAY RELATED		<input type="checkbox"/> YES <input type="checkbox"/> NO	

OPINIONS AND CONCLUSIONS

SUMMARY - TIC OCCURRED AS P-2 WAS EB ROSEVILLE RD. WHILE UNDER THE INFLUENCE OF ALCOHOL AND DRUGS AT APPROX. 35MPH WEAVED PARTIALLY INTO THE WB LANE AS HIS WIFE, P-1, WHO WAS FOLLOWING HIM, ALSO UNDER THE INFLUENCE OF ALCOHOL AND DRUGS, AT APPROX. 50MPH, WAS ATTEMPTING TO PASS, THEY COLLIDED, KICKING P-2 OFF THE ROAD INTO A SMALL POLE AND CAUSING V-1 TO RUN OFF THE ROAD AND OVERTURN, EJECTING HER 7 YR OLD SON.

CAUSE TIC WAS CAUSED BY P-1'S UNSAFE SPEED 2350 V.C. WHILE UNDER THE INFLUENCE OF ALCOHOL AND DRUGS 23152(A) V.C. P-1'S SPEED 50MPH SAFE SPEED 30-35MPH. P-2 IN VIOLATION 23152(A) V.C. DUI. DUE TO THE INJURIES, P-1 IN VIOLATION 23153(A) V.C. FELONY DUI.

POI BY STATEMENTS AND PHYSICAL EVIDENCE, 1100' W/OF OAK HOLLOW AND 10' N/S EDGE ROSEVILLE RD.

PREPARED BY R. C. POIR	NUMBER 4627	MON / DAY / YEAR 1/24/90	REVIEWER'S NAME	MONTH / DAY / YEAR
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NARRATIVE/SUPPLEMENTAL

DATE OF INCIDENT / OCCURRENCE #124/90	TIME (24HR) 2340	ACC NUMBER 9250	OFFICER I.D. NUMBER 4627	NUMBER
<input checked="" type="checkbox"/> NARRATIVE	<input checked="" type="checkbox"/> COLLISION REPORT	TYPE SUPPLEMENTAL (X' APPLICABLE)		
<input type="checkbox"/> SUPPLEMENTAL	<input type="checkbox"/> OTHER	<input type="checkbox"/> BA UPDATE	<input type="checkbox"/> FATAL	<input type="checkbox"/> HT & RUN UPDATE
		<input type="checkbox"/> HAZARDOUS MATERIALS	<input type="checkbox"/> SCHOOL BUS	<input type="checkbox"/> OTHER

CITY/COUNTY/JUDICIAL DISTRICT	REPORTING DISTRICT / BEAT	CITATION NUMBER
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LOCATION / SUBJECT	STATE HIGHWAY RELATED <input type="checkbox"/> YES <input type="checkbox"/> NO
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1. INTOX. NARRATIVE

2.

3. FIRST OBS. (P-1)

4.

5. P-1 WAS FIRST OBS. AND CONTACTED

6. BY I/O SITTING ON THE GROUND APPROX.

7. 10' TO THE REAR OF NON VEHICLE.

8. I NOTED A STRONG ODOR OF ALCOHOL,

9. BLOOD SHOT EYES, SLURRED SPEECH.

10. P-1 WAS THEN TRANSPORTED TO THE SAC.

11. MED. CENTER BY AMBULANCE AT NOR.

12. REQUEST TO BE WITH NON SON. UPON

13. ARRIVAL AT THE MED. CENTER BY I/O

14. P-1 WAS IN THE WAITING ROOM I NOTED

15. THE SAME SYMPTOMS CHECKED NON

16. NYSTAGMUS, SNO. FAILED. IT WAS MY

17. OPINION P-1 WAS UNDER THE INFLUENCE

18. OF ALCOHOL AND OR DRUGS.

19.

20. ARREST P-1 WAS ARRESTED AT THE

21. MED CENTER AT APPROX. 0110 HRS. FOR

22. 23153 (a)(b)(1) FELONY DUI. TRANSPORTED

23. TO THE SAC, CO. JAIL. WHERO, SNO

24. CONSENTED TO A BLOOD TEST AT

25. APPROX. 0135 HRS. BY NURSE HOFF.

26. BLOOD SAMPLE INTO EVIDENCE. P-1

27. BOOKED.

28.

29.

30.

31.

PREPARED BY NAME P. La Pord	I.D. NUMBER 4627	MONTH/DAY/YEAR 8/24/90	REVIEWER'S NAME	MONTH/DAY/YEAR
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ADDITIONAL/NARRATIVE/SUPPLEMENTAL

ACCIDENT OCCURRED ON 2/27/90	TIME 2:40	NCIC NUMBER 9250	OFFENSE CODE 4627	NUMBER
TYPE SUPPLEMENTAL (IF APPLICABLE)		<input type="checkbox"/> BA UPDATE <input type="checkbox"/> FATAL <input type="checkbox"/> HIT & RUN UPDATE <input type="checkbox"/> HAZARDOUS MATERIALS <input type="checkbox"/> SCHOOL BUS <input type="checkbox"/> OTHER		
<input checked="" type="checkbox"/> COLLISION REPORT <input type="checkbox"/> OTHER		REPORTING DISTRICT / BEAT	CITATION NUMBER	
COUNTY / JUDICIAL DISTRICT		STATE HIGHWAY RELATED		<input type="checkbox"/> YES <input type="checkbox"/> NO

INTOX. NARRATIVE (CONT.)

FIRST OBS. (P-2)

P-2 WAS FIRST OBS. AT THE SCOPM, BEHIND THE WHEEL OF HIS VEHICLE BEING TREATED BY MEDICAL PERSONNEL. DUE TO P-2'S OBJECTIVE SYMPTOMS, NO WAS ARRESTED FOR 23152(a)(b)(v)(c). BY OFF. JACK ALLEN AT THE SAC. MED. CENTER AT APPROX. 0340 HRS., A BLOOD SAMPLE WAS OBTAINED BY NURSE MAR AT THE MED CENTER AND BOOKED INTO EVIDENCE. DUE TO THE SEVERITY OF P-2'S INJURIES (EXPECTED TO STAY IN THE HOSP. APPROX. 10 DAYS) REQUEST A COMPLAINT BE FILED.

20 COMMENDATIONS

REPORT BE SUBMITTED TO DIA. FOR PROSECUTION P-1 FOR 23153(a)(b)(v)(c). FELONY DUI.

REPORTER'S NAME R. La Ford	OFFENSE NUMBER 4627	MONTH/DAY/YEAR 1/24/90	REVIEWER'S NAME	MONTH/DAY/YEAR
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13

Legal &
DGC

P 2145



'92 SEP -2 P3:24

MEDIATION AND LITIGATION SECTION

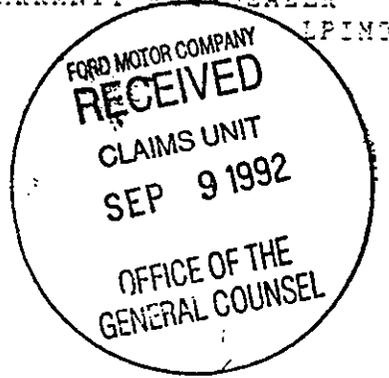
SMO1

ESCR0003 MORS II Basic Information 09/01/1992 11:08:08

File Type: Legal CONTACT NBR: _____
 1FABP57U1HA _____ Some ignition system components on the _____
 LAST NAME: _____ had been sold the _____ ZIP/PC: _____
 Title: ms _____ First Name: _____ MI: _____
 Address: _____
 City: denton _____ ST/PV: _____
 Home Phone: _____ Business Phone: _____ Ext: _____
 Year: 87 Model: TAURUS
 Mileage/Km: 110000
 Dealer Name: smith ford SALES CODE: _____
 Causal Code: 02 Symptoms: 8Q1000
 Serv Sales: 1 (1 or 2)
 Ask Code: _____
 Loan Type: F Micro Nbr: _____

customer says involved in accident on (11/8/91.) customer says vehicle was total
 ed in accident. customer says sustained head, rib and back injuries. customer
 says was seat belt failed during collision. customer says contacted nac 2/92 a
 nd has not been contacted. customer seeks contact by telephone or letter.

F1=HELP F2=EXIT F3=ADD F8=RECALL F9=ESP F10=CASIS F11=WARRANTY F12=DEALER
 LPIN088



NIF
919

14.

92-4352

OCS
LEGAL
S. DRINKER
12157

Full Ins
P-1
cc: ESS/Jmi. Calarco
Buffalo, NY

'92 OCT -7 AM 10:01

MEDIATION AND
LITIGATION
SECTION

VH
5306
0

0000000000 MORE IT Basic Information 10/06/1992 13:12:34

File Type: LEGAL CONTACT NBR: _____

VIN: 1FABP2833CG [REDACTED]

LAST NAME: [REDACTED] First Name: [REDACTED] ZIP/PCA: [REDACTED]

Title: _____ ME: _____

Address: [REDACTED]

CITY: SEMINOLE ST/PV: NY

Home Phone: [REDACTED] Business Phone: [REDACTED] Model: _____

Year: _____

Message/Ext: _____

Dealer Name: _____ SALES CODE: _____

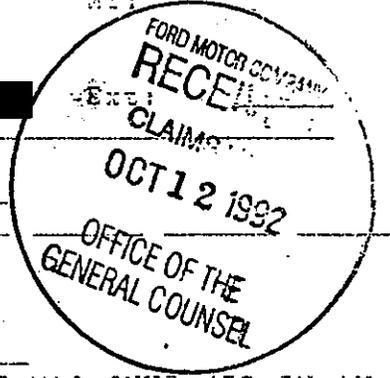
Current Code: _____ PARTS CODE: _____

Invoice Code: _____

Body Color: _____

Box Code: _____

Color Code: _____ Mileage Nbr: _____



CUSTOMER WANTED FORD TO KNOW THAT IN LAST 24 THIS VEHICLE WAS INVOLVED IN AN ACCIDENT THE VEHICLE WAS HIT IN THE DRIVER'S SIDE RIGHT QUARTER PANEL. BOTH VEHICLES WERE TRAVELLING AT ABOUT 31 MPH. CUSTOMER SAID THAT BOTH DRIVER'S AND PASSENGER'S SIDE SEATBELTS BECAME UNLATCHED CAUSING PASSENGERS TO BE THROWN OUT. 01-HELP 03-EXIT 04-ADD 08-RECALL 09-REP 10-CASES 11-WARRANTY 12-DEALER 13-71 VIN INVALID - PLEASE RE-ENTER

CUSTOMER SAYS HIS WIFE AND 6 YEAR OLD DAUGHTER SUSTAINED A CONCUSSION AND FACIAL INJURIES.

CUSTOMER WANTED FORD TO KNOW.

NIF
10/12

15

1 DON D. HINEY
2 ATTORNEY AT LAW
3 1725 NORTH MARSHALL AVENUE
4 EL CAJON, CALIFORNIA 92020
5 Telephone: (619) 579-3742

6 Attorney for Plaintiff

F O L E
Robert D. Zumwalt, Clerk

APR 8 1988

BY _____
DEPUTY

8 SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO

9 ANDREW TRICARICO,

10 Plaintiff,

11 v.

12 JOSEPH CZERWEIN, FORD MOTOR
13 COMPANY, a Michigan Corporat-
14 ion, and DOES I through X,
15 inclusive,

Defendant.

CASE NO. *bc* 594074

COMPLAINT FOR PERSONAL
INJURY
[Motor Vehicle]

16 Plaintiff hereby alleges for his First Cause of
17 Action:

18 FIRST CAUSE OF ACTION

19 I

20 Plaintiff is, and at all times hereinafter mentioned,
21 was, a resident of San Diego County, California.

22 II

23 Defendand JOSEPH CZERWEIN, hereinafter referred to as
24 "CZERWEIN", is, and at all times hereinafter mentioned was, a
25 resident of San Diego County, California.

26 III

27 Plaintiff is ignorant of the true names and capacities
28 sued herein as DOES I through X, inclusive, and therefore sues

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V

At all times herein mentioned Defendant FORD knew that its automobiles would be purchased by members of the public to be used by the purchasers, and others, without inspection for defects.

VI

On or about October 20, 1987, Plaintiff ANDREW TRICARICO was driving his 1986 Ford Ranger pickup westbound on Prospect Avenue where it intersects with Dovehill Drive in Santee, California.

VII

The automobile was, at the time Plaintiff TRICARICO was driving as herein alleged, defective and unsafe for its intended purpose in that the seat belts within the automobile had a manufacturing defect in that the two pieces of the seat belt would separate automatically after being connected together.

VIII

On or about October 20, 1987, Plaintiff ANDREW TRICARICO was driving his 1986 Ford Ranger pickup westbound on Prospect Avenue where it intersects with Dovehill Drive in Santee, California. At said time and place, Defendant CZERWEIN so negligently and carelessly operated his automobile along and on Prospect Avenue at Dovehill Drive in Santee, California so as to proximately cause said van to collide with Plaintiff's automobile. During the course of this collision, and as a proximate result of the defect hereinabove described, the two sections of the seat belt separated, thereby causing the Plaintiff to be thrown against the side of his automobile.

Ct. Records

UNITED STATES DISTRICT COURT FOR THE
WESTERN DISTRICT OF MISSOURI
CENTRAL DIVISION

ROBIN S. COX, Individually and
as Next Friend of COURTNEY COX,
and TAYLOR COX, minors, and
LARRY COX and VERA COX,
Plaintiffs,
vs.

Case No. 91-4453-CV-C-5
JURY TRIAL DEMANDED

FORD MOTOR COMPANY, a Corporation,
Registered Agent: C.T. Corporation Systems
906 Olive St. Louis, Missouri 63101
Defendants.

FIRST AMENDED COMPLAINT
COUNT I

Come now Plaintiffs, Robin S. Cox, individually and as next friend of Courtney Cox and Taylor Cox, Minors, and Larry Cox and Vera Cox and state and allege as follows:

1. Plaintiffs are residents and citizens of the State of Missouri, residing in Trenton, Grundy County, Missouri, and are all the persons entitled to bring an action pursuant to RSMo. 537.080 (1986) for the wrongful death of Lawrence Dean Cox who died January 10, 1991:

a. Larry Cox and Vera Cox are the natural parents of Lawrence Dean Cox, and are, and at all times mentioned within this Complaint have been, husband and wife.

b. Robin S. Cox was the lawfully wedded wife of Lawrence Dean Cox at the time of his death on January 10, 1991.

c. Robin S. Cox is the natural mother and custodian of two minor children, Courtney Cox, born July 26, 1986, and Taylor Cox, born March 12, 1990, the natural children of Lawrence Dean Cox and Robin S. Cox.

2. Defendant is a Delaware Corporation, having its principal place of business outside the State of Missouri, licensed to do and doing business in Missouri, and more particularly in Jefferson City, Cole County, Missouri.

3. This Court has jurisdiction over this matter pursuant to Title 28 U.S.C. §1332 as this is an action between citizens of different states and the matter in controversy exceeds Fifty Thousand Dollars (\$50,000.00).

4. Prior to January 10, 1991, Defendant manufactured and sold to Lawrence Dean Cox through a Ford dealership a 1990 Ford F-150 pickup truck, VIN 1FTEX15N6LKA17020, in the course of Defendant's business as a manufacturer of vehicles.

5. At approximately 7:00 a.m. on January 10, 1991, Lawrence Dean Cox, was operating the 1990 Ford F-150 pickup truck, owned by Plaintiff Robin S. Cox and Lawrence Dean Cox, within the city limits of Trenton, Grundy County, Missouri in an easterly direction on East First Street west of the intersection of East First Street and the railroad tracks owned by the Chicago and North Western Transportation Company.

6. At approximately 7:00 a.m., the vehicle operated by Lawrence Dean Cox slid forward onto the tracks of the railroad owned by the Chicago and NorthWestern Transportation Company and into the path of a northbound train owned by the Chicago and North Western Transportation Company.

7. The locomotive of the train struck the Ford F-150 pickup truck, and as a direct result of the failure of the passenger cab seats, passenger door and seatbelt restraint system of the Ford

F-150 pickup truck to protect the deceased during the collision and rollover, Lawrence Dean Cox sustained fatal injuries when the right door of the truck became opened during or after the collision and the force of the collision caused Lawrence Dean Cox to be ejected out of the opened right door and on to the ground where the said Ford pickup truck rolled over and killed Lawrence Dean Cox.

8. At the time of the Ford F-150's manufacture and sale by Defendant and at the time of the collision, the vehicle was in a defective condition unreasonably dangerous when put to a reasonably anticipated use in that the right door and its components, seats, seat anchors, floor pan, and seatbelt restraint system of the vehicle were defectively designed, manufactured, assembled, tested and/or inspected in that the floor pan buckled and seats came loose causing decedent to be propelled toward the right door and the right door, door latch, and door handle failed to remain closed during and immediately following collision and the seatbelt system failed to prevent Lawrence Dean Cox from being thrown about the passenger compartment of the vehicle during the collision and permitted decedent to be ejected prior to or during the rollover of the vehicle thereby causing or contributing to cause his death.

9. The F-150 pickup truck, at the time of the collision, was used by the deceased in a manner which could reasonably be anticipated by Defendant and was in a condition substantially similar to when it was manufactured and sold by Defendant.

10. The defective condition in the seats, seat anchors, floor pan, right door and its components, and seatbelt restraint system of the vehicle as it existed when the vehicle was manufactured and

sold, directly caused or directly contributed to cause the death of Lawrence Dean Cox.

11. As a direct result of the defective condition of the F-150 pickup truck and the death of Lawrence Dean Cox, Plaintiff Robin S. Cox has incurred expenses for the funeral of her husband. As a direct result of the defective condition of the F-150 pickup truck and the death of Lawrence Dean Cox, all Plaintiffs have been caused to permanently lose the services, consortium, companionship, comfort, instruction, guidance, training and support of Lawrence Dean Cox. Additionally, aggravating circumstances attended the death of Lawrence Dean Cox in that Defendant knew well before January 10, 1991, that the floor pans of Defendant's pickup trucks were weak and subject to fracture and deformation and that the seatbelts in Defendant's pickup trucks had a tendency to release during collisions but Defendant failed to notify Lawrence Dean Cox of the failure propensity of Defendant's pickup trucks and failed to repair or replace the defective floor pan and seatbelt components of the pickup truck owned by Lawrence Dean Cox to the detriment of Lawrence Dean Cox and his survivors, the Plaintiffs herein.

WHEREFORE, Plaintiffs pray for judgment against Defendant Ford Motor Company in an amount that is fair and reasonable, that said judgment be apportioned among Plaintiffs by the Court, and for their costs herein incurred and expended.

COUNT II

Come now Plaintiffs and for Count II of their First Amended Complaint state and allege as follows:

12. Plaintiffs incorporate into this Count the allegations contained in paragraphs 1 through 11 of Count I.

13. The Defendant knew or should have known that operators and users of the 1990 F-150 pickup truck would encounter failures of the floor pan, seats, seat anchors, the right door and its components, and seatbelt restraint system similar to that encountered by Lawrence Dean Cox in that the right door of the said F-150 pickup truck was structurally weak and Defendant knew or should have known that the floor pan, seats and seat anchor, right door and its components, and seatbelt restraint system of the F-150 pickup truck were structurally inadequate and posed an unreasonable risk of danger and injury to drivers and occupants of the F-150 pickup truck and Defendant was negligent in the design, manufacture, assembly, inspection and testing of said 1990 F-150 pickup truck in one or more of the following respects, to-wit:

a. Defendant failed to exercise due care in the design of the floor pan, seats and seat anchor, right door and its components, and seatbelt restraint system to prevent the right door assembly and seatbelt assembly system from failing to prevent the occupants of the vehicle from being thrown about and/or from the passenger compartment in the event of a collision.

b. Defendant failed to exercise due care in the manufacturing of the floor pan, seats and seat anchor, right door and its components, and seatbelt restraint system to prevent the right door assembly and seatbelt restraint system from failing to prevent the occupants of the vehicle from being thrown about and/or from the passenger compartment in the event of a

collision.

c. Defendant failed to exercise due care to properly assemble the floor pan, seats and seat anchor, right door and its components, and seatbelt restraint system to prevent the right door assembly and seatbelt restraint system from failing to prevent the occupant of the vehicle from being thrown about and/or from the passenger compartment in the event of a collision.

d. Defendant failed to exercise due care in its failure to properly and adequately inspect the floor pan, seats and seat anchors, right door and its components, and seatbelt restraint system to prevent the occupants of the vehicle from being thrown about and/or from the passenger compartment in the event of a collision.

e. Defendant negligently failed to adequately and properly test the design of the vehicle and more specifically the floor pan, seats and seat anchors, right door and its components, and seatbelt restraint system to prevent the right door assembly and seatbelt restraint system from failing to prevent the occupant of the vehicle from being thrown about and/or from the passenger compartment in the event of a collision.

14. The negligence of the Defendant caused or directly contributed to cause the death of Lawrence Dean Cox.

WHEREFORE, Plaintiffs pray for judgment in an amount that is fair and reasonable against Defendant Ford Motor Company, that the judgment be apportioned among Plaintiffs by the Court, and for their costs herein incurred and expended.

PLAINTIFFS DEMAND JURY TRIAL

STOCKARD, ANDERECK, HAUCK, SHARP EVANS

BY Beverly J. Figg

Terry M. Evans - 21922
Beverly J. Figg - 32165
9th Washington Streets
P.O. Box 547
Trenton, Missouri 64683
816-359-2244
Attorneys for Plaintiffs.

1 G. Nicholas Vats, Jr.
Attorney at Law
2 Bank of America - Tempest Building
8141 East Second Street, Suite 620
3 Downey, California 90241
(213) 861-8111 and (213) 861-8113
4

FILED
MAR 21 1989
FRANK S. ZOLIN, COUNTY CLERK
BY N. Thunton, DEPUTY

5 Attorney for Petitioner

02ad
B F

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7
8 SUPERIOR COURT OF THE STATE OF CALIFORNIA
9 FOR THE COUNTY OF LOS ANGELES

10
11 NANCY COOK, JULIE CARPENTER,)
AND DUSTIN JACOB MARLETTE, a)
12 minor by and through his)
Guardian Ad Litem, JULIE)
13 CARPENTER,)

Case No. **SEC 73334**

COMPLAINT FOR DAMAGES

14 Plaintiffs)

15 v.)

SEC 073334

16 FORD MOTOR CORPORATION,)
17 CERRITOS FORD, INC. and)
and Does 1 through 20,)
18 Inclusive,)



18 Defendants.)
19

20 Plaintiffs allege:

21 1. Plaintiffs are, and at all times herein mentioned
22 were, residents of Los Angeles County, California

23 2. Defendant FORD MOTOR CORPORATION is, and at all
24 times herein mentioned was, a corporation organized and
25 existing under the laws of the State of California and
26 qualified to do business in California.

27 3. Defendant CERRITOS FORD, INC., is, and at all times
28 herein mentioned was, a corporation organized and existing

1 under the laws of the State of California and qualified to do
2 business in California with its principal place of business
3 in this state situated in the County of Los Angeles.

4 4. Plaintiffs are ignorant of the true names and
5 capacities of defendants sued herein as Does 1 through 20,
6 inclusive, and therefore sues these defendants by such
7 fictitious names. Plaintiffs will amend this complaint to
8 allege their true names and capacities when ascertained.
9 Plaintiff is informed and believes and thereon alleges that
10 each of the fictitiously named defendant is responsible in
11 some manner for the occurrences herein alleged, and that
12 plaintiffs' damages as herein alleged were proximately caused
13 by their conduct.

14 5. Defendants are, and at all times herein mentioned
15 were, engaged in the business of designing, manufacturing,
16 assembling, distributing, buying and selling automobiles to
17 members of the general public.

18 6. Defendants manufactured, designed, and assembled a
19 certain 1986 Ford Mustang automobile equipped with seatbelts,
20 which was intended by defendant to be used to safely and
21 securely hold drivers and passengers in their seats in the
22 event of a sudden stop or accident.

23 7. At all times herein mentioned, defendant knew and
24 intended that its automobiles and inclusive seatbelts would
25 be purchased by members of the public and used by the
26 purchasers and others without inspection for defects.

27 8. The seatbelts were unsafe for their intended use by
28 reason of a defect in the design, manufacture, assembly and

1 installation which allowed them to malfunction and come
2 undone upon impact.

3 9. Plaintiffs were not aware of these defects at any
4 time prior to the injuries caused by this product.

5 10. On or about March 22, 1986, plaintiff Nancy Cook,
6 purchased a 1986 Ford Mustang, Identification No.
7 1FABP28M7GF165564 (hereinafter referred to as "vehicle"),
8 with said seatbelts, from Cerritos Ford, Inc. at its place of
9 business hereinafter alleged.

10 11. On or about March 24, 1988, plaintiff Nancy Cook
11 was driving the vehicle and using her seatbelt, as well as
12 her passengers Julie Carpenter and Dustin Jacob Marlette were
13 using their seatbelts while travelling on the 5 freeway,
14 southbound, south of the 605 freeway in the City of Norwalk.
15 During the course of this trip, plaintiff's car was run out
16 of her lane, striking the center divider of the freeway. All
17 of plaintiffs' seatbelts came undone upon impact with the
18 center divider:

19 12. As a proximate result of the defect and accident as
20 herein alleged, plaintiffs sustained personal injuries to
21 their health, strength, and activity as well as severe shock
22 to their nervous systems and were caused to suffer extreme
23 physical and mental pain, all to their general damage in a
24 sum which has not yet been ascertained.

25 13. As a further proximate result of the defect of the
26 seatbelts coming undone upon impact, and injuries sustained
27 by plaintiffs as herein alleged, plaintiffs were required to
28 and did employ physicians, and other medical personnel and

1 incurred expenses therefor, and incurred additional medical
2 expenses, all to their further damage in an amount that has
3 not yet been fully ascertained. Plaintiff is informed and
4 believes and thereon alleges that as a proximate result of
5 the defective seatbelts, and injuries sustained by
6 plaintiffs, as herein alleged, plaintiffs will be required to
7 incur additional medical expenses all to their further damage
8 in an amount not yet ascertained.

9 14. As a further proximate result of the defective
10 seatbelts, and injuries sustained by plaintiffs in the
11 accident as herein alleged, plaintiffs Nancy Cook and Julie
12 Carpenter, were prevented from attending from their usual
13 occupations, and thereby lost earnings all to their further
14 damage in a sum that has not yet been ascertained.
15 Plaintiffs Nancy Cook and Julie Carpenter are informed and
16 believe and thereon allege that they will thereby be further
17 prevented from attending to their usual occupations in the
18 future and will thereby sustain further loss of earnings all
19 to their further damage in an amount not yet ascertained.

20 15. As a further proximate result of the defect and
21 accident herein alleged, the 1986 Ford Mustang, owned by
22 plaintiff Nancy Cook was damaged in a sum that has not yet
23 been ascertained.

24 16. As a further proximate of the defect and the
25 accident, plaintiffs suffered severe emotional distress and
26 physical injury resulting therefrom when they saw each other
27 severely injured by the defective seatbelts.

28 17. Plaintiffs are informed and believe and thereon

1 allege that defendants knew that the seatbelts were defective
2 and dangerous in the manner alleged in paragraph 8 above;
3 that defendants knew that because of the defects the
4 seatbelts could not safely be used for the purposes for which
5 they were intended; that defendants, knowing that the
6 seatbelts were defective and dangerous, in conscious
7 disregard of the safety of the public placed them on the
8 market, without warning customers of the unknowing public of
9 the defect, and knew that when they did so that they would be
10 sold to and used by the general public in vehicles without
11 inspection for defects; that defendants by placing the
12 defective seatbelts in the "vehicle" and on the market,
13 impliedly represented that they were safe for the purpose for
14 which they were intended; and that defendant, by placing them
15 on the market and otherwise representing them as able to
16 perform safely, intended that customers and the unknowing
17 public should rely on its representations. Plaintiff, Nancy
18 Cook, in purchasing the "vehicle" and using the defective
19 seatbelts and plaintiffs, Julie Carpenter and Dustin Jacob
20 Marlett in using the defective seatbelts as herein alleged,
21 did rely on defendant's above representations, all to their
22 damage as hereinabove alleged. In doing the things
23 aforementioned, defendants were guilty of malice, oppression,
24 and fraud, and plaintiff is, therefore entitled to recover
25 exemplary or punitive damages.

26 SECOND CAUSE OF ACTION

27 18. Plaintiffs reassert and reallege each and every
28 allegation contained in paragraphs 1 through 17 of their

1 First Cause of Action, and incorporates the same by reference
2 as if fully set forth below.

3 19. On or about March 22, 1986, plaintiff Nancy Cook,
4 purchased a 1986 Ford Mustang, Identification No.
5 1FABP28M7GF165564 (hereinafter referred to as "vehicle") from
6 Cerritos Ford, Inc.

7 20. Prior to that date defendant, through its agents
8 and employees, expressly and impliedly warranted and
9 represented the "vehicle" to be free from defects and in all
10 respects safe for use in the manner for which it was
11 designed, manufactured; and sold, and warranted that the
12 "vehicle" was of merchantable quality and fit for the purpose
13 intended.

14 21. Plaintiff relied on these warranties and
15 representations of defendants and on defendants skill and
16 judgment in the purchase of the "vehicle"; on or about March
17 24, 1988, plaintiff discovered that the "vehicle's" seatbelts
18 were defective and not safe for reasonable operation.

19 22. The aforementioned "vehicle" was in fact
20 unmerchantable and unfit to be operated, in that certain
21 component parts, namely the seatbelts were defectively
22 manufactured, designed, assembled and installed, and as a
23 proximate result thereof, the automobile was, in fact, unfit
24 for use and was of unmerchantable quality.

25 23. The automobile, at the time of the delivery to
26 plaintiff was the value of \$14,975.00 and, if the
27 representations and warranties of defendants had been true,
28 the automobile would have been of a value which has not yet

1 been ascertained.

2 24. By reason of the foregoing, plaintiff has sustained
3 damages in a sum which has not yet been ascertained.

4

5 WHEREFORE, plaintiff prays judgment as follows:

6 1. For general damages.

7 2. For special damages for medical and incidental
8 expenses according to proof.

9 3. For loss of earnings according to proof.

10 4. For damages to personal property.

11 5. For punitive damages.

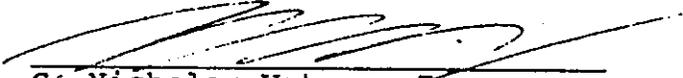
12 6. For costs of suit herein incurred; and

13 7. For such other and further relief as the court may
14 deem proper.

15

16 Dated: 3-15-89

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G. Nicholas Vaters, Jr.
Attorney for Plaintiffs

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STATE OF CALIFORNIA, COUNTY OF
Plaintiff

I am the _____

COMPLAINT FOR DAMAGES

in the above entitled action; I have read the foregoing _____

and know the contents thereof; and I certify that the same is true of my own knowledge, except as to those matters which are therein stated upon my information or belief, and as to those matters I believe it to be true.

I declare, under penalty of perjury, that the foregoing is true and correct.

Executed on 3-15-89 at Downey, California
(date) (place)

Nancy Cook
Signature

NANCY COOK

PROOF OF SERVICE BY MAIL (1013a, 2015.5 C. C. P.)

STATE OF CALIFORNIA, COUNTY OF

I am a citizen of the United States and a resident of the county aforesaid; I am over the age of eighteen years and not a party to the within entitled action; my business address is:

On _____, 19____, I served the within _____

on the _____ in said action, by placing a true copy thereof enclosed in a sealed envelope with postage thereon fully prepaid, in the United States mail at _____ addressed as follows:

I declare, under penalty of perjury under the laws of the State of California, that the foregoing is true and correct.

Executed on _____ at _____, California
(date) (place)

Signature

NICHOLAS VATERS, JR.
ATTORNEY AT LAW
BANK OF AMERICA
EMPEST BUILDING
141 E. SECOND STREET
SUITE 620
DOWNEY,
CALIFORNIA 90241
(213) 861-8111
(213) 861-8113

STATE OF CALIFORNIA, COUNTY OF

I am the Plaintiff

in the above entitled action; I have read the foregoing COMPLAINT FOR DAMAGES

and know the contents thereof; and I certify that the same is true of my own knowledge, except as to those matters which are therein stated upon my information or belief, and as to those matters I believe it to be true.

I declare, under penalty of perjury, that the foregoing is true and correct.

Executed on 3-7-89 at Downey, California
(date) (place)

Julie Carpenter
JULIE CARPENTER Signature

PROOF OF SERVICE BY MAIL (1013a, 2015.5 C. C. P.)

STATE OF CALIFORNIA, COUNTY OF

I am a citizen of the United States and a resident of the county aforesaid; I am over the age of eighteen years and not a party to the within entitled action; my business address is:

On _____, 19____, I served the within _____

on the _____
in said action, by placing a true copy thereof enclosed in a sealed envelope with postage thereon fully prepaid, in the
United States mail at _____
addressed as follows:

I declare, under penalty of perjury under the laws of the State of California, that the foregoing is true and correct.

Executed on _____ at _____, California
(date) (place)

Signature

NICHOLAS VATERS, JR.
ATTORNEY AT LAW
BANK OF AMERICA -
TEMPEST BUILDING
8141 E. SECOND STREET
SUITE 620
DOWNEY,
CALIFORNIA 90241
(213) 861-8111
(213) 861-8113

SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES

CASE NUMBER

NANCY COOK, JULIE CARPENTER, AND
DUSTIN JACOB MARLETTE, a minor,
vs.
FORD MOTOR CORP., CERRITOS FORD,
AND DOES 1-20, inclusive,
Defendants.

CERTIFICATE OF ASSIGNMENT

All civil actions or proceedings presented for filing must be accompanied by this certificate.

The undersigned declares that the above entitled matter is filed for proceedings in the SOUTHEAST District of the Los Angeles Superior Court under Section 392 et seq., Code of Civil Procedure and Rule 300 Sections 3 and 4 of this court for the reasons checked below.

The address of the accident, performance, party, detention, place of business, or other factor which qualifies this case for filing in the above designated district is:

Nancy Cook, Julie Carpenter, Dustin Jacob Marlette Interstate 5
(NAME - INDICATE TITLE OR OTHER QUALIFYING FACTOR) (ADDRESS)

Norwalk
(CITY)

CA.
(STATE)

90650
(ZIP CODE)

GROUND

- NATURE OF ACTION
- 1 Abandonment
 - 2 Adoption
 - 3 Adoption
 - 4 Appeal from Labor Commission Decision
 - 5 Conservator
 - 6 Contract
 - 7 Equity
 - 8 Eminent Domain
 - 9 Family Law
 - 10 Forcible Entry
 - 11 Guardianship
 - 12 Habeas Corpus
 - 13 Mandate*
 - 14 Name Change
 - 15 Personal Property
 - 16 Probate
 - 17 Prohibition*
 - 18 Review*
 - 19 Small Claims Appeal
 - 20 Title to Real Property
 - 21 Tort
 - 22 Tort
 - 23 Transferred Action
 - 24 Unlawful Detainer

- Petitioner resides within the district
- Petitioner resides within the district
- Consent to out-of-state adoption, consentor resides within the district
- Labor hearing was held within the district
- Petitioner or conservatee resides within the district
- Performance in the district is expressly provided for
- The cause of action arose within the district
- The property is located within the district
- One or more of the party litigants resides within the district
- The property is located within the district
- Petitioner or ward resides within the district
- No action pending, the person is held within the district
- The defendant functions wholly within the district
- The petitioner resides within the district
- The property is located within the district
- Decedent resided or petitioner resides within the district
- The defendant functions wholly within the district
- The defendant functions wholly within the district
- The lower court is located within the district
- The property is located within the district
- The cause of action arose within the district
- One or more defendant(s) reside within the district
- The lower court is located within the district
- The property is located within the district

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and this declaration was executed on 3-8-89 at Downey

THE COURT MAY IMPOSE SANCTIONS OR OTHER PENALTIES FOR FAILURE TO FILE IN THE PROPER DISTRICT


(SIGNATURE OF ATTORNEY)
G. NICHOLAS VATERS, JR.

*Prerogative writs concerning a court of inferior jurisdiction shall be filed in Central District. RULE

CERTIFICATE OF ASSIGNMENT

DATE FILED
MAR 08 1990

STATE OF MICHIGAN

IN THE CIRCUIT COURT FOR THE COUNTY OF WAYNE

STEVEN PARTYKA,

Plaintiff,

vs.

FORD MOTOR CO., a Delaware Corporation,

Defendant.

90-005877 NP 3/08/90
JDG: CLAUDIA HOUSE MORCOM
PARTYKA STEVEN
VS
FORD MOTOR CO

RICHARD M. GOODMAN (P14169)
THOMAS E. KUHN (P37924)
GOODMAN, LISTER, SEIKALY & PETERS, P.C.
Attorneys for Plaintiff
1394 E. Jefferson
Detroit, MI 48207
(313) 567-6165/540-2412

There is no other civil action between these parties arising out of the same transaction or occurrence as alleged in this Complaint pending in this Court, nor has any such action been previously filed and dismissed or transferred after having been assigned to a Judge.

COMPLAINT AND DEMAND FOR TRIAL BY JURY

NOW COMES the Plaintiff, Steven Partyka, by and through his attorneys, Goodman, Lister, Seikaly & Peters, and complains against the abovenamed Defendant, Ford Motor Co. as follows:

COMMON ALLEGATIONS

1. Plaintiff Steven Partyka is a resident of the State of Michigan.
2. Defendant Ford Motor Co. (hereinafter "Ford") is a foreign corporation authorized to do business in the State of Michigan, with James A. Courter as Resident Agent, having its

Resident Office at American Road, City of Dearborn, County of Wayne, State of Michigan.

3. On or about February 19, 1989, Plaintiff was an occupant in a Mercury Lynx automobile. The Mercury Lynx was traveling down a highway, lost control and rolled over. As a result of the accident, Steven Partyka sustained severe and permanent injuries. These injuries and damages were proximately caused by the negligence of the Defendant, as set forth below.

4. As a direct and proximate result of the negligence and breach of warranty by the Defendant, Plaintiff suffered injuries and damages including, but not limited to:

A. Severe and permanent spinal cord injuries and their medical sequelae;

B. Pain, suffering, humiliation and embarrassment, past and future;

C. Loss of income and earning capacity, past and future;

D. Hospital, doctor and medical expenses, past and future; and

E. Loss of the ability to enjoy the normal functions of life, past and future.

COUNT I

5. Plaintiff realleges paragraphs 1 through 4 as if fully set forth herein.

6. Defendant Ford designed, tested, manufactured, assembled, distributed, marketed and sold the Mercury Lynx.

7. Defendant Ford owed a duty of due care to Plaintiff in the design, testing, manufacture, assembly, distribution, market and sale of the Mercury Lynx and the vehicle's components and subassemblies.

8. Defendant Ford breached these duties of due care to the Plaintiff by its negligent, careless, reckless, willful, wanton and indifferent acts and failures to act, including, but not limited to:

A. The negligent and improper design of the Mercury Lynx and other similar vehicles;

B. The failure to adequately test the Mercury Lynx and other similar vehicles;

C. The failure to evaluate the performance and crashworthiness of the Mercury Lynx and other similar vehicles at energy levels up to those which Defendant knew, or should have known, represented the reasonable limits of survivability for occupants in such vehicles;

D. The failure to make necessary modifications to the design of the Mercury Lynx and other similar vehicles, after receiving notice that the design of the vehicles' structure and components were not providing adequate crashworthiness or occupant protection in a reasonably foreseeable collision;

E. The failure to adequately warn and instruct purchasers and users of the Mercury Lynx and other similar vehicles of the vehicles' lack of crashworthiness; and

F. The negligent and improper design and testing of the

handling, stability, seatbelts, door latches, doors, roof, windshield and side window retention systems of the Mercury Lynx and other similar vehicles.

9. The negligent, careless, reckless, willful, wanton and indifferent acts and failures to act on the part of Defendant Ford were causes in fact and proximate causes of the injuries and damages sustained by Plaintiff as set forth in paragraph 4 above.

10. That the Defendant Ford did negligently breach and every one of the aforementioned duties, among others.

11. Under Michigan law, certain implied warranties arose by virtue of the sale of the subject vehicle.

12. That the Defendant Ford breached these implied warranties.

13. That at the time said vehicle left the custody and control of the Defendant Ford, it was in a defective and unsafe condition.

14. That the condition of the vehicle (1987 Mercury Lynx) remained substantially unchanged from the time of its sale to the time of the resultant automobile accident.

15. The Defendant Ford made certain express and implied warranties of fitness and safety with respect to the Mercury Lynx involved in this matter.

16. That the Defendant Ford did breach and every one of the aforementioned warranties.

WHEREFORE, Plaintiff Steven Partyka demands judgment against the Defendant for whatever amount above Ten Thousand Dollars

(\$10,000.00) he is found to be entitled, together with punitive and/or exemplary damages, interest, costs and attorney fees.

151

RICHARD M. GOODMAN (P14169)
Attorney for Plaintiff

Dated:

DEMAND FOR JURY TRIAL

Plaintiff herein makes demand for trial by jury of the above cause of action.

151

RICHARD M. GOODMAN (P14169)
Attorney for Plaintiff
1394 E. Jefferson
Detroit, MI 48207
(313) 567-6165

Dated:

REPORT NO. **Wood Co. Surprise 09700** **OL USE ONLY - DO NOT MARK ABOVE**

REPORT TAKEN AT STATION AT SCENE NO. OF VEH INVOLVED **1** DAMAGE SEVERITY (CHECK MOST SEVERE) FATAL INJURY PROPERTY DAMAGE ONLY

POWERED OVER 2000 HIT BRP SOLVED UNPOWERED UNDER 2000 UNINVOLVED

IN COUNTY OF **Wood** CITY VILLAGE TWP OF **MIDDLETON** DATE OF CRASH DAY **2 10 19 99** TIME **5:40** MILITARY **0006**

CRASH OCCURRED ON **DUNBRIDGE RD** WITHIN THE INTERSECTION OF **DOWLING RD**

IF NOT IN INTERSECTION (LIST NEAREST INTERSECTING STREET, MILEPOST, HOUSE NO.)

VEH 1 **87** MAKE **MERC** MODEL **LINK** COLOR **BLK** STYLE **2 DR** STATE **MI** LICENSE PLATE NO. **6T6** TOWING SERVICE **ETG** VEHICLED ON **ROAD**

DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI) **RAWLINS GREEN OH** ADDRESS (NO, STREET, CITY, STATE, ZIP CODE) **10000 Broomfield Hills Rd**

PHONE NO. **[REDACTED]** BIRTH DATE **19 m** AGE **19** SEX **M** SOCIAL SECURITY NO. **[REDACTED]** STATE **MI** DRIVER'S LICENSE NO. **[REDACTED]** OCCUPATION **STUDENT**

OWNER (IF SAME AS DRIVER, WRITE SAME) **[REDACTED]** ADDRESS **[REDACTED]** PHONE **[REDACTED]**

VEH 2 **87** MAKE **MERC** MODEL **LINK** COLOR **BLK** STYLE **2 DR** STATE **MI** LICENSE PLATE NO. **6T6** TOWING SERVICE **ETG** VEHICLED ON **ROAD**

DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI) **[REDACTED]** ADDRESS (NO, STREET, CITY, STATE, ZIP CODE) **[REDACTED]**

PHONE NO. **[REDACTED]** BIRTH DATE **[REDACTED]** AGE **[REDACTED]** SEX **[REDACTED]** SOCIAL SECURITY NO. **[REDACTED]** STATE **[REDACTED]** DRIVER'S LICENSE NO. **[REDACTED]** OCCUPATION **[REDACTED]**

OWNER (IF SAME AS DRIVER, WRITE SAME) **[REDACTED]** ADDRESS **[REDACTED]** PHONE **[REDACTED]**

VEH 3 **87** MAKE **MERC** MODEL **LINK** COLOR **BLK** STYLE **2 DR** STATE **MI** LICENSE PLATE NO. **6T6** TOWING SERVICE **ETG** VEHICLED ON **ROAD**

DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI) **[REDACTED]** ADDRESS (NO, STREET, CITY, STATE, ZIP CODE) **[REDACTED]**

PHONE NO. **[REDACTED]** BIRTH DATE **[REDACTED]** AGE **[REDACTED]** SEX **[REDACTED]** SOCIAL SECURITY NO. **[REDACTED]** STATE **[REDACTED]** DRIVER'S LICENSE NO. **[REDACTED]** OCCUPATION **[REDACTED]**

OWNER (IF SAME AS DRIVER, WRITE SAME) **[REDACTED]** ADDRESS **[REDACTED]** PHONE **[REDACTED]**

VEH 4 **87** MAKE **MERC** MODEL **LINK** COLOR **BLK** STYLE **2 DR** STATE **MI** LICENSE PLATE NO. **6T6** TOWING SERVICE **ETG** VEHICLED ON **ROAD**

DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI) **[REDACTED]** ADDRESS (NO, STREET, CITY, STATE, ZIP CODE) **[REDACTED]**

PHONE NO. **[REDACTED]** BIRTH DATE **[REDACTED]** AGE **[REDACTED]** SEX **[REDACTED]** SOCIAL SECURITY NO. **[REDACTED]** STATE **[REDACTED]** DRIVER'S LICENSE NO. **[REDACTED]** OCCUPATION **[REDACTED]**

OWNER (IF SAME AS DRIVER, WRITE SAME) **[REDACTED]** ADDRESS **[REDACTED]** PHONE **[REDACTED]**

FROM UNIT NO.	NAME (LAST, FIRST, MI)	BIRTH DATE	AGE	POSITION	INJURIES
1	[REDACTED]	[REDACTED]	[REDACTED]	A 1	1 FATAL 2 SERIOUS VISIBLE 3 MINOR VISIBLE 4 NO VISIBLE INJURY 5 NOT INJURED
2	[REDACTED]	[REDACTED]	[REDACTED]	A 2	1 FATAL 2 SERIOUS VISIBLE 3 MINOR VISIBLE 4 NO VISIBLE INJURY 5 NOT INJURED
3	[REDACTED]	[REDACTED]	[REDACTED]	A 3	1 FATAL 2 SERIOUS VISIBLE 3 MINOR VISIBLE 4 NO VISIBLE INJURY 5 NOT INJURED
4	[REDACTED]	[REDACTED]	[REDACTED]	A 4	1 FATAL 2 SERIOUS VISIBLE 3 MINOR VISIBLE 4 NO VISIBLE INJURY 5 NOT INJURED

INJURED TAKEN TO **ST. LUKE'S Hosp POLYSOMNOS TWP. EMS.**

INJURED TAKEN TO **[REDACTED]**

OFFENSE CHARGES AND DESCRIPTION

A O.R.C. CITY ORN

B O.R.C. No.

RECEIVED CALL **0014** DISPATCHED **0014** ARRIVED **0023** CLEARED **0314** OTHER TIME **[REDACTED]** TOTAL MINUTES **180**

DATE REPORT FILED **2-19-99** PHOTOS YES NO OFFICER'S NAME **ERVIN** BADGE NO. **60** CHECKED BY **[REDACTED]**

RECEIVED CALL **0014** DISPATCHED **0014** ARRIVED **0023** CLEARED **0314** OTHER TIME **[REDACTED]** TOTAL MINUTES **180**

DATE REPORT FILED **2-19-99** PHOTOS YES NO OFFICER'S NAME **ERVIN** BADGE NO. **60** CHECKED BY **[REDACTED]**

DRIVER-PEDESTRIAN-VEHICLE SECTION

OCCUPANT SECTION

POLICE ACTION

FORM PRENO.

Unit #1 was southbound on Dunbridge Rd when he lost control of his vehicle as he came around a curve resulting in #1 travelling off the east side of the roadway and overturning in a field.

WEATHER 1 NO ADVISORY WEATHER 2 RAIN 3 SNOW 4 FOG 5 HIGH WIND 6 OTHER		3	FIRST HARMFUL EVENT 16 TWO MV IN TRANSPORT 1 HEAD ON 2 REAR-END 3 BACKING 4 SIDEWIDE PASSING 5 EXCESSIVE PASSING 6 OTHER		SNOW NORTH WITH ARROW 
ROAD CONDITIONS 1 DRY 2 WET 3 SNOW 4 ICE 5 DIRT/SAND 6 OTHER		3	ONE MV IN TRANSPORT (COLLISION) 7 PARKED MOTOR VEH 8 PEDESTRIAN 9 ANIMAL 10 TRAIN 11 PASSENGER 12 OTHER HUMANLY 13 FIELD OBJECT 14 OTHER OBJECT (NON-COLLISION) 15 FALL FROM OR IN VEH 16 OVERTURNING 17 OTHER NON-COLLISION		
LIGHT 1 DAYLIGHT 2 DAWN 3 DUSK 4 DARK NO LIGHTS 5 DARK-LIGHTED 6 OTHER		4	LOCATION 2 1 INTERSECTION 2 INTERSECTION-RELATED 3 DRIVEWAY ACCESS 4 RAILROAD CROSSING 5 BRIDGE-PASSAGE OVER 6 DIRT ROAD-PASSAGE UNDER 7 HIGHWAY-TO-ROADWAY 8 PRIVATE PROPERTY		
ROAD CONTOUR 1 STRAIGHT LEVEL 2 STRAIGHT GRADE 3 CURVE LEVEL 4 CURVE GRADE		3			
OCCURRENCE 1 ON ROADWAY 2 OFF LEFT SIDE 3 OFF RIGHT SIDE 4 ON OPPOSITE LANE OF A DIVIDED HIGHWAY		1			
SPECIAL AREA 1 ROAD CONSTRUCTION MAINTENANCE AREA 2 SCHOOL ZONE					

TYPE OF UNIT CAR 1 2 BUS 1 2 TRUCK 1 2 MOTORCYCLE 1 2 PEDESTRIAN		PRE-CRASH ACTIONS DRIVER ACTIONS 1 PEDESTRIAN ACTIONS 1 TRAFFIC CONTROL 1 FIXED OBJECT STRUCK 1		CONTRIBUTING FACTOR 14 DRIVER ERROR 1 NON-DRIVER FACTOR 1 VEHICLE DEFECTS 1 TRUCK LOAD 1 TRUCK AXLES 1 TRACTOR-TRAILER RISKS 1	
CAR 1 SUB-COMPACT 2 COMPACT 3 MID SIZE 4 FULL SIZE TRUCK 5 PICKUP 6 PANEL VAN 7 STRAIGHT TRUCK 8 STRAIGHT TRUCK AND TRAILER 9 TRUCK TRACTOR 10 TRACTOR & SEMI-TRAILER 11 TRACTOR & DOUBLE TRAILER 12 MC UP TO 15000 13 MC 15000 TO 75000 14 MC OVER 75000 15 MOTORCYCLE		DRIVER ACTIONS 1 GOING STRAIGHT 2 TURNING RIGHT 3 TURNING LEFT 4 TURNING ON RED LIGHT 5 U TURN 6 STOPPED TO TURN 7 STOPPED IN TRAFFIC 8 LANE CHANGING 9 PARKED 10 BACKING 11 SLOWING 12 BRACING LANE 13 MOVING/EXITING RAMP 14 OUT OF CONTROL 15 SWAYING 16 DRIVERLESS VEH 17 OTHER DRV ACTIONS		CONTRIBUTING FACTOR 1 NONE 2 FAILURE TO YIELD 3 UNSAFE SPEED 4 FOLLOWING TOO CLOSELY OR ACCD 5 RAN RED LIGHT 6 RAN STOP OR YIELD SIGN 7 IMPROPER TURN 8 IMPROPER PASSING 9 IMPROPER LANE CHANGE 10 MISCOVER BACKING 11 INTERRUPT START 12 STOPPED OR PARKED ILLEGALLY 13 LEFT OF CENTER 14 FAILURE TO CONTROL 15 DRIVER INATTENTION 16 DROVE OFF ROAD 17 OTHER DRIVER ERROR	
BUS 16 SCHOOL 17 CHURCH 18 PUBLIC BUS EMERGENCY 19 POLICE VEHICLE 20 FIRE TRUCK 21 AMBULANCE/EMERGENCY OTHER 22 TAXI 23 MOTOR HOME 24 TRAIN 25 FARM VEHICLE 26 FARM EQUIPMENT 27 SNOWMOBILE 28 CONSTRUCTION EQUIP 29 ANIMAL W/DRIVER 30 ANIMAL W/NO DRIVER 31 BICYCLE 32 ALL OTHERS		PEDESTRIAN ACTIONS 18 CROSSING IN S-WALK 19 CROSSING OTHER THAN X-WALK 20 WALKING IN ROAD (WITH TRAFFIC) 21 WALKING IN ROAD (AGAINST TRAFFIC) 22 PLAYING IN ROAD 23 WORKING ON ROAD 24 ENTERING OR LEAVING VEHICLE 25 RUNNING/POUNCE ON VEH IN ROAD 26 OTHER IN ROAD 27 ON SIDEWALK OR SHOULDER		NON-DRIVER FACTOR 16 VEHICLE DEFECTS 17 LOAD SHIFTING 18 FALLING/SPILLING 19 PAVEMENT DEFECT 20 SHOULDER OBJECT 21 DEBRIS ON ROAD 22 DOWNED TRAFFIC SIGN/POST 23 VISION OBSTRUCTION 24 ANIMAL ACTIONS 25 PEDESTRIAN ACTIONS	
SPEED UNIT EST. LEGAL A UNK 55 B		MC HELMET USE UNIT DRIVER PASSENGER A A B B		VEHICLE DEFECTS CODE IF CONTRIBUTING FACTOR IS 10 PRIMARY A B SECONDARY A B 1 TURN SIGNALS 2 HEAD LAMPS 3 TAIL LAMPS 4 BRAKES 5 STEERING 6 TIRE BALANCE 7 WORN OR SLICK TIRES 8 TREAD EQUIPMENT DEFECTIVE 9 MOTOR TROUBLE 10 DAMAGED FROM PRIOR ACCIDENT 11 OTHER DEFECTS	
REMARKS 1 NO HELMET 2 FULL COVERAGE 3 FULL FACIAL COVER 4 OTHER TYPE HELMET		DRIVER 1 NO CONTROLS 2 STOP SIGN 3 WELD SIGN 4 TRAFFIC SIGNAL 5 TRAFFIC FLASHERS 6 SCHOOL SIGN 7 RAILROAD CROSSBUCKS 8 RAILROAD FLASHERS 9 RAILROAD GATES 10 CONCR. BARRICADES 11 POLICE OFFICER 12 PAYMENT BARRICADES 13 OTHER PEDESTRIAN 14 NO CONTROLS 15 CROSSWALK LINES 16 WALK/DONT WALK DEVICE		FIXED OBJECT STRUCK 1 NONE 2 UTILITY POLE 3 TRAFFIC SIGN 4 BRIDGE/STRUCTURE 5 GUARD RAIL 6 FENCE 7 TREE 8 SHRUBBERY 9 CURB 10 DITCH 11 EMBANKMENT 12 BUILDING 13 MAIL BOX 14 CONSTRUCTION BARRICADE 15 FIRE HYDRANT 16 OTHER OBJECT	

*Mother of child
Leaves with her parents*

FRT LEGAL GEN

[Redacted]

[Redacted]

FILE

ORIGIN CO MICRO

OPEN DATE

5/901

CUSTOMER TITLE

FI.

HI.

L. NAME

ADDR

CITY

Cincinnati

STATE

OH

ZIP

PHONE BUS #

HOME

FILE TYPE LEGAL

DISTRICT

TRUCKER

MOD YEAR

88

MILEAGE

VIN

3ma bm 115 XJK

DEALER

Star Line Merc

ZONE

PRICE C/T

5F

out of business

1957-file

90-1469

SPECIFY

unit in seat belt recall (10-89) ?

1) Accident or fire?

2) Date of incident/facts

4/1/90 148 rolled over several times - child's seat belt (pass side) unlocked.

3) Damage and/or injury estimate

veh totaled; child @ hospital w/ internal damage

4) Present status and location of vehicle

totaled - storage; cust

5) What is owner asking from FOMOCO?

restitution seat belts & other costs

APR 02 1990

APR 2 1990 10:44 AM LITIG/MEDIAT. SEC. 00000000

20

N/7 5-7-90
V Keys
51301

LAW OFFICES
J. D. WILLIAMSON, JR., P.C.
115 WEST LEXINGTON
P.O. Box 1078
INDEPENDENCE, MISSOURI 64051-0578
TELEPHONE (816) 836-3900

B-1
↑

April 18, 1990

1957 file

Ford Motor Company
c/o CT Corporate System
906 Olive Street
St. Louis, Missouri 63101

Re: [redacted] - Personal Injury
Date of Occurrence - April 4, 1990
Location of Occurrence - Independence Avenue at Paseo
Kansas City, Missouri

Dear Sirs:

Please be advised that I represent [redacted] in connection with his claims arising from the above referenced incident.

The seatbelts in his 1989 Ford Probe, VIN 1ZVBT22^{GT Turbo}[redacted], failed to function properly and as a result he sustained injury.

Please refer this letter to your attorneys or insurance representatives for further disposition.

Very truly yours,

J. D. Williamson, Jr.
J. D. Williamson, Jr.
JDW:bm

*Esis - Kansas City
Kemin Patti*

APR 30 1990

MISSOURI UNIFORM ACCIDENT REPORT

1 AGENCY NAME AND ORI
KANSAS CITY, MISSOURI POLICE DEPARTMENT
 1125 LOCUST
 KANSAS CITY, MISSOURI 64106
 ORI: MOKPD0000

LEFT THE SCENE
 NA
 CLEARED
 YES = NA NO =

COMPLAINT / REPORT / CASE NUMBER
90-045935
 FOR STATE USE ONLY
 ROUTED CARD CODE

ACCIDENT CLASSIFICATION
 PROPERTY DAMAGE ONLY: NA
 NUMBER INJURED: 1
 NUMBER KILLED: NONE
 NUMBER OF VEHICLES INVOLVED: 2
 ACCIDENT DATE: 4-4-90
 ACCIDENT TIME: 6:05 PM
 TIME NOTIFIED: 6:10 PM
 TIME ARRIVED: 6:20 PM
 REPORT DATE: 4-4-90

2. LOCATION
 COUNTY: JACKSON
 MUNICIPALITY: KANSAS CITY, MISSOURI
 BEAT OCC: 122
 BEAT REPORT: 737
 INVESTIGATED AT SCENE: YES

ON: INDEPENDENCE
 DISTANCE FROM: NA FEET
 DIRECTION: NA
 INTERSECTING STREET OR ROADWAY: PASEO
 SPEED LIMIT: 35
 GEO-CODE: 35

ROAD MAINTAINED BY: STATE COUNTY MUNICIPAL PRIVATE PROPERTY INTERSTATE

3. DAMAGE TO PROPERTY OTHER THAN VEHICLES—GIVE NAME, OWNERSHIP, NATURE OF DAMAGE AND DESCRIPTION OF OBJECT(S).
 NONE

4. DRIVER 1
 DRIVER'S FULL NAME (LAST, FIRST MI): [REDACTED]
 ADDRESS: [REDACTED] CITY: INDEPENDENCE MO STATE: MO ZIP: [REDACTED]
 DRIVER LICENSE NUMBER: [REDACTED] STATE: MO TYPE OF LICENSE: PERMIT OPER (N)
 INSURANCE COMPANY: UNKNOWN (N) M/C QUAL: NA YES = NO
 YEAR: 89 MAKE: FORD MODEL: PROBE COLOR: MAROON
 VIN: 1ZUBF22L0K5 [REDACTED] LIC PLATE NO: [REDACTED] STATE: MO YEAR: 91
 VEHICLE OWNER NAME (LAST, FIRST MI) / COMMERCIAL CARRIER: DRIVER
 ADDRESS: [REDACTED] CITY: [REDACTED] STATE: [REDACTED] ZIP: [REDACTED]

VEHICLE DAMAGE INITIAL IMPACT #: 14
 TOWED: YES = NO
 CIRCLE ALL DAMAGED AREAS: 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22

8. VEHICLE BODY TYPES
 AUTOMOBILES / SPECIAL VEHICLES
 1. PASSENGER CAR-HARDTOP
 2. PASSENGER CAR-CONVERTIBLE
 3. STATION WAGON
 4. VAN
 5. BUS
 6. SCHOOL BUS
 7. MOTORCYCLE
 8. MOPED
 9. BICYCLE
 10. SELF-PROPELLED MOTORHOME / CAMPER
 11. FARM IMPLEMENT
 12. CONSTRUCTION EQUIPMENT
 13. OTHER TRANSPORTATION DEVICES
 14. UNKNOWN

9. EMERGENCY VEHICLE INVOLVEMENT
 1. POLICE
 2. FIRE
 3. AMBULANCE
 4. OTHER (MUST CHECK X)
 A. EMERGENCY VEHICLE ON EMERGENCY RUN

10. PROBABLE CONTRIBUTING CIRCUMSTANCES
 1. SPEED EXCEEDED LIMIT
 2. TOO FAST FOR CONDITIONS
 3. IMPROPER PASSING
 4. VIOLATION SIGNAL / SIGN
 5. WRONG SIDE-NOT PASSING
 6. FOLLOWING TOO CLOSE
 7. IMPROPER SIGNAL
 8. IMPROPER BACKING
 9. IMPROPER TURN
 10. WRONG WAY (ONE-WAY STREET)
 11. IMPROPER START/PARKING
 12. IMPROPER PARKING
 13. VEHICLE DEFECTS
 14. FAILED TO YIELD
 15. DRIVING
 16. DRUGS
 17. PHYSICAL IMPAIRMENT
 18. INATTENTION
 19. NONE

11. PEDESTRIAN ACTIONS
 1. WITH SIGNAL
 2. AGAINST SIGNAL
 3. NO SIGNAL
 4. DIAGONALLY
 5. BEHIND PARKED CAR
 6. WALKING WITH TRAFFIC
 7. WALKING AGAINST TRAFFIC
 8. GETTING ON / OFF VEHICLE
 9. STANDING IN ROAD
 10. PUSHING / WORKING ON VEHICLE
 11. OTHER WORKING
 12. PLAYING IN ROAD
 13. OTHER IN ROAD
 14. OFF ROADWAY
 15. CROSSWALK MARKED

5. DRIVER 2
 DRIVER'S FULL NAME (LAST, FIRST MI): [REDACTED]
 ADDRESS: [REDACTED] CITY: KANSAS CITY MO STATE: MO ZIP: [REDACTED]
 DRIVER LICENSE NUMBER: [REDACTED] STATE: MO TYPE OF LICENSE: OPER (N)
 INSURANCE COMPANY: RELIANT INSUR (N) M/C QUAL: NA YES = NO
 YEAR: 76 MAKE: BUICK MODEL: CENTRY COLOR: CREAM
 VIN: 4H29CL21343 [REDACTED] LIC PLATE NO: [REDACTED] STATE: MO YEAR: 90
 VEHICLE OWNER NAME (LAST, FIRST MI) / COMMERCIAL CARRIER: DRIVER
 ADDRESS: [REDACTED] CITY: [REDACTED] STATE: [REDACTED] ZIP: [REDACTED]

VEHICLE DAMAGE INITIAL IMPACT #: 14
 TOWED: YES = NO
 CIRCLE ALL DAMAGED AREAS: 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22

12. CODES
 SEAT LOCATION: FR, RR, FC, RC, FL, RL
 INJURY: 1. FATAL, 2. DISABLING, 3. EVIDENT-NOT DISABLING, 4. PROBABLE-NOT APPARENT, 5. NONE APPARENT, 8. UNKNOWN
 EJECTION: 1. NO, 2. PARTIALLY, 3. TOTALLY, 4. UNKNOWN
 SAFETY DEVICES: 1. NONE, 2. NOT USED, 3. USED, 4. CHILD RESTRAINT, 5. USE UNKNOWN, 6. BELT FAILURE, 7. HELMET USED, 8. HELMET NOT USED

DRIVERS	NAME	ADDRESS	DATE OF BIRTH	RACE	SEX	VEH. NO.	SEAT LOC.	INJ.	EJECT.	SAF. DEV.	PHONE
DRIVER 1		SAME AS ABOVE		W	M	1	FL 3	1	3		Res. LINK Bus. LINK
DRIVER 2		SAME AS ABOVE		B	F	2	FL 5	1	3		Res. NONE Bus. [REDACTED]

7. KILLED OR INJURED PERSONS

NAME	ADDRESS	DATE OF BIRTH	RACE	SEX	VEH. NO.	SEAT LOC.	INJ.	EJECT.	SAF. DEV.	PHONE
NONE										

13. WITNESSES
NAME: NONE CONTACTED
ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____ PHONE: _____

14. TRAFFIC CONTROL V1 V2 1 STOP SIGN 2 ELEC. SIGNAL 3 R/R SIG/GATE 4 YIELD SIGN 5 OFFICER/FLAGMAN 6 NO PASS ZONE 7 TURN RESTRICT 8 CONSTRUCT ZONE 9 NONE		15. LIGHT CONDITION 1 DAYLIGHT 2 DARK W/ STREET LIGHTS ON 3 DARK W/ STREET LIGHTS OFF 4 DARK-NO STREET LIGHTS		16. WEATHER 1 CLEAR 2 CLOUDY 3 RAIN 4 SNOW 5 SLEET 6 FREEZING 7 FOG OR MIST		17. ROAD SURFACE 1 CONCRETE 2 ASPHALT 3 BRICK 4 GRAVEL 5 DIRT OR SAND 6 MULTI-SURFACE		18. ROAD CONDITION 1 DRY 2 WET 3 SNOW 4 ICE 5 MUD		19. ROAD TYPE 1 1 STRAIGHT 2 CURVE 20. ROAD TYPE 2 1 LEVEL 2 HILL 3 CREST		21. VISION OBSCURED V1 V2 1 WINDSHIELD OBSCURED 2 LOAD ON VEH TREE(S) 3 BULBING 4 EMBANKMENT 5 SIGNBOARD(S) 6 HILL CREST 7 PARKED CAR(S) 8 MOVING CAR(S) 9 OTHER 10 NOT OBSCURED		24. VEHICLE ACTION 1 GOING STRAIGHT 2 OVERTAKING 3 MAKING RIGHT TURN 4 MAKING RIGHT TURN ON RED 5 MAKING LEFT TURN 6 MAKING U TURN 7 SLOTTING 8 SLOWING OR STOPPING 9 START IN TRAFFIC LANE 10 START FROM PARKED 11 BACKING 12 STOPPED IN TRAFFIC 13 PARKED 14 CHANGING LANES 15 AVOIDING 16 CROSSOVER MEDIAN 17 CROSSOVER CENTER LINE	
---	--	---	--	--	--	---	--	--	--	---	--	---	--	---	--

22. ACCIDENT TYPE

COLLISION INVOLVING
 1. ANIMAL
 2. BICYCLIST OR PEDALCYCLIST
 3. FIXED OBJECT
 4. OTHER OBJECT
 5. PEDESTRIAN
 6. TRAIN
 7. MV IN TRANSPORT
 8. MV ON OTHER ROADWAY
 9. PARKED MV

NON-COLLISION
 10. OVERTURNED
 11. OTHER NON-COLLISION
 1. ON ROADWAY
 2. OFF ROADWAY

23. COLLISION DIAGRAM

V1	GOING (DIRECTION) EAST	ON (STREET) INDEPENDENCE	APPROX SPEED 30
V2	GOING (DIRECTION) WEST	ON (STREET) INDEPENDENCE	APPROX SPEED STOPPED



See page 3

26. OFFICER STATEMENT (IF ADDITIONAL ROOM IS NECESSARY, ATTACH A SEPARATE SHEET)

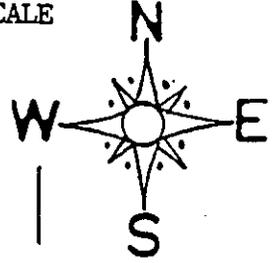
DRIVER #1 STATED HE WAS EAST BOUND ON INDEPENDENCE AN ATTEMPTING TO CROSS PASSED, WHEN THE #2 VEHICLE MADE A LEFT IN FRONT OF HIM HE STATED HE HAD A GREEN TRAFFIC SIGNAL. HE STATED HE STRUCK THE #2 VEHICLE. DRIVER #2 STATED SHE WAS WEST BOUND ON INDEPENDENCE STOPPED AT PASSED. SHE STATED THE LIGHT CHANGED TO YELLOW AND SHE THOUGHT THE #1 VEHICLE WAS GOING TO STOP, SHE BEGAN HER TURN AND WAS STRUCK BY THE #1 VEHICLE. THE #1 DRIVER WAS TRANSPORTED TO MET HOSPITAL FAC. BY FOR TREATMENT, BY M.A.S.I. AMBULANCE.

27. NAME: [REDACTED] CHARGE: [REDACTED] ARREST NO / SUMMONS: 3473, 34273, 34284 COURT: 6189-406-407-408 E DATE: 5-7-90 TIME: 1:30 PM

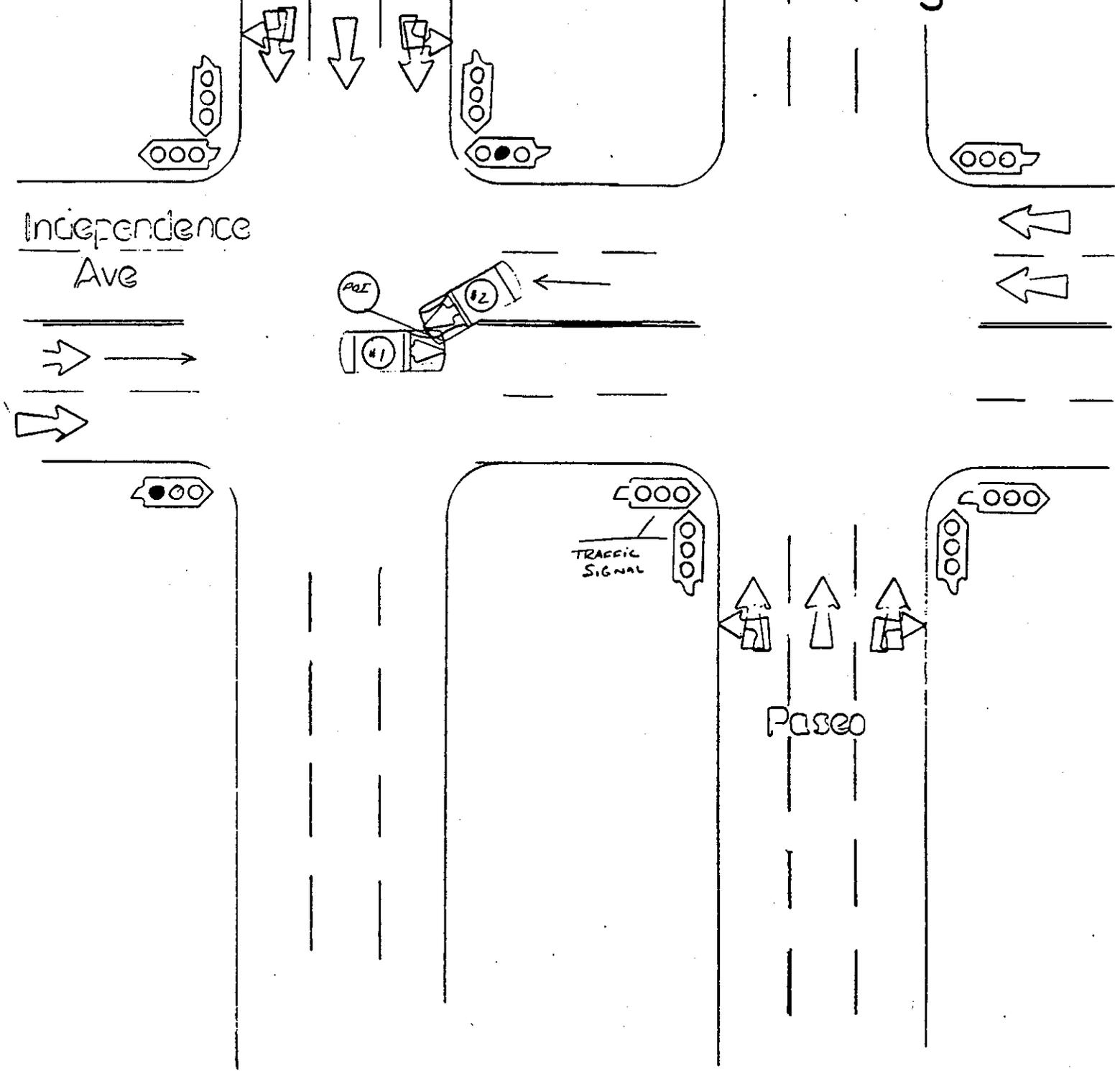
28. REPORTING OFFICER SIGNATURE: [Signature] RANK: P.O. SERIAL #: 3376 PHOTOS: YES [] NO [X] TOW CO. V1: VENUS TOW CO. V2: CITY # 405267

29. SEARCHING OFFICER SIGNATURE: [Signature] RANK: PD SERIAL #: 1961 CHEMICAL TEST ADMINISTERED: REFUSED RESULTS: NA ATTACHMENTS: []

PAGE 3 OF 3
COMPLAINT # 90-045935
DATE 4/17/90 TIME 1005 hrs
WEATHER Cloudy
ROAD CONDITION Dry Asphalt
P.O. NEWHOUSE A.I.S.
COLLISION DIAGRAM NOT
TO SCALE



Independence
Ave



DJCP222 ----- OGC - CMS PRODUCT - GENERAL DETAIL REVIEW ----- 10/09/91 10:12
COMMAND ==>

PFKEYS: 1=HELP 2=PREV 3=EXIT 4=NEXT 5=FNCL 6=COUNSEL
10=REMARKS 11=PLTF 12=UPDATE

File: 913328 - [REDACTED] OPEN ACTIVE REST Last Chg: 10/09/91
Type: PRODUCT CLAIM Hdlr: KEYES, HAROLD OGDB140

Dates: Accident 05/11/91 Served 10/04/91 Closed Monitor Only?: N
Diary 12/09/91 Notice 10/04/91

Alleged Defects:

(SBO4) RR SEAT REST () ()
Vehcl: Yr 89 Model PROBE Sfx
VIN: Esis Type: FUL Class Action? N ESIS #: 957025 633169

Settlement Est: 5,000 - 10,000 Dealer: Def? N Sued? N
Verdict Est: 0 - 0 Supplier: Def? N Sued? N
Demand Amt: 0 Date: Offer Amt: 0 Date:

Eket: Court: Trial Date: Trlg? N
Location: IA00 IA IOWA Multiple Dockets? N
Highland Park Accession Nos: File Video
3278-2 STATUS: AVAILABLE TSO10669 KBD: READY R02 C16 ALPHA

DJCP251 ----- OGC - CMS PRODUCT - REMARKS REVIEW ----- 10/09/91 10:14
COMMAND ==> LAST CHG: 10/09/91 OGDB140

*** RECORD HAS BEEN ADDED. ***

PFKEYS: 1=HELP 2=PREV 3=EXIT 4=NEXT 5=FNCL 6=COUNSEL
7=BACKWARD 8=FORWARD 9=GENL DETAIL 11=PLTF 12=ADD/UPDATE

File: 913328 - DOESCHER LEON OPEN ACTIVE REST KEYES, HAROLD

***** TOP OF DATA *****
CLAIMS REAR SEAT BELT DID NOT HOLD CHILD'S SAFTY SEAT IN
PLACE INJURING OCCUPANT.
***** BOTTOM OF DATA *****

3278-2 STATUS: AVAILABLE TSO10669 KBD: READY R03 C16 ALPHA

Legal
Bill Bliska
OGE

'92 JUL 15 10:22

MEDIATION AND
LITIGATION
SECTION



51001

OR0443
Legal
MORS II Basic Information
CONTACT NBR: 07/13/1992 15:28:11
3MABM1251JR
ST NAME: [redacted]
First Name: a ZIP/PC: [redacted]
MI: J
epson ST/PV: nh
Business Phone: [redacted] Ext: [redacted]
Model: TRACER
070000
SALES CODE: 364984
Symptoms: 104100
1 (1 or 2)
Micro Nbr: [redacted]

customer has concern with vehicle that was involved in accident 2/7/92. customer says that he was struck by another car coming from opposite direction. customer says that safety belt had disconnected or torn. customer says he injured his head & was hospitalized over a week. customer seeks contact from Ford.

F5=EXIT F6=ADD F8=RECALL F9=ESP F10=OASIS F11=WARRANTY F12=DEALER
LPIN456

NIF
7/21

Legal

Kevin Fick
x2117

MEDIATION / III
LITIGATION
SECTION

92 JAN - 3 AMO:36

SR0012



03000002 MORIS II Basic Information 01/02/1992 12:04:22

Type: Legal CONTACT NBR: _____

VIN: 1FMDUG32X2NU _____

LAST NAME: _____ ZIP/PC: _____

Title: _____ First Name: _____ MI: _____

Address: _____

City: FREEPORT ST/PV: TX

Home Phone: _____ Business Phone: _____ Ext: _____

Year: 91 Model: EXPLORER

Mileage/KM: 35000 SALES CODE: _____

Dealer Name: bay city auto sales _____ Symptoms: 104200 _____

Causal Code: 1001 _____

Body Sales: 1 (1 or 2)

Ask Code: _____

Loan Type: F Miss Nbr: _____

customer was in accident 12-22-91 when vehicle was hit in left front fender. _____
 seat belt came out of latch and did not hold and inside of belt assembly has _____
 come out. customer went to his doctor for minor whiplash related injuries. _____
 vehicle is at dealer. customer wants to know what Ford can do for him. (?) _____

01=HELP 02=EXIT 03=ADD 04=RECALL 05=ISS 010=CASIS 011=WARRANTY 012=DEALER

1218003

1/8

NIF
1/10

08409

91-48176

PLACE WHERE ACCIDENT OCCURRED
 COUNTY Galveston CITY OR TOWN Texas City JAN 03 1992
 ACCIDENT WAS OUTSIDE CITY LIMITS. INDICATE DISTANCE FROM NEAREST TOWN _____ MILES NORTH SOUTH EAST WEST OF _____ CITY OR TOWN _____
 ROAD ON WHICH ACCIDENT OCCURRED 25th St. N. BLOCK NUMBER _____ STREET OR ROAD NAME 00-425 ROUTE NUMBER OR STREET CODE _____
 INTERSECTING STREET OR RR X'ING NUMBER 13th Ave. N. BLOCK NUMBER _____ STREET OR ROAD NAME 00-213 ROUTE NUMBER OR STREET CODE _____
 NOT AT INTERSECTION FT. MI. NORTH SOUTH EAST WEST OF _____
 SHOW MILEPOST OR NEAREST INTERSECTING NUMBERED HIGHWAY. IF NONE, SHOW NEAREST INTERSECTING STREET OR REFERENCE POINT.

LOC. NO. _____
 DO NOT WRITE IN THIS SPACE
 1359061
 OPS NO. _____
 CODE 83 SEVERITY P
 TYPE 4MVX
 FAT. REC. X DR. N. AW

DATE OF ACCIDENT December 21 19 91 DAY OF WEEK SATURDAY HOUR 2059 A.M. IF EXACTLY NOON OR MIDNIGHT, SO STATE P.M.

UNIT NO. 1 - MOTOR VEHICLE VEH. IDENT. NUMBER 9F14W668275
 YEAR 79 COLOR & MAKE Gray Mercury MODEL NAME CAPRIS BODY STYLE 2-DR LICENSE PLATE _____
 DRIVER'S NAME _____ ADDRESS Texas City Tx CITY STATE _____ PHONE NUMBER _____
 DRIVER'S LICENSE _____ CLASS/TYPE C D.O.B. _____ MONTH-DAY-YEAR _____ RACE W SEX M OCCUPATION Cook
 LESSEE SAME OWNER NAME (ALWAYS SHOW LESSEE IF LEASED, OTHERWISE SHOW OWNER) _____ ADDRESS _____ CITY _____ STATE _____
 LIABILITY YES NO INSURANCE COMPANY NAME _____ POLICY NUMBER _____ PEACE OFFICER OR FIRE FIGHTER ON EMERGENCY? NO YES IF YES, DESCRIBE IN NARRATIVE
 VEHICLE DAMAGE RATING FD-3

UNIT NO. 2 - MOTOR VEHICLE TRAIN PEDALCYCLIST PEDESTRIAN
 TOWED OTHER
 YEAR 91 COLOR & MAKE Maroon/Silver Ford MODEL NAME Explorer BODY STYLE VAN LICENSE PLATE _____
 DRIVER'S NAME _____ ADDRESS Richwood Tx CITY STATE _____ PHONE NUMBER _____
 DRIVER'S LICENSE _____ CLASS/TYPE C D.O.B. _____ MONTH-DAY-YEAR _____ RACE W SEX M OCCUPATION SALES
 LESSEE SAME OWNER NAME (ALWAYS SHOW LESSEE IF LEASED, OTHERWISE SHOW OWNER) _____ ADDRESS _____ CITY _____ STATE _____
 LIABILITY YES Liberty Mutual INSURANCE COMPANY NAME _____ POLICY NUMBER _____ PEACE OFFICER OR FIRE FIGHTER ON EMERGENCY? NO YES IF YES, DESCRIBE IN NARRATIVE
 VEHICLE DAMAGE RATING LFQ-3

DAMAGE TO PROPERTY OTHER THAN VEHICLES
 OBJECT (2) NAME AND ADDRESS OF OWNER N/A FEET FROM CURB _____ DAMAGE ESTIMATE \$ _____
 OBJECT _____ NAME AND ADDRESS OF OWNER _____ FEET FROM CURB _____ DAMAGE ESTIMATE \$ _____

LIGHT CONDITION <u>4</u>	WEATHER <u>01</u>	SURFACE CONDITION <u>2</u>	TYPE ROAD SURFACE <u>1</u>	DESCRIBE ROAD CONDITIONS (INVESTIGATOR'S OPINION) <u>Good</u>
1-DAYLIGHT 2-DAWN 3-DARK-NOT LIGHTED 4-DARK-LIGHTED 5-DUSK	1-CLEAR/CLOUDY 2-RAINING 3-SNOWING 4-FOG 5-BLOWING DUST	6-SMOKE 7-SLEETING 8-HIGH WINDS 9-OTHER	1-BLACKTOP 2-CONCRETE 3-GRAVEL 4-SHELL 5-DIRT 6-OTHER	

IN YOUR OPINION, DID THIS ACCIDENT RESULT IN AT LEAST \$500.00 DAMAGE TO ANY ONE PERSON'S PROPERTY? YES NO

CHARGES FILED
 NAME _____ CHARGE Fail To Yow at Stop Intersection CITATION NUMBER _____
 NAME _____ CHARGE Fail To Maintain Financial Respons. CITATION NUMBER _____

NOTIFIED ACCIDENT 12-21-91 DATE TIME ARRIVED AT SCENE OF ACCIDENT 2059 HOUR HOW Dispatch
 TYPED OR PRINTED NAME OF INVESTIGATOR Brett Cyr DATE REPORT MADE 12-21-91 IS REPORT COMPLETE? YES NO
 SIGNATURE OF INVESTIGATOR _____ ID NO. 561 DEPARTMENT TCPD DIST./AREA _____

23325

CODE FOR TYPE SPECIMEN TAKEN FOR ALCOHOL/DRUG ANALYSIS A-Fresh B-Blood C-Other N-None R-Refused	CODE FOR TYPE RESTRAINT USED A-Seat Belt & Shoulder Strap B-Seat Belt & No Shoulder Strap C-Child Restraint D-Air Bag Deployed E-Shoulder Strap Only N-None	CODE FOR INJURY SEVERITY (Use only the most serious one in each for injury.) K-Killed A-Incapacitating Injury - Severe injury which prevents continuation of normal activities. Includes broken or distorted limbs, internal injuries, crushed chest, etc. B-Nonincapacitating Injury - Evident injury such as bruises, abrasions, minor lacerations which do not incapacitate. C-Possible Injury - Injury which is claimed, reported or indicated by behavior, but without visible wounds. Includes limping, momentary unconsciousness or complaint of pain. N-Not Injured
---	--	---

VEHICLE REMOVED TO UNKNOWN
 BY Benny's Wrecker

OCCUPANT'S POSITION	COMPLETE ALL DATA ON ALL OCCUPANTS' NAMES, POSITIONS, RESTRAINTS USED, ETC.; HOWEVER, IT IS NOT NECESSARY TO SHOW ADDRESSES UNLESS KILLED OR INJURED.		TYPE SPECIMEN TAKEN	RESULT	TYPE RESTRAINT USED	AGE	SEX	INJURY CODE
	NAME (LAST NAME FIRST)	ADDRESS						
1 DRIVER	See Front		N	N	A	18	M	N

UNIT NO. 2 (Complete only if Unit No. 1 was a motor vehicle.)
 DAMAGE RATING: _____ VEHICLE REMOVED TO: _____ BY: _____

OCCUPANT'S POSITION	COMPLETE ALL DATA ON ALL OCCUPANTS' NAMES, POSITIONS, RESTRAINTS USED, ETC.; HOWEVER, IT IS NOT NECESSARY TO SHOW ADDRESSES UNLESS KILLED OR INJURED.		TYPE SPECIMEN TAKEN	RESULT	TYPE RESTRAINT USED	AGE	SEX	INJURY CODE
	NAME (LAST NAME FIRST)	ADDRESS						
7 DRIVER	See Front		N	N	A	31	M	N

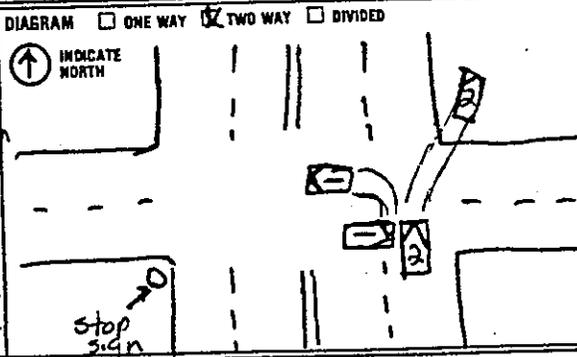
COMPLETE IF CASUALTIES NOT IN MOTOR VEHICLE

PEDESTRIAN, PEDALCYCLIST ETC.	CASUALTY NAME (LAST NAME FIRST)	CASUALTY ADDRESS	TYPE SPECIMEN TAKEN	RESULT	AGE	SEX	INJURY CODE
	N/A						

IF AMBULANCE USED, SHOW

ITEM NUMBERS	TAKEN TO	TIME NOTIFIED	TIME ARRIVED AT SCENE	NO. ATTENDANTS INC. DRIVER
	N/A			

INVESTIGATOR'S NARRATIVE OPINION OF WHAT HAPPENED (ATTACH ADDITIONAL SHEETS IF NECESSARY)
 UNIT 1 was travelling East Bound on 13th Ave. N.
 UNIT 2 was travelling North Bound on 25th St. N.
 Unit 1 stopped at the stop sign then proceeded through the intersection and struck Unit 2 in the left front quarter. Unit 2 was forced to the side of the roadway. Unit 1 spun around after impact and was facing West.



FACTORS AND CONDITIONS LISTED ARE THE INVESTIGATOR'S OPINION

FACTORS/CONDITIONS CONTRIBUTING				OTHER FACTORS/CONDITIONS MAY OR MAY NOT HAVE CONTRIBUTED			
UNIT 1	1	35	2	3	UNIT 1	1	2
UNIT 2	1		2	3	UNIT 2	1	2

- | | | | |
|---|--|--|---|
| <ul style="list-style-type: none"> 1. Animal on Road - Domestic 2. Animal on Road - Wild 3. Backed Without Safety 4. Changed Lane When Unsafe 5. Defective or No Headlamps 6. Defective or No Stop Lamps 7. Defective or No Tail Lamps 8. Defective or No Turn Signal Lamps 9. Defective or No Trailer Brakes 10. Defective or No Vehicle Brakes 11. Defective Steering Mechanism 12. Defective or Slick Tires 13. Defective Trailer Hitch 14. Disabled in Traffic Lane 15. Disregarded Stop and Go Signal 16. Disregarded Stop Sign or Light 17. Disregarded Turn Marks at Intersection 18. Disregarded Warning Sign at Construction | <ul style="list-style-type: none"> 19. Distraction in Vehicle 20. Driver Inattention 21. Drove Without Headlights 22. Failed to Control Speed 23. Failed to Drive in Single Lane 24. Failed to Give Half of Roadway 25. Failed to Heed Warning Sign 26. Failed to Pass to Left Safely 27. Failed to Pass to Right Safely 28. Failed to Signal or Gave Wrong Signal 29. Failed to Stop at Proper Place 30. Failed to Stop for School Bus 31. Failed to Stop for Train 32. Failed to Yield ROW - Emergency Vehicle 33. Failed to Yield ROW - Open Intersection 34. Failed to Yield ROW - Private Drive 35. Failed to Yield ROW - Stop Sign 36. Failed to Yield ROW - To Pedestrian | <ul style="list-style-type: none"> 37. Failed to Yield ROW - Turning Left 38. Failed to Yield ROW - Turn on Red 39. Failed to Yield ROW - Yield Sign 40. Fatigued or Asleep 41. Faulty Evasive Action 42. Fire in Vehicle 43. Flouting or Evading Police 44. Followed too Closely 45. Had Been Drinking 46. Handicapped Driver (Explain in Narrative) 47. ILL (Explain in Narrative) 48. Impaired Visibility (Explain in Narrative) 49. Improper Start From Parked Position 50. Load Not Secured 51. Opened Door Into Traffic Lane 52. Overtake Vehicle or Load 53. Overtake and Pass Insufficient Clearance 54. Parked and Failed to Set Brakes 55. Parked in Traffic Lane | <ul style="list-style-type: none"> 56. Parked Without Lights 57. Passed in No Passing Zone 58. Passed on Right Shoulder 59. Pedestrian Failed to Yield ROW to Vehicle 60. Speeding - Unsafe (Under Limit) 61. Speeding - Over Limit 62. Taking Medication (Explain in Narrative) 63. Turned Improperly - Cut Corner on Left 64. Turned Improperly - Wide Right 65. Turned Improperly - Wrong Lane 66. Turned When Unsafe 67. Under Influence - Alcohol 68. Under Influence - Drug 69. Wrong Side - Approach or in Intersection 70. Wrong Side - Not Passing 71. Wrong Way - One Way Road 72. Other Factor (Write in on Line Below) |
|---|--|--|---|

3

5. Prior to November 7, 1990, the Plaintiff, Cheryl Hansen (Mrs. Hansen), purchased from the Defendant, Butterfield Ford, a 1989 Mercury Sable that had been manufactured by the Defendant Ford Motor Company and which included a driver's seat belt that had been designed, manufactured, and sold by Defendant Ford Motor Company, Butterfield Ford, and Does I - X.

6. Prior to November 7, 1990, Mrs. Hansen noticed that the seat belt did not always remain fastened and that sometimes the seat belt buckle would release on its own. She contacted Butterfield Ford and complained of this defect or defective condition. She was told by Butterfield Ford to just make sure that the seat belt was pushed together properly.

7. On November 7, 1990, Mrs. Hansen sat down behind the wheel of her 1989 Mercury Sable and pushed the seat belt together properly. She then proceeded to drive the vehicle along 3200 West Street in Salt Lake County where she was involved in a collision with another car at approximately 7760 South 3200 West. Upon impact, Mrs. Hansen heard the seat belt click as it released. She was thrown forward, injuring her right hand and arm.

8. As a direct and proximate consequence of the failure of the seat belt to remain buckled upon impact, Mrs. Hansen has undergone and may undergo multiple surgeries on her right hand and arm, has lost the use of the hand and arm that she used to regularly use for writing and other manual tasks, has been subjected to excruciating pain, great

suffering, and severe mental and emotional distress and anguish, has suffered past, present, and future lost wages, and has incurred past, present and future medical expenses, all in amounts to be determined at the trial of this case.

FIRST CLAIM FOR RELIEF
(Product Liability)

9. Paragraphs 1 - 8 are realleged.

10. The seat belt being worn by Mrs. Hansen at the time of the accident was designed, manufactured, and sold by Defendants, and at the time of the sale by the initial manufacturer there was a defect or defective condition in the seat belt which made the seat belt unreasonably dangerous to the user or consumer in that the seat belt failed to remain fastened and the buckle released in the impact of an automobile collision.

11. The very purpose for the seat belt was to prevent injury to a user by remaining buckled during an automobile accident, and the subject seat belt was dangerous to an extent beyond that which would be contemplated by the ordinary and prudent user of the seat belt.

12. Defendants are strictly liable to Mrs. Hansen for all special, general, compensatory, actual, consequential, and other damages proximately caused by their unreasonably dangerous seat belt as are reasonable in the premises.

13. Designing, manufacturing, and selling the seat belt with its defect or defective condition constituted

willful and malicious conduct, or conduct that manifests a knowing and reckless indifference toward, and a disregard of, the rights of others, and Defendants are liable for punitive damages as are reasonable in the premises.

SECOND CLAIM FOR RELIEF
(Breach of Warranty)

14. Paragraphs 1 - 13 are realleged.

15. Defendants made certain express or implied warranties concerning the seat belt, and certain warranties concerning the seat belt arise by operation of law, which warranties were breached by Defendants in that the seat belt failed to remain buckled in the impact of an automobile collision.

16. Defendants are liable to Mrs. Hansen for all special, general, compensatory, actual, consequential, and other damages as are reasonable in the premises for their breach of warranty.

THIRD CLAIM FOR RELIEF
(Negligence)

17. Paragraphs 1 - 16 are realleged.

18. The conduct of Defendants in designing, manufacturing, and selling a seat belt that failed to remain buckled in the impact of a collision, as well as the failure of Defendants to recall, inspect, and repair the seat belt instead of advising Mrs. Hansen to just make sure that the

seat belt was pushed together properly when she advised Defendants that the seat belt did not always remain fastened, constituted negligent, reckless, knowing, or intentional acts and omissions on the part of Defendants in violation of Defendants' duty of care to Mrs. Hansen.

19. Defendants are liable to Mrs. Hansen for all special, general, compensatory, actual, consequential, and other damages caused by their negligent, reckless, knowing, and/or intentional acts and omissions in a sum of not less than FIVE MILLION DOLLARS (\$5,000,000.00).

20. The acts and omissions of Defendants as alleged in this Third Claim for Relief constitute willful and malicious conduct, or conduct that manifests a knowing and reckless indifference toward, and a disregard of, the rights of others, and Defendants are liable to Plaintiff for punitive damages in a sum of not less than FIFTEEN MILLION DOLLARS (\$15,000,000.00).

PRAYER

WHEREFORE, Plaintiff prays for relief against Defendants as follows:

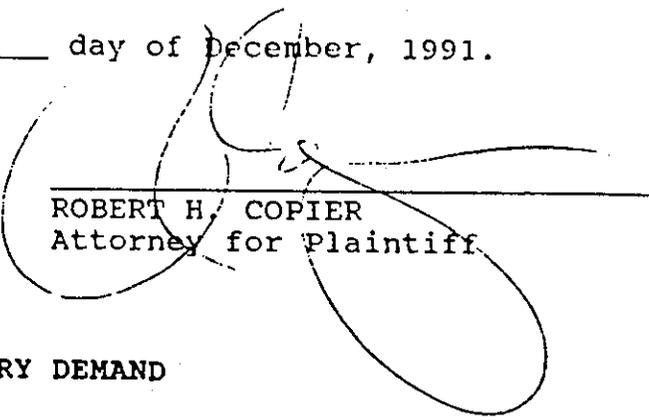
1. On Plaintiff's First and Second Claims for Relief, for all damages consistent with the body of the Complaint as are reasonable in the premises.

2. For damages in an amount of not less than FIVE MILLION DOLLARS (\$5,000,000.00), plus punitive damages in an

amount of not less than FIFTEEN MILLION DOLLARS
(\$15,000,000.00) on Plaintiff's Third Claim for Relief.

3. For costs, pre-judgment interest, and post-judgment interest, and such other and further relief as the Court shall deem just, equitable, or proper in the premises.

DATED this 27 day of December, 1991.

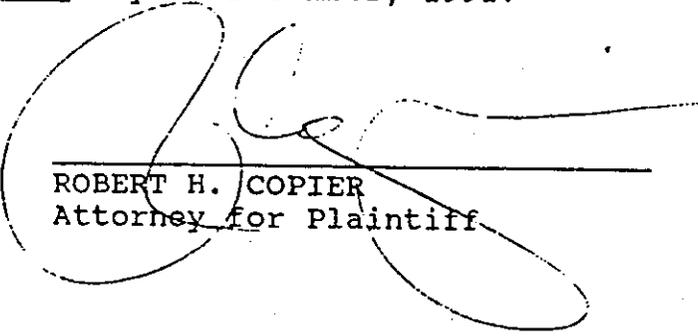


ROBERT H. COPIER
Attorney for Plaintiff

JURY DEMAND

Plaintiff demands trial by jury.

DATED this 27 day of December, 1991.



ROBERT H. COPIER
Attorney for Plaintiff

Plaintiff's Address:
3838 West 8350 South
West Jordan, Utah 84088

wp5\cop\hanson.com

MONTH DAY YEAR 11 07 90

1 2 3 4 5 6 7
M T TH F S S

MILITARY TIME 112 3

CASE NUMBER 90-7615

PLACE WHERE ACCIDENT OCCURRED: COUNTY SALT LAKE 515 CITY OR TOWN WEST JORDAN

Accident was outside city limits
Indicate distance from city limits or nearest town _____ MILES OF _____ CITY OR TOWN

FOR AGENCY USE

D.L.D. USE ONLY

ROAD ON WHICH ACCIDENT OCCURRED: 3200 WEST
GIVE NAME OF STREET OR HIGHWAY NUMBER

2 INTERSECTION TYPE

1. AT ITS INTERSECTION WITH _____
NAME OF INTERSECTING STREET OR HIGHWAY NUMBER

2. IF NOT AT INTERSECTION _____ FEET OF 7700 SOUTH
NORTH S E W OF NEAREST INTERSECTION, STREET, HOUSE NO. LANDMARK

HUNDRETH OF A MILE OF MILE POST. BE SURE TO COMPLETE IF ROAD HAS MILE POST

STATE/LOCAL

4 1 VEHICLE YEAR MAKE MODEL BODY STYLE/TYPE CODE VEHICLE COLOR REG WEIGHT DESC OF CARGO COMMERCIAL VEHICLE (Reg 12,000 lbs or more)

1 85 FORD THU 2D 1211 BLUE X X INTERSTATE INTRASTATE

VEHICLE IDENTIFICATION NUMBER 1FABP4639FH _____ DISPOSITION OF VEHICLE TOWED TO TUNYS DIR OF TRAVEL STOPPED

INSURANCE APPEARS VALID LICENSE PLATE INFO. YEAR MONTH STATE NUMBER PARTS DAMAGED COST OF REPAIR

YES NO 910 11 UT _____ 67891 2300 \$3500

5 1 INSURANCE COMPANY EFFECTIVE DATE EXPIRATION DATE POLICY NUMBER

BEAR RIVER 10 02 90 10 02 91 _____

AGENCY THAT SOLD POLICY UNK ADDRESS UNK

6 X OWNER OPERATOR FIRST INITIAL LAST STREET, CITY, STATE, ZIP

DRIVER FIRST INITIAL LAST STREET, CITY, STATE, ZIP W. JORDAN UT

DRIVER'S LICENSE STATE NUMBER DATE OF BIRTH MONTH DAY YEAR AGE SEX SAFE EQUIP TYPE INJURY THROUGH WHAT AREA EJECTED?

DRIVERS EDUCATION 1-PUBLIC 2-COM'L 3-NONE 4-UNKN YEARS DRIVE EXP. LICENSE CLASS RESTRICTIONS

1 15 A 31 F 3 2 1/2 3/4 C 1 X

8 2 VEHICLE YEAR MAKE MODEL BODY STYLE/TYPE CODE VEHICLE COLOR REG WEIGHT DESC OF CARGO COMMERCIAL VEHICLE (Reg 12,000 lbs or more)

2 89 MERC SABLE 40 01 SILVER X X INTERSTATE INTRASTATE

VEHICLE IDENTIFICATION NUMBER 1MEBMS09KG _____ DISPOSITION OF VEHICLE TOWED TO ROWLEYS DIR OF TRAVEL NORTH

INSURANCE APPEARS VALID LICENSE PLATE INFO. YEAR MONTH STATE NUMBER PARTS DAMAGED COST OF REPAIR

YES NO 1 2 3 4 5 1 2300 \$3500

9 4 INSURANCE COMPANY EFFECTIVE DATE EXPIRATION DATE POLICY NUMBER

FARMERS _____

10 2 AGENCY THAT SOLD POLICY UNK ADDRESS UNK

11 2 OWNER OPERATOR FIRST INITIAL LAST STREET, CITY, STATE, ZIP W. JORDAN UT

DRIVER FIRST INITIAL LAST STREET, CITY, STATE, ZIP W. JORDAN UT

DRIVER'S LICENSE STATE NUMBER DATE OF BIRTH MONTH DAY YEAR AGE SEX SAFE EQUIP TYPE INJURY THROUGH WHAT AREA EJECTED?

DRIVERS EDUCATION 1-PUBLIC 2-COM'L 3-NONE 4-UNKN YEARS DRIVE EXP. LICENSE CLASS RESTRICTIONS

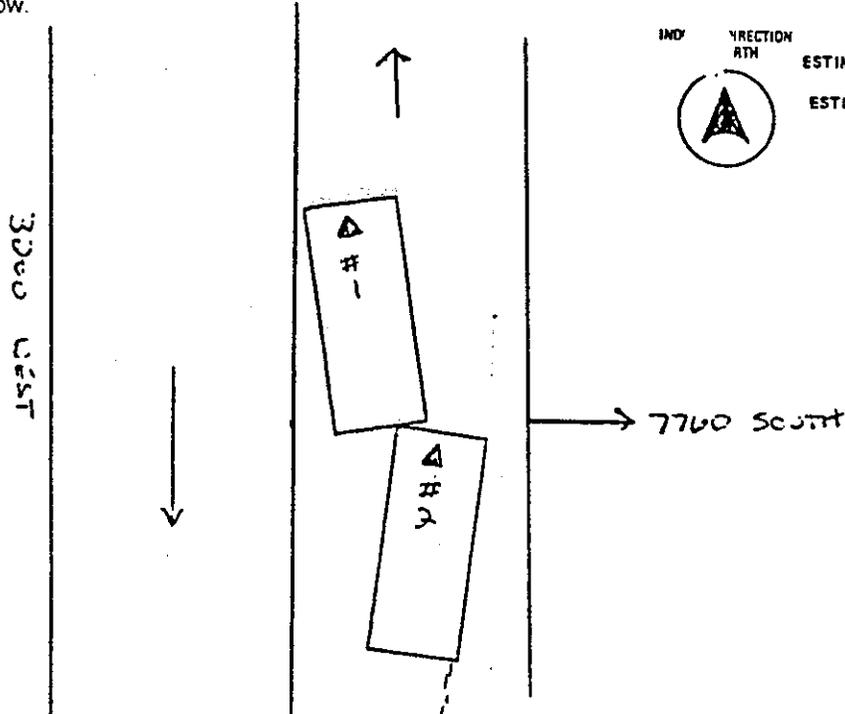
1 216 A 42 F 2 2 1/2 3 C 1 X

1. PEDESTRIAN 2. BICYCLIST DATE OF BIRTH AGE SEX INJURY TYPE CAUSE AREA

NAME X ADDRESS X

X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X

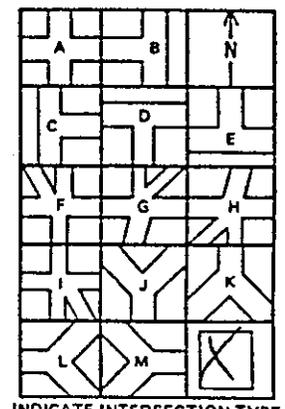
DIAGRAM WHAT HAPPENED BELOW.



IND. DIRECTION
RTM



ESTIMATED TRAVEL SPEED	010	40
ESTIMATED IMPACT SPEED	X	30
POSTED SPEED	X	35
ADVISORY SPEED	X	35



INDICATE INTERSECTION TYPE

DESCRIBE WHAT HAPPENED
(Refer to Vehicle by Number)

VEHICLE # 1 HAD COME TO A STOP AT 7760 SO AND 3300 WEST TO MAKE A LEFT TURN INTO A BUSINESS. VEHICLE # 2 NORTH BOUND ON 3300 WEST DID NOT REALIZE # 1 WAS STOPPED AND REARENDED # 1. POSSIBLE INJURIES. TEST OF BRAKE LIGHTS SHOW HOT FLASH ON BRAKE LIGHT ON # 1 VEHICLE SO BRAKES WERE ON AT TIME OF ACCIDENT.

DAMAGE TO PROPERTY OTHER THAN VEHICLES X Name object and state nature and amount of damage X ESTIMATE

Name and address of owner of object struck X

WITN Name Address Phone

FIRST AID ADMINISTERED BY

1 - Policeman	6 - Private Individual	EMS REPORT NO. 910-7413	INJURED TAKEN BY 1	TIME Arr. Call: 1233	Armed: 1235
2 - Fireman	7 - Hospital		2 - Ambulance, Private		
3 - Ambulance Personnel	8 - Helicopter Personnel		3 - Paramedics		
4 - Paramedics	9 - None Administered		4 - Private Vehicle		
5 - Doctor	0 - Unknown		5 - Other		

INJURED TAKEN TO JORDAN VALLEY HOSPITAL

POLICE ACTIVITY 1/10/79 Date Notified of Accident

(USE MILITARY TIME) 1233 Time Notified of Accident

Investigation of accident Completed at 1420 of the same day the day following

OFFICER AT SCENE

SOURCE OF INFORMATION (Officer at scene, No. 1 Driver contacted station, etc.)

PHOTO(S) TAKEN 1 1. - Yes 2. - No

NUMBER OF ROLLS 1

ARREST Name Charge IMPROPER LOOK OUT

Other action

SIGN HERE XSBV TRAFFIC WEST JORDAN DW 1/10/79

BADGE NO.	PATROL DIVISION	DEPARTMENT	SUPERVISORS APPROVAL	DATE OF REPORT
-----------	-----------------	------------	----------------------	----------------

State Law requires that report be forwarded to Dept. of Public Safety within 10 days following completion of the investigation. Mail ORIGINAL OF REPORT TO: Driver License Division Financial Responsibility Section 4501 South 2700 West • P.O. Box 30560 • Salt Lake City, Utah 84130-0560

WEST JORDAN POLICE DEPARTMENT
VOLUNTARY STATEMENT
OF MOTOR VEHICLE COLLISION

DATE Nov 7 90 TIME OF ACCIDENT 12:33

NAME [REDACTED]

ADDRESS [REDACTED] CITY West Jordan

SEX F AGE 18 TELEPHONE# [REDACTED]

LOCATION OF ACCIDENT 3200W 7760S

Describe in Detail What Happened.

I was going south on 3200w
when I saw a car stopped to turn in
to the Floral shop she was signaling
to turn left when another car came
to the left side of her & hit her on the
right back side pushing her car forward.
this hapened 3 time I heard a wine knocking
and every thing sloped

WITNESS TO SIGNATURE

N. Obe

OFFICER

READ CAREFULLY BEFORE SIGNING. I hereby certify that all statements made in this witness statement are done voluntarily and are true and I understand and agree that any false statement will be prosecuted to the full extent of the law.

SIGNATURE

CASE# 90-7615

WEST JORDAN DEPT. OF PUBLIC SAFETY

Driver Information

Date 11/7/90

Time of Accident 1233

Location 7760 So. 3200 W.

Incident-Case # 90-7615

Name of Driver _____

Address _____

Age 31

Phone _____

Insurance Co. Basin River Mutual

Agent John Henry Smith

Make of Automobile Ford

Type T-Bird

Year 85

Owner _____

Address _____

Driver's License _____

Vehicle Reg. Plate No. _____

Your Car Sent to Dave's Body Shop

Police Officer Making Report OLSON

Location of accident 7760 So 3200 W

Describe in detail what happened.

Going north on 3200 West stopped in front of Corolla Floral shop making a left hand turn into W. J Deli's. I saw this car rapidly coming up behind me. I honked the horn to try to get the attention of the driver. I put my foot hard on the brakes and held on tight while I was rear-ended. I got two hits

WITNESS TO SIGNATURE

[Signature]

OFFICER

READ CAREFULLY BEFORE SIGNING. I hereby certify that all statements made in this witness statement are done voluntarily and are true and I understand and agree that any false statement will be prosecuted to the full extent of the law.

[Redacted Signature]



866

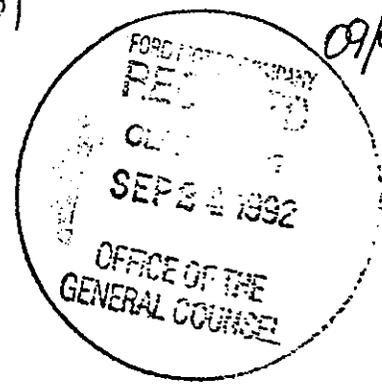
92-4103

89
011

51301

09/01/92(?)

77000



080R0003

MORS II Basic Information

09/21/1992 17:59:02

File Type: legal CONTACT NBR: _____
 VIN: KNJBTO6K6K6 _____
 LAST NAME: _____ First Name: _____ ZIP/PC: _____
 Title: _____ MI: _____
 Address: _____
 City: 1010 ST/PU: mo
 Home Phone: _____ Business Phone: _____ Ext: _____
 Year: 89 Model: FESTIVA
 Mileage/Km: 15000
 Dealer Name: bitterroot motors SALES CODE: _____
 Causal Code: 1b Symptoms: _____
 Inquiry Code: _____
 Serv Sales: 1 (1 or 2)
 Ack Code: _____
 Comm Type: _____ Micro Nbr: _____

1957 file

customer says that her daughter was involved in an accident, in which the vehicle was totalled, her daughter was injured in the accident and her concern is due to the fact that the driver's side seatbelt did not engage properly. customer seeks further contact regarding this matter.

F1=HELP F3=EXIT F5=ADD F8=RECALL F9=ESP F10=OASIS F11=WARRANTY F12=DEALER
LP1M5061

NH
9/25

CHAPEKIS, CHAPEKIS & PEARSON, P.C.

ATTORNEYS AT LAW

P.O. BOX 499

808 LUDINGTON STREET

ESCANABA, MICHIGAN 49829-0499

NICHOLAS P. CHAPEKIS*
JAMES P. CHAPEKIS
GLENN A. PEARSON

TELEPHONE (906) 786-2277

JAMES J. VIAU

May 29, 1992

RECEIVED

JUN 01 1992

A. S. U., INC.
NIARA MI

*MEMBER:

MICHIGAN AND FLORIDA BAR

Attn: Bob Hamlin
Adjusting Services Unlimited, Inc.
P.O. Box 396
Escanaba, MI 49829

RE: Claimant: [REDACTED]
Claim No.: [REDACTED]
Insured: Ford Motor Company

Dear Bob,

Enclosed please find the medical reports I have concerning the injuries sustained by our client [REDACTED] Profit when the Ford Motor Company seatbelt did not hold her securely in place behind the airbag in her Taurus motor vehicle. As you can see, she has continuing lower back pain and cervical pain as well as bilateral knee pain, wrist pain, and foreign body glass in her hands and fingers. In addition, her left index finger is numb from the first phalange to the end because of suspected nerve damage in that area.

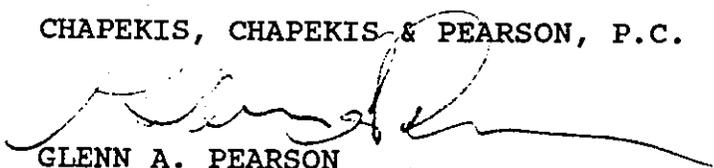
I have enclosed a copy of the actual radiological report concerning Dr. Anderson's inquiry of April 15, 1992, and it shows a C2-C3 subluxation and a C1 and occipital bone fusion. There apparently is not trauma indication as the cause of the fusion, however.

In reviewing this matter with my client and discussing with her the continuing discomfort she experiences, we are making a demand in this file at this time of \$20,000.00 for consideration by the carrier for Ford Motor Company. This considers all of the aspects of this matter and of course the long-term pain and permanency of our clients injuries.

I would appreciate an early response to this matter so we will know where this is headed as soon as possible. Thank you.

Sincerely yours,

CHAPEKIS, CHAPEKIS & PEARSON, P.C.


GLENN A. PEARSON
Attorney at Law

GAP:tlh
Enclosures

State of Michigan TRAFFIC CRASH REPORT

ORI: MI 2112100

DEPT. NAME: Delta County Sheriff

DATE MON DAY YEAR grid

TIME MILITARY grid

NO. OF VEHIC. grid

HOW HEAD ON, HEAD ON-LEFT, ANGLE, REAR END, etc.

SPECIAL CIRCUMSTANCES DEER INVOLVED, SCHOOL BUS INVOLVED, etc.

TOTAL LANES grid

FATAL (send FARS information), CORRECT COPY, NON-TRAFFIC EXCEPT SNOWMOBILE

WEATHER CLEAR, CLOUDY, FOG/SMOKE, RAIN, SNOW/BLOWING SNOW, SEVERE WIND, SLEET/HAIL, OTHER/UNKNOWN

LIGHT DAYLIGHT, DAWN, DUSK, DARK-LIGHTED, DARK-UNLIGHTED, OTHER/UNKNOWN

ROAD CONDITION DRY, WET, ICY, SNOWY, MUDDY, SLUSHY, DEBRIS, OTHER

COUNTY CITY/TOWNSHIP grid

IF IN CONSTRUCTION ZONE CONST., MAINT., UTILITY, LANE CLOSED, OFF-ROAD, OTHER

LOCATION ON NAME: US-2 & 41, NEAREST INTERSECTION: County Road C-53

RELATION TO ROADWAY ON ROAD, MEDIAN, SHOULDER, OUTSIDE OF SHOULDER/CURB, GORE, UNKNOWN

AREA SPEED LIMIT grid, POSTED YES/NO

DRIVER OF VEHICLE 1-9

DRIVER OF VEHICLE 2, 4, 6, 8, NO TRUCK/BUS

LICENSE NUMBER P, STATE Mi

LICENSE NUMBER V, STATE Mi

FIRST NAME, MIDDLE, LAST

FIRST NAME, MIDDLE, LAST

STREET, CITY: Bark River, ST: Mi, ZIP:

STREET, CITY: Escanaba, ST: Mi, ZIP:

D.O.B., SEX, LIC. TYPE, C.D.L. TYPE, AMBULANCE/HOSPITAL, POS., REST., AIRBAG

D.O.B., SEX, LIC. TYPE, C.D.L. TYPE, AMBULANCE/HOSPITAL, POS., REST., AIRBAG

EJECT, INJURY, CITATION, C.D.L. EXEMPT., MED. CARD

EJECT, INJURY, CITATION, C.D.L. EXEMPT., MED. CARD

VEHICLE DIRECTION, C.D.L. RESTRICTIONS

VEHICLE DIRECTION, C.D.L. RESTRICTIONS

ALCOHOL HBD, DRUGS SUSPECTED, P R O. B E S U L T S, HAZARD. ACTION, ACTION PRIOR TO CRASH

ALCOHOL HBD, DRUGS SUSPECTED, P R O. B E S U L T S, HAZARD. ACTION, ACTION PRIOR TO CRASH

INS. CO.: Transamerica (Bark River)

INS. CO.: Allstate

UD-10 FORM NUMBER grid

INVESTIGATOR'S NAME(S) gierke

111397

COMPLAINT # 38047

VEHICLE NO. 1FACPS2U3LG [REDACTED]

VIN 1FACPS2U3LG [REDACTED]

Plate No. [REDACTED] Year 90 Make Ford

(Color) Blue Traveling on US-2

Speed 25 MPH Towed To/By Edwards/Gene

VEHICLE NO. 1FMCU14T5G [REDACTED]

VIN 1FMCU14T5G [REDACTED]

Plate No. [REDACTED] Year 86 Make Ford

(Color) Black Traveling on US-2

Est. Speed 35 MPH Towed To/By Edwards/Gene

UNINJURED PASSENGERS

1	Name	Phone
Age	Address	Pos. Rest.
2	Name	Phone
Age	Address	Pos. Rest.
3	Name	Phone
Age	Address	Pos. Rest.

UNINJURED PASSENGERS

1	Name	Phone
Age	Address	Pos. Rest.
2	Name	Phone
Age	Address	Pos. Rest.
3	Name	Phone
Age	Address	Pos. Rest.

ADDRESS OF INJURED PASSENGERS

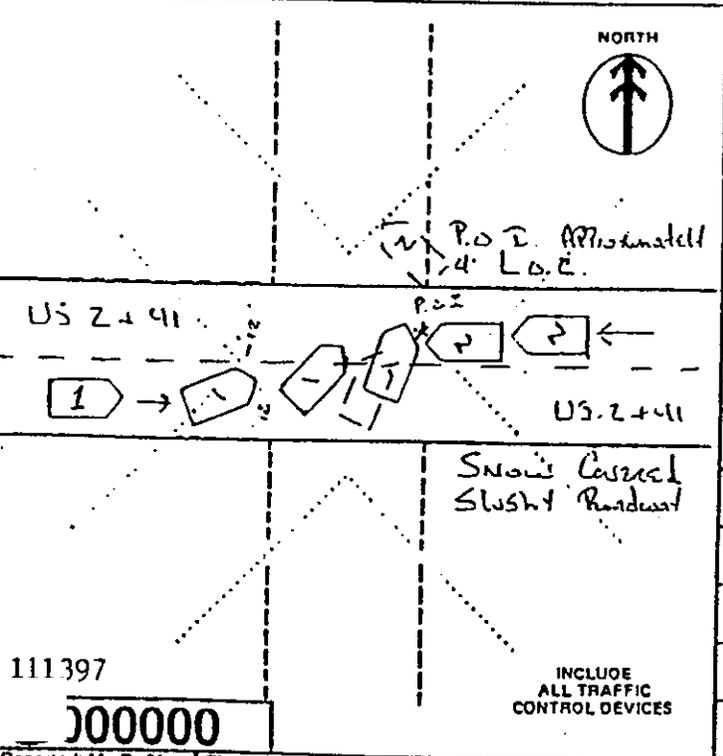
A	Position	3	Address	[REDACTED]	Esc. MI.	[REDACTED]
B	Position	4	Address	[REDACTED]	Esc. Mi.	[REDACTED]
C	Position	6	Address	[REDACTED]	[REDACTED], Mi.	[REDACTED]
D	Position		Address			

WITNESS

Name	Address	Phone
[REDACTED]	[REDACTED]	Escanaba, MI.

ARREST

Name	Charge	Ct. File No.	Ct. Date



CRASH DESCRIPTION AND REMARKS

Driver # 2 was West bound on US-2 & 41 at approximately 35 mph. Driver # 2 stated he observed an oncoming car lose control, slide across the centerline, Driver # 2 stated he could not avoid the accident.

The two vehicles impacted left of center of the East bound lane.

No statement from Driver # 1

Drug Explanation n/a

Officer In Charge gierke Badge No. 110

Reported: Mo/Da/Yr 3-9-92 Time 7:40 A.M. P.M. Investigator gierke Badge No. 110 Damaged Property Other Than Vehicle none Precinct/Area

Photos by 110 Comp. Disposition Open Closed Reviewer Person Advised of Damaged Traffic Control Device Owner Address

Name: Date: Time:

VEHICLE NO.

1 2 3 4 5 6 7 8 9

MOST HARMFUL/SEQUENCE OF EVENTS

VEHICLE

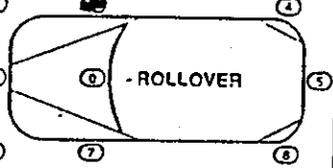
VEHICLE

VEHICLE NO.

2 4 6 8

REGISTRATION/STATE

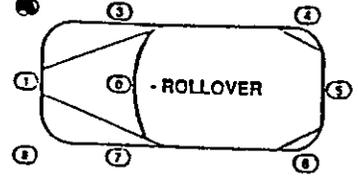
GREATEST DAMAGE



Grid for recording damage to vehicle components (1st-4th most harmful) for two vehicles.

REGISTRATION/STATE

GREATEST DAMAGE



INJURED PASSENGERS ONLY

Form for Passenger A: Passenger of vehicle, position, rest, airbag, eject, first name, middle, last, D.O.B., sex, injury, ambulance/hospital.

- ③ UNDERCARRIAGE
⑩ MULTIPLE
⑪ UNKNOWN/OTHER

EXTENT OF VEH. DAMAGE

EXTENT OF VEH. DAMAGE

DRIVEABLE (YES/NO), TOTAL OCCUP., VEHICLE TYPE (PA, VA, PU, ST, MD, CY, MO, GC, SM, OR, AA, AH, AN, AP, AT, AX, AY, AZ, AL, EB, 8H, 8N, 8P, BX, CH, CP, CX, CO).

Form for Passenger B: Passenger of vehicle, position, rest, airbag, eject, first name, middle, last, D.O.B., sex, injury, ambulance/hospital.

DRIVEABLE (YES/NO), TOTAL OCCUP., VEHICLE TYPE (PA, VA, PU, ST, MD, CY, MO, GC, SM, OO).

Form for Passenger C: Passenger of vehicle, position, rest, airbag, eject, first name, middle, last, D.O.B., sex, injury, ambulance/hospital.

- VEHICLE USE: PRIVATE, COMMERCIAL, PURSUIT/EMERGENCY, FARM, SCHOOL/EDUCATION, CLUB/CHURCH/(Y PLATE), MILITARY, OTHER GOVERNMENT, UTILITY (GAS, CABLE, PHONE), OTHER.

- VEHICLE USE: PRIVATE, COMMERCIAL, PURSUIT/EMERGENCY, FARM, SCHOOL/EDUCATION, CLUB/CHURCH/(Y PLATE), MILITARY, OTHER GOVERNMENT, UTILITY (GAS, CABLE, PHONE), OTHER.

Form for Passenger D: Passenger of vehicle, position, rest, airbag, eject, first name, middle, last, D.O.B., sex, injury, ambulance/hospital.

- SPECIAL VEHICLES: POLICE, FIRE, BUS, AMBULANCE, FARM EQUIP., CONST. EQUIP.
- VEHICLE DEFECT: BRAKES, LIGHTS/REFLECTORS, STEERING, TIRES/WHEELS, WINDOWS, OTHER.

- SPECIAL VEHICLES: POLICE, FIRE, BUS, AMBULANCE, FARM EQUIP., CONST. EQUIP.
- VEHICLE DEFECT: BRAKES, LIGHTS/REFLECTORS, STEERING, TIRES/WHEELS, WINDOWS, OTHER.

TRUCK/BUS INFORMATION

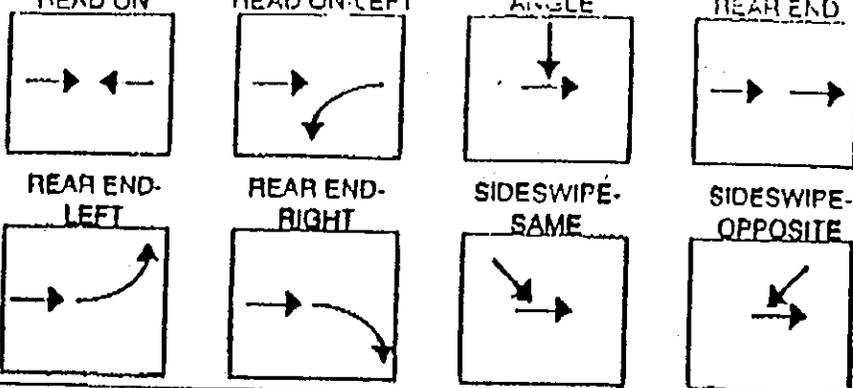
Form for truck/bus info: CARRIER NAME, STREET, CITY, ST, ZIP, SOURCE OF NAME, TYPE AND AXLES PER UNIT, HAZARD MATERIAL, TYPE, CLASS, INTERSTATE/INTRA, CARGO BODY TYPE, MPSC, DOT, ICC, GVWR.

- NON-COMMERCIAL TRAILER CONFIG: UTILITY, TRAVEL TRAILER, BOAT TRAILER, FARM EQUIP., TOWED AUTO, RECREATIONAL DOUBLE, OTHER.

- NON-COMMERCIAL TRAILER CONFIG: UTILITY, TRAVEL TRAILER, BOAT TRAILER, FARM EQUIP., TOWED AUTO, RECREATIONAL DOUBLE, OTHER.

FORWARD ORIGINAL TO: MICHIGAN DEPT. OF STATE POLICE, CRIMINAL JUSTICE DATA CENTER, 7150 HARRIS DRIVE, LANSING MI 48913

**H
O
W**



MOST HAZARDOUS SEQUENCE OF EVENTS

- NON-COLLISION**
- 01 OVERTURN
 - 02 FIRE/EXPLOSION
 - 03 IMMERSION
 - 04 JACKKNIFE
 - 05 RAN OFF ROAD
 - 06 DOWNHILL RUNAWAY
 - 07 CARGO LOSS/SHIFT
 - 08 SEPARATION OF UNITS
 - 09 OTHER NONCOLLISION
- COLLISION WITH OBJECT NOT FIXED**
- 10 PEDESTRIAN
 - 11 PEDALCYCLE
 - 12 RAILWAY TRAIN
 - 13 ANIMAL
 - 14 MOTOR VEHICLE IN TRANSPORT
 - 15 PARKED MOTOR VEHICLE
 - 16 OTHER OBJECT NOT FIXED
- COLLISION WITH FIXED OBJECT**
- 17 FIRE HYDRANT
 - 18 IMPACT ATTENUATOR
 - 19 BRIDGE/PIER/ABUTMENT
 - 20 BRIDGE PARAPET END
 - 21 BRIDGE RAIL
 - 22 GUARDRAIL FACE
 - 23 GUARDRAIL END
 - 24 MEDIAN BARRIER
 - 25 HIGHWAY TRAFF. SIGN POST
 - 26 LUMINAIR/LIGHT SUPPORT
 - 27 UTILITY POLE
 - 28 OTHER POLE
 - 29 CULVERT
 - 30 CURB
 - 31 DITCH
 - 32 EMBANKMENT
 - 33 FENCE
 - 34 MAILBOX
 - 35 TREE
 - 36 HIGHWAY/RAIL SIGNAL
 - 37 BUILDING
 - 38 TRAFFIC ISLAND
 - 39 OTHER FIXED OBJECT

AREA

FREEWAY INTERCHANGE (including ramps/access roads)

- 01 TRANSITION AREA (increase or decrease in travel lanes)
- 02 ON OR RELATED RAMP
- 03 ON OR RELATED MEDIAN CROSSING
- 04 OTHER

INTERSECTION (within 150 ft. or related)

- 05 WITHIN INTERSECTION
- 06 DRIVEWAY RELATED
- 07 OTHER

OTHER AREA

- 08 WITHIN REST AREA
- 09 WITHIN SCALE AREA (weigh station)
- 10 SCHOOL DRIVEWAY RELATED
- 11 SHOPPING CENTER DRIVEWAY RELATED
- 12 OTHER DRIVEWAY RELATED
- 13 PARKING RELATED (legal roadside)
- 14 TRANSITION AREA (increase or decrease in travel lanes)
- 15 ON OR RELATED MEDIAN CROSSING
- 16 RAIL CROSSING RELATED
- 17 NON-TRAFFIC AREA
- 18 OTHER
- 19 NOT KNOWN

CODE OF INJURY

- K- FATAL INJURY - Any injury which results in death
- A- INCAPACITATING INJURY - Any injury other than fatal which prevents normal activities and generally requires hospitalization.
- B- NON-INCAPACITATING INJURY - Any injury not incapacitating but evident to others at the scene.
- C- POSSIBLE INJURY - No visible injury but complaint of pain or momentary unconsciousness.
- O- NO INJURY - No indication of injury.

RESTRAINT USE

- 01 NO BELTS AVAILABLE
- 02 SHOULD BELT ONLY USED
- 03 LAP BELT ONLY USED
- 04 SHOULDER/LAP BOTH USED
- 05 NO BELTS USED
- 06 CHILD RESTRAINT USED
- 07 CHILD RESTRAINT NOT USED, NOT AVAILABLE, IMPROPER
- 08 RESTRAINT FAILURE
- 09 HELMET WORN
- 10 HELMET NOT WORN
- 11 RESTRAINT USE UNKNOWN

ACTION PRIOR TO CRASH

DRIVER/CYCLIST ACTION:

- 01 GO STRAIGHT AHEAD
- 02 LEFT TURN
- 03 RIGHT TURN
- 04 STOPPED ON ROADWAY
- 05 CHANGE LANES
- 06 BACKING
- 07 SLOWING, STOPPING ON ROADWAY
- 08 STARTING UP ON ROADWAY
- 09 ENTERING PARKING
- 10 LEAVING PARKING
- 11 ENTERING ROADWAY
- 12 LEAVING ROADWAY
- 13 MAKING U-TURN
- 14 OVERTAKING OR PASSING
- 15 AVOID OBJECT
- 16 AVOID PEDESTRIAN
- 17 LOST LOAD FROM VEHICLE
- 18 AVOID VEHICLE (FRONT/BACK)
- 19 AVOID VEHICLE (ANGLE)
- 20 DRIVERLESS MOVING
- 21 DRIVERLESS PARKED
- 22 OTHER

PEDESTRIAN ACTION:

- 23 CROSSING AT INTERSECT.
- 24 CROSSING NOT AT INTERSECT.
- 25 GETTING ON/OFF VEHICLE
- 26 IN ROADWAY WITH TRAFF.
- 27 IN ROADWAY AGAINST TRAFF.
- 28 STANDING/LYING IN ROADWAY
- 29 PUSHING/WORKING ON VEHICLE
- 30 OTHER WORKING IN ROADWAY
- 31 PLAYING IN ROADWAY
- 32 IN ROADWAY OTHER REASON
- 33 NOT IN ROADWAY
- 34 OTHER

HAZARDOUS ACTION

- 01 NONE
- 02 SPEED TOO FAST
- 03 SPEED TOO SLOW
- 04 FAILED TO YIELD
- 05 DISREGARD TRAFF. CONTROL
- 06 DROVE WRONG WAY
- 07 DROVE LEFT OF CENTER
- 08 IMPROPER PASSING
- 09 IMPROPER LANE USE
- 10 IMPROPER TURN
- 11 IMPROPER/NO SIGNAL
- 12 IMPROPER BACKING
- 13 UNABLE TO STOP IN ASSURED CLEAR DISTANCE
- 14 OTHER
- 15 UNKNOWN

AIRBAG

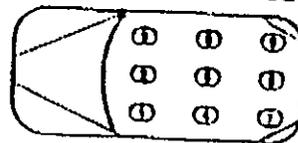
- 1 AIR BAG DEPLOYED
- 2 AIR BAG NOT DEPLOYED
- 3 AIR BAG NOT AVAILABLE

CARGO BODY TYPE

- 01 VAN/ENCLOSED BOX
- 02 CARGO TANK
- 03 FLATBED/PLATFORM
- 04 DUMP
- 05 CONCRETE MIXER
- 06 AUTO TRANSPORT
- 07 GARBAGE/REFUSE
- 08 OTHER/UNKNOWN

POSITION

- B- BICYCLE
- P- PEDESTRIAN
- E- RAILROAD ENGINEER
- 1-9 VEHICLE INTERIOR
- SEE REPRESENTATION BELOW



- 10 SLEEPER SECTION
- 11 OTHER ENCLOSED PASSENGER/CARGO AREA
- 12 OTHER UNENCLOSED PASSENGER/CARGO AREA
- 13 TRAILING UNIT
- 14 RIDING ON VEHICLE EXTERIOR
- 15 UNKNOWN

MOTORCYCLES/IN-LINE SEATING

- 01 MOTORCYCLE DRIVER
- 04 MOTORCYCLE PASSENGER 1
- 07 MOTORCYCLE PASSENGER 2

COMMERCIAL VEHICLE TYPES
(No C.D.L. or endorsement required)

CY CYCLE
MO MOPED
PA PASSENGER CAR & STATION WAGON
VAN, MOTOR HOME
CART

SM SNOWMOBILE
PU PICKUP
ST SMALL TRUCK (UNDER 10,000 LBS.)
MD MEDIUM TRUCK W/WO TRAILER OVER 10,000 LBS. GVWR (NON CDL)
OR OFFROAD VEHICLE (ATV TYPE)
OO OTHER

COMMERCIAL MOTOR VEHICLE & COMMERCIAL DRIVER LICENSE ENDORSEMENT

Group "A" is any vehicle which is towing a vehicle or trailer that has a gross vehicle weight rating (GVWR) over 10,000 lbs.:



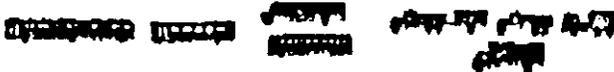
Two position codes:

- AA = Group A vehicle
- AH = Group A vehicle, Hazardous
- AN = Group A vehicle, Tank
- AP = Group A vehicle, Passenger
- AT = Group A vehicle, Double/Triple
- AX = Group A vehicle, Tank & Hazardous
- AY = Group A vehicle, Tank & Double/Triple
- AZ = Group A vehicle, Hazardous, Double/Triple
- AL = Group A vehicle, Hazardous Tank, Double/Triple

C.D.L. Endorsement Required:

- A
- AH
- AN
- AP
- AT
- AX
- ANT
- AHT
- ATX

Group "B" is any single vehicle (including buses) with a GVWR of 26,001 lbs. or more. This would include a combination of vehicles with a combined GVWR over 26,000 lbs. when towing a trailer that has a GVWR of 10,000 lbs. or less:



- BB = Group B vehicle
- BH = Group B vehicle, Hazardous
- BN = Group B vehicle, Tank
- BP = Group B vehicle, Passenger
- BX = Group B vehicle, Tank & Hazardous

- B
- BH
- BN
- BP
- BX

Group "C" is any single vehicle with a GVWR of less than 26,001 pounds or a combination of vehicles having a combined GVWR under 26,001 pounds when the vehicle is required to display placards for hazardous material or designed to carry 16 passengers (including driver). Group "C" is also any school transportation vehicle:



- CH = Group C vehicle, Hazardous
- CP = Group C vehicle, Passenger
- CX = Group C vehicle, Tank & Hazardous

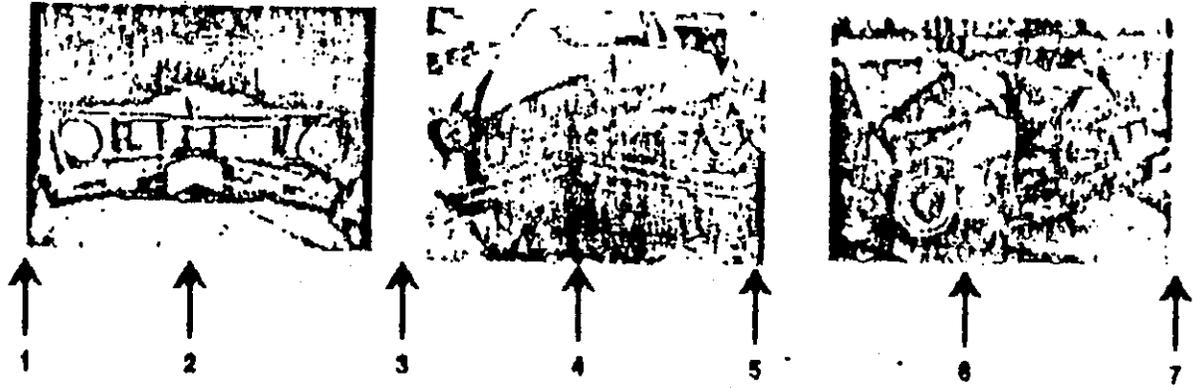
- CH
- CP
- CX

VEHICLE SEVERITY

Select the degree of severity, "1" being least severe and "7" most severe, for each vehicle.

If a vehicle sustained no damage, a "0" (zero) rating is used.

In cases in which vehicles are damaged in more than one area, consider all damage when selecting the appropriate code.



FOR UD-10 GENERAL INSTRUCTIONS CALL LT. ANDY KEENEY AT (517) 336-6195
FOR FARS INFORMATION CALL SUSAN BEECH AT (517) 334-5183
FOR CRASH STATISTICS CALL JUDY SNOW AT (517) 334-5198