



STATE OF CALIFORNIA  
DEPARTMENT OF CALIFORNIA HIGHWAY PATROL  
*An Internationally Accredited Agency*  
**REPORT OF COLLISION - NEWS RELEASE**

TYPE OF COLLISION	DATE	TIME	INVESTIGATING OFFICER			AREA			
<input type="checkbox"/> Fatal <input type="checkbox"/> Hit & Run									
<input type="checkbox"/> Injury <input type="checkbox"/> Property Damage	LOCATION					WEATHER			
PERSONS INVOLVED NAME	PARTY NO.	AGE	SEX	SAFETY EQUIP USED	CITY OF RESIDENCE	DIR. of TRAVEL	VEHICLE YEAR & MAKE	INJURY/HOSPITAL	*ARREST
<input type="checkbox"/> Driver <input type="checkbox"/> Passenger <input type="checkbox"/> Pedestrian <input type="checkbox"/> Motorcyclist <input type="checkbox"/> Bicyclist			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> N <input type="checkbox"/> W <input type="checkbox"/> E <input type="checkbox"/> S		<input type="checkbox"/> MINOR <input type="checkbox"/> MODERATE <input type="checkbox"/> MAJOR <input type="checkbox"/> FATAL	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> Driver <input type="checkbox"/> Passenger <input type="checkbox"/> Pedestrian <input type="checkbox"/> Motorcyclist <input type="checkbox"/> Bicyclist			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> N <input type="checkbox"/> W <input type="checkbox"/> E <input type="checkbox"/> S		<input type="checkbox"/> MINOR <input type="checkbox"/> MODERATE <input type="checkbox"/> MAJOR <input type="checkbox"/> FATAL	<input type="checkbox"/> YES <input type="checkbox"/> NO
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**\* Information provided on this document is in accordance with Government Code sections 6254(f) and 6254(f)(2).**

**For purposes of the CHP 288, fatal victim information is releasable through the coroner.**

SUMMARY

SUBMITTED BY:	DATE	TIME	CORONER'S OFFICE CASE NUMBER
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