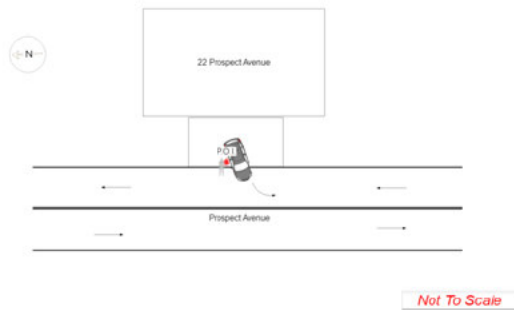


|      |                                |  |                                                    |  |                                                 |  |                                                                                                                                                                                                               |  |                                         |  |                                               |  |                                                                                                                                                                                                    |  |                                                                |  |                                                                                                                                                                                                               |  |                                                         |  |                                        |  |                                                                                                                                                                                                    |  |                                               |  |      |  |                                                                       |  |                                                                     |
|------|--------------------------------|--|----------------------------------------------------|--|-------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------|--|-----------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------|--|----------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------|--|------|--|-----------------------------------------------------------------------|--|---------------------------------------------------------------------|
| 96   | <input type="checkbox"/> Fatal |  | New Jersey Police Crash Investigation Report       |  |                                                 |  |                                                                                                                                                                                                               |  |                                         |  |                                               |  | <input checked="" type="checkbox"/> Reportable                                                                                                                                                     |  | <input type="checkbox"/> Non-Reportable                        |  | <input type="checkbox"/> Change Report                                                                                                                                                                        |  | 118a                                                    |  |                                        |  |                                                                                                                                                                                                    |  |                                               |  |      |  |                                                                       |  |                                                                     |
| 05   | 1. Case Number                 |  | 2025-37262                                         |  |                                                 |  |                                                                                                                                                                                                               |  |                                         |  |                                               |  | 10. Crash Occurred On: 22 PROSPECT AVENUE                                                                                                                                                          |  | 11. Speed Limit 25                                             |  |                                                                                                                                                                                                               |  | 25                                                      |  |                                        |  |                                                                                                                                                                                                    |  |                                               |  |      |  |                                                                       |  |                                                                     |
| 97   | 2. Police Dept. of             |  | Code                                               |  | Bayonne Police Department01                     |  |                                                                                                                                                                                                               |  |                                         |  |                                               |  |                                                                                                                                                                                                    |  | Road Name                                                      |  | Dir                                                                                                                                                                                                           |  | 12. Route No.                                           |  | Suffix                                 |  | 13. Milepost                                                                                                                                                                                       |  | 118b                                          |  |      |  |                                                                       |  |                                                                     |
| 01   | 3. Station/Precinct            |  |                                                    |  | Bayonne                                         |  |                                                                                                                                                                                                               |  |                                         |  |                                               |  |                                                                                                                                                                                                    |  | <input type="checkbox"/> At Intersection with                  |  | <input type="checkbox"/> N <input type="checkbox"/> E                                                                                                                                                         |  |                                                         |  |                                        |  | 18. Speed Limit                                                                                                                                                                                    |  | -                                             |  |      |  |                                                                       |  |                                                                     |
| 98   | 01                             |  |                                                    |  |                                                 |  |                                                                                                                                                                                                               |  |                                         |  |                                               |  |                                                                                                                                                                                                    |  | <input type="checkbox"/> Feet                                  |  | <input type="checkbox"/> S <input type="checkbox"/> W                                                                                                                                                         |  |                                                         |  |                                        |  |                                                                                                                                                                                                    |  | 119a                                          |  |      |  |                                                                       |  |                                                                     |
| 99   | 07                             |  |                                                    |  |                                                 |  |                                                                                                                                                                                                               |  |                                         |  |                                               |  |                                                                                                                                                                                                    |  | <input type="checkbox"/> Miles                                 |  |                                                                                                                                                                                                               |  |                                                         |  |                                        |  |                                                                                                                                                                                                    |  | 89                                            |  |      |  |                                                                       |  |                                                                     |
| 100a | 01                             |  | 4. Date of Crash                                   |  | 5. Day of Week                                  |  | 6. Time (use 2400 hrs.)                                                                                                                                                                                       |  | 7. Municipality Code                    |  | 8. Total Killed                               |  | 9. Total Injured                                                                                                                                                                                   |  | 19. <input type="checkbox"/> To: 17. Cross Road Name/Route No. |  | <input type="checkbox"/> NB <input type="checkbox"/> EB                                                                                                                                                       |  | <input type="checkbox"/> SB <input type="checkbox"/> WB |  | 119b                                   |  |                                                                                                                                                                                                    |  |                                               |  |      |  |                                                                       |  |                                                                     |
| 100b | 04                             |  | 23. Veh. #                                         |  | 24. Policy No.                                  |  | 25. NJ Ins. Code                                                                                                                                                                                              |  | 53. Veh. #                              |  | 54. Policy No.                                |  | 55. NJ Ins. Code                                                                                                                                                                                   |  | 21. Latitude                                                   |  | 20. Route Name/Route No.                                                                                                                                                                                      |  | 22. Longitude                                           |  | 120a                                   |  |                                                                                                                                                                                                    |  |                                               |  |      |  |                                                                       |  |                                                                     |
| 101  | 02                             |  | 01                                                 |  | N/A                                             |  | UNK                                                                                                                                                                                                           |  | P1                                      |  |                                               |  |                                                                                                                                                                                                    |  | 40.660386                                                      |  |                                                                                                                                                                                                               |  | -74.116361                                              |  | 01                                     |  |                                                                                                                                                                                                    |  |                                               |  |      |  |                                                                       |  |                                                                     |
| 102  | 01                             |  | 26. Driver's First Name                            |  | Initial                                         |  | Last Name                                                                                                                                                                                                     |  | 29. Sex                                 |  | 56. Driver's First Name                       |  | Initial                                                                                                                                                                                            |  | Last Name                                                      |  | 59. Sex                                                                                                                                                                                                       |  |                                                         |  | 120b                                   |  |                                                                                                                                                                                                    |  |                                               |  |      |  |                                                                       |  |                                                                     |
| 103  | 01                             |  | Yesenia                                            |  |                                                 |  | Paneto                                                                                                                                                                                                        |  | F                                       |  | Angelic                                       |  |                                                                                                                                                                                                    |  | De Los Angeles                                                 |  | F                                                                                                                                                                                                             |  |                                                         |  | -                                      |  |                                                                                                                                                                                                    |  |                                               |  |      |  |                                                                       |  |                                                                     |
| 104  | 1                              |  | 27. Number & Street                                |  |                                                 |  | 14 Prospect Ave                                                                                                                                                                                               |  |                                         |  | 57. Number & Street                           |  |                                                                                                                                                                                                    |  | 417 North Humbertan Street #B                                  |  |                                                                                                                                                                                                               |  |                                                         |  | 121a                                   |  |                                                                                                                                                                                                    |  |                                               |  |      |  |                                                                       |  |                                                                     |
|      |                                |  | 28. City                                           |  | State                                           |  | Zip                                                                                                                                                                                                           |  |                                         |  | 58. City                                      |  | State                                                                                                                                                                                              |  | Zip                                                            |  |                                                                                                                                                                                                               |  |                                                         |  | 121b                                   |  |                                                                                                                                                                                                    |  |                                               |  |      |  |                                                                       |  |                                                                     |
|      |                                |  | Bayonne                                            |  | NJ                                              |  | 07002                                                                                                                                                                                                         |  |                                         |  | Fayetteville                                  |  | NC                                                                                                                                                                                                 |  | 28314                                                          |  |                                                                                                                                                                                                               |  |                                                         |  | -                                      |  |                                                                                                                                                                                                    |  |                                               |  |      |  |                                                                       |  |                                                                     |
|      |                                |  | 30. Eyes                                           |  | DL Class                                        |  | Restrictions                                                                                                                                                                                                  |  | Endorsements                            |  | 31. State                                     |  | 60. Eyes                                                                                                                                                                                           |  | DL Class                                                       |  | Restrictions                                                                                                                                                                                                  |  | Endorsements                                            |  | 122                                    |  |                                                                                                                                                                                                    |  |                                               |  |      |  |                                                                       |  |                                                                     |
|      |                                |  | 02                                                 |  | D                                               |  | 1                                                                                                                                                                                                             |  |                                         |  | NJ                                            |  |                                                                                                                                                                                                    |  |                                                                |  |                                                                                                                                                                                                               |  |                                                         |  | 13                                     |  |                                                                                                                                                                                                    |  |                                               |  |      |  |                                                                       |  |                                                                     |
| 105  | 13                             |  | 32. Driver's License Number                        |  | 33. DOB                                         |  | 34. Expires                                                                                                                                                                                                   |  | 62. Driver's License Number             |  | 63. DOB                                       |  | 64. Expires                                                                                                                                                                                        |  |                                                                |  |                                                                                                                                                                                                               |  |                                                         |  | 123                                    |  |                                                                                                                                                                                                    |  |                                               |  |      |  |                                                                       |  |                                                                     |
|      |                                |  |                                                    |  | 0/1987                                          |  | 2025                                                                                                                                                                                                          |  |                                         |  |                                               |  | 1990                                                                                                                                                                                               |  |                                                                |  |                                                                                                                                                                                                               |  |                                                         |  | 46                                     |  |                                                                                                                                                                                                    |  |                                               |  |      |  |                                                                       |  |                                                                     |
| 106  | -                              |  | 35. Owner's First Name                             |  | Initial                                         |  | Last Name                                                                                                                                                                                                     |  | 65. Owner's First Name                  |  | Initial                                       |  | Last Name                                                                                                                                                                                          |  |                                                                |  |                                                                                                                                                                                                               |  |                                                         |  | 124                                    |  |                                                                                                                                                                                                    |  |                                               |  |      |  |                                                                       |  |                                                                     |
|      |                                |  | <input checked="" type="checkbox"/> Same as Driver |  | Yesenia                                         |  | Paneto                                                                                                                                                                                                        |  | <input type="checkbox"/> Same as Driver |  |                                               |  |                                                                                                                                                                                                    |  |                                                                |  |                                                                                                                                                                                                               |  |                                                         |  | 11                                     |  |                                                                                                                                                                                                    |  |                                               |  |      |  |                                                                       |  |                                                                     |
| 107  | -                              |  | 36. Number & Street                                |  |                                                 |  | 14 Prospect Ave                                                                                                                                                                                               |  |                                         |  | 66. Number & Street                           |  |                                                                                                                                                                                                    |  |                                                                |  |                                                                                                                                                                                                               |  |                                                         |  | 125                                    |  |                                                                                                                                                                                                    |  |                                               |  |      |  |                                                                       |  |                                                                     |
| 108  | 04                             |  | 37. City                                           |  | State                                           |  | Zip                                                                                                                                                                                                           |  | 67. City                                |  | State                                         |  | Zip                                                                                                                                                                                                |  |                                                                |  |                                                                                                                                                                                                               |  |                                                         |  | 126a                                   |  |                                                                                                                                                                                                    |  |                                               |  |      |  |                                                                       |  |                                                                     |
|      |                                |  | Bayonne                                            |  | NJ                                              |  | 07002                                                                                                                                                                                                         |  |                                         |  |                                               |  |                                                                                                                                                                                                    |  |                                                                |  |                                                                                                                                                                                                               |  |                                                         |  | 22                                     |  |                                                                                                                                                                                                    |  |                                               |  |      |  |                                                                       |  |                                                                     |
| 109  | -                              |  | 38. Make                                           |  | 39. Model                                       |  | 40. Color                                                                                                                                                                                                     |  | 41. Year                                |  | 42. Plate No.                                 |  | 43. State                                                                                                                                                                                          |  | 68. Make                                                       |  | 69. Model                                                                                                                                                                                                     |  | 70. Color                                               |  | 71. Year                               |  | 72. Plate No.                                                                                                                                                                                      |  | 73. State                                     |  | 126b |  |                                                                       |  |                                                                     |
|      |                                |  | KIA                                                |  | Sportage                                        |  | BK                                                                                                                                                                                                            |  | 2021                                    |  | A35VGC                                        |  | NJ                                                                                                                                                                                                 |  |                                                                |  |                                                                                                                                                                                                               |  |                                                         |  |                                        |  |                                                                                                                                                                                                    |  |                                               |  | 26   |  |                                                                       |  |                                                                     |
| 110  | 01                             |  | 44. VIN                                            |  | 45. Expires                                     |  | KNDPNCAC1M7858357                                                                                                                                                                                             |  | 12/30/2025                              |  | 74. VIN                                       |  | 75. Expires                                                                                                                                                                                        |  |                                                                |  |                                                                                                                                                                                                               |  |                                                         |  |                                        |  |                                                                                                                                                                                                    |  |                                               |  | 126c |  |                                                                       |  |                                                                     |
| 111  | -                              |  | 46. Vehicle Removed to:                            |  |                                                 |  |                                                                                                                                                                                                               |  | 76. Vehicle Removed to:                 |  |                                               |  |                                                                                                                                                                                                    |  |                                                                |  |                                                                                                                                                                                                               |  |                                                         |  |                                        |  |                                                                                                                                                                                                    |  |                                               |  | 126d |  |                                                                       |  |                                                                     |
| 112  | -                              |  | <input checked="" type="checkbox"/> Driven         |  | <input type="checkbox"/> Towed Disabled         |  | <input type="checkbox"/> Towed Disabled & Impounded                                                                                                                                                           |  | <input type="checkbox"/> Driven         |  | <input type="checkbox"/> Towed Disabled       |  | <input type="checkbox"/> Towed Disabled & Impounded                                                                                                                                                |  |                                                                |  |                                                                                                                                                                                                               |  |                                                         |  |                                        |  |                                                                                                                                                                                                    |  |                                               |  | 126e |  |                                                                       |  |                                                                     |
| 113  | -                              |  | <input type="checkbox"/> Left at Scene             |  | <input type="checkbox"/> Towed Impounded        |  |                                                                                                                                                                                                               |  | <input type="checkbox"/> Left at Scene  |  | <input type="checkbox"/> Towed Impounded      |  |                                                                                                                                                                                                    |  |                                                                |  |                                                                                                                                                                                                               |  |                                                         |  |                                        |  |                                                                                                                                                                                                    |  |                                               |  | 26   |  |                                                                       |  |                                                                     |
| 114  | -                              |  | 47. Authority                                      |  | <input type="checkbox"/> Owner                  |  | <input type="checkbox"/> Driver                                                                                                                                                                               |  | <input type="checkbox"/> Police         |  | 77. Authority                                 |  | <input type="checkbox"/> Owner                                                                                                                                                                     |  | <input type="checkbox"/> Driver                                |  | <input type="checkbox"/> Police                                                                                                                                                                               |  |                                                         |  |                                        |  |                                                                                                                                                                                                    |  |                                               |  | 127a |  |                                                                       |  |                                                                     |
| 115  | -                              |  | 48. Alcohol Drug Test Given:                       |  | <input checked="" type="checkbox"/> No          |  | <input type="checkbox"/> Yes                                                                                                                                                                                  |  | <input type="checkbox"/> Refused        |  | 49. Hazardous Material                        |  | <input type="checkbox"/> None                                                                                                                                                                      |  | <input type="checkbox"/> On Board                              |  | <input type="checkbox"/> Spill                                                                                                                                                                                |  | 78. Alcohol Drug Test Given:                            |  | <input checked="" type="checkbox"/> No |  | <input type="checkbox"/> Yes                                                                                                                                                                       |  | <input type="checkbox"/> Refused              |  | 127b |  |                                                                       |  |                                                                     |
|      |                                |  | Type:                                              |  | <input type="checkbox"/> Breath                 |  | <input type="checkbox"/> Blood                                                                                                                                                                                |  | <input type="checkbox"/> Urine          |  | Type:                                         |  | <input type="checkbox"/> Breath                                                                                                                                                                    |  | <input type="checkbox"/> Blood                                 |  | <input type="checkbox"/> Urine                                                                                                                                                                                |  | Type:                                                   |  | <input type="checkbox"/> Breath        |  | <input type="checkbox"/> Blood                                                                                                                                                                     |  | <input type="checkbox"/> Urine                |  | 22   |  |                                                                       |  |                                                                     |
| 116  | 03                             |  | Results:                                           |  |                                                 |  | % <input type="checkbox"/> Pending                                                                                                                                                                            |  | Hazard Class                            |  | Placard No.                                   |  | Results:                                                                                                                                                                                           |  |                                                                |  | % <input type="checkbox"/> Pending                                                                                                                                                                            |  | Hazard Class                                            |  | Placard No.                            |  |                                                                                                                                                                                                    |  |                                               |  | 127c |  |                                                                       |  |                                                                     |
| 117  | -                              |  | 50. Carrier No.                                    |  | <input type="checkbox"/> USDOT                  |  | <input type="checkbox"/> None                                                                                                                                                                                 |  | 51. GVWR/GCWR (trucks & buses only)     |  | <input type="checkbox"/> ≤ 10,000 lbs.        |  | <input type="checkbox"/> 10,001 - 26,000 lbs.                                                                                                                                                      |  | <input type="checkbox"/> ≥ 26,001 lbs.                         |  | 80. Carrier No.                                                                                                                                                                                               |  | <input type="checkbox"/> USDOT                          |  | <input type="checkbox"/> None          |  | 81. GVWR/GCWR (trucks & buses only)                                                                                                                                                                |  | <input type="checkbox"/> ≤ 10,000 lbs.        |  | 127d |  |                                                                       |  |                                                                     |
|      |                                |  | <input type="checkbox"/> MC/MX                     |  |                                                 |  |                                                                                                                                                                                                               |  | <input type="checkbox"/> ≤ 10,000 lbs.  |  | <input type="checkbox"/> 10,001 - 26,000 lbs. |  | <input type="checkbox"/> ≥ 26,001 lbs.                                                                                                                                                             |  |                                                                |  | <input type="checkbox"/> MC/MX                                                                                                                                                                                |  |                                                         |  |                                        |  | <input type="checkbox"/> ≤ 10,000 lbs.                                                                                                                                                             |  | <input type="checkbox"/> 10,001 - 26,000 lbs. |  | 127e |  |                                                                       |  |                                                                     |
|      |                                |  |                                                    |  |                                                 |  |                                                                                                                                                                                                               |  | <input type="checkbox"/> ≥ 26,001 lbs.  |  |                                               |  |                                                                                                                                                                                                    |  |                                                                |  |                                                                                                                                                                                                               |  |                                                         |  |                                        |  | <input type="checkbox"/> ≥ 26,001 lbs.                                                                                                                                                             |  |                                               |  | 26   |  |                                                                       |  |                                                                     |
|      |                                |  | 52. Motor Carrier or Government Entity             |  |                                                 |  |                                                                                                                                                                                                               |  | 82. Motor Carrier or Government Entity  |  |                                               |  |                                                                                                                                                                                                    |  |                                                                |  |                                                                                                                                                                                                               |  |                                                         |  |                                        |  |                                                                                                                                                                                                    |  |                                               |  | 128  |  |                                                                       |  |                                                                     |
|      |                                |  | Number & Street                                    |  |                                                 |  |                                                                                                                                                                                                               |  | Number & Street                         |  |                                               |  |                                                                                                                                                                                                    |  |                                                                |  |                                                                                                                                                                                                               |  |                                                         |  |                                        |  |                                                                                                                                                                                                    |  |                                               |  | 129  |  |                                                                       |  |                                                                     |
|      |                                |  | City                                               |  | State                                           |  | Zip                                                                                                                                                                                                           |  | City                                    |  | State                                         |  | Zip                                                                                                                                                                                                |  |                                                                |  |                                                                                                                                                                                                               |  |                                                         |  |                                        |  |                                                                                                                                                                                                    |  |                                               |  | 130  |  |                                                                       |  |                                                                     |
|      |                                |  | Level of                                           |  | 150 - AVAILABLE                                 |  | <input checked="" type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> Unknown |  | Level of                                |  | 152 - AVAILABLE                               |  | <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> Unknown |  | 151 - ENGAGED                                                  |  | <input checked="" type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> Unknown |  | Level of                                                |  | 153 - ENGAGED                          |  | <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> Unknown |  | 131                                           |  |      |  |                                                                       |  |                                                                     |
|      |                                |  | Autonomy                                           |  |                                                 |  |                                                                                                                                                                                                               |  | Autonomy                                |  |                                               |  |                                                                                                                                                                                                    |  |                                                                |  |                                                                                                                                                                                                               |  |                                                         |  |                                        |  |                                                                                                                                                                                                    |  |                                               |  | 132  |  |                                                                       |  |                                                                     |
|      |                                |  | 135. Damage to Other Property                      |  | <input type="checkbox"/> Yes (If Yes, describe) |  | <input checked="" type="checkbox"/> No                                                                                                                                                                        |  |                                         |  |                                               |  |                                                                                                                                                                                                    |  |                                                                |  |                                                                                                                                                                                                               |  |                                                         |  |                                        |  |                                                                                                                                                                                                    |  |                                               |  | 133  |  |                                                                       |  |                                                                     |
|      |                                |  | Oper.                                              |  | 136. Charge                                     |  |                                                                                                                                                                                                               |  | 137. Summons No.                        |  | Oper.                                         |  | 138. Charge                                                                                                                                                                                        |  |                                                                |  | 139. Summons No.                                                                                                                                                                                              |  |                                                         |  |                                        |  |                                                                                                                                                                                                    |  |                                               |  | 134  |  |                                                                       |  |                                                                     |
|      |                                |  | Oper.                                              |  | 140. Charge                                     |  |                                                                                                                                                                                                               |  | 141. Summons No.                        |  | Oper.                                         |  | 142. Charge                                                                                                                                                                                        |  |                                                                |  | 143. Summons No.                                                                                                                                                                                              |  |                                                         |  |                                        |  |                                                                                                                                                                                                    |  |                                               |  | -    |  |                                                                       |  |                                                                     |
|      |                                |  | A                                                  |  | 01                                              |  | 01                                                                                                                                                                                                            |  | 05                                      |  | 37                                            |  | F                                                                                                                                                                                                  |  | -                                                              |  | -                                                                                                                                                                                                             |  | -                                                       |  | 04                                     |  | 04                                                                                                                                                                                                 |  | 06                                            |  | -    |  | Names & Addresses of Occupants If Deceased, Date & Time of Death      |  |                                                                     |
|      |                                |  | B                                                  |  | 01                                              |  | 03                                                                                                                                                                                                            |  | 01                                      |  | 05                                            |  | 21                                                                                                                                                                                                 |  | F                                                              |  | -                                                                                                                                                                                                             |  | -                                                       |  | -                                      |  | 04                                                                                                                                                                                                 |  | 04                                            |  | 06   |  | -                                                                     |  | Yesenia Paneto<br>14 Prospect Ave Bayonne NJ 07002                  |
|      |                                |  | C                                                  |  | 01                                              |  | 09                                                                                                                                                                                                            |  | 01                                      |  | 05                                            |  | 10                                                                                                                                                                                                 |  | M                                                              |  | -                                                                                                                                                                                                             |  | -                                                       |  | -                                      |  | 04                                                                                                                                                                                                 |  | 04                                            |  | 06   |  | -                                                                     |  | Alina Paneto<br>14 Prospect Avenue Bayonne NJ 07002                 |
|      |                                |  | D                                                  |  | 01                                              |  | 07                                                                                                                                                                                                            |  | 01                                      |  | 05                                            |  | 14                                                                                                                                                                                                 |  | F                                                              |  | -                                                                                                                                                                                                             |  | -                                                       |  | -                                      |  | 04                                                                                                                                                                                                 |  | 04                                            |  | 06   |  | -                                                                     |  | Angel Rosado<br>417 North Humbertan Street #B Fayetteville NC 28314 |
|      |                                |  |                                                    |  |                                                 |  |                                                                                                                                                                                                               |  |                                         |  |                                               |  |                                                                                                                                                                                                    |  |                                                                |  |                                                                                                                                                                                                               |  |                                                         |  |                                        |  |                                                                                                                                                                                                    |  |                                               |  |      |  | Destiny Rosado<br>417 North Humbertan Street #B Fayetteville NC 28314 |  |                                                                     |

|   |    |    |    |    |    |    |    |    |    |    |    |    |    |                                                                               |
|---|----|----|----|----|----|----|----|----|----|----|----|----|----|-------------------------------------------------------------------------------|
|   | 83 | 84 | 85 | 86 | 87 | 88 | 89 | 90 | 91 | 92 | 93 | 94 | 95 | Names & Addresses of Occupants<br>If Deceased, Date & Time of Death           |
| E | P1 | -  | -  | 03 | 35 | F  | 10 | 05 | 01 | -  | -  | -  |    | Angelic De Los Angeles<br>417 North Humbertan Street #B Fayetteville NC 28314 |

144. Crash Diagram



145. Crash Description/Narrative

Ped 1 explained she was struck by Vehicle 1 after a verbal altercation.

Driver 1 of Vehicle 1 explained she got into a verbal altercation with Ped 1. Driver 1 explained Ped 1 prevented her from reversing out of the driveway by standing in front of the rear of the vehicle. At this time, Driver 1 was able to conduct a K-Turn in an attempt to leave. Adter the K-Turn was conducted, Driver 1 drove away.

I observed video footage from Beacon Christian Academy. I observed Ped 1 grab the right side back passenger door handle and run with the vehicle, causing her to fall. At no time was Ped 1 struck by the vehicle.

\*\*\*Other Descriptions\*\*\*

01 - Unable to provide - Field 25  
P1 - Grabbed passenger side door while vehicle was moving - Field 119a  
P1 - Grabbing Passenger side door while vehicle was moving - Field 123

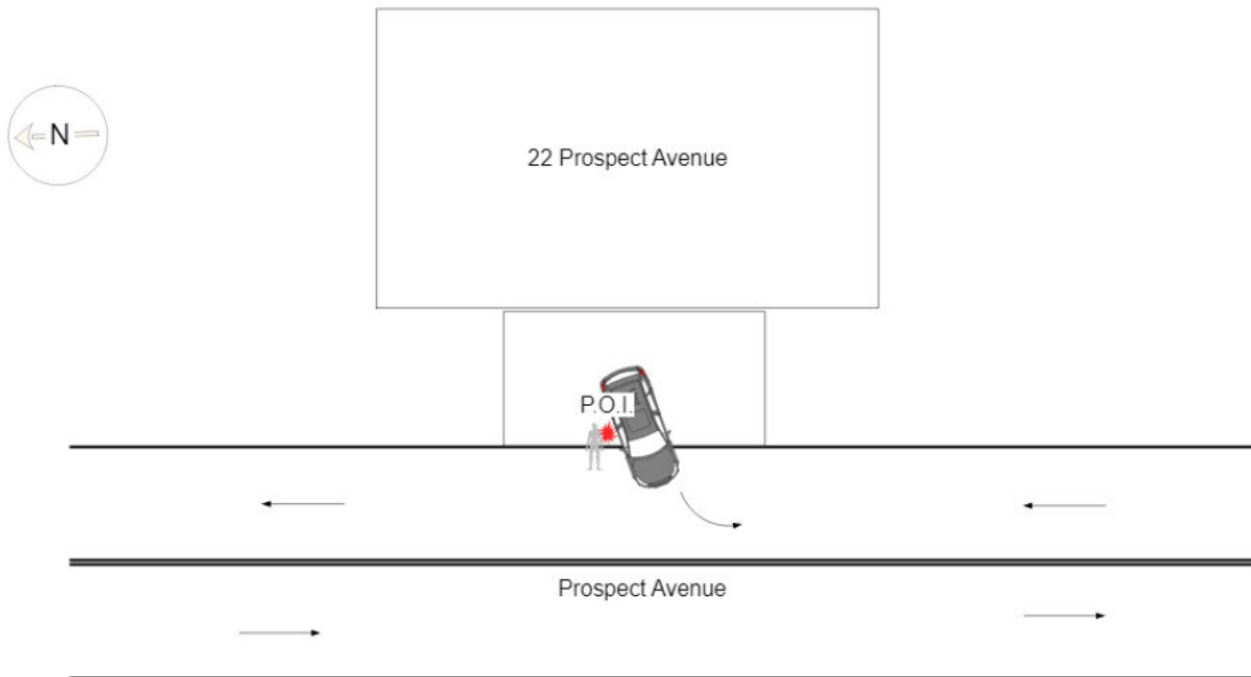
|                          |              |               |         |                                                                               |
|--------------------------|--------------|---------------|---------|-------------------------------------------------------------------------------|
| 146. Officer's Signature | 147. Badge # | 148. Reviewer | Badge # | 149. Case Status                                                              |
| BRAN, ANGELICA           | 382          | BUNIN, JEROME | 0313    | <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Complete |

**New Jersey Police Crash Investigation Report  
Motor Vehicle Crash Diagram**

Police Dept: Bayonne Police Department Code: 01

Station: Bayonne Case No: 2025-37262

144. Crash Diagram (NOT TO SCALE)



*Not To Scale*