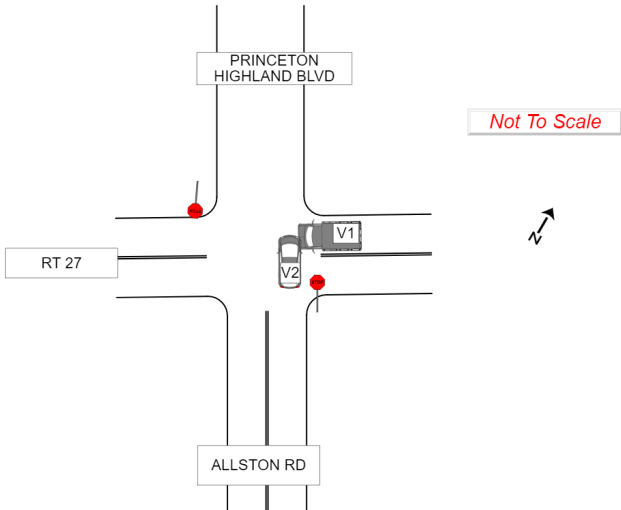


|      |                                                                     |    |                                              |    |                                                                                                                                                                                                                               |   |                                                                                                                             |    |                                                                                                                                                                                                                               |    |                                                              |    |                                                                                                                                                                                                                             |                                                                   |                                                                                                             |  |                                                                                                                                                                                                                             |  |              |  |              |  |                    |  |      |
|------|---------------------------------------------------------------------|----|----------------------------------------------|----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|-----------------------------------------------------------------------------------------------------------------------------|----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|--------------------------------------------------------------|----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------|--|--------------|--|--------------------|--|------|
| 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                                                      |    | 23051873                                     |    |                                                                                                                                                                                                                               |   |                                                                                                                             |    |                                                                                                                                                                                                                               |    |                                                              |    | 10. Crash Occurred On: NJ 27                                                                                                                                                                                                |                                                                   | S                                                                                                           |  | 11. Speed Limit 45                                                                                                                                                                                                          |  | 27           |  | 7.4          |  | 25                 |  |      |
| 97   | 2. Police Dept. of Franklin Township Police Department/Somerset Co. |    | Code 01                                      |    | Road Name                                                                                                                                                                                                                     |   |                                                                                                                             |    |                                                                                                                                                                                                                               |    |                                                              |    |                                                                                                                                                                                                                             |                                                                   | Dir                                                                                                         |  | 12. Route No.                                                                                                                                                                                                               |  | Suffix       |  | 13. Milepost |  | 18. Speed Limit 25 |  | 118b |
| 01   | 3. Station/Precinct                                                 |    | FTP                                          |    | <input checked="" type="checkbox"/> At Intersection with <input type="checkbox"/> Feet <input type="checkbox"/> Miles                                                                                                         |   |                                                                                                                             |    |                                                                                                                                                                                                                               |    |                                                              |    |                                                                                                                                                                                                                             |                                                                   | <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W |  | of: PRINCETON HIGHLANDS                                                                                                                                                                                                     |  |              |  |              |  |                    |  | 119a |
| 02   | 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: <input type="checkbox"/> From:                                                                                                                                                             |                                                                   | 17. Cross Road Name/Route No.                                                                               |  | <input type="checkbox"/> NB <input type="checkbox"/> EB <input type="checkbox"/> SB <input type="checkbox"/> WB                                                                                                             |  |              |  | 119b         |  |                    |  |      |
| 100a | 09/06/2023                                                          |    | Wednesday                                    |    | 1503                                                                                                                                                                                                                          |   | 1808                                                                                                                        |    | 0                                                                                                                                                                                                                             |    | 1                                                            |    | 21. Latitude                                                                                                                                                                                                                |                                                                   | 20. Route Name/Route No.                                                                                    |  | 22. Longitude                                                                                                                                                                                                               |  |              |  | 120a         |  |                    |  |      |
| 01   |                                                                     |    |                                              |    |                                                                                                                                                                                                                               |   |                                                                                                                             |    |                                                                                                                                                                                                                               |    |                                                              |    | 40.421348                                                                                                                                                                                                                   |                                                                   |                                                                                                             |  | -74.578366                                                                                                                                                                                                                  |  |              |  | 01           |  |                    |  |      |
| 100b | 23. Veh. #                                                          |    | 24. Policy No.                               |    | 25. NJ Ins. Code                                                                                                                                                                                                              |   | 53. Veh. #                                                                                                                  |    | 54. Policy No.                                                                                                                                                                                                                |    | 55. NJ Ins. Code                                             |    |                                                                                                                                                                                                                             |                                                                   |                                                                                                             |  |                                                                                                                                                                                                                             |  |              |  | 120b         |  |                    |  |      |
| 04   | 01                                                                  |    | S2527771                                     |    | 816                                                                                                                                                                                                                           |   | 02                                                                                                                          |    | NJAP0000051137                                                                                                                                                                                                                |    | 810                                                          |    |                                                                                                                                                                                                                             |                                                                   |                                                                                                             |  |                                                                                                                                                                                                                             |  |              |  |              |  |                    |  |      |
| 101  | 26. Driver's First Name                                             |    | Initial                                      |    | Last Name                                                                                                                                                                                                                     |   | 29. Sex                                                                                                                     |    | 56. Driver's First Name                                                                                                                                                                                                       |    | Initial                                                      |    | Last Name                                                                                                                                                                                                                   |                                                                   | 59. Sex                                                                                                     |  |                                                                                                                                                                                                                             |  |              |  | 121a         |  |                    |  |      |
| 02   | TWANDA                                                              |    | T                                            |    | YARBER                                                                                                                                                                                                                        |   | F                                                                                                                           |    | SONIA                                                                                                                                                                                                                         |    | K                                                            |    | KHAN                                                                                                                                                                                                                        |                                                                   | F                                                                                                           |  |                                                                                                                                                                                                                             |  |              |  | 01           |  |                    |  |      |
| 102  | 27. Number & Street                                                 |    | 410 NORTHUMBERLAND WAY                       |    | 12 STADELMAN CT                                                                                                                                                                                                               |   |                                                                                                                             |    |                                                                                                                                                                                                                               |    |                                                              |    |                                                                                                                                                                                                                             |                                                                   |                                                                                                             |  |                                                                                                                                                                                                                             |  |              |  | 121b         |  |                    |  |      |
| 01   | 28. City                                                            |    | NJ                                           |    | 08852                                                                                                                                                                                                                         |   | 58. City                                                                                                                    |    | NJ                                                                                                                                                                                                                            |    | 08824                                                        |    |                                                                                                                                                                                                                             |                                                                   |                                                                                                             |  |                                                                                                                                                                                                                             |  |              |  |              |  |                    |  |      |
| 104  | 2                                                                   |    | 30. Eyes                                     |    | DL Class                                                                                                                                                                                                                      |   | Restrictions                                                                                                                |    | Endorsements                                                                                                                                                                                                                  |    | 31. State                                                    |    | 60. Eyes                                                                                                                                                                                                                    |                                                                   | DL Class                                                                                                    |  | Restrictions                                                                                                                                                                                                                |  | Endorsements |  | 122          |  |                    |  |      |
|      |                                                                     |    | 02                                           |    | D                                                                                                                                                                                                                             |   |                                                                                                                             |    |                                                                                                                                                                                                                               |    | NJ                                                           |    | 02                                                                                                                                                                                                                          |                                                                   | D                                                                                                           |  | 1                                                                                                                                                                                                                           |  | NJ           |  | 01           |  |                    |  |      |
| 105  | 03                                                                  |    | 32. Driver's License Number                  |    | 33. DOB                                                                                                                                                                                                                       |   | 34. Expires                                                                                                                 |    | 62. Driver's License Number                                                                                                                                                                                                   |    | 63. DOB                                                      |    | 64. Expires                                                                                                                                                                                                                 |                                                                   |                                                                                                             |  |                                                                                                                                                                                                                             |  |              |  | 123          |  |                    |  |      |
|      |                                                                     |    | Y05437528359712                              |    | 09/25/1971                                                                                                                                                                                                                    |   | 09/25/2023                                                                                                                  |    | K31757190051062                                                                                                                                                                                                               |    | 01/31/2006                                                   |    | 09/28/2023                                                                                                                                                                                                                  |                                                                   |                                                                                                             |  |                                                                                                                                                                                                                             |  |              |  | 01           |  |                    |  |      |
| 106  | -                                                                   |    | 35. Owner's First Name                       |    | Initial                                                                                                                                                                                                                       |   | Last Name                                                                                                                   |    | 65. Owner's First Name                                                                                                                                                                                                        |    | Initial                                                      |    | Last Name                                                                                                                                                                                                                   |                                                                   |                                                                                                             |  |                                                                                                                                                                                                                             |  |              |  | 124          |  |                    |  |      |
|      |                                                                     |    | <input type="checkbox"/> Same as Driver      |    | ARC MIDDLESEX COUNTY                                                                                                                                                                                                          |   | <input type="checkbox"/> Same as Driver                                                                                     |    | UZMA                                                                                                                                                                                                                          |    | K                                                            |    | KHAN                                                                                                                                                                                                                        |                                                                   |                                                                                                             |  |                                                                                                                                                                                                                             |  |              |  | 04           |  |                    |  |      |
| 107  | -                                                                   |    | 36. Number & Street                          |    | 219 BLACK HORSE LANE STE 1                                                                                                                                                                                                    |   | 12 STADELMAN COURT                                                                                                          |    |                                                                                                                                                                                                                               |    |                                                              |    |                                                                                                                                                                                                                             |                                                                   |                                                                                                             |  |                                                                                                                                                                                                                             |  |              |  | 125          |  |                    |  |      |
| 108  | 02                                                                  |    | 37. City                                     |    | NJ                                                                                                                                                                                                                            |   | 08902                                                                                                                       |    | 67. City                                                                                                                                                                                                                      |    | NJ                                                           |    | 08824                                                                                                                                                                                                                       |                                                                   |                                                                                                             |  |                                                                                                                                                                                                                             |  |              |  | 126a         |  |                    |  |      |
| 109  | 01                                                                  |    | 38. Make                                     |    | 39. Model                                                                                                                                                                                                                     |   | 40. Color                                                                                                                   |    | 41. Year                                                                                                                                                                                                                      |    | 42. Plate No.                                                |    | 43. State                                                                                                                                                                                                                   |                                                                   | 68. Make                                                                                                    |  | 69. Model                                                                                                                                                                                                                   |  | 70. Color    |  | 126b         |  |                    |  |      |
|      |                                                                     |    | FORD                                         |    | Transit                                                                                                                                                                                                                       |   | SL                                                                                                                          |    | 2016                                                                                                                                                                                                                          |    | OP3715                                                       |    | NJ                                                                                                                                                                                                                          |                                                                   | LEXUS                                                                                                       |  | ES                                                                                                                                                                                                                          |  | GD           |  |              |  |                    |  |      |
| 110  | 02                                                                  |    | 44. VIN                                      |    | 1FBZX2ZM9GKA03972                                                                                                                                                                                                             |   | 45. Expires                                                                                                                 |    | 74. VIN                                                                                                                                                                                                                       |    | JTHBJ46G572031355                                            |    | 75. Expires                                                                                                                                                                                                                 |                                                                   |                                                                                                             |  |                                                                                                                                                                                                                             |  |              |  | 126c         |  |                    |  |      |
| 111  | 01                                                                  |    | 46. Vehicle Removed to:                      |    |                                                                                                                                                                                                                               |   | 76. Vehicle Removed to:                                                                                                     |    | Anthony Motors                                                                                                                                                                                                                |    |                                                              |    |                                                                                                                                                                                                                             |                                                                   |                                                                                                             |  |                                                                                                                                                                                                                             |  |              |  | 126d         |  |                    |  |      |
| 112  | 12                                                                  |    | <input checked="" type="checkbox"/> Driven   |    | <input type="checkbox"/> Towed Disabled                                                                                                                                                                                       |   | <input type="checkbox"/> Towed Disabled & Impounded                                                                         |    | <input type="checkbox"/> Driven                                                                                                                                                                                               |    | <input checked="" 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                                                                                                                                                                                      |    |                                                              |    |                                                                                                                                                                                                                             |                                                                   |                                                                                                             |  |                                                                                                                                                                                                                             |  |              |  | 127a         |  |                    |  |      |
| 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 checked="" type="checkbox"/> Police                                                                                                                     |    |                                                              |    |                                                                                                                                                                                                                             |                                                                   |                                                                                                             |  |                                                                                                                                                                                                                             |  |              |  | 127b         |  |                    |  |      |
| 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                                                                                                                        |                                                                   | 79. Hazardous Material                                                                                      |  | <input type="checkbox"/> None <input type="checkbox"/> On Board <input type="checkbox"/> Spill                                                                                                                              |  |              |  | 127c         |  |                    |  |      |
| 116  | 03                                                                  |    | 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                                                                                                                                 |    | Results:                                                     |    | <input type="checkbox"/> % <input type="checkbox"/> Pending                                                                                                                                                                 |                                                                   | Hazard Class                                                                                                |  | Placard No.                                                                                                                                                                                                                 |  |              |  | 127d         |  |                    |  |      |
| 117  | 04                                                                  |    | Results:                                     |    | <input type="checkbox"/> % <input type="checkbox"/> Pending                                                                                                                                                                   |   | Hazard Class                                                                                                                |    | Placard No.                                                                                                                                                                                                                   |    | 80. Carrier No.                                              |    | <input type="checkbox"/> USDOT <input type="checkbox"/> None                                                                                                                                                                |                                                                   | 81. 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.                                                                                                 |  |              |  | 127e         |  |                    |  |      |
|      |                                                                     |    | <input type="checkbox"/> MC/MX               |    | <input type="checkbox"/> None                                                                                                                                                                                                 |   | <input type="checkbox"/> ≤ 10,000 lbs. <input type="checkbox"/> 10,001 - 26,000 lbs. <input type="checkbox"/> ≥ 26,001 lbs. |    |                                                                                                                                                                                                                               |    | <input type="checkbox"/> USDOT <input type="checkbox"/> None |    | <input type="checkbox"/> ≤ 10,000 lbs. <input type="checkbox"/> 10,001 - 26,000 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 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 |    | Autonomy                                                     |    | 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 |                                                                   | Autonomy                                                                                                    |  | 153 - 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 |  |              |  | 131          |  |                    |  |      |
|      |                                                                     |    | 135. Damage to Other Property                |    | <input type="checkbox"/> Yes (If Yes, describe) <input checked="" type="checkbox"/> No                                                                                                                                        |   | 137. Summons No.                                                                                                            |    | Oper.                                                                                                                                                                                                                         |    | 138. Charge                                                  |    | 139. Summons No.                                                                                                                                                                                                            |                                                                   |                                                                                                             |  |                                                                                                                                                                                                                             |  |              |  | 01           |  |                    |  |      |
|      |                                                                     |    | Oper.                                        |    | 136. Charge                                                                                                                                                                                                                   |   | 141. Summons No.                                                                                                            |    | Oper.                                                                                                                                                                                                                         |    | 142. Charge                                                  |    | 143. Summons No.                                                                                                                                                                                                            |                                                                   |                                                                                                             |  |                                                                                                                                                                                                                             |  |              |  | 02           |  |                    |  |      |
|      |                                                                     |    | Oper.                                        |    | 140. Charge                                                                                                                                                                                                                   |   | 144. Summons No.                                                                                                            |    | Oper.                                                                                                                                                                                                                         |    | 145. Charge                                                  |    | 146. Summons No.                                                                                                                                                                                                            |                                                                   |                                                                                                             |  |                                                                                                                                                                                                                             |  |              |  | 04           |  |                    |  |      |
| A    | 01                                                                  | 01 | 01                                           | 04 | 51                                                                                                                                                                                                                            | F | 07                                                                                                                          | 08 | 01                                                                                                                                                                                                                            | 04 | 04                                                           | 06 | Names & Addresses of Occupants If Deceased, Date & Time of Death                                                                                                                                                            |                                                                   |                                                                                                             |  |                                                                                                                                                                                                                             |  |              |  |              |  |                    |  |      |
| B    | 02                                                                  | 01 | 01                                           | 05 | 17                                                                                                                                                                                                                            | F | -                                                                                                                           | -  | -                                                                                                                                                                                                                             | 04 | 04                                                           | 06 | -                                                                                                                                                                                                                           | TWANDA T YARBER 410 NORTHUMBERLAND WAY MONMOUTH JUNCTION NJ 08852 |                                                                                                             |  |                                                                                                                                                                                                                             |  |              |  |              |  |                    |  |      |
| C    | 02                                                                  | 03 | 01                                           | 05 | 17                                                                                                                                                                                                                            | F | -                                                                                                                           | -  | -                                                                                                                                                                                                                             | 04 | 04                                                           | 06 | -                                                                                                                                                                                                                           | SONIA KHAN 12 STADELMAN CT KENDALL PARK NJ 08824                  |                                                                                                             |  |                                                                                                                                                                                                                             |  |              |  |              |  |                    |  |      |
| D    |                                                                     |    |                                              |    |                                                                                                                                                                                                                               |   |                                                                                                                             |    |                                                                                                                                                                                                                               |    |                                                              |    |                                                                                                                                                                                                                             | LAIBA JAHAN-ZAIB 14 SUPRA CT PRINCETON NJ 08854                   |                                                                                                             |  |                                                                                                                                                                                                                             |  |              |  |              |  |                    |  |      |

|   |    |    |    |    |    |    |    |    |    |    |    |    |    |                                                                     |
|---|----|----|----|----|----|----|----|----|----|----|----|----|----|---------------------------------------------------------------------|
| E | 83 | 84 | 85 | 86 | 87 | 88 | 89 | 90 | 91 | 92 | 93 | 94 | 95 | Names & Addresses of Occupants<br>If Deceased, Date & Time of Death |
|   |    |    |    |    |    |    |    |    |    |    |    |    |    |                                                                     |

144. Crash Diagram



145. Crash Description/Narrative

V1 WAS TRAVELING SOUTHBOUND ON RT 27 WHILE V2 WAS ATTEMPTING TO CROSS RT 27 TO PRINCETON HIGHLANDS. V2 STRUCK V1.

D1 RELATED SHE WAS TRAVELING SOUTH ON RT 27 WHEN V2 PULLED INTO HER. SHE HAD COMPLAINT OF PAIN TO HER SHOULDERS AND ADVISED SHE WOULD FOLLOW UP WITH HER DOCTOR. D2 RELATED SHE ATTEMPTED TO CROSS THE HIGHWAY AND V1 SPED UP PRIOR TO HITTING HER. INVESTIGATION REVEALED V1 HAD THE RIGHT OF WAY AND D2 FAILED TO YIELD.

|                          |              |               |         |                                                                               |
|--------------------------|--------------|---------------|---------|-------------------------------------------------------------------------------|
| 146. Officer's Signature | 147. Badge # | 148. Reviewer | Badge # | 149. Case Status                                                              |
| Mahon, Frank             | 158          | Raics, James  | 177     | <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Complete |

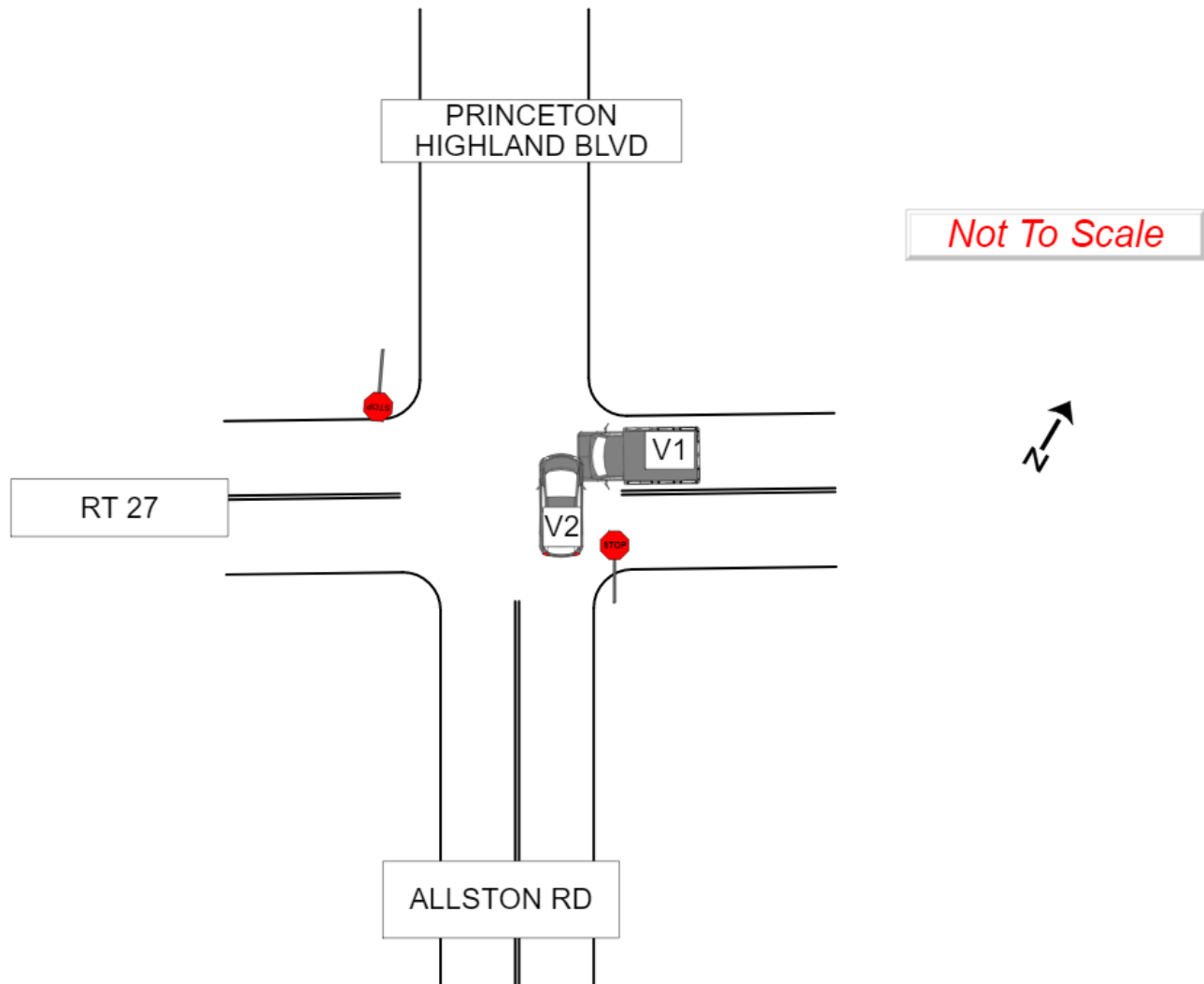
## New Jersey Police Crash Investigation Report

### Motor Vehicle Crash Diagram

Police Dept: Franklin Township Police Department/Somerset Co. Code: 01

Station: FTPD Case No: 23051873

144. Crash Diagram (NOT TO SCALE)



NJTR-1B (Rev. 01/17)

Mahon, Frank

Officer's Signature

158

Badge Number