1. Task Number	2. Investigator's ID	EPIDEMIOLOGIC INVESTIGATION REPORT
080917HWE7744	9087	

3. Office Code	4. Date of Accident YR MO DAY	5. Date Initiated YR MO DAY
840	2008 02 22	2008 09 23

6. Synopsis of Accident or Complaint UPC

The decedent is a 14-year-old male who was a passenger in a four-wheeled, off-road, utility-type vehicle. The decedent was riding in the vehicle in the desert. The decedent was un-restrained and was not wearing a helmet. As they went up a hill, the cousin took his foot off of the gas in an attempt to slow the vehicle down, when his boot strap got caught on the gas pedal. Once they crested the hill, the vehicle flipped over, ejecting the descendent and landing on top of him. The decedent was transported to the hospital via emergency personnel where he was pronounced dead.

MFR/PRVLBR NOTIFIED

COMMENTS: ___YES ✓ NO
___OVERRULED; ___ATTACHED

✓ EXCISIONS/FOIA EXS. B6, 2 5c

✓ DO NOT RE-NOTIFY ___RE-NOTIFY

DJL 4/30/09

7. Location (Home, School, etc)	8. City	9. State
5 - OTHER PUBLIC PROPERTY	GLAMIS	CA

10A. First Product	10B. Trade/Brand Name	10C. Model Number
5044 - Utility Vehicles	YAMAHA	RHINO

10D. Manufacturer Name and Address
YAMAHA MOTOR CORPORATION, USA
6555 Katella Avenue
Cypress, CA 90630

11A. Second Product	11B. Trade/Brand Name	11C. Model Number
1615 - Footware	NONE	NONE

11D. Manufacturer Name and Address
NONE

12. Age of Victim	13. Sex	14. Disposition	15. Injury Diagnosis
14	1 - Male	8 - Death	62 - Intern. Org. Inj.

16. Body Part(s) Involved	17. Respondent	18. Type of Investigation	19. Time Spent (Operational / Travel)
75 - HEAD	3 - 2nd Hand Info Only	2 - Telephone	12 / 0

20. Attachment(s)	21. Case Source	22. Sample Collection Number
9 - Multiple Attachments	12 - MECAP	

23. Permission to Disclose Name (Non NEISS Cases Only)

○ Yes ● No ○ Verbal ○ Yes for Manuf. Only

24. Review Date	25. Reviewed By	26. Regional Office Director
10/15/2008	8554	Frank J. Nava

27. Distribution	28. Source Document Number
Streeter, Robin	N0890273A

1. Task Number	2. Investigator's ID	EPIDEMIOLOGIC INVESTIGATION REPORT
080917HWE7744	9087	

3. Office Code	4. Date of Accident YR MO DAY	5. Date Initiated YR MO DAY
840	2008 02 22	2008 09 23

6. Synopsis of Accident or Complaint **UPC**

The decedent is a 14-year-old male who was a passenger in a four-wheeled, off-road, utility-type vehicle. The decedent was riding in the vehicle in the desert. The decedent was un-restrained and was not wearing a helmet. As they went up a hill, the cousin took his foot off of the gas in an attempt to slow the vehicle down, when his boot strap got caught on the gas pedal. Once they crested the hill, the vehicle flipped over, ejecting the descendent and landing on top of him. The decedent was transported to the hospital via emergency personnel where he was pronounced dead.

7. Location (Home, School, etc)	8. City	9. State
5 - OTHER PUBLIC PROPERTY	GLAMIS	CA

10A. First Product	10B. Trade/Brand Name	10C. Model Number
5044 - Utility Vehicles	YAMAHA	RHINO

10D. Manufacturer Name and Address
YAMAHA MOTOR CORPORATION, USA
6555 Katella Avenue
Cypress, CA 90630

11A. Second Product	11B. Trade/Brand Name	11C. Model Number
1615 - Footware	NONE	NONE

11D. Manufacturer Name and Address
NONE

12. Age of Victim	13. Sex	14. Disposition	15. Injury Diagnosis
14	1 - Male	8 - Death	62 - Intern. Org. Inj.

16. Body Part(s) Involved	17. Respondent	18. Type of Investigation	19. Time Spent (Operational / Travel)
75 - HEAD	3 - 2nd Hand Info Only	2 - Telephone	12 / 0

20. Attachment(s)	21. Case Source	22. Sample Collection Number
9 - Multiple Attachments	12 - MECAP	

23. Permission to Disclose Name (Non NEISS Cases Only)

○ Yes ● No ○ Verbal ○ Yes for Manuf. Only

24. Review Date	25. Reviewed By	26. Regional Office Director
10/15/2008	8554	Frank J. Nava

27. Distribution	28. Source Document Number
Streeter, Robin	N0890273A

This incident occurred on 2/23/08, and involved a 14 year old male victim and a four-wheeled, off-road, utility-type vehicle being used recreationally in the open desert at the Imperial Sand Dunes Recreational Area in Glamis, CA (Imperial County). All of the information comes from reports from the responding police agency and the medical examiner's office. Their reports are appended as Exhibits 1 and 2, respectively.

On the day of the incident, the victim, age 14, and his male cousin, age 16, had been riding in a four-wheeled, off-road, utility-type vehicle in the open desert. The victim was an un-restrained, non-helmeted passenger and his cousin was driving. They were riding up an approximate ten foot incline at approximately 40 miles per hour when the cousin tried to take his foot off the gas pedal to slow the vehicle down. However, the cousin's motorcycle boot straps (boot not further identified) got hung up on the gas pedal and the vehicle continued upward. As the vehicle crested the incline it flipped over backwards and rolled several times until it reached the bottom of the incline. The victim was ejected and the vehicle came to rest on top of him. The victim was hit in the head with the vehicle's rollbar. The victim was transported to a local hospital where he was pronounced dead. The driver complained of pain in his left knee but was able to walk..

PRODUCT
The product is a 2008 Yamaha Rhino (not further identified).

EXHIBITS
1. California Highway Patrol Report.
2. Imperial County Medical Examiner's Report.
3. Source Identification Sheet (List of Contacts).

STATE OF CALIFORNIA
TRAFFIC COLLISION REPORT
CHP 555 CARS PAGE 1 (REV 11-06) OPI 065

DATE		CITY: UNINCORPORATED	JUVENILE	LOCAL INCIDENT NUMBER: b(3) CPSA Section 25(c), b(6)	
		COUNTY: IMPERIAL	BEAT: 906	DAY OF WEEK: SATURDAY	TOW AWAY: YES X NO
LOCATION	COLLISION OCCURRED ON: IMPERIAL SAND DUNE RECREATION AREA	DATE: 02/23/2008	TIME (24HR): 1400	REPORT #: 9625	OFFICER ID: 012760
	MILEPOST INFORMATION	LATITUDE / LONGITUDE		PHOTOGRAPHS BY: b(6)	
	X AT/NEAR INTERSECTION WITH: X OR: .25 MILES SOUTH OF SR 78			STATE HWY RTE: YES X NO	

PARTY 1	DRIVER'S LICENSE NUMBER	STATE	CLASS U	AGE/DAD P	SAFETY EQUIP. G	VEH. YEAR 2008	MAKE/MODEL/COLOR YAMAHA ATV RED	LICENSE NUMBER 19E14F	STATE CA
DRIVER X	NAME: FIRST, MIDDLE, LAST b(3) CPSA Section 25(c), b(6)					OWNER'S NAME b(3) CPSA Section 25(c), b(6)		SAME AS DRIVER	
PEDESTRIAN	STREET ADDRESS b(3) CPSA Section 25(c), b(6)					OWNER'S ADDRESS		X SAME AS DRIVER	
PARKED VEHICLE	CITY, STATE, ZIP SANTA ANA CA 92705					DISPOSITION OF VEHICLE ON ORDERS OF: b(3) CPSA Section 25(c), b(6)		OFFICER DRIVER X OWNER	

DRIVER CONDITION	SEX	HAIR	EYES	HEIGHT	WEIGHT	BIRTHDATE MO DAY YEAR	RACE
	M	BRN	BRN	5-08	160	b(3) CPSA Section 25(c)	W

HOME PHONE b(3) CPSA Section 25(c), b(6)	BUSINESS PHONE	PRIOR MECHANICAL DEFECTS	X NONE APP. / REFER TO NARRATIVE
INSURANCE CARRIER NONE	POLICY NUMBER	VEHICLE IDENTIFICATION NUMBER	
DIR OF TRAVEL W	ON STREET OR HIGHWAY SAND DUNES	SPEED LIMIT N/A	VEHICLE YEAR / DESCRIBE VEHICLE DAMAGE / SHOW DAMAGE AREA: X MOD

PARTY 2	DRIVER'S LICENSE NUMBER	STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YEAR	MAKE/MODEL/COLOR	LICENSE NUMBER	STATE
DRIVER	NAME: FIRST, MIDDLE, LAST					OWNER'S NAME		SAME AS DRIVER	
PEDESTRIAN	STREET ADDRESS					OWNER'S ADDRESS		SAME AS DRIVER	
PARKED VEHICLE	CITY, STATE, ZIP					DISPOSITION OF VEHICLE ON ORDERS OF:		OFFICER DRIVER OWNER	

DRIVER CONDITION	SEX	HAIR	EYES	HEIGHT	WEIGHT	BIRTHDATE MO DAY YEAR	RACE

HOME PHONE	BUSINESS PHONE	PRIOR MECHANICAL DEFECTS	NONE APP. / REFER TO NARRATIVE
INSURANCE CARRIER	POLICY NUMBER	VEHICLE IDENTIFICATION NUMBER	
DIR OF TRAVEL	ON STREET OR HIGHWAY	SPEED LIMIT	VEHICLE TYPE / DESCRIBE VEHICLE DAMAGE / SHOW DAMAGE AREA

PARTY 3	DRIVER'S LICENSE NUMBER	STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YEAR	MAKE/MODEL/COLOR	LICENSE NUMBER	STATE
DRIVER	NAME: FIRST, MIDDLE, LAST					OWNER'S NAME		SAME AS DRIVER	
PEDESTRIAN	STREET ADDRESS					OWNER'S ADDRESS		SAME AS DRIVER	
PARKED VEHICLE	CITY, STATE, ZIP					DISPOSITION OF VEHICLE ON ORDERS OF:		OFFICER DRIVER OWNER	

DRIVER CONDITION	SEX	HAIR	EYES	HEIGHT	WEIGHT	BIRTHDATE MO DAY YEAR	RACE

HOME PHONE	BUSINESS PHONE	PRIOR MECHANICAL DEFECTS	NONE APP. / REFER TO NARRATIVE
INSURANCE CARRIER	POLICY NUMBER	VEHICLE IDENTIFICATION NUMBER	
DIR OF TRAVEL	ON STREET OR HIGHWAY	SPEED LIMIT	VEHICLE TYPE / DESCRIBE VEHICLE DAMAGE / SHOW DAMAGE AREA

INVESTIGATING NAME: 1. b(6)

DISPATCH NOTIFIED: X YES NO N/A

b(6)

HDQ
FARS
CALTRANS
COURT
JOV
CO. RD.
CORONER
MILITARY
P.D.
2 CHP 1st OFFICER

DATE REVIEWED: Mar 21, 2008

STATE OF CALIFORNIA
TRAFFIC COLLISION CODING
CHP-555 CARS PAGE2 (REV. 11-06) OPI 065

DATE OF COLLISION (MO. DAY. YEAR)	TIME (2400)	BEAT	OFFICER ID.	NUMBER
02-23-2008	1400	9625	[redacted]	[redacted]

NOTIFIED: ☐ YES ☐ NO

PROPERTY DAMAGE — OWNER: ; OWNER ADDRESS: ; DESCRIPTION OF DAMAGE:

SEATING POSITION

1 2 3
4 5 6
7

1 = DRIVER
2 TO 6 = PASSENGERS
7 = STA. WGN REAR
0 = MOT. CYCLE DRIVER OR VAN
8 = POSITION UNKNOWN
9 = OTHER

SAFETY EQUIPMENT

OCCUPANTS
A = NONE IN VEHICLE
B = UNKNOWN
C = LAP BELT USED
D = LAP BELT NOT USED
E = SHOULDER HARNESS USED
F = SHOULDER HARNESS NOT USED
G = LAP/SHOULDER HARNESS USED
H = LAP/SHOULDER HARNESS NOT USED
J = PASSIVE RESTRAINT USED
K = PASSIVE RESTRAINT NOT USED
L = AIR BAG DEPLOYED
M = AIR BAG NOT DEPLOYED
N = OTHER
P = NOT REQUIRED

CHILD RESTRAINT
Q = IN VEHICLE USED
R = IN VEHICLE NOT USED
S = IN VEHICLE USE UNKNOWN
T = IN VEHICLE IMPROPER USE
U = NONE IN VEHICLE

MC BICYCLE - HELMET
DRIVER: V = NO, W = YES
PASSENGER: X = NO, Y = YES

EJECTED FROM VEHICLE
0 = NOT EJECTED
1 = FULLY EJECTED
2 = PARTIALLY EJECTED
3 = UNKNOWN

INATTENTION CODES

A = CELL PHONE HANDHELD
B = CELL PHONE HANDSFREE
C = ELECTRONIC EQUIPMENT
D = RADIO / CD
E = SMOKING
F = EATING
G = CHILDREN
H = ANIMALS
I = PERSONAL HYGIENE
J = READING
K = OTHER

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

PRIMARY COLLISION FACTOR (LIST NUMBER (1) FOR PARTY AT FAULT)

1 — VC SECTION VIOLATED, CITED: 21703 — YES [ ] NO [X]
D — OTHER IMPROPER DRIVING*
C — OTHER THAN DRIVER*
D — UNKNOWN*

WEATHER (MARK 1 TO 2 ITEMS)

X A — CLEAR
B — CLOUDY
C — RAINING
D — SNOWING
E — FOG / VISIBILITY FT.
F — OTHER*
G — WIND

LIGHTING

X A — DAYLIGHT
B — DUSK - DAWN
C — DARK - STREET LIGHTS
D — DARK - NO STREET LIGHTS
E — DARK - STREET LIGHTS NOT FUNCTIONING*

ROADWAY SURFACE

X A — DRY
B — WET
C — SNOWY - ICY
D — SLIPPERY (MUDDY, OILY, ETC.)

ROADWAY CONDITIONS (MARK 1 TO 2 ITEMS)

A — HOLES, DEEP RUT*
B — LOOSE MATERIAL ON ROADWAY*
C — OBSTRUCTION ON ROADWAY*
D — CONSTRUCTION - REPAIR ZONE
E — REDUCED ROADWAY WIDTH
F — FLOODED*
G — OTHER*
X H — NO UNUSUAL CONDITIONS

TRAFFIC CONTROL DEVICES

	1	2	3
A — CONTROLS FUNCTIONING			
B — CONTROLS NOT FUNCTIONING*			
C — CONTROLS OBSCURED			
X D — NO CONTROLS PRESENT / FACTOR*	X		

TYPE OF COLLISION

A — HEAD - ON
B — SIDESWIPE
C — REAR END
D — BROADSIDE
E — HIT OBJECT
X F — OVERTURNED
G — VEHICLE / PEDESTRIAN
H — OTHER*

MOTOR VEHICLE INVOLVED WITH

X A — NON - COLLISION
B — PEDESTRIAN
C — OTHER MOTOR VEHICLE
D — MOTOR VEHICLE ON OTHER ROADWAY
E — PARKED MOTOR VEHICLE
F — TRAIN
G — BICYCLE
H — ANIMAL*
I — FIXED OBJECT*
J — OTHER OBJECT*

PEDESTRIAN'S ACTIONS

X A — NO PEDESTRIANS INVOLVED
B — CROSSING IN CROSSWALK AT INTERSECTION
C — CROSSING IN CROSSWALK - NOT AT INTERSECTION
D — CROSSING - NOT IN CROSSWALK
E — IN ROAD - INCLUDES SHOULDER
F — NOT IN ROAD
X G — APPROACHING / LEAVING SCHOOL BUS

SPECIAL INFORMATION

	1	2	3
A — HAZARDOUS MATERIAL			
B — CELL PHONE HANDHELD IN USE	X		
C — CELL PHONE HANDSFREE IN USE			
D — CELL PHONE NOT IN USE			
E — SCHOOL BUS RELATED			
F — 7.5 FT MOTOR/TRUCK COMBO			
G — 32 FT TRAILER COMBO			
H			
I			
J			
K			
L			
M			
N			
O			
P			
Q			

OTHER ASSOCIATED FACTORS (MARK 1 TO 7 ITEMS)

	1	2	3
A — VC SECTION VIOLATED: CITED [ ] YES [ ] NO			
B — VC SECTION VIOLATED: CITED [ ] YES [ ] NO			
C — VC SECTION VIOLATED: CITED [ ] YES [ ] NO			
D	X		
E — VISION DISCUREMENT*			
F — INATTENTION*			
G — STOP & GO TRAFFIC			
H — ENTERING / LEAVING RAMP			
I — PREVIOUS COLLISION			
J — UNFAMILIAR WITH ROAD			
K — DEFECTIVE VEH. EQUIP.: CITED [ ] YES [ ] NO			
L — UNINVOLVED VEHICLE			
M — OTHER*			
N — NONE APPARENT			
O — RUNAWAY VEHICLE			

MOVEMENT PRECEDING COLLISION

A — STOPPED
B — PROCEEDING STRAIGHT
C — RAN OFF ROAD
D — MAKING RIGHT TURN
E — MAKING LEFT TURN
F — MAKING U TURN
G — BACKING
H — SLOWING / STOPPING
I — PASSING OTHER VEHICLE
J — CHANGING LANES
K — PARKING MANEUVER
L — ENTERING TRAFFIC
M — OTHER UNSAFE TURNING
N — XING INTO OPPOSING LANE
O — PARKED
P — MERGING
Q — TRAVELING WRONG WAY
R — OTHER*

SOBRIETY / DRUG - PHYSICAL (MARK 1 TO 7 ITEMS)

	1	2	3
A — HAD NOT BEEN DRINKING			
B — HBD - UNDER INFLUENCE*			
C — HBD - NOT UNDER INFLUENCE*			
D — HBD - IMPAIRMENT UNKNOWN*			
E — UNDER DRUG INFLUENCE*			
F — IMPAIRMENT - PHYSICAL*			
G — IMPAIRMENT NOT KNOWN			
H — NOT APPLICABLE			
I — SLEEPY / FATIGUED			

SKETCH — FOR SKETCH DIAGRAM, SEE PAGE 4

INDICATE NORTH

MISCELLANEOUS:

STATE OF CALIFORNIA
INJURED / WITNESSES / PASSENGERS
CHP 555 CARS PAGE 3 (REV 11-06) OPI 065

DATE OF COLLISION (MO. DAY YEAR)	TIME (HRS)	BEAT #	OFFICER I.D.	NUMBER
02/28/2008	1400	9025	012700	b(3) CPSA Section 25(c),(b)(6)

DRIVER ONLY	PASSENGER ONLY	AGE	SEX	EXTENT OF INJURY ('X' ONE): FATAL INJURY	SEVERE INJURY	OTHER VISIBLE INJURY	COMPLAINT OF PAIN	INJURED WAS ('X' ONE): DRIVER	PASS.	PED.	BICYCLIST	OTHER	SEATING	SEX	AGE	SAFETY EQUIP.	ALCOHOL
#		16	M				X	X					1	F	F	G	0

NAME / D.O.B. / ADDRESS: b(3) CPSA Section 25(c),(b)(6) TELEPHONE: b(3) CPSA Section 25(c),(b)(6)

INJURED ONLY TRANSPORTED BY: WILL SEEK OWN MEDICAL AID TAKEN TO: WILL SEEK OWN MEDICAL AID

DESCRIBE INJURIES: COMPLAINED OF PAINED TO HIS LEFT KNEE.

☐ VICTIM OF VIOLENT CRIME NOTIFIED

DRIVER ONLY	PASSENGER ONLY	AGE	SEX	FATAL INJURY	SEVERE INJURY	OTHER VISIBLE INJURY	COMPLAINT OF PAIN	DRIVER	PASS.	PED.	BICYCLIST	OTHER	SEATING	SEX	AGE	SAFETY EQUIP.	ALCOHOL
#		14	M	X					X				1	3	F	H	1

NAME / D.O.B. / ADDRESS: b(3) CPSA Section 25(c),(b)(6) TELEPHONE: b(3) CPSA Section 25(c),(b)(6)

INJURED ONLY TRANSPORTED BY: GOLD CROSS AMBULANCE TAKEN TO: PIONEER'S MEM HOSP, BRAWLEY CA

DESCRIBE INJURIES: SUSTAINED INTERNAL BLUNT TRAUMA TO HIS HEAD.
TIME OF DEATH 1526 HOURS CORONER CASE #07-08-032
PRONOUNCED BY DR. BETCHER, MD. AT PIONEER'S MEM HOSPITAL.

☐ VICTIM OF VIOLENT CRIME NOTIFIED

DRIVER ONLY	PASSENGER ONLY	AGE	SEX	FATAL INJURY	SEVERE INJURY	OTHER VISIBLE INJURY	COMPLAINT OF PAIN	DRIVER	PASS.	PED.	BICYCLIST	OTHER	SEATING	SEX	AGE	SAFETY EQUIP.	ALCOHOL
X # 3		41	M														

NAME / D.O.B. / ADDRESS: b(3) CPSA Section 25(c),(b)(6) TELEPHONE: b(3) CPSA Section 25(c),(b)(6)

INJURED ONLY TRANSPORTED BY: TAKEN TO:

DESCRIBE INJURIES:

☐ VICTIM OF VIOLENT CRIME NOTIFIED

DRIVER ONLY	PASSENGER ONLY	AGE	SEX	FATAL INJURY	SEVERE INJURY	OTHER VISIBLE INJURY	COMPLAINT OF PAIN	DRIVER	PASS.	PED.	BICYCLIST	OTHER	SEATING	SEX	AGE	SAFETY EQUIP.	ALCOHOL
X # 3		12	M														

NAME / D.O.B. / ADDRESS: b(3) CPSA Section 25(c),(b)(6) TELEPHONE: b(3) CPSA Section 25(c),(b)(6)

INJURED ONLY TRANSPORTED BY: TAKEN TO:

DESCRIBE INJURIES:

☐ VICTIM OF VIOLENT CRIME NOTIFIED

DRIVER ONLY	PASSENGER ONLY	AGE	SEX	FATAL INJURY	SEVERE INJURY	OTHER VISIBLE INJURY	COMPLAINT OF PAIN	DRIVER	PASS.	PED.	BICYCLIST	OTHER	SEATING	SEX	AGE	SAFETY EQUIP.	ALCOHOL
X # 3		29	M														

NAME / D.O.B. / ADDRESS: b(3) CPSA Section 25(c),(b)(6) TELEPHONE: b(3) CPSA Section 25(c),(b)(6)

INJURED ONLY TRANSPORTED BY: TAKEN TO:

DESCRIBE INJURIES:

☐ VICTIM OF VIOLENT CRIME NOTIFIED

DRIVER ONLY	PASSENGER ONLY	AGE	SEX	FATAL INJURY	SEVERE INJURY	OTHER VISIBLE INJURY	COMPLAINT OF PAIN	DRIVER	PASS.	PED.	BICYCLIST	OTHER	SEATING	SEX	AGE	SAFETY EQUIP.	ALCOHOL
#																	

NAME / D.O.B. / ADDRESS: TELEPHONE:

INJURED ONLY TRANSPORTED BY: TAKEN TO:

DESCRIBE INJURIES:

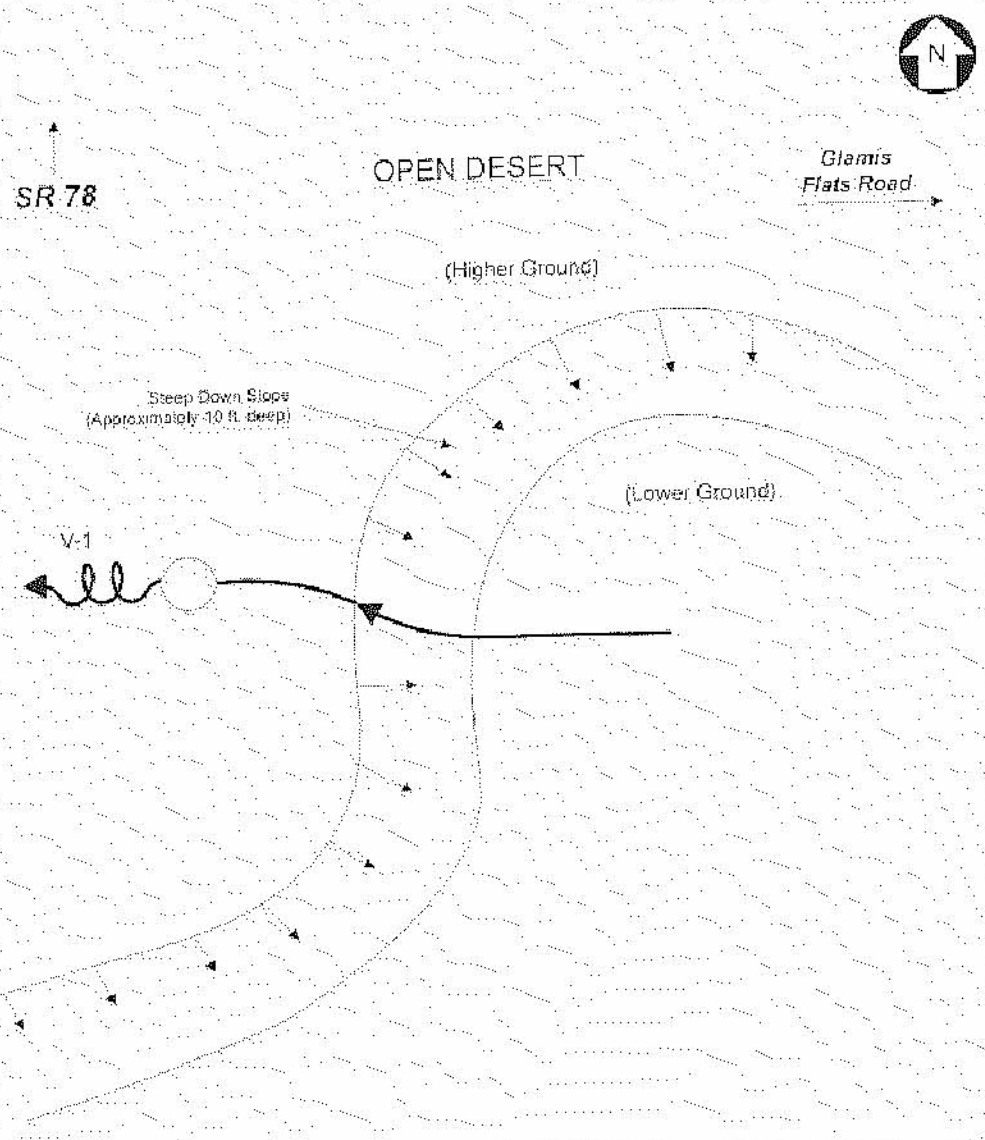
☐ VICTIM OF VIOLENT CRIME NOTIFIED

REPORTER'S NAME	I.D. NUMBER	MO. DAY YEAR	REVIEWER'S NAME	MO. DAY YEAR
b(6)		02/28/2008		

STATE OF CALIFORNIA
SKETCH DIAGRAM
CHP 555 Page 4 Rev. 8-97 OPI 0-2

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
02/23/2008	1400	9625	[redacted]	[redacted]

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

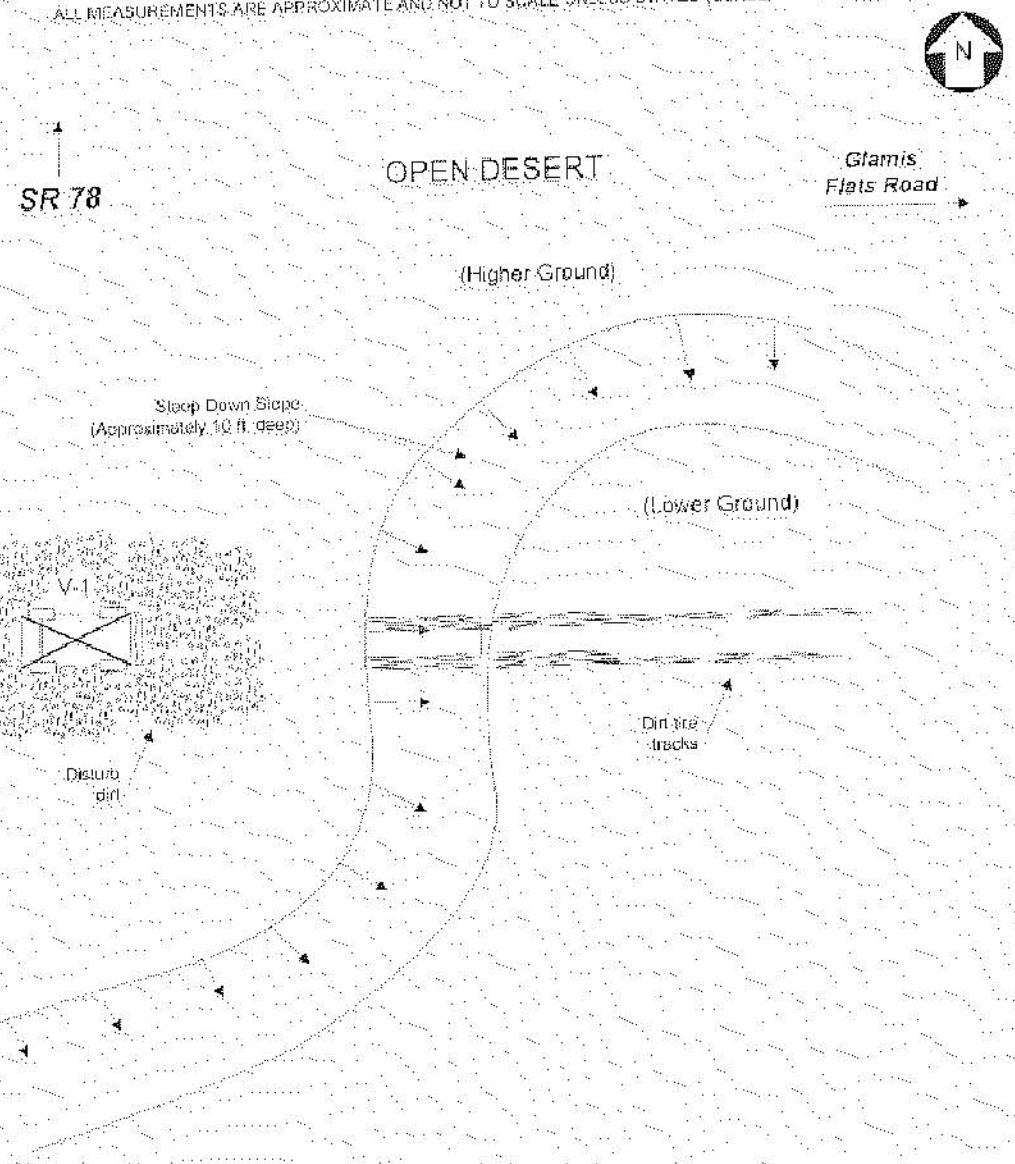


PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
[redacted]		02/23/2008		

STATE OF CALIFORNIA
FACTUAL DIAGRAM
CHP 555 Page 4(Rev. 8-97) OPI 0-0

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
02/23/2008	1400	9625	[redacted]	

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



PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
[redacted]		02/23/2008		

STATE OF CALIFORNIA
NARRATIVE/SUPPLEMENTAL

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
02/23/2008	1400	9825	[redacted]	

FACTUAL DIAGRAM / LEGEND

AOI

Estimated to be located 0.25 mile (1,320 feet) south of the south road edge of SR 78 and 0.25 mile (1,320 feet) west of the west asphalt prolongation edge of Glamis Flats Road.

The Global Position Satellite (GPS) readings were taken with a Garmin GPS III, serial number 41307545. The reading for the point of rest of V-1 and location of the top of the sand hill was taken from the center of V-1 as follows:

GPS reading of North 32 degrees 59 min. 192 sec.
West 115 degrees 05 min. 022 sec.

Vehicle Point of Rest

Vehicle #1 (Yamaha) was moved from its point of rest prior to CHP arrival. V-1 found on its roof at the following location.

Right front wheel was estimated to be located 1,320 feet south of south road edge of SR 78 and 1,320 feet west of the west road asphalt prolongation edge of Glamis Flats Road.

Right rear wheel was estimated to be located 1,320 feet south of south road edge of SR 78 and 1,326 feet west of the west road asphalt prolongation edge of Glamis Flats Road.

Physical Evidence Description

The physical evidence was disturbed by the high volume of foot traffic.

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
[redacted]		02/23/2008		

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
02/23/2008	1400	9625	(b)(3) CPSA Section 25(c),(b)(6) [redacted]	

NOTIFICATION:

I received a call from El Centro Communication Center of a fatal traffic collision at 1427 hours. I responded from Preble Road south of Wahl Road and arrived on scene at 1526 hours. All times, speeds, and measurements are approximate. All measurements were taken by Global Positioning System (Garmin GPS II, BLM S/N 41307545) and CHP unit #5476.

SCENE DESCRIPTION:

This collision occurred in the open desert in the proximity of Glamis Sand Dunes. Glamis is a federal park designated for off road vehicle use and maintained by Bureau Land Management, used by off road enthusiast. At this location, the desert is a sandy open area. The drifting sand created a hill with a gradual up slope approximately 10 feet high. At the time of the collision, the weather was cool, calm and clear. The collision occurred during the hours of daylight. Refer to Factual Diagram.

PARTIES:

(b)(3) CPSA Section 25(c),(b)(6) [redacted] **(D-1)**, was located standing on top of the sand hill south of V-1 upon my arrival. D-1 was identified and placed as driver of V-1 by the following items:

D-1 was verbally identified by himself and his father, Dit Masse.

D-1 is the son of the registered owner of V-1.

D-1's injuries were consistent with the damage to V-1.

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
(b)(6) [redacted]		02/23/2008		

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D. NUMBER
02/23/2008	1400	9625	[redacted]

CONTINUED PARTIES

Yamaha, (V-1), was moved prior to CHP arrival. V-1 was found lying on its roof, near its point of rest, facing in an easterly direction, on top of a sand hill. V-1 sustained moderate damage as a result of the collision. The top cross member tube of the factory roll cage was bent downward, the tailgate and both side rear fenders were bent, and the safety flag was broken. Thee seatbelts were inspected and were found as follows: The driver's seatbelt had some minor stretched marks indicating the driver was using it at the time of the collision. The passenger's seatbelt was found in its fully retracted position with no stretched marks or damage indicating the passenger was not wearing it at the time of the collision. The right front passenger seat was found lying on the ground near the roll cage. Upon impact the seat came off its mounting. The gear shifter for the transmission was inspected and it was determined that it was in high gear. V-1 Indicated no prior mechanical defects.

PHYSICAL EVIDENCE:

Refer to factual diagram and physical evidence legend for further details.

OTHER FACTUAL INFORMATION:

Personnel on scene:

California Highway Patrol (El Centro Area)
2331 Highway 86
Imperial, CA 92251
(760) 482-2500

[redacted] - Photographs
[redacted] - Investigating Officer

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
[redacted]		02/23/2008		

STATE OF CALIFORNIA
NARRATIVE/SUPPLEMENTAL

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
02/23/2008	1400	9525	b)(6) [redacted]	

CONTINUED OTHER FACTUAL INFORMATION:

Imperial County Sheriff's Department
328 Applestill Road
El Centro, CA 92243
(760) 339-6311

Coroner H. Proo, #550

Bureau of Land Management
1661 South 4th Street
El Centro, CA 92243
(760) 337-4400

b)(6) [redacted] - Provided GPS readings using a Garmin GPS III, S/N 41307545.
b)(6) [redacted] Provided First Aid

Gold Cross Ambulance
905 South Imperial Avenue
El Centro, CA 92243
(760) 353-3380

b)(6) [redacted]

D-1 did not provide me nor did I find proof of financial responsibility in V-1 or at the scene. D-1 is in violation of 16028(c) VC-Failure to provide a peace officer proof of financial responsibility at the scene of a traffic collision.

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
b)(6) [redacted]		02/23/2008		

STATE OF CALIFORNIA
NARRATIVE/SUPPLEMENTAL

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D. NUMBER
02/23/2008	1400	9625	[redacted]

STATEMENTS:

[redacted] D-1), was contacted at the scene. He related, in essence, he was driving his father's ATV (V-1) in the sand dunes and his cousin, Richer Masse, was sitting in the right front passenger seat. They had jumped off the top of a sand hill many times prior to the accident. Before the accident, he was driving V-1 in high gear, approximately at 40 miles per hour, approaching the hill. As D-1 started to drive up the hill he attempted to let off the accelerator but his boot got stuck on the pedal. V-1 launched becoming airborne and rolled over.

Q. Were you wearing your seatbelt?
A. Yes.

Q. Was your cousin wearing his seatbelt?
A. No, we had been jumping for a while and he had not been wearing it.

Q. After your cousin was ejected, where did he land?
A. He landed on the sand and the Rhino's roll cage landed on top of him.

[redacted] assenger-1), sustained fatal injuries and no statement was obtained. Passenger-1 was pronounced deceased at Pioneer Memorial Hospital in Brawley, California, by [redacted] on 02-23-2008 at 1526 hours.

[redacted] Witness #2), was contacted at the scene. He related, in essence, he was riding his ATV near the camp site. He could see the hill where D-1 was jumping and saw V-1 rolled over. He went over to see what happened and saw Passenger-1 under the roll cage of V-1. Witness #2 ran over to the campsite to get help.

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
[redacted]		02/23/2008		

STATE OF CALIFORNIA
NARRATIVE/SUPPLEMENTAL

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
02/23/2008	1400	9625	b(3) CPSA Section 25(c),(b)(6)	

CONTINUED STATEMENTS:

b(3) CPSA Section 25(c), b(6) (Witness #3), was contacted at the scene. He related, in essence, he was at the campsite when the accident happened. Witness #2 came running and told him V-1 had rolled over. He went over to help and found Passenger-1 under V-1. Rescue personnel arrived and they removed V-1 off Passenger-1. Passenger-1 was transported to the hospital. Witness #3 took possession of V-1.

24 HOUR PROFILE:

On 02-23-2008 at approximately 1700 hours, I spoke with Witness #1, b(3) CPSA Section 25 c),(b)(6) He identified himself as father of Passenger-1 b(3) CPSA Section 25(c),(b)(6) and uncle of D-1, b(3) CPSA Section 25(c),(b)(6) He related they had arrived to the sand dunes yesterday at about 2 pm. They set up camp and rode their ATV's throughout the two days. The night before, they got plenty of rest and got up around 7 am. The whole group had gone for two long rides in the morning. Later, around noon time they had lunch. His son, Passenger-1 and his nephew, D-1 had a burger and then went riding in V-1. Shortly after that the accident happened.

Q. Do you have beer in your camp?
A. Very little, the kids definitely don't drink.

SUMMARY:

D-1 b(3) CPSA Section 25(c),(b)(6) was driving V-1 (Yamaha) westbound in the open desert of Imperial Sand Dune Recreational Area south of SR 78 and west of Glamis Flats Road, at approximately 30 miles per hour. D-1 was wearing the seatbelt and Passenger-1 b(3) CPSA Section 25(c),(b)(6) was not. D-1 drove up a sand hill with an incline of approximately 10 feet. D-1 started to drive up the hill and he attempted to let off the accelerator. D-1's boot got stuck on the pedal. V-1 became airborne and struck the top of the hill with the front bumper. Upon impact, Passenger-1 was ejected from V-1 and landed on the sand. V-1 rolled over end-over-end in a westerly direction and came to rest on its top on top of Passenger-1. Passenger-1 sustained fatal injuries and D-1 sustained minor injuries. The summary is based on physical evidence found at the scene, the damage to V-1, and V-1's point of rest.

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
b(6)		02/23/2008		

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D. NUMBER
02/23/2008	1400	9625	b(3) CPSA Section 25(c),(b)(6) [redacted]

AREA OF IMPACT:

Area of impact, where V-1 (Yamaha) struck the top of the sand hill was located .25 mile west of the west paved road edge prolongation of Glamis Flats Road and .25 miles south of the south paved road edge of SR 78. The area of impact was based on physical evidence found at the scene and the damage to V-1.

CAUSE:

[redacted] D-1, caused this collision by driving V-1 (Yamaha) in violation of section 38305 VC, which states in part "No person shall drive an off-highway motor vehicle at a speed greater than reasonable or prudent and in no event at a speed which endangers the safety of other persons or property". D-1 drove V-1 at high rate of speed and in doing so, caused D-1 to lose control of V-1 as it became airborne. The cause was determined by physical evidence located at the scene, and damage to V-1.

ADDITIONAL VIOLATIONS:

[redacted] (D-1) was in violation of the following section:

1) California Penal Code section 192 (C) (2) P.C. - Driving a vehicle in the commission of an unlawful act, not amounting to felony, but without gross negligence; or driving a vehicle in the commission of a lawful act which might produce death, in an unlawful manner, but without gross negligence. While driving V-1 in the sand dunes, D-1 was knowingly driving off the top of a sand hill. In doing so, D-1 caused V-1 to launched and land on its front end. Passenger [redacted] was ejected and V-1 landed on top of him causing fatal injuries. These unlawful acts were without malice aforethought, but did not amount to gross negligence and resulted in the unlawful killing of another human being (Passenger [redacted]. In this collision, P-1 showed indifference to the consequences of his actions and a total disregard for human life.

2) California Vehicle Code section 16028(c) VC- Failure to provide a peace officer proof of financial responsibility at the scene of a traffic collision.

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
b(6) [redacted]		02/23/2008		

STATE OF CALIFORNIA
NARRATIVE/SUPPLEMENTAL

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D. NUMBER
02/23/2008	1400	9625	[redacted]

RECOMMENDATIONS:

I recommend a copy of this investigation be submitted to the Imperial County Superior Court, Juvenile Division, for review.

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
[redacted]		02/23/2008		

Imperial County Coroner's Office

328 Applewill Rd. El Centro, CA 92243 Phone: (760) 339-6328 Fax: (760) 339-6330

CONFIDENTIAL COPY
DO NOT REPRODUCE OR RELEASE TO ANYONE OUTSIDE THE CRIMINAL JUSTICE SYSTEM

Richer Erl Masse

Coroner Case Number: [redacted]

CLASSIFICATION	Manner of Death: Accident (Vehicle)	Sub Manner of Death			Deputy Coroner: [redacted]	
	Type of Medical Examination: Autopsy	Time Departed: 1711	Time Arrival: 1713	Date of Death: 02/22/2008	Time of Death: 1526	
DECEDENT PERSONAL DATA	Name-First: [redacted]	Middle	Last		Marital Status: Never Married	
	Age: 14	Date of Birth: [redacted]	Place of Birth: CA, United States	Height: 5' 06"	Weight: 150	Hair: Brown	Eyes: Blue
	Sex: M	Teeth: Natural	Race: White		SSN: [redacted]	
	Scars, Marks, Tattoos:					
RESIDENCE	Address: [redacted]	City	State	Zip		
PLACE OF DEATH	Place: Pioneers Memorial Hospital				County: Imperial	
	Address: 207 W. Legion Road	City: Brawley	State: CA			
REPORTING INFORMATION	Death Reported By: [redacted]	Agency: PMH E/R	Date: 02/23/2008	Time: 1620	Removed From Scene To: Coroner's Facility	
	Address:	City	State	Zip		
CAUSE OF DEATH	Immediate Cause: Craniocerebral Injuries					
	Due to: Blunt Force Trauma to Head					
	Due to:					
	Due to:					
OTHER SIGNIFICANT CONDITIONS	None					
INJURY INFORMATION	Place of Injury: open desert-Glamis	Injury at Work: No	Date of Injury: 2/23/2008	Time: 1230	Estimated	
	Address of Injury: open desert	City: Glamis	County: Imperial	State: CA		
	Injury Description: Decedent is front seat unrestrained passenger of Rhino ATV that flips over backwards and rolls downhill. Decedent is					
IDENTIFICATION	Identification Method: Visually	Identified By: father				
NOTIFIED	Name: [redacted]	Relationship: Father	Mailing Address: [redacted]			
	Notified By: [redacted]	How Notified: In Person	Date: 02/23/2008	Time: 1526		
ADDITIONAL INFORMATION	Physician	Other Investigation: CHP, EC	Funeral Home: Rose Hills Mortuary			

The Foregoing Instrument Is A Correct Copy Of The Original On File In This Office.
Attest: [redacted]
County Of Imperial, State Of California
By [redacted]

[redacted]

[redacted]

COPY

DEPUTY CORONER:

I, b(6) [redacted], conducted this investigation for the Imperial County Coroner's Office.

RECEIPT OF CALL:

On Saturday, February 23, 2008, at approximately 1620 hours, I received a telephone call at work from the Imperial County Sheriff's Office Communication Center, advising me of a coroner case involving a deceased person located in Brawley. I responded to that location when I cleared the call I was on.

ARRIVAL AT SCENE:

On Saturday, February 23, 2008, at approximately 1713 hours, I arrived at the scene and met with b(6) [redacted] who directed me to the decedent's location.

DESCRIPTION OF SCENE / GPS:

The scene is that of room 16, in the Emergency Room of the Pioneers Memorial Hospital. PMH is a two story acute care medical facility located at 207 West Legion Road. The E/R is located within the hospital complex and is equipped with all the standard life saving medical intervention devises.

VIEWING OF DECEDENT:

Upon my arrival I see that the decedent is lying supine on a hospital gurney partially covered with a white sheet. Upon removal of the sheet I see the following medical intervention devises attached to the decedent: there were 3 electrocardiogram patches affixed; 1 to his upper right chest, 1 to his upper left chest and 1 to his lower left side. He has 2 automated external defibrillation pads

attached; 1 to his upper right chest and 1 to his left side. A Foley Catheter was inserted and attached to a collector box at the foot of the bed, There were 2 intravenous lines inserted; 1 to his left inner arm and 1 to his right inner arm. These were both connected to hanging plastic bags of 0.9% sodium chloride injection.

The decedent did not show signs of rigor, but lividity and cyanosis was present. I did not observe any signs of foul play type trauma to the decedent's person.

The decedent is a white male juvenile, 14 years of age, 5'6" tall, weighing approximately 150 lbs, with brown hair and brown eyes. I further noted the decedent was wearing black tennis shoes, white socks, red and black motorcycle riding pants and white briefs.

PROPERTY:

While at the scene I initiated an Imperial County Coroner's Office property receipt with number 1617, to reflect that no property was retained by the Imperial County Coroner's Office.

REMOVAL / TRANSPORTATION:

Prior to removal the decedent was placed in a removal pouch and then transported to the Imperial County Coroner's Facility, located at 799 Highway 86, Brawley, CA.

IDENTIFICATION:

The decedent's father identified him as b(3) CPSA Section 25(c),(b)(6), with a date of birth of b(3) CPSA Section 25(c),(b)(6).

NOTIFICATION:

b(6) made notification to the decedent's father b(3) CPSA Section 25 c),(b)(6) on Saturday, February 23, 2008, at approximately 1526 hours.

X-RAYS:

No x rays were taken of the decedent.

POST MORTEM EXAMINATION:

On Tuesday, February 26, 2008, at approximately 1030 hours, a post mortem examination was conducted under the direction of b(6) b(6) Present at the post mortem examination was b(6) and I.

At the conclusion of the post mortem examination at approximately 1106 hours, b(6) listed the cause of death as:

(A) Craniocerebral Injuries.

(B) Blunt Force Injuries to Head

FINGERPRINTS / PHOTOGRAPHS:

I took fingerprints of the decedent during the post mortem examination.

I took photographs of the scene and I also took photographs during the post mortem examination.

INVESTIGATION:

Subsequent investigation revealed that the decedent and another boy just a little older had been out riding in the Glamis Sand Dunes Off-road Recreation Area in a Rhino ATV. The decedent was sitting in the front seat and was not using a seatbelt. The driver began driving up an incline and when he went to take

COPY

his foot off the gas pedal, his motorcycle boot straps got hung up on the gas pedal and the vehicle continued upward. When the ATV crested the top of the hill it flipped over backwards and rolled several times until it reached the bottom. The decedent was thrown from the vehicle and was struck in the head with the roll-bar. Emergency Medical Personnel arrived and transported the decedent to the hospital where he was declared dead.

Based upon all of the evidence and autopsy information, this case has been classified as an **accidental** death by, the Imperial County Coroner's Office and me.

TOXICOLOGY TESTS:

On Tuesday, February 26, 2008, during the post mortem examination, a sample of the decedent's central blood and urine was retained for toxicology testing.

On Thursday, March 13, 2008 the Imperial County Coroner's Office received the toxicology test results. For further information refer to Toxicology Report in the file.

WITNESSES:

1. b(6) [redacted] Rancho Mirage, CA
2. b(6) [redacted] Imperial County Coroner's Facility, Brawley, CA
3. b(6) [redacted] Coroner's Office, Imperial County Sheriff's Office, El Centro, CA

[redacted]

COPY

4. [redacted], California Highway Patrol, El Centro, Ca

REFERENCE NOTES:

1. Death certificate as filed with the Imperial County Health Department in file
2. Autopsy protocol as per [redacted] in file
3. Imperial County Coroner's property receipt numbered 1817 in file
4. Toxicology test results in file
5. Digital photos in file on disk
6. Fingerprints in file
7. California Highway Patrol Report, Police Department Report with a number of 08 02 45, as completed by [redacted] in file

[redacted]

Imperial County, CA

BY: [redacted]

[redacted]

(b)(3):CPSA Section 25(c),(b)(6)

(b)(3):CPSA Section 25(c),(b)(6)

(b)(3):CPSA Section 25(c),(b)(6)

(b)(3):CPSA Section 25(c),(b)(6)

(b)(3):CPSA Section 25(c),(b)(6)

(b)(3):CPSA Section 25(c),(b)(6)

(b)(3):CPSA Section 25(c),(b)(6)

(b)(3):CPSA Section 25(c),(b)(6)

(b)(3):CPSA Section 25(c),(b)(6)

Source Identification Sheet

The Victim: (b)(3):CPSA Section 25(c),(b)(6)

LIST OF CONTACTS

1. California Highway Patrol, El Centro, CA.
2. Imperial County Medical Examiner's Office, El Centro, CA.

1. Task Number	2. Investigator's ID	EPIDEMIOLOGIC INVESTIGATION REPORT
080917HWE7745	9087	

3. Office Code	4. Date of Accident YR MO DAY	5. Date Initiated YR MO DAY
840	2008 02 23	2008 09 22

6. Synopsis of Accident or Complaint UPC

A 26 year old female victim died from chest injuries and blunt force trauma when the utility vehicle she was a passenger in rolled over. The top of the roll cage landed on the victim's upper body which was outside the roll cage while her lower body was still inside the vehicle and still wearing a seat restraint.

MFR/PRVLBR NOTIFIED

COMMENTS: ___YES ✓ NO
___OVERRULED; ___ATTACHED

✓ EXCISIONS/FOIA EXS B6,25c

✓ DO NOT RE-NOTIFY ___RE-NOTIFY

4/30/09

7. Location (Home, School, etc)	8. City	9. State
5 - OTHER PUBLIC PROPERTY	GLAMIS	CA

10A. First Product	10B. Trade/Brand Name	10C. Model Number
5044 - Utility Vehicles	YAMAHA	RHINO

10D. Manufacturer Name and Address
YAMAHA MOTOR CORPORATION, USA
6555 Katella Avenue
Cypress, CA 90630

11A. Second Product	11B. Trade/Brand Name	11C. Model Number
0	NONE	NONE

11D. Manufacturer Name and Address
NONE

12. Age of Victim	13. Sex	14. Disposition	15. Injury Diagnosis
26	2 - Female	8 - Death	54 - Crushing

16. Body Part(s) Involved	17. Respondent	18. Type of Investigation	19. Time Spent (Operational / Travel)
31 - UPPER TRUNK	3 - 2nd Hand Info Only	2 - Telephone	12 / 0

20. Attachment(s)	21. Case Source	22. Sample Collection Number
2 - Documents	12 - MECAP	

23. Permission to Disclose Name (Non NEISS Cases Only)

○ Yes ● No ○ Verbal ○ Yes for Manuf. Only

24. Review Date	25. Reviewed By	26. Regional Office Director
10/28/2008	9087	Frank J. Nava

27. Distribution	28. Source Document Number
Streeter, Robin	N0890274A

EPIDEMIOLOGIC INVESTIGATION REPORT

1. Task Number	2. Investigator's ID	
080917HWE7745	9087	

3. Office Code	4. Date of Accident YR MO DAY	5. Date Initiated YR MO DAY
840	2008 02 23	2008 09 22

6. Synopsis of Accident or Complaint **UPC**

A 26 year old female victim died from chest injuries and blunt force trauma when the utility vehicle she was a passenger in rolled over. The top of the roll cage landed on the victim's upper body which was outside the roll cage while her lower body was still inside the vehicle and still wearing a seat restraint.

7. Location (Home, School, etc)	8. City	9. State
5 - OTHER PUBLIC PROPERTY	GLAMIS	CA

10A. First Product	10B. Trade/Brand Name	10C. Model Number
5044 - Utility Vehicles	YAMAHA	RHINO

10D. Manufacturer Name and Address
YAMAHA MOTOR CORPORATION, USA
6555 Katella Avenue
Cypress, CA 90630

11A. Second Product	11B. Trade/Brand Name	11C. Model Number
0	NONE	NONE

11D. Manufacturer Name and Address
NONE

12. Age of Victim	13. Sex	14. Disposition	15. Injury Diagnosis
26	2 - Female	8 - Death	54 - Crushing

16. Body Part(s) Involved	17. Respondent	18. Type of Investigation	19. Time Spent (Operational / Travel)
31 - UPPER TRUNK	3 - 2nd Hand Info Only	2 - Telephone	12 / 0

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○ Yes ● No ○ Verbal ○ Yes for Manuf. Only

24. Review Date	25. Reviewed By	26. Regional Office Director
10/28/2008	9087	Frank J. Nava

27. Distribution	28. Source Document Number
Streeter, Robin	N0890274A

This incident occurred on 2/23/08, and involved a 26 year old female victim and a four-wheeled, off-road, utility-type vehicle being used recreationally in the open desert at the Imperial Sand Dunes Recreational Area in Glamis, CA (Imperial County). All of the information comes from reports from the responding police agency and the medical examiner's office. Their reports are appended as Exhibits 1 and 2, respectively.

On the day of the incident, the victim, age 26, and her spouse, age 30, had been riding in a four-wheeled, off-road, utility-type vehicle in the open desert. The victim was wearing a seat belt and her spouse was driving. There was no indication that she was helmeted. They were riding on the crest of an approximate 30 foot high sand dune at approximately 10 miles per hour when the driver attempted to turn the vehicle. The vehicle then rolled over its sides three times and came to rest. The victim was still wearing her seat belt but her upper body was outside the vehicle. She was face down in the sand and the vehicle's roll cage was on top of her neck. The victim was pronounced dead at the scene. There was no mention of injury to the victim's spouse.

PRODUCT
The product is a 2007 Yamaha Rhino (not further identified).

EXHIBITS
1. California Highway Patrol Report.
2. Imperial County Medical Examiner's Report.
3. Source Identification Sheet (List of Contacts).

STATE OF CALIFORNIA
TRAFFIC COLLISION REPORT
CHP 555 CARS PAGE 1 (REV.11-08) OPI 065

SPECIAL CONDITIONS: FATAL | NUMBER KILLED: 0 | HIT & RUN FLY-BY: ☐ | CITY: UNINCORPORATED | JUDICIAL DISTRICT: BRAWLEY | LOCAL REPORT NUMBER: b(3) CPSA Section 25(c),(b)(6)

NUMBER VEHICLES: 1 | HIT & RUN LOCATION: ☐ | COUNTY: IMPERIAL | REPORTING DISTRICT: | BEAT: 906 | DAY OF WEEK: SATURDAY | TOW AWAY: ☐ YES ☒ NO

LOCATION
COLLISION RECORDED ON: GLAMIS SAND DUNES 4.35 MILES S/OF SR78
MO DAY YEAR: 02/23/2008 | TIME (24H): 1243 | ACE #: 9625 | OFFICER I.D.: 111030
MILEPOST INFORMATION: | GPS COORDINATES: LATITUDE 32.56102° LONGITUDE -115.04022° | PHOTOGRAPHS BY: ☐ NONE: b(6)
☐ AT INTERSECTION WITH: | ☒ OR: 4.03 MILE(S) EAST OF GECKO PARK RD. | STATE HWY REL: ☐ YES ☒ NO

PARTY	DRIVER'S LICENSE NUMBER	STATE	CLASS	DRIVER'S LIC.	SAFETY EQUIP.	VEH. YEAR	MAKE / MODEL / COLOR	LICENSE NUMBER	STATE
1	b(3) CPSA Section 25(c),(b)(6)	CA	C	P	G	2007	YAM RHINO GRN	b(3) CPSA Section 25(c),(b)(6)	CA

DRIVER ☒ | NAME (LAST, FIRST, MIDDLE): b(3) CPSA Section 25(c),(b)(6) | OWNER'S NAME: b(3) CPSA Section 25(c),(b)(6) ☐ SAME AS DRIVER
RESIDENCE: STREET ADDRESS: b(3) CPSA Section 25(c),(b)(6) | OWNER'S ADDRESS: b(3) CPSA Section 25(c),(b)(6) ☐ SAME AS DRIVER
PARKED VEHICLE: CITY/STATE/ZIP: YUCAIPA CA 92399 | DISPOSITION OF VEHICLE ON ORDERS OF: ☒ OFFICER ☐ DRIVER ☐ OWNER
DRIVER'S LICENSE: SEX: M | HAIR: BRN | EYES: BRN | HEIGHT: 6-02 | WEIGHT: 215 | BIRTHDATE (MO DAY YEAR): b(3) CPSA Section 25(c),(b) | RACE: W | DRIVEN FROM SCENE
PRIOR MECH. DEFECTS: ☒ NONE APP. ☐ REFER TO NARRATIVE
OTHER ☐ | HOME PHONE: b(3) CPSA Section 25(c),(b)(6) | BUSINESS PHONE: | VEHICLE IDENTIFICATION NUMBER:
INSURANCE CARRIER: NONE | POLICY NUMBER: | VEHICLE TYPE: 96 | DESCRIBE VEHICLE DAMAGE: ☐ MIN. ☒ SCRE. ☐ MINOR ☐ MOD. ☐ MAJOR ☐ ROLL-OVER | IMAGE OF DAMAGED AREA
DIR. OF TRAVEL: S | ON STREET OR HIGHWAY: GLAMIS SAND DUNES | SPEED LIMIT: N/A | OR: ____ DIST: ____ CALL: ____ TERMS: ____ MONIK: ____

PARTY	DRIVER'S LICENSE NUMBER	STATE	CLASS	DRIVER'S LIC.	SAFETY EQUIP.	VEH. YEAR	MAKE / MODEL / COLOR	LICENSE NUMBER	STATE
2									

DRIVER ☐ | NAME (FIRST, MIDDLE, LAST): | OWNER'S NAME: ☐ SAME AS DRIVER
RESIDENCE: STREET ADDRESS: | OWNER'S ADDRESS: ☐ SAME AS DRIVER
PARKED VEHICLE: CITY/STATE/ZIP: | DISPOSITION OF VEHICLE ON ORDERS OF: ☐ OFFICER ☐ DRIVER ☐ OWNER
DRIVER'S LICENSE: SEX | HAIR | EYES | HEIGHT | WEIGHT | BIRTHDATE (MO DAY YEAR) | RACE | PRIOR MECHANICAL DEFECTS: ☐ NONE APP. ☐ REFER TO NARRATIVE
OTHER ☐ | HOME PHONE | BUSINESS PHONE | VEHICLE IDENTIFICATION NUMBER:
INSURANCE CARRIER | POLICY NUMBER | VEHICLE TYPE | DESCRIBE VEHICLE DAMAGE: ☐ MIN. ☐ SCRE. ☐ MINOR ☐ MOD. ☐ MAJOR ☐ ROLL-OVER | IMAGE OF DAMAGED AREA
DIR. OF TRAVEL: | ON STREET OR HIGHWAY: | SPEED LIMIT: | OR: ____ DIST: ____ CALL: ____ TERMS: ____ MONIK: ____

PARTY	DRIVER'S LICENSE NUMBER	STATE	CLASS	DRIVER'S LIC.	SAFETY EQUIP.	VEH. YEAR	MAKE / MODEL / COLOR	LICENSE NUMBER	STATE
3									

DRIVER ☐ | NAME (FIRST, MIDDLE, LAST): | OWNER'S NAME: ☐ SAME AS DRIVER
RESIDENCE: STREET ADDRESS: | OWNER'S ADDRESS: ☐ SAME AS DRIVER
PARKED VEHICLE: CITY/STATE/ZIP: | DISPOSITION OF VEHICLE ON ORDERS OF: ☐ OFFICER ☐ DRIVER
DRIVER'S LICENSE: SEX | HAIR | EYES | HEIGHT | WEIGHT | BIRTHDATE (MO DAY YEAR) | RACE | PRIOR MECHANICAL DEFECTS: ☐ NONE APP. ☐ REFER TO NARRATIVE
OTHER ☐ | HOME PHONE | BUSINESS PHONE | VEHICLE IDENTIFICATION NUMBER:
INSURANCE CARRIER | POLICY NUMBER | VEHICLE TYPE | DESCRIBE VEHICLE DAMAGE: ☐ MIN. ☐ SCRE. ☐ MINOR ☐ MOD. ☐ MAJOR ☐ ROLL-OVER | IMAGE OF DAMAGED AREA
DIR. OF TRAVEL: | ON STREET OR HIGHWAY: | SPEED LIMIT: | OR: ____ DIST: ____ CALL: ____ TERMS: ____ MONIK: ____

DISPATCHER'S NAME: b(6) | DISPATCH NOTIFIED: ☒ YES ☐ NO ☐ N/A | b(6) | DATE REVIEWED: 4/4/2008

HDQ
FARS
CALTRANS
COURT
CO.RD
OWNER
MILITARY
P.D.
CHP CAL OFFICE

STATE OF CALIFORNIA
TRAFFIC COLLISION CODING
CHP 555 CARS PAGE2 (REV. 11-06) OPI 065

DATE OF COLLISION (MO. DAY YEAR)	TIME (2400)	NCIC #	OFFICER I.D.	NUMBER
02/23/2006	1245	9625	b(3) CPSA Section 25(c),(b)(6)	

PROPERTY DAMAGE	OWNER	OWNER ADDRESS	MOTORED
	DESCRIPTION OF DAMAGE		☐ YES ☐ NO

SEATING POSITION

1 2 3
4 5 6
7

1 - DRIVER
2 TO 6 - PASSENGERS
7 - STA. WGN REAR
8 - RR. OCC TRK. OR VAN
9 - POSITION UNKNOWN
0 - OTHER

OCCUPANTS

A - NONE IN VEHICLE
B - UNKNOWN
C - LAP BELT USED
D - LAP BELT NOT USED
E - SHOULDER HARNESS USED
F - SHOULDER HARNESS NOT USED
G - LAP/SHOULDER HARNESS USED
H - LAP/SHOULDER HARNESS NOT USED
J - PASSIVE RESTRAINT USED
K - PASSIVE RESTRAINT NOT USED

SAFETY EQUIPMENT

L - AIR BAG DEPLOYED
M - AIR BAG NOT DEPLOYED
N - OTHER
P - NOT REQUIRED

CHILD RESTRAINT
Q - IN VEHICLE USED
R - IN VEHICLE NOT USED
S - IN VEHICLE USE UNKNOWN
T - IN VEHICLE IMPROPER USE
U - NONE IN VEHICLE

M/C BICYCLE - HELMET
DRIVER: V - NO, W - YES
PASSENGER: X - NO, Y - YES

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

INATTENTION CODES

A - CELL PHONE HANDHELD
B - CELL PHONE HANDSFREE
C - ELECTRONIC EQUIPMENT
D - RADIO / CD
E - SMOKING
F - EATING
G - CHILDREN
H - ANIMALS
I - PERSONAL HYGIENE
J - READING
K - OTHER

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

PRIMARY COLLISION FACTOR
LIST NUMBER (#) OF PARTY AT FAULT

1	A. VC SECTION VIOLATED: CITED 32006 VC	☐ YES ☒ NO
	B. OTHER IMPROPER DRIVING*	
	C. OTHER THAN DRIVER*	
	D. UNKNOWN*	

WEATHER (MARK 1 TO 2 ITEMS)

X	A. CLEAR
	B. CLOUDY
	C. RAINING
	D. SNOWING
	E. FOG / VISIBILITY* FT.
	F. OTHER:*
	G. WIND

LIGHTING

X	A. DAYLIGHT
	B. DUSK - DAWN
	C. DARK - STREET LIGHTS
	D. DARK - NO STREET LIGHTS
	E. DARK - STREET LIGHTS NOT FUNCTIONING*

ROADWAY SURFACE

	A. DRY
	B. WET
	C. SNOWY - ICY
X	D. SLIPPERY (MUDDY, OILY, ETC.)

ROADWAY CONDITION(S) (MARK 1 TO 2 ITEMS)

	A. HOLES, DEEP RUTS*
	B. LOOSE MATERIAL ON ROADWAY*
	C. OBSTRUCTION ON ROADWAY*
	D. CONSTRUCTION - REPAIR ZONE
	E. REDUCED ROADWAY WIDTH
	F. FLOODED*
	G. OTHER*:
X	H. NO UNUSUAL CONDITIONS

TRAFFIC CONTROL DEVICES

	1	2	3
A. CONTROLS FUNCTIONING			
B. CONTROLS NOT FUNCTIONING*			
C. CONTROLS OBSCURED			
X D. NO CONTROLS PRESENT / FACTOR*	X		

TYPE OF COLLISION

	1	2	3
A. HEAD - ON			
B. SIDE SWIPE			
C. REAR END			
D. BROADSIDE			
E. HIT OBJECT			
X F. OVERTURNED			
G. VEHICLE / PEDESTRIAN			
H. OTHER*:			

MOTOR VEHICLE INVOLVED WITH

	1	2	3
X A. NON - COLLISION			
B. PEDESTRIAN			
C. OTHER MOTOR VEHICLE			
D. MOTOR VEHICLE ON OTHER ROADWAY			
E. PARKED MOTOR VEHICLE			
F. TRAIN			
G. BICYCLE			
H. ANIMAL:			
I. FIXED OBJECT:			
J. OTHER OBJECT:			

PEDESTRIAN'S ACTIONS

	1	2	3
X A. NO PEDESTRIANS INVOLVED			
B. CROSSING IN CROSSWALK - AT INTERSECTION			
C. CROSSING IN CROSSWALK - NOT AT INTERSECTION			
D. CROSSING - NOT IN CROSSWALK			
E. IN ROAD - INCLUDES SHOULDER			
F. NOT IN ROAD	X		
G. APPROACHING / LEAVING SCHOOL BUS			

SPECIAL INFORMATION

	1	2	3
A. HAZARDOUS MATERIAL			
B. CELL PHONE HANDHELD IN USE			
C. CELL PHONE HANDSFREE IN USE			
D. CELL PHONE NOT IN USE			
E. SCHOOL BUS RELATED			
F. 75 FT MOTOR TRUCK COMBO			
G. 32 FT TRAILER COMBO			
H.			
I.			
J.			
K.			
L.			
M.		X	
N.			
O.			
P.			
Q.			

OTHER ASSOCIATED FACTORS (MARK 1 TO 2 ITEMS)

	1	2	3
A. VC MOTION VIOLATED: CITED	☐ YES ☐ NO		
B. VC RECKLESS VIOLATED: CITED	☐ YES ☐ NO		
C. VC BLEEDING VIOLATED: CITED	☐ YES ☐ NO		
D.			
E. VISION OBSCUREMENT:			
F. INATTENTION*:		X	
G. STOP & GO TRAFFIC			
H. ENTERING / LEAVING RAMP			
I. PREVIOUS COLLISION			
J. UNFAMILIAR WITH ROAD			
K. DEFECTIVE VEH. EQUIP.: CITED	☐ YES ☐ NO		
L. UNINVOLVED VEHICLE			
M. OTHER*:			
N. NONE APPARENT			
O. RUNAWAY VEHICLE			

MOVEMENT PRECEDING COLLISION

	1	2	3
A. STOPPED			
B. PROCEEDING STRAIGHT			
C. RAN OFF ROAD			
D. MAKING RIGHT TURN			
E. MAKING LEFT TURN			
F. MAKING U TURN			
G. BACKING			
H. SLOWING / STOPPING			
I. PASSING OTHER VEHICLE			
J. CHANGING LANES			
K. PARKING MANEUVER			
L. ENTERING TRAFFIC			
M. OTHER UNSAFE TURNING			
N. XING INTO OPPOSING LANE			
O. PARKED			
P. MERGING			
Q. TRAVELING WRONG WAY			
R. OTHER*:			

SOBRIETY / DRUG PHYSICAL (MARK 1 TO 2 ITEMS)

	1	2	3
A. HAD NOT BEEN DRINKING			
B. HBD - UNDER INFLUENCE			
C. HBD - NOT UNDER INFLUENCE			
D. HBD - IMPAIRMENT UNKNOWN			
E. UNDER DRUG INFLUENCE*			
F. IMPAIRMENT - PHYSICAL*			
G. IMPAIRMENT NOT KNOWN			
H. NOT APPLICABLE			
I. SLEEPY / FATIGUED			

SKETCH FOR SKETCH DIAGRAM, SEE PAGE 5

INDICATE NORTH

MISCELLANEOUS

STATE OF CALIFORNIA
INJURED / WITNESSES / PASSENGERS
CHP 555 CARS PAGE 3 (REV 11-86) OPI 065

DATE OF COLLISION (MO. DAY YEAR)	TIME (24HR)	SCIC #	OFFICER I.D.	NUMBER
02/23/2008	1243	9025	b)(3) CPSA Section 25(c),(b)(6)	

WITNESS ONLY	PASSENGER ONLY	AGE	SEX	EXTENT OF INJURY ("X" ONE): FATAL INJURY	SERIOUS INJURY	OTHER VISIBLE INJURY	COMPLAINT OF PAIN	INJURED WAS ("X" ONE): DRIVER	PASS.	PED.	BICYCLIST	OTHER	PARTY NUMBER	SEAT POS.	AIR BAG	SAFETY EQUIP.	EJECTED
#		26	F	X					X				1	3	P	G	2

NAME / D.O.B. / ADDRESS: b)(3) CPSA Section 25(c),(b)(6) TELEPHONE: b)(3) CPSA Section 25(c),(b)(6)

(INJURED ONLY) TRANSPORTED BY: IMPERIAL COUNTY b)(6) TAKEN TO: FRYE MORTUARY

DESCRIBE INJURIES: PRONOUNCED DECEASED AT 1444 HOURS BY b)(6) SUSTAINED MAJOR HEAD AND NECK TRAUMA. CORONER CASE b)(3) CPSA Section 25 c),(b)(6)

☐ VICTIM OF VIOLENT CRIME NOTIFIED

X # 1		28	M														

NAME / D.O.B. / ADDRESS: b)(3) CPSA Section 25(c),(b)(6) TELEPHONE:

(INJURED ONLY) TRANSPORTED BY: TAKEN TO:

DESCRIBE INJURIES:

☐ VICTIM OF VIOLENT CRIME NOTIFIED

X # 2		29	M														

NAME / D.O.B. / ADDRESS: b)(3) CPSA Section 25(c),(b)(6) TELEPHONE:

(INJURED ONLY) TRANSPORTED BY: TAKEN TO:

DESCRIBE INJURIES:

☐ VICTIM OF VIOLENT CRIME NOTIFIED

X # 3		26	F														

NAME / D.O.B. / ADDRESS: b)(3) CPSA Section 25(c),(b)(6) TELEPHONE:

(INJURED ONLY) TRANSPORTED BY: TAKEN TO:

DESCRIBE INJURIES:

☐ VICTIM OF VIOLENT CRIME NOTIFIED

X # 4		53	M														

NAME / D.O.B. / ADDRESS: b)(3) CPSA Section 25(c),(b)(6) TELEPHONE:

(INJURED ONLY) TRANSPORTED BY: TAKEN TO:

DESCRIBE INJURIES:

☐ VICTIM OF VIOLENT CRIME NOTIFIED

X # 5		06															

NAME / D.O.B. / ADDRESS: b)(3) CPSA Section 25(c),(b)(6) TELEPHONE:

(INJURED ONLY) TRANSPORTED BY: TAKEN TO:

DESCRIBE INJURIES:

☐ VICTIM OF VIOLENT CRIME NOTIFIED

PREPARER'S NAME	I.D. NUMBER	MO. DAY YEAR	REVIEWER'S NAME	MO. DAY YEAR
b)(6)		02/23/2008		

STATE OF CALIFORNIA
INJURED / WITNESSES / PASSENGERS
CHP 555 CARS PAGE 3 (REV 11-06) OPI 065

DATE OF COLLISION (MO. DAY. YEAR)	TIME (2400)	NCIC #	OFFICER I.D.	NUMBER
02/23/2008	1243	9625	b(3):CPSA Section 25(c),(b)(6)	

WITNESS ONLY	PASSENGER ONLY	AGE	SEX	EXTENT OF INJURY ('X' ONE) FATAL INJURY	SEVERE INJURY	OTHER VISIBLE INJURY	COMPLAINT OF PAIN	INJURED WAS ('X' ONE) DRIVER	PASS.	PED.	BICYCLIST	OTHER	PARTY NUMBER	SEAT POS.	AIR BAG	SAFETY EQUIP.	EJECTED
X # 6		47	F														

b(3):CPSA Section 25(c),(b)(6) TELEPHONE b(3):CPSA Section 25(c),(b)(6)

(INJURED ONLY) TRANSPORTED BY: TAKEN TO:

DESCRIBE INJURIES:

VICTIM OF VIOLENT CRIME NOTIFIED

X # 7		16	F														

b(3):CPSA Section 25(c),(b)(6) TELEPHONE b(3):CPSA Section 25(c),

(INJURED ONLY) TRANSPORTED BY:

DESCRIBE INJURIES:

VICTIM OF VIOLENT CRIME NOTIFIED

X # 8		29	M														

NAME / D.O.B. / ADDRESS: b(3):CPSA Section 25(c),(b)(6) TELEPHONE b(3):CPSA Section 25 (c),(b)(6)

(INJURED ONLY) TRANSPORTED BY: TAKEN TO:

DESCRIBE INJURIES:

VICTIM OF VIOLENT CRIME NOTIFIED

X # 9		30	F														

NAME / D.O.B. / ADDRESS: b(3):CPSA Section 25(c),(b)(6) TELEPHONE b(3):CPSA Section 25 (c),(b)(6)

(INJURED ONLY) TRANSPORTED BY: TAKEN TO:

DESCRIBE INJURIES:

VICTIM OF VIOLENT CRIME NOTIFIED

#																	

NAME / D.O.B. / ADDRESS TELEPHONE

(INJURED ONLY) TRANSPORTED BY: TAKEN TO:

DESCRIBE INJURIES:

VICTIM OF VIOLENT CRIME NOTIFIED

#																	

NAME / D.O.B. / ADDRESS TELEPHONE

(INJURED ONLY) TRANSPORTED BY: TAKEN TO:

DESCRIBE INJURIES:

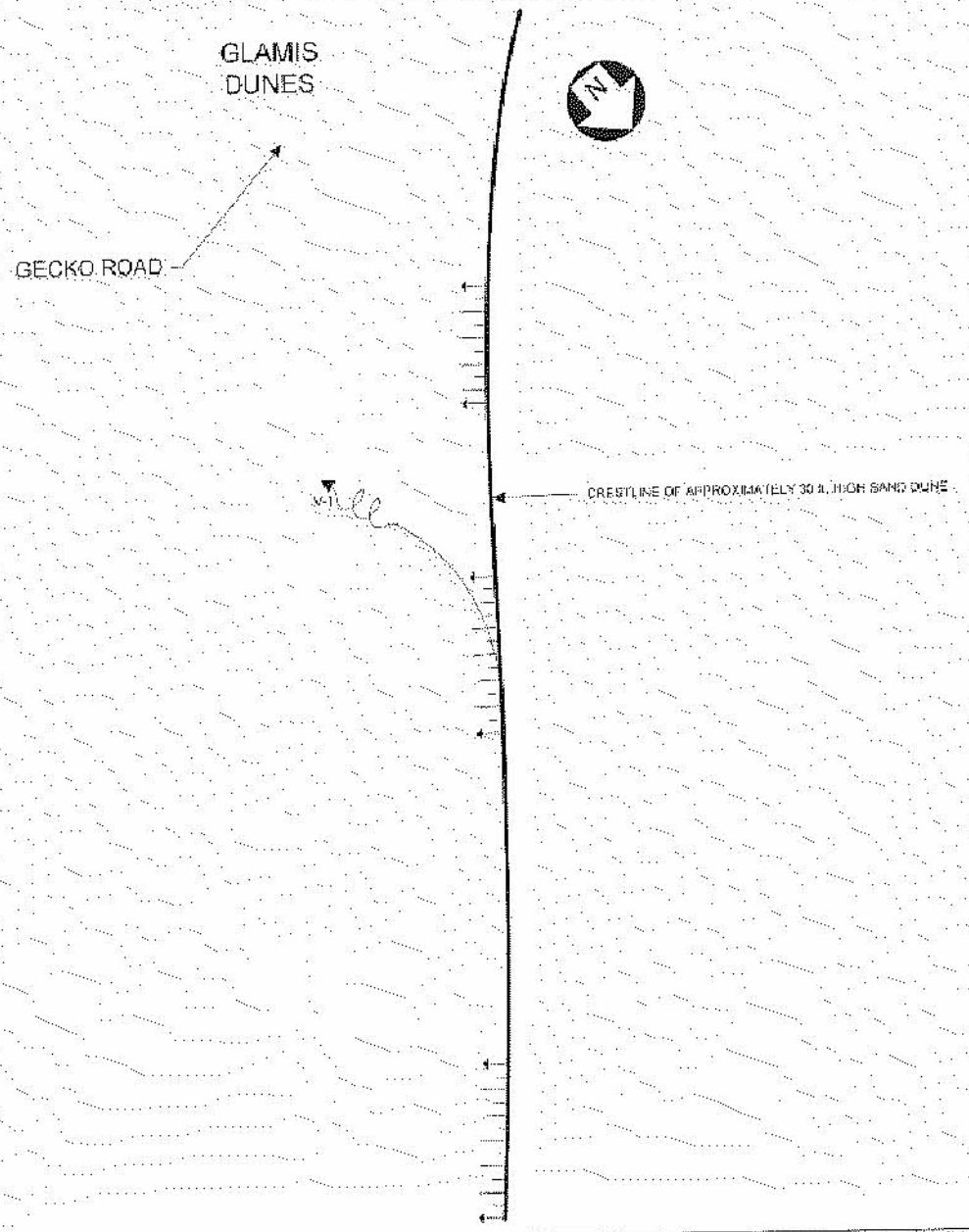
VICTIM OF VIOLENT CRIME NOTIFIED

PREPARER'S NAME	I.D. NUMBER	MO. DAY YEAR	REVIEWER'S NAME	MO. DAY YEAR
b(6)		02/23/2008		

STATE OF CALIFORNIA
SKETCH DIAGRAM
CHP 555 Page 1(Rev. 8-97) OPI 042

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
02/23/2008	1243	9625	(b)(6) CPSA Section 25(c),(b)(6) [redacted]	

ALL MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE UNLESS STATED (SCALE= 1

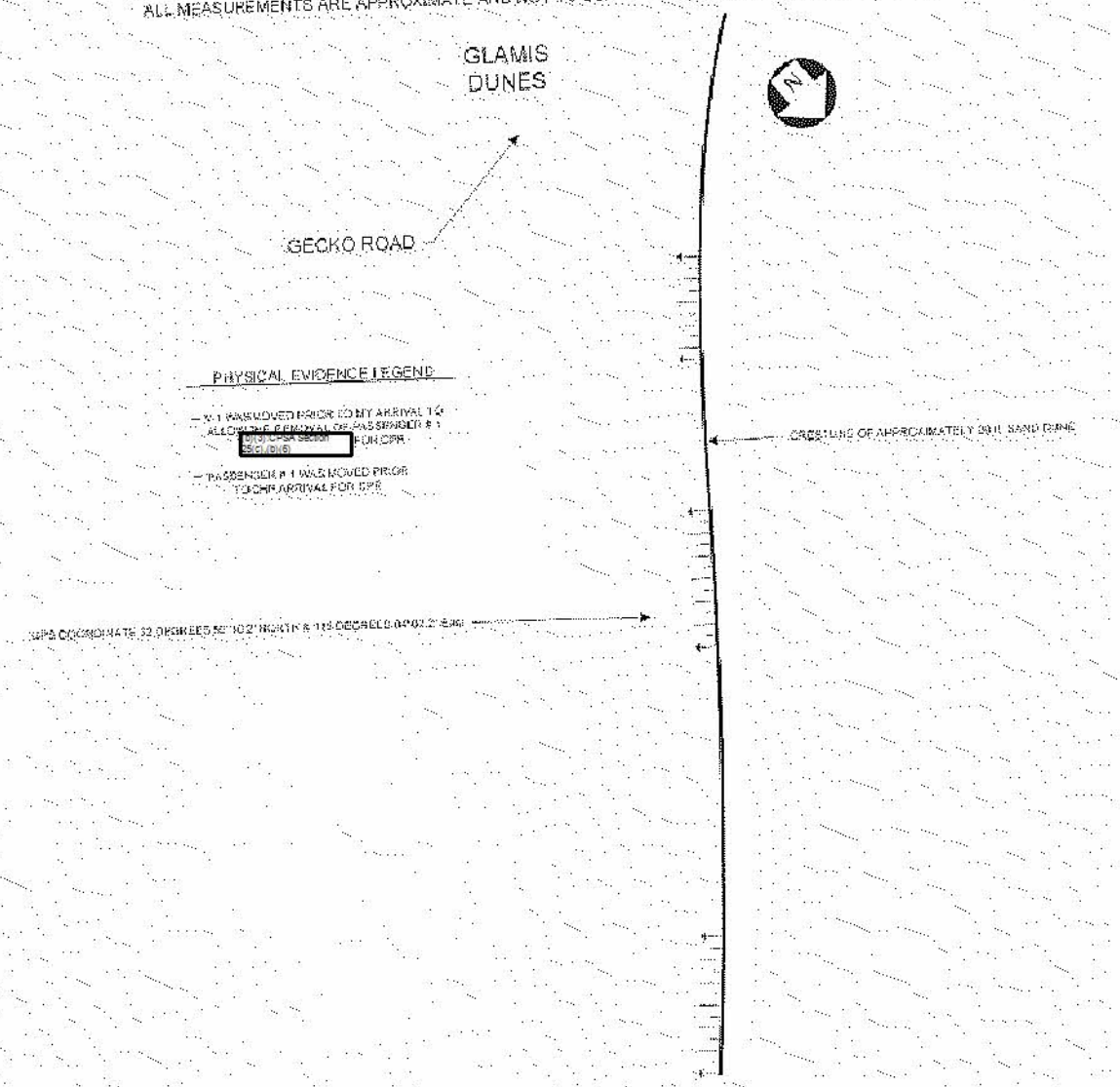


PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
(b)(6) [redacted]		03/01/2008		

STATE OF CALIFORNIA
FACTUAL DIAGRAM
CHP 555 Page 4 (Rev. 8-97) OPI 042

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
02/23/2008	1243	9625	[redacted]	

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



PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
[redacted]		03/01/2008		

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D. NUMBER
02/23/2008	1243	9625	b(6) CPA Section 3(c) b(6) [redacted]

FACTS:

NOTIFICATION:

I was notified by CHP dispatch of an off road fatality at 1255 hours on 02-23-2008. I responded from the El Centro CHP Area Office in Imperial, Ca. and arrived at the Bureau of Land Management Ranger Station on Gecko Rd. at approximately 1423 hours. I was transported to the scene of the accident, via Bureau of Land Management Dune Buggy, by volunteer b(6) [redacted] # b(6) [redacted]

All times, speeds, and measurements are approximate. All measurements were made by Global Positioning Satellite (GPS).

The following personnel were on scene:

California Highway Patrol El Centro Area:
2331 Hwy. 86
Imperial, Ca. 92251
(760)-482-2500
- b(6) [redacted]

Imperial County Sheriff's Office
328 Applestill Rd.
El Centro, Ca. 92243
(760)-339-6311
- b(6) [redacted]

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
b(6) [redacted]		03/01/2008		

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D. NUMBER
02/23/2008	1243	9625	b)(3) CPSA Section 25(c), b)(6) [redacted]

NOTIFICATION CONTINUED:

Bureau of Land Management
1661 South 4th St.
El Centro, Ca. 92243
(760)-337-4471
b)(6) [redacted]

SCENE:

This collision occurred in the Imperial Sand Dunes, an area known as Glamis. Glamis is a Federal Recreation Area that is monitored by the United States Department of the Interior Bureau of Land Management (BLM). The dunes are also known as the Algodones Dunes. This accident occurred in open desert, an area used for off highway vehicle recreation. There are several dunes that vary in height and angles of degree. This accident occurred south of State Route 78 between Oldsmobile Hill and the Union Pacific rail road tracks. Refer to factual sketch and diagram for further details of the area of this collision scene.

PARTIES:

Party # 1 b)(3) CPSA Section 25(c), b)(6) [redacted] was located at the scene. He was sitting on top of a dune with his head resting on his knees. He was identified by his statement and witnesses statements. He was established as the driver of Vehicle # 1 (Yamaha) at the time of this collision by his statement of driving, the statements of witnesses, and he rented V-1 at approximately 1130 hours the day of the collision.

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
b)(6) [redacted]		03/01/2008		

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
02/23/2008	1243	9626	b(3) CPSA Section 25(c),(b)(6) [redacted]	

PARTIES CONTINUED:

Vehicle # 1 (Yamaha) is a 2007, green, Yamaha Rhino, all terrain vehicle. There was no visual damage to the Rhino as a result of this collision. The ignition switch was in the on position, however the Rhino's motor was not running. The Rhino had been flipped from its right side, back onto its wheels by P-1 and witnesses to allow access to Passenger # 1 b(3) CPSA Section 25 c),(b)(6) [redacted]. P-1 documented that the driver's side seat belt receptacle was "dirty/ sticking" prior to renting the Rhino. He also noted that there was "slight damage" on the right side of the roll cage. I performed a seat belt inspection on the driver and passenger side seat belts of V-1 and found no mechanical defects. Both seat belts showed signs of stretching. For further details on the rental agreement and vehicle check list see attached contract.

PHYSICAL EVIDENCE:

Refer to factual diagram and physical evidence legend for further details.

OTHER FACTUAL INFORMATION:

Photos were taken by:

- b(6) [redacted]
- [redacted]

STATEMENTS:

Party # 1 b(3) CPSA Section 25(c), b(6) [redacted] was contacted at the scene. I later re-contacted him on 02-28-2008 at approximately 1530 hours. He provided the following statement in essence: He said he arrived at Glamis on Friday about 8:00 PM. He arrived with his wife b(3) CPSA Section 25(c),(b)(6) [redacted] (Passenger # 1). He was camped near wash 13 which is south of SR-78 along the rail road tracks. He

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D. NUMBER
02/23/2008	1243	9625	b(3) CPSA Section 25(c),(b)(6) [redacted]

STATEMENTS CONTINUED:

said that he, his wife, and several of their close friends left the camp that day around noon and began driving around the dunes. He was following his friends b(6) [redacted] (Witness # 1) b(6) [redacted] (Witness # 2), and b(6) [redacted] Witness # 3), and b(6) [redacted] (Witness # 8). He said all four people ahead of him were riding four wheelers. He was being followed by b(6) [redacted] in his sand rail (Witness # 4) b(6) [redacted] (Witness # 5), b(6) [redacted] (Witness # 6), and b(6) [redacted] (Witness # 7). He was driving V-1 on top of a sand hill at less than 10 miles per hour. He saw a transition in the sand dune ahead so he let off the gas and began applying the brakes. As the front tires of V-1 drove over the crest of the dune, he pushed the gas pedal. He felt the rear tires of V-1 come over the top of the dune and it felt like they were airborne. He immediately hit the brakes and V-1 began to slide sideways. He then felt the top of V-1 begin to roll to his right. V-1 then rolled over about three times. When V-1 stopped rolling, it landed on its right side. He looked to his right and saw the top of V-1's roll cage directly on top of his wife's neck. His wife was lying face down in the sand with her feet still inside the Rhino. He was still seat belted in the driver's seat of V-1 and began yelling to his friends to help flip the Rhino back over. He said several of his friends then flipped the Rhino right side up. He then removed his seat belt and ran over to where his wife was lying.

Passenger # 1 b(3) CPSA Section 25(c),(b)(6) [redacted] died at the scene and did not provide a statement.

Witness # 1 b(6) [redacted] was contacted at the scene. He provided the following statement in essence: He arrived in Glamis on Friday around 8:00 PM. They left their camp at wash 13 around noon that day. He was riding his four wheeler with b(6) [redacted] and b(6) [redacted] They were all ahead of b(3) CPSA Section 25(c),(b)(6) [redacted] (Passenger # 1). He turned to the left and rode down the dune he was on.

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
b(6) [redacted]		03/01/2008		

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D. NUMBER
02/23/2008	1243	9625	b)(3) CPSA Section 25(c),(b)(6)

STATEMENTS CONTINUED:

and kept riding westbound. He said that about one minute later, he looked back towards the dune and saw the Rhino (V-1) lying on its right side. He turned around and rode back. He said that when he got there, he saw b)(3) CPSA Section 25 c),(b)(6) trapped under the Rhino. He helped lift the Rhino off b)(3) CPSA Section 25(c), b)(6) He noticed that b)(3) CPSA Section 25 c),(b)(6) was hurt bad. He did not see b) 3) CPSA drive down the dune or the Rhino rollover. He said that the last time he saw b)(3) CPSA Section 25(c),(b)(6) they both had there seatbelts on.

Witness # 2 b)(6) was contacted at the scene. I re-contacted him on 02-28-2008, at approximately 1500 hours. He provided the following statement in essence: He arrived in Glamis on Friday with his friends. They left their camp around noon and went riding. He was riding ahead of b)(3) CPSA Section 25(c),(b)(6) on top of a dune with b)(6) He rode down the dune and followed b)(6) over another dune. He looked back and saw everyone in b)(3) CPSA Section 25(c), trail running down the dune towards the Rhino. He turned around and rode back to the Rhino. When he got there, he saw b)(3) CPSA Section 25 c),(b)(6) lying face down in the sand with the seatbelt rapped around her right arm. He said that the roll cage was across b)(3) CPSA Section 25(c), b)(6) neck. He said that b) 3) CPSA was still seat belted in the driver's seat and yelling to get the Rhino off of his wife. b)(3) CPSA Section 25 c),(b)(6) was buried face down in the sand and her left arm and shoulder were underneath the sand. As they began to flip the Rhino right side up, he removed the tangled seat belt from b)(3) CPSA Section 25(c), b)(6) right arm. He helped everyone flip the Rhino back on its wheels off of b)(3) CPSA Section 25 c),(b)(6) He was pretty sure that b)(3) CPSA Section 25(c), b)(6) had her seat belt on prior to flipping over. He said that b)(3) CPSA Section 25 was not driving recklessly and that b) 3) CPSA is an experienced duner.

Witness # 3 b)(6) was contacted at the scene. She provided the following statement in essence: She was riding a four-wheeler ahead of her sister, b)(3) CPSA Section 25(c),(b)(6) who were in the Rhino. She looked back to the hill she had just rode down and saw the Rhino on its side. She turned around and rode back to where the Rhino was. She said that they all flipped the Rhino

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
b)(6)		03/01/2008		

STATE OF CALIFORNIA
NARRATIVE/SUPPLEMENTAL

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D. NUMBER
02/23/2008	1243	9825	b(3) CPSA Section 25(c),(b)(6)

STATEMENTS CONTINUED:

back on its wheels and she saw her sister b(3) CPSA Section 25 c),(b)(6) lying face down in the sand. She saw b(3) CPSA Section 25(c), b)(6) with her seat belt on just before the crash.

Witness # 4 b)(6) was contacted at the scene. He provided the following statement in essence: He was following b(3) CPSA Section 25(c),(b)(6) in his Sand Rail. b(3) CPSA Section 25 c),(b)(6) was driving a Rhino that he rented earlier in the day. He was approximately 50 feet behind the Rhino. They were going about 10 miles per hour and that he had his sand rail in first gear. He saw the Rhino begin to turn to the left and go down the left side of the dune. He could only see the top of the Rhino at that time. He saw the top of the Rhino begin to roll over. He stopped his sand rail on top of the dune and got out. He then looked down the side of the dune and saw the Rhino on its right side. He ran down to where the Rhino was and helped flip it right side up. He pulled the left front side of the Rhino down to the ground and saw Paul Katin seat belted in the driver's seat of the Rhino.

Witness # 5 b)(6) was contacted at the scene. I later re-contacted him on 02-28-2008, at approximately 1600 hours. He provided the following statement in essence: He was seated in the right front passenger seat of his brother b)(6) sand rail. They were following b(3) CPSA Section 25(c),(b)(6) b(3) CPSA Section 25(c),(b)(6), b(3) CPSA Section 25 c),(b)(6) was driving the Rhino and b(3) CPSA Section 25 c),(b)(6) was in the right front seat. They were about 50 feet behind the Rhino. They were going very slow. He saw the Rhino turn down the dune they were on top of and then his brother told him that the Rhino had flipped. His brother stopped on top of the dune by the Rhino and they both ran down to where it was. The Rhino was on its right side and he ran to the right side of the Rhino. He said he saw b(3) CPSA Section 25(c),(b)(6) lying face down with the roll cage on top of her neck. She was making very little noise and that she was motionless. He helped flip the Rhino right side up. He said that when they flipped the Rhino over, b(3) CPSA Section 25 c),(b)(6) was loose from any seat belt. He was not sure if b(3) CPSA Section 25 c),(b)(6) had her seat belt on prior to the crash, but knows that it was off her when he flipped the Rhino over.

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
b)(6)		03/01/2008		

STATE OF CALIFORNIA
NARRATIVE/SUPPLEMENTAL

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D. NUMBER
02/23/2008	1243	9625	b(3) CPSA Section 25(c),(b)(6)

STATEMENTS CONTINUED:

Witness # 6 b(6) was contacted at the scene. She provided the following statement in essence: She was seated in the left rear passenger seat of her husband b(6) b(6) sand rail. She said b(3) CPSA Section 25(c),(b)(6) were riding in the Rhino ahead of them. She saw the Rhino go over the top of the dune they were on and immediately saw it go sideways. She then saw the top of the roll cage begin to flip over. She said her husband b(6) b(6) stopped the sand rail and they ran down to where the Rhino was. The Rhino was on its right side and that b(3) CPSA Section 25 c),(b)(6) was seat belted in the driver's seat. She saw b(3) CPSA Section 25 c),(b)(6) lying face down under the roll cage. She helped flip the Rhino right side up. She was unsure if b(3) CPSA Section 25(c),(b)(6) had her seat belt on prior to the crash.

Witness # 7 b(6) was not contacted at the scene. When I attempted to make contact with her, her father, b(6) stated that she was too distraught to provide any statement. He said that she was riding in the right rear passenger seat of his sand rail and that she did not see the crash happen. I did not obtain any statement from b(6).

Witness # 8 b(6) was contacted on 02-28-2008 at approximately 1615 hours. He provided the following statement in essence: He was riding his four-wheeler ahead of b(3) CPSA Section 25 c),(b)(6) and b(3) CPSA Section 25(c),(b)(6) was driving the Rhino and b(3) CPSA Section 25 c),(b)(6) was seated in the right front passenger seat. He rode down the sand dune and looked back. He saw the Rhino on its right side. He rode back to the Rhino and saw b(3) CPSA Section 25 c),(b)(6) lying face down in the sand. The Rhino's roll cage was across her neck and that she had the seat belt tangled around her right arm. He helped flip the Rhino right side up. I asked him if he saw b(3) CPSA Section 25 c),(b)(6) with her seat belt on earlier. He said that b(3) CPSA Section 25(c), b(6) sister b(6) wrecked her quad about 5 minutes before the crash. He said that b(3) CPSA Section 25(c), b(6) had got out of the Rhino and checked over her sister. He said that he gave b(3) CPSA Section 25 c),(b)(6) a ride back up the dune her sister crashed on. He saw b(3) CPSA Section 25 c),(b)(6) put the seat belt on when she got

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
b(6)		03/01/2008		

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D. NUMBER
02/23/2008	1243	9925	b(3) CPSA Section 25(c),(b)(6) [redacted]

STATEMENTS CONTINUED:

back into the Rhino. When [redacted] drove off, he saw [redacted] wearing the seat belt properly. He was not sure how the seat belt might have come undone.

Witness # 9 [redacted] was contacted at Gilmore Off-Road, in Glamis, California after the collision. She identified herself as the person who rented P-1 [redacted] Vehicle # 1 (Yamaha Rhino). She provided the following statement in essence: At approximately 1100 hours that day, [redacted] contacted her and requested to rent a Rhino from Rhinos 4 Rent. She is contracted to rent Rhinos for Rhinos 4 Rent. She prepared the contract and [redacted] signed the contract. She said that he seemed very responsible because he was checking the Rhino for any damage or mechanical problems. She could not smell any alcoholic beverages on his breath and that [redacted] did not appear drunk [redacted] rented the Rhino at approximately 1130 hours and drove away in the Rhino. She said that she did not see [redacted] again.

24 HOUR PROFILE:

I contacted Party # 1 at the scene and again on 02-28-2008. He related that he arrived in Glaims on 02-22-2008, at approximately 2000 hours. He related that he went to bed Friday night at approximately 2300 hours. He woke up Saturday morning around 0900 hours and ate breakfast. At approximately 1130 hours he drove to Rhinos 4 Rent and rented a green Rhino. He had driven Rhinos three or four time prior to renting this Rhino. He considered himself an experienced and safe diner. He was in a good mood the morning of the accident. He further related that his relationship with his wife was great and that they were in good spirits the day of the accident. He related that he had been married only for a few months prior to the collision. He is a firefighter and had no medical conditions. He and [redacted] had no kids yet.

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
b(6) [redacted]		03/01/2008		

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
02/23/2008	1243	9625	b(3) CPSA Section 25(c),(b)(6) [redacted]	

OPINIONS AND CONCLUSIONS:

SUMMARY:

Party # 1 b(3) CPSA Section 25(c), b(6) [redacted] was driving Vehilce # 1 (Yamaha Rhino) in "Glamis". P-1 was following Witness # 1 b(6) [redacted] Witness # 2 b(6) [redacted], Witness # 3 b(6) [redacted] and Witness # 8 b(6) [redacted], who were all riding four wheelers. He was being followed by Witness # 4 b(6) [redacted]. P-1 drove V-1 up an approximately 20 foot sand dune and began traveling in a southerly direction, on top of the dune. P-1 then turned V-1 to the left and intended to drive down the east side of the dune. As V-1's front tires hit the side of the dune, V-1 began to slide sideways. P-1 was unable to maintain control of V-1 and V-1 continued to rotate in a counterclockwise direction and overturned several times on the east side of the dune. During the roll over, Passenger # 1 b(3) CPSA Section 25(c),(b)(6) [redacted] was partially ejected from the V-1. The right side of V-1's roll cage struck V-1's neck and face. Passenger # 1 sustained major head and neck trauma from the roll cage and was pronounce deceased at 1344 hours by b(6) [redacted] of El Centro Regional Medical Center. V-1 came to rest partially on top of Passenger # 1 on its right side. V-1 was moved prior to my arrival to allow extrication of Passenger # 1. The summary was based on statements, physical evidence found at the scene, and injuries sustained by Passenger # 1.

AREA OF IMPACT:

The area of the accident was determined by Physical evidence. The area of the accident was located at GPS coordinates 32 degrees 56' 10.2" North and 115 degrees 04' 02.2" East. The area of impact was determined by GPS.

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
b(6) [redacted]		03/01/2008		

STATE OF CALIFORNIA
NARRATIVE/SUPPLEMENTAL

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
02/23/2008	1243	9625	b)(3) CPSA Section 25(c),(b)(6)	

INTOXICATION NARRATIVE:

Party # 1 b)(3) CPSA Section 25 c),(b)(6) stated at the scene that he had consumed two Coors Light brand beers approximately 2 hours prior to the collision. I did not smell any odor of an alcoholic beverage on his breath or his person. P-1 did not display any signs of alcohol intoxication at the scene after the collision. P-1's eyes did not display any type of horizontal gaze nystagmus; therefore, I did not administer any other Field Sobriety Tests to him at the scene.

CAUSE:

Party # 1 b)(3) CPSA Section 25(c), b)(6) caused this collision by driving Vehicle # 1 (Yamaha Rhino) in violation of section 38305 VC, which states that no person shall drive an off- highway motor vehicle at a speed greater that is reasonable or prudent and in no event at a speed which endangers the safety of other persons or property. P-1 drove V-1 at a speed that he was unable to maintain control of V-1 as it drove down an sand dune.

RECOMMENDATIONS:

I recommend a copy of this report be submitted to the Imperial County District Attorney's Office for review, charging P-1 b)(3) CPSA Section 25(c), b)(6) with a violation of section 192 (c) 2 PC- Vehicular Manslaughter.

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
b)(6)		03/01/2008		

RENTAL AGREEMENT AND WAIVER OF LIABILITY

Date: 2-23-0

08 02 43

#11

The undersigned hereby RhinosRent.com, LLC a California corporation, ("RhinosRent") the following described all-terrain vehicle (ATV) or equipment for a limited period of time, upon the following terms and conditions.

RENTER AND EQUIPMENT INFORMATION

FULL NAME | DRIVERS LICENSE NUMBER | DATE OF BIRTH

b(3) CPSA Section 25(c),(b)(6)

[redacted]

HOME TELEPHONE NUMBER | EMAIL ADDRESS - REQUIRED | CELLULAR PHONE

b(3) CPSA Section 25(c),(b)(6)

[redacted]

ATV / OR EQUIPMENT	INITIAL HOURS	RENTAL AMOUNT	DEPOSIT	SCHEDULE STRT TIME	EQUIP. NO.	ACTUAL STRT TIME	END TIME	ADDITIONAL CHARGES HOURS / CHRGS / DAMAGES	ADD. CHRGS. AMOUNT
11	7.27	$225	$1000	1130	11			Rot Sway 11	50
		$	$						$
		$	$						$
		$	$						$
	TOTALS	$	$					TOTAL ADD. CHARGES	$

NO WARRANTY - INHERENTLY DANGEROUS ACTIVITY - NO INSURANCE PROVIDED RhinosRent makes NO WARRANTY of any kind, nature or description, express or implied, as to the quality and manufacture, safety, durability or fitness for any particular purpose of any vehicle or equipment covered by this agreement. The undersigned and any additional riders identified herein accept any vehicle or other equipment provided by RhinosRent, in an "as is" condition with all faults. The undersigned hereby acknowledge that riding ATVs is the same dangerous and hazardous as California with other like vehicles and that it is a dangerous activity, with a high risk of serious bodily injury or death to others or myself. RhinosRent strongly urges any renter and other users to have medical insurance prior to engaging in this activity. RhinosRent, LLC does not provide medical insurance and advises that serious injuries can be financially devastating. The undersigned and all additional riders hereby personally accept all risks and liabilities of this activity. It has been explained to the undersigned and I understand that by executing this document I am giving up important legal rights. It is my honest intention to give up these rights and in good faith to release and release RhinosRent, of any duty (legally owed) to me arising out of the conduct of this activity.

TERMS AND CONDITIONS - READ THIS CAREFULLY

1. **RULES OF OPERATION.** I agree to know and be bound by the General ATV Operation Rules on the next page and made a part of this agreement.

2. **NOTIFICATION OF CALIFORNIA VEHICLE CODE (CVC) REQUIREMENTS.** CVC§38500(b). All customers under age 18 without an ATV Safety Institute (ASI) CertificateCard shall be supervised by an adult with the CertificateCard. CVC§38504(c). All customers under age 18 without adult supervision shall possess an ASI Safety CertificateCard. CVC§38506. All customers under age 14 shall be under the direct supervision of an adult with the ASI CertificateCard. I understand that failure to possess the CertificateCards is a crime offense.

3. **LIMITATION OF USE AND RESPONSIBILITY FOR LOSS OR DAMAGE.** I agree that only the persons named or otherwise identified in this agreement will operate the rented ATV(s), other vehicle(s), or equipment and that passengers will not be carried on any ATV. Riders under the age of 18 years must provide RhinosRent with a written consent from a parent or legal guardian. Should any undersigned person, any minor child under my control or any other person with permission of any undersigned operate any above referenced vehicle or equipment in such a manner or fail to exercise adequate care of the same so as to result in theft, loss of or damage to such vehicle or equipment, I agree to be personally liable and financially responsible for all loss of and damage caused to any ATV, other vehicle or equipment covered by this agreement, regardless of whether or not I have initialed a damage deposit. I AGREE TO PAY FOR ALL SUCH LOSS OR DAMAGE. I also agree to pay for the loss of use of any ATV or other vehicle covered by this agreement damaged by myself or other users, at the rate of $60 per day from the date of damage until repaired and returned to rental service, not to exceed 14 days. I hereby authorize to charge my credit card account provided as part [redacted] damage and loss of use charges. I may not make the terms of this agreement, a

b(3) CPSA Section 25(c),(b)(6)

4. **ASSUMPTION OF RISK.** I represent [redacted] ss or damage to any ATV or other equipment obtained from RhinosRent, for the death or injury to any person or property and for all other risks and liabilities arising from the use, ownership and possession of the above identified ATV or any other ATV and/or equipment received or obtained from RhinosRent.

5. **WAIVER AND RELEASE OF CLAIMS.** The undersigned, on behalf of myself, my spouse (if any), my child, any minor for whom I am the guardian, my heirs and successors in interest, now and forever waive, release and discharge Rhinos For Rent, its shareholders, directors, officers, employees, agents, successors and assigns from any and all claims, demands, losses, expenses, damages, liabilities, actions, causes of action of any nature, including but not limited to personal injury, wrongful death and property damage, that in any manner arise from or relate to the rental, use and/or operation, condition or possession of the above referenced ATV and any other ATV or other equipment received and/or obtained from RhinosRent. This waiver and release extends to and includes any and all claims, liabilities, injuries, damages and causes of action that the parties do not presently anticipate, know, or suspect to exist, but that may develop, accrue, or be discovered in the future. THE UNDERSIGNED EXPRESSLY WAIVES ALL RIGHTS UNDER CALIFORNIA CIVIL CODE SECTION 1542, WHICH PROVIDES: "A general release does not extend to claims which the creditor does not know or suspect to exist in his favor at the time of executing the release, which if known by him must have materially affected his settlement with the debtor." The undersigned represents and warrants that he or she has considered the possibility that claims, liabilities, injuries, damages and causes of action may develop, accrue or be discovered in the future, and he or she voluntarily assumes that risk as part of this agreement.

6. **COVENANT NOT TO SUE.** I agree and covenant on behalf of myself, my children and any minor for whom I am the guardian, I will never directly or indirectly institute any legal, equitable, administrative, or other action, complaint, or proceeding against RhinosRent or any shareholder, director, officer, employee, agent, successor or assign thereof, or in any manner assist any third-party or person against RhinosRent and its shareholders, directors, officers, employees, agents, successors and assigns thereof, among both or pertaining to the condition, possession, use and/or operation of the above referenced ATV or any other ATV or equipment received and/or obtained from RhinosRent. This covenant applies and extends to any and all claims, liabilities, injuries, injuries, losses, damages, and causes of action that I do not presently anticipate, know, or suspect to exist, but that may develop, accrue, or be discovered in the future.

7. **INDEMNIFICATION.** The undersigned shall indemnify, defend (by counsel reasonably acceptable to indemnitee), protect and hold Rhinos4 Rent, its shareholders, directors, officers, employees, agents, successors and assigns, free and harmless from and against any and all claims, liabilities, penalties, fines, or expenses (including attorneys' fees) for death of or injury to any person or damage to any property whatsoever, arising from or caused in whole or in part, directly or indirectly, from the rental, use and/or operation, condition or possession of the above referenced ATV or other equipment received or obtained from RhinosRent. The undersigned hereby shall indemnify Rhinos For Rent, its shareholders, directors, officers, employees, agents, successors and assigns against any losses, costs or expenses, including attorneys' fees, resulting from a breach of this agreement.

8. **PARTIAL INVALIDITY / CHOICE OF LAW.** Should any provision of this agreement be held by a court of competent jurisdiction to be void, illegal or unenforceable, the remaining provisions of the agreement shall remain in effect. This agreement, covenant, waiver and release shall be governed and

		1	2				00 02 44
	TOTALS:	$	$				TOTAL ADD. CHARGES: $

NO WARRANTY - INHERENTLY DANGEROUS ACTIVITY - NO INSURANCE PROVIDED. Rhinos4Rent makes NO WARRANTY of any kind, nature or description, express or implied, as to the quality and manufacture, safety, durability or fitness for any particular purpose of any vehicle or equipment provided by this agreement. The undersigned and any additional riders hereby accept any vehicle or other equipment provided by Rhinos4Rent, in its "as is" condition with all faults. The undersigned hereby acknowledge that using ATVs in the sand dunes and deserts of California with other like vehicles are rides in a dangerous activity, with a high risk of serious bodily injury or death to others or myself. Rhinos4Rent strongly urges any rider and other riders to have medical insurance prior to engaging in this activity. Rhinos4Rent LLC does not provide medical insurance and advises that serious injuries can be financially devastating. The undersigned and all additional riders hereby personally accept all risks and liabilities of this activity. It has been explained to the undersigned and I understand that by executing this document I am giving up important legal rights. It is my further intention to give up those rights and in good faith to relieve and release Rhinos4Rent, of any duty legally owed to me in relation to the conduct of this activity.

TERMS AND CONDITIONS - READ THIS CAREFULLY

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3. **LIMITATION OF USE AND RESPONSIBILITY FOR LOSS OR DAMAGE.** I agree that only the persons signing or otherwise identified in agreement will operate the rented ATV(s), other vehicle(s), or equipment and that passengers will not be carried in any ATV. Failure under the age of 18 y may prevent Rhinos4Rent with a written consent from a parent or legal guardian. Should any undersigned person, any minor child under my control or any other person with possession of any undersigned operate any above referenced vehicle or equipment in such a manner or fail to exercise adequate care the same to as to result in their loss of or damage to such vehicle or equipment, I agree to be personally liable and financially responsible for all loss of damage caused to any ATV, other vehicle or equipment covered by this agreement, regardless of whether or not I have furnished a damage deposit. I AGREE TO PAY FOR ALL SUCH LOSS OR DAMAGE. I also agree to pay for the loss of use of any ATV or other vehicle covered by this agreement, damage myself or other riders, at the rate of $50 per day from the date of damage/loss reported and reviewed in rental service, not to exceed 14 days. I hereby authorize to charge my credit card account provided as payment [redacted] damage and loss of use charges I may incur under the terms of this agreement. X [redacted]

4. **ASSUMPTION OF RISK.** I expressly and voluntarily assume all risk and liability for the loss or damage to any ATV or other equipment obtained from Rhinos4Rent, for the death or injury to any person or property and for all other risks and liabilities arising from the use, condition and possession of the above identified ATV or any other ATV and/or equipment received or obtained from Rhinos4Rent.

5. **WAIVER AND RELEASE OF CLAIMS.** The undersigned, on behalf of myself, my spouse (if any), my child, any minor for whom I am the guardian by birth and personally in my own, my and forever waive, release and discharge Rhinos For Rent, its shareholders, directors, officers, employees, agents, successors and assigns from any and all claims, demands, losses, expenses, damages, liabilities, actions, causes of action of any nature, including but limited to personal injury, wrongful death and property damage, that in any manner arise from or relate to the rental, use and/or operation, condition, possession of the above referenced ATV and any other ATV or other equipment received and/or obtained from Rhinos4Rent. This waiver and release extends to and includes any and all claims, liabilities, injuries, damages, and causes of action that the parties do not presently anticipate, know, or suspect exist, but that may develop, accrue, or be discovered in the future. THE UNDERSIGNED EXPRESSLY WAIVES ALL RIGHTS UNDER CALIFORNIA CIVIL CODE SECTION 1542, WHICH PROVIDES: "A general release does not extend to claims which the creditor does not know or suspect to exist in his favor at the time of executing the release, which if known by him must have materially affected his settlement with the debtor." The undersigned expressly and voluntarily waives the benefit of the possibility that claims, liabilities, injuries, damages and causes of action may develop, accrue or be discovered in the future and agrees that such waiver is part of this agreement.

6. **COVENANT NOT TO SUE.** I agree and covenant on behalf of myself, my children and any minor for whom I am the guardian, I will never direct, personally initiate any legal, criminal, administrative, or other action, complaint, or proceeding against Rhinos4Rent or any shareholder, director, officer, employee, agent, successor or assign thereof, or in any manner assert any further claim or demand against Rhinos4Rent and its shareholders, directors, officers, employees, agents, successors and assigns thereof, arising from or pertaining to the condition, possession, use and/or operation of the above referenced ATV or any other ATV or equipment received and/or obtained from Rhinos4Rent. This covenant applies and extends to any and all claims, liabilities, injuries, expenses, losses, damages, and causes of action that I do not presently anticipate, know, or suspect to exist, but that may develop, accrue or be discovered in the future.

7. **INDEMNIFICATION.** The undersigned shall indemnify, defend (by counsel reasonably acceptable to indemnitee), protect and hold Rhinos4Rent, its shareholders, directors, officers, employees, agents, successors and assigns, free and harmless from and against any and all claims, liabilities, penalties, losses, or expenses (including attorney's fees) for death of or injury to any person or damage to any property whatsoever arising from or caused, whole or in part, directly or indirectly, from the rental, use and/or operation, condition or possession of the above referenced ATV or any other ATV or equipment received or obtained from Rhinos4Rent. The undersigned likewise shall indemnify Rhinos For Rent, its shareholders, directors, officers, employees, agents, successors and assigns against any losses, costs or expenses, including attorney's fees, resulting from a breach of this agreement.

8. **PARTIAL INVALIDITY / CHOICE OF LAW.** Should any provision of this agreement be held by a court of competent jurisdiction to be either in or unenforceable, the remaining provisions of the agreement shall remain in effect. This agreement, covenant, waiver and release shall be governed and construed under the laws of the State of California.

9. **EXPENSES OF ENFORCEMENT.** In the event of any legal action with respect to this agreement, the prevailing party in any such action shall be entitled to reasonable attorneys fees and all costs and expenses incurred in pursuit thereof.

10. **ENTIRE AGREEMENT, NO ORAL MODIFICATION.** This instrument will constitute the entire agreement between the parties. Any proposed bond shall be mailed or expressly [redacted] and corporate representation of Rhinos4Rent.

11. **PARENTAL CONSENT.** I [redacted] am the parent or legal guardian of the minor(s) identified below. I hereby consent that the above listed ATV or any other vehicle or equipment I may rather from Rhinos4Rent may be used and operated by said minor(s) in accordance with the terms of this agreement. I shall be personally responsible for said minor(s) following and abiding by the rules and terms of this agreement.

I, the undersigned, certify that I have read the Rental Agreement and Waiver of Liability and understand the contents of the document, provide it voluntarily in good faith and with full knowledge of its contents.

Dated: 2-23-08 RENTER / OPERATOR / PARENT / ADDITIONAL RIDER

b)(3) CPSA Section 25(c),(b)(6) [redacted]

PRINT NAME	AGE	SIGNATURE	PRINT NAME	AGE	SIGNATURE
PRINT NAME	AGE	SIGNATURE	PRINT NAME	AGE	SIGNATURE
PRINT NAME	AGE	SIGNATURE	PRINT NAME	AGE	SIGNATURE

08 02 43

Rules, Restrictions and Acknowledgements

1. **Only adult riders** who have read and signed the Rental Agreement and Waiver of Liability ("Agreement"), or a minor whose parent or guardian has signed the agreement on their behalf, shall operate any ATV.
   X [redacted]
2. Drive safely at all times while operating an ATV. Additionally, wearing gloves, goggles, long pants, long sleeve shirt or jacket and protective hair wear will reduce risk of injury.
3. Do not operate an ATV in any manner other than with both hands on the steering wheel, both feet beside vehicle and sitting on the seat with safety belt properly fastened.
4. Obey posted signs & do not ride faster than posted speed limit. Stay out of closed areas.
5. Do not carry passengers other than originally intended on vehicle (2 persons max more).
6. Do not participate in any race or other contest.
7. **EMERGENCY instructions**: Contact Gilmore Offroad at 951-314-9430
8. No alcohol consumption before or during use of ATV.
9. Watch out for drifts and sand bowls. They vary from one to 80 feet. Be Careful!
10. **ENGINE HOURS**- 8 hours of engine time will be allowed per rental day. Any additional engine hours will be billed at $35.00 per hour (the dash has a meter).
    [redacted]
11. **[redacted] YOUR RHINO at night!**
    Do not park and leave vehicle unattended.
    [redacted]
    X
12. Anyone not following the rules of the State park can and will be escorted back to RhinoRent and their riding time will be forfeited.
13. There are no refunds for early returns.
14. There are no refunds for rain or inclement weather.
15. **Credit Card charges/ Deposits**: it takes 7-10 working days for charges to post and for the authorized amount to fall off of your account.
16. **FUEL**: All rental units **must be returned with a full tank of gas**. Failure to do so will result in a $40.00 charge. Fuel is available at Williams Dunes Storage across the highway.
    [redacted] [redacted]
17. **RETURNS/Check-in**: All Vehicles must be returned between 8:30 AM and 9:00 AM on the date due back. In the event of a late return there will be a charge assessed in the amount of $75.00 per hour or fraction thereof. DROP OFF YOUR RHINO AT GILMORE OFFROAD next door.
    [redacted]
18. **Drop off inspection/ Damages**: All Vehicles will be inspected for damage when returned by Gilmore Off Road next door. RhinoRent will notify customer within 3-4 days of the total damage to the vehicle. (This will allow our technician the opportunity to perform a complete inspection) Damages will be paid from the renter's credit card authorization. Labor is calculated at $75.00 per hour and all parts costs are determined by Yamaha dealer [redacted] of any damage will emailed (be sure your email address is on front page)

INITIAL HERE

SIGN HERE [redacted]

Email Address Required:

08 02 43

Pre-Ride Checklist:

( ) TIRES: Always maintain proper pressure in the tires and be sure all tires are inflated to the same pressure. If the pressure in a tire is not the same as the tire opposite it, the UTV may be difficult to maneuver. UTV's have low pressure tires (usually 8 psi) and require a low pressure tire gauge, an automotive gauge will not work. Also check tires for cuts or gouges that could leak or cause a blowout.
( ) WHEELS: Lug nuts should also be tight and none should be missing.
( ) BRAKES: Always make sure all brakes are working properly before driving.
( ) THROTTLE: The throttle should operate smoothly and snap back to the idle position when released. If it has any issues please contact Rhinos4Rent.com immediately for service.
( ) LOOSE NUTS OR BOLTS: Driving on rough terrain may cause nuts and bolts to loosen. While the engine is off, check for loose nuts or bolts.

( ) LIGHTS AND SWITCHES: The ignition switch should be functioning properly before Driving. All lights must be working when riding at night, but they also make riding during the day safer.
( ) OIL AND FUEL: There is an oil light on the dash that will light up if the oil level becomes dangerously low. The engine must be stopped immediately to prevent damage and Rhinos4Rent.com must be made aware of the problem as soon as possible. An engine cannot operate for long without oil. Always check fuel level before starting a long ride. Make sure that there are no fuel or oil leaks.
( ) TOOL KIT: The ATV is equipped with complete tool kit, supplied by the manufacturer.

I have read and understand the Rhino safety checklist

(b)(3):CPSA Section 25(c),(b)(6)

SIGN HERE

Rhinos4Rent.com

08 02 43

Pre-Ride Checklist:

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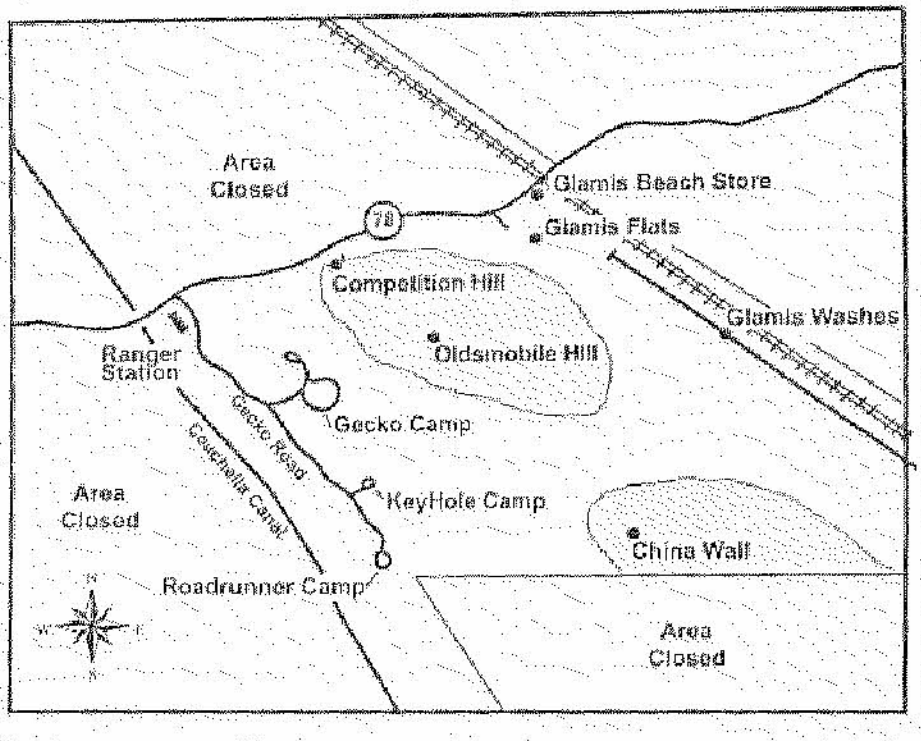
I have read and understand the Rhino safety checklist

SIGN HERE

Rhinos4Rent.com

08 02 43

Driving Area Exclusions and Closure Map



DRIVING IN THE SHADED AREAS AS WELL AS THE AREAS THAT HAVE BEEN MARKED "CLOSED" IS PROHIBITED AND MAY RESULT IN A LOSS OF DEPOSIT AS WELL AS A FINE.

(b)(3):CPSA Section 25(c),(b)(6)

SIGN HERE

Date

08 02 43

2-23-08

NAME DATE / /

RHINOS 4 RENT

This Rhino was in the following condition when Rented on the date above

Rhino Number: 11

Please make note of any damage or blemishes prior to rental.

Mark N/A if there is no damage.

(b)(3):CPSA Section 25(c),(b)(6)

SIGN HERE

08 02 43

Rhinos 4 Rent Check in Sheet

Rhino # 11

DATE 2-23-08

Customer (b)(3):CPSA Section 25(c),(b)(7)(A)

	Check Out	Check In	Damaged	Description
HOURS	72.7			
FUEL LEVEL	FULL			
L SEAT				
L SEAT BELT	Dirty/Stains		✓	
L CAGE				
LF WHEEL/TIRE				
LF FENDER				
L SPINDLE				
L TIE ROD END				
LF CV JOINTS				
STEERING RACK				
HOOD				
F BUMPER				
RF WHEEL/TIRE				
RF FENDER				
R SPINDLE				
R TIE ROD END				
RF CV JOINTS				
RADIATOR FLUID				
R CAGE	Light Damage		✓	Scratches
R SEAT				
R SEAT BELT				
RR WHEEL/TIRE				
RR CV JOINTS				
R QUARTER PANEL				
TAILGATE				
LR WHEEL/TIRE				
LR CV JOINTS				
L QUARTER PANEL				

Customer (b)(3):CPSA Section 25(c),(b)(6)

08 02 43

Incident Worksheet

Date: 2/23/08 Time: 1242

Reported By: CHP JCSO Walk-in RP Other SB

b)(3):CPSA Section 25(c),(b)(6)

Location: Wash 20 The wall
32 56 10.2 115 04 02.2

Units Responding: ~~[illegible]~~ Rescue #1 Time on scene:
6740 + 2650 Rescue #2

Rescue Buggy: yes no Driver: Time on scene:

Ambulance called: yes no Time called: ETA: Time on scene:
2650 Cold Cross

Helicopter called: yes no Time called: ETA: Time on scene:

No. of injured subjects: 1

Type of incident/injuries:
Possible Broken neck CPR in Progress
For 45 mins

Stage ambulance at: Road Runner

Time clear of incident:

Imperial County Coroner's Office

328 Applestill Rd., El Centro, CA 92243 Phone: (760) 339-6328 Fax: (760) 339-6330

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Coroner Case Number: 08-031

Stephanie Ann Kadin

CLASSIFICATION	Manner of Death: Accident (Vehicle)	Sub Manner of Death			Deputy Coroner: Henry Proo
	Type of Medical Examination: Autopsy	Time Departed: 1410	Time Arrival: 1520	Date of Death: 02/22/2008	Time of Death: 1344
DECEDENT PERSONAL DATA	Name-First: (b)(6) redacted	Middle:	Last:		Marital Status: Married
	Age: 26	Date of Birth: 02/05/1982	Place of Birth: United States	Height: 5' 08"	Weight: 160
	Hair: Brown	Eyes: Brown			
	Sex: F	Teeth: Natural	Race: White		SSN: (b)(6) redacted
	Scars, Marks, Tattoos				
RESIDENCE	Address: (b)(6) redacted		City: Yucipa	State: Californ	Zip:
				County: Imperial	
PLACE OF DEATH	Place: Open Desert-Glamis				
	Address: (b)(6) redacted		City: Glamis	State: CA	
REPORTING INFORMATION	Death Reported By: (b)(6) redacted	Agency:	Date: 02/23/2008	Time: 1350	Removed From Scene To: Coroner's Facility
	Address:		City:	State:	Zip:
CAUSE OF DEATH	Immediate Cause: Chest Injuries				
	Due to: Blunt Force Trauma				
	Due to:				
	Due to:				
OTHER SIGNIFICANT CONDITIONS	None				
INJURY INFORMATION	Place of Injury: open desert-Glamis		Injury at Work?: No	Date of Injury: 2/23/2008	Time: 1230
	Address of Injury: (b)(6) redacted		City: Glamis	County: Imperial	State: CA
	Injury Description: Decedent was front seat restrained passenger in Rhino ATV, vehicle was travelling downhill and it rolled several				
IDENTIFICATION	Identification Method: Visually		Identified By: Husband		
NOTIFIED	Name: (b)(6) redacted	Relationship: Spouse	Mailing Address: (b)(6) redacted		
	Notified By: paramedics on scene		How Notified: In Person	Date: 02/23/2008	Time: 1344
ADDITIONAL INFORMATION	Physician:	Other Investigation: CHP EC		Funeral Home: Frye Chapel & Mortuary	

The Foregoing Instrument Is A Correct Copy Of The Original On File In This Office.
Attest: _____ Sheriff-Coroner
County Of Imperial, State of California
By _____ Deputy

Raymond Loera, Sheriff-Coroner

Henry J. Proo
Henry Proo Deputy Coroner

Charles R. Lucas Supervising Deputy Coroner

COPY

DEPUTY CORONER:

I, Henry J. Proo, Deputy Coroner Investigator, conducted this investigation for the Imperial County Coroner's Office.

RECEIPT OF CALL:

On Saturday, February 23, 2008, at approximately 1350 hours, I received a telephone call at home from the Imperial County Sheriff's Office Communication Center, advising me of a coroner case involving a deceased person located in Glamis, I immediately responded to that location.

ARRIVAL AT SCENE:

On Saturday, February 23, 2008, at approximately 1520 hours, I arrived at the scene and met with California Highway Patrol Officer Gilbert Caldera, who directed me to the decedent's location.

DESCRIPTION OF SCENE / GPS:

The scene is that of very remote sand dunes in an area locally known as Lizards Ridge. This is an area several miles from flat ground and is accessible only by specialized vehicles made for travel in this type of terrain.

The G.P.S. for the decedent's location is (b)(6)

VIEWING OF DECEDENT:

Upon my arrival I see that the decedent is lying supine on the sand partially covered by a yellow emergency blanket. Upon removal of the blanket, I see that the decedent has suffered injuries consistent with a smaill vehicle rollover in the soft sand of the desert.

COPY

The decedent did show signs of rigor, lividity and cyanosis. I did not observe any signs of foul play type trauma to the decedent's person.

The decedent is a white female adult, 25 years of age, 5'8" tall, weighing approximately 160 lbs, with brown hair and brown eyes. I further noted the decedent was wearing black M/C boots, black and red M/C pants, black and silver M/C shirt, white socks, white panties and a white bra.

PROPERTY:

While at the scene I initiated an Imperial County Coroner's Office property receipt with number 1816, to reflect that the following property was retained by the Imperial County Coroner's Office and is as follows:

1) 2 white metal watches
2) A pair of white metal earrings
3) Eye liner
4) Bic lighter

On Tuesday, February 26, 2008, at approximately 0933 hours, I released the decedent's property to Frye Chapel.

REMOVAL / TRANSPORTATION:

Prior to removal the decedent was placed in a removal pouch and then transported to the Imperial County Coroner's Facility, located at 799 Highway 86, Brawley, CA.

IDENTIFICATION:

The decedent's husband identified her as (b)(6) with a date of birth of February 5, 1983.

COPY

NOTIFICATION:

BLM paramedics made notification to the decedent's husband, (b)(6) on Saturday, February 23, 2008, at approximately 1344 hours.

X-RAYS:

No x rays were taken of the decedent.

POST MORTEM EXAMINATION:

On Tuesday, February 26, 2008, at approximately 0935 hours, a post mortem examination was conducted under the direction of Darryl J. Garber, M.D., Forensic Pathologist. Present at the post mortem examination was Autopsy Assistant Victor Solorio and I.

At the conclusion of the post mortem examination at approximately 1016 hours, Dr. Garber listed the cause of death as:

(A) Chest Injuries

(B) Blunt Force Trauma

FINGERPRINTS / PHOTOGRAPHS:

I took fingerprints of the decedent during the post mortem examination.

I took photographs of the scene and I also took photographs during the post mortem examination.

INVESTIGATION:

Subsequent investigation revealed that the decedent and her husband had rented a Rhino off-road ATV and were with a group of friends and family driving through an area deep in the Glamis Sand Dunes Recreation Area. They had been driving along a ridge top when the husband turned downhill to follow a

COPY

different trail. As the Rhino was going down the hill, it began to roll over. The decedent was somehow caught under the ATV during one of its rollovers and received fatal crushing chest injuries and died at the scene. It is reported that the decedent was wearing her seatbelt at the time of the accident.

Based upon all of the evidence and autopsy information, this case has been classified as an **accidental** death by, the Imperial County Coroner's Office and me.

TOXICOLOGY TESTS:

On Tuesday, February 26, 2008, during the post mortem examination, a sample of the decedent's central blood and urine was retained for toxicology testing.

Due to a cause of death being identified at the post mortem examination, no toxicology tests were done. The samples taken during the post mortem examination are stored for future examination if required.

WITNESSES:

1. Darryl J. Garber, M.D., Forensic Pathologist, Rancho Mirage, CA
2. Victor Solorio, Autopsy Assistant, Imperial County Coroner's Facility, Brawley, CA
3. Henry J. Proo, Deputy Coroner Investigator, Coroner's Office, Imperial County Sheriff's Office, El Centro, CA
4. Gilbert Caldera, Highway Patrol Officer, California Highway Patrol, El Centro, Ca

COPY

REFERENCE NOTES:

1. Death certificate as filed with the Imperial County Health Department in file
2. Autopsy protocol as per Dr. Garber in file
3. Imperial County Coroner's property receipt numbered 1816 in file
4. Digital photos in file on disk
5. Fingerprints in file
6. California Highway Patrol Report, Police Department Report with a number of 08 02 43, as completed by Officer Caldera in file

Raymond Loera
Sheriff-Coroner
Imperial County, CA

BY: Henry J. Proo

Henry J. Proo
Deputy Coroner

RL/HJP

COPY

CORONER'S OFFICE
COUNTY OF IMPERIAL

IMPERIAL COUNTY CALIFORNIA

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RAYMOND LOERA
Sheriff-Coroner-Marshal

DARRYL J. GARBER, M.D.
Chief Forensic Pathologist

AUTOPSY PROTOCOL

NAME OF DECEDENT: (b)(6) CORONER'S CASE: #08-031

ANATOMIC SUMMARY:

I. Blunt force trauma

A. Chest injuries

1. Multiple rupture/lacerations, bilateral lungs
2. Transected main stem bronchus of upper lobe, right lung
3. Transected pulmonary vein of upper lobe, right lung
4. Bilateral hemothoraces (950 cc right, 1,140 cc left)
5. Ruptured liver

B. Multiple abrasions and contusions, face and torso

CONCLUSION: (Cause of Death)

A) Chest injuries

B) Blunt force trauma

OTHER SIGNIFICANT CONDITIONS: None

DATE AND TIME OF AUTOPSY: February 26, 2008 @ 9:35 am to 10:16 a.m.

The Foregoing Instrument Is A Correct Copy Of The Original On File In This Office.
Attest: _____ Sheriff-Coroner
County Of Imperial, State of California
By _____ Deputy

P.O. Box 1040, El Centro, Ca. 92244-1040 / Phone (760) 339-6511 / Fax (760) 339-6548 www.icsd.org
An Equal Opportunity Employer

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NAME OF DECEDENT: (b)(6) CORONER'S CASE: #08-031
PAGE TWO

EXTERNAL EXAMINATION: The body is that of a well-developed and well-nourished young white woman which appears to be about the stated age of 25 years old, weighing approximately 160 pounds and measuring approximately 68" in height. The body is in rigor mortis. There are no significant scars over the body. There are multiple tattoos over the central lower back, right lateral ankle and right ventral wrist as shown in the accompanying wrist. No tracks or needle marks are noted. There are multiple injuries over the body which will be separately described. The hair is brown. The head is not remarkable except for the injuries to be described. The eyes are brown. The eyes and ears show no abnormality. The nose and mouth are normal. The chest and abdomen show no abnormality except for some injuries to be described. Genitalia are those of a normal adult female. The extremities show no injuries.

DESCRIPTION OF INTERNAL INJURIES: There are multiple 3 to 6 cm red and purple facial abrasions and contusions involving the forehead, cheeks, nose, mouth and below the left ear with diffuse facial swelling. There are multiple 1 to 4 x 6 cm yellow-orange abrasions over the precordium of the anterior chest and periumbilical region of the abdomen. There is a 4 x 6 cm red abrasion over the left upper back and an 8 x 15 cm red abrasion over the central lower back.

DESCRIPTION OF INTERNAL INJURIES: Examination of the chest reveals 950 cc of liquid and clotted blood in the right pleural cavity, 1140 cc of liquid and clotted blood in the left pleural cavity. The lungs show bilateral atelectasis. There is an 11.1 cm vertical rupture/laceration of the lower lobe of the left lung. There is a 6.9 cm rupture/laceration of the lower lobe of the right lung. Complete transection of the main stem bronchus and pulmonary vein to and from the upper lobe of the right lung are evident respectively.

Examination of the abdomen reveals a 6.3 cm subcapsular rupture/laceration of the dome of the liver between the right and left lobes.

OPINION: These are fatal chest injuries in association with blunt force trauma leading to the rapid demise of this 25-year-old white woman.

INTERNAL EXAMINATION: The body is opened with the usual Y-shaped incision. The organs of the thorax and abdomen are in their normal positions. The pleural, pericardial and peritoneal surfaces are smooth and glistening and there are the previously described bilateral hemothoraces. The mediastinum is slightly shifted to the right. The liver is at the right costal margin.

CARDIOVASCULAR SYSTEM: The heart weighs 220 gm. The epicardium is smooth and glistening. The myocardium is firm and red-brown. The endocardium and valves are thin and glistening. The coronary arteries are normally developed and show a right predominance. The aorta is normal in caliber. The great vessels of the neck and visceral arteries are normal in size. The great veins are collapsed and empty.

COPY

NAME OF DECEDENT: (b)(6) CORONER'S CASE: #08-031
PAGE THREE

RESPIRATORY SYSTEM: The right lung weighs 340 gm, the left 250 gm. The lungs show bilateral atelectasis. The visceral pleurae are smooth and glistening and there are the previously described rupture/lacerations of the bilateral lower lobes. The cut surfaces are very pale. The larynx, trachea and major bronchi are lined by smooth glistening mucosa and there is the previously described transection of the main stem bronchus to the right upper lobe as well as the pulmonary vein from the right upper lobe.

GASTROINTESTINAL SYSTEM: The esophagus is normal. The stomach contains 120 cc of partly digested food. The small bowel contains red-brown chyme. The large bowel contains green-brown soft stool.

HEPATOBILIARY SYSTEM: The liver weighs 1,140 gm. The surface is smooth and glistening. The parenchyma is soft and focally hemorrhagic in association with the previously described subcapsular rupture/laceration. The gallbladder is normally developed and contains 7 cc of bile. The bile ducts are normally developed. The pancreas is firm and pale.

HEMATOPOIETIC SYSTEM: The spleen weighs 110 gm. The surface is smooth. The parenchyma is soft and pale. The bone marrow is firm and red-brown.

UROGENITAL SYSTEM: The right kidney weighs 90 gm, the left 100 gm. The surfaces are smooth. The cortices are well demarcated from the medulla. The renal pelves, ureters and urinary bladder are normally developed. The bladder is empty. The uterus, tubes and ovaries are normally developed.

ENDOCRINE SYSTEM: The pituitary, thyroid and adrenal glands are normal in size and configuration.

MUSCULOSKELETAL SYSTEM: The axial and appendicular skeleton is normally developed and intact.

CENTRAL NERVOUS SYSTEM: The brain weighs 1,750 gm. The cerebral hemispheres are symmetrical with normal convolutions. The leptomeninges are clear and glistening. The cortex is well demarcated from the white matter. The ventricles are normal in size and lined by smooth glistening ependyma. The cerebrospinal fluid is clear. The basal ganglia are well delineated. The cerebellum, brain stem and circle of Willis are normally developed.

FORENSIC PHOTOGRAPHY: Photographs are taken prior to beginning and during the autopsy.

FORENSIC RADIOLOGY: No x-rays of the body are taken.

COPY

NAME OF DECEDENT: (b)(6) CORONER'S CASE: #08-031
PAGE FOUR

TOXICOLOGY: Chest blood is retained in the event that toxicology becomes necessary.

HISTOLOGY: Tissue is retained in the hold jar.

OPINION: On the basis of the autopsy findings, it is evident that this 25-year-old white woman suffered from chest injuries due to blunt force trauma which resulted in her rapid demise.

Darryl A. Garber, M.D.
Forensic Pathologist

5/30/08
Date

COPY

AUTOPSY CHECK LIST

Name of Decedent: (b)(6) [redacted] File Number: 08-031

Autopsy Location: Doctor:

Date/Time:

EXTERNAL WT 160 gm
HT 68" gm
- Sclera
- Teeth
- Mouth
- Tongue
- Nose
- Chest
- Breasts
- Abdomen
- Scar Ø
- Genital
- Edema
- Skin
- Decub Ø

cond

HEART WT 220 cons
- Pericard
- Hypert
- Dilat
- Muscle
- Valves
- Coronary

cond

AORTA cond
VESSELS
LUNGS WT
- R 740
- L 250
- Adhes Ø
- Fluid 950 cc blood R, 140 cc L
- Atelectasis
- Dilat
- Edema
- Congest
- Consol
- Bronchi
- Nodes

PHARYNX
TRACHEA
THYROID
THYMUS
NECK

PERITONEUM
- Fluid
- Adhes

LIVER WT 1140
- Caps
- Lobul
- Fibros
- GB cond
- Calc Ø
- Bile ducts

6.3 cm superior margin of rt lobe dome laceration R & L lobes. ~75 cc bile

SPLEEN WT 110
- Color
- Consists
- Malpig

cond

PANCREAS
ADRENALS cond

KIDNEYS WT
- R 90
- L 60
- Caps
- Cortex
- Vessels
- Pelvis
- Ureter

cond

BLADDER cond, empty
GENITALIA
- Prost
- Testes
- Uterus
- Tubes
- Ovar

cond

OESOPHAGUS cond
STOMACH cond
DUOD & SM INT
APPENDIX +
LARGE INT
ABDOM NODES
SKELETON
- Spine
- Marrow

11.1 cm with fibrous LLL
6.9 cm with fibrous RLL
transected mainstem bronchus & pulm vein to & from RLL respectively

BRAIN WT 1750
- Dura
- Fluid
- Ventric
- Vessels
- Ears
- Nasal Sin

cond

PHOTO
- YES
- NO

TOXICOLOGY
- Blood
- Bile
- Urine
- Stomach Content
- Liver
- Brain
- Vitreous
- Spleen
- Kidney

Chart

TISSUE
- Tissue Bag
- Cassettes
- Frozen

BODY X-RAYS
- Yes
- No

ADDITIONAL COMMENTS:
120 cc partly digested food.

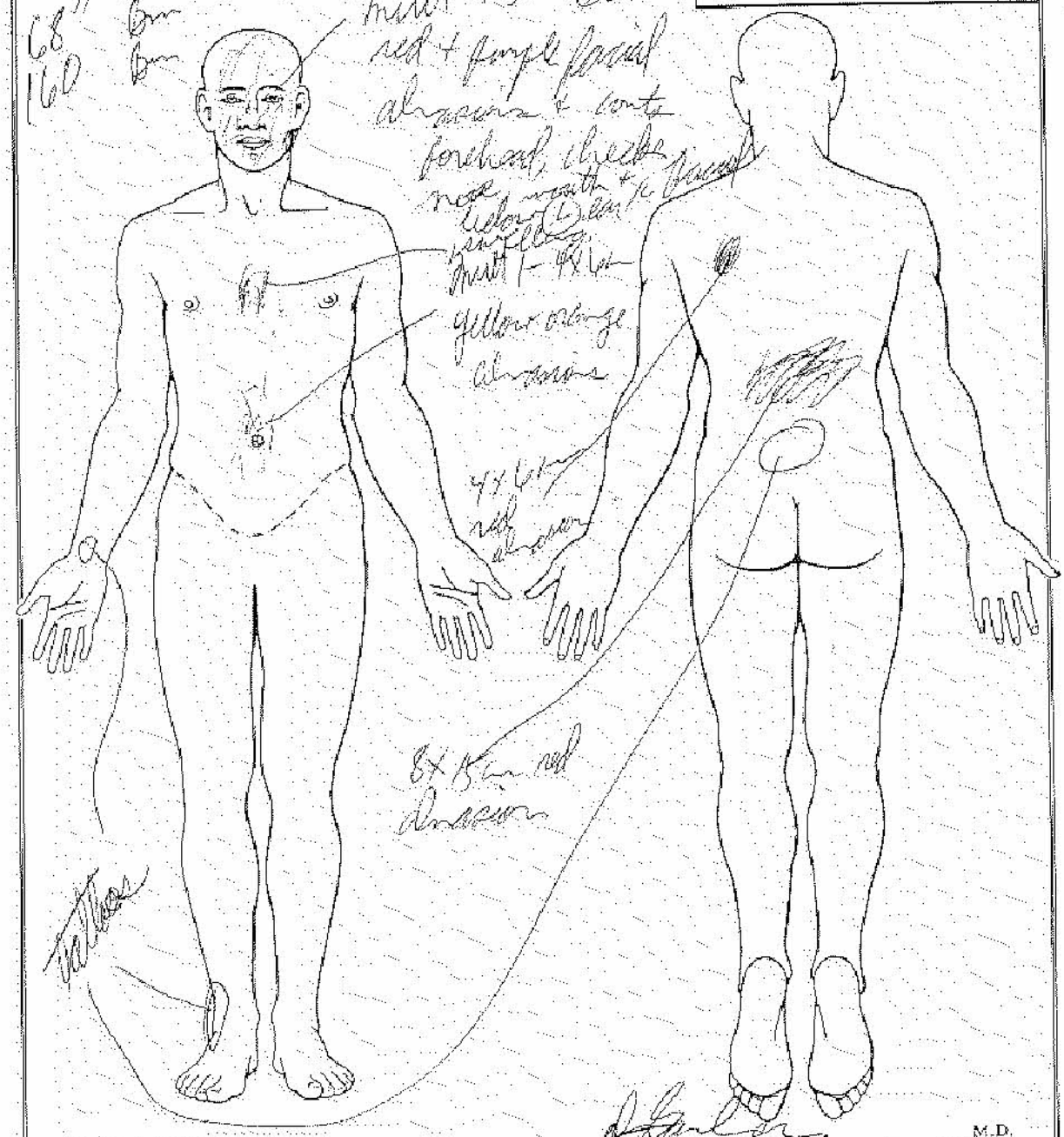
DEPARTMENT OF CORONER

20

COPY

08-031

(b)(6) [redacted]



M.D.

Deputy Medical Examiner

P-5/93

Imperial County Coroner's Office

328 Applestill Rd. El Centro, CA 92243 Phone: (760) 339-6328 Fax: (760) 339-6330

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AUTOPSY MEMO

NAME	(b)(6) [redacted]	SEX	F	HEIGHT	68"
Death DATE	02/22/2008	AGE	25	WEIGHT	160
TIME	1344	RACE	White	HAIR	Brn
PLACE	Open Desert-Glamis	COMPLX		EYES	Brn

Place of Autopsy: Imperial County Coroner's Facility, 799 Highway 86, Brawley, California, 92227

Attending Physician (if any):

SUMMARY OF CASE:

Decedent is front seat restrained passenger in Rhino ATV. Vehicle rolls as it is going downhill. Decedent's head is struck by rollbar causing fatal injuries at the scene.

LAB TESTS: ☐ Traffic ☐ Coroner ☐ Comprehensive ☐ Other

☒ Toxicology

AUTOPSY REPORT

DATE 02/26/2008 TIME ☐ NATURAL ☒ ACCIDENT ☐ HOMICIDE

PATHOLOGIST Darryl J. Garber ☐ SUICIDE ☐ PENDING ☐ UNDETERMINED

TECHNICIAN SPECIMENS RETAINED: ☒ BLOOD ☐ BILE ☐ URINE ☒ TISSUE

☐ X-RAYS TAKEN # ☐ JAWS TAKEN ☐ LIVER ☐ VIT. ☐ CSF

CAUSE OF DEATH: (A) Chest injuries – Blunt

(B) Blunt force trauma – Blunt

(C)

(D)

OTHER CONDITIONS: None

(b)(6) [redacted]

Decedent:
Case Number: 08-031

Deputy Coroner: Henry Proo, Deputy Coroner
Date 02/26/2008

Imperial County Coroner's Office

328 Applestill Rd. El Centro, CA 92243 Phone: (760) 339-6328 Fax: (760) 339-6330

AUTOPSY INFORMATION SHEET

COPY

Autopsy Date: 02/26/2008 Time Start: 0935 Time End: 1016 Seal Cut:

Coroner at Post:
Henry Proo, Deputy Coroner ☐
☐
☐

Pathologist:
Darryl J. Garber ☐
☐
☐

Autopsy Assistant:
Victor Solorio ☐
☐
☐

I.D. Division
☐
☐
☐
☐

Witnesses:

Name	Agency

NOTES:

Central Blood (time):	0957	By:	DG	Chest Blood (time):		By:	
Peripheral Blood (time):		By:		Vitreous Humor:		By:	
Urine Taken:	0959	By:	-0-	Liver for Tox:		By:	
				Bile:		By:	

Body Organ Weights (Grams):

Right Kidney:	90	Right Lung:	340	Brain:	1750
Left kidney:	100	Left Lung:	250	Stomach:	
Liver:	1140	Heart:	220	Uterus:	
Spleen:	110	Pancreas:		Other:	

68" 160 BRN/BRN
~~FR~~ RUPT RIGHT & LEFT LUNG, RUPT LIVER
HAS APPENDIX

Decedent: (b)(6) [redacted]
Case Number: 08-031

Deputy Coroner: Henry Proo, Deputy Coroner
Date: 02/26/2008

Source Identification Sheet

The Victim: (b)(3):CPSA Section 25(c),(b)(6)

LIST OF CONTACTS

1. California Highway Patrol, El Centro, CA.
2. Imperial County Medical Examiner's Office, El Centro, CA.

1/7/09

1. Task Number	2. Investigator's ID	EPIDEMIOLOGIC INVESTIGATION REPORT
080922HNE3786	8925	

3. Office Code	4. Date of Accident YR MO DAY	5. Date Initiated YR MO DAY
810	2008 09 13	2008 09 24

6. Synopsis of Accident or Complaint UPC none

The victim, a 54-year-old male, was riding solo on a 4-wheeled ATV in a deep hole/berm and he was not wearing a helmet. He came over the top edge of the berm, lost control and the ATV rolled over. He was ejected, crushed beneath the ATV and he sustained a chest injury. He was taken to a hospital, where he succumbed to his injuries.

MFR/PRVLBR NOTIFIED

COMMENTS: __YES ✓NO 2/17/11
__OVERRULED; __ATTACHED
✓EXCISIONS/FOIA EXS. 3, 2Sa, 6
✓DO NOT RE-NOTIFY __RE-NOTIFY

7. Location (Home, School, etc)	8. City	9. State
9 - SPORTS OR RECREATION PLACE	GOLDSBORO	NC

10A. First Product	10B. Trade/Brand Name	10C. Model Number
5044 - Utility Vehicles	POLARIS/RAZOR	UNKNOWN

10D. Manufacturer Name and Address
POLARIS INDUSTRIES INC./VIN: UNKNOWN
1225 Highway 169 North
Minneapolis, MN 55441

11A. Second Product	11B. Trade/Brand Name	11C. Model Number
0	NONE	NONE

11D. Manufacturer Name and Address
NONE

12. Age of Victim	13. Sex	14. Disposition	15. Injury Diagnosis
54	1 - Male	8 - Death	54 - Crushing

16. Body Part(s) Involved	17. Respondent	18. Type of Investigation	19. Time Spent (Operational / Travel)
31 - UPPER TRUNK	3 - 2nd Hand Info Only	2 - Telephone	3 / 0

20. Attachment(s)	21. Case Source	22. Sample Collection Number
9 - Multiple Attachments	05 - Newspaper	

23. Permission to Disclose Name (Non NEISS Cases Only)

○ Yes ● No ○ Verbal ○ Yes for Manuf. Only

24. Review Date	25. Reviewed By	26. Regional Office Director
12/17/2008	9093	Dennis R. Blasius

27. Distribution	28. Source Document Number
Moon, Clarice; Streeter, Robin; Kessler, Charles	N0890357A

ATTACHMENTS:

1. Incident/Investigation Report.
2. Report of Investigation by Medical Examiner.
3. Missing Document, photo of ATV.
4. Contact Information.
5. All-Terrain Vehicle (ATV) Questionnaire.

INCIDENT/INVESTIGATION REPORT

INCIDENT DATA

Agency Name: *WAYNE COUNTY SHERIFF`S OFFICE*		OCA: *2008-03001*	
ORI: *NC 0960000*		Date / Time Reported (S M T W T F S): Month 09 Day 13 Yr 2008 Time 19:45 Hrs.	
#1 Crime Incident(s): *Death Investigation*	☐ Att ☒ Com	At Found (S M T W T F S): Month 09 Day 13 Yr 2008 Time 18:45 Hrs.	Last Known Secure (S M T W T F S): Month 09 Day 13 Yr 2008 Time 18:45 Hrs.
#2 Crime Incident:	☐ Att ☐ Com	Location of Incident: *1213 Bryan Blvd, Goldsboro NC*	Offense Tract: *G6*
#3 Crime Incident:	☐ Att ☐ Com	Premise Type: *ALL OTHER*	Victim Residence Type: ☐ Single Family ☐ Multi Family

MO

How Attacked or Committed:	Forcible: ☐ Yes ☐ N/A ☒ No	Weapon / Tools: *Unknown/not Stated*

VICTIM

# of Victims: *1*	Type: ☒ Person ☐ Business ☐ Society ☐ Government ☐ Financial Institute ☐ Religious ☐ L.E. Officer Line of Duty ☐ Other/Unknown	Injury: ☐ None ☐ Minor ☐ Loss of Teeth ☐ Broken Bones ☐ Severe Lacerations ☐ Internal ☐ Unconscious ☒ Other Major	Drug/Alcohol Use: ☐ Yes ☐ Unknown ☒ No ☐ N/A

VI	Victim/Business Name (Last, First, Middle)	Victim of Crime #	DOB / Age	Race	Sex	Relationship To Offender	Resident Status
	(b)(3):CPSA Section 2	1,	05/07/1954 54	W	M		☐ Resident ☒ Non-Resident ☐ Unknown

Home Address: (b)(6)		Home Phone: (b)(6) 5
Employer Name/Address:	Business Phone:	Mobile Phone:

VYR	Make	Model	Style	Color	Lic/Lis	Vin

OTHERS INVOLVED

CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim)

Type: ☐ Person ☐ Business ☐ Society ☐ Government ☐ Financial Institute ☐ Religious ☐ L.E. Officer Line of Duty ☐ Other/Unknown

Code	Name (Last, First, Middle)	Victim of Crime #	DOB / Age	Race	Sex

Home Address:		Home Phone:
Employer Name/Address:	Business Phone:	Mobile Phone:

Type: ☐ Person ☐ Business ☐ Society ☐ Government ☐ Financial Institute ☐ Religious ☐ L.E. Officer Line of Duty ☐ Other/Unknown

Code	Name (Last, First, Middle)	Victim of Crime #	DOB / Age	Race	Sex

Home Address:		Home Phone:
Employer Name/Address:	Business Phone:	Mobile Phone:

Status Codes L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found
(Check "OJ" column if recovered for other jurisdiction)

PROPERTY

Victim #	DCI	Status	Value	OJ	QTY	Property Description	Make/Model	Serial Number

Number of Vehicles Stolen *0* Number Vehicles Recovered *0*

ID

Officer: *CANTWELL, A. M. (0054)*	ID#:	Officer Signature:	Supervisor Signature: *(0)*

Status

Complainant Signature:	Case Status: ☐ Further Investigation ☐ Inactive ☒ Closed/Cleared ☐ Closed/Leads Exhausted	Case Disposition: ☐ Unfounded ☐ Located ☐ Extradition Declined ☐ Cleared by Arrest ☐ Refuse to Cooperate ☐ Cleared by Arrest by Another Agency ☐ Death of Offender ☐ Prosecution Declined

INCIDENT/INVESTIGATION REPORT

Wayne County Sheriff's Office

OCA *2008-03001*

Status Codes L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found

DRUGS

DCI	Status	Quantity	Type Measure	Suspected Type	Check up to 3 types of activity for each: Possess	Buy	Sale	Mfg	Importing	Operating

OFFENDER

Offender Used
Alcohol/Drugs ☐ Yes ☐ Unk ☐ No ☒ N/A
Computer ☐ Yes ☐ Unk ☐ No ☒ N/A

Offender 1 Age: Race: Sex:
Offender 2 Age: Race: Sex:
Offender 3 Age: Race: Sex:
Offender 4 Age: Race: Sex:
Offender 5 Age: Race: Sex:
Offender 6 Age: Race: Sex:

Primary Offender Resident Status
☐ Resident
☐ Non-Resident
☐ Unknown

SUSPECT

Name (Last, First, Middle) | Also Known As | Home Address

Occupation | Business Address

DOB / Age	Race	Sex	Hgt	Wgt	Build	Hair Color	Hair Style	Hair Length	Eye Color	Glasses

Scars, Marks, Tattoos, or other distinguishing features (i.e. limp, foreign accent, voice characteristics)

Hat	Jacket	Shirt/Blouse	Tie/Scarf	Coat/Suit	Pants/Dress/Skirt	Socks	Shoes

Was Suspect Armed? | Type of Weapon | Direction of Travel | Mode of Travel

VYR	Make	Model	Style	Color	Lic/Lis	Vin

WITNESS

Name (Last, First, Middle)	D.O.B.	Age	Race	Sex	Mobile Phone

Home Address	Home Phone	Employer	Phone

Suspect Hate / Bias Motivated: ☐ Yes ☐ No

NARRATIVE

MO: BY ROLLING OVER THE ATV AND SUFFERING FATAL INJURIES.

THE VICTIM WAS RIDING A POLARIS RAZOR ATV. AT BUSCO BEACH ATV PARK. IT WAS SAID THAT THE VICTIM WAS RIDING IN A BOWL BURN AND CAME OVER THE TOP EDGE AND THEN LOST CONTROL OF THE ATV, ROLLING THE ATV OVER. IT APPEARED THAT THE VICTIM WAS EJECTED FROM THE ATV SUFFERING INJURIES. RESCUE WAS CALLED, WAYNE COUNTY EMS #41 ARRIVED AND THEN TRANSPORTED THE VICTIM TO WAYNE MEMORIAL HOSPITAL ER. THERE THE VICTIM SURCOME TO HIS INJURIES. THE NC HIGHWAY PATROL WAS NOTIFIED AND SGT EDWINS ALSO WAS NOTIFIED.
[09/15/2008 14:32, SHJSTURGILL, 2839, WCSO]

12008 – 08507

NORTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF THE CHIEF MEDICAL EXAMINER
Chapel Hill, North Carolina 27599-7580

REPORT OF INVESTIGATION BY MEDICAL EXAMINER

OCME USE ONLY
08-10356
Case number
SEP 23 2008
Date received
☐ Res ☐ NR

DECEDENT: (b)(3):CPSA Section 25(c),(b)(6)

RESIDENCE: Number and Street City, State County

AGE: 54 SEX: ☐ Male ☐ Female ☐ Unknown

RACE: ☐ Black ☐ Native American ☐ Oriental ☑ White ☐ Unknown

HISPANIC ORIGIN: ☐ Yes ☑ No ☐ Unknown

INFORMATION ABOUT OCCURRENCE

	DATE	TIME	ADDRESS OR FACILITY	COUNTY
ONSET OF INJURY OR ILLNESS	9-13-08	8:20 pm	Busco Beach	Wayne
DEATH	9-13-08	8:20 pm	Wayne Memorial Hospital	Wayne
VIEW OF BODY	9-14-08	8:30 pm	☐ Scene of death ☑ Hospital ☐ Funeral home ☐ Other ☐ Not viewed	
M.E. NOTIFIED	9-13-08	10:00 pm		
LAST KNOWN TO BE ALIVE	9-13-08	1:30 pm		

LAW ENFORCEMENT AGENCY: _____
OFFICER: _____ TELEPHONE: _____
Death occurred while in custody: ☐ Yes ☐ No ☐ Unknown

AUTOPSY: ☑ None ☐ M.E. Authorized ☐ Non-M.E. Autopsy facility: _____
BLOOD SAMPLE: ☑ Mailed ☐ Obtained by pathologist ☐ Reason not obtained: _____
IF CLINICAL ALCOHOL DONE, RESULT: _____ By whom: _____

PROBABLE CAUSE OF DEATH: ☐ Pending

1. Crush Injury Chest
DUE TO
2. ATV Rollover Accident
DUE TO
3. _____
DUE TO
4. _____

CONTRIBUTING CONDITIONS

MANNER OF DEATH:
☐ Natural ☑ Accident ☐ Homicide ☐ Suicide ☐ Pending

OCME REVIEW

1. _____
DUE TO
2. _____
DUE TO
3. _____
DUE TO
4. _____

CONTRIBUTING CONDITIONS
☐ Natural ☐ Accident ☐ Homicide ☐ Suicide ☐ Undetermined
Reviewer: _____ Date: 10/15/08
Information in this block supersedes that contained in space at left.

SDC
☑ None
☐ AL
☐ Dictated
☐ COG

I hereby certify that after receiving notice of the death described herein I took charge of the body and made inquiries regarding the cause of death in accordance with Article 16 of Chapter 130A of the N.C. General Statutes and the information contained herein regarding such death is true and correct to the best of my knowledge and belief.

[signature] 9-18-08 [signature]

DHHS 1114 (Revised 10/00)

MEDICAL HISTORY

☐ Alcoholism ☐ Diabetes ☐ IV drug abuse ☐ Ischemic heart disease ☐ Smoking
☐ Seizure disorder ☐ Cancer ☐ Hypertension ☐ Depression ☐ HIV/ AIDS
☐ Other _____ Attending Physician _____ City _____

MEANS OF DEATH

☐ VEHICLE: Type of vehicle associated with this decedent:
☐ Passenger car ☐ Pickup truck ☐ Truck--more than 2 axles ☐ Motorcycle
☐ Bicycle ☐ Farm vehicle ☑ ATV ☐ Moped ☐ Other _____
Position: ☑ Driver ☐ Passenger ☐ Pedestrian ☐ Unknown
Devices: ☐ Seat restraints ☐ Air bag ☐ Helmet ☐ Child restraint ☐ None ☑ Unknown
Number of vehicles involved 1

☐ GUN: ☐ Rifle--Caliber _____ ☐ Handgun--Caliber _____ ☐ Shotgun--Gauge _____
☐ Other _____ ☐ Unknown

☐ INSTRUMENT: ☐ Blunt ☐ Sharp Description: _____

☐ TOXIC AGENT(S) SUSPECTED: ☐ Alcohol ☐ Others _____

☐ DROWNING: ☐ Pond ☐ Lake or river ☐ Ocean ☐ Pool ☐ Bathtub ☐ Other _____
Life preserver: ☐ Yes ☐ No ☐ Unknown Able to swim: ☐ Yes ☐ No ☐ Unknown
Activity _____

☐ FIRE: Suspected cause _____ Smoke detector: ☐ Yes ☐ No ☐ Unknown

☐ FALL: From _____ to _____ Approximate distance _____ feet

ACTIVITY OF DECEDENT AND PREMISES

FATAL INJURY OR ILLNESS: Activity Riding ATV
Type of place Public Riverside Beach Specific location Busco Beach Wright Co

Fatal injury or illness occurred on a job: ☐ Yes ☑ No ☐ Unknown
If yes, was employment: ☐ Primary job ☐ Secondary ☐ Volunteer work ☐ Unknown
Name of this employing firm or agency _____
Type of business or industry _____ Decedent's occupation _____

DEATH: Type of place Hosp. Emer Dept Specific location Wayne Mem. Hosp Goldsboro NC

Examples:
Activity: Running, lifting hay bales, eating, typing letter, driving commercial truck, sleeping, bathing, watching television, fighting, *etc.*
Type of place: House, apartment, trailer, school, jail, bar or tavern, hotel, restaurant, store, street, hospital, farm, highway, factory, *etc.*
Specific location: Bathroom, assembly line, kitchen, front yard, office, parking lot, emergency room, roadside, ambulance, car, *etc.*
On a job: Any activity that is income generating regardless of age of decedent including farming or part time work; also include non-income generating volunteer or charity work.

DESCRIPTION OF BODY

CONDITION: ☑ Intact ☐ Decomposition ☐ Skeletonized
☐ Embalmed ☐ Charred ☐ Prolonged immersion ☐ Exhumed

RIGOR: ☐ None ☐ 1+ ☐ 2+ ☑ 3+ LIVOR: ☐ None ☐ Anterior ☑ Posterior ☐ Lateral

HEIGHT: 72 inches ☑ Estimate WEIGHT: 250 pounds ☑ Estimate

BODY TEMPERATURE: ☐ Warm ☐ Cool ☑ Cold HAIR: Color Bald ☑ Beard ☐ Mustache

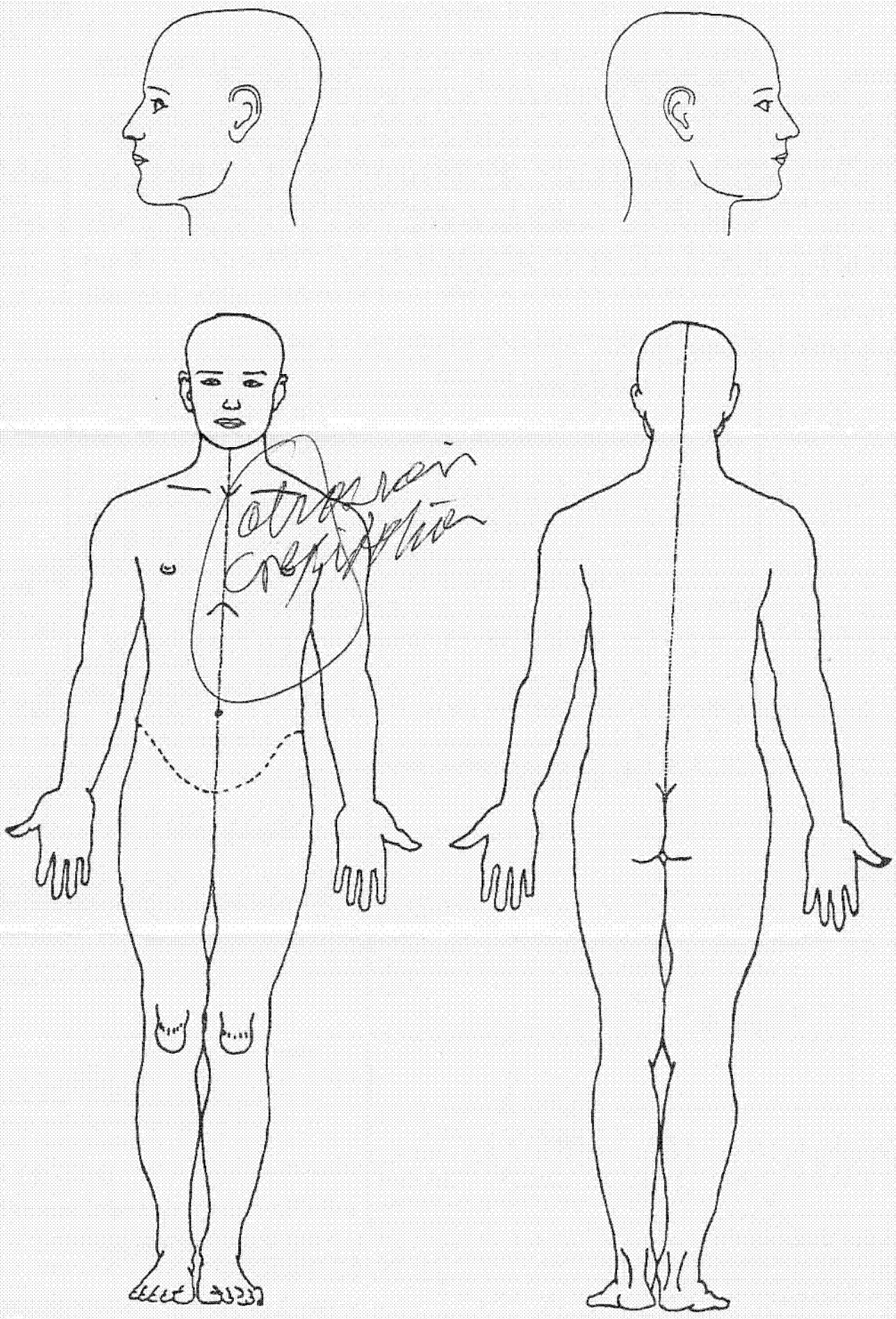
EYES: Color _____ Abnormalities _____

TEETH: Upper ☑ Natural ☐ Dentures ☐ Abnormalities _____
Lower ☑ Natural ☐ Dentures ☐ Abnormalities _____

CLOTHING: Black Denim Shorts ☐ Not clothed

VALUABLES: _____ ☐ No valuables

BODY DIAGRAMS



Indicate nature and location of wounds and other lesions (scars, tattoos, ...

NARRATIVE SUMMARY OF CIRCUMSTANCES SURROUNDING DEATH

(b)(3):CPSA Sec **DOB: 05/07/1994** **#** **DOS: 09/18/2008**

Medical examiner note narrative summary (b)(3):CPSA Secti Date of birth 5/7/94. Date of death 9/13/08.

S: (b)(6) was riding an ATV at Busco beach in Wayne County alongside the Neuse River and was apparently in some type of a pit or a hole that was part of this course in which he was riding. His vehicle overturned and he was crushed beneath the vehicle. He was transported by EMS to the Emergency Department at Wayne Memorial Hospital. On arrival there, he had no vital signs and no cardiac activity. Resuscitation was begun, and they did regain a heart rate briefly but were unable to sustain this. No obvious significant profusion occurred or evidence of adequate circulation. The ER doctor felt that there was significant crushing of the chest, and a chest tube was placed. Chest Xrays showed multiple rib fractures along both sides of his chest, right and left, including a right clavicle fracture.When all cardiac electric activity ceased he was pronounced dead.

Apparent cause of death: Crushed chest injury secondary to a rollover accident on an ATV, accidental death. ETH levels are pending.

RHS M.D./RI307

PURPOSE: To document the findings of a medical examiner investigation. When completed, this form constitutes a report to the Chief Medical Examiner as required by G.S. 130A-385(a).
PREPARATION: The investigating medical examiner completes all appropriate information, and signs the certification statement on the front of the form.
DISTRIBUTION: Mail *original* copy to the Office of the Chief Medical Examiner, Chapel Hill, NC 27599-7580.
DISPOSITION: This form is maintained by the Chief Medical Examiner in accordance with the current records disposition schedule published by the N.C. Division of Archives and History.
COPIES: Additional copies may be ordered from the Office of the Chief Medical Examiner, Chapel Hill, NC 27599-7580.

T O X I C O L O G Y R E P O R T

Office of the Chief Medical Examiner
Chapel Hill, NC 27599-7580

Toxicology Folder: T200807037
Case Folder: F200810356
Date of Report: 19-sep-2008
Page: 1

DECEDENT: (b)(3):CPSA Section 25(c)

Status of Report: Approved
Report Electronically Approved By: Douglas Smith, MS

* * *

==========

SPECIMENS received from Robert H. Shackleford on 17-sep-2008

S080020447: 6.0 ml Bloody Fluid CONDITION:
SOURCE: OBTAINED: 14-sep-2008

Ethanol ----------	50	mg/dL	09/19/2008

102308 07:02 * * * E N D O F R E P O R T * * *

Task Number: 080922HNE3786

Date: 12/16/08

Status of Missing Document(s)

The official records below were requested for this investigation report, but could not be obtained.

1. photo, 4-wheeled all-terrain vehicle

2. _____

3. _____

4. _____

Date: 12/16/08 Investigator No. 8925

Regional Office:_____ Supervisor No._____

CONTACT INFORMATION:

Contacted on 9/24/08

Wayne County Sheiff
207 E. Chestnut Street
Goldsboro, NC 27533
(919)731-1481

Medical Examiner
Campus Box 7580
Chapel Hill, NC 27599
(919)966-2253

Task Number 080922HNE3786

INTERVIEWER: When the response to a particular question is unknown, please leave blank.

Type of respondent: Other

Other, specify: sheriff and medical examiner

1. What type of vehicle was involved in the incident? (If vehicle is not an ATV, or if ATV has more than 4 wheels, politely thank respondent for her/his cooperation and terminate interview).

1 - 3 wheeled ATV
2 - 4 wheeled ATV
3 - ATV with unknown number of wheels
4 - 2 wheeled motorcycle
5 - Dune Buggy
6 - ATV with more than 4 wheels
7 - Utility Vehicle
8 - Other Vehicle
0 - Unknown

2. What is the manufacturer/brand name of the ATV(s) involved in the incident? If more than two ATVs, use an additional sheet.

ATV #1	ATV #2
Manufacturer: 05 - Polaris	**Manufacturer:**

3. What is the model name or number and/or vehicle identification number (VIN) of the ATV?

Model: Razor / **VIN:** UNKNOWN

4. What is the model year of the ATV? (Record last two digits of model year. For example 89,90).

Model Year: unk

5. What is the engine size (in CCs) of the ATV?

Engine Size: Unknown

6. Was there more than one death involved in this incident? If more than two individuals were killed use an additional sheet.

	Death #1	Death #2
Date of Death:	09/13/2008	
Age/Sex:	54 / Male	/
State of Death:	NC	
City of Death:	Goldsboro	
County of Death:	Wayne	

7. Describe how the incident occurred. (Use additional sheets if necessary).

The victim, a 54-year-old male, was riding solo on a 4-wheeled ATV in a deep hole/berm and he was not wearing a helmet. He came over the top edge of the berm, lost control and the ATV rolled over. He was ejected and he sustained a chest injury. He was taken to a hospital, where he succumbed to his injuries.

8. Did the ATV overturn/tipover/rollover? Yes

9. If ATV overturned/tipped over/rolled over, did it land on the victim?

Victim 1:			**Victim 2:**		
(Yes)	No	Unknown	Yes	No	Unknown

10. Who was killed in the incident? Check all that apply.

(1) - Driver
2 - Passenger
3 - Bystander
4 - Driver/Other Vehicle
8 - Other/Unknown

11. Was the victim wearing a helmet at the time the incident occurred?

Victim 1:			**Victim 2:**		
Yes	(No)	Unknown	Yes	No	Unknown

12. How many riders (including the driver) were on the ATV at the time the incident occurred?

0 - Unknown
(1) - One rider
2 - Two riders
3 - Three riders
4 - Four or more riders
9 - No riders

13. List the following physical characteristics of the DRIVER of the ATV:

Age: 54 **Height:** 72 **(inches)**

Weight: 06 = 250 + **Sex:** Male

14. How did the driver learn to operate an ATV (READ LIST)

1 - Organized Program **Sponsor's Name:**
2 - Dealer/Salesperson **Arranged through dealer:**
3 - Friend/Relative **Friend/Relative Age:**
4 - Self
5 - Other (Specify)
9 - Don't Know

15. What was the type of terrain (ground surface) being travelled at the time the incident occurred?

88 - Other

16. Type of road being travelled by ATV when incident occurred?

09 - NA (Not a road)

17. Identify any other motor vehicle(s) involved in this incident.

09 - NA (Not a traffic incident)

18. Had the driver of the ATV used alcohol just prior to the incident?

1 - Yes

19. Had the driver taken any drugs or medication just prior to the incident?

2 - No, Drugs

Additional Comments:

photo is not public record

#080922HNE3786
N0890357A
9/22/08

ISSUE; 52

Man dies in ATV accident at Busco Beach Wayne County, N.C.
September 15,

A man died at Busco Beach Saturday after being ejected from his all-terrain vehicle.

Capt. Tom Effler with the Wayne County Sheriff's Office said according to the report, (b)(3):CPSA 54, of Bailey, died in an ATV accident Saturday evening after emergency officials were called to the scene about 6:45 p.m.

Based on the report, Effler explained (b)(6) had been riding a "bowl berm" -- what he defined as a deep hole in the earth -- when he lost control of his vehicle as he came up over the top edge.

"He rolled the ATV over and was ejected," Effler said. "He was transported to Wayne Memorial Hospital where he died of his injuries."

There was no information on the type of injuries, if (b)(6) was wearing a helmet or if alcohol was involved.

1. Task Number		2. Investigator's ID	EPIDEMIOLOGIC INVESTIGATION REPORT
081008HCC3024		8554	
3. Office Code	4. Date of Accident YR MO DAY	5. Date Initiated YR MO DAY	
840	2007 11 16	2008 10 09	

6. Synopsis of Accident or Complaint UPC

Three men were riding in a 4-wheeled utility vehicle along a dry wash in the desert. This vehicle had a steering wheel, two front seats & a roll over bar. A platform was sitting in the back bed with stadium style seats attached. Two men were sitting on these back seats. The driver drove the vehicle up the side of the wash. The vehicle flipped over, ejecting the three men. An 18-year old rear seat passenger died from head and chest injuries. He was not using a seat belt nor was he wearing a helmet.

MFR/PRVLBR NOTIFIED

COMMENTS: __YES ✓NO
__OVERRULED; __ATTACHED
✓EXCISIONS/FOIA EXS. 3.5.6 j2sc
✓DO NOT RE-NOTIFY __RE-NOTIFY
1/22/09 GO

7. Location (Home, School, etc)	8. City	9. State
9 - SPORTS OR RECREATION PLACE	DATELAND	AZ

10A. First Product	10B. Trade/Brand Name	10C. Model Number
5044 - Utility Vehicles	POLARIS	RANGER XP

10D. Manufacturer Name and Address
POLARIS INDUSTRIES INC.
1225 Highway 169 North
Minneapolis, MN 55441
VIN# [redacted]

11A. Second Product	11B. Trade/Brand Name	11C. Model Number
4074 - Chairs, Other Or Not Specifi	UNKNOWN	SEATS/CHAIRS - U

11D. Manufacturer Name and Address
NONE

12. Age of Victim	13. Sex	14. Disposition	15. Injury Diagnosis
18	1 - Male	8 - Death	62 - Intern. Org. Inj.
16. Body Part(s) Involved	**17. Respondent**	**18. Type of Investigation**	**19. Time Spent (Operational / Travel)**
75 - HEAD	3 - 2nd Hand Info Only	2 - Telephone	5 / 0

20. Attachment(s)	21. Case Source	22. Sample Collection Number
9 - Multiple Attachments	14 - Death Certificate	

23. Permission to Disclose Name (Non NEISS Cases Only)
○ Yes ● No ○ Verbal ○ Yes for Manuf. Only

24. Review Date	25. Reviewed By	26. Regional Office Director
11/18/2008	9087	Frank J. Nava

27. Distribution	28. Source Document Number
Streeter, Robin; Topka, Tanya	0704041150

This death involved a utility vehicle and three men who were in the vehicle. One of the men died. Information in this report was obtained from county sheriff's personnel.

The man who died (the victim) was identified as an 18 year old man who weighed 182 pounds. His date of birth was 8-6-1989.

This crash took place around 5 p.m. during the afternoon of 11-16-2007. It happened on private property in the Arizona desert.

Deputies reported that it was daylight and that the weather was dry and clear.

The men were riding in a 4-wheeled utility vehicle with a rollover bar. This vehicle also included a steering wheel and two front seats with seat belts, see photos # 7 - 9.

Deputies found "homemade" seats in the rear flatbed area of this vehicle, see photo # 4. One Deputy indicated that these seats appeared to be two stadium style seats that were attached to a wooden board by bungee cords. The wooden board was attached to a metal frame. According to the Deputy, this metal frame did not appear to be fastened to the bed of the vehicle.

The driver of the vehicle was a 22-year old man. The 18-year old victim sat in the left rear passenger seat in the back section of the vehicle while a 44-year old man sat in the second seat in the back.

According to the Deputies, the two passengers were not restrained in the rear seats of this vehicle nor were they wearing protective helmets.

Deputies reported that the driver's seat belt was not being used as the vehicle traveled along the desert.

The vehicle was traveling through a desert wash. The ground was dry. They were going straight ahead in an eastern direction.

This wash was identified by Deputies as measuring about six feet wide and roughly three to five feet deep. The terrain consisted of hard packed and lose dirt with some gravel mixed in.

The wash traveled in a northwest to southeast direction. There was no running water in this wash.

Deputies reported that the driver attempted to drive this utility vehicle up the side of the desert wash. The vehicle rolled over backwards.

It landed upside down. The occupants of the vehicle were ejected.

Deputies identified the 18-year old passenger as suffering head and chest trauma. He was transported to the hospital where medical personnel pronounced him dead at 7 p.m.

The driver sustained back injuries and was transported to a hospital by air ambulance. The 44-year old passenger did not sustain any injuries.

Copies of the Sheriff's Reports are attached as exhibit # 2 while Sheriff's photographs are included as exhibit # 3.

A county medical examiner determined that the 18-year old victim died due to blunt force trauma to his head and chest.

PRODUCT IDENTIFICATION

This death involved a 4 wheeled Ranger XP utility vehicle from Polaris Industries.

Deputies identified this vehicle as a 2005 Polaris, with VIN # 4XARD68A55D728979. Sheriff's photographs reveal the following labeling on the side of this vehicle (see photo # 3):

POLARIS
RANGER
XP

CONTACTS:	PURPOSE & RESULTS:
Sheriff	Incident scenario & product info

EXHIBITS:

1. LETTER TO MEDICAL EXAMINER
2. SHERIFF'S REPORTS
3. SHERIFF'S PHOTOGRAPHS
4. MISSING DOCUMENT FORM
5. CONTACT SHEET

.
.

UNITED STATES GOVERNMENT
Consumer Product Safety Commission
14175 W. Indian School Rd., Suite B4 PMB 410
Goodyear, Arizona 85395
Phone 623-877-3924 & Fax 866-798-9185
zweaver@cpsc.gov

October 9, 2008

b(6) [redacted]
Yuma County Medical Examiner
P.O. Box 4695
Yuma, Arizona 85366
Fax # 928-336-7319

Dear b(6) [redacted]

This is a written request for copies of your autopsy records, toxicology reports and copies of any investigation reports covering the death of b(3):CPSA Section 25(c),(b)(6) [redacted] on or about November 16, 2007 after he was involved in an All Terrain Vehicle (ATV) crash near Dateland, AZ (N33 02.253 W113 30.374). I understand that b(3):CPSA Section 25(c),(b)(6) [redacted] date of birth was b(3):CPSA Section 25(c),(b)(6) [redacted]

We are interested in obtaining as much information as possible about this death. Copies of your records would be very helpful. Any information you can provide is appreciated.

As an agency of the Federal Government, the U.S. Consumer Product Safety Commission (CPSC) is responsible for investigating consumer product related fires, explosions, injuries and deaths under Section 5, 16 and 29 of the Consumer Product Safety Act (Public Law 92-573; 15 U.S.C. 2054 and 3065). CPSC is also charged with enforcing federal safety regulations covering ATVs, household appliances, power tools, amusement rides, children's product and other consumer products.

Information about CPSC is attached. Please call me if you have any questions. I can be reached in our Arizona office at 623-877-3924 or by e-mail at zweaver@cpsc.gov.

Sincerely,

Zannie E. Weaver

Mr. Zannie E. Weaver
Federal Investigator

Attachments

ADOT USE ONLY

1 POLICE ONLY - FORWARD COPY TO ADOT TRAFFIC RECORDS SECTION 094R 206 S. 7th AVE. PHOENIX, ARIZONA 85007-3233

REPORT ID: YEAR 07 MONTH 11 DAY 16 HOUR 17 NCIC NO 01400 OFFICERS ID NO 00T92

Agency Report Number: 2007-62489

Total No. of Sheets: 7

COMPLETE THE FOLLOWING SUPPLEMENT IF ANY ⊘ (Circle) AND ANY ◇ (Diamond) ARE CHECKED

2 Total Units 1 | Total Injuries 1 | Total Fatalities 1 | Estimated Total Damage Compared to limit ☒ Over ☐ Under | ○ Fatal ☐ Hit/Run ☐ Cost Prop. ● Persons Transported for Immediate Medical Care ? ○ Tow away of at least one vehicle from the scene? | District or Grid No. 560

3 LOCATION

On Highway Road/Street: Private Property DEC 11 2007 | ☐ Inside ☒ Outside | City: Dateland | County: Yuma

Intersecting Street, Road / M.P. or R.P.: Desert Area 6 miles north of Hyder Rd. | ☐ North ☐ South ☐ East ☐ West | ☐ Plus ☐ Minus | Distance ☐ Measured ☐ Approximate | ☐ Miles ☐ Feet

☒ At ☐ From

4 TRAFFIC UNIT NO. 1

State: AZ | Class: D | End: | ☒ DL # ☐ SSN ☐ Both | ☒ Driver ☐ Pedestrian ☐ Pedestrian | Name: [redacted] | Sex: M | Inj: 3

Restrictions: None | Date of Birth: [redacted] | Address: [redacted] | City | State | Zip Code | Telephone Number

Plate Number: MCM5AT | State: AZ | Year: 09/07 | ☐ Same as Drive | Owner / Carrier Name: [redacted] | Address | City | State | Zip Code

Body Style: ATV | ◇ Bus (9 or more seats) | Make: Polaris | Color: Green | Year: 2005 | VIN: [redacted] | Safety Device Code: 1

Removed to: Destination | ☒ Disabled ☐ Not Disabled | Removed by: [redacted] | Orders of | Posted Speed Limit: N/A | Ofc Est Speed: 5

Insurance Company: Progressive | Telephone Number: 1-800-776-4737 | Policy Number: [redacted] | Eff. Date / Exp Date: 082907/082908

Trailer (Other Unit) Plate No. | State | Year | Description of Trailer or Other Unit | Hazmat Placard ◇ Yes ☐ No 4-Digit 1-Digit | Was Hazmat Cargo Released? ☐ Yes ☐ No

4 TRAFFIC UNIT NO.

State | Class | End. | ☐ DL # ☐ SSN ☐ Both | ☐ Driver ☐ Pedestrian ☐ Pedestrian | Name | Sex | Inj

Restrictions | Date of Birth | Address | City | State | Zip Code | Telephone Number

Plate Number | State | Year | ☐ Same as Drive | Owner / Carrier Name | Address | City | State | Zip Code

Body Style | ◇ Bus (9 or more seats) | Make | Color | Year | VIN | Safety Device Code

Removed to | ☐ Disabled ☐ Not Disabled | Removed by | Orders of | Posted Speed Limit | Ofc Est Speed

Insurance Company | Telephone Number | Policy Number | Eff. Date / Exp Date

Trailer (Other Unit) Plate No. | State | Year | Description of Trailer or Other Unit | Hazmat Placard ◇ Yes ☐ No 4-Digit 1-Digit | Was Hazmat Cargo Released? ☐ Yes ☐ No

4 TRAFFIC UNIT NO.

State | Class | End. | ☐ DL # ☐ SSN ☐ Both | ☐ Driver ☐ Pedestrian ☐ Pedestrian | Name | Sex | Inj

Restrictions | Date of Birth | Address | City | State | Zip Code | Telephone Number

Plate Number | State | Year | ☐ Same as Drive | Owner / Carrier Name | Address | City | State | Zip Code

Body Style | ◇ Bus (9 or more seats) | Make | Color | Year | VIN | Safety Device Code

Removed to | ☐ Disabled ☐ Not Disabled | Removed by | Orders of | Posted Speed Limit | Ofc Est Speed

Insurance Company | Telephone Number | Policy Number | Eff. Date / Exp Date

Trailer (Other Unit) Plate No. | State | Year | Description of Trailer or Other Unit | Hazmat Placard ◇ Yes ☐ No 4-Digit 1-Digit | Was Hazmat Cargo Released? ☐ Yes ☐ No

5 PASSENGERS

Seating Position: 10 Not in Passenger Compart. 11 Motorcycle, Bus 12 Other 13 Unknown 14 Pedalcycle

Safety Restraint: 1 None used 2 Lap belt 3 Lap & shoulder 4 Airbag deployed 5 Child restraint 6 Protective helmet 7 Passive belt 8 Passive & Lap 9 Other 0 Unknown

Injury Severity Codes: 1 - No injury 2 - Possible injury 3 - Non Incapacitating Injury 4 - Incapacitating Injury 5 - Fatal injury 6 - Not Reported / Unknown

Unit #	Seat Pos.	SD	Name	Address	City	State	Zip Code	Age	Sex	Inj
1	10	1	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	44	M	1
1	10	1	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	18	M	5

Yuma County Sheriff's Office
For: U.S. Consumer Product Safety Commission
Date: 10/9/08 Initial: [illegible]

Copy

6 Other Property Damage/Description: Owner's Name | Address | City | State | Zip Code | Telephone Number

7 WITNESSES: Name | Address | City | State | Zip Code | Telephone Number | Age

8 Photos Taken ☒ Yes ☐ No | Photographers Name, ID Number, and Agency: [redacted] County Sheriff's Office | Photos of Scene ☒ Yes ☐ No | Date Initial: 11/16/07 | Time Initial: 2145

Officer's Signature and Date: [redacted] | Agency: Yuma County Sheriff's Office | Date Completed: 11/29/07

12/10/07

9 - DIAGRAM

Case No. 2007-62489

10 - INDICATE NORTH

11 - [redacted] OCCURRED — VEHICLE 1 2 3
YES ☐ ☐ ☐
NO ☒ ☐ ☐

12 - [redacted] UNIT NO. A.R.S. NO. OR CITY CODE

14 - [redacted] RAN OFF ROADWAY PRIOR TO FIRST HARMFUL EVENT
☐ YES ☒ NO
☐ RIGHT ☐ LEFT UNIT NO.

30 - [redacted] CHECK ONLY ONE
1 ☒ SINGLE VEHICLE
2 ☐ ANGLE
3 ☐ LEFT TURN
4 ☐ RIGHT TURN
5 ☐ U-TURN
6 ☐ REAR-END
7 ☐ HEAD-ON
8 ☐ SIDESWIPE (SAME DIRECTION)
9 ☐ SIDESWIPE (OPPOSITE DIRECTION)
10 ☐ BACKING
11 ☐ NON-CONTACT MOTORCYCLE
12 ☐ NON-CONTACT NON-MOTORCYCLE
13 ☐ PEDESTRIAN
14 ☐ PEDALCYCLE
15 ☐ OTHER

13 - DESCRIBE WHAT HAPPENED
See Narrative

INJURED TAKEN TO / BY
Good Samaritan Care Flight

16 - [redacted] CHECK ONE PER UNIT
1 2 3
1 ☒ ☐ ☐ GOING STRAIGHT AHEAD
2 ☐ ☐ ☐ SLOWING IN TRAFFIC WAY
3 ☐ ☐ ☐ STOPPED IN TRAFFIC WAY
4 ☐ ☐ ☐ MAKING LEFT TURN
5 ☐ ☐ ☐ MAKING RIGHT TURN
6 ☐ ☐ ☐ MAKING U-TURN
7 ☐ ☐ ☐ ENTERING ALLEY OR DRIVEWAY
8 ☐ ☐ ☐ LEAVING ALLEY OR DRIVEWAY
9 ☐ ☐ ☐ OVERTAKING / PASSING
10 ☐ ☐ ☐ CHANGING LANES
11 ☐ ☐ ☐ BACKING
12 ☐ ☐ ☐ AVOIDING VEHICLE, OBJECT, PEDESTRIAN
13 ☐ ☐ ☐ ENTERING PARKING POSITION
14 ☐ ☐ ☐ LEAVING PARKING POSITION
15 ☐ ☐ ☐ PROPERLY PARKED
16 ☐ ☐ ☐ IMPROPERLY PARKED
17 ☐ ☐ ☐ DRIVERLESS MOVING VEHICLE
18 ☐ ☐ ☐ CROSSING ROAD
19 ☐ ☐ ☐ WALKING WITH TRAFFIC
20 ☐ ☐ ☐ WALKING AGAINST TRAFFIC
21 ☐ ☐ ☐ STANDING
22 ☐ ☐ ☐ LYING
23 ☐ ☐ ☐ GETTING ON OR OFF VEHICLE
24 ☐ ☐ ☐ WORKING ON OR PUSHING VEHICLE
25 ☐ ☐ ☐ WORKING ON ROAD
26 ☐ ☐ ☐ OTHER
27 ☐ ☐ ☐ UNKNOWN

17 - [redacted] CHECK ONLY ONE
1 ☒ CLEAR
2 ☐ CLOUDY
3 ☐ SLEET/HAIL
4 ☐ RAIN
5 ☐ SNOW
6 ☐ SEVERE
7 ☐ BLOWING SAND, SOIL, DIRT, SNOW
8 ☐ FOG, SMOG, SMOKE

18 - [redacted] CHECK ONLY ONE
1 ☐ ASPHALT
2 ☐ CONCRETE
3 ☐ GRAVEL
4 ☒ DIRT
5 ☐ OTHER

19 - [redacted] CHECK ONLY ONE
1 ☐ INTERSECTION
2 ☐ JUNCTION AREA
3 ☒ NON-JUNCTION AREA
4 ☐ DRIVEWAY ACCESS
5 ☐ ALLEY ACCESS
6 ☐ ALLEY

20 - [redacted] RELATED
YES ☐ NO ☒

21 - [redacted] CHECK ONLY ONE
1 ☐ SCHOOL CROSSING
2 ☐ PEDESTRIAN CROSSWALK (STRIPED)
3 ☐ PEDESTRIAN CROSSWALK (NO STRIPING)
4 ☐ BRIDGE
5 ☐ TUNNEL
6 ☐ RR CROSSING
7 ☐ WORK AREA
8 ☐ BIKE PATH
9 ☐ 2-WAY LEFT TURN LANE

YES NO
1 ☐ ☒ STREET LIGHT
2 ☐ ☐ STREET LIGHT FUNCTIONING

22 - [redacted] CHECK ONLY ONE
1 ☐ UNDER CONSTRUCTION, TRAFFIC ALLOWED
2 ☐ UNDER CONSTRUCTION, NO TRAFFIC ALLOWED
3 ☐ UNDER REPAIRS
4 ☐ HOLES, RUTS, BUMPS
5 ☐ OBSTRUCTION - PROTECTED
6 ☐ OBSTRUCTION - UNPROTECTED
7 ☐ OBSTRUCTION - UNLIGHTED AT NIGHT
8 ☐ DEFECTIVE SHOULDERS
9 ☐ CHANGING ROAD WIDTH
10 ☐ WATER (STANDING OR
11 ☐ TEMPORARY LANE CLOSURE

23 - [redacted] LEGEND:
A-DEVICE OPERATIONAL
B-DAMAGED OR NON-FUNCTIONAL PRIOR TO ACCIDENT
CHECK ANY THAT APPLY
A B
1 ☐ ☐ TRAFFIC SIGNAL
2 ☐ ☐ YIELD SIGN
3 ☐ ☐ STOP SIGN
4 ☐ ☐ WARNING SIGN
5 ☐ ☐ RAILROAD SIGNAL
6 ☐ ☐ FLASHING SIGNAL
7 ☐ ☐ FLAGMAN OR OFFICER

24 - [redacted] CHECK ONLY ONE
1 2 WAY STRIPPED CENTER LINE
2 2 WAY, NO STRIPE
3 2 WAY PAINTED MEDIAN
4 2 WAY, RAISED MEDIAN
5 2 WAY, CONCRETE BARRIER
6 2 WAY, CABLE BARRIER
7 2 WAY, DEPRESSED MEDIAN
8 2 WAY, EXTENDED MEDIAN
9 1 WAY STREET

25 - [redacted] CHECK ONLY ONE
1 LEVEL
2 DOWNGRADE
3 ☒ UPGRADE
4 HILL CREST
5 DIP

26 - [redacted] CHECK ONLY ONE
1 ☒ DRY
2 WET
3 SAND, MUD, DIRT, OIL, GRAVEL
4 SNOW
5 SLUSH
6 ICE
7 OTHER
8 UNKNOWN

27 - [redacted] TWO CHOICES PER PERSON MAY BE SELECTED
1 2 3
1 ☐ ☐ ☐ NO APPARENT INFLUENCE
2 ☐ ☐ ☐ HAD BEEN DRINKING
3 ☐ ☐ ☐ USE OF ILLICIT DRUGS
4 ☐ ☐ ☐ ILLNESS
5 ☐ ☐ ☐ FELL ASLEEP / FATIGUE
6 ☐ ☐ ☐ PHYSICAL IMPAIRMENT
7 ☐ ☐ ☐ PRESCRIPTION DRUGS
8 ☐ ☐ ☐ OTHER
9 ☒ ☐ ☐ UNKNOWN

28 - [redacted] TWO CHOICES PER PERSON MAY BE SELECTED
1 2 3
1 ☐ ☐ ☐ NO IMPROPER ACTION
2 ☐ ☐ ☐ SPEED TO FAST FOR CONDITIONS
3 ☐ ☐ ☐ EXCEEDED LAWFUL SPEED
4 ☐ ☐ ☐ FAILED TO YIELD RIGHT-OF-WAY
5 ☐ ☐ ☐ FOLLOWED TOO CLOSELY
6 ☐ ☐ ☐ RAN STOP SIGN
7 ☐ ☐ ☐ DISREGARDED TRAFFIC SIGNAL
8 ☐ ☐ ☐ MADE IMPROPER TURN
9 ☐ ☐ ☐ DROVE IN OPPOSING TRAFFIC LANE
10 ☐ ☐ ☐ KNOWINGLY OPERATED WITH FAULTY OR MISSING EQUIPMENT
11 ☐ ☐ ☐ REQUIRED MOTORCYCLE SAFETY EQUIPMENT NOT USED
12 ☐ ☐ ☐ PASSED IN NO PASSING ZONE
13 ☐ ☐ ☐ UNSAFE LANE CHANGE
14 ☐ ☐ ☐ OTHER UNSAFE PASSING
15 ☒ ☐ ☐ INATTENTION
16 ☐ ☐ ☐ DID NOT USE CROSSWALK
17 ☐ ☐ ☐ WALKED ON WRONG SIDE OF ROAD
18 ☐ ☐ ☐ UNKNOWN
19 ☒ ☐ ☐ OTHER

29 - [redacted] TWO CHOICES PER VEHICLE MAY BE SELECTED
1 2 3
1 ☒ ☐ ☐ NO APPARENT DEFECTS
2 ☐ ☐ ☐ DEFECTIVE BRAKES
3 ☐ ☐ ☐ DEFECTIVE STEERING
4 ☐ ☐ ☐ DEFECTIVE HEADLIGHTS
5 ☐ ☐ ☐ DEFECTIVE TAIL LIGHTS
6 ☐ ☐ ☐ DEFECTIVE TURN SIGNAL
7 ☐ ☐ ☐ PUNCTURE OR BLOWOUT
8 ☐ ☐ ☐ ONE OR MORE SMOOTH TIRES
9 ☐ ☐ ☐ FIRE
10 ☐ ☐ ☐ DEFECTIVE WINDSHIELD WIPER
11 ☐ ☐ ☐ DEFECTIVE EXHAUST SYSTEM
12 ☐ ☐ ☐ OTHER DEFECTS
13 ☐ ☐ ☐ NO TRAILER BRAKES
14 ☐ ☐ ☐ UNKNOWN

31 - [redacted] CHECK ONE PER UNIT
1 2 3
1 ☒ ☐ ☐ NOT OBSCURED
2 ☐ ☐ ☐ BY PARKED/STOPPED VEHICLE
3 ☐ ☐ ☐ BY MOVING VEHICLE
4 ☐ ☐ ☐ BY BUILDING
5 ☐ ☐ ☐ BY EMBANKMENT
6 ☐ ☐ ☐ BY SIGNBOARD
7 ☐ ☐ ☐ BY HILL CREST
8 ☐ ☐ ☐ BY LOAD ON VEHICLE
9 ☐ ☐ ☐ BY TREES, BUSHES
10 ☐ ☐ ☐ BY HEADLIGHT
11 ☐ ☐ ☐ BY SUN GLARE
12 ☐ ☐ ☐ BECAUSE OF BAD WEATHER
13 ☐ ☐ ☐ OTHER
14 ☐ ☐ ☐ RAIN, SNOW, FOG ON WINDSHIELD
15 ☐ ☐ ☐ WINDSHIELD OBSCURED-OTHER
16 ☐ ☐ ☐ UNKNOWN

32 - [redacted] CHECK ONE PER UNIT
1 2 3
1 ☐ ☐ ☐ NORTH
2 ☐ ☐ ☐ SOUTH
3 ☒ ☐ ☐ EAST
4 ☐ ☐ ☐ WEST
5 ☐ ☐ ☐ NW
6 ☐ ☐ ☐ NE
7 ☐ ☐ ☐ SW
8 ☐ ☐ ☐ SE
9 ☐ ☐ ☐ UNKNOWN

1 — FATAL SUPPLEMENT
FORWARD COPY TO
ACCIDENT RECORDS ANALYSIS UNIT 004R
ARIZONA DEPARTMENT OF TRANSPORTATION
206 S 17th AVE, PHOENIX, ARIZONA 85007-3233

YEAR	MONTH	DAY	REPORT TO HOUR	NCIC NO	OFFICER ID NO	Agency Report Number
07	11	18	1710	1400	00T92	2007-82489

[X] Dead at time of Investigation
[ ] Delayed Fatality

2 — VICTIM

NAME OF VICTIM: b)(3) CPSA Section 25(c),(b)(6) [redacted]
[ ] DRIVER [ ] PEDALCYCLIST [ ] PEDESTRIAN [X] PASSENGER
RACE: W
MARITAL STATUS: Single

ADDRESS: b)(3) CPSA Section 25(c),(b)(6) [redacted]
CITY
STATE
MARKS, SCARS/TATTOOS:

SEX: Male
WEIGHT: 152
EYES: Blue
HEIGHT: 600
HAIR: Blond
DATE OF BIRTH: b)(3) CPSA Section 25(c),(b)(6) [redacted]
OCCUPATION: Student

VICTIM REMOVED TO: Yuma Regional Medical Center
VICTIM REMOVED BY: b)(6) [redacted]

DESCRIPTION OF CLOTHING: Tan outer shirt, red inner shirt, tan pants, tan boots
MOTORCYCLE HELMET USED: [ ] YES [ ] NO [ ] UNKNOWN

DESCRIPTION OF PROPERTY (CONT):

PROPERTY IN CUSTODY OF: Yuma Regional Medical Center
NAME
ADDRESS: 2100 South Avenue A
CITY: Yuma
STATE: AZ

NEXT OF KIN: b)(6) [redacted]
NAME
ADDRESS
CITY
STATE
RELATION: Mother

NOTIFIED: [X] YES [ ] NO
NOTIFIED BY: b)(6) [redacted]
DATE: 11/18/07
TIME: 1948
MEDICAL EXAMINER: b)(6) [redacted]

3 — DRIVER

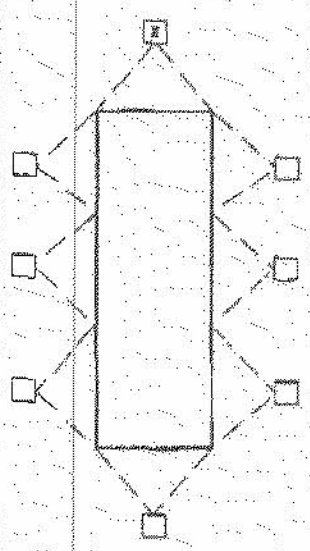
NAME OF DRIVER: [ ] SAME AS VICTIM b)(3) CPSA Section 25(c),(b)(6) [redacted]
RACE: White
OCCUPATION: Student
MARITAL STATUS: Single

4 — COMMENTS

5 — TIME (24 HRS)

POLICE CALLED	POLICE ARRIVED	AMBULANCE CALLED	AMBULANCE ARRIVED	AMBULANCE DEPARTED
1716	1832	1718	1849	2109

6 — MARK DAMAGED AREAS OF VICTIM'S VEHICLE



[X] TOP
[ ] UNDERCARRIAGE
[ ] NONE
[ ] UNKNOWN

7 — RESTRAINT USAGE / RESTRAINT FAILURE

ENTER SEAT POSITION	1	10	10			
RESTRAINING FAILURE: NONE FAILED	X	X	X			
LAP FAILED						
SHOULDER FAILED						
BOTH FAILED						
CHILD RESTRAINT						
AIR BAG NOT DEPLOYED						
PASSIVE SYSTEM						
UNKNOWN						
IMPROPER USAGE: RESTRAINT PROPERLY USED						
CHILD RESTRAINT						
PASSIVE & LAP						
SHOULDER HARNESS						

8 — SUPPLEMENTAL DATA CHECK ONE IN EACH CATAGORY

ACCIDENT FIRST REPORTED BY
1 [X] PERSONS INVOLVED
2 [ ] PASSING MOTORIST
3 [ ] POLICE
4 [ ] RESIDENT BYSTANDER
5 [ ] OTHER

VICTIM EJECTED
1 [ ] NOT EJECTED
2 [X] COMPLETE
3 [ ] PARTIAL
4 [ ] UNKNOWN

VICTIM EXTRICATION
1 [X] NOT REQUIRED
2 [ ] BY AMBULANCE ATTENDANT
3 [ ] BY POLICE
4 [ ] BY FIRE DEPARTMENT
5 [ ] BY PASSERBY
6 [ ] OTHER

ACCIDENT LOCATION
1 [ ] URBAN
2 [X] RURAL
3 [ ] UNKNOWN

TERRAIN TYPE
1 [ ] LEVEL
2 [X] HILLY
3 [ ] MOUNTAINOUS

DRIVER EXPERIENCE
1 [ ] YES TYPE: ____ SERIAL: ____
2 [X] NO
3 [ ] UNKNOWN

DRIVER FAMILIAR WITH LOCAL
1 [X] YES
2 [ ] NO
3 [ ] UNKNOWN

ROAD ALIGNMENT
1 [ ] STRAIGHT ROAD
2 [ ] CURVED
3 [X] UNKNOWN

VEHICLE TRANSMISSION
1 [X] AUTOMATIC
2 [ ] MANUAL
3 [ ] UNKNOWN

DRIVER DEATH STATE
1 [ ] CURRENT
2 [ ] EXPIRED
3 [X] UNKNOWN

COMPLIANCE WITH DRIVER LICENSE RESTRICTIONS
1 [ ] YES
2 [ ] NO
3 [X] UNKNOWN

DRIVER BLOOD ALCOHOL CONTENT TEST TAKEN
1 [X] YES TYPE: Blood RESULT: Unknown
2 [ ] NO
3 [ ] UNKNOWN

9 — OFFICER'S SIGNATURE AND ID NUMBER
Deputy b)(6) [redacted]

AGENCY: Yuma County Sheriff's Office

DATE REPORT COMPLETED: 11/20/07

ARIZONA TRAFFIC ACCIDENT REPORT SUPPLEMENT FORWARD COPY TO ACCIDENT RECORDS ANALYSIS UNIT 004M ARIZONA DEPARTMENT OF TRANSPORTATION 206 S. 17th AVE. PHOENIX, AZ 85007-3233	YEAR MONTH DAY	REPORT ID HOUR	NCIC NO.	OFFICERS ID NO.	AGENCY REPORT NUMBER
	0 7 1 1 1 6	1 7 1 0	1 4 0 0	0 0 T 9 2	2007-62489

ACCIDENT DESCRIPTION
(NARRATIVE)

SYNOPSIS:

This is a one vehicle fatal collision that occurred on private property in the desert area, Approximately six miles north of Hyder Road and approximately three miles east of Avenue 64E. The GPS coordinates of the collision were north33.02 minuets .253 seconds; west 113.30 minuets .374 seconds. The collision occurred outside the Town limits of Dateland, Arizona. The collision occurred on 11/16/07 at approximately 1710 hours.

ROAD/WEATHER CONDITIONS:

The desert area where the collision occurred consists of hard and lose packed dirt with some gavel mixed in. There was no running water in the wash. The wash travels in a northwest to southeast direction. The wash was approximately six feet wide and three to five feet deep. The weather conditions at the time of the collision were good with clear skies.

INJURIES:

[redacted] the driver of Traffic Unit #1, sustained trauma to his lower back, which resulted in two budging disks. [redacted] was transported to Good Samaritan Hospital in Phoenix, Arizona by Care Flight Air Ambulance.

[redacted] the left rear seat passenger of Traffic Unit #1 sustained trauma to his head and chest. [redacted] was pronounced deceased at 1900 hours by Emergence Room [redacted] of Yuma Regional Medical Center. [redacted] was transported to Yuma Regional Medical Center Morgue by [redacted]

VEHICLES:

Traffic Unit #1 is a green 2005 Polaris bearing Arizona license plate MCM5AT. Traffic Unit #1 was being driven by [redacted] and is owned by [redacted] Traffic Unit #1 is insured by Progressive Insurance, policy number [redacted] The policy is effective from 08/29/07 to 08/29/08. Traffic Unit #1 is equipped with safety restraint belts for the front two seats. The driver or passenger side safety restraint devices were not in use at the time of the collision. The left and right rear seats were homemade. There appeared to be two stadium style seats attached to a wooden board by bungee cords. The wooden board was attached to a metal frame, the metal frame did not appear the have been fastened to the bed of the vehicle. The two rear homemade seats were in use by [redacted] and [redacted] neither passenger were restrained or wearing protective helmets.

VEHICLE DAMAGE:

Traffic Unit #1 sustained damage to the fiberglass hood and left quarter panel. There were scratches on the roll bars.

ARIZONA TRAFFIC ACCIDENT REPORT SUPPLEMENT FORWARD COPY TO ACCIDENT RECORDS ANALYSIS UNIT 0 BAR ARIZONA DEPARTMENT OF TRANSPORTATION 206 S. 17th AVE., PHOENIX, AZ 85007-3233	YEAR MONTH DAY	REPORT ID HOUR	NCIC NO.	OFFICERS ID NO.	AGENCY REPORT NUMBER
	0 7 1 1 1 6	1 7 1 0	1 4 0 0	0 0 T 9 2	2007-62489

ACCIDENT DESCRIPTION
(NARRATIVE)

EVIDENCE:

The evidence at the scene was the over turned vehicle. There were no tire impressions located at the scene due to the heavy foot traffic in the area prior to my arrival.

WITNESSES:

There are no known witnesses to this collision.

NARRATIVE:

On 11/16/07 at approximately 1916 hours, I was advised of a CART (Critical Accident Response Team) call out in the area of the White Wing Ranch in reference to a fatal collision. The collision occurred approximately 3 miles east of 64E and approximately 6 miles north of Hyder Road.

Upon arrival I met with [redacted] He said the driver, later identified as [redacted] had been air lifted from the scene for medical treatment. He said [redacted] the left rear seat passenger had expired as a result of his injuries. He said [redacted] the right rear seat passenger was uninjured and had refused any medical treatment.

As I looked at the collision scene I observed Traffic Unit #1 in a wash upside down facing westbound. Mr. [redacted] was laying face up near the right rear of the vehicle. I was informed by [redacted] that Mr. had been moved prior to our arrival in an attempt to give him CPR.

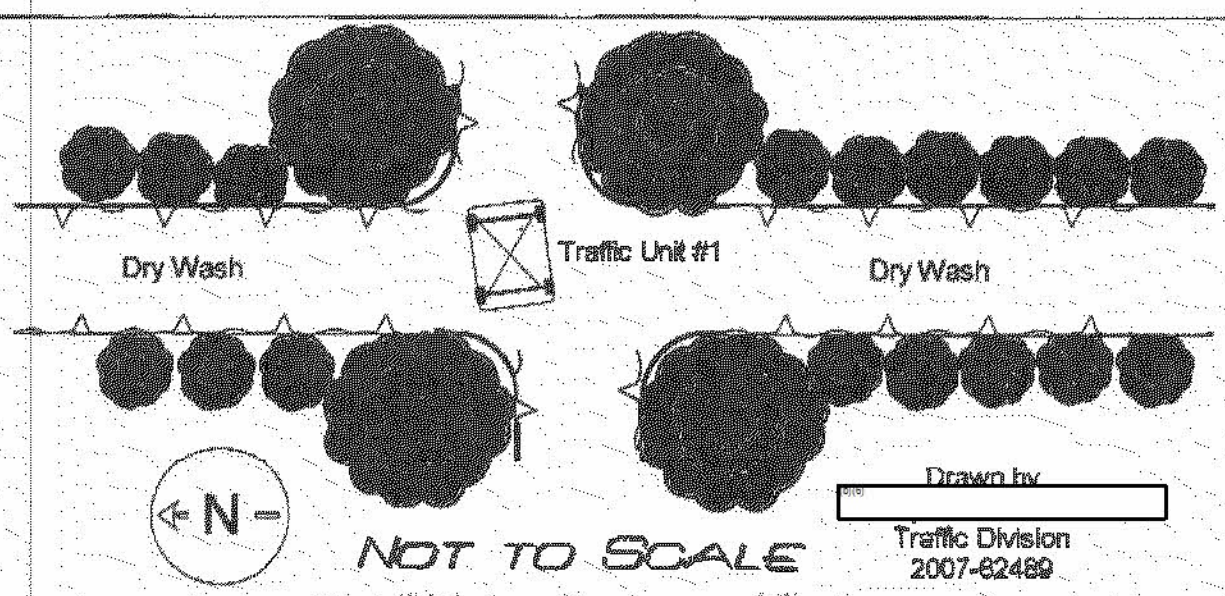
CONCLUSION:

Traffic Unit #1 was traveling eastbound through a wash. Traffic Unit #1 attempted to travel up the side of the wash, but rolled over backwards coming to rest upside down. The left rear passenger, [redacted] was ejected from the vehicle and the back roll bar apparently struck him. Alcohol may have been a contributing factor to this collision.

[redacted]
Traffic Division
[redacted]

ARIZONA TRAFFIC ACCIDENT REPORT SUPPLEMENT	YEAR MONTH DAY	REPORT ID HOUR	NCIC NO.	OFFICERS ID NO.	AGENCY REPORT NUMBER
FORWARD COPY TO: ACCIDENT RECORDS ANALYSIS UNIT (ARAU) ARIZONA DEPARTMENT OF TRANSPORTATION 206 S. 17th AVE., PHOENIX, AZ 85007-3233	0 7 1 1 1 6	1 7 1 0	1 4 0 0	0 0 T 9 2	2007-62489

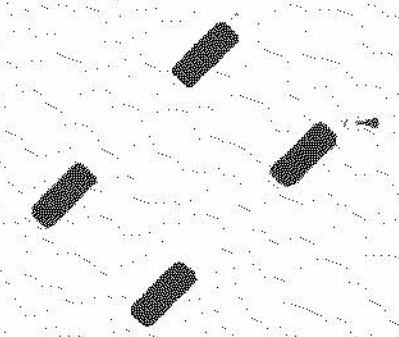
ACCIDENT DESCRIPTION
(NARRATIVE)



Drawn by
[redacted]
Traffic Division
2007-62489

ARIZONA TRAFFIC ACCIDENT REPORT SUPPLEMENT FORWARD COPY TO ACCIDENT RECORDS ANALYSIS UNIT OF THE ARIZONA DEPARTMENT OF TRANSPORTATION 206 S. 17th AVE. PHOENIX AZ 85007-3213	YEAR MONTH DAY	REPORT ID HOUR	MCIC NO.	OFFICER ID NO.	AGENCY REPORT NUMBER
	0 7 1 1 1 6	1 7 1 0	1 4 0 0	0 0 T 9 2	2007-62489

ACCIDENT DESCRIPTION
(NARRATIVE)



Traffic Unit #1

R/P
N33.02M.15S
W113.30M.22.6S

Drawn by
[redacted]
Traffic Division
2007-62489
Scale 1"=5.439Ft

ARIZONA TRAFFIC ACCIDENT REPORT SUPPLEMENT FORWARD COPY TO ACCIDENT RECORDS ANALYSIS UNIT 064R ARIZONA DEPARTMENT OF TRANSPORTATION 2105 S. 17th AVE., PHOENIX, AZ 85007-3233	YEAR MONTH DAY	REPORT ID HOUR	NCIC NO.	OFFICERS ID NO.	AGENCY REPORT NUMBER
	0 7 1 1 1 6	1 7 1 0	1 4 0 0	0 0 T 9 2	2007-62489

ACCIDENT DESCRIPTION
(NARRATIVE)

Pt	North	East	Elev	Description
1	0	0	0	Inst Point
2	10.706	0	-0.526	IGNORE
3	10.788	0	-0.524	_N
4	20.644	6.754	-4.14	VEH1
5	17.694	10.464	-4.506	VEH1
6	20.704	13.934	-4.736	VEH1
7	25.212	9.76	-4.604	VEH1
8	34.746	18.38	-0.788	LLS
9	29.934	24.422	-0.194	LLS
10	18.002	14.968	-4.606	LLS
11	7.01	7.638	-0.428	LLS
12	15.98	1.538	-0.968	LLS
13	24.25	8.544	-4.798	LLS
14	34.5	18.356	-0.774	LLS

Photo # 1 – The utility vehicle flipped while being operated in the desert.

Photo # 2 – Side view.

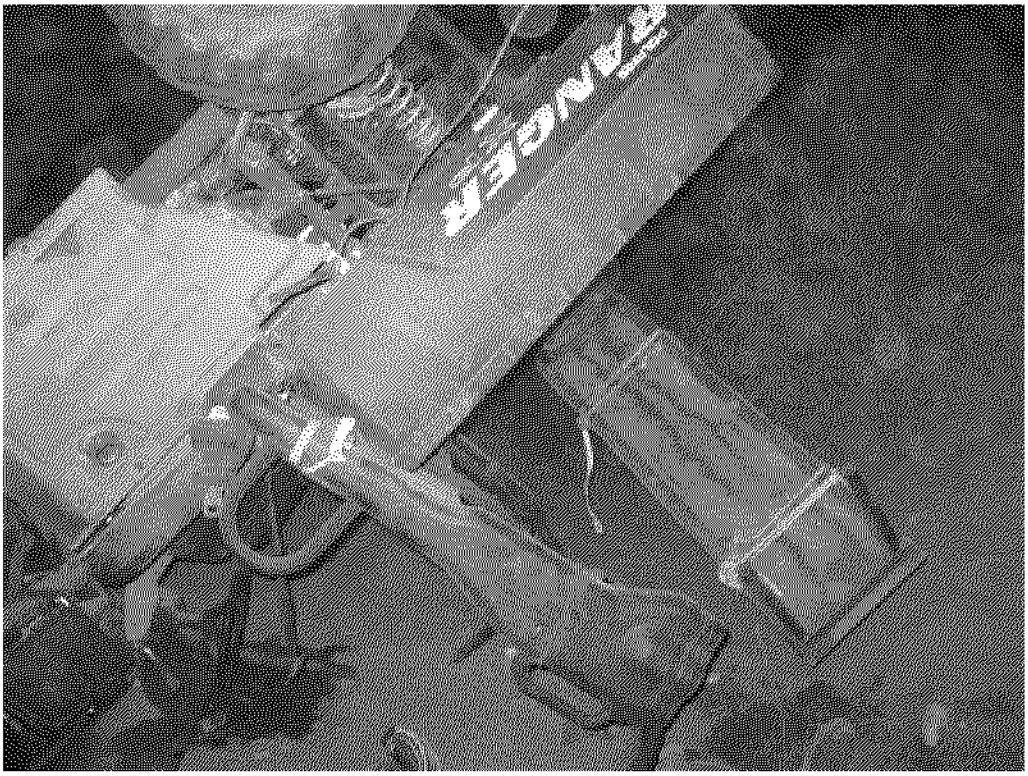


Photo # 3 – Labeling on the side identifies this vehicle as a "POLARIS RANGER XP".

Photo # 4 - This vehicle had been modified with seats attached to the back bed of the vehicle.

Photo # 5 – Looking at the rear bed area of this vehicle after the homemade rear seats were removed.

Photo # 6 – Front view of the vehicle.

Photo # 7 – Side view. This is a 2 seat vehicle with a roll bar over the front seats.

Photo # 8 – This vehicle includes a steering wheel and seat belts for the two front seats.

Photo # 9 – Other side.

Task No. 081008HCC3024

Date: 11-17-2008

Status of Missing Document(s)

The official records were requested for this investigation report but could not be obtained.

1. Medical Examiner's Reports – Yuma County, AZ
2.
3.
4.
5.

DATE: 11-17-2008 **INVESTIGATOR NO: 8554**

REGIONAL OFFICE: CFIW **SUPERVISOR NO: 9087**

CONTACT & IDENTIFICATION SHEET

Yuma County Medical Examiner
P.O. Box 4695
Yuma, AZ 85366

Yuma County Sheriff
141 S. Third Ave.
Yuma, AZ 85364

Site of Injury/Death – This Utility Vehicle in the desert near Dateland, AZ during 11-16-2007.

Victim/rear seat passenger – (b)(3):CPSA Section 25(c),(b)(6) 18 years old; DOB: (b)(3):CPSA Section 25(c),(b)(6)

Driver of Vehicle – (b)(6) 22 years old: DOB: (b)(6)

2nd Passenger – (b)(6) 44 years old

Utility Vehicle – Polaris, Ranger XP, VIN # (b)(3):CPSA Section 25(c),(b)(6)

Medical Examiner: (b)(6)

(b)(6), Yuma County Sheriff

(b)(5)

1. Task Number	2. Investigator's ID	EPIDEMIOLOGIC INVESTIGATION REPORT
081008HCC3031	8554	

3. Office Code	4. Date of Accident YR MO DAY	5. Date Initiated YR MO DAY
840	2007 10 25	2008 10 09

6. Synopsis of Accident or Complaint **UPC**

The victim is a 57-year-old male who was riding his 4-wheeled, utility vehicle in the desert at night. The victim was hunting with his son and was returning to camp. The victim and his son drove separately. When the victim did not return to the camp, his son went out to search for him. He found the victim in a sandy desert wash area, pinned underneath his utility vehicle. The victim was alive when his son found him, but later died at the scene.

MFR/PRVLBR NOTIFIED

COMMENTS: __YES ✓ NO
__OVERRULED; __ATTACHED
✓ EXCISIONS/FOIA EXS. B6, 25c
✓ DO NOT RE-NOTIFY __RE-NOTIFY
4/30/09

7. Location (Home, School, etc)	8. City	9. State
9 - SPORTS OR RECREATION PLACE	QUEEN VALLEY	AZ

10A. First Product	10B. Trade/Brand Name	10C. Model Number
5044 - Utility Vehicles	YAMAHA/VIN# [redacted]	RHINO

10D. Manufacturer Name and Address
YAMAHA MOTOR CORPORATION, USA
6555 Katella Avenue
Cypress, CA 90630

11A. Second Product	11B. Trade/Brand Name	11C. Model Number
0	NONE	NONE

11D. Manufacturer Name and Address
NONE

12. Age of Victim	13. Sex	14. Disposition	15. Injury Diagnosis
57	1 - Male	8 - Death	54 - Crushing
16. Body Part(s) Involved	**17. Respondent**	**18. Type of Investigation**	**19. Time Spent (Operational / Travel)**
75 - HEAD	3 - 2nd Hand Info Only	2 - Telephone	6 / 0

20. Attachment(s)	21. Case Source	22. Sample Collection Number
9 - Multiple Attachments	14 - Death Certificate	

23. Permission to Disclose Name (Non NEISS Cases Only)

○ Yes ● No ○ Verbal ○ Yes for Manuf. Only

24. Review Date	25. Reviewed By	26. Regional Office Director
11/12/2008	9087	Frank J. Nava

27. Distribution	28. Source Document Number
Streeter, Robin; Topka, Tanya	0704037535

EPIDEMIOLOGIC INVESTIGATION REPORT

1. Task Number	2. Investigator's ID	
081008HCC3031	8554	

3. Office Code	4. Date of Accident YR MO DAY	5. Date Initiated YR MO DAY
840	2007 10 25	2008 10 09

6. Synopsis of Accident or Complaint **UPC**

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9 - SPORTS OR RECREATION PLACE	QUEEN VALLEY	AZ

10A. First Product	10B. Trade/Brand Name	10C. Model Number
5044 - Utility Vehicles	YAMAHA/VIN# b)(3)CPSA Section 25(c),(d)(6)	RHINO

10D. Manufacturer Name and Address
YAMAHA MOTOR CORPORATION, USA
6555 Katella Avenue
Cypress, CA 90630

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11/12/2008	9087	Frank J. Nava

27. Distribution	28. Source Document Number
Streeter, Robin; Topka, Tanya	0704037535

This death involved a utility vehicle and a 57-year old man. Information in this report was obtained from local medical examiner personnel and county sheriff's personnel.

The Medical Examiner identified the victim as weighing 220 pounds and being 75-inches tall.

According to the victim's son, he and his father were camping in the desert. They were scouting for deer during the night of 10-25-2007. The victim was traveling in one vehicle while his son was on another vehicle.

It was after 7 p.m. when they decided to return to camp. The father was driving a 4-wheeled utility vehicle, see Sheriff's photos 1 & 2.

This vehicle had a steering wheel and two seats with seat belts. A flat bed area was located behind the seats. A canopy with a roll bar was located above the driver and passenger seats, see photos # 2 - 6.

The son told Deputies that he started traveling in his vehicle towards their camp while his father took a slightly different route. He indicated that his father traveled south along a dry/sandy wash.

Deputies reported that the terrain traveled by the victim consisted of a combination of partially compacted and loose sand. One Deputy indicated that they did not believe the victim was wearing a safety restraint (seat belt).

Deputies identified this sandy wash area as one that was frequented by off-road vehicle enthusiasts. They found multiple vehicle tracks in the area.

When the son arrived back at their camp he did not see his father. The son left their camp and went looking for his father.

He found the victim and the utility vehicle in the dirt wash. The utility vehicle had overturned. His father was trapped under the vehicle.

The son said that he moved the vehicle off of his father. He told deputies that his father was alive at this point and was talking. The son called for help.

Local officials received this call around 7:38 p.m. Fire Department paramedics and Sheriffs personnel responded to the scene. The victim died before a helicopter could arrive at the scene.

Deputies examined the victim's vehicle. The rear passenger side tire was flat. They reported that the headlight switch was in the on position on high beam, that the transmission was in low gear, the differential was not locked in and that the vehicle was in 2 wheel drive. They also determined that the braking system was functioning normally.

Copies of the Sheriff's Reports are attached as exhibit # 2 while Sheriff's photographs are included as exhibit # 3.

A county medical examiner performed an autopsy. He determined that this death was due to multiple blunt force injuries.

The victim's injuries included brain swelling with left transtentorial and bilaterial cerebellar tonsillar herniation; fractures of the right clavicle and right lateral 2nd, 3rd and 5th through 8th ribs; multiple pelvic fractures; abrasions and lacerations of the head; and abrasions, contusions and lacerations of the thorax and abdomen.

A copy of the medical examiner's report is attached as exhibit # 1.

PRODUCT IDENTIFICATION

This death involved a 4 wheeled Rhino utility vehicle from Yamaha.

Deputies identified this utility vehicle as a 2007 Yamaha Rhino, with VIN # (b)(3):CPSA Section 25(c),(b)(6)

CONTACTS:	PURPOSE & RESULTS:
Sheriff & Medical Examiner personnel	Incident scenario & product info

EXHIBITS:

1. MEDICAL EXAMINER REPORTS
2. SHERIFF'S REPORTS
3. SHERIFF'S PHOTOGRAPHS
4. CONTACT SHEET

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(b)(3):CPSA Section 25(c),(b)(6)

(b)(3):CPSA Section 25(c),(b)(6)

AUTOPSY REPORT

PINAL COUNTY, ARIZONA

PINAL COUNTY SHERIFF'S OFFICE

(b)(3):CPSA Section 25(c),(b)(6)

OCTOBER 27, 2007

CHECKED DEC 04 2007

(b)(3):CPSA Section 25 (c),(b)(6)

(b)(3):CPSA Section 25(c),(b)(6)

Final Diagnoses:

I. Blunt force injuries, head
   A. Abrasions and lacerations of the head
   B. Brain swelling with left transtentorial and bilateral cerebellar tonsillar herniation

II. Blunt force injuries, thorax and abdomen
   A. Abrasions, contusions and lacerations of the thorax and abdomen
   B. Fractures of the right clavicle and right lateral 2nd, 3rd and 5th through 8th ribs
   C. Multiple pelvic fractures

III. Blunt force injuries, upper and lower extremities
   A. Abrasions and contusions of the upper and lower extremities

IV. Arteriosclerotic cardiovascular disease
   A. Focal severe coronary artery atherosclerosis

V. Hypertensive cardiovascular disease
   A. Left ventricular hypertrophy (heart weight 520 gm)

OPINION:

In consideration of the known circumstances surrounding this death, the available medical history, and the examination of the remains, the cause of death is ascribed to multiple blunt force injuries.

The manner of death is accident.

(b)(6)

(b)(3):CPSA Section 25 (c),(b)(6)

(b)(3):CPSA Section 25(c),(b)(6)

DATE OF DEATH: October 25, 2007 **TIME OF DEATH:** 2100 hours

DATE OF AUTOPSY: October 27, 2007 **TIME OF AUTOPSY:** 0800 hours

PLACE OF AUTOPSY: Forensic Science Center
2825 E District Street
Tucson, Arizona 85714

PERFORMED BY: (b)(6)

WITNESSED BY:

HISTORY:
This 57-year-old man was a driver of an all-terrain vehicle in a sand wash when the all-terrain vehicle overturned, reportedly landing on top of the decedent.

PHOTOGRAPHS:
Photographs are taken during the autopsy by b(6)

IDENTIFICATION:
The body is identified by b(6) son of the decedent, by visual identification on October 25, 2007.

CLOTHING:
The body is received dressed in:
1. A gray T-shirt.
2. A pair of blue "Hanes" boxer briefs.
3. A pair of white socks.

GENERAL EXTERNAL EXAMINATION:
The body is that of a well developed, well nourished (body mass index of 27.5 kg/m^2), adult, White male who weighs 220 pounds, is 75 inches in length, and appears compatible with the reported age of 57 years. The body is cold. Rigor mortis is fully fixed in the muscles of the jaw and extremities. Fixed purple livor mortis extends over the posterior surfaces of the body, except in areas exposed to pressure.

HEAD:
The head is normocephalic. The scalp hair is brown/gray, wavy and 3 cm in length over the crown. **EYES:** The irides are brown. The cornea are clouded. The sclerae are white and the

(b)(3):CPSA Section 25 (c),(b)(6)

(b)(3):CPSA Section 25(c),(b)(6)

HEAD (Continued):
conjunctivae are clear. No petechial hemorrhages are identified on the sclerae or conjunctivae. **NOSE:** The nose is normally formed and the septum is in the midline. **MOUTH:** The anterior teeth are natural and in adequate condition. **EARS:** The ears are unremarkable. **FACE:** The decedent wears a brown/gray mustache.

NECK:
The neck organs are in the normal midline position and appear unremarkable.

CHEST:
The thorax is well developed and symmetrical.

ABDOMEN:
The abdomen is flat.

GENITALIA:
The external genitalia are those of a normal adult male. The testes are bilaterally descended within the scrotum.

ANUS:
The anus is free of lesions.

EXTREMITIES:
UPPER EXTREMITIES: The upper extremities are well developed and symmetrical without absence of digits. The hands have short, dirty, irregularly trimmed fingernails. **LOWER EXTREMITIES:** The lower extremities are well developed and symmetrical without absence of digits.

BACK:
The spine is normally formed and the surface of the back is free of lesions.

IDENTIFYING MARKS, SCARS AND TATTOOS:
Identifying marks, scars and tattoos include:
1. A (b)(3):CPSA Section 25(c),(b)(6) tattoo on the dorsal surface of the right forearm.
2. A 12 cm curvilinear scar on the anterior right shoulder.

EVIDENCE OF MEDICAL INTERVENTION:
Evidence of medical intervention includes:
1. An oral airway.
2. Two electrocardiograph patches on the chest and abdomen.

(b)(3):CPSA Section 25(c), (b)(6)

(b)(3):CPSA Section 25(c)(b)(6)

EVIDENCE OF INJURY:

I. Blunt Force Injuries, Head:

On the bridge of the nose is a 3 x 0.7 cm dried red abrasion. On the frontal scalp is a 1.5 x 1.3 cm dried red abrasion. On the left frontal scalp is a 0.5 x 0.7 cm dried red abrasion. On the superior frontal scalp is a 3 x 2 cm dried red abrasion. On the right parietal scalp is a 2 x 0.5 cm laceration. On the chin is a 2 x 1.3 cm dried red abrasion. On the chin is a 2 x 0.3 cm laceration. On the chin is a 1 x 0.6 cm dried red abrasion.

Reflection of the scalp shows diffuse subscalp and subperiosteal hemorrhage over the frontal and bilateral parietal bones. The scalp is edematous. The skull is of normal thickness and without fracture. The brain weighs 1670 grams. The dura mater and falx cerebri are intact, and not adherent to the brain. The leptomeninges are edematous. There is no epidural, subdural or subarachnoid hemorrhage. The cerebral hemispheres are edematous with widening of the gyri and narrowing of the sulci. There is left transtentorial herniation and bilateral cerebellar tonsillar herniation. The cranial nerves and blood vessels are free of abnormality. Sections through the brain reveal no contusions, hemorrhage or mass lesions within the cerebral hemispheres, brain stem or cerebellum. The cerebral ventricles are slightly narrowed.

II. Blunt Force Injuries, Thorax and Abdomen:

On the left lateral chest is an 11 x 4 cm purple contusion. On the right lateral chest is a 5 x 2.5 cm dried red abrasion. On the right axilla is a 2 x 1 cm dried red abrasion. On the right anterolateral chest is a 4.5 x 1 cm dried red abrasion. On the right mid anterolateral chest is a 7.5 x 3 cm purple contusion. On the right lateral abdomen are numerous irregular dried red abrasions that range in size from 9 x 3.5 cm to 2 x 0.3 cm, consistent with a "brush burn" abrasion. On the right lower abdomen is a 1 x 0.5 cm laceration. On the right lower abdomen is a 0.5 x 0.6 cm laceration.

Internal examination of the thoracic cavity shows fractures of the right clavicle and right lateral 2nd, 3rd and 5th through 8th ribs.

Internal examination of the abdominal cavity shows multiple pelvic fractures with mucosal bladder lacerations with hemorrhage into the bladder.

III. Blunt Force Injuries, Upper Extremities:

On the right elbow is a 4 x 1.5 cm dried red abrasion. On the right posterior upper arm are numerous irregular dried red abrasions that range in size from 1 x 0.5 cm to 0.3 x 0.3 cm. On the posterior surface of the right hand is a 3.5 x 2.5 cm dried red abrasion. On the posterior left upper extremity is a 5 x 1.5 cm dried red abrasion. On the lateral left elbow is an 8 x 0.7 cm dried red abrasion.

(b)(3):CPSA Section 25
(c),(b)(6)

(b)(3):CPSA Section 25(c),(b)(6)

IV. Blunt Force Injuries, Lower Extremities:
On the left anteromedial thigh is a 6 x 3 cm purple contusion. On the skin overlying the left tibia is a 3 x 2.5 cm dried red abrasion. On the right anterior thigh is a 12 x 4 cm dried red abrasion surrounded by a purple contusion. On the skin overlying the right tibia is a 4.5 x 2 cm dried red abrasion.

GENERAL INTERNAL EXAMINATION:

The body is opened with a routine thoracoabdominal incision. The skeletal muscle has a dark red-brown color and a normal smooth texture.

BODY CAVITIES:
No adhesions or abnormal collections of fluid are in the pleural spaces or peritoneal cavity. All body organs are in normal and anatomic position. The serous surfaces and pericardium are smooth and glistening.

CARDIOVASCULAR SYSTEM:
HEART: The heart weighs 520 grams. The coronary arteries arise normally and follow the distribution of a right dominant pattern with focal severe atherosclerosis of the left anterior descending coronary artery. No thrombosis, plaque hemorrhage, or dissection is within the atherosclerotic segment. The chambers are not dilated. The chambers and valves are proportionate. The valves are normally formed, thin and pliable and free of vegetations and degenerative changes. The following circumferential valve measurements are obtained: tricuspid valve, 14 cm; pulmonic valve, 9 cm; mitral valve, 13 cm; and aortic valve, 9 cm. The myocardium is dark red-brown, firm, and free of fibrosis, erythema, pallor and softening. The atrial and ventricular septa are intact and the septum and free walls are free of muscular bulges. The left ventricle measures 1.6 cm and the right ventricle measures 0.8 cm in thickness as measured 1 cm below the respective atrioventricular valve annulus. The interventricular septum measures 1.6 cm in thickness. **AORTA:** The aorta and its major branches arise normally and follow the usual course, with no significant aortic atherosclerosis. The orifices of the major aortic vascular branches are patent. The vena cava and its major tributaries are patent and return to the heart in the usual distribution and are unremarkable.

RESPIRATORY SYSTEM:
The right and left lungs weigh 760 and 780 grams, respectively. The upper and lower airways are unobstructed and the mucosal surfaces are smooth and yellow-tan. The pleural surfaces are smooth, glistening, and unremarkable. The pulmonary parenchyma is dark red-purple and free of consolidation and masses. The cut surfaces of the lungs exude moderate amounts of blood and frothy fluid. The pulmonary arteries are normally developed and unremarkable.

LIVER AND BILIARY SYSTEM:
LIVER: The liver weighs 2110 grams. The hepatic capsule is smooth, glistening, and intact.

(b)(3):CPSA Section 25 (c),(b)(6)

(b)(3):CPSA Section 25(c),(b)(6)

LIVER AND BILIARY SYSTEM (Continued):
covering a pale brown parenchyma. **GALLBLADDER:** A thin-walled gallbladder contains green watery bile without stones.

PANCREAS:
The pancreas has a normal size, shape, position, and tan lobulated appearance.

ADRENAL GLANDS:
The adrenal glands have normal cut surfaces with yellow cortex and brown medulla.

SPLEEN:
The spleen weighs 150 grams and has a smooth intact capsule covering a red-purple moderately firm parenchyma.

GASTROINTESTINAL TRACT:
ESOPHAGUS: The esophagus is lined by a gray-white smooth mucosa. **STOMACH:** The gastroesophageal junction is unremarkable. The gastric mucosa is arranged in the usual rugal folds, and the lumen contains 75 ml of partially digested food fragments. **SMALL AND LARGE INTESTINES:** The small bowel has uniform dimension and appears unremarkable. The vermiform appendix is present. The colon has uniform dimension and appears unremarkable. There are no diverticula or externally obvious masses.

GENITOURINARY TRACT:
The right and left kidneys weigh 190 and 170 grams, respectively. The renal capsules are smooth, thin, semitransparent, and strip with ease from the underlying smooth, red-brown, firm, cortical surfaces. The cortices are of normal thickness and delineated from the medullary pyramids. The calyces, pelves, and ureters are non-dilated and free of stones. The urinary bladder contains red, hemorrhagic urine. The non-injured bladder mucosa is gray-tan and smooth. The prostate has a tan cut surface and is not enlarged. The testicles are of normal size, shape and position with tan homogeneous cut surfaces.

NECK:
Examination of the soft tissues of the neck, including strap muscles and large vessels, reveals no abnormalities. The hyoid and thyroid cartilage are intact. The laryngeal mucosa is unremarkable. The thyroid gland is of normal position, size and texture.

HEAD:
See "EVIDENCE OF INJURY".

(b)(3):CPSA Section 25(c),(b)(6)

(b)(3):CPSA Section 25(c),(b)(6)

MUSCULOSKELETAL SYSTEM:
The bony framework, supporting musculature, and soft tissues are not unusual except as previously described. The cervical spinal column is stable on internal palpation.

SPECIMENS:
At the time of autopsy, vitreous, heart blood and urine are retained.

HISTOLOGY
No histologic sections were taken for microscopic examination.

TOXICOLOGY
See separate toxicology report.

10/14/2008 PINAL COUNTY SHERIFF'S OFFICE 259
13:17 LAW Incident Table: Page: 1

Incident Number: 071025155
Nature: PI ACCIDENT Case Number: Image:
Addr: Area: F
City: QUEEN VALLEY St: AZ Zip: 85219 Contact: 10-5 (b)(6)
+- Complainant& 3195737 ----------
Lst: (b)(6)
DOB: (b)(6) SSN: [redacted] Adr: (b)(6)
Rac: W Sx: M Tel: (b)(6)

Offense Codes: 4307 3416 Reported: 3416 Observed: 4307
Circumstances: LT10
Rspndg Officers: QVFD (b)(6)
Rspnsbl Officer: (b)(6) Agency: PCSO CAD Call ID: C419466
Received By: Last RadLog: 01:05:48 10/26/2007 98
How Received: T TELEPHONE Clearance: CLO CLOSED
When Reported: 19:38:43 10/25/2007 Disposition: CLO Disp Date: 12/07/2007
Occurrd between: 19:38:43 10/25/2007 Judicial Sts:
and: 19:38:43 10/25/2007 Misc Entry:

MO:
Narrative: (See below)
Supplement: (See below) (See below) &

= = = =

LAW Incident Circumstances:

Contributing Circumstances

Seq	Code		Comments
1	LT10	FIELD/WOODS	

LAW Incident Responders Detail

Responding Officers

Seq	Name	Unit
1	QVFD	QVFD
2	(b)(6) [redacted]	
3		

Main Radio Log Table:

Time/Date	Typ	Unit	Code	Zone	Agnc	Description
01:05:48 10/26/2007	1	QVFD	98	F	PCSO	incid#=071025155 ASSIGNMENT CO
00:53:05 10/26/2007	1	443	CMPLT	F	PCSO	incid#=071025155 COMPLETED CAL
00:52:36 10/26/2007	1	339	CMPLT	F	PCSO	incid#=071025155 COMPLETED CAL
00:33:45 10/26/2007	1	339	C20	F	PCSO	incid#=071025155 C4 JUST ABOUT
00:33:45 10/26/2007	1	339	C20	F	PCSO	+ 2101
00:33:45 10/26/2007	1	443	C20	F	PCSO	incid#=071025155 C4 JUST ABOUT
00:33:45 10/26/2007	1	443	C20	F	PCSO	+ 2101
22:40:36 10/25/2007	1	443	28	F	PCSO	pl=MCZ5ZW
22:00:09 10/25/2007	1	443	I	F	PCSO	incid#=071025155 ALSO HAVE ME
21:59:59 10/25/2007	1	443	I	F	PCSO	incid#=071025155 HAVE SW TOWIN
21:59:59 10/25/2007	1	443	I	F	PCSO	+ H call=2101
21:59:39 10/25/2007	1	443	ARRVD	F	PCSO	incid#=071025155 ARRIVED AT SC
21:28:30 10/25/2007	1	339	ENRT	F	PCSO	incid#=071025155 ENROUTE call=
21:19:45 10/25/2007	1	443	CMPLT	F	PCSO	incid#=071025155 Reassigned to
21:14:13 10/25/2007	1	443	ARRVD	F	PCSO	incid#=071025155 ARRIVED AT SC
21:03:44 10/25/2007	1	QVFD	I	F	PCSO	incid#=071025155 THIS PATIENT
20:54:05 10/25/2007	1	443	I	F	PCSO	incid#=071025155 LET HOMICIDE
20:53:55 10/25/2007	1	QVFD	I	F	PCSO	incid#=071025155 .. LOOKS LIKE
20:43:26 10/25/2007	1	443	ENRT	F	PCSO	incid#=071025155 ENROUTE call=
20:31:04 10/25/2007	1	QVFD	I	F	PCSO	incid#=071025155 WE ARE ON SCE
20:31:04 10/25/2007	1	QVFD	I	F	PCSO	+ EA call=2101
20:25:55 10/25/2007	1	QVFD	I	F	PCSO	incid#=071025155 ... GPS...N33
20:25:25 10/25/2007	1	QVFD	ARRVD	F	PCSO	incid#=071025155 ... GPS...N33
20:25:11 10/25/2007	1	QVFD	ARRVD	F	PCSO	incid#=071025155 ... GPS...N33
20:15:05 10/25/2007	1	QVFD	ENRT	F	PCSO	incid#=071025155 ENROUTE call=

Narrative:

DR#:071025155

WRITTEN BY: (b)(6)
APPROVED BY:
ENTERED BY:
DATE ENTERED: Fri Dec 14 15:28:46 MST 2007

CASE TYPE: DEATH INVESTIGATION

ATTACHMENTS: TOW SHEET

EVIDENCE LIST: NONE

SUBPOENA LIST: NONE

PROPERTY TAKEN: NONE

VEHICLE: 2007 YAMAHA RHINO ATV, AZ. M/C Z5ZW

SYNOPSIS: ON 10-25-07 (b)(3) CPSA Section 25(c),(b)(6) WAS KILLED WHILE RIDING HIS ATV IN THE DESERT OFF OF FOREST SERVICE ROAD 172. CASE TURNED OVER TO (b)(6) AS IT DID NOT MEET THE CRITERIA FOR THE PCSO C.A.R.T. INVESTIGATORS.

NARRATIVE: ON 10-25-07, AT APPROX. 1940 HRS., I WAS NOTIFIED BY DISPATCH OF AN ATV ACCIDENT IN THE QUEEN VALLEY AREA. I WAS INFORMED THAT QUEEN VALLEY FIRE WAS ENROUTE. AT APPROX. 2010 HRS., I WAS INFORMED THAT QUEEN VALLEY FIRE WAS WORKING THE PATIENT, HAD A HELICOPTER INBOUND AND WAS REQUESTING ASSISTANCE. WHILE I WAS ENROUTE TO THE SCENE QUEEN VALLEY FIRE REPORTED THAT THE PATIENT WAS DECEASED.

ON MY ARRIVAL AT THE SCENE I SPOKE TO CECIL FENDLEY, QVFD CHIEF. HE POINTED OUT THE VICTIM'S SON, (b)(6) AND TOLD ME THAT MATTHEW HAD FOUND HIS FATHER, (b)(3) CPSA Section 25(c),(b)(6) TRAPPED UNDER HIS ATV AND HAD CALLED FOR HELP. CHIEF (b)(6) ALSO TOLD ME THAT THERE HAD BEEN SEVERAL ATV'S THROUGH THE AREA/SCENE PRIOR TO MY ARRIVAL. THERE WAS NO FURTHER TRAFFIC THROUGH THE SCENE UNTIL CPL. (b)(6) RELEASED THE ATV TO THE TOW COMPANY.

I SPOKE TO (b)(6) AND HE TOLD ME THAT HE, AND HIS FATHER, HAD BEEN SCOUTING IN THE AREA. WHEN THEY HEADED BACK TO CAMP (b)(6) HAD TRAVELLED FR 172 AND (b)(3) CPSA Section 25(c), (b)(6) HAD TURNED OFF, SOUTH, INTO THE WASH. WHEN (b)(3) CPSA Section 25(c), (b)(6) DIDN'T ARRIVE IN CAMP, (b)(6) WENT LOOKING FOR HIM. HE SAID THAT HE FOUND HIS FATHER HAD OVERTURNED HIS ATV AND WAS TRAPPED BENEATH IT. (b)(6) PUSHED THE ATV OFF OF (b)(3) CPSA Section 25(c),(b)(6) AND CALLED FOR HELP.

I RECORDED (b)(3) CPSA Section 25(c),(b)(6) PERSON INFO AND SENT (b)(6) HOME TO BE

WITH FAMILY.

I REQUESTED THAT HOMICIDE BE CALLED TO THE SCENE AND WAS INFORMED THAT CPL [redacted] WAS ENROUTE. I ALSO REQUESTED SOUTHWEST TOWING BE DISPATCHED TO RECOVER THE ATV, AND THAT THE MEDICAL EXAMINER BE CONTACTED FOR TRANSPORT OF THE VICTIM.

AT THE SCENE I NOTED THAT THE GROUND SURFACE CONSISTED OF A COMBINATION OF PARTIALLY COMPACTED AND LOOSE SAND. THE TIRE PRINTS THAT WERE DISCERNIBLE INDICATED THAT THE WASH WAS HEAVILY USED BY OFF ROAD ENTHUSIASTS. [redacted] ATV WAS SITTING UPRIGHT, FACING NORTH, ON THE EASTERN SIDE OF THE WASH. THE RIGHT REAR TIRE WAS FLAT AND I NOTED A DENT IN THE RIM OF THE WHEEL. THE DRIVER SIDE DOOR PANEL WAS BENT ENOUGH TO PREVENT OPENING. THERE WERE NUMEROUS SCRATCHES ON THE ATV CONSISTENT WITH NORMAL WEAR AND TEAR IN THE OFF ROAD ENVIRONMENT, HOWEVER I NOTED SOME DEEPER GOUGES, ON THE TOP OF THE ROOF NEAR THE EDGE ON THE PASSENGER SIDE, THAT APPEARED TO HAVE BEEN CAUSED BY A HARDER IMPACT THAN THE OTHER MARKS. THIS INDICATES THAT THE ATV MAY HAVE TURNED OVER COMPLETELY AT SOME TIME IN ITS SERVICE LIFE. SEE [redacted] SUPPLEMENT FOR FURTHER SCENE DESCRIPTION/PHOTOS.

ON [redacted] ARRIVAL I TURNED THE SCENE OVER TO HIM. SOUTHWEST TOWING ARRIVED AND RECOVERED THE ATV. THIS CONCLUDED MY INVOLVEMENT WITH THIS CASE.

CASE STATUS: TOT INVESTIGATIONS

Law Supplemental Narrative:

Supplemental Narratives

Seq	Name	Date	Narrative
1	(b)(6)	15:49:16 10/30/2007	

071025155 SUPPLEMENT (b)(6)
ENTERED: 10/30/07 WRITTEN BY: (b)(6)
ENTERED BY:

APPROVED BY: HOMICIDE (b)(6)
DATE APPROVED: 10/30/07

10-26-2007

INCIDENT: SUPPLEMENTAL REPORT FOR A DEATH INVESTIGATION.

ATTACHMENTS: NONE THIS SUPPLEMENT.

VICTIM: (b)(3) CPSA Section 25(c),(b)(6) PERSON NUMBER #.

SUSPECT: NONE THIS SUPPLEMENT.

SUBJECT: (b)(6) PERSON NUMBER #.

SUBJECT: PERSON NUMBER #.

SUBPOENA LIST: NONE THIS SUPPLEMENT.

PROPERTY TAKEN: NONE THIS SUPPLEMENT.

VEHICLE: ONE, 2007 YAMAHA ALL TERRAIN VEHICLE, BEARING VEHICLE IDENTIFICATION NUMBER (b)(3) CPSA Section 25(c),(b)(6) AND ARIZONA LICENSE PLATE NUMBER (b)(3) CPSA Section 25(c),(b)(6) EXPIRING 08-31-2008, GREEN IN COLOR.

EVIDENCE LIST: NONE THIS SUPPLEMENT.

SYNOPSIS: ON THURSDAY, OCTOBER 25, 2007 (b)(3) CPSA Section 25(c),(b)(6) WAS RIDING A YAMAHA ALL TERRAIN VEHICLE OFF FOREST SERVICE ROAD NUMBER #172 IN PINAL COUNTY OUTSIDE THE TOWN OF QUEEN VALLEY ARIZONA IN AN AREA WITH GLOBAL POSITIONING SYSTEM READING 33 DEGREE, 20 MINUTES AND 14.4 SECONDS NORTH AND 111 DEGREES, 13 MINUTES AND 41.2 SECONDS WEST. (b)(3) CPSA Section 25(c),(b)(6) WAS EJECTED FROM THE VEHICLE AND THE VEHICLE ROLLED ON TOP OF HIM CAUSING HIS DEATH. (b)(3) CPSA Section 25(c),(b)(6) WAS TRANSPORTED TO THE PIMA COUNTY MEDICAL EXAMINERS OFFICE, FORENSIC SCIENCE CENTER IN TUCSON ARIZONA 85714 FOR AUTOPSY.

NARRATIVE: ON THURSDAY, OCTOBER 25, 2007 (b)(3) CPSA Section 25(c),(b)(6) WAS RIDING A YAMAHA ALL TERRAIN VEHICLE OFF FOREST SERVICE ROAD NUMBER #172 IN PINAL COUNTY OUTSIDE THE TOWN OF QUEEN VALLEY ARIZONA IN AN AREA WITH GLOBAL POSITIONING SYSTEM READING 33 DEGREE, 20 MINUTES AND 14.4 SECONDS NORTH AND 111 DEGREES, 13 MINUTES AND 41.2 SECONDS WEST. (b)(3) CPSA Section 25(c),(b)(6) WAS EJECTED FROM THE VEHICLE AND THE VEHICLE ROLLED ON TOP OF HIM CAUSING HIS DEATH. AT ABOUT 2100 HOURS, I WAS ADVISED OF HIS INCIDENT BY THE OFFICE OF THE PINAL COUNTY SHERIFF, COMMUNICATION CENTER, (b)(6) WAS ON SCENE AND REQUESTING MY RESPONSE. (b)(6) WAS NOTIFIED.

AT ABOUT 2127 HOURS, I DEPARTED MY RESIDENCE IN ROUTE TO QUEEN VALLEY ARIZONA ARRIVING AT ABOUT 2225 HOURS. THE SCENE WAS LOCATED ABOUT 1.0 MILES NORTH OF THE INTERSECTION OF INTERSTATE HIGHWAY NUMBER #60 AND QUEEN VALLEY ROAD, THEN ABOUT 3.0 MILES NORTHEAST ON HEWITT STATION ROAD, THEN 4.4 MILES NORTHEAST ON FOREST SERVICE ROAD NUMBER #172 AND 0.3 MILE SOUTHWEST DOWN A SANDY WASH. THIS AREA IS UNINHABITED, UNDEVELOPED WILDERNESS. UPON ARRIVAL AT THE SCENE, I MET WITH [b)(6)] AND QUEEN VALLEY FIRE [b)(6)] ACCORDING TO [b)(3):CPSA Section 25(c),(b)(6)] WAS SCOUTING FOR DEER FOR A HUNT THAT WAS STARTING ON FRIDAY, OCTOBER 26, 2007. [b)(3):CPSA Section 25(c),(b)(6)] WAS FOUND IN THE SAND WASH WITH THE ALL TERRAIN VEHICLE ON TOP OF HIM BY HIS SON [b)(6)] [b)(6)] ALLEGEDLY, [b)(6)] GOT THE ALL TERRAIN VEHICLE UP RIGHT OFF [b)(3):CPSA Section 25(c),(b)(6)] WHO WAS STILL BREATHING AND TALKING AT THAT TIME. QUEEN VALLEY FIRE DEPARTMENT WAS NOTIFIED AND RESPONDED TO THE SCENE, AN AIR AMBULANCE RESPONDED TO THE SCENE AND THE FLIGHT NURSE FOR THE AIR AMBULANCE PRONOUNCED [b)(3):CPSA Section 25(c),(b)(6)] DEAD AT ABOUT 2100 HOURS PER DIRECTIONS OF AN UNIDENTIFIED DOCTOR FROM THE MARICOPA COUNTY MEDICAL CENTER IN PHOENIX ARIZONA. THE AIR AMBULANCE HAD ALREADY DEPARTED THE SCENE PRIOR TO MY ARRIVAL, AS DID [b)(6)] AND THE FIRE RESCUE UNIT FROM THE QUEEN VALLEY FIRE DEPARTMENT THAT I PASSED ON MY WAY TO THE SCENE.

THE OFFICE OF THE PINAL COUNTY MEDICAL EXAMINER, MEDICAL INVESTIGATOR [b)(6)] WAS NOTIFIED OF THE INCIDENT AND THAT DUE TO THE WILDERNESS AREA WE WOULD MEET THE MORTUARY TRANSPORTATION COMPANY AT THE INTERSECTION OF QUEEN VALLEY ROAD AND INTERSTATE HIGHWAY NUMBER #60. A FOUR WHEEL DRIVE TOW TRUCK WAS REQUESTED FROM SOUTHWEST TOWING LOCATED AT 840 EAST HIGHWAY NUMBER #60 IN SUPERIOR ARIZONA TO REMOVE THE ALL TERRAIN VEHICLE. SOUTHWEST TOWING ARRIVED TAKING CUSTODY OF THE 2007 YAMAHA ALL TERRAIN VEHICLE, BEARING VEHICLE IDENTIFICATION NUMBER [b)(3):CPSA Section 25(c),(b)(6)] AND ARIZONA LICENSE PLATE NUMBER [b)(3):CPSA Section 25(c),(b)(6)] EXPIRING 08-31-2008, GREEN IN COLOR AND REMOVING IT TO THEIR STORAGE YARD. FIRE [b)(6)] [b)(6)] DEPARTED THE SCENE WITH SOUTHWEST TOWING.

PRIOR TO THE ARRIVAL OF SOUTHWEST TOWING, I TOOK PICTURES WITH MY ISSUED DIGITAL CAMERA OF THE AREA, VEHICLE AND [b)(3):CPSA Section 25(c),(b)(6)] AFTER THE DEPARTURE OF SOUTHWEST TOWING, I TOOK ADDITIONAL PICTURES OF [b)(3):CPSA Section 25(c),(b)(6)] [b)(3):CPSA Section 25(c),(b)(6)] UPON MY ARRIVAL, THE VEHICLE WAS FACING IN A SOUTHWEST DIRECTION AND [b)(3):CPSA Section 25(c),(b)(6)] WAS ON HIS BACK BY THE DRIVERS SIDE OF THE VEHICLE COVERED WITH A YELLOW IN COLOR PLASTIC EMERGENCY BLANKET WITH HIS HEAD POINTING IN A NORTHEAST DIRECTION. [b)(3):CPSA Section 25(c),(b)(6)] WAS DRESSED IN BLUE IN COLOR UNDERWEAR, GRAY IN COLOR SOCKS AND A GRAY IN COLOR T-SHIRT STYLE SHIRT, WHICH WAS CUT FROM THE FRONT FOR LIFE SAVING MEASURES. THERE WAS MEDICAL TREATMENT EQUIPMENT DISCONNECTED BUT STILL ATTACHED TO HIS BODY. FIRE [b)(6)] STATED THE SHOES AND PANTS WORN BY [b)(3):CPSA Section 25(c),(b)(6)] WERE REMOVED FOR LIFE SAVING MEASURES. [b)(3):CPSA Section 25(c),(b)(6)] HAD WHAT APPEARED TO BE ABRASIONS AND DISCOLORATION TO THE RIB CAGE/ABDOMEN AREA OF THE RIGHT SIDE. [b)(3):CPSA Section 25(c),(b)(6)] [b)(3):CPSA Section 25(c),(b)(6)] ALSO HAD WHAT APPEARED TO BE BLEEDING FROM LACERATIONS TO THE FOREHEAD, NOSE, CHIN AREAS AND PELVIC AREA OF THE RIGHT SIDE. RIGOR MORTIS WAS PRESENT AND LIVIDITY WAS CONSENTIENT WITH THE POSITION OF [b)(3):CPSA Section 25(c),(b)(6)]

DUE TO THE SANDY CONDITIONS AND TRAFFIC THROUGH THE AREA PRIOR TO MY ARRIVAL THE DIRECTION OF TRAVEL FOR THE VEHICLE AND THE FIRST SIGNIFICANT INCIDENT THAT CAUSED THE ACCIDENT COULD NOT BE DETERMINED AT THE SCENE. IT IS BELIEVED THAT [b)(3):CPSA Section 25(c),(b)(6)] WAS NOT WEARING A RESTRAINT DEVICE AT THE TIME OF THE ACCIDENT.

WITH ASSISTANCE FROM [b)(6)] I PLACED [b)(3):CPSA Section 25(c),(b)(6)] IN A BLUE

IN COLOR BODY TRANSPORTATION BAG THAT I PROVIDED AND I SEALED WITH SEAL NUMBER [redacted] AT ABOUT 2340 HOURS. [redacted] AND I PLACED [redacted] IN THE BLUE IN COLOR BODY TRANSPORTATION BAG IN THE BACK OF [redacted] COUNTY ISSUED PICK UP TRUCK FOR TRANSPORTATION TO THE INTERSECTION OF QUEEN VALLEY ROAD AND INTERSTATE HIGHWAY NUMBER #60. WE DEPARTED THE SCENE AT ABOUT 2159 HOURS.

ON FRIDAY, OCTOBER 26, 2007 AT ABOUT 0050 HOURS, [redacted] WAS TURNED OVER TO THE ANGELS IN WAITING MORTUARY TRANSPORTATION COMPANY AND THEY DEPARTED WITH [redacted] IN ROUTE TO THE PIMA COUNTY MEDICAL EXAMINERS OFFICE, FORENSIC SCIENCE CENTER IN TUCSON ARIZONA 85714 FOR AUTOPSY.

AT ABOUT 0104 HOURS, I ARRIVED AT THE OFFICE OF THE PINAL COUNTY SHERIFF, SUBSTATION IN GOLD CANYON ARIZONA AND TELEPHONED [redacted] EXPLAINING THE PROCESS IN THIS TYPE OF INVESTIGATION AND HOW TO RECOVER [redacted] AFTER THE AUTOPSY WAS COMPLETED. I PROVIDED [redacted] WITH MY CONTACT INFORMATION ALONG WITH THE INFORMATION FOR THE PIMA COUNTY MEDICAL EXAMINER OFFICE, FORENSIC SCIENCE CENTER IN TUCSON ARIZONA. I DEPARTED THE OFFICE OF THE PINAL COUNTY SHERIFF, SUBSTATION IN GOLD CANYON ARIZONA AT ABOUT 0215 HOURS.

AT ABOUT 1130 HOURS, I RECEIVED A TELEPHONE CALL FROM DEPUTY [redacted] STATING THE ONLY DEFECT HE FOUND DURING HIS INSPECTION OF THE 2007 YAMAHA ALL TERRAIN VEHICLE, BEARING VEHICLE IDENTIFICATION NUMBER [redacted] AND ARIZONA LICENSE PLATE NUMBER [redacted] EXPIRING 08-31-2008 WAS A FLAT REAR PASSENGER SIDE TIRE CAUSED FROM THE ACCIDENT.

CONCLUSION: CONTINUED INVESTIGATION OF THIS INCIDENT IS AWAITING THE MEDICAL EXAMINERS REPORT.

CASE STATUS: OPEN.

Law Supplemental Narrative:

Supplemental Narratives

Seq	Name	Date	Narrative
2	(b)(6)	15:52:47 10/30/2007	

071025155 SUPPLEMENT (b)(6)
ENTERED: 10/30/07 WRITTEN BY: (b)(6)
ENTERED BY:

APPROVED BY: (b)(6)
DATE APPROVED: 10/30/07

10-30-2007

INCIDENT: SUPPLEMENTAL REPORT FOR A DEATH INVESTIGATION.

ATTACHMENTS: NONE THIS SUPPLEMENT.

VICTIM: b(3):CPSA Section 25(c),(b)(6) PERSON NUMBER b(3):CPSA Section 25(c),(b)(6)

SUSPECT: NONE THIS SUPPLEMENT.

SUBJECT: b(6) PERSON NUMBER b(6)

SUBPOENA LIST: NONE THIS SUPPLEMENT.

PROPERTY TAKEN:
1. ONE, BROWN IN COLOR MANS WALLET.
2. ONE, TWENTY-DOLLAR BILL IN UNITED STATES CURRENCY, SERIAL NUMBER #EA61890450E.
3. ONE, CHASE CHECK CARD NUMBER b(3):CPSA Section 25(c),(b)(6)
4. ONE, WACHOVIA MASTER CARD N7UMBER b(3):CPSA Section 25(c),(b)(6)
5. ONE, BANK ONE ATM CARD NUMBER # b(3):CPSA Section 25(c),(b)(6)
6. ONE, SOCIAL SECURITY CARD NUMBER # b(3):CPSA Section 25(c),(b)(6) b(3):CPSA Section 25(c),(b)(6)

VEHICLE: ONE, 2007 YAMAHA ALL TERRAIN VEHICLE, BEARING VEHICLE IDENTIFICATION NUMBER b(3):CPSA Section 25(c),(b)(6) AND ARIZONA LICENSE PLATE NUMBER b(3):CPSA Section 25(c),(b)(6) EXPIRING 08-31-2008, GREEN IN COLOR.

EVIDENCE LIST: NONE THIS SUPPLEMENT.

SYNOPSIS: ON MONDAY, OCTOBER 29, 2007, I TURNED ONE BROWN IN COLOR MANS WALLET ALONG WITH ONE TWENTY DOLLAR BILL IN UNITED STATES CURRENCY SERIAL NUMBER #EA61890450E, ONE CHASE CHECK CARD NUMBER b(3):CPSA Section 25(c),(b)(6) ONE WACHOVIA MASTER CARD N7UMBER b(3):CPSA Section 25(c),(b)(6) ONE BANK ONE ATM CARD NUMBER b(3):CPSA Section 25(c),(b)(6) AND ONE SOCIAL SECURITY CARD NUMBER b(3):CPSA Section 25(c),(b)(6) ISSUED TO b(3):CPSA Section 25(c),(b)(6) OVER TO b(6)

NARRATIVE: ON MONDAY, OCTOBER 29, 2007, I TURNED ONE BROWN IN COLOR MANS WALLET ALONG WITH ONE TWENTY DOLLAR BILL IN UNITED STATES CURRENCY SERIAL NUMBER #EA61890450E, ONE CHASE CHECK CARD NUMBER b(3):CPSA Section 25(c),(b)(6) ONE WACHOVIA MASTER CARD N7UMBER b(3):CPSA Section 25(c),(b)(6) ONE BANK ONE ATM CARD NUMBER b(3):CPSA Section 25(c),(b)(6) AND ONE SOCIAL SECURITY CARD NUMBER b(3):CPSA Section 25(c),(b)(6) ISSUED TO b(3):CPSA Section 25(c),(b)(6) OVER TO b(6) SIGNED FOR THE ITEMS AT ABOUT 0935 HOURS.

ON TUESDAY, OCTOBER 30, 2007, I RECEIVED A TELEPHONE CALL FROM SOUTHWEST TOWING

IN SUPERIOR ARIZONA REFERENCE THE 2007 YAMAHA ALL TERRAIN VEHICLE, BEARING VEHICLE IDENTIFICATION NUMBER [redacted] AND ARIZONA LICENSE PLATE NUMBER [redacted] EXPIRING 08-31-2008, GREEN IN COLOR. I ADVISED SOUTHWEST TOWING THAT, THIS VEHICLE WAS ELIGIBLE FOR RELEASE AND THE OFFICE OF THE PINAL COUNTY SHERIFF DID NOT HAVE A HOLD ON THIS VEHICLE.

CONCLUSION: CONTINUED INVESTIGATION OF THIS INCIDENT IS AWAITING THE MEDICAL EXAMINERS REPORT.

CASE STATUS: OPEN.

Law Supplemental Narrative:

Supplemental Narratives

Seq	Name	Date	Narrative
3	(b)(6)	11:08:02 11/06/2007	

071024155 SUPPLEMENT (b)(6)
ENTERED: 11/06/07 WRITTEN BY: (b)(6)
ENTERED BY:

APPROVED BY: (b)(6)
DATE APPROVED: 11/06/07

NARRATIVE:

ON 10-26-07 I RECEIVED A REQUEST FROM (b)(6) TO ASSIST IN A DEATH INVESTIGATION. HE REQUESTED THAT I CONDUCT A POST ACCIDENT INSPECTION OF A VEHICLE INVOLVED IN AN INVESTIGATION. ACCORDING TO DETECTIVE BARTON THE VEHICLE HAD BEEN REMOVED AND WAS PLACED IN SOUTHWEST TOWING SECURED YARD IN SUPERIOR. HE FURTHER PROVIDED ME WITH THE FOLLOWING VEHICLE INFORMATION 2008 YAMAHA ATV BEARING AZ LIC (b)(3):CPSA Section 25(c),(b)(6) WITH VIN (b)(3):CPSA Section 25(c),(b)(6)

UPON MY ARRIVAL AT SOUTHWEST TOWING IN SUPERIOR AT APPROXIMATELY 1036 HRS ON 10-26-07 I MET WITH THE OWNER (b)(6) PROVIDED ME ACCESS TO THE IMPOUNDED VEHICLE. THE VEHICLE WAS A 2008 YAMAHA RHINO 660 GREEN IN COLOR I VERIFIED THE VIN NUMBER TO THE ONE DETECTIVE (b)(6) PROVIDED. ON INITIAL WALK AROUND THE VEHICLE I OBSERVED THAT THE RIGHT REAR TIRE WAS FLAT AND THE RIM DAMAGED. THERE WAS NO OTHER VISIBLE DAMAGE TO THE VEHICLE.

UPON CLOSER EXAMINATION I OBSERVED THE PASSENGER SEAT BELT WAS FASTENED, THE DRIVER SIDE WAS NOT. A BASIC FUNCTION CHECK SHOWED THE SEAT BELT WAS FUNCTIONING PROPERLY AND HAD NO SIGNS OF DAMAGE. THE HEADLIGHT SWITCH WAS IN THE ON POSSITION ON HIGH BEAMS AND WERE BOTH WORKING. THE VEHICLE TRANSMITION WAS IN GEAR LOW RANGE, THE DIFFERENTIAL WAS NOT LOCKED IN. THE VEHICLE WAS IN 2 WHEEL DRIVE. I ALSO STARTED THE VEHICLE AND CONDUCTED A BRAKE CHECK WITH ALL BRAKES FUNCTIONING NORMAL. I FURTHER CONDUCTED A VISUAL INSPECTION OF THE UNDERCARRAGE AND SUSPENSION SYSTEMS FOR THE VEHICLE AND FOUND NO OBVIOUS DAMAGE OR MISSING PARTS.

AFTER COMPLETEING THE INSPECTION I CONTACTED DETECTIVE (b)(6) AND ADVISED HIM OF THE INSPECTION RESULTS AND THE VEHICLE WAS LEFT WITH SOUTHWEST TOWING.

CASE STATUS:
PENDING

Law Supplemental Narrative:

Supplemental Narratives

Seq	Name	Date	Narrative
4	(b)(6)	10:10:42 12/10/2007	

071025155 SUPPLEMENT (b)(6)
ENTERED: 12/10/07 WRITTEN BY: (b)(6)
ENTERED BY:

APPROVED BY: (b)(6)
DATE APPROVED: 12/07/07

12-07-2007

INCIDENT: SUPPLEMENTAL REPORT FOR A DEATH INVESTIGATION.

ATTACHMENTS: NONE THIS SUPPLEMENT.

VICTIM: (b)(3) CPSA Section 25(c),(b)(6), PERSON NUMBER (b)(3) CPSA Section 25(c),(b)(6)

SUSPECT: NONE THIS SUPPLEMENT.

SUBJECT: (b)(6) PERSON NUMBER (b)(6)

SUBPOENA LIST: NONE THIS SUPPLEMENT.

PROPERTY TAKEN: NONE THIS SUPPLEMENT.

VEHICLE: NONE THIS SUPPLEMENT.

EVIDENCE LIST: NONE THIS SUPPLEMENT.

SYNOPSIS: ON FRIDAY, DECEMBER 07, 2007, I RECEIVED A COPY OF AUTOPSY REPORT NUMBER (b)(3) CPSA Section 25(c),(b)(6) FROM THE PIMA COUNTY MEDICAL EXAMINERS OFFICE. THE CAUSE OF DEATH IS ASCRIBED TO MULTIPLE BLUNT FORCE INJURIES AND THE MANNER OF DEATH IS ACCIDENTAL FOR (b)(3) CPSA Section 25(c),(b)(6)

NARRATIVE: ON FRIDAY, DECEMBER 07, 2007, I RECEIVED A COPY OF AUTOPSY REPORT NUMBER #ML 07-1980 FROM THE PIMA COUNTY MEDICAL EXAMINERS OFFICE AUTHORED BY (b)(6) IN (b)(6) OPINION THE CAUSE OF DEATH IS ASCRIBED TO MULTIPLE BLUNT FORCE INJURIES TO THE HEAD, THORAX AND ABDOMEN, UPPER AND LOWER EXTREMITIES, ARTERIOSCLEROTIC CARDIOVASCULAR DISEASE AND HYPERTENSIVE CARDIOVASCULAR DISEASE AND THE MANNER OF DEATH IS ACCIDENTAL FOR BOBBIE LEE WOODALL.

THERE WILL BE NO FURTHER INVESTIGATION OF THIS INCIDENT AND THIS REPORT IS FOR INFORMATION ONLY.

CONCLUSION: THIS REPORT IS FOR INFORMATION ONLY.

CASE STATUS: CLOSED.

Photo # 1 – View of the desert wash where the vehicle was traveling and of the utility vehicle. The victim's body is covered by the tarp located to the side of the vehicle.

Photo # 2 – Side view of the vehicle.

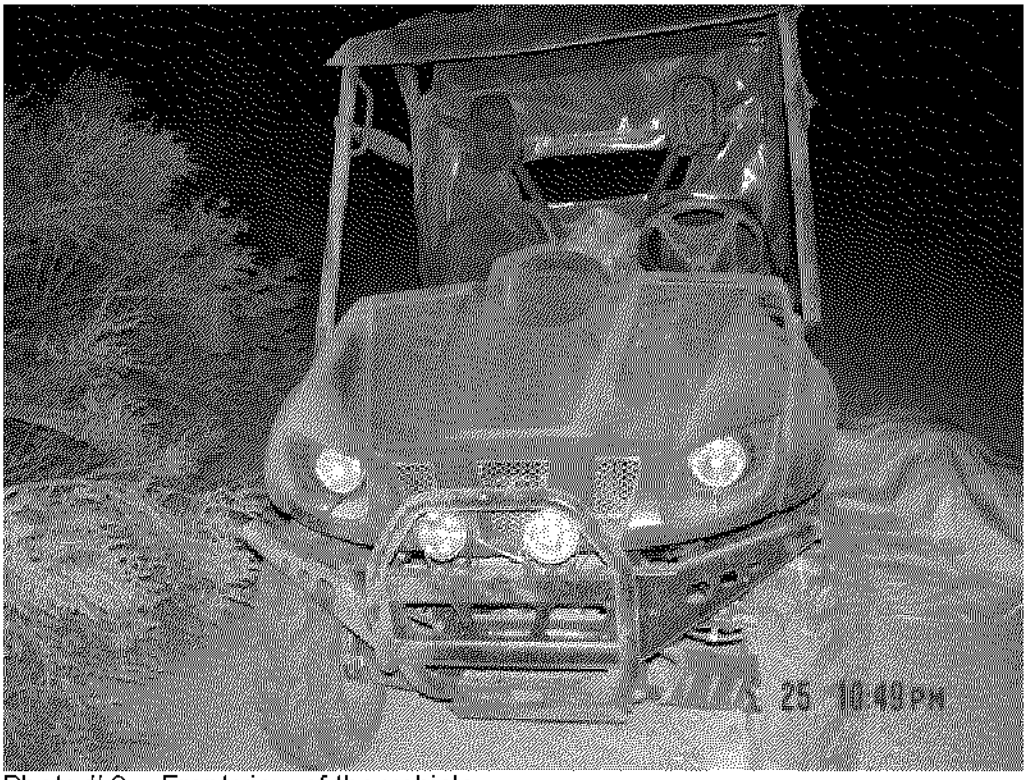


Photo # 3 – Front view of the vehicle.

Photo # 4 – A back angled view of the vehicle.

Photo # 5 – This view showing the other side.

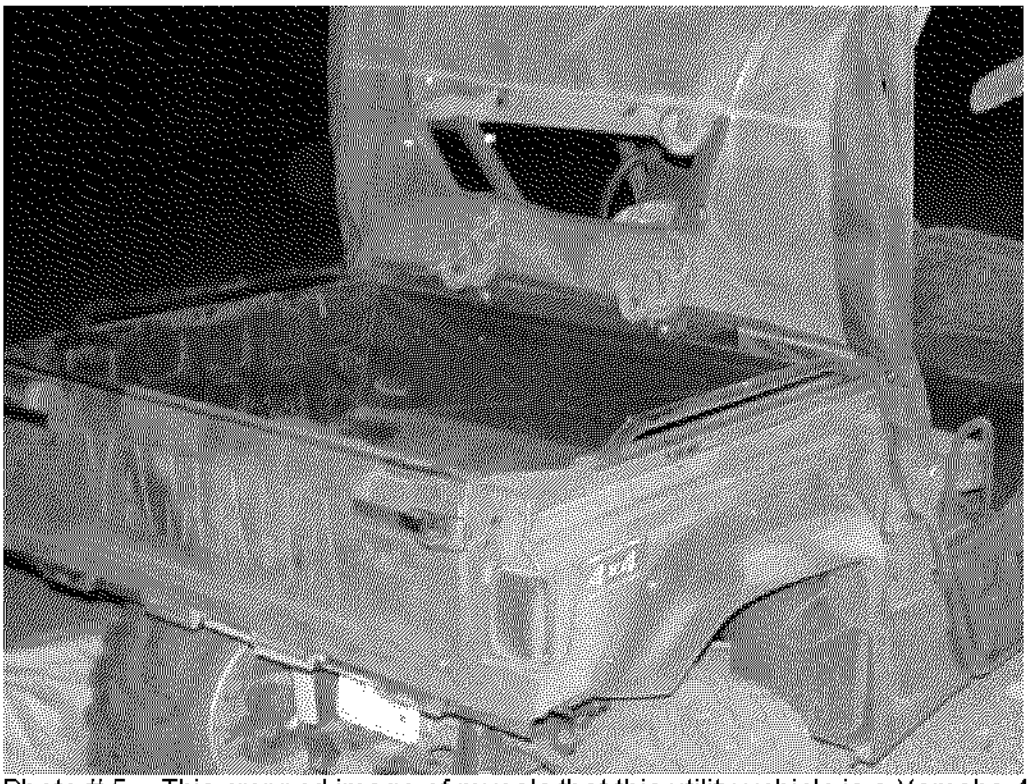


Photo # 5 – This cropped image of reveals that this utility vehicle is a Yamaha 4 x 4.

Photo # 6 – The name Rhino is also listed on the side of this vehicle.

CONTACT & IDENTIFICATION SHEET

Pinal County Medical Examiner
P.O. Box 808
Florence, AZ 85232

Pinal County Sheriff
P.O. Box 867
Florence, AZ 85232

Site of Injury/Death – This ATV crash took place around 7:30 p.m. during 10/25/2007. It happened in the desert near Forest Service Road 252, northeast of Queen Valley, AZ.

Victim – (b)(3):CPSA Section 25(c),(b)(6) 57 years old

Victim's Son – (b)(6)

ATV – 2007 Yamaha, Rhino, VIN # (b)(3):CPSA Section 25(c),(b)(6)

Medical Examiner- (b)(6) M.D., Pima County working for Pinal County

Deputies: (b)(6)

(b)(5)

1. Task Number	2. Investigator's ID	EPIDEMIOLOGIC INVESTIGATION REPORT
081009HNE3826	2147	

3. Office Code	4. Date of Accident YR MO DAY	5. Date Initiated YR MO DAY
810	2008 10 07	2008 10 16

6. Synopsis of Accident or Complaint **UPC**

A 13-year-old male died in a utility vehicle roll over incident. The victim was not wearing a seat belt or helmet and was riding in between the two front seats. The vehicle rolled over during a high speed turn on flat terrain. The victim unsuccessfully attempted to jump clear of the unit and was pinned beneath its roll bar. He died at the scene of blunt force injuries to the head. The 14-year-old driver and a 12-year-old passenger jumped out of the vehicle and were not injured.

MFR/PRVLBR NOTIFIED

COMMENTS: ___YES ✓ NO
___OVERRULED; ___ ATTACHED

✓ EXCISIONS/FOIA EXS. b6, 25a

✓ DO NOT RE-NOTIFY ___ RE-NOTIFY

4/30/09

7. Location (Home, School, etc)	8. City	9. State
2 - FARM	BLOOMINGDALE	GA

10A. First Product	10B. Trade/Brand Name	10C. Model Number
5044 - Utility Vehicles	YAMAHA RHINO	YXR660F

10D. Manufacturer Name and Address
YAMAHA MOTOR CORPORATION, USA (VIN: [redacted]
6555 Katella Avenue
Cypress, CA 90630

11A. Second Product	11B. Trade/Brand Name	11C. Model Number
0	NONE	NONE

11D. Manufacturer Name and Address
NONE

12. Age of Victim	13. Sex	14. Disposition	15. Injury Diagnosis
13	1 - Male	8 - Death	54 - Crushing

16. Body Part(s) Involved	17. Respondent	18. Type of Investigation	19. Time Spent (Operational / Travel)
75 - HEAD	2 - Eyewitness	3 - Other	14 / 1

20. Attachment(s)	21. Case Source	22. Sample Collection Number
9 - Multiple Attachments	04 - Radio, TV	

23. Permission to Disclose Name (Non NEISS Cases Only)

○ Yes ● No ○ Verbal ○ Yes for Manuf. Only

24. Review Date	25. Reviewed By	26. Regional Office Director
11/12/2008	8978	Dennis R. Blasius

27. Distribution	28. Source Document Number
Cash, Helen; Blasius, Dennis; Topka, Tanya	N08A0127A

EPIDEMIOLOGIC INVESTIGATION REPORT

1. Task Number	2. Investigator's ID
081009HNE3826	2147

3. Office Code	4. Date of Accident YR MO DAY	5. Date Initiated YR MO DAY
810	2008 10 07	2008 10 16

6. Synopsis of Accident or Complaint **UPC**

A 13-year-old male died in a utility vehicle roll over incident. The victim was not wearing a seat belt or helmet and was riding in between the two front seats. The vehicle rolled over during a high speed turn on flat terrain. The victim unsuccessfully attempted to jump clear of the unit and was pinned beneath its roll bar. He died at the scene of blunt force injuries to the head. The 14-year-old driver and a 12-year-old passenger jumped out of the vehicle and were not injured.

7. Location (Home, School, etc)	8. City	9. State
2 - FARM	BLOOMINGDALE	GA

10A. First Product	10B. Trade/Brand Name	10C. Model Number
5044 - Utility Vehicles	YAMAHA RHINO	YXR660F

10D. Manufacturer Name and Address

YAMAHA MOTOR CORPORATION, USA (VIN: b)(6)
6555 Katella Avenue
Cypress, CA 90630

11A. Second Product	11B. Trade/Brand Name	11C. Model Number
0	NONE	NONE

11D. Manufacturer Name and Address

NONE

12. Age of Victim	13. Sex	14. Disposition	15. Injury Diagnosis
13	1 - Male	8 - Death	54 - Crushing
16. Body Part(s) Involved	**17. Respondent**	**18. Type of Investigation**	**19. Time Spent (Operational / Travel)**
75 - HEAD	2 - Eyewitness	3 - Other	14 / 1

20. Attachment(s)	21. Case Source	22. Sample Collection Number
9 - Multiple Attachments	04 - Radio, TV	

23. Permission to Disclose Name (Non NEISS Cases Only)

○ Yes ● No ○ Verbal ○ Yes for Manuf. Only

24. Review Date	25. Reviewed By	26. Regional Office Director
11/12/2008	8978	Dennis R. Blasius

27. Distribution	28. Source Document Number
Cash, Helen; Blasius, Dennis; Topka, Tanya	N08A0127A

This investigation was initiated as a result of a news article published on October 7, 2008. A teenager was reported to have died in an all-terrain vehicle roll over incident. Further investigation revealed that the involved product was a side by side utility vehicle and not an all-terrain vehicle. Information for this investigation was obtained from official reports, the internet, a retailer, and phone interviews with the owner of the utility vehicle and the police crime scene unit investigator. The parents or guardians of the juvenile driver of the utility vehicle did not respond to requests for permission to interview him.

The incident off-road utility vehicle was purchased around September of 2005 for approximately $12,000. The unit was new and had several optional accessories installed by the dealership at the time of purchase. The accessories included two side-view mirrors, a hood rack, a windshield, and a solid top.

The utility vehicle was typically used by the owner, a 61-year-old male, several times per week for lawn and garden maintenance around the five acres of land he lives on. A trailer was often used during these routine tasks. During hunting season, the vehicle was driven on dirt roads at a hunting club. The unit was typically operated on flat terrain. It was stored in a locked barn when not in use.

The owner of the utility vehicle did not report any problems with the unit and there have been no previous roll over incidents. Routine maintenance is performed at the dealership where the vehicle was purchased. The unit was never modified (after purchase), altered, or repaired. The owner asserts that the utility vehicle was never misused, neglected, or abused.

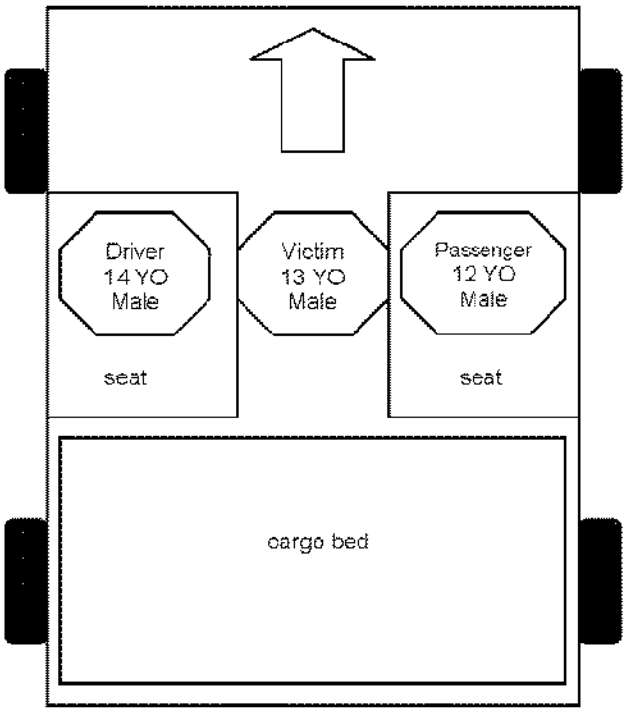
On October 7, 2008, the utility vehicle owner's 13-year-old grandson was given permission to drive the unit. The grandson drove the vehicle to a "borrow (or barrow) pit", which is an excavated area where material has been dug out for use as fill at another location. The "borrow pit" was full of water and the grandson and four friends went swimming in it. The utility vehicle was not towing anything at the time. A bag of seed, a rope, and a chain were in the cargo bed of the unit. Among the friends that went swimming with the owner's grandson was the 13-year-old male victim. The victim was approximately 5' 3" tall and weighed about 111 pounds at the time of the incident.

While the owner's grandson and another juvenile were swimming, the victim and two other juveniles got into the utility vehicle. A 14-year-old male began driving the unit. The victim sat in between the driver and a third juvenile (a 12-year-old male) even though the vehicle is only equipped with two seats (see the seating diagram on the next page).

According to the vehicle owner, the driver did not have permission to operate the vehicle, and this was the first time he had driven the incident unit. The driver was reported to stand 4' 11" tall and weigh approximately 120 pounds. His knowledge and experience operating off-road vehicles is not known. There was no adult supervision at the time.

The victim was not wearing a seat belt (as he was not in a seat) nor was he wearing a helmet or any other safety equipment. He was only wearing blue jeans (no shirt and no shoes). The other occupants are not believed to have been wearing seat belts, helmets, or any other safety equipment.

Seating Diagram (not to scale)



The driver began operating the unit in a wooded area and entered a nearby tree nursery. He did not have permission to be in the tree nursery. The flat terrain consisted primarily of grass and dirt. It is not known how long the juveniles were in the vehicle prior to the incident.

Historical weather data indicates that conditions in the area around the time of the incident were approximately:

Temperature:	72° F
Humidity:	84%
Precipitation:	0.09 inches that day (the first rain during October)
Wind Speed:	8 mph
Conditions:	Overcast

The incident occurred when the utility vehicle rolled onto the passenger side (the right hand side) during a left hand turn. The driver told police that he was traveling an estimated 15 to 20 miles per hour. However, he was not sure of the speed because the unit does not have a speedometer.

According to the surviving passenger, the driver began doing "donuts" and the vehicle began to turn over (the medical examiner's report states that the incident occurred "when the driver started swerving purposefully."). The driver and the outside passenger jumped out of the unit but were not injured. The surviving passenger reported to police that the victim attempted to jump out of the back of the utility vehicle but failed to clear the unit.

The rear roll bar on the vehicle's passenger side landed on the victim and he was pinned beneath the unit. The victim received crushing injuries to his head and chest. The driver and the other passenger unsuccessfully attempted to lift the utility vehicle (dry weight of approximately 1,049 pounds) off of the victim. They used a cell phone to call police and ran for help. The owner of the utility vehicle came to the scene and helped the two boys lift the utility vehicle off of the victim and onto its wheels. The owner estimated that the incident site was 200 feet (straight line distance) from the "borrow pit".

The incident occurred around sunset, which was at 7:02 PM. Police were notified of the incident at 7:10 PM and arrived on the scene at 7:24 PM. Emergency medical services personnel also responded but they did not attempt to resuscitate the victim.

At 8:48 PM the victim was pronounced dead at the scene. The medical examiner determined that the cause of death was "blunt force injury with mechanical asphyxiation". The manner of death was ruled accidental.

The utility vehicle suffered only minor damage. The owner reported that the passenger side mirror broke off.

On November 6, 2008, I visited a retailer that sells the incident brand of utility vehicles. It should be noted that there is no known association between the retailer and the incident. I presented Consumer Product Safety Commission credentials and a Notice of Inspection to the Store Owner. He was not aware of any similar consumer complaints. However, he does have three customers who competitively race the incident brand of utility vehicle and they have experienced roll overs during competitions. These customers have added three point restraints systems, higher suspensions, etc. in order to compete in the sport and increase safety.

The Store Owner stated that approximately one year ago the incident manufacturer started requiring dealers to install doors on all of their utility vehicles. The Store Owner believes that this was done as a safety precaution to keep an occupant's leg in the vehicle in the event of a roll over. The utility vehicle involved in the incident did not have doors.

None of the individuals contacted during the course of this investigation provided verbal permission to release their name in conjunction with this report.

PRODUCT DESCRIPTION / LABELING

Utility Vehicle

The incident product is a **Yamaha** brand Rhino 660cc side by side off-road 4 x 4 utility vehicle, model YXR660F. The 2005 model year vehicle has a VIN of (b)(6) The source document and other internet news reports incorrectly stated that the incident product was a John Deere brand Gator all-terrain vehicle.

The vehicle has four wheels, a camouflage color scheme, and an automatic transmission. It is equipped with two bucket seats and two seat belts. The unit is operated with a steering wheel and foot pedals. It also features a roll cage, a lifting cargo bed, and a tailgate. Optional accessories installed by the dealership at the time of purchase included two side-view mirrors, a hood rack, a windshield, and a solid top. The manufacturer recommends that operators be at least 16 years of age and posses a valid motor vehicle license.

The owner's manual for the incident utility vehicle is available on-line as a pdf document at:

http://www.yamaha-motor.com/outdoor/service/viewmanuals/outdoor_manuals.aspx

The security settings on the manual prevent it from being printed, copied, or attached to any other documents. Therefore, the manual is not included as an attachment to this investigation.

Product specifications from www.powersportsnetwork.com:

MANUFACTURER	Yamaha
MODEL YEAR	2005
MODEL	Rhino 660 Auto. 4x4
M.S.R.P. *	$8,999.00
ENGINE	4-Stroke Single, Liquid/Oil Cooled w/ Fan, 5-Valve SOHC
DISPLACEMENT	660 cc
BORE X STROKE	100 mm x 84 mm
COMPRESSION RATIO	9.1:1
CARBURETION	Mikuni 42 mm BSR
IGNITION	DC – CDI
STARTER	Electric
TRANSMISSION	Yamaha Ultramatic® V-Belt with all-wheel engine braking / High, Low, Neut., Rev.

FINAL DRIVE	Shaft
SUSPENSION	Front: Independent Double Wishbone, 7.3 in. w/ 5-way Preload Adjustment Rear: Independent Double Wishbone, 7.3 in. w/ 5-way Preload Adjustment
BRAKES	Front: Dual Hydraulic Disc, Twin Piston Rear: Hydraulic Disc, Self adjust parking system, Shaft Mounted
TIRES	Front: 25 x 8-12 NHS Rear: 25 x 10-12 NHS
LENGTH	112.2 in.
WIDTH	54.1 in.
HEIGHT	73.6 in.
WHEELBASE	75.3 in.
DRY WEIGHT	1,049 lbs.
GROUND CLEARANCE	12.1 in.
FUEL CAPACITY	8.5 gal.
LOAD CAPACITY	Bed Capacity: 400 lbs.
TOWING CAPACITY	1,212 lbs.

The utility vehicle is labeled in part (based on photographs and the owner's manual):

"*** YAMAHA *** 4 x 4 *** ULTRAMATIC ***"

"*** RHINO 660 ***"

"*** 6-190 ***"

"*** WARNING ! The enclosure cannot protect occupants in all foreseeable accidents including rollover. ***"

"*** !WARNING *** IMPROPER TIRE PRESSURE OR OVERLOADING CAN CAUSE LOSS OF CONTROL. *** LOSS OF CONTROL CAN RESULT IN SEVERE INJURY OR DEATH. *** OPERATING TIRE PRESSURE: Set with tires cold. RECOMMENDED: Front: 70kPa, {.70kgf/cm}, 10psi *** Rear: 98kPa, {.98kgf/cm}, 14psi *** MINIMUM: Front: 63kPa, {.63kgf/cm}, 9psi *** Rear: 91kPa, {.91kgf/cm}, 13psi *** Never set tire pressure below minimum. Tire may dislodge from rim. *** Gross Vehicle Weight Rating: 907kg (2000 lbs) maximum including weight of operator, passenger, accessories, cargo, and (if applicable) trailer tongue weight. ***"

"*** !WARNING *** Keep hands, body, other persons away when closing bed. *** Do not operate the vehicle with bed up. ***"

"*** !WARNING *** Severe INJURY or DEATH can result if you ignore the following: *** Maximum Load in Cargo Bed: 181kg. (400lb). *** Never carry passengers in cargo bed. *** Cargo can affect handling and stability. Read Owner's Manual before loading or towing. *** When loading with cargo or towing a trailer: Reduce speed and allow more room to stop. Avoid hills and rough terrain. *** Be sure cargo is secured – a loose load could change handling unexpectedly. *** Keep weight in the cargo bed centered, and as low and far forward as possible. Top-heavy loads increase the risk of overturn. ***"

"*** !WARNING *** Turning the off road vehicle in 4WD-LOCK ("DIFF.LOCK") takes more effort. *** Operate at a slow speed and allow extra time and distance for maneuvers to avoid loss of control. ***"

"*** !WARNING *** Improper use can result in Severe INJURY or DEATH. *** This off-highway utility vehicle will handle differently form an ordinary passenger car or other vehicle. *** Vehicle capacity: 1 operator and 1 passenger. Passenger must be able to reach and hold the hand grip inside the enclosure. *** This vehicle is recommended only for operators 16 and older with a valid motor vehicle license. Adults must supervise use by minors. Check state laws for minimum age requirements. *** Gross Vehicle Weight Rating: 2000 lb (907kg) maximum including weight of operator, passenger, accessories, cargo and trailer tongue weight. *** Passenger and cargo can affect vehicle handling. *** ALWAYS wear a seatbelt when riding in the vehicle. *** keep your hands and feet inside the vehicle at all times – watch for branches, brush, or other hazards that could enter the vehicle. *** drive straight up and down inclines – driving across the side of an incline increase the risk of overturn. *** NEVER operate through water deeper than 13" (33cm) or fast flowing water – if you must cross shallow, slow moving water, chose your path carefully to avoid sharp drop-offs, large rocks, or slippery surfaces that could cause the vehicle to overturn. *** make sharp, high speed turns – the vehicle could roll over or go out of control. *** ALWAYS USE AN APPROVED HELMET AND PROTECTIVE GEAR *** NEVER USE ON PUBLIC ROADS OR PAVEMENT *** NEVER USE WITH DRUGS OR ALCOHOL *** LOCATE AND READ THE OWNER'S MANUAL. FOLLOW ALL INSTRUCTIONS AND WARNINGS. ***"

The incident unit was purchased around September of 2005 for approximately $12,000 from:

Yamaha of Statesboro
9020 US Highway 301 S
Statesboro, GA 30458
(912) 681-9000

Manufacturer:

Yamaha Motor Corporation, USA
6555 Katella Avenue
Cypress, CA 90630
(800) 962-7926
www.yamaha-motor.com

ATTACHMENTS

Exhibit A - List of Respondents
Exhibit B - Photographs (16)
Exhibit C - Private Property Accident Report
Exhibit D - Police Incident Report
Exhibit E - Medical Examiner's Report
Exhibit F - Product Information (from www.powersportsnetwork.com)
Exhibit G - VIN Report
Exhibit H - Notice of Inspection
Exhibit I - Missing Documents

LIST OF RESPONDENTS

POLICE

- (b)(6)
-
-

Effingham County Sheriff's Office
130 First Street Ext.
PO Box 1015
Springfield, GA 31329
(912) 754-3449
(912) 754-7031 fax

October 16, 2008

MEDICAL EXAMINER

- Open Records Unit
  Georgia Bureau of Investigation
  3121 Panthersville Road
  Decatur, GA 30034
  OpenRecords@gbi.state.ga.us

October 29, 2008

UTILITY VEHICLE OWNER

- (b)(6)

October 30, 2008

DRIVER

- (b)(6)

October 31, 2008

RETAILER

(b)(6)

Cycle Specialty
104 Kenwood Rd.
Fayetteville, GA 30214
(770) 461-3541

November 6, 2008

Photo 1: View of the incident utility vehicle (non-impact side). Photograph courtesy of the Effingham County Sheriff's Office.

The unit is labeled in part: "*** RHINO 660 ***"

Photo 2: View of the incident utility vehicle (non-impact side). Photograph courtesy of the Effingham County Sheriff's Office.

Photo 3: View of the incident utility vehicle (non-impact side). Photograph courtesy of the Effingham County Sheriff's Office.

The unit is labeled in part: "*** YAMAHA *** 4 x 4 *** ULTRAMATIC ***"

Photo 4: View of the incident utility vehicle (front). Photograph courtesy of the Effingham County Sheriff's Office.

Photo 5: View of the incident utility vehicle (front windshield). Photograph courtesy of the Effingham County Sheriff's Office.

Photo 6: View of the incident utility vehicle (impact side). Photograph courtesy of the Effingham County Sheriff's Office.

Photo 7: View of the incident utility vehicle (impact side). Photograph courtesy of the Effingham County Sheriff's Office.

Photo 8: View of the incident utility vehicle (impact side). Photograph courtesy of the Effingham County Sheriff's Office.

Photo 9: Close-up view of the passenger side roll bar / upper seat belt connection point in the area that struck the victim. Photograph courtesy of the Effingham County Sheriff's Office.

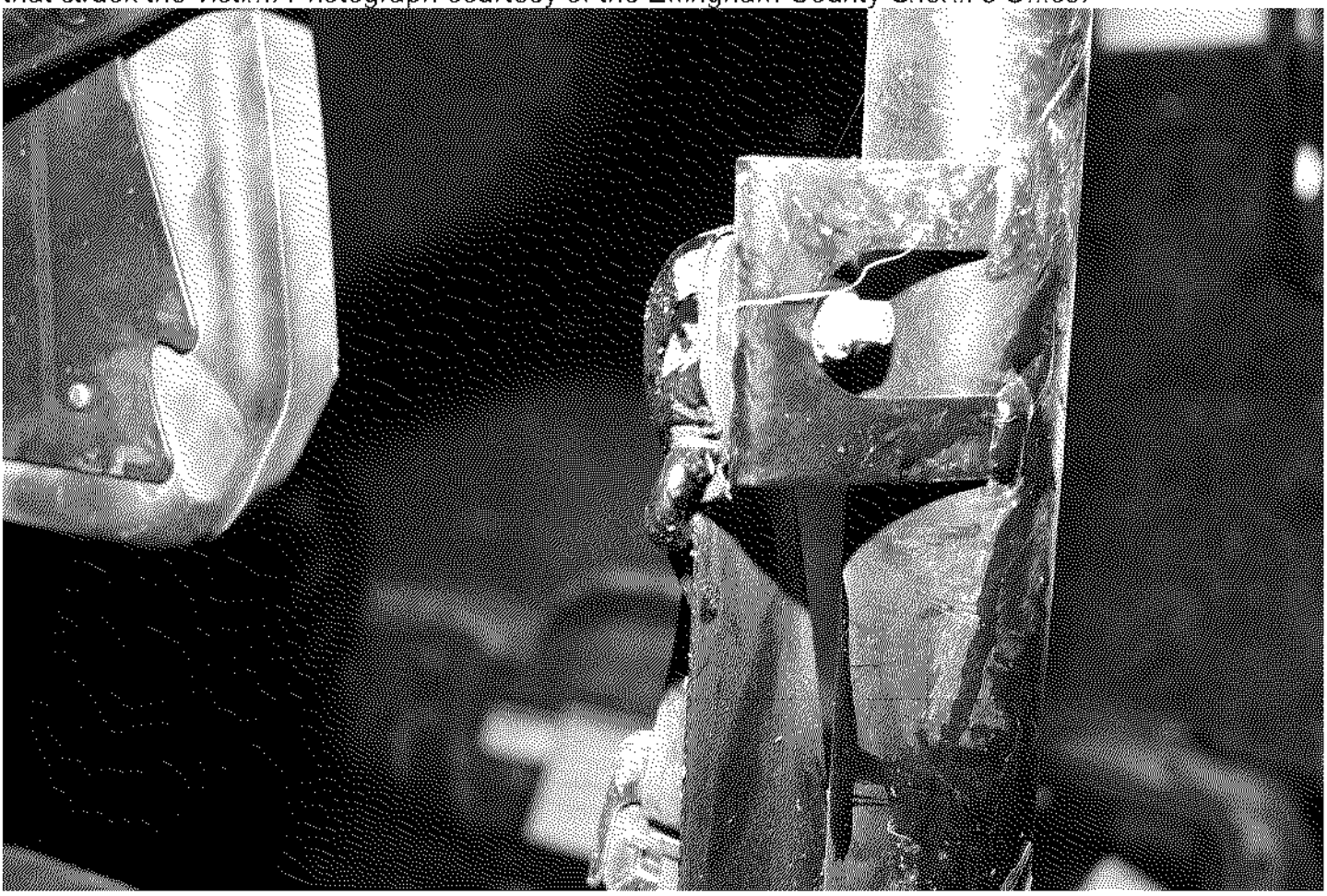


Photo 10: Close-up view of the passenger side roll bar in the area that struck the victim. Photograph courtesy of the Effingham County Sheriff's Office.

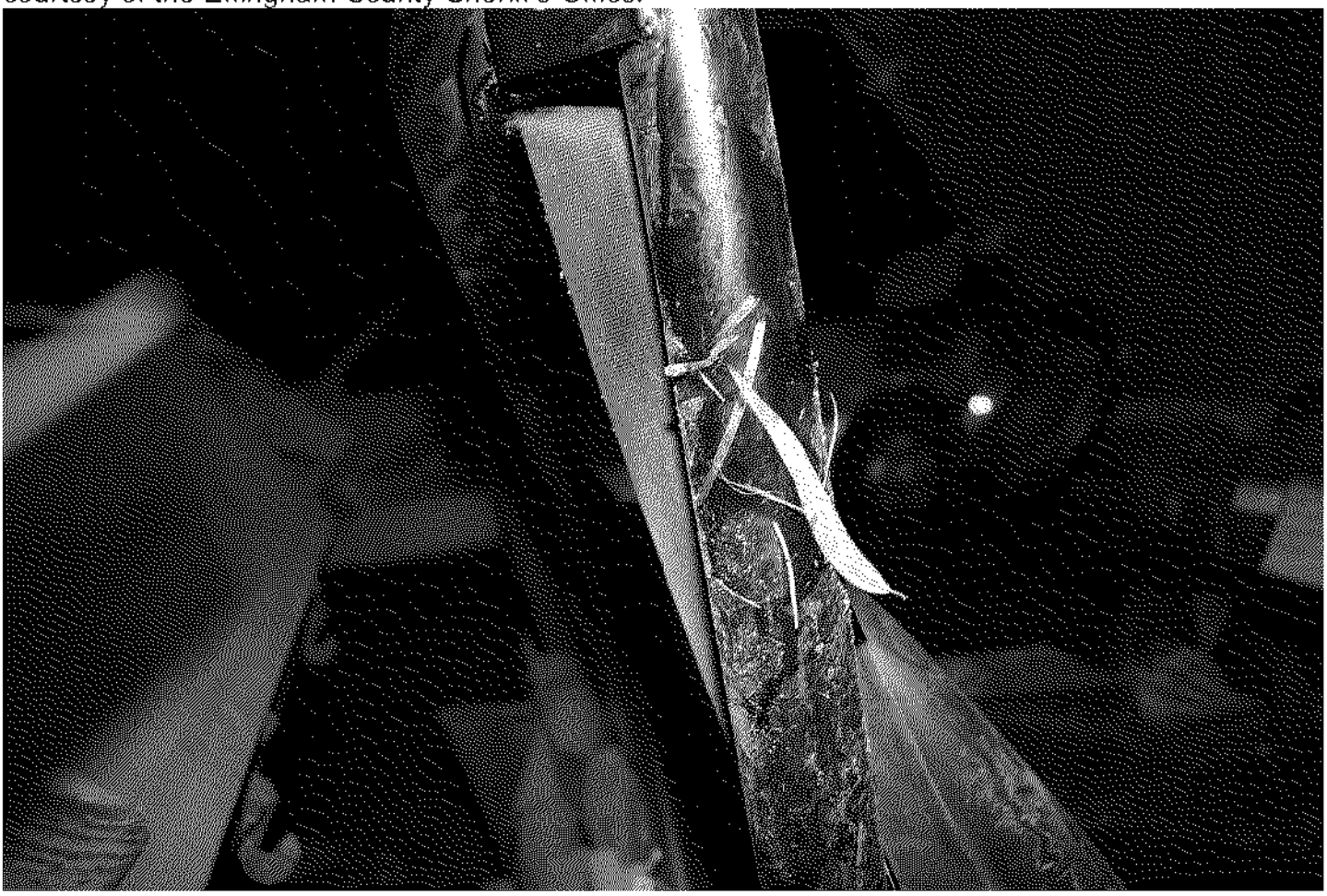


Photo 11: View of the incident utility vehicle (impact side). Photograph courtesy of the Effingham County Sheriff's Office.

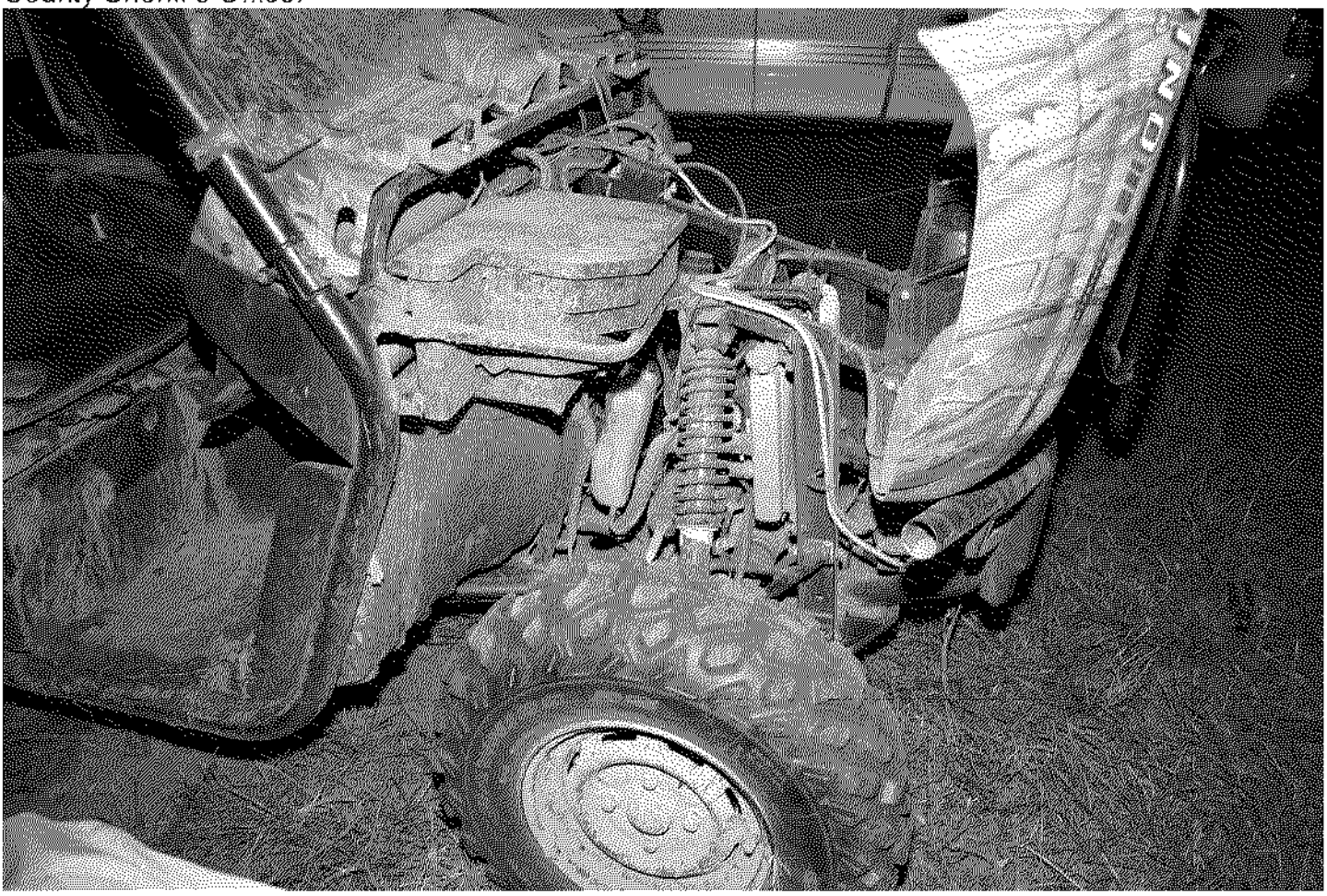


Photo 12: View of the passenger area. Photograph courtesy of the Effingham County Sheriff's Office.

Photo 13: View of the steering wheel area. Photograph courtesy of the Effingham County Sheriff's Office.

Photo 14: View of the terrain traveled by the utility vehicle as it approached the incident site. Photograph courtesy of the Effingham County Sheriff's Office.

Photo 15: View of the terrain traveled by the utility vehicle as it approached the incident site. Photograph courtesy of the Effingham County Sheriff's Office.

Photo 16: View of the terrain traveled by the utility vehicle as it approached the incident site. Photograph courtesy of the Effingham County Sheriff's Office.

DOT-523P (12/03)

GEORGIA UNIFORM VEHICLE PRIVATE PROPERTY ACCIDENT REPORT

081009HNE3826

Exhibit C

Case Number (b)(3):CPSA Section 25(c),(b)(6) Date 10/07/2008 Time Officer Notified 19:10

County EFFINGHAM City FAULKVILLE Time Officer Arrived 19:24

Location of Accident HWY 17 SOUTH

Driver # 1 (b)(6) Sex M Race WHITE D.O.B. (b)(6)

Driver's License # State Class Expiration Date

Vehicle Owner, Address and Phone # (b)(6)

Vehicle # 1 Make YAMAHA Model RHINO 660 Year Tag # Year State

Insurance Company and Policy #

Damage to Vehicle: SLIGHT

Sex Race D.O.B.

Driver's License # State Class Expiration Date

Vehicle Owner, Address and Phone #

Make Model Year Tag # Year State

Insurance Company and Policy #

Damage to Vehicle:

Other Property Damage -

Occupant/Injuries:

Name Age Sex Vehicle #

Name Age Sex Vehicle #

Name Age Sex Vehicle #

Name Age Sex Vehicle #

Vehicle # 1 Towed By (b)(6)

Officer (b)(6) Badge # 4146 01 Agency EFFINGHAM COUNTY SHERIFF'S OFF

Supervisor (b)(6)

THIS FORM TO BE USED FOR PRIVATE PROPERTY ONLY AND SHOULD NOT BE MAILED TO DOT

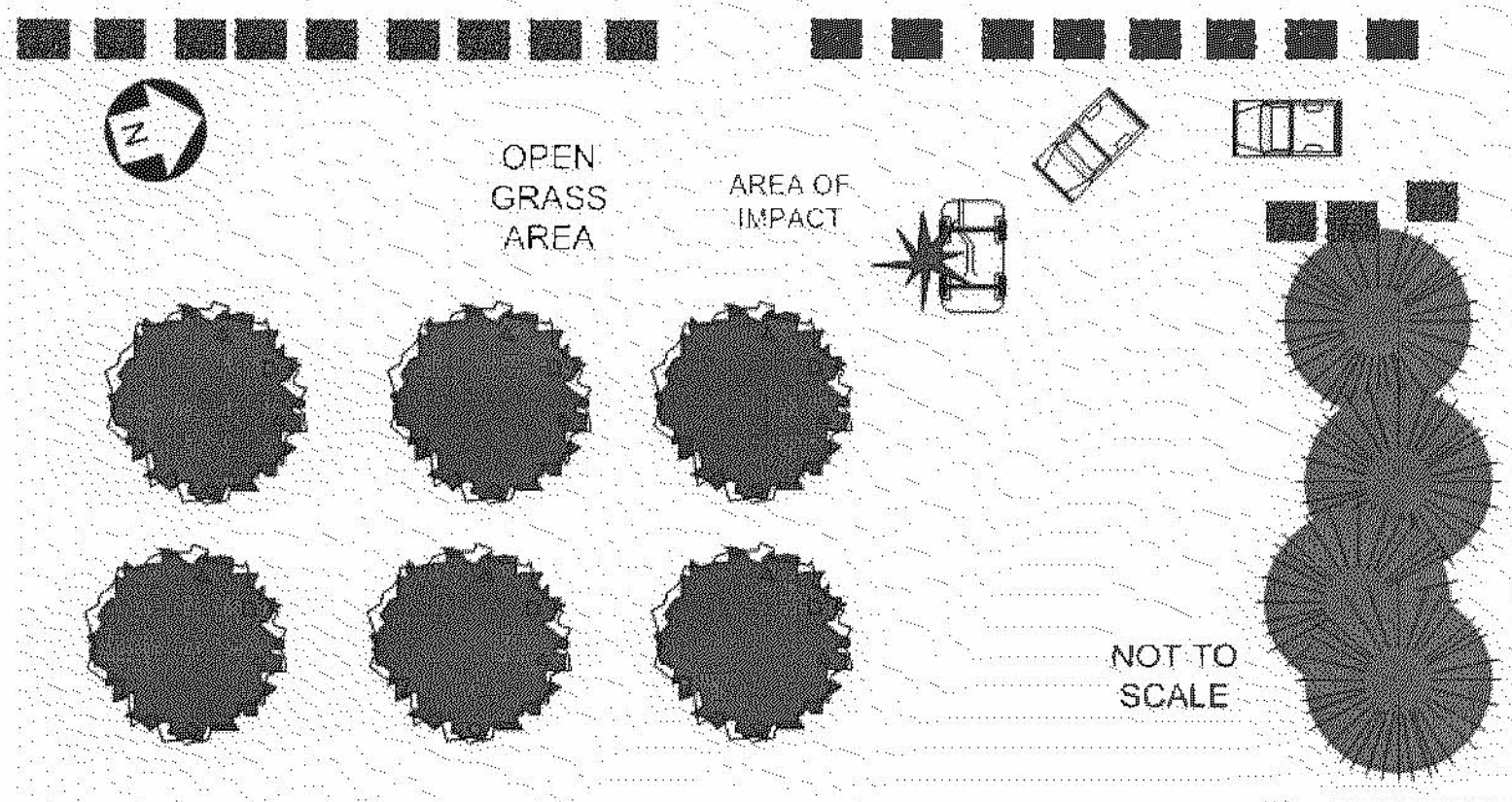
Remarks

WHILE TRYING TO MAKE A LEFT TURN THE VEHICLE WAS GOING TO FAST AND TURNED OVER ON THE RIGHT SIDE. (REFER TO INCIDENT REPORT 0810-0744)

Witnesses:

Name	Address	Phone
(b)(6)		

Diagram



Incident Report

Incident No. (b)(6)

Incident Type	Counts	Code	Attempt
Death Investigation	1	S-46	☐

Primary Location	Secondary Location
Hwy 17 south	6788 HWY 17 SOUTH

City	State	Zip	County
BLOOMINGDALE	GA	31302	EFFINGHAM

Zone	Sub Zone	Location	Sub Location	Business Name
1				

Incident Date	Time		Date	Time	Report Date	Time	Stranger	Weapon Type	Premise
10/07/2008	19:10	To	10/07/2008	22:02	10/07/2008	23:02	Yes	OTHER	COMMERCIAL

Case Type: Case Status:

Complainant

Name: (Last, First, Middle) (b)(6) Home Phone: Work Phone:

Address (b)(6)

Race	Sex		

Height	Weight	Hair	Eyes

Victim

Confidential (Juvenile)

Vehicle

Year	Make	Model	Vehicle ID No.	Color	Type
	YAMAHA	RHINO 660	(b)(6)	GREEN	FARM OR CONSTRUCTION EQ

Insured By	Insurance Policy No.	Value	Body Style	Wheels	Axles	Eng.
		$0.00	CARRY-ALL	4	2	

Cyl.	Fuel	Trans.	Mileage	Tag No.	Tag Yr.	State	
	G	A					☐Victim's ☐Suspect's ☐Stolen ☐Recovered ☐Impounded ☐Towed

Witness

Reporting Officer	Badge	Suffix	Signature
(b)(6)		01	

Approving Officer	Badge	Suffix	Signature
(b)(6)			

RR

Incident Report

Incident No. (b)(6)

Confidential (Juvenile)

Confidential (Juvenile)

GCIC Entry ☐ Requested ☐ Warrant ☐ Missing Person ☐ Vehicle ☐ Article ☐ Boat ☐ Gun ☐ Securities
Additional ☐ A & B ☑ Supplemental ☐ Citation ☐ Accident ☐ Victim Impact ☐ Vehicle Impound ☐ Evidence Form
Clearance Exceptionally **Clearance Date:**

Narrative

UPON ARRIVAL,THIS DEPUTY CAME UPON AN ELDERLY MALE STANDING OVER A YOUNG MALE WHO WAS LAYING ON THE GROUND. A RHINO 660 ALL TERRAIN VEHICLE WAS NEXT TO THE MALE, THERE WAS SOME DEBRIS AROUND THE MALE THAT WAS DETERMINED TO HAVE COME FROM THE BED OF THE RHINO. THE RHINO HAD TURNED OVER WHILE THE THREE JUVENILES WERE RIDING FROM THE POND AREA. THE INVESTIGATION DETERMINED THAT THE SPEED OF THE RHINO WAS TOO GREAT, AS THEY MADE A LEFT TURN CAUSING THE RHINO TO TURN ONTO THE RIGHT SIDE AND EJECTING ALL THREE JUVENILES FROM THE VEHICLE. THE JUVENILE VICTIM WAS UNABLE TO CLEAR THE VEHICLE AND THE VEHICLE'S ROLL BAR LANDED ON TOP OF THE VICTIM'S HEAD AREA, THIS BLUNT FORCE TRAUMA TO THE HEAD MOST LIKELY, CAUSED THE VICTIM'S DEATH INSTANTLY, AT THE SCENE.

THE ALL TERRAIN VEHICLE WAS DRIVEN BY JUVENILE #2, DETERMINED FROM THE VOLUNTARY STATEMENTS TAKEN AT THE SCENE. JUVENILE #1 WAS THE OUTSIDE PASSENGER ON THE A.T.V. AND JUVENILE VICTIM WAS IN THE MIDDLE. THE OTHER TWO PASSENGERS WERE NOT HURT, FROM THE ROLLOVER. THE SCENE WAS SECURED BY DEPUTY PLANK, AND AN ACCESS LOG WAS DONE. THE OTHER TWO JUVENILES WERE NEVER SEEN AT THIS LOCATION AND THEIR STATEMENTS WERE TAKEN FROM OTHER DEPUTY'S, AT ANOTHER LOCATION. THE RHINO 660 IS OWNED BY (b)(6) AND THE JUVENILES HAD PERMISSION TO USE THE VEHICLE AND TO RIDE ON THE PROPERTY LOCATED AT 6788 HWY 17 SOUTH, BUT THEY CROSSED OVER TO THE TREE NURSERY. THE NURSERY IS OWNED BY (b)(6) WHO STATED TO (b)(6) THAT HE HAS RUN OFF MANY JUVENILES WHO HAVE TRESPASSED ONTO HIS LAND IN THE PAST OPERATING ALL TERRAIN VEHICLES.

(b)(6) ARRIVED ON SCENE AND DEPUTY HOLBROOK TO CONDUCT THEIR INVESTIGATION ON THIS INCIDENT. THE VICTIM WAS RETRIEVED FROM THE SCENE BY RIGGS FUNERAL HOME AND TRANSPORTED TO ANOTHER LOCATION, FOR

Reporting Officer	Badge	Suffix	Signature
(b)(6)		01	

Approving Officer	Badge	Suffix	Signature
(b)(6)			

PR

Incident Report

Incident No.
(b)(6)

FURTHER INVESTIGATION.

Reporting Officer	Badge	Suffix	Signature
(b)(6)		01	

Approving Officer	Badge	Suffix	Signature
(b)(6)			

PR

EFFINGHAM COUNTY SHERIFF'S OFFICE
GA0510000

Printed Date: 10/23/2008
Printed Time: 2:53 PM

Incident No. (b)(6)

Report Date: 10/08/2008 Report Time: 03:00

R/D (REPORTING DEPUTY) RESPONDED TO ASSIST DEP (b)(6) WITH A SIG.46, I NOTIFIED DISPATCH TO DO A COMMAND PAGE. I WENT TO 6788 HWY 17 S. AND TOOK THE STATEMENT OF THE W/M JUVENILE (b)(6) WITH HIS DAD PRESENT (b)(6) SAID THAT HE WAS DRIVING THE RHINO AND WAS ATTEMPTING TO TURN LEFT. HE SAID THAT THE VEHICLE STARTED TO TURN OVER AND HE TRIED TO GET IT BACK RIGHT, BUT COULD NOT. HE SAID THAT HE JUMPED TO THE LEFT AND THE RHINO LANDED ON TC WHO WAS UNABLE TO GET CLEAR. I HAD AUSTIN WRITE A STATEMENT AND SIGN IT. R/O TURNED THE STATEMENT OVER TO DEP. PLANK. R/D ALSO RETRIEVED THE STATEMENT FROM (b)(6) AND TURNED IT OVER TO DEP (b)(6) ALSO.

Supplemental Officer	Badge	Suffix	Signature
Cpl. James J Wilkinson	**4115**		

Supplemental Approving Officer	Badge	Suffix	Signature

OFFICE OF THE SHERIFF
EFFINGHAM COUNTY, GEORGIA

VOLUNTARY STATEMENT

NAME: (b)(6) **DOB** (b)(6) **SSN:**
ADDRESS: (b)(6)
PHONE: (home) (b)(6) **PHONE: (work)**
DATE/TIME: 10-7-08 8:45-pm **LOCATION:** 6755 Ga hwy 175 Bloomingdale Ga. 31302

I submit that this statement is given freely and voluntarily without coercion or promise.

Well cl was going to make a left or right I Dont know and cl was driving and going about 15-20 I really dont know cuz I dont know it dont have a speedomiter and it turned over and her was in the front and entend up under the back of the ATV and me & connor ran for help and me / TC / was on it and cl left to get my dad and recorto came back to the scen and know um sittin in a chair.

(b)(6)

10-7-08

I HAVE READ/WRITTEN THIS STATEMENT CONSISTING OF 1 PAGE(S). EACH PAGE BEARS MY SIGNATURE. I AFFIRM THAT THIS STATEMENT IS FACTUAL, TRUE AND CORRECT.

PERSON GIVING STATEMENT: (b)(6)
PERSON TAKING STATEMENT:
WITNESS:
DATE: 10-7-08

0810-0744

OFFICE OF THE SHERIFF
EFFINGHAM COUNTY, GEORGIA

VOLUNTARY STATEMENT

NAME: (b)(6) **DOB:** (b)(6)
ADDRESS: (b)(6)

PHONE: (home) (b)(6) **PHONE: (wo** (b)(6)
DATE/TIME: 10-7-08 TIME 852 **LOCATION:**

I submit that this statement is given freely and voluntarily without coercion or promise.

I was sent to Back of nursery by Two or Three Boys
That the Rinco had turned over and someone was under
it. When I arrived me & Two Boys picked Rinco up
I checked Boy on ground rolled him over check pulse no pulse
I then went to road and to my house at 6788 GHY
1750 get for medic and came back

(b)(6) 10-7-08

I HAVE READ/WRITTEN THIS STATEMENT CONSISTING OF 1 **PAGE(S). EACH PAGE BEARS MY SIGNATURE. I AFFIRM THAT THIS STATEMENT IS FACTUAL, TRUE AND CORRECT.**

PERSON GIVING STATEMENT: (b)(6)
PERSON TAKING STATEMENT:
WITNESS:

DATE: 10-7-08

CRN: 0810 0794

OFFICE OF THE SHERIFF
Effingham County
Jimmy McDuffie, Sheriff

Name: (b)(6) DOB: (b)(6) SSN:

Address: (b)(6)

Phone (home): Phone (Cell/Work):

Date/Time: 2100 10/7/2008 Location: Hwy 17 S

(b)(6) I submit that this statement is given freely and voluntarily without coercion or promise. (b)(6)

I, (b)(6) I am Assisting (b)(6) with a written statement. (b)(6) is a 12yoA Juvenile. We are in the presence of his mother (b)(6) We were riding in the mule & my friend, (b)(6) started doing donuts and the mule turned over on two wheels. I jumped out and (b)(6) jumped from the driver's side. (b)(6) (b)(3) CPSA Section 25(c) tried to jump from the middle of the seats toward the back. His legs got caught up and the bed landed on top of his legs. (b)(6) phone was in the glove compartment and we called the police. Will's grandfather came up and helped us flip it back on four wheels and got (b)(6) (b)(3) CPSA Section 25(c) out and then he started talking to cops and the Ambulance came. My mom told me to be home at 7:30 and then I came back to see if he was okay. From there they told me people were going to interview me and I am here with the police. (b)(6)

(b)(6)

I have read/written this statement consisting of 1 page(s). Each page bears my signature. I affirm this statement is factual, true, and correct.

Person giving statement: (b)(6)
Person Taking Stat (b)(6) Date:
Witness: (b)(6) (b)(6)

CASE [redacted]

AUTHORIZED COPY
GBI - Open Records

STATE OF GEORGIA
GEORGIA BUREAU OF INVESTIGATION

RECORD OF MEDICAL EXAMINER

CITY SPRINGFIELD	COUNTY EFFINGHAM
NAME OF DECEASED [redacted]	
RESIDENCE OF DECEASED [redacted]	
AGE/DOB 13 YEARS - 4/ 4/1995	SEX M / RACE W

MANNER OF DEATH	NATURAL	HOMICIDE	SUICIDE	ACCIDENTAL	UNDETERMINED
				X	

CAUSE OF DEATH BLUNT FORCE INJURY WITH MECHANICAL ASPHYXIATION

SIGNOUT 10/8/2008

PRONOUNCED DATE: 10/07/2008	HOUR: 20:48	PLACE: SCENE
NOTIFIED BY [redacted]	DATE 10/7/2008	HOUR 21:31
BODY IDENTIFIED BY FRIEND	PHOTOGRAPHS BY [redacted]	
INVEST. OFFICER [redacted]		
EMPLOYED BY EFFINGHAM CO. SHERIFF'S OFFICE - (#)		

CASE AGENCIES:
Effingham Co. Coroner
Child Abuse Protocol Committee-Effingham Co.
Child Fatality Review Board
Effingham Co. District Attorney
Effingham Co. Sheriff's Office #(08100744)
Effingham Co. Solicitor's Office
GBI-Medical Examiner Coastal #[redacted]
Ogeechee Judicial Circuit

OTHER AGENCY Child Review Committee

DATE IN 10/8/2008	TIME IN 07:33
BODY REMOVED FROM [redacted]	REMOVED BY: [redacted]
ME INV.: [redacted]	FUNERAL HOME BOWEN-DONALDSON FH (TIFTON, GA) 229-382

PROC: AUTOPSY	DATE: 10/8/2008	TIME: 10:10	BY: [redacted]

DATE _____

SIGNED _____

MEDICAL EXAMINER

AUTHORIZED COPY
GBI - Open Records

Official Report

Division of Forensic Sciences
Georgia Bureau of Investigation
State of Georgia

[redacted]

* NAME Accredited *

Coastal Regional Lab
DOFS Case #: [redacted]
Report Date: 10/15/2008

Requested Service: Autopsy
Agency: Effingham Co. Coroner
Agency Ref#:
Requested by: Deputy [redacted]

Case Individuals:
Victim (Juv.): [redacted]

Evidence:
001 Decedent

Results and Conclusions:
Evidence Submission: 001

REASON FOR EXAMINATION:
Pursuant to the Georgia Death Investigation Act, an autopsy is performed on the above decedent at the Georgia Bureau of Investigation, Coastal Regional Laboratory, Medical Examiner Office in Savannah, Georgia commencing at 1010 hours on 8 October 2008.

Assisting with the examination are [redacted] and Medical Examiner [redacted] (Georgia Bureau of Investigation, Coastal Regional Laboratory, Medical Examiner Office).

The body is identified by body labels, Riggs Funeral Home, and Effingham County officials.

RECEIPT:
Received in a zippered black body bag with the zipper pulls secured by a white plastic zip tie and with identification tags [redacted] and "Effingham County Coroner [redacted] Date 10-7-08 Place 6788 GA Hwy 17S Time Pronounced 2048 To ME Office Yes" affixed to the zipper pulls is the unembalmed 63 inch, 110.8 lb. body of a well-developed, well-nourished white male consistent with the reported age of 13 years.

EVIDENCE OF INJURY:
Wounds, detailed in the case photographs, are herein summarized.

The body surfaces and clothing are variably soiled with dried vegetation, dirt, and bloody fluid. A small quantity of dried bloody fluid is within the bilateral external ears.

A 3 inch linear laceration is on the left parieto-occipital scalp. The skull is palpably fractured with a 3 inch ovoid defect in the left parietal area, over the ear. A 3-1/2 inch group of red abrasion with purple-blue contusion extends from the right hairline across the forehead to around the right eye (lateral). Focal palpebral conjunctival hemorrhages on the lateral right eye range to <1/8 inch. A 2-1/4 inch group of purple to purple-blue contusion with a linear 7/8 inch defect surrounds the lateral left eye. Focal palpebral conjunctival and lateral bulbar conjunctival hemorrhages range from petechial to 1/4 inch. The right upper and lower lips have a 1 inch group of contusion with abrasion and superficial laceration. The right upper lip adjacent to the frenulum has a 1/4 inch contusion. The right lower inner lip, adjacent to the maxilla, has a 3/8 inch purple-blue contusion. A 1/4 inch dried red abrasion is on the left earlobe. A 1-5/8 inch

AUTHORIZED COPY
Legal Copy Records

group of red abrasions is posterior to the left ear, extending to the immediately adjacent upper neck. A 2-1/4 inch group of red abrasions with faint purple contusion is on the left upper neck.

A 3 inch group of purple contusion with red abrasion is on the lateral right flank.

A 7-1/2 inch group of red abrasion with purple contusion extends from the right lateral chest to the anterior right proximal brachia, above the axilla.

A 1-1/2 inch linear red abrasion is on the dorsal right elbow.

A 3-1/2 inch group of purple contusion is on the proximal left lateral brachium, adjacent to the deltoid. A markedly faint 3 inch purple contusion is on the proximal dorsal left brachium.

A faint 2-3/4 inch "X" contusion is on the distal anteromedial right thigh. Two @ 5/8 inch faint purple contusions are on the distal medial right thigh, at the knee. A 5-3/4 inch overall group of faint purple contusions, individually ranging from 3/8 to 1-1/2 inch, extending from the medial left knee to the proximal shin. A 1-1/2 inch faint purple contusion is on the lateral right knee.

A 2 inch group of purple contusion is on the proximal lateral left shin, just below the knee. A 5-1/4 inch overall group of slightly impressed purple contusion is on the dorsolateral left calf. A 1/2 inch group of purple-blue contusion with red abrasion is on the top of the left foot. A faint 2 inch mildly erythemic impression is on the dorsal right upper calf.

Associated internal findings include:
Multiple galeal-subgaleal hemorrhages include (inches):
- 5 right frontoparietal-temporal
- 4 left frontoparietal-temporal
- 4 right parieto-occipital
- 2 left occipital

The skull has multiple fractures including a transverse fracture at the frontal suture with communication with a right lateral skull fracture. A 3 inch depressed group of fractures is on the left parietotemporal skull. Epidural blood is associated with the fractures. A film of liquid subdural blood covers the bilateral cerebral hemispheres. Multiple subarachnoid hemorrhages include (inches):
- 1-1/2 bilateral frontal
- 2 right medial frontal
- 1 medial right parietal
- 3-1/2 (faint) right parieto-occipital
- 1 medial left parietal
- 3 lateral right frontoparietal-temporal
- 4 left frontoparietal-temporal
- 3 posterior bilateral cerebellum

Multiple cerebral lacerations include (inches):
- 3 inferior right frontal
- 2 anterior left frontal
- 2-1/2 inferior left temporal
- 1-1/4 inch midbrain/pons
- 1/2 pontomedullary junction
- 1-1/2 posterior superior corpus callosum

The brainstem has a 3/4 inch group of intraparenchymal contusions. The bilateral lower cerebellum has a 2 inch group of cortical contusion.

The tracheobronchial tree contains a small quantity of bloody mucoid material. The bilateral lungs are hyperinflated. The right lung has patchy centriacinar erythema, consistent with agonal aspiration of blood. Multiple subpleural and intraparenchymal pulmonary contusions range to (inches):
- 7 right upper
- 3 right middle
- 4 right lower

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The left lung has scattered subpleural hemorrhages ranging to (inches):
petechial to 3/4 left lower
<1/8 focal left upper
The right lung has a 3 inch posterior area of atelectasis in the lower lobe.

The bilateral posterior kidneys have cortical contusions (inches):
4 right
1 left

EVIDENCE OF MEDICAL INTERVENTION:
Significant perimortem therapeutic marks are absent.

An identification tag "Effingham County Coroner [redacted] Date 10-7-08 Place GA Hwy 17S Time Pronounced 2048 To ME Office Yes" is affixed to the left #1 toe.

EXTERNAL EXAMINATION:
The body is wrapped within a white sheet (soiled with bloody fluid at upper half of body).

The body is palpably cold following refrigeration. Full rigor mortis is well-developed in the jaw, digits, and extremities. Blancheable violaceous livor mortis is diffusely appropriately posteriorly distributed.

The body is clothed in (variably soiled):
1. blue denim pants
2. blue print boxer shorts

Personal effects are absent.

The normocephalic, symmetric head has typically distributed dark brown scalp hair ranging to ~6 inches. The corneae are clear. The irides are hazel-grey. The equal pupils are ~3/16 inch. The non-injected, non-icteric palpebral and bulbar conjunctivae lack additional significant gross lesion. The patent ears and nares have no lesion. The lips, gums, and tongue are moist. The dentition is in good repair; the oral cavity is without lesion. Facial hair consists of a light upper lip mustache without additional significant hair. The typically indistinct thyroid eminence is midline. The symmetric neck is without note.

The anterior torso lacks prominent hair. The chest has a typical anteroposterior diameter and is without lesion. The symmetric breasts lack palpable mass or expressible discharge. The non-distended, non-tympanic symmetric abdomen has no palpable organomegaly or lesion. The external genitalia have typical to secondary development. The testes are descended. The external genitalia are without note. The anorectal area has no significant identified gross lesion.

The symmetric upper extremities have short, slightly irregular nails with a small quantity of dirt underneath. Sparse superficial incidental healed scars on the bilateral dorsal hands and forearms range to ~3/8 inch on the right. The bilateral brachia have similar, more sparse scars ranging to 1-1/2 inch on the anterior left brachium. Focal red-brown eschars with associated scar on the dorsal right forearm range to 1/2 inch. The upper extremities lack additional significant identified scar, tattoo, or lesion. The axillae have minimal hair.

The symmetric bilateral lower extremities are typically moderately hirsute. Significant pretibial edema is absent. The lower extremities lack significant identified scar, tattoo, or lesion. A moderate number of superficial incidental healed scars, some with red-brown eschar, on the bilateral knees and shins, range to 1-1/2 inch. The short, slightly irregular toenails have black dirt underneath. The soles of the feet have no significant gross lesion and are lightly soiled with dirt.

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A 3/8 inch hypopigmented scar is on the right lower back. The back lacks additional significant identified gross lesion.

INTERNAL EXAMINATION:
The following excludes the described findings. The soft tissues and typically positioned, acutely congested viscera lack unusual odor, atypical color, or significant decomposition. The 0.6 cm yellow-pink panniculus has no significant identified gross lesion.

Cavities:
The serosal cavities have the usual smooth glistening tan-pink mesothelium without excess fluid accumulation or adhesion. The mediastinum, retroperitoneum, and hemidiaphragms are without note.

Cardiovascular:
The 230 gram heart has a smooth glistening epicardium with a typical quantity of usually distributed subepicardial fat. The typically coursing right dominant vasculature is widely patent. The valves, chordae tendineae, and papillary muscles are without note. The ventricular wall thicknesses and the chamber diameters are appropriate. The firm red-brown myocardium is without lesion. The typically exiting great vessels have widely patent, typically positioned coronary ostia. The aorta has minimal focal fatty streaks and lacks significant atherosclerosis or other gross lesion. The venae cavae, major cervical vessels, and major pelvic vessels have significant identified gross lesion.

Respiratory:
The post evisceration neck musculature lacks blood or lesion. The intact, typically moderately pliable, partially calcified hyoid, thyroid cartilage with cornua, and cricoid are without note. The typically branching tracheobronchial tree has a smooth glistening tan-pink mucosa without additional lesion. The usually formed 270 gram right and 180 gram left lung have smooth glistening visceral pleurae without significant subpleural anthracosis. Each has a hyperinflated tan-pink parenchyma with mild bilateral posterior (dependent) parenchymal congestion. The lung parenchymae lack additional significant identified gross lesion. The pulmonary vasculature is without note.

Hepatobiliary:
The 1060 gram liver has a smooth glistening capsule and a sharp edge. The firm medium red-brown hepatic stroma lacks significant gross fibrosis or other significant focal gross parenchymal lesion. The hepatic vasculature is without note. The typically positioned gallbladder contains ~3 ml of green viscid bile without stone; the ductular system is grossly patent.

Lymphoreticular:
The 30 gram tan-pink thymus lacks external or parenchymal lesion. The typically mildly enlarged, slightly reactive tan-pink lymph nodes have no significant identified gross lesion. The 140 gram medium purple-red spleen lacks external or parenchymal lesion; the splenic follicles are typically indistinct.

Endocrine:
The medium brown pituitary, pale medium red-brown thyroid, bilateral adrenals, and tan-pink lobulated pancreas have no significant identified gross lesion.

Gastroenteric:
The typically formed tongue, esophagus, gastroesophageal junction, serosal stomach, and gastric mucosa are without note. The gastric lumen contains ~100 ml of grey-green fluid with suspended particles of partially digested food. The small and large bowel have no significant identified gross lesion.

Genitourinary:
Each 100 gram kidney has a smooth pale medium red-brown cortex with a distinct

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corticomedullary junction. The pyramids and calyces are without note. The pelves contain no stone and drain freely to the unobstructed ureters, which flow typically to the bladder. The empty urinary bladder has a smooth grey-pink mucosa without lesion. The tan-pink prostate and bilateral testes have no significant identified gross lesion.

Neurological:
The reflected scalp, calvarium, floor of the skull, and tan-grey dura mater have no additional significant gross lesion. The 1420 gram brain has a typical overall pattern of gyri and sulci for age. The symmetric cerebral hemispheres have a distinct grey/white matter demarcation and lack external or parenchymal lesion, inclusive of the major intraparenchymal grey matter structures. The cerebellum and brainstem have no surface or tissue lesion. The typically coursing cerebral vasculature is without note.

Musculoskeletal:
The systemic musculature has appropriate tone. The typically calcified axial and appendicular skeleton have the usual age-related changes but are otherwise without note. The intact vertebrae, ribs, pelvis, and extremity long bones are without note.

ADDITIONAL PROCEDURES:
1. Aorta blood (grey stopper tube X2 - transferred)
2. Femoral blood (grey stopper tube X1 - transferred)
3. Urine (red stopper tube X1 - transferred)
4. Blood stain (FTA card - transferred)
5. Tissue sections (held for 6 months)
6. Sectioned viscera (released within body)
7. Digital case photographs (retained)
8. Scene photographs by Effingham County Sheriff's Office (requested)

DIAGNOSES:
1. Blunt force injury with mechanical asphyxiation due to motor vehicle collision
   a. Occupant in off-road four-wheel vehicle (by history)
   b. Unrestrained passenger
   c. Pinned underneath overturned vehicle
2. No additional significant somatic disease

OPINION:
The victim died from blunt force injury with mechanical asphyxiation due to a motor vehicle collision in which the decedent was reportedly an unrestrained passenger in an off-road four-wheel vehicle which overturned, pinning the decedent underneath the cage. No additional trauma or somatic disease contributed significantly to death.

CAUSE OF DEATH:
Blunt force injury with mechanical asphyxiation

MANNER OF DEATH:
Accident

Only those items discussed in the results above were analyzed for this report. The above represents the interpretations/opinions of the undersigned analyst. Evidence analyzed in this report will be returned to the submitting agency. Biological evidence (body fluids and tissues) and fire debris

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extracts will be destroyed after one year. This report may not be reproduced except in full without written permission of the laboratory.

This case may contain evidence that must be preserved in accordance with O.C.G.A. § 17-5-56.

b)(6)

CC:

Related Agencies:

GBI-Medical Examiner Coastal	ACN: b)(6)
Effingham Co. Sheriff s Office	ACN: 08100744
Child Abuse Protocol Committee-Effingham Co.	
Child Fatality Review Board	

End of Official Report

The following information was reported by Effingham County Deputy Coroner (b)(6) (b)(6) and Effingham County S.O. (b)(6) on 10/7/08 at 2131 hours and 2200 hours.

The decedent, a 13 y/o Caucasian male, was a front-seat passenger on a Yamaha Rhino 4-wheeler that overturned this evening in a wooded area in rural Effingham County. Another juvenile male was driving the ATV with the decedent and another juvenile male riding as passengers. The ATV was traveling off-road in the wooded area when the driver started swerving purposely. When the vehicle swerved too sharply it overturned onto the passenger side. The decedent was trapped under the vehicle and the two other juvenile males were unable to lift the vehicle off of the decedent. They then ran to a nearby residence to ask for assistance. 911 was then called (1915 hours).

EMS personnel and officers from the Effingham County S.O. responded to the scene located just off Hwy 17 and not far from the intersection with Hwy 80. The decedent was found lying on the ground in an unknown position. The ATV had been lifted off of the decedent by responding family members prior to emergency personnel arrival. EMS personnel evaluated the decedent and found no independent cardiac function. No resuscitative measures were initiated.

Deputy (b)(6) responded to the scene and pronounced the death at 2048 hours. He examined the decedent's body at the scene. He reported that the decedent appeared to have crushing injuries to his head and chest. He reported that it appeared as if the decedent came out of his seat when the ATV rolled and the bar located behind his seat struck him in the head and then pinned him to the ground as the vehicle overturned.

The ATV involved in the incident is described as one of the larger ATV models and looks like a small truck. The ATV has four wheels and a rear bed behind the passenger seats.

Nothing suspicious was reported and foul play is not suspected.

(b)(6)

10/8/08 @ 0730 hours...A MECAP report was completed and will be faxed to the MECAP reporting office. (b)(6) was also notified via email of this consumer products case.

(b)(6)

10/8/08 @ 0910 hours... (b)(6) contacted this investigator to report that Bowen-Donaldson FH in Tifton, GA (229-382-4255) will be handling funeral arrangements but will most likely use a local funeral home to make the removal.

(b)(6)

10/8/08 @ 0950 hours, (b)(6) contacted this investigator to report that (b)(6) will be handling the removal of the decedent's body for Bowen-Donaldson FH.

(b)(6)

The factual correctness of this investigative report may change contingent upon the receipt of additional investigative information or the findings of the medical examiner.

State of Georgia

Bureau of Investigation
Division of Forensic Sciences
Medical Examiner Section

D. O. F. S. Case Number (b)(6)

PROPERTY INVENTORY SHEET

ITEM	RELEASED	DISPOSAL	EVIDENCE
1. BODY OF: (b)(3):CPSA Section 25(c),(b)(6)	✓		
2. CLOTHING: blue denim	✓		
pants and blue print	✓		
boxer shorts (BP)	✓		
4. PERSONAL EFFECTS: (TB)			
3. OTHER: (1) white sheet (BP)	✓		

MEDICAL EXAMINER SIGNATU (b)(6) DATE: 10/8/08

ITEM NO.	DATE	RELINQUISHED BY	RECEIVED BY
1,2+3			

ME FORM 6 REV:0 4/13/98

FRONT OFFICE White Copy | EVIDENCE Blue Copy | CASE FILE Green Copy | RECEIVING AGENT Pink Copy

PRE-LIMS CUSTODY SHEET

INDICATE TYPE OF EVIDENCE

FA LP TR FB DI FD QD BA TOX

Comments:

6

FROM: (Agency)	SBI-Coastal MEO
VIA: (LB/Mail)	in person
DATE/TIME: (From LB/Mail)	10-14-08 @ 1500
SIGNATURE: (LB LT)	(b)(6)
TO: (LT/STO)	
DATE/TIME:	10-14-08 @ 1500

FROM: (STO)	(b)(6)
DATE/TIME: (From STO)	10-14-08 @ 1515
SIGNATURE: (Vault LT)	tx cooler
TO: (Printed name of entering LT)	
SIGNATURE: (Entering LT)	
DATE/TIME: (To entering LT)	

FROM:		
DATE:		
TIME:		
TO:		

FROM:		
DATE:		
TIME:		
TO:		

PROGRESSIVE
BOATS, MOTORCYCLES and RVs are fun.
Paying too much to insure them *isn't*.
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Dealer Locator
Featured Dealers
New Vehicles
Specs, Prices
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Current Promotions
PSN Classifieds
Search Ads
Place an Ad (FREE)
Auctions
Rider Reviews
Read a Review
Write a Review
Q and A
Pro Reviews
Accessories
Accessory Catalogs
OEM Parts Finder
Buyers Club
Accessory Reviews
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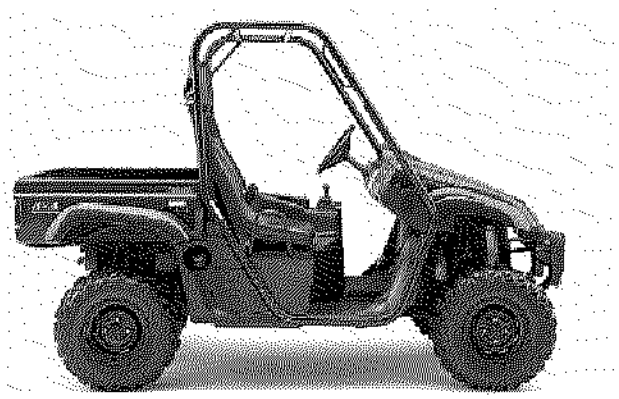
New Vehicle Showroom

2005 Yamaha Rhino 660 Auto. 4x4



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2005 Models Rhino 660 Auto. 4x4 Go

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speed

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A Powerful Concept in Off-Road Adventure... The Rhino 660.

Now, you can take someone along as you hunt, work or just plain explore in places other side-by-sides simply can't. All in unparalleled comfort. That's because only the Rhino 660 offers a **four-wheel independent-suspended chassis** (7.3 in. of travel front and rear) plus the **highest ground clearance (12.1 in.) in the business** for the plushest ride ever offered in a side-by-side. But that's just the beginning.

Sporting **automotive-style controls**, the Rhino 660 is simple to operate. Just hit the electric start, grab the steering wheel, press the gas pedal and you're on your way. An automatic V-belt transmission adds to simplicity of operation and makes for an ultra-smooth ride, while a reverse gear serves to further up the ante when it comes to versatility.

The Rhino 660 is also the most powerful side-by-side ever created, courtesy of its **liquid/oil-cooled 660cc five-valve engine.** Combine that with Yamaha's exclusive **Ultramatic™ automatic transmission** (with industry-leading all-wheel engine braking) and **On-Command™ push-button 2WD/4WD/4WD Diff Lock system.**

Throw in triple-hydraulic disc brakes, 8.5-gallon fuel capacity and a **dump bed that will carry up to 400 pounds of cargo** - and you've just invented the perfect machine for hunting, playing, working, you name it.

Suddenly everybody wants to be your friend.

(Green) Available from October 2004
(RealTree Hardwoods Hunter Edition) Available from November 2004

GENERAL INFORMATION	
INSURANCE	**Get an Insurance Quote**
MANUFACTURER	Yamaha
MODEL YEAR	2005
MODEL	Rhino 660 Auto. 4x4
M.S.R.P. *	$8,999.00
ENGINE	4-Stroke Single, Liquid/Oil Cooled w/ Fan, 5-Valve SOHC
DISPLACEMENT	660 cc
BORE X STROKE	100 mm x 84 mm
COMPRESSION RATIO	9.1:1

Contact a Yamaha Dealer

Choose a Dealer your wish to contact regarding the 2005 Rhino 660 Auto. 4x4

- Blue Ridge Yamaha & Polaris - Blue Ridge GA
- Cycle World of Athens - Bogart GA
- Cycle Nation of Braselton - Braselton GA
- Cycle Nation of Canton - Canton GA
- Bartow Powersports - Cartersville GA
- Extreme Powersports (GA) - Columbus GA
- Mountain Motorsports - Conyers GA
- Moto 400 - Dawsonville GA

GIFTS THAT GO
GIFTS THAT GO.
Learn More
See Dealer for complete details.
TTSA

you could WIN*
* see Official Rules

PROGRESSIVE
Get revved about paying less for MOTORCYCLE INSURANCE.
Get Your Free Quote

PROGRESSIVE
BOATS, MOTORCYCLES and RVs are fun. Paying too much to insure them isn't.
Get Your Free Quote

CARBURETION	Mikuni 42 mm BSR
IGNITION	DC – CDI
STARTER	Electric
TRANSMISSION	Yamaha Ultramatic® V-Belt with all-wheel engine braking / High, Low, Neut., Rev.
FINAL DRIVE	Shaft
SUSPENSION	Front: Independent Double Wishbone, 7.3 in. w/ 5-way Preload Adjustment Rear: Independent Double Wishbone, 7.3 in. w/ 5-way Preload Adjustment
BRAKES	Front: Dual Hydraulic Disc, Twin Piston Rear: Hydraulic Disc, Self adjust parking system, Shaft Mounted
TIRES	Front: 25 x 8-12 NHS Rear: 25 x 10-12 NHS
LENGTH	112.2 in.
WIDTH	54.1 in.
HEIGHT	73.6 in.
WHEELBASE	75.3 in.
DRY WEIGHT	1,049 lbs.
GROUND CLEARANCE	12.1 in.
FUEL CAPACITY	8.5 gal.
LOAD CAPACITY	Bed Capacity: 400 lbs.
TOWING CAPACITY	1,212 lbs.
Insurance:	Request A Quote

PowerSports Network Tip:
Insurance is a part of the cost of any vehicle purchase. **Click here** for a free insurance quote on this vehicle. You can also get a quote for your car.

* Manufacturer's Suggested Retail Price (MSRP) if shown for a vehicle excludes set-up, freight, taxes, title, licensing or other dealer charges, and is subject to change. Individual dealer prices may vary. Please request a quote or contact the PowerSports Network Dealer nearest you for specific pricing.

- Cycle Specialty - Fayetteville GA
- Ocmulgee Outdoors - Hazlehurst GA
- MILLENNIUM CYCLE WORKS - Lilburn GA
- Capitol Cycle Company - Macon GA
- Motions Honda Kawasaki Suzuki Yamaha Kymco - Marietta GA
- Cycle Nation of McDonough - McDonough GA
- Cycle City Powersports - Newnan GA
- Atlanta Motor World - Roswell GA
- Honda Yamaha Of Savannah - Savannah GA

Can't Find Your Dealer?

Additional Dealers Outside Your State

Change State: Georgia Go

First Name: Last Name:

Address:

City: ST/Prov: Zip/Postal:

GA

Work Phone: Home Phone:

Email:

Preferred Color: Purchase Timeframe:

1 Month

Extended Warranty: (Subject to Availability) Yes No

Additional Accessories:

Comments:

Where did you hear about us?

Unselected

Have a trade in?

Trade In Mfg: Trade In Model:

Trade In Year: Trade In Miles:

Trade-In Accessories:

Contacting out of state dealer?

Reason for contacting dealer

Delivery Method:

Select

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Exhibit F

Submit

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Exhibit G

help

Quick Search
Search cars for sale by make, model, city name or VIN.

yamaha Go

Home :: **Tools & Services** :: **VIN Decoder**

Success!
The VIN you provided belongs to a motorcycle that was manufactured in the USA by the Yamaha corporation.

2005 YAMAHA
YXR660F

VIN:	(b)(6)
World region:	North America
Manufactured in:	USA
Year:	2005
Make:	Yamaha
Model:	YXR660F
Body style:	All Terrain
Drive type:	RWD
Cylinders:	1 Cylinders

Link to this report: http://www.motoverse.com/tools/vinDecoder.asp?vin=5y4am06y55a008478

Go back

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U.S. CONSUMER PRODUCT SAFETY COMMISSION

NOTICE OF INSPECTION

1. DATE: 11-6-08

2. TIME: 11:04 A.M. _____ P.M.

3. FROM (Area Office and Address): PO Box 72357 Newnan, GA 30271

4. TO

A. NAME AND TITLE OF INDIVIDUAL: (b)(6) [redacted]

B. FIRM NAME: Cycle Specialty

C. NUMBER AND STREET ADDRESS: 104 Kenwood Rd

D. CITY, STATE AND ZIP CODE: Fayetteville, GA 30214

Notice of Inspection is hereby given pursuant to:

- Flammable Fabrics Act (15 U.S.C. 1191 *et seq.*);
- Federal Trade Commission Act (15 U.S.C. 41 *et seq.*);
- Sections 16, 19 and 27 of the Consumer Product Safety Act (15 U.S.C. 2065, 2068 and 2076);
- Section 704(a) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 374(a)) [Authority for inspections in connection with the Poison Prevention Packaging Act of 1970 (15 U.S.C. 1471 *et seq.*)] and/or
- Section 14(b) of the Federal Hazardous Substances Act as Amended (15 U.S.C. 1270(b)).

Refer to the back of this form for a discussion of inspectional authority and for pertinent statutory language.

5. PURPOSES OF INSPECTION AND NATURE OF INFORMATION TO BE OBTAINED AND/OR COPIED

The purpose of this inspection is to obtain information; to review and obtain copies of items including but not limited to records, reports, books, documents; and labeling; and to obtain samples, in order to enforce or determine compliance with the Acts administered by the Consumer Product Safety Commission.

6. FREEDOM OF INFORMATION REQUIREMENTS

Those from whom information is requested should state whether any of the information submitted is believed to contain or relate to a trade secret or other matter which should be considered by the Commission to be confidential and whether any of the information is believed to be entitled to exemption from disclosure by the Commission under the provisions of the Freedom of Information Act (15 U.S.C. 552). Any statement asserting this claim of confidentiality must be in writing, and any request for exemption of the information from disclosure must be made in accordance with the Commission's Freedom of Information Act regulations (16 CFR Part 1015).

7. SIGNATURE (Authorized CPSC Official)

Print Form

Task No. 081009HNE3826

Date: November 12, 2008

STATUS OF MISSING DOCUMENT (S)

The official records were requested for this investigation report but could not be obtained.

1. Owner's Manual

2. Purchase Receipt

3.

4.

5.

Date: November 12, 2008 **Investigator No.** (b)(6)

Regional office: CFIE **Supervisor No:** (b)(6)

(b)(5)

#081009HNE3826
N08A0127A
10/9/08

Effingham County GA

ISSUE; 02

Teen dies in an ATV accident

Posted: Oct 7, 2008 11:08 PM EDT
Updated: Oct 8, 2008 09:00 AM EDT

By WTOC Staff

EFFINGHAM COUNTY, GA (WTOC) - A teenager died Tuesday night when his all-terrain vehicle crashed.

It happened around 7:30 pm on GA Highway 17 bear the border of Bloomingdale and Effingham Counties.

Effingham deputies say a group of teenagers were riding a Gator all-terrain-vehicle on a dirt road when somehow the vehicle rolled over killing one of the boys.

Deputies have not released any other information; they are still investigating.

http://www.wtoctv.com/Global/story.asp?S=9142651&nav=menu89_3

1. Task Number	2. Investigator's ID	EPIDEMIOLOGIC INVESTIGATION REPORT
081014HNE3829	8942	

3. Office Code	4. Date of Accident YR MO DAY	5. Date Initiated YR MO DAY
810	2008 10 10	2008 10 20

6. Synopsis of Accident or Complaint UPC

A 51-year-old-male was riding a 4-wheeled utility vehicle in a wooded area on private property with a 3-year-old-male-toddler as a passenger. He failed to notice a rock pit and drove into the water and dropped off an underwater ledge causing the vehicle to overturn. He swam to shore, couldn't locate the victim and went to summon for assistance. Emergency divers located the victim and he was pronounced on the scene and transported to the M.E's office, where the cause of death was determined to be drowning due to UTV emersion in a quarry.

MFR/PRVLBR NOTIFIED

COMMENTS: __YES ✓NO
__OVERRULED; __ATTACHED
✓EXCISIONS/FOIA EXS. 3, 25c, 6
✓DO NOT RE-NOTIFY __RE-NOTIFY
8/10/09

7. Location (Home, School, etc)	8. City	9. State
1 - HOME	WILLISTON	FL

10A. First Product	10B. Trade/Brand Name	10C. Model Number
5044 - Utility Vehicles	POLARIS	RANGER

10D. Manufacturer Name and Address
POLARIS INDUSTRIES INC.
1225 Highway 169 North
Minneapolis, MN 55441

11A. Second Product	11B. Trade/Brand Name	11C. Model Number
0	NONE	NONE

11D. Manufacturer Name and Address
NONE

12. Age of Victim	13. Sex	14. Disposition	15. Injury Diagnosis
3	1 - Male	8 - Death	69 - Submersion
16. Body Part(s) Involved	**17. Respondent**	**18. Type of Investigation**	**19. Time Spent (Operational / Travel)**
85 - ALL OF BODY	3 - 2nd Hand Info Only	2 - Telephone	6 / 0

20. Attachment(s)	21. Case Source	22. Sample Collection Number
2 - Documents	05 - Newspaper	

23. Permission to Disclose Name (Non NEISS Cases Only)
○ Yes ● No ○ Verbal ○ Yes for Manuf. Only

24. Review Date	25. Reviewed By	26. Regional Office Director
02/11/2009	9093	Dennis R. Blasius

27. Distribution	28. Source Document Number
Streeter, Robin; Topka, Tanya; Kessler, Charles; Harris, Paulette	N08A0152A

081014HNE3829

Information in the report was obtained from a medical examiner's report.

A 51-year-old male was riding a 4-wheeled utility vehicle in a wooded area on private property with a 3-year-old-male toddler as a passenger. The speed of travel at the time of the incident could not be determined, nor could it be determined if the occupants were wearing seat belts or helmets.

The ATV operator failed to notice a rock pit, drove into the water and dropped off an underwater ledge causing the vehicle to overturn. He swam to shore, couldn't locate the victim and went to summon for assistance. Emergency divers found the victim floating three hours after the incident, five feet in front of the ATV in 15 feet of water and approximately 6 feet from the bottom of the rock pit.

The victim was pronounced on the scene and transported to the medical examiner's office, where the cause of death was determined to be drowning due to UTV emersion in a quarry.

PRODUCT IDENTIFICATION

Polaris Ranger Utility Vehicle (no other identifying data)

ATTACHMENTS

1. Medical Examiner's report
2. Contact Sheet
3. Status of Missing Document(s)

.

OFFICE OF THE MEDICAL EXAMINER

606 SW 3rd Avenue
Gainesville, Florida 32601
Phone: 352-733-0340 FAX 352-371-3291

ME 08 -488

REPORT OF INVESTIGATION

DECEDENT: (b)(3):CPSA Section 25(c) [redacted]

ADDRESS: [redacted]

Number & Street or Route Box # | City, State | Jr. Sr. III, Etc | County: Levy

INFORMATION ABOUT DECEDENT AND DESCRIPTION OF BODY

DATE OF BIRTH: 11-8-2004 (Month Day Year)

AGE: 3 (If less than 2 years give months & days)

MARITAL STATUS:
- [ ] Married
- [x] Never Married
- [ ] Widowed
- [ ] Divorced
- [ ] Separated
- [ ] Unknown

RACE:
- [x] White
- [ ] Black
- [ ] American Indian
- [ ] Other

SEX:
- [x] Male
- [ ] Female
- [ ] Undetermined

HEAD-HAIR:
- [ ] None
- [ ] Partly Bald
- [x] Blonde
- [ ] Brown
- [ ] Red
- [ ] Black
- [ ] Grey
- [ ] White

OTHER HAIR:
- [ ] Mustache
- [ ] Beard

CLOTHING:
- [x] Clothed
- [ ] Partly Clothed
- [ ] Unclothed

PUPILS: MN
R 5 L 5

Weight: 37 lbs

Length: 41"

MISCELLANEOUS: IRIDUS BLUE CIRCUMCISED

BODY TEMPERATURE:
- [ ] Warm
- [x] Cool
- [ ] Cold

RIGOR: (Circle Degree)
- [ ] Neck: 1 2 3 4
- [ ] Legs: 1 2 3 4
- [ ] Arms: 1 2 3 4

LIVOR:
- [ ] Anterior
- [x] Posterior
- [ ] Lateral

BLOOD:
- [ ] Nose
- [ ] Mouth 5
- [ ] Ears
- [ ] Clothing

FROTH:
- [x] Present
- [ ] Absent

OTHER: (Dirt, Water, Etc.)
- [ ] Nose
- [ ] Mouth 5
- [ ] Ears

DECOMPOSITION:
- [ ] Early
- [ ] Advanced
- [x] None

OCCUPATION: (Please fill in both parts)

Type of Work:

(Example: Machinist, Typist, fireman, farmer, salesman, homemaker.)

Industry:

(Example: Textiles, banking, fire department, farming, insurance, home.)

NO OCCUPATIONAL INFORMATION [ ]

INFORMATION ABOUT OCCURRENCE

ITEM	DATE	TIME	LOCATION	COUNTY	TYPE OF PREMISES (Home, farm, highway, hospital, etc.)
Injury or onset of illness	10-10 10-11	2215 0105	(b)(6) [redacted]		ON THE JOB? [ ] YES [x] NO Private Property
Death	10-10 10-11	2215 0105			INSIDE CITY LIMITS? [ ] YES [x] NO Private Property
View of Body	10-12	0815	Medical Examiner's Office [ ] NOT VIEWED	Alachua	Morgue
M.E. notified	10-11	0200	By Whom? Name & Address or Title: SGT. DAN Miller	Alachua	F.H.P.
Last seen alive	10-10	2214	By Whom? Name & Address: Driver of All Terrain Vehicle		
Police notified	10-10	2251	By Whom? Name & Address: (b)(6) [redacted]		
Found dead by Pred	10-11	0105	Paramedic Trish Siebold, Levy County Emergency Medical Services		
Witness to injury or illness & death	Name: Levy County Sheriff's Office Dive Team SGT. FINNEN		Address		BLOOD SAMPLE DRAWN: [ ] YES [ ] WHY NOT?

POLICE AGENCY: Florida Highway Patrol OFFICER: CPL Lewis Ward

MANNER OF DEATH

[ ] NATURAL [ ] HOMICIDE [x] ACCIDENT [ ] SUICIDE [ ] UNDETERMINED [ ] PENDING

M.E. AUTOPSY AUTHORIZED: [x] YES [ ] NO

PATHOLOGIST: [signature]

NON-M.E. AUTOPSY DONE: [ ] YES [ ] NO

PROBABLE CAUSE OF DEATH:

1. DROWNING
2. Due to: ATV IMMERSION IN QUARRY

Contributing factor:

I hereby certify that after receiving notice of the death described herein I took charge of the body and made inquiries regarding the cause of death in accordance with Chapter 406 of the Florida Statutes and the information contained herein regarding such death is true and correct to the best of my knowledge and belief.

[signature]
Signature of Medical Examiner

12 Oct 08
Date Signed

Form Revised 041907

REASON FOR ASSUMING MEDICAL EXAMINER JURISDICTION

(Check only one)

- ☐ Homicide
- ☐ Suicide
- ☐ Trauma
- ☒ Accident
- ☐ Disaster
- ☐ Violent
- ☐ Public Health
- ☐ Poisoning
- ☐ Unattended
- ☐ Unknown or Suspicious
- ☐ Sudden or Unexpected
- ☐ Surgical or Anesthesia
- ☐ Police Custody:
  - ☐ State
  - ☐ Local/Other

MEANS OF DEATH

(Agency or Object—if death other than natural)

IF MOTOR VEHICLE INVOLVED

- ☐ Driver
- ☒ Passenger
- ☐ Pedestrian
- ☐ Other
- ☐ Lap Belt Used
- ☐ Shoulder Belt Used
- ☐ Crash Helmet Worn
- ☐ Hit-Run
- ☐ Non-Highway
- ☐ Passenger Car
- ☐ Truck
- ☐ Motorcycle
- ☐ Motorbike
- ☐ Farm Vehicle
- ☐ SUV 2007
- Other Polaris All Terrain Vehicle

IF GUN INVOLVED

- ☐ Rifle-Cal ____
- ☐ Handgun-Cal ____
- ☐ Shotgun-Cal ____
- ☐ Unknown Type
- ☐ Stippling
- ☐ Smudging
- ☐ Abrasion Collar
- ☐ Round
- ☐ Oblong
- ☐ Stellate
- ☐ Surg Treated
- ☐ Other

LOCATION OF WOUNDS: (If No Autopsy)

- ☐ Head
- ☐ Neck
- ☐ Chest
- ☐ Abdomen
- ☐ Buttocks
- ☐ Thighs
- ☐ Lower Legs
- ☐ Feet
- ☐ Upper Arms
- ☐ Lower Arms
- ☐ Hands
- ☐ Other: ____

IF INSTRUMENT INVOLVED

- ☐ Blunt
- ☐ Sharp

What Kind: ____

☐ Unknown

TYPE AND LOCATION OF INJURIES: ____

IF DRUG, POISON OR CHEMICAL (Suspected)

- ☐ Alcohol
- ☐ Other Drug
- ☐ Chemical or Poison (Specify)
- ☐ Unknown

REMARKS: ____

- ☐ Ingested
- ☐ Injected
- ☐ Inhaled
- ☐ Topical
- ☐ Unknown
- ☐ Other: ____

ALLEGED PERPETRATOR OF HOMICIDE:

- ☐ Spouse
- ☐ Sibling
- ☐ Child
- ☐ Parent
- ☐ Other Relative
- ☐ Friend
- ☐ Stranger
- ☐ Unknown
- ☐ Other: ____

MEDICAL HISTORY

- ☐ Alcoholism
- ☐ Cancer
- ☐ Diabetes
- ☐ Drug Abuse
- ☐ Fractures
- ☐ Heart Disease
- ☐ Seizure
- ☐ Other (Specify) ____

Doctor: ____

Where Treated: ____

NARRATIVE SUMMARY OF CIRCUMSTANCES SURROUNDING DEATH

(Add sheet if necessary)

According to Florida Highway Patrol, Cpl. Ward, the decedent was the rear passenger on a 2007 Polaris Ranger XP All Terrain Vehicle (ATV). The driver of the ATV was driving the decedent on private property in a wooded area at a derelict rock pit that was filled with water. The driver failed to notice the rock pit and drove into the water. The ATV dropped off an underwater ledge and flipped onto its right side. The driver escaped from the ATV, swam to shore and attempted to locate the decedent. After being unable to locate him the driver went to summon assistance. 911 was contacted and divers located and recovered the decedent near the ATV approximately 3 hours after the crash. The decedent was pronounced dead at the scene.

According to Levy County Sheriff's Office Sgt. Finney, he was the diver that found the decedent floating prone approximately 5 feet in

Continued on Page 2

Form Revised 010906

ME 08-488 Continued

in front of the ATV in approximately 15 feet of water and approximately 6: from the bottom of the rock pit. He was informed that when the first responders arrived on scene the ATV was front first in the water with the front of the vehicle facing the side of the rock pit. The tail lights were on and were out of the water. The water was approximately 80 degrees and murky at the bottom of the rock pit.

Catherine Weldon

Catherine Weldon
10/17/08

12 OCTOBER 2008
0815 HRS

POSTMORTEM EXAMINATION
OF THE BODY OF
AARON DONALD FORD

The body is that of a well-developed, well-nourished, white male toddler measuring 41 inches in length, weighing 37 pounds and appearing the stated age of 3 years. It is clad in wet garments including a blue plaid long sleeve shirt, blue T-shirt with the image of an automobile and the legend "West Coast Style", a pair of blue denim trousers, white socks and a water-soaked disposable diaper. A manila identification label is attached to the left thumb. There is no evidence of therapeutic intervention.

There are minor blunt traumatic injuries on external surfaces of the body including a faint curvilinear 2 inch abrasion in left temporal region, a very faint and ill-defined .5 x .25 inch grey-blue bruise in mid-forehead and a .25 inch irregular abrasion on lower left mid-back. Skin of hands and feet has wrinkling and pallor of palms and soles.

Scalp, calvarium and skull base are intact. Brain weight is 1460g. Dura and leptomeninges are unremarkable. Cerebral hemispheres are symmetrical and have slightly flattened gyri and narrowed sulci. There is no evidence of asymmetric displacement of brain structures. Arteries of the circle of Willis are normally distributed and free of notable congenital anomaly. Multiple coronal cuts through brain and upper cervical spinal cord reveal no other abnormalities. The oral cavity and the neck organ

(b)(3):CPSA Section 25(c)

block are free of trauma or obstruction. The thyroid has symmetrical lobes of normal size. A small amount of tan pasty, apparent foodstuffs is identified in tracheal lumen.

The adiposus panniculus has a .25 inch thickness. Pleural, pericardial and peritoneal spaces are free of blood, exudate or adhesion. Thymus weight is 32g. Lobes are symmetrical and sectioned surface is multilobular.

Heart weight is 88g. The epicardial surface is smooth and glistening. Great vessels entering and leaving the heart are intact and unremarkable. Coronary arteries are normally distributed and widely patent. Myocardium is homogeneous red-brown. The cardiac chambers are mildly distended with largely unclotted blood. Valves and endocardial surfaces are unremarkable.

The right and left lungs weigh 182g and 164g respectively. Slight posterior hypostasis is noted. Lung substance is mildly subcrepitant. Sectioned surfaces appear congested. No antemortem diseases or injuries are identified in either lung or in the mediastinal lymph nodes.

The esophagus is intact. The stomach contains about 2 ounces of grey-tan food fragments and mucin. The alimentary mucosa is autolyzed. Vermiform appendix is present. The large bowel is intact. Liver weight is 655g. Capsular surface is smooth and glistening; sectioned surface is uniform red-brown. The hepatic parenchyma has a normal firm consistency. The gallbladder contains a trace of golden brown bile. The extrahepatic biliary tree is patent. The pancreas has the usual multilobular tan sectioned surface. Spleen weight is 68g. Capsular surface is wrinkled and grey; sectioned surface is dark red-purple. Right and left adrenal glands are unremarkable.

(b)(3):CPSA Section 25(c)

The right and left kidneys have a combined weight of 84g. Cortical surfaces are smooth. Cortices and medullae have normal thicknesses and are distinctly demarcated. Renal vessels, pelvocalyceal systems and ureters are unremarkable. Urinary bladder is contracted and free of urine. The prostate is infantile normal male. External genitalia are normal male. Spine, shoulder and pelvic girdles and extremity long bones are grossly intact. Base of skull has a dark reddish purple discoloration bilaterally on petrous portion of temporal bones consistent with middle ear hemorrhages.

Microscopic examination of tissue sections generally confirms gross impressions.

(b)(3):CPSA Section 25(c)

ME 08-488

AUTOPSY FINDINGS

1. WRINKLING AND PALLOR OF SKIN OF HANDS AND FEET
2. MINOR ABRASIONS ON HEAD AND TRUNK
3. CEREBRAL EDEMA, MILD
4. BILATERAL MIDDLE EAR HEMORRHAGES
5. PULMONARY CONGESTION

PROBABLE CAUSE OF DEATH: DROWNING

WILLIAM F. HAMILTON, M.D.

WFH/dh

FORM #A-26 (200)

INFANTS AND CHILDREN

ME08-488

(b)(3):CPSA Section 25(c)

Apparent Age: _____ yrs.

Livor _____

Rigor _____

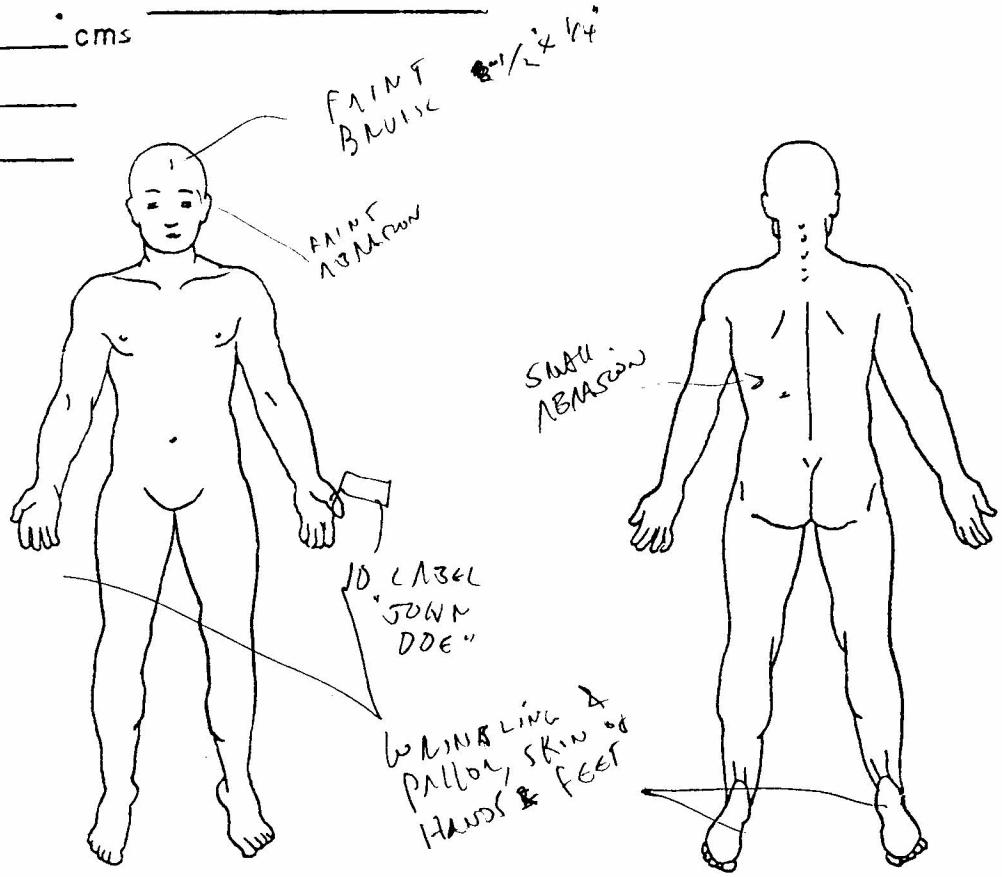
Pupils: LT. ____ cms

RT. ____ cms

081014HNE3829 ATTACHMENT #1 PG 8 OF 9

Sclerae _____

Irides _____



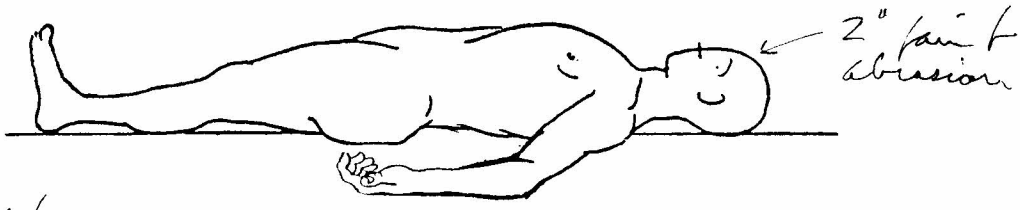
thy 32
cor 88

182 / 164

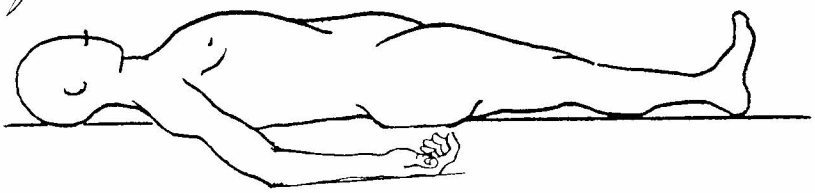
655 / 68

cw 84

1460



wet clothing
blue plaid l.s. shirt
blue T-shirt c image of auto and legend "WESTCOAST STYLE"
blue denim trousers
white socks
disposable diaper



BREASTS:	HAIR: HEAD	BODY
SIZE	COLOR	
SYMMETRY	DISTRIBUTION	
MASSES	TEXTURE	

- CONFIDENTIAL -

University of Florida Diagnostic Reference Laboratories
Department of Pathology and Laboratory Medicine
4800 SW 35th Drive
Gainesville, FL 32608
Phone: 352-265-9900 Fax: 352-265-9904

LAB NUMBER: R08-02287
NAME: (b)(3):CPSA Section 25(c)
CASE NO: 08-488
RECEIPT DATE: 10/14/2008

Forensic Toxicology Laboratory

SUBMITTER: Dr. William Hamilton, District 8 Medical Examiners Office, 606 SW 3rd Avenue, Gainesville, FL 32601.

SPECIMENS RECEIVED:

A. Blood
B. Vitreous Humor
C. Stomach Contents
D. Serum
E. Heart

	Analyte	Qualitative Results	Quantitative Results
VOLATILES			
A. Blood	None Detected		
COMPREHENSIVE DRUG SCREEN			
A. Blood	None Detected		

RESULT CERTIFICATION:

Results Certified by: [signature]
Bruce A. Goldberger, Ph.D., DABFT
Director of Toxicology & Professor

Reviewed 11-14-08 [signature]

R0802287 - 01/ BG 11/13/08 [0001]
PRINTED: 11/13/08

081014HNE3829

ATTACHMENT #3

Contact Sheet

Contacted on 10/20/08
Florida Highway Patrol
1350 W. US Hwy 90
Lake City, FL. 32055
386-758-0518

Contacted on 10/20/08
Florida District M.E.
606 S.W. 3rd Ave.
Gainesville, FL. 32601
352-338-2191

Task Number: 081014HNE3829

Date: 02/05/09

Status of Missing Document(s)

The official records below were requested for this investigation report, but could not be obtained.

1. Police Incident Report

2. _____

3. _____

4. _____

Date: 02/05/09 Investigator No. 8942

Regional Office: CFIE Supervisor No. 9083

Task Number 081014HNE3829

INTERVIEWER: When the response to a particular question is unknown, please leave blank.

Type of respondent: Police Department

Other, specify:

1. What type of vehicle was involved in the incident? (If vehicle is not an ATV, or if ATV has more than 4 wheels, politely thank respondent for her/his cooperation and terminate interview).

1 - 3 wheeled ATV
2 - 4 wheeled ATV
3 - ATV with unknown number of wheels
4 - 2 wheeled motorcycle
5 - Dune Buggy
6 - ATV with more than 4 wheels
7 - Utility Vehicle
8 - Other Vehicle
0 - Unknown

2. What is the manufacturer/brand name of the ATV(s) involved in the incident? If more than two ATVs, use an additional sheet.

ATV #1	ATV #2
Manufacturer: 05 - Polaris	**Manufacturer:**

3. What is the model name or number and/or vehicle identification number (VIN) of the ATV?

Model: UNKNOWN / **VIN:** UNKNWON

4. What is the model year of the ATV? (Record last two digits of model year. For example 89,90).

Model Year: 2007

5. What is the engine size (in CCs) of the ATV?

Engine Size: Unknown

6. Was there more than one death involved in this incident? If more than two individuals were killed use an additional sheet.

	Death #1	Death #2
Date of Death:	10/10/2008	
Age/Sex:	3/Male	/
State of Death:	FLORIDA	
City of Death:	Williston	
County of Death:	Levy	

Task Number: 081014HNE3829

7. Describe how the incident occurred. (Use additional sheets if necessary).

A 51-year-old-male was riding a 4-wheeled utility vehicle in a wooded area on private property with a 3-year-old-male-toddler as a passenger. He failed to notice a rock pit and drove into the water and dropped off an underwater ledge causing the vehicle to overturn. He swam to shore, couldn't locate the victim and went to summon for assistance. Emergency divers located the victim and he was pronounced on the scene and transported to the M.E's office, where the cause of death was determined to be drowning due to UTV emersion in a quarry.

8. Did the ATV overturn/tipover/rollover? Yes

9. If ATV overturned/tipped over/rolled over, did it land on the victim?

Victim 1:	**Victim 2:**
Yes (No) Unknown	Yes No Unknown

10. Who was killed in the incident? Check all that apply.

1 - Driver 3 - Bystander 8 - Other/Unknown
(2) - Passenger 4 - Driver/Other Vehicle

11. Was the victim wearing a helmet at the time the incident occurred?

Victim 1:	**Victim 2:**
Yes No (Unknown)	Yes No Unknown

12. How many riders (including the driver) were on the ATV at the time the incident occurred?

0 - Unknown (2) - Two riders 4 - Four or more riders
1 - One rider 3 - Three riders 9 - No riders

13. List the following physical characteristics of the DRIVER of the ATV:

Age: 51 **Height:** **(inches)**
Weight: **Sex:** Male

14. How did the driver learn to operate an ATV (READ LIST)

1 - Organized Program **Sponsor's Name:**
2 - Dealer/Salesperson **Arranged through dealer:**
3 - Friend/Relative **Friend/Relative Age:**
4 - Self
5 - Other (Specify)
9 - Don't Know

15. What was the type of terrain (ground surface) being travelled at the time the incident occurred?

01 - Forest, Woods

16. Type of road being travelled by ATV when incident occurred?

02 - Private road

17. Identify any other motor vehicle(s) involved in this incident.

09 - NA (Not a traffic incident)

18. Had the driver of the ATV used alcohol just prior to the incident?

0 - Unknown

19. Had the driver taken any drugs or medication just prior to the incident?

0 - Unknown

Additional Comments:

FL

#081014HNE3829
N08A0152A
10/14/08

ISSUE; 03

3-year-old dies when ATV falls into a pit

By Cindy Swirko
Sun staff writer

Published: Saturday, October 11, 2008 at 11:43 p.m.
Last Modified: Saturday, October 11, 2008 at 11:43 p.m.

A Williston toddler was killed Friday night when the utility all-terrain vehicle on which he was a passenger was driven into a water-filled rock pit north of Williston in Levy County, reported the Florida Highway Patrol.

Dead is Aaron D. Ford, 3. He was found about three hours after the accident occurred on private property at about 10 p.m., according to an FHP press release.

The driver of the Polaris ATV was Michael J. Hoolihan, 51, of Williston. He received minor injuries, FHP stated.

According to the press release, the accident occurred on property at 5550 NE State Road 121, about one mile north of Williston.

Hoolihan was driving the Polaris ATV in an easterly direction when he failed to notice a rock pit filled with water. He drove into the water and dropped off an underwater ledge, flipping upside down, FHP reported.

Hoolihan swam to shore and tried unsuccessfully to locate Aaron. Hoolihan then went for help, said FHP.

Aaron was found several hours later by Levy County Sheriff's Office dive team members Lt. Scott Finnen and Lt. Scott Tummond, said sheriff's Capt. Evan Sullivan.

Hoolihan was a friend of Aaron's family and lived near them on the property on which the accident occurred, said Aaron's mom, Tracy Ford. Aaron called Hoolihan "Pops," said Ford.

Aaron was a energetic boy who was about to turn four, Ford said. He loved mud-bogging and riding on the ATV.

"He was the most vibrant. He had the biggest blue eyes you've ever seen and the longest eyelashes ever. We were going to get pumpkins today and he was going to be Spiderman (for Halloween)," Ford said Saturday. "Oh, my God, riding on the ATV was his life. We did it every day. He was so loved. He was the most adventurous boy. He was so full of life."

Hoolihan's ATV was found about 20 to 25 feet from the shore with its tail end in the air. Aaron was not with the ATV so divers continued to search in the vicinity and found Aaron's body a three to four feet away, Sullivan said.

The Polaris model has a front bench seat and a steering wheel on the left side. Sullivan said Aaron's seat belt was not locked. Aaron was likely pitched over the front when the ATV went into the water, Sullivan said.

"One of our divers said there was about six inches of visibility because of the silt, and that was with a light. Your search is basically touch and feel," Sullivan said. "Once we pulled the ATV out, we knew the child wasn't there. We started a grid search and shortly thereafter found the child. It was grim for us. Very disappointing. Anytime you have a small child, it's pretty tough."

Sullivan said the Sheriff's Office recently got a grant to provide ATV safety instruction. The particular Polaris involved in the accident is a utility ATV with a small bed in the back rather than the more common sport models.

ATV drivers should know the terrain if they are going to be out at night and should use an abundance of caution, Sullivan said.

"That was a pretty young age to have someone on an ATV, especially at nighttime," Sullivan said.

No charges have been filed but the investigation is continuing, Sullivan said. A test to determine whether Hoolihan had been drinking was done, reported FHP.

Cindy Swirko can be reached at 374-5024 or at swirkoc@gvillesun.com.

http://www.gainesville.com/article/20081011/NEWS/810110203/0/SPORTS03

1. Task Number	2. Investigator's ID	EPIDEMIOLOGIC INVESTIGATION REPORT
081021HWE7803	9094	

3. Office Code	4. Date of Accident YR MO DAY	5. Date Initiated YR MO DAY
840	2008 10 18	2008 10 21

6. Synopsis of Accident or Complaint **UPC**

Two 11-year-old girls were riding in a side-by-side utility vehicle on a residential street. Neither girl was wearing a helmet or a seatbelt. The vehicle ran off the road after rounding a curve, and the driver appears to have overcorrected when steering the vehicle back onto the road. The UTV flipped, ejecting both the driver and the passenger. The UTV landed on it's side with the passenger trapped underneath. The driver died at the scene and the passenger was pronounced dead at a hospital. Both girls died of massive internal injuries.

MFR/PRVLBR NOTIFIED

COMMENTS: __YES ✓ NO
__OVERRULED; __ATTACHED

✓ EXCISIONS/FOIA EXS. b6, 2b

✓ DO NOT RE-NOTIFY __RE-NOTIFY

4/30/09

7. Location (Home, School, etc)	8. City	9. State
4 - STREET OR HIGHWAY	DESOTO COUNTY	MS

10A. First Product	10B. Trade/Brand Name	10C. Model Number
5044 - Utility Vehicles	YAMAHA RHINO	660

10D. Manufacturer Name and Address
YAMAHA MOTOR CORPORATION, USA
6555 Katella Avenue
Cypress, CA 90630

11A. Second Product	11B. Trade/Brand Name	11C. Model Number
0	NONE	NONE

11D. Manufacturer Name and Address
NONE

12. Age of Victim	13. Sex	14. Disposition	15. Injury Diagnosis
11	2 - Female	8 - Death	62 - Intern. Org. Inj.

16. Body Part(s) Involved	17. Respondent	18. Type of Investigation	19. Time Spent (Operational / Travel)
87 - N.S./UNK	3 - 2nd Hand Info Only	1 - On-Site	28 / 8

20. Attachment(s)	21. Case Source	22. Sample Collection Number
9 - Multiple Attachments	05 - Newspaper	

23. Permission to Disclose Name (Non NEISS Cases Only)

○ Yes ● No ○ Verbal ○ Yes for Manuf. Only

24. Review Date	25. Reviewed By	26. Regional Office Director
12/04/2008	8631	Frank J. Nava

27. Distribution	28. Source Document Number
Streeter, Robin	N08A0288A

1. Task Number	2. Investigator's ID	EPIDEMIOLOGIC INVESTIGATION REPORT
081021HWE7803	9094	

3. Office Code	4. Date of Accident YR MO DAY	5. Date Initiated YR MO DAY
840	2008 10 18	2008 10 21

6. Synopsis of Accident or Complaint **UPC**

Two 11-year-old girls were riding in a side-by-side utility vehicle on a residential street. Neither girl was wearing a helmet or a seatbelt. The vehicle ran off the road after rounding a curve, and the driver appears to have overcorrected when steering the vehicle back onto the road. The UTV flipped, ejecting both the driver and the passenger. The UTV landed on it's side with the passenger trapped underneath. The driver died at the scene and the passenger was pronounced dead at a hospital. Both girls died of massive internal injuries.

7. Location (Home, School, etc)	8. City	9. State
4 - STREET OR HIGHWAY	DESOTO COUNTY	MS

10A. First Product	10B. Trade/Brand Name	10C. Model Number
5044 - Utility Vehicles	YAMAHA RHINO	660

10D. Manufacturer Name and Address
YAMAHA MOTOR CORPORATION, USA
6555 Katella Avenue
Cypress, CA 90630

11A. Second Product	11B. Trade/Brand Name	11C. Model Number
0	NONE	NONE

11D. Manufacturer Name and Address
NONE

12. Age of Victim	13. Sex	14. Disposition	15. Injury Diagnosis
11	2 - Female	8 - Death	62 - Intern. Org. Inj.

16. Body Part(s) Involved	17. Respondent	18. Type of Investigation	19. Time Spent (Operational / Travel)
87 - N.S./UNK	3 - 2nd Hand Info Only	1 - On-Site	28 / 8

20. Attachment(s)	21. Case Source	22. Sample Collection Number
9 - Multiple Attachments	05 - Newspaper	

23. Permission to Disclose Name (Non NEISS Cases Only)

○ Yes ● No ○ Verbal ○ Yes for Manuf. Only

24. Review Date	25. Reviewed By	26. Regional Office Director
12/04/2008	8631	Frank J. Nava

27. Distribution	28. Source Document Number
Streeter, Robin	N08A0288A

NOTE: This investigation originated from a news article. There were two deaths in this incident. Both victims were 11-year-old females. Victim 1 was the driver of the vehicle, and Victim 2 was the passenger.

Both the county coroner and the sheriff's department provided information included in this report. The sheriff's department also provided photographs of the incident area and the vehicle involved.

I interviewed the father of Victim 1 via telephone on November 19, 2008. He provided information about the incident but did not wish to have an on-site meeting.

Attempts to contact the parents of Victim 2 were unsuccessful.

On November 20, 2008, I conducted an on-site visit and photographed the incident location. The incident vehicle was not available for photographing at the time of the on-site visit.

The product involved in this incident is a side-by-side utility vehicle (UTV) with four wheels (Attachment 2, Photographs 1-10). The UTV is equipped with three-point seat belts for both the operator and the passenger (Attachment 2, Photographs 11-12). It also has a steering wheel, accelerator pedal, and brake pedal (Attachment 2, Photographs 13-14).

The incident UTV belongs to the family of Victim 1. The owner, who is Victim 1's father, stated that he purchased the UTV new a couple of years before the incident. The owner did not provide a copy of the owner's manual for the incident UTV, but a copy of the manual can be viewed at the manufacturer's web site (www.yamahamotor.com).

According to the owner, the only modification that had been made to the UTV since its purchase was the installation of a clear plastic roof on the roll bar area (Attachment 2, Photographs 15-18).

Victim 1 is an 11-year-old female. According to the sheriff's report, she was the driver of the UTV (Attachment 4, Page 5). Victim 1 was five feet tall and weighed approximately 70 pounds at the time of the incident (Attachment 5, Page 2). Victim 1 is not believed to have been under the influence of any alcohol, drugs, or medication at the time of the incident. Nor is she known to have had any pre-existing physical or mental condition that might have contributed to the incident.

Victim 2 is an 11-year-old female. According to the sheriff's report, she was riding as a passenger in the UTV (Attachment 4, Page 5). Victim 2 was four feet, ten inches tall and weighed approximately 70 pounds at the time of the incident (Attachment 5, Page 4). Victim 2 is not believed to have been under the influence of any alcohol, drugs, or medication at the time of the incident. Nor is she known to have had any pre-existing physical or mental condition that might have contributed to the incident.

Around 5:30 p.m. on October 18, 2008, two 11-year-old females were riding a side-by-side UTV on a paved residential street (Attachment 4, Pages 2-3: Attachment 5, Pages 2 and 4). Neither girl was wearing a helmet or a seat belt, according to the police report (Attachment 4, Page 5).

The rate of speed at which the UTV was traveling is unknown (Attachment 4, Page 6). However, the sheriff's report indicates that excessive speed might have been a factor in this incident (Attachment 4, Pages 4-5). The posted speed limit for the street on which they were riding is 20 miles per hour (Attachment 4, Page 6). During the telephone interview, the father of Victim 1 said that officials believed the UTV to have been traveling between 15 and 20 miles per hour.

After rounding a curve and coming to a straight section of road, the UTV apparently ran off the right side of the road (Attachment 2, Photographs 19-20; Attachment 3, Page 1; Attachment 4, Pages 3-6). The dirt of the shoulder was not up to grade with the pavement on this section of roadway (Attachment 2, Photographs 19; 25-26).

When the driver attempted to steer the UTV back onto the road, she apparently overcorrected and caused the vehicle to flip (Attachment 2, Photographs 20-24; Attachment 3, Page 1; Attachment 4, Pages 3-6).

After reentering the roadway, the UTV traveled approximately 44 feet before coming to a final rest (Attachment 3, Page 1). Investigating officials with the sheriff's department believe that the UTV was airborne for a portion of this time, citing tire marks leading to a gouge in the pavement where the right front tire appears to have dug into the pavement before the UTV flipped over again to the right (Attachment 2, Photographs 23-24; 27-36; Attachment 3, Page 1; Attachment 4, Page 4).

Both the driver and the passenger were ejected from the UTV in the incident (Attachment 4, Page 5). Witnesses told the investigating officer that the UTV, which came to a rest on its right side, landed on Victim 2 and that Victim 1 had to be moved before the UTV could be returned to an upright position (Attachment 2, Photographs 37-38).

Both the driver and the passenger died of massive internal trauma, due to injuries sustained in the incident (Attachment 5, Pages 3 and 5). The driver died at the incident scene and was pronounced dead at 5:32 p.m. by paramedics (Attachment 5, Page 2). The passenger was transported to a local hospital, where a physician on staff pronounced her dead at 6:36 p.m. (Attachment 5, Page 4).

The UTV sustained only minor damages in the incident.

CONTACT WITH RETAILER AND MANUFACTURER:

It is not known whether the family of either victim has attempted to contact the retailer or manufacturer of the UTV involved in the incident.

PRODUCT IDENTIFICATION:

The product involved in this incident is a **Yamaha Rhino 660 Auto. 4x4 Special Edition** side-by-side utility vehicle (Attachment 2, Photographs 1-10). The product is blue in color and was purchased new by the father of Victim 1 a couple of years prior to the incident.

During the telephone interview, the owner identified the model year of the incident product as 2006. However, the sheriff's report indicates that the incident vehicle was a 2005 model (Attachment 4, Page 6).

Information about the manufacturer is listed below:

Yamaha Motor Corporation, USA
6555 Katella Avenue
Cypress, CA 90630

The owner said that he had not experienced any problems with the UTV prior to the incident.

The owner did not provide a copy of the owner's manual for the incident UTV, but a copy of the manual can be viewed at the manufacturer's web site (www.yamahamotor.com). Document security settings put in place by the manufacturer prevented the printing of this manual or the attachment of the manual to this narrative,

The owner stated that the only after-market modification that he had made to the UTV was to install a clear plastic roof on the roll bar area (Attachment 2, Photographs 15-18).

LABELING

As the incident UTV was unavailable for viewing at the time of the on-site visit, no comprehensive examination of the labeling was possible. However, labeling identifying the manufacturer and brand name of the UTV is visible in the photographs provided by the sheriff's department (Attachment 2, Photographs 5-10).

No safety labeling is visible in any of the photographs of the UTV taken by the sheriff's department.

SAMPLE:

None collected.

ATTACHMENTS:

Attachment 1 – Contact Sheet

Attachment 2 – Photographs (Total of 38)

- Photographs 1-18; 23-24; 28-38 provided by sheriff's department
- Photographs 19-22; 25-27 taken by CPSC Investigator during on-site visit

Attachment 3 – Diagram of Incident – provided by sheriff's department

Attachment 4 – Investigation Report – provided by sheriff's department

Attachment 5 – Reports of Death Investigation – provided by coroner

Attachment 6 – Notes from interview with Victim 1's father

List of Contacts

Name: b)(6)
Title:
Address: 4942 Pounders Road
Nesbitt, MS 38651
Phone: 901-486-3805
Interviewed: Reports and photos requested via telephone and fax on October 23, 2008.

Reports were received October 24, 2008. Photographs were not received.

Name: b)(6)
Title:
Address: DeSoto County Sheriff Department
311 West South Street
Hernando, MS
Phone: 662-429-1475
Interviewed: Report and photos requested via fax on October 29, 2008.
Interviewed b)(6) via telephone on November 12, 2008.
Conducted on-site visit with b)(6) on November 20, 2008.

Reports were received October 30, 2008.
Sheriff department photographs collected November 20, 2008, during on-site visit.
Information from interview and on-site visit is included in narrative.
Additional photographs made by CPSC Investigator during on-site visit.

Name: b)(6)
Title: Parents of Victim 1
Address: b)(6)
Phone: Unknown – unable to locate
Interviewed: Sent letter to parents on October 29, 2008.
Interviewed father via telephone November 19, 2008.

Info from interview is included in narrative. Notes from interview are included as Att. 6.

Name: b)(6)
Title: Parents of Victim 2
Address: b)(6)
Phone: Unknown – unable to locate
Interviewed: Sent letter to parents on October 29, 2008.

No response.

Photograph 1: Front view of incident product

Photograph 2: Closer front view of incident product

Photograph 3: Front passenger side view of incident vehicle

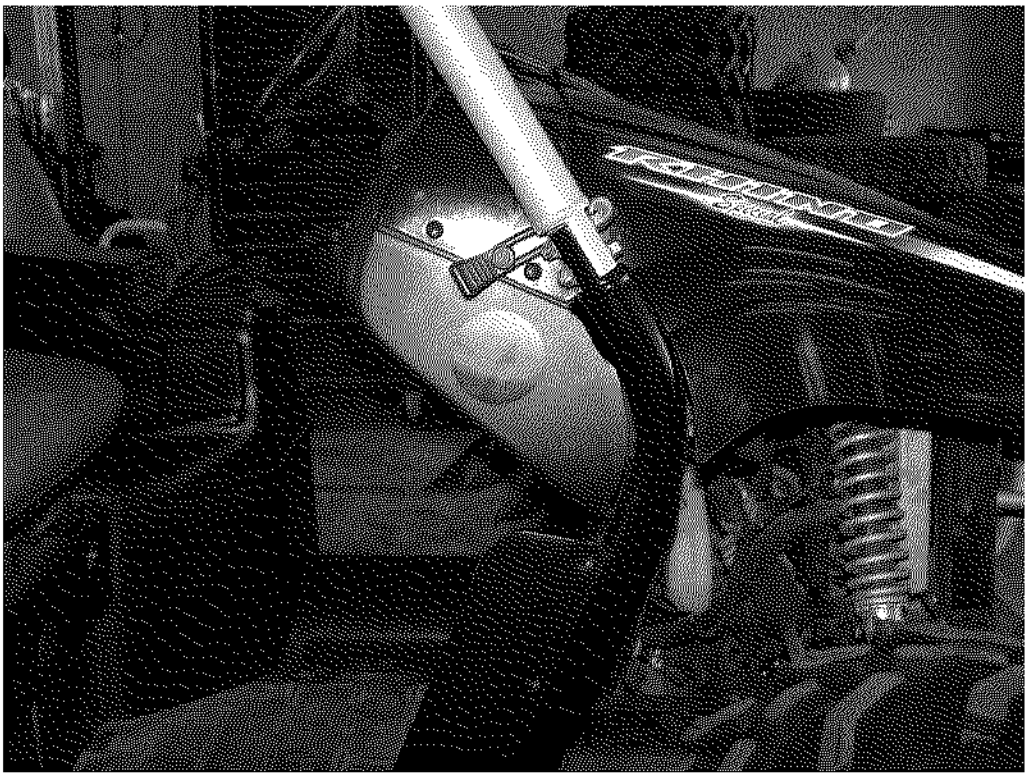
Photograph 4: Closer view of labeling on front of incident vehicle
Text reads in part: "**** G.C.T.C. 07/08 ****"

Photograph 5: Rear view of incident vehicle
Text reads in part :"*** YAMAHA ***"

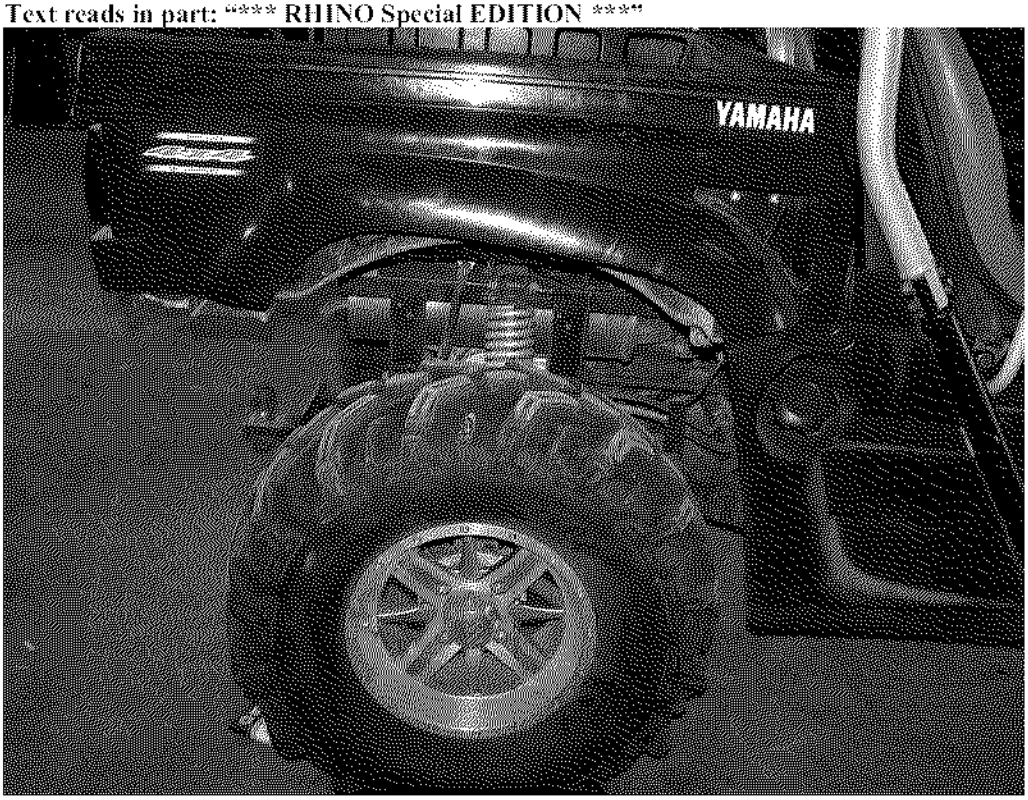
Photograph 6: View of brand name on side of incident vehicle
Text reads in part: "***RHINO***"

Photograph 7: Driver's side view of incident vehicle
Text reads in part "*YAMAHA***"**

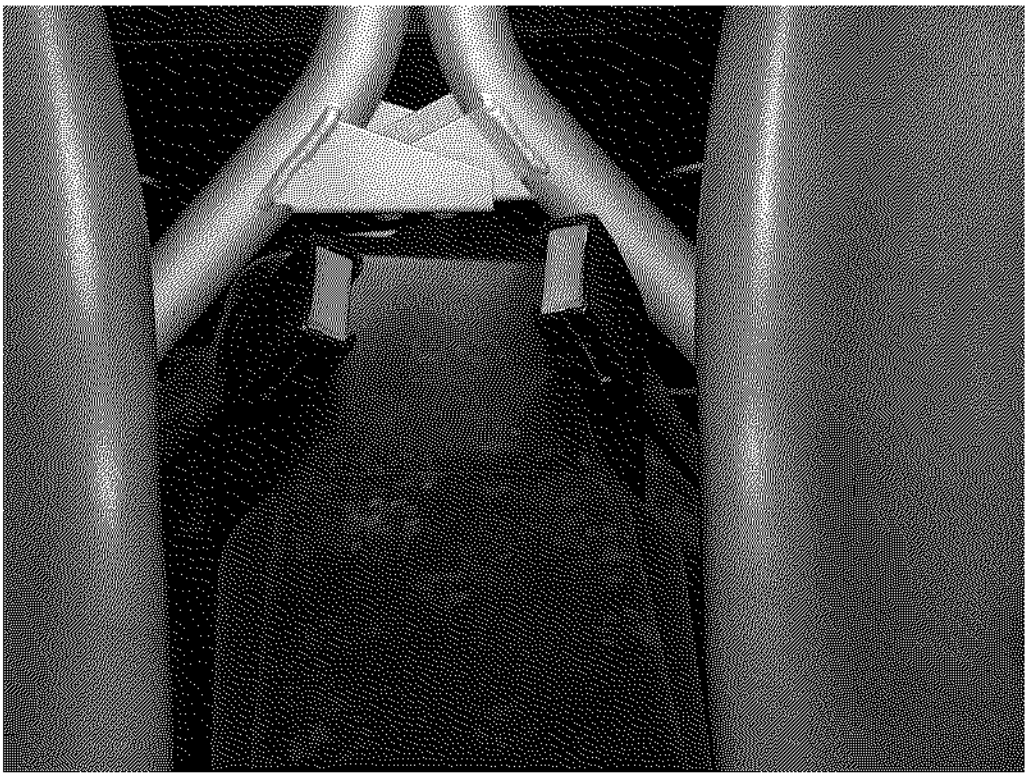
Photograph 8: Second driver's side view of incident vehicle
Text reads in part "*YAMAHA*** DIFF-LOCK *** 4x4 *** ON-COMMAND ***"**



Photograph 9: Passenger side view of incident vehicle
Text reads in part: "**** RHINO Special EDITION ***"

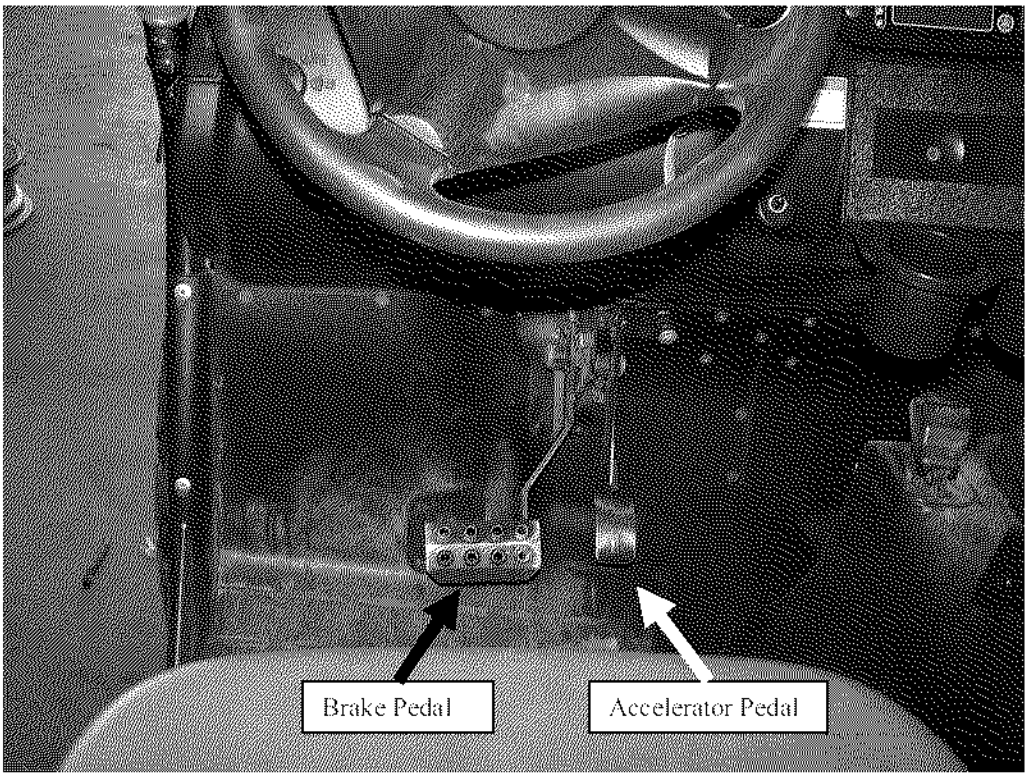


Photograph 10: Second passenger side view of incident vehicle
Text reads in part: "**** DIFF-LOCK *** 4x4 *** ON-COMMAND *** YAMAHA ***"

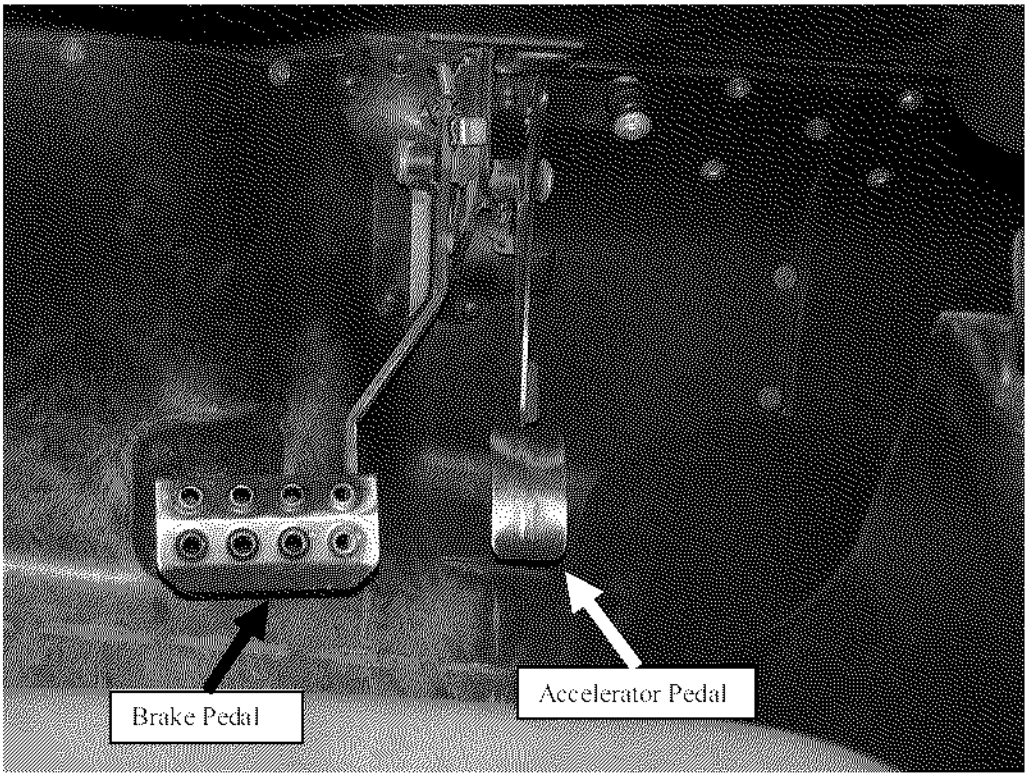


Photograph 11: Seat belt receptacles in incident vehicle

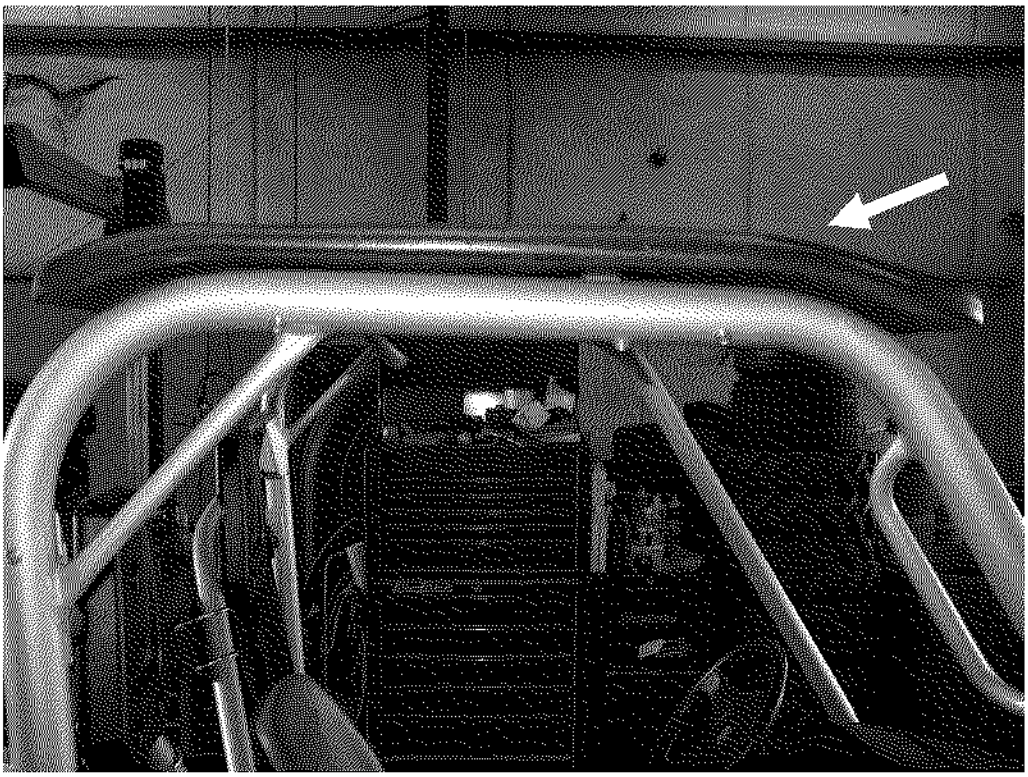
Photograph 12: Seat belt in incident vehicle



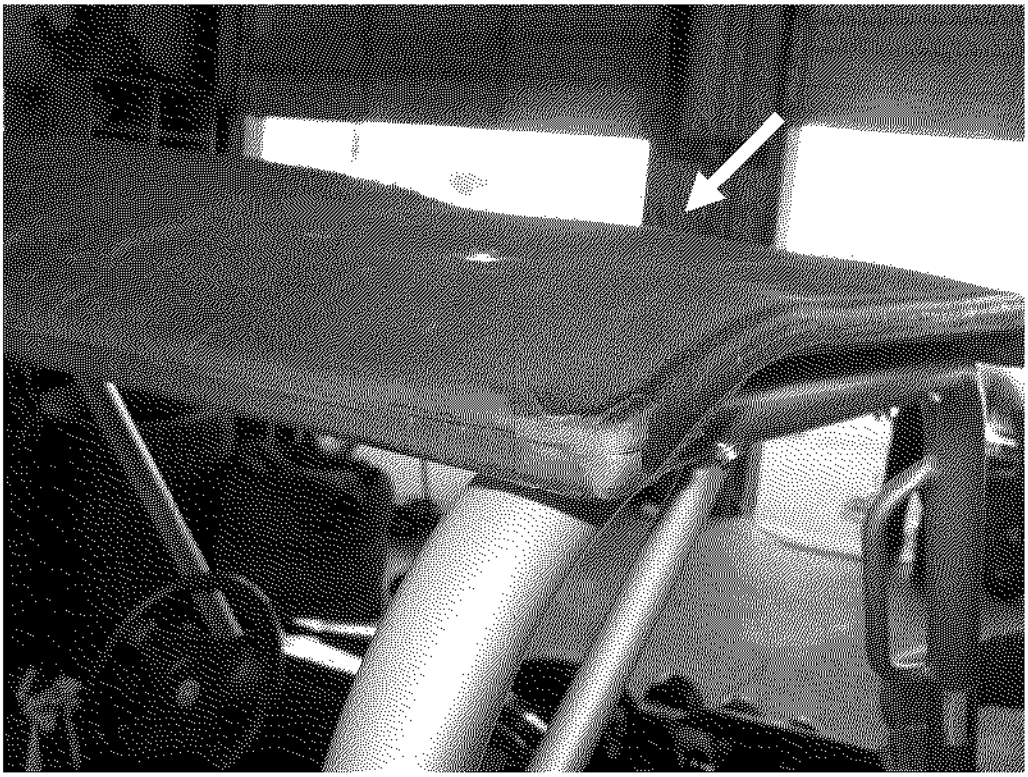
Photograph 13: Interior driver's side view of incident vehicle



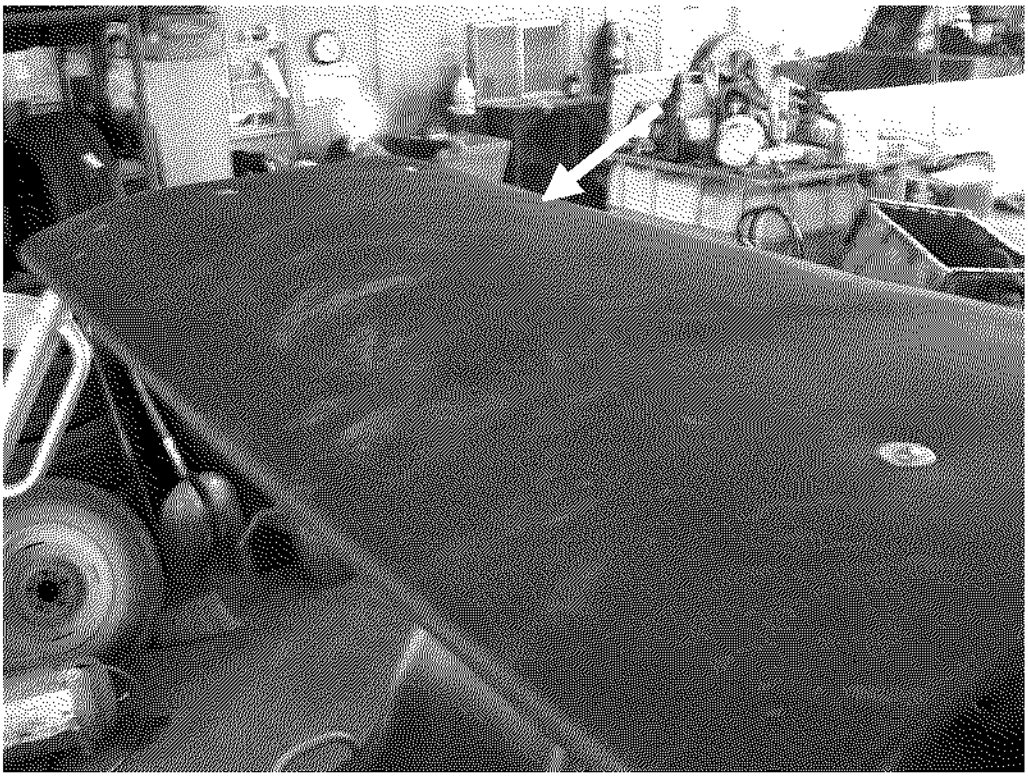
Photograph 14: Controls on driver's side floor area of incident vehicle



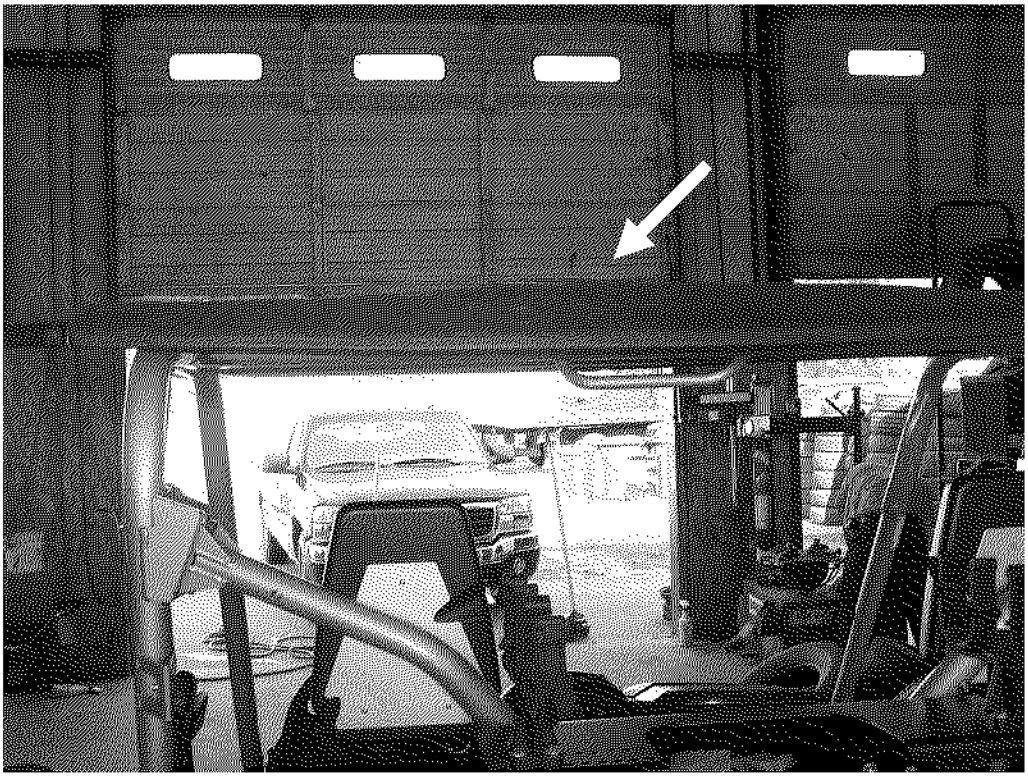
Photograph 15: Aftermarket modification to incident vehicle – View 1



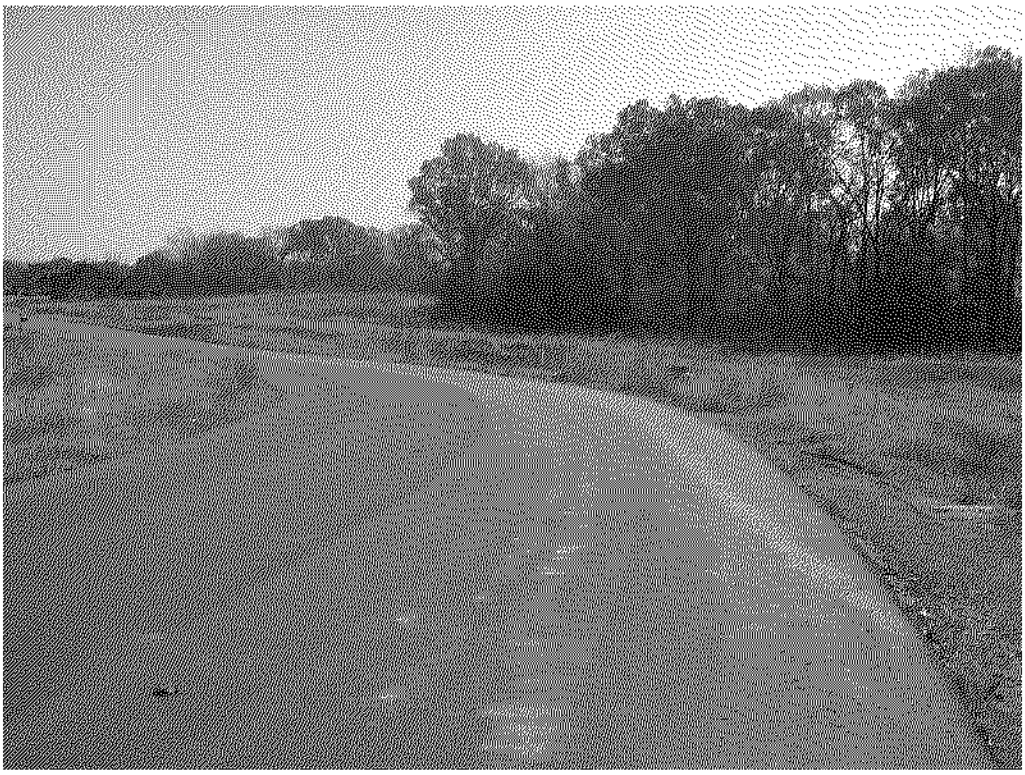
Photograph 16: Aftermarket modification to incident vehicle – View 2



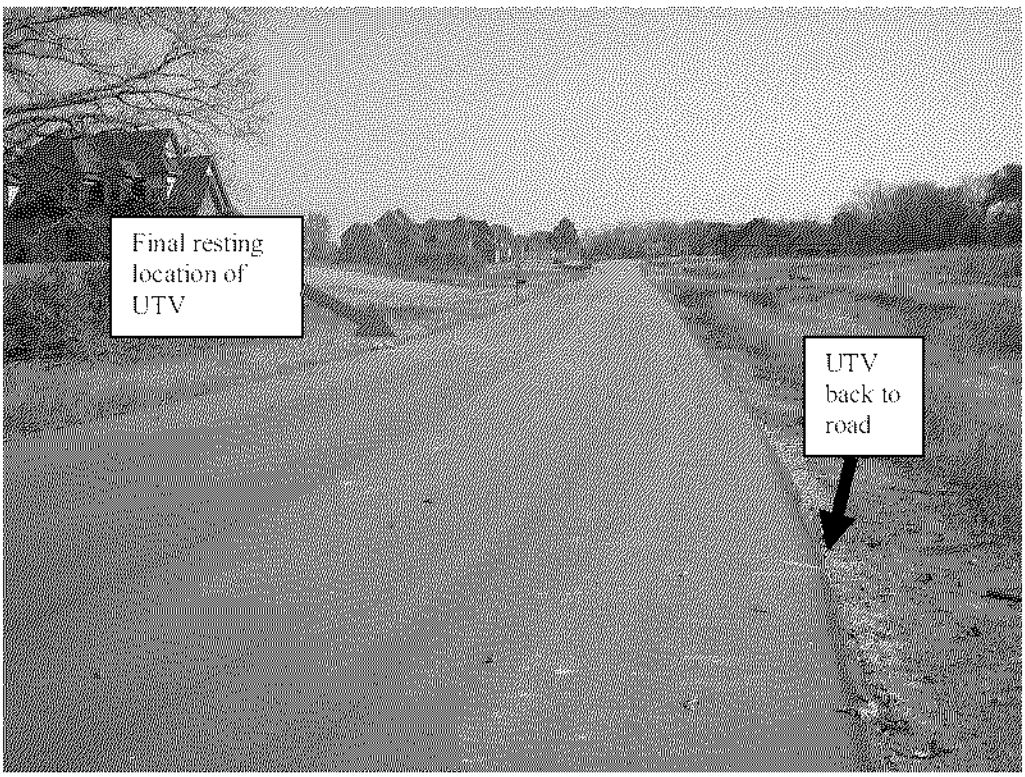
Photograph 17: Aftermarket modification to incident vehicle – View 3



Photograph 18: Aftermarket modification to incident vehicle – View 4



Photograph 19: Curve in road just before incident location



Photograph 20: Incident location – view 1

Photograph 21: View of incident location from opposite side

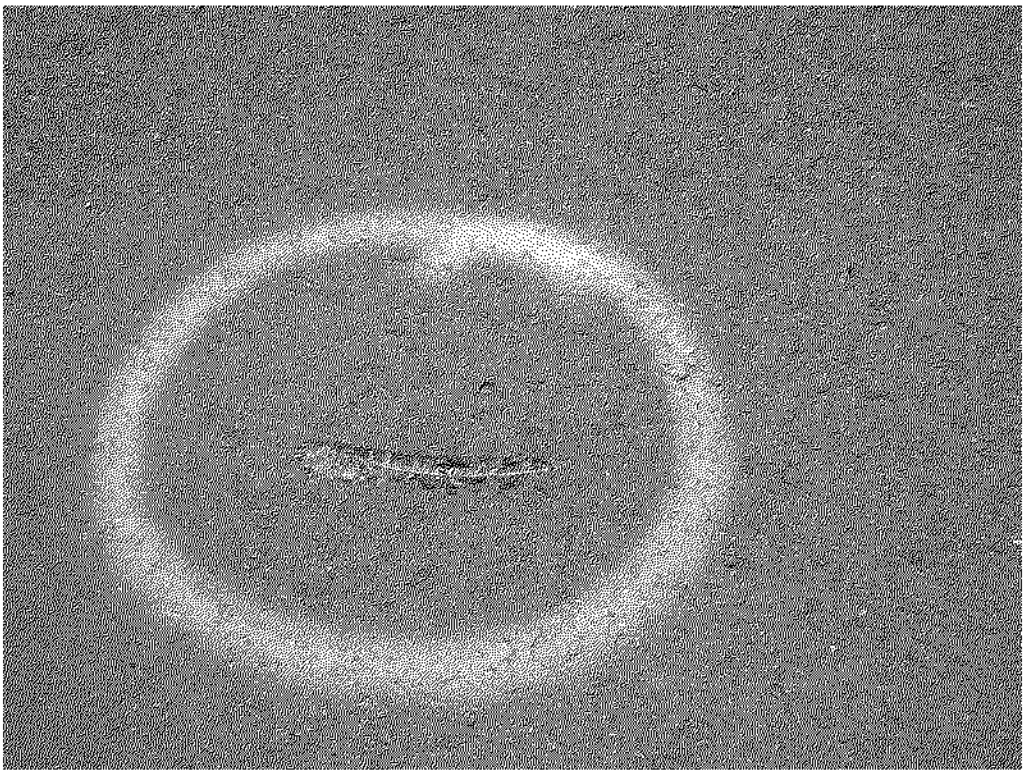
Photograph 22: Closer view of incident location from opposite side

Photograph 23: Tire marks from UTV in incident – view 1

Photograph 24: Tire marks from UTV in incident – view 2

Photograph 25: View of shoulder where UTV left road prior to incident

Photograph 26: Second view of shoulder where UTV left road prior to incident



Photograph 27: Area of impact where UTV hit road during incident

Photograph 28: Area of impact photographed on night of incident

Photograph 29: UTV on night of incident (from opposite side) – after being uprighted

Photograph 30: UTV on night of incident (from opposite side) – after being uprighted

Photograph 31: UTV on night of incident (from rear) – after being uprighted

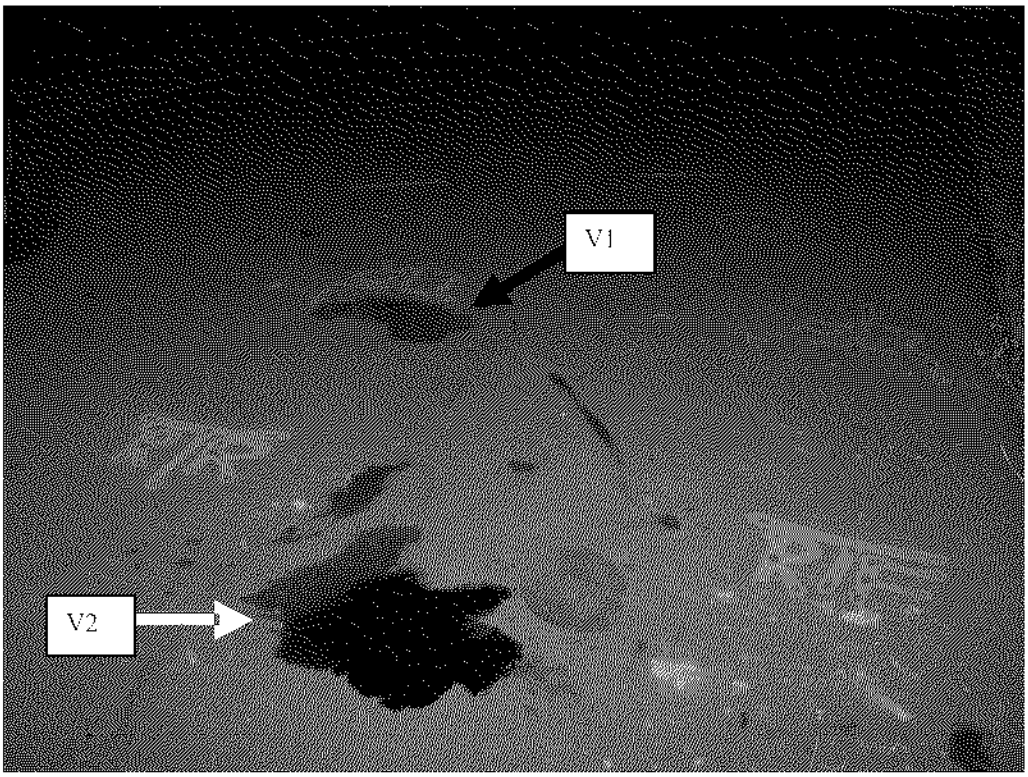
Photograph 32: UTV on night of incident (after being uprighted)

Photograph 33: Sheriff's markings of path that UTV is believed to have taken while rolling over in incident

Photograph 34: UTV on night of incident (after being uprighted)

Photograph 35: Location of left front and rear tires of UTV after being uprighted after incident

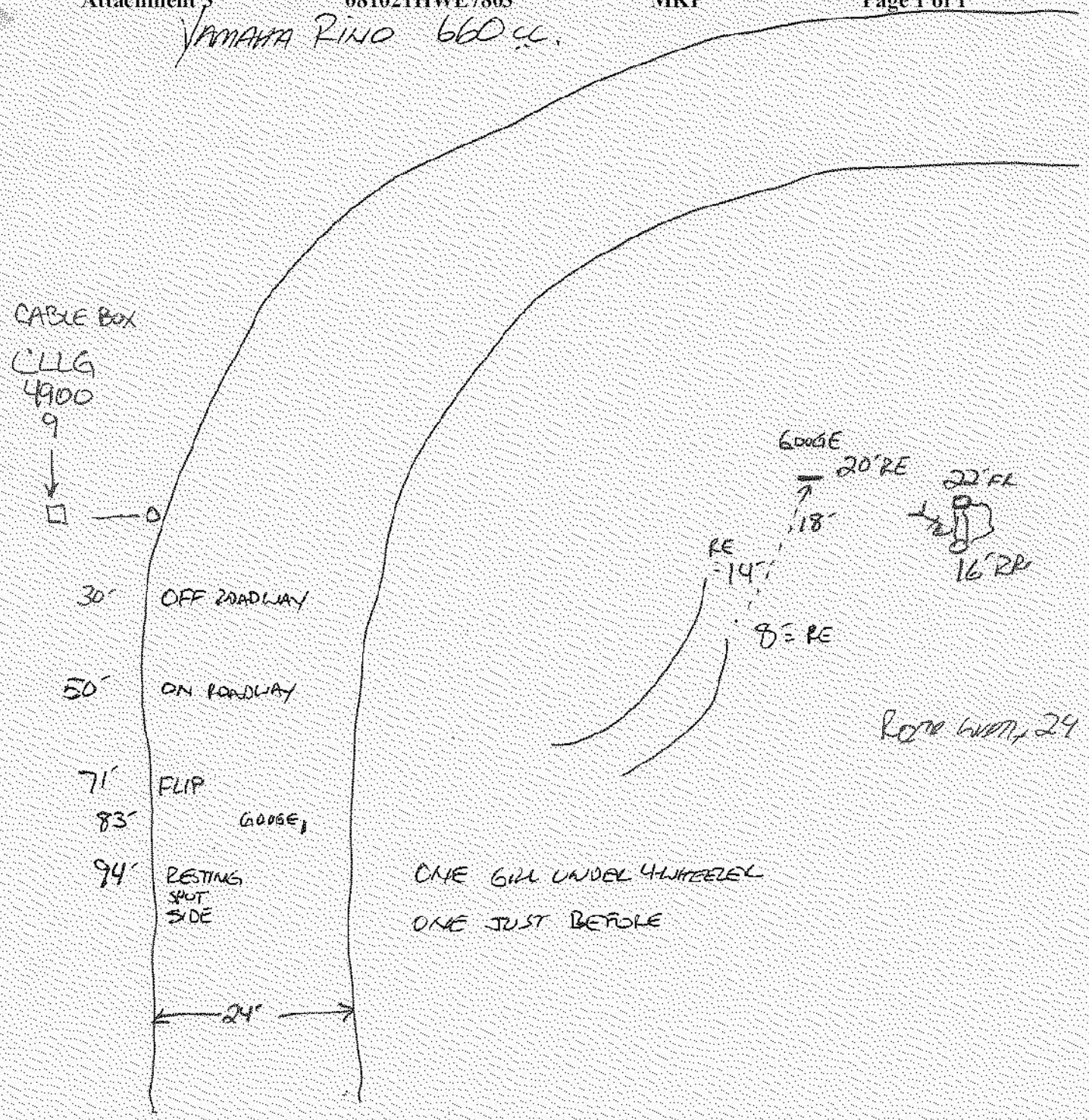
Photograph 36: Location of right front and rear tires of UTV after being uprighted after incident



Photograph 37: Location of Victims (Victim 1 had to be moved before UTV could be uprighted after incident)

Photograph 38: Location of Victim 2 (UTV was on top of Victim 2 after incident)

YAMAHA RINO 660 cc.



Rope burn, 24

* NOT TO SCALE *

Drawing by (b)(6)

DeSoto County Sheriff's Dept

Mary Kimberly Pigott
Product Safety Investigator
Post Office Box 167
Clinton, Mississippi 39060

Telephone: 601-924-8370
Fax 775-264-4482
E-mail: mpigott@cpsc.gov

U.S. CONSUMER PRODUCT SAFETY COMMISSION
Jackson, MS Field Office

October 29, 2008

Records Department
DeSoto County Sheriff Department
311 West South Street
Hernando, MS

Dear Records Administrator:

I am a Product Safety Investigator with the United States Consumer Product Safety Commission (CPSC). As you may be aware, CPSC is a consumer protection agency of the U.S. federal government involved with the safety of various consumer products, including side by side utility vehicles.

We are investigating the deaths of two 11-year-old females, [redacted] According to the information we received, these deaths occurred on October 19, 2008, from injuries sustained in an incident involving a Yamaha Rhino utility vehicle in DeSoto County, MS.

As part of my investigation and pursuant to the Mississippi Public Records Act, I would like to obtain a copy of the investigation report for this incident. I would also like to obtain copies of photographs or negatives that show the incident location and the utility vehicle involved.

Please fax or mail a copy of the report and any pertinent photographs or negatives to me at the following address:

Kim Pigott - CPSC
Post Office Box 167
Clinton, Mississippi 39060
Phone: 601-924-8370
FAX: 775-264-4482
Email: mpigott@cpsc.gov

* No Photos available

In addition, I would like to interview the investigating officer for this incident. Please ask the officer to contact me at the telephone number listed above. Thank you for your assistance in this matter.

Sincerely,

Kim Pigott

Kim Pigott
U.S. Consumer Product Safety Commission

STATE OF MISSISSIPPI
UNIFORM CRASH REPORT

Agency Number: 0017 Agency Case Number: b(6) Page 01 of 04

Agency Name: DESOTO COUNTY SHERIFF OFFICE

G1. County: 17 G2. Status Code: ● C ○ P ○ U

G3. Reported Date (MM/DD/YYYY): 10/18/2008 G4. Reported Time (2400): 1755 G5. Officer Time: Arrival Time (2400): 1804 10-24 Time (2400): 2036 G6. Vehicles: 01 G7. Killed: 02 G8. Injured: 00

G9. Address Number: G10. Street Name: DEE HART G11. Hwy/County Road #: G12. Trafficflow Direction: ○ N ● E ○ S ○ W

G13. Int.: ○ Y ● N G14. Distance: 100.00 ● F ○ M G15. Direction: ○ N ● E ○ S ○ W G16. Intersecting Street Name: LYLES G17. Int. Hwy/County Road #

G18. City Name: G19. Latitude: N 34 94.275 G20. Longitude: W 089 83.763

G21. First Harmful Event:
- ○ Rear end slow or stop
- ○ Rear end turn
- ○ Left turn same roadway
- ○ Left turn cross traffic
- ○ Right turn cross traffic
- ○ Head on
- ○ Sideswipe
- ○ Angle
- ○ Hit and run
- ● Overturn
- ○ Jackknife
- ○ Fell from vehicle
- ○ Other
- ○ Pedestrian
- ○ Parked Vehicle
- ○ Train
- ○ Bicyclist
- ○ Deer
- ○ Animal (other than deer)
- ○ Bridge/Culvert
- ○ Embankment/Ditch/Curb
- ○ Guardrail/Median Barrier
- ○ Tree
- ○ Utility pole/light support
- ○ Other fixed object
- ○ Sign Post
- ○ Signal standard
- ○ Building/Other Structure
- ○ Maint. Equip. - Not Moving
- ○ Maint. Equip. - Moving
- ○ Other non-fixed object

G22. Crash Location:
- ● Roadway
- ○ Off-Roadway
- ○ Median
- ○ Roadside
- ○ Shoulder
- ○ Parking Lot
- ○ Gore

G23. Intersection Type:
- ● None
- ○ Four-way Inter
- ○ T - Intersection
- ○ Crossover
- ○ Driveway
- ○ Five-point or more
- ○ Off Ramp
- ○ On Ramp
- ○ Path/Trail
- ○ RR Xing
- ○ Traffic Circle/Round
- ○ Y - Intersection

G24. Roadway System:
- ○ City Street
- ○ State Highway
- ○ U.S. Highway
- ● County Road
- ○ Parking Lot/Private Drive
- ○ Interstate
- ○ Off Road
- ○ State Park

G25. Light Condition:
- ● Daylight
- ○ Dark-Lit
- ○ Dark-Unlit
- ○ Dawn
- ○ Dusk

G26. Road Condition:
- ● Dry
- ○ Wet
- ○ Water
- ○ Sand/Mud/Dirt/Oil/Grave
- ○ Ice
- ○ Slush
- ○ Snow

G27. Weather Condition (3):
- ✖ Clear
- ☐ Blown Debris
- ☐ Rain
- ☐ Fog/Smog/Smoke
- ☐ Cloudy
- ☐ Sleet/Hail
- ☐ High winds
- ☐ Snow

G28. Workzone Relationship:
- ● Not Workzone Related
- ○ Within Construction Zone
- ○ Advance Warning Area

G29. Workzone Type (3):
- ✖ None
- ☐ Intermittent or Moving Work
- ☐ Lane Closure
- ☐ Lane Shift/Crossover
- ☐ Shoulder/Median Work
- ☐ Utility

WITNESS(ES)

G30. First Name: M: Last Name:
G31. Address: G32. Phone Number:
G33. City: G34. State: G35. Zip Code:
G36. Sex ○ M ○ F G37. Age:

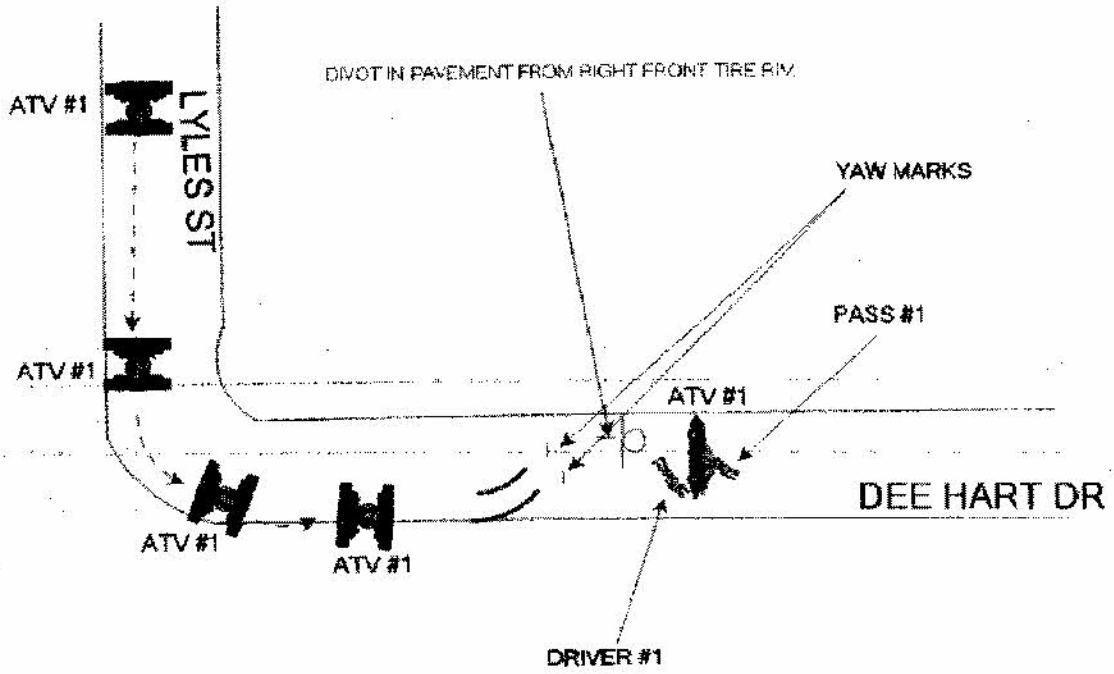
G38. First Name: M: Last Name:
G39. Address: G40. Phone Number:
G41. City: G42. State: G43. Zip Code:
G44. Sex ○ M ○ F G45. Age:

G46. Badge Number: 5005 G47. Investigating Officer Name (Please Print): b(6) G48. Officer Signature: b(6)

G49. Reviewing Badge Number: G50. Reviewing Officer Initials: G51. Photos Taken ● Y ○ N G52. Photographer and Badge #: b(6)

MUCR Diagram/Narrative | 0017 — (b)(6) | Page 02 of 04

N1. Collision Diagram



N2. Collision Narrative

ON THE ABOVE DATE AND APPROXIMATE TIME, I, OFF (b)(6) WAS DISPATCHED TO THE AREA OF LYLES STREET AND DEE HART DRIVE IN REGARDS TO A FOUR WHEELER ACCIDENT.

I ARRIVED ON SCENE AS PARAMEDICS EXITED THE VEHICLES AND WENT TO TREAT INJURIES. I OBSERVED TWO JUVENILE VICTIMS LYING ON THE ROADWAY WITH DRIVER #1 ON THE LEFT AND PASSENGER #1 ON THE RIGHT. THE A.T.V. WAS SITTING UPRIGHT. I LOCATED THE PARENTS OF BOTH VICTIMS AND ARE AS FOLLOWS:

DRIVER #1 PARENTS: (b)(6)

PASSENGER #1: (b)(3):CPSA Section 25(c),(b)(6)

THE PARENTS PROVIDED INFORMATION ON THE JUVENILES. DUE TO THE NATURE OF THE INJURIES, THE WINGS HAD TO BE CALLED IN AND THEY LANDED IN THE CURVE OF THE ROADWAY ON LYLES STREET.

I OBSERVED APPROXIMATELY 15 - 25 SUBJECTS AT THE SCENE; HOWEVER, NO ONE STATED WHAT HAD ACTUALLY TRANSPIRED AS THERE WERE NO APPARENT WITNESSES.

(SEE ATTACHED FOR FURTHER)

Desoto County Sheriff's Department

Page# of

Supplementary Investigation Report

M.V.C. - DEATH

NO# R & I # b(6) [redacted]

Name of Complainant	Address	Phone#
Desoto County Sheriff Office	311 West South Street Hernando, MS 38654	662.429.1470

(continued from narrative section of Report Beam generated accident report)

I SPOKE WITH THE FIRST CIVILIAN TO MAKE THE SCENE, b(6) [redacted] b(6) [redacted] AND HE STATED THAT HE HEARD A LOUD NOISE AND WALKED OUT ONTO THE DRIVEWAY TO OBSERVE THE A.T.V. TURNED ON ITS SIDE WITH THE PASSENGER #1 TRAPPED UNDERNEATH. b(6) [redacted] STATED THAT HE DROVE HIS 4-WHEELER TO THE SCENE AND TRIED TO RAISE IT OFF THE JUVENILE, BUT HAD DIFFICULTY DOING SO. HE BEGAN TO YELL FOR HELP WITH A NEIGHBOR COMING OUT TO ASSIST. THEY HAD TO MOVE DRIVER #1 TO THE LEFT OF THE A.T.V., AND THEN LIFT THE A.T.V. OFF OF PASSENGER #1 SO IT WAS SITTING RIGHTSIDE UP AND NOT HAMPERING THE VICTIM.

I OBSERVED THAT THE A.T.V. WAS TRAVELING SOUTH ON LYLES AS IT TURNED TO THE EAST ON DEEHART. THE A.T.V. WENT OFF THE ROADWAY TO THE RIGHT AT A HIGH SPEED; THE DRIVER APPEARED TO HAVE OVER CORRECTED IN STEERING; LOST CONTROL; THE A.T.V. APPEARRED TO HAVE HAD THE RIGHT FRONT TIRE DIG INTO THE PAVEMENT; AND FLIP OVER TO THE RIGHT. THE A.T.V. THREW BOTH JUVENILES FROM THE VEHICLE AND ACTUALLY LANDED ON TOP OF PASSENGER #1 ACCORDING TO THE FIRST SUBJECT ON SCENE. b(6) [redacted] b(6) [redacted]

DRIVER #1 WAS PRONOUCED DECEASED AT THE SCENE WITH PASSENGER #1 PRONOUNCED DECEASED AT BAPTIST-DESOTO HOSPITAL. b(6) [redacted] MADE THE SCENE ALONG WITH CDR. b(6) [redacted] MADE SCENE AS WELL.

b(6) [redacted] MADE THE SCENE AND ALSO PHOTOGRAPHED SAME WITH THE ASSISTANCE OF b(6) [redacted] AS PART OF THEIR INITIAL INVESTIGATION.

I TOOK SEVERAL PHOTOGRAPHS OF THE SCENE AND WILL ADD TO THE FILE LATER THIS DATE.

THE A.T.V. WAS IMPOUNDED AND TOWED FROM THE SCENE BY BRYANT'S WRECKER TO A SECURE FACILITY.

End of Report.

b(6) [redacted] b(6) [redacted]

Desoto County Sheriff Department
Patrol Division

MUCR Person/Occupant

V0. Veh. # 01 | P1. Person # 01 | Agency Number 0017 | Agency Case Number b(6) | Page 03 of 04

P1. Person Type: ● Driver ○ Pedestrian ○ Bicyclist ○ Skater ○ Other non-motorist ○ Train Engineer ○ Hit and Run Driver ○ LE

P2. License # | P3. State | P4. CDL? ○ N ○ Y | P5. DOB (MM/DD/YYYY) b(3):CPSA Section 25(c),(b)(6)

P6. First Name b(3):CPSA Section 25(c),(b)(6) | MI | Last Name

P7. Address b(3):CPSA Section 25(c),(b)(6) | P8. Phone Number

P9. City b(3):CPSA Section 25(c),(b)(6) | P10. State | P11. Zip Code

P12. DL Status: ○ Valid ○ Suspended - DUI ● No License ○ Learner Permit ○ Expired ○ Improper DL ○ Suspended ○ Other

P22. Safety Equip. (2): ☐ Shoulder & Lap Belt ☒ None ☐ Lap Belt ☐ Automated Restraint ☐ Shoulder Belt ☐ Child Safety Seat ☐ Helmet

P23. Injury Type: ○ None ○ Complaint of Pain ○ Moderate ○ Life Threatening ● Killed

P24. Ejection: ○ Not ○ Partially ● Totally

P25. Extricated: ● N ○ Y

P26. Sex: ○ M ● F

P27. Race: ● White ○ Hispanic ○ Black ○ Other

P28. Position: ● Left ○ Center ○ Right

P29. Airbag: ○ Deployed - Front ○ Not Deployed ○ Deployed - Side ● No Airbag ○ Deployed - Both

P21. Alcohol: ○ Y ● N ○ P | P11. Ticket #: 1 2 | P5. Citation: 1 2

P16. Vehicle: ○ Not Transported ○ Police ● Hearse ○ EMS ○ Private Vehicle

P17. EMS Agency Code | P18. Medical Facility Code

P19. Condition: ○ No Defects Apparent ○ Obviously Intoxicated ● Unknown ○ Physical Impairment ○ Hit and Run ○ Affected by Exhaust Fumes ○ Drinking - Not Impaired ○ Using Drugs - Impaired ○ Drinking - Impaired ○ Using Drugs - Not Impaired ○ Fell Asleep/Fainted/Fatigue ○ Pending Lab Results

P20. Non-Motorist Action: ○ Unknown ○ Pushing vehicle ○ Entering/Crossing Roadway ○ Approaching/leaving vehicle ○ Walking/running/playing/cycling ○ Playing/working on vehicle ○ Working ○ Standing

P21. Contributing Circumstance (3): ☐ No Apparent Improper Driving ☐ Failed to Yield Right of Way ☐ Following Too Closely ☒ Speed Too Fast For Conditions ☐ Driving Under The Influence ☐ Animal on Roadway ☐ Faulty Equipment ☐ Exceeded Lawful Speed ☐ Improper Passing/Overtaking ☐ Made Improper Turn ☐ Left of Center ☒ Failure to keep proper lane/Run off road ☐ Avoidance ☐ Drove on Wrong Side of Road ☐ Fatigued/Asleep ☐ Illegally Crossing Median ☐ Improper Lane Change ☐ Lying and/or illegally in roadway ☐ Not Visible (Dark Clothing) ☐ Operating Defective Equipment ☐ Passed Stop Sign ☐ Pedestrian Actions ☐ Ran Red Light ☐ Roadway Defects ☐ Visibility Obstructed ☐ Improper Backing ☒ See Crash Description

Alcohol Test Information

P30. Type: ● None ○ Serum ○ Blood ○ Urine ○ Breath

P31. Status: ● None given ○ Test given ○ Test refused ○ Test given, pending

P32. Result: .

Drug Test Information

P33. Type: ● None ○ Serum ○ Blood ○ Urine

P34. Status: ● None given ○ Test given, pending ○ Test refused ○ Test given

Occupant

O0. Vehicle #: 01 | O1. First Name b(3):CPSA Section 25(c),(b)(6) | MI | Last Name

O2. Address Same as Driver #: | O3. Address b(3):CPSA Section 25(c),(b)(6)

O4. City b(3):CPSA Section 25(c),(b)(6) | O5. State | Unborn Child ☐

O6. Position: ○ Front-Driver ○ Front-Middle ● Front-right ○ 2nd-left ○ 2nd-middle ○ 2nd-right ○ 3rd-left ○ 3rd-middle ○ 3rd-right ○ Sleeper of Truck Cab ○ Encl. Pass./Cargo Area ○ Unencl. Pass./Cargo Area ○ Riding on Exterior ○ Towed Vhcl./Trailer

O7. Safety Equip. (2): ☐ Shoulder and Lap Belt ☒ None ☐ Lap Belt ☐ Automated Restraint ☐ Shoulder Belt ☐ Child Safety Seat ☐ Helmet

O8. Sex: ○ M ● F | O9. Race: ● White ○ Hispanic ○ Black ○ Other | O10. Age: 11 | O11. Extricated: ○ M ● Y ○ N ● Y | O12. Ejection: ○ Not ○ Partially ● Totally

O13. Injury Type: ○ None ○ Life Threatening ○ Complaint of Pain ○ Moderate ● Killed

O14. Airbag: ○ Deployed - Front ○ Not Deployed ○ Deployed - Side ● No Airbag ○ Deployed - Both

O15. Vehicle: ○ Not Transported ○ Police ○ Hearse ● EMS ○ Private Vehicle

O16. EMS Agency Code 0128 | O17. Medical Facility Code 0318

Occupant

O0. Vehicle #: | O1. First Name | MI | Last Name

O2. Address Same as Driver #: | O3. Address

O4. City | O5. State | Unborn Child ☐

O6. Position: ○ Front-Driver ○ Front-Middle ○ Front-right ○ 2nd-left ○ 2nd-middle ○ 2nd-right ○ 3rd-left ○ 3rd-middle ○ 3rd-right ○ Sleeper of Truck Cab ○ Encl. Pass./Cargo Area ○ Unencl. Pass./Cargo Area ○ Riding on Exterior ○ Towed Vhcl./Trailer

O7. Safety Equip. (2): ☐ Shoulder and Lap Belt ☐ None ☐ Lap Belt ☐ Automated Restraint ☐ Shoulder Belt ☐ Child Safety Seat ☐ Helmet

O8. Sex: ○ M ○ F | O9. Race: ○ White ○ Hispanic ○ Black ○ Other | O10. Age | O11. Extricated: ○ M ○ Y ○ N ○ Y | O12. Ejection: ○ Not ○ Partially ○ Totally

O13. Injury Type: ○ None ○ Life Threatening ○ Complaint of Pain ○ Moderate ○ Killed

O14. Airbag: ○ Deployed - Front ○ Not Deployed ○ Deployed - Side ○ No Airbag ○ Deployed - Both

O15. Vehicle: ○ Not Transported ○ Police ○ Hearse ○ EMS ○ Private Vehicle

O16. EMS Agency Code | O17. Medical Facility Code

5899010293

MUCR Vehicle

V0. Vehicle #: 01 | V1. Total Occupants: 02 | Agency Number: 0017 | Agency Case Number | Page 04 of 04

V2. State: MS | V3. Year: 0000 | V4. License Plate Number: 0000000

V5. Make: YAMAHA | V6. Model Year: 2005

V7. Vehicle Model: RHINO SPEC | V8. Vehicle Color: BLUE

V9. Damage: ○ Heavy ● Light ○ None

V10. Speed Zone: 20 | V11. Est. Speed

V19. No Proof of Insurance ☒ | V17. Insurance Company Name | V18. Policy Number

Owner Information

Same as Driver ☐ | V12. Owner Name | V13. Address | V14. City | V15. State | V16. Zip Code

V20. Sequence of Events

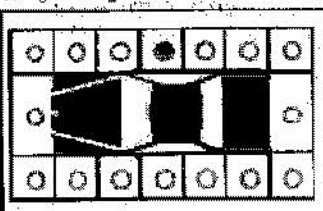
Collision w/ Person, Vehicle/Non-fixed Object (1 2 3 4)	Non-Collision (1 2 3 4)	Collision w/ Fixed Object (1 2 3 4)
Animal	Cargo Loss/Shift	Attenuator/Cushion
Bicyclist	Crossover	Bridge Structure
Maintenance Equip.	Equipment Failure	Culvert
Moving Vehicle	Fell/Jump from Vehicle	Curb
Parked Vehicle	Fire/Explosion	Ditch
Pedestrian	Immersion	Embankment
Train	Jackknife	Fence
Slowing Vehicle	Median/Centerline	Guardrail
Stopped Vehicle in Road	Thrown/Falling Object	Mailbox
	Off roadway/Left	Median Barrier
	Off roadway/Right	Post/Pole/Support
	Overturn/Rollover	Tree
	Unit Separation	Other Fixed Object
	Over Correcting/Steering	

V21. Vehicle Action

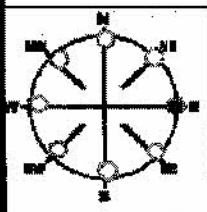
● Going Straight	○ Avoidance
○ Making Left Turn	○ Lane Change
○ Stopped	○ Leaving Parking
○ Slow/Stop in Road	○ Overtaking/Passing
○ Parked	○ Parking Position
○ Backing	○ Making U Turn
○ Making Right Turn	○ In Tow

V22. Vehicle Configuration

Passenger Car	School Bus	Train
Light Truck	Single-Unit Truck(2)	Truck/Trailer
Stationwagon/Van	Single-Unit Truck(3+)	Emergency Veh.
SUV	Farm Tractor	Commercial Bus
Motorcycle	Tractor/SemiTrailer	● ATV
Other	Tractor(2)	Farm Equip.
RV	Tractor(3)	Unknown Truck



○ Under ○ Overturn ○ None ○ Other



V25. Railway Type

● None ○ Right only ○ Left Only ○ Both Sides ○ Separate ○ Signed

V23. Traffic Control Device

Channel-Painted	Officer
Channel-Physical	RR Flashing Signal
Flag Person	RR Signal and Gate
Flashing Signal Red	Signal
Flashing Signal Yellow	Stop Sign
No Passing	Railroad Sign
● None	Yield Sign

V27. Device Functioning? ○ Y ○ N

V26. Road Character

Straight/Level	Bridge
Intersect two roads	Private Drive
● Straight/Grade	Curve/Hillcrest
Curve/Level	Crossover
Straight/Hillcrest	Begin/End Divided Road
Curve/Grade	One-Way

V29. Road Design

● 2 Lane	○ 3 Lane
○ 4+	○ Frontage/Ramp
○ Parking Lot	○ One Way
○ 1 Lane	○ Unpaved

V30. Divided? ○ Yes ○ No

V31. Center Turn Lane? ○ Yes ○ No

V32. Road Surface Type

● Asphalt ○ Concrete ○ Dirt ○ Gravel ○ Other - See Narrative

V33. Towed? ● Yes ○ No | V34. Authority: ○ Owner ● Police ○ Other | V35. Towed By: BRYANTS

Commercial Vehicle

C1. Carrier ID Number:

C2. Authority: ○ US DOT ○ State ○ Mexico ○ I/C ○ Canada

C3. Carrier Name

C4. Carrier Address

C5. City | C6. State | C7. Zip Code

C8. GVWR #

C9. Cargo Body Type

Auto transporter	Flatbed
Bus<15	Garbage/refuse
Bus 15+	Grain/chips/gravel
Cargo tank	Other
Concrete Mixer	Pole/log
Dump	Van/enclosed box
None	N/A

C10. Commodity Hauled

C11. Placard ID

C12. HAZMAT Released ○ Yes ○ No

DeSoto County Coroner
Phone: 662-429-5057
Fax: 662-429-5126

Fax Cover Sheet

To (b)(6) 775-264-4482

From (b)(6)

Date October 24, 2008

No. of Pages 5 incl. cover

info. requested regarding (b)(3):CPSA Section 25(c),(b)(6) and (b)(3):CPSA Section 25(c),(b)(6) - no photos included.

(b)(6)

Central Office Use Only

(Date of Receipt)

(DOD Code)

(COD Code)

(ME Case Number)

STATE MEDICAL EXAMINER

REPORT OF DEATH INVESTIGATION

DECEDENT: b(3):CPSA Section 25(c),(b)(6) (First Name) (Middle Name) (Last Name) (Jr., Sr., III, etc.)

ADDRESS: b(3):CPSA Section 25(c),(b)(6) (Number & Street or Route, Box No.) (City, State) DESOTO (County)

INFORMATION ABOUT DECEDENT AND DESCRIPTION OF BODY

AGE (If less than 2 yrs. give months & days) 11

Date of Birth 06/14/1997

MARITAL STATUS
- [ ] Married
- [x] Never Married
- [ ] Widowed
- [ ] Divorced
- [ ] Separated
- [ ] Unknown

RACE
- [x] White
- [ ] Black
- [ ] Hispanic
- [ ] Other

SEX
- [ ] Male
- [x] Female
- [ ] Undetermined

HEAD-HAIR
- [ ] None
- [ ] Partly Bald
- [ ] Blonde
- [x] Brown
- [ ] Red
- [ ] Black
- [ ] Grey
- [ ] White

OTHER HAIR
- [ ] Mustache
- [ ] Beard

CLOTHING
- [x] Clothed
- [ ] Partly Clothed
- [ ] Unclothed

EYES: Color _____ R _____ L _____

WEIGHT: 70

LENGTH: 5'0"

MISCELLANEOUS:
- [ ]
- [ ]
- [ ]
- [ ] Circumcised

BODY TEMPERATURE
- [x] Warm
- [ ] Cool
- [ ] Cold _____ (if taken)

RIGOR (Circle Degree)
- [x] Neck (0) 1+ 2+ 3+
- [x] Arms (0) 1+ 2+ 3+
- [x] Legs (0) 1+ 2+ 3+

LIVOR Color _____
Fixed? [ ] Yes [ ] No
- [ ] Anterior
- [ ] Posterior
- [ ] Lateral

BLOOD
- [x] Nose
- [x] Mouth
- [x] Ears
- [x] Clothing
- [ ] None

FROTH
- [ ] Present
- [x] Absent

OTHER (Dirt, water, etc.)
- [ ] Nose
- [ ] Mouth
- [ ] Ears
- [x] None

DECOMPOSITION
- [ ] Early
- [ ] Advanced
- [x] None

OCCUPATION (Please fill in both parts)

TYPE OF WORK: _____ (Example: machinist, typist, fireman, farmer, salesman, homemaker)

INDUSTRY: _____ (Example: textile, banking, fire dept., farming, insurance, home)

[ ] No Occupational Information

INFORMATION ABOUT OCCURRENCE

ITEM	DATE	TIME	LOCATION	COUNTY	TYPE OF PREMISES (Home, farm, highway, hospital, etc.)
INJURY OR ONSET OF ILLNESS	10-18-2008		Pehart Dr. near Rutledge Rd.	DeSoto	ON THE JOB? [ ] YES [ ] NO four wheeler
LAST SEEN ALIVE	10-18-2008		(By whom: Name and Address)	DeSoto	crash dehart near Rutledge
DEATH	10-18-2008	5:32 pm	Lewisburg EMS	DeSoto	
FOUND DEAD BY	10-18-2008	5:32 pm	(By whom: Name and Address or Title) Lewisburg EMS	DeSoto	
POLICE NOTIFIED	10-18-2008	5:40 pm	POLICE AGENCY: DeSoto Sheriff's Office	OFFICER: Meredith	
CORONER/M.E. NOTIFIED	10-18-2008	6:30 pm	(By whom: Name and Address) DeSoto Sheriff's Office Dispatch		
VIEW OF BODY	10-18-2008	7:00 pm	b(6) (Name)	(Address)	[ ] NOT VIEWED
WITNESS TO INJURY OR ILLNESS AND DEATH					BLOOD SAMPLE DRAWN: [ ] Yes [x] Why not?:

MANNER OF DEATH

[ ] NATURAL [ ] HOMICIDE [x] ACCIDENT [ ] SUICIDE [ ] UNKNOWN [ ] PENDING

MEDICO-LEGAL AUTOPSY AUTHORIZED: [ ] Yes [x] No

PATHOLOGIST: _____

PROBABLE CAUSE OF DEATH:
1. massive internal trauma
2. Due to: 4 wheeler accident

Contributing factor: _____

I hereby certify that after receiving notice of the death described herein I took charge of the body and made inquiries regarding the cause of death in accordance with the Mississippi Code Annotated, and that the information contained herein regarding such death is true and correct to the best of my knowledge and belief

_____ (Signature of Coroner or Medical Examiner)

OTHER AUTOPSY DONE: [ ] Yes [x] No

M.S.M.E. _____

**IS DECEDENT AN ORGAN DONOR? _____ YES x NO (Please ask family when at all possible.)

_____ KIDNEY _____ EYE _____ ANY NEEDED ORGAN

IF DONOR, DID YOU NOTIFY TRANSPLANT TEAM? _____ YES x NO IF NO, WHO DID? _____

ME-1 Send original to the State Medical Examiner. Copies must be forwarded to County Clerk of Court.

REASON FOR ASSUMING MEDICAL EXAMINER JURISDICTION (Check ONE only)

- [ ] HOMICIDE
- [ ] SUICIDE
- [ ] TRAUMA
- [ ] ACCIDENT
- [ ] DISASTER
- [ ] VIOLENT
- [ ] POISONING
- [ ] UNKNOWN OR SUSPICIOUS
- POLICE CUSTODY STATE
- [ ] LOCAL/OTHER
- [ ] PUBLIC HEALTH HAZARD
- [x] SUDDEN/UNEXPECTED
- [ ] SURGICAL/ANESTHETIC PROCEDURE
- [ ] UNATTENDED

MEANS OF DEATH (Agency or Object)—IF DEATH OTHER THAN NATURAL

IF MOTOR VEHICLE INVOLVED

- [ ] Driver
- [ ] Passenger
- [ ] Pedestrian
- [ ] Other
- [ ] Lap Belt Used
- [ ] Shoulder Belt Used
- [ ] Crash Helmet Worn
- [ ] Hit-Run
- [ ] Non-Highway
- [ ] Passenger Car
- [ ] Truck
- [ ] Motorcycle
- [ ] Motorbike
- [ ] Farm Vehicle
- [x] Other: 4 wheeler

IF GUN

- [ ] Rifle—Cal.
- [ ] Handgun—Cal.
- [ ] Shotgun—Gau.
- [ ] Unknown Type
- [ ] Stippling
- [ ] Smudging
- [ ] Abrasion Collar
- [ ] Round
- [ ] Oblong
- [ ] Stellate
- [ ] Surg. Treated
- [ ] Other

LOCATION OF WOUNDS (If no autopsy):

Head	Buttocks	Upper Arms
Neck	Thighs	Lower Arms
Chest	Lower Legs	Hands
Abdomen	Feet	Other

IF INSTRUMENT: Blunt / Sharp

What Kind:

Unknown Kind

TYPE & LOCATION OF INJURIES:

IF DRUG, POISON, CHEMICAL (Suspected)

- [ ] Alcohol
- [ ] Other Drugs, Chemical or Poison (Specify by Name)
- [ ] Unknown

REMARKS/SYMPTOMS:

- [ ] Ingested
- [ ] Injected
- [ ] Inhaled
- [ ] Topical
- [ ] Other
- [ ] Unknown

MEDICAL HISTORY

CONDITION:

- [ ] Alcoholism
- [ ] Cancer
- [ ] Diabetes
- [ ] Drug Abuse
- [ ] Lung Disease
- [ ] Fractures
- [ ] Heart Disease
- [ ] Seizure (specify)

Other (specify)

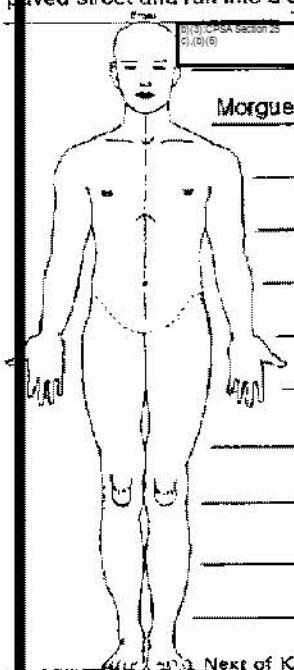
DOCTOR:

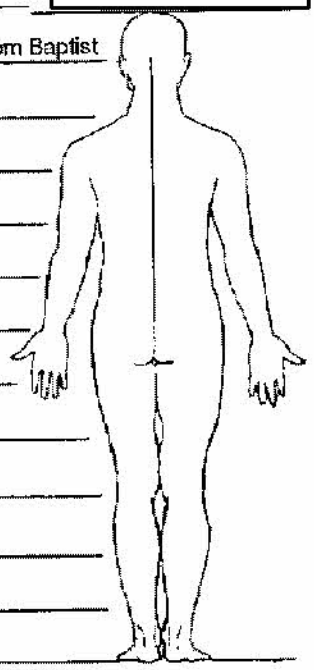
Where treated:

Medications:

NARRATIVE SUMMARY OF CIRCUMSTANCES SURROUNDING DEATH (Add sheet if needed):

Arrived on scene. DeSoto Sheriff Dept and Lewisburg EMS and fire on scene. These 2 young ladies [redacted] had been riding on a four wheeler, Yamaha rhino special edtion 444 in a new subdivision near [redacted] This is a fairly new area, lots of new homes and several undeveloped lots. [redacted] was in the Lewisburg EMS unit and [redacted] been transported to the ER. Looks like they were riding on a paved street and run into a ditch. [redacted] was dead on the scene. Both girls parents had gone to the hospital. Talked with [redacted] mother, and she advised to call Corinthian Funeral Home, Corinth, MS to pick up [redacted] from Baptist Morgue. At this time, funeral arrangements unknown fo [redacted] Don't know who was driving.





Next of Kin: [redacted]

Funeral Home: Corinthian Funeral Home, Corinth, MS

Attachment 5
081021HWE7803

MKP

Central Office Use Only

(Date of Receipt)

(DDD Code)

(CDD Code)

(ME Case Number)

STATE MEDICAL EXAMINER

REPORT OF DEATH INVESTIGATION

DECEDENT: b(3) CPSA Section 25(c),(b)(6) (First Name) (Middle Name) (Last Name) (Jr., Sr., III, etc.)

ADDRESS: b(3) CPSA Section 25(c),(b)(6) (Number & Street or Rural, Box No.) (City, State) DESOTO (County)

INFORMATION ABOUT DECEDENT AND DESCRIPTION OF BODY

AGE (If less than 2 yrs give month & days) 11

Date of Birth 07/05/1997

SEX: [ ] Male [x] Female [ ] Undetermined

CLOTHING: [x] Clothed [ ] Partly Clothed [ ] Unclothed

BODY TEMPERATURE: [x] Warm [ ] Cool [ ] Cold ____ (If taken)

BLOOD: [x] Nose [x] Mouth [x] Ears [x] Clothing [ ] None

FROTH: [ ] Present [x] Absent

OCCUPATION (Please fill in both parts)

TYPE OF WORK: (Example: machinist, typist, fireman, farmer, salesman, homemaker)

INDUSTRY: (Example: textile, banking, fire dept., farming, insurance, home)

[ ] No Occupational Information

MARITAL STATUS: [ ] Married [x] Never Married [ ] Widowed [ ] Divorced [ ] Separated [ ] Unknown

RACE: [x] White [ ] Black [ ] Hispanic [ ] Other

HEAD-HAIR: [ ] None [ ] Partly Bald [ ] Blonde [x] Brown [ ] Red [ ] Black [ ] Grey [ ] White

OTHER HAIR: [ ] Mustache [ ] Beard

EYES: Color ____ R ____ L ____

WEIGHT: 70

LENGTH: 4'10"

MISCELLANEOUS: [ ] ____ [ ] ____ [ ] ____ [ ] Circumcised

RIGOR (Circle Degree): [x] Neck 0 1+ 2+ 3+ [x] Arms 0 1+ 2+ 3+ [x] Legs 0 1+ 2+ 3+

LIVOR: Color ____ Fixed? [ ] Yes [ ] No [ ] Anterior [ ] Posterior [ ] Lateral

OTHER (Dirt, water, etc.): [ ] Nose [ ] Mouth [ ] Ears [x] None

DECOMPOSITION: [ ] Early [ ] Advanced [x] None

INFORMATION ABOUT OCCURRENCE

ITEM	DATE	TIME	LOCATION	COUNTY	TYPE OF PREMISES (Home, farm, highway, hospital, etc.)
INJURY OR ONSET OF ILLNESS	10-18-2008		Pehart Dr. near Rutledge Rd.	DeSoto	ON THE JOB? [ ] YES [x] NO four wheeler
LAST SEEN ALIVE	10-18-2008		(By whom: Name and Address)	DeSoto	
DEATH	10-18-2008	6:36 pm	b(6)	DeSoto	Baptist DeSoto
FOUND DEAD BY	10-18-2008	6:36 pm	(By whom: Name and Address or Title) b(6)	DeSoto	Baptist DeSoto
POLICE NOTIFIED	10-18-2008	6:40 pm	POLICE AGENCY: DeSoto Sheriff's Office		OFFICER:
CORONER/M.E. NOTIFIED	10-18-2008	6:30 pm	(By whom: Name and Address)		
VIEW OF BODY	10-18-2008		Died at Hospital		[x] NOT VIEWED
WITNESS TO INJURY OR ILLNESS AND DEATH			(Name) (Address)		BLOOD SAMPLE DRAWN: [ ] Yes [x] Why not?: n/a

MANNER OF DEATH

[ ] NATURAL [ ] HOMICIDE [x] ACCIDENT [ ] SUICIDE [ ] UNKNOWN [ ] PENDING ____

MEDICO-LEGAL AUTOPSY AUTHORIZED: [ ] Yes [x] No

PATHOLOGIST: ____

PROBABLE CAUSE OF DEATH:

1. massive internal trauma
2. Due to: 4 wheeler accident

Contributing factor: ____

OTHER AUTOPSY DONE: [ ] Yes [x] No

M.S.M.E. ____

I hereby certify that after receiving notice of the death described herein I took charge of the body and made inquiries regarding the cause of death in accordance with the Mississippi Code Annotated, and that the information contained herein regarding such death is true and correct to the best of my knowledge and belief.

____ (Signature of Coroner or Medical Examiner)

**IS DECEDENT AN ORGAN DONOR? ____ YES __x__ NO (Please ask family when at all possible.)

____ KIDNEY ____ EYE ____ ANY NEEDED ORGAN

IF DONOR, DID YOU NOTIFY TRANSPLANT TEAM? ____ YES __x__ NO IF NO, WHO DID? ____

ME-1 Send original to the State Medical Examiner. Copies must be forwarded to County Clerk of Court.

Attachment 5

081021HWE7803

MKP

REASON FOR ASSUMING MEDICAL EXAMINER JURISDICTION (Check ONE only)

- [ ] HOMICIDE
- [ ] SUICIDE
- [ ] TRAUMA
- [ ] ACCIDENT
- [ ] DISASTER
- [ ] VIOLENT
- [ ] POISONING
- [ ] UNKNOWN OR SUSPICIOUS
- POLICE CUSTODY
- STATE
- [ ] LOCAL/OTHER
- [ ] PUBLIC HEALTH HAZARD
- [x] SUDDEN/UNEXPECTED
- [ ] SURGICAL/ANESTHETIC PROCEDURE
- [ ] UNATTENDED

MEANS OF DEATH (Agency or Object)—IF DEATH OTHER THAN NATURAL

IF MOTOR VEHICLE INVOLVED

- [ ] Driver
- [ ] Passenger
- [ ] Pedestrian
- [ ] Other
- [ ] Lap Belt Used
- [ ] Shoulder Belt Used
- [ ] Crash Helmet Worn
- [ ] Hit-Run
- [ ] Non-Highway
- [ ] Passenger Car
- [ ] Truck
- [ ] Motorcycle
- [ ] Motorbike
- [ ] Farm Vehicle
- [x] Other
- 4 wheeler

IF GUN

- [ ] Rifle—Cal.
- [ ] Handgun—Cal.
- [x] Shotgun—Gau.
- [ ] Unknown Type
- [ ] Stippling
- [ ] Smudging
- [ ] Abrasion Collar
- [ ] Round
- [ ] Oblong
- [ ] Stellate
- [ ] Surg. Treated
- [ ] Other

LOCATION OF WOUNDS (If no autopsy):

Head	Buttocks	Upper Arms
Neck	Thighs	Lower Arms
Chest	Lower Legs	Hands
Abdomen	Feet	Other

IF INSTRUMENT:

Blunt

Sharp

What Kind:

Unknown Kind

TYPE & LOCATION OF INJURIES:

n/a

IF DRUG, POISON, CHEMICAL (Suspected)

- [ ] Alcohol
- [ ] Other Drugs, Chemical or Poison (Specify by Name)
- [ ] Unknown

REMARKS/SYMPTOMS:

massive internal trauma

- [ ] Ingested
- [ ] Injected
- [ ] Inhaled
- [ ] Topical
- [ ] Other
- [ ] Unknown

MEDICAL HISTORY

CONDITION:

- [ ] Alcoholism
- [ ] Cancer
- [ ] Diabetes
- [ ] Drug Abuse
- [ ] Lung Disease
- [ ] Fractures
- [ ] Heart Disease
- [ ] Seizure (specify)
- Other (specify)

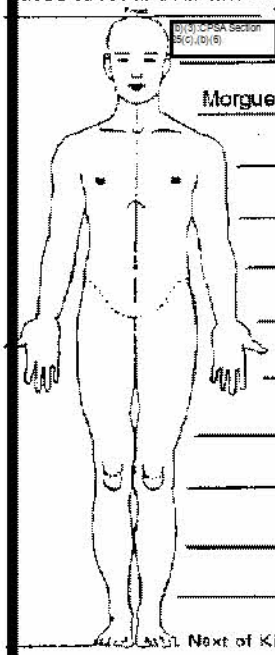
DOCTOR:

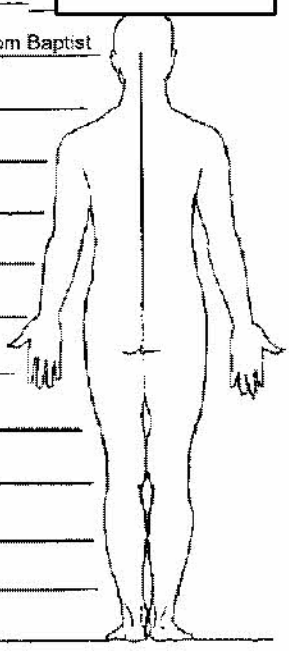
Where treated:

Medications:

NARRATIVE SUMMARY OF CIRCUMSTANCES SURROUNDING DEATH (Add sheet if needed):

Arrived on scene. DeSoto Sheriff Dept and Lewisburg EMS and fire on scene. These 2 young ladies, [redacted] had been riding on a four wheeler, Yamaha rhino special edtion 444 in a new subdivision near [redacted] This is a fairly new area, lots of new homes and several undeveloped lots. [redacted] was in the Lewisburg EMS unit and [redacted] had been transported to the ER. Looks like they were riding on a paved street and run into a ditch [redacted] was dead on the scene. Both girls parents had gone to the hospital. Talked with [redacted] [redacted] mother, and she advised to call Corinthian Funeral Home, Corinth, MS to pick up [redacted] from Baptist Morgue. At this time, funeral arrangements unknown for [redacted] don't know who was driving.





Next of Kin [redacted]

Funeral Home: Twin Oaks, Southaven, MS

Notes on Interview with Father of Victim 1
November 19, 2008

UTV belongs to Victim 1's family
Purchased new
Only modification was adding a plastic roof on the top bar area
2006 Yamaha Rhino 660
Special edition – blue with chrome wheels and digital speedometer

Girls riding during daylight on level asphalt in subdivision
No helmets
Not sure about seat belts – seat belts were disengaged
Appears that right tire might have run off right edge of road (couple of inches drop)
Appears that driver might have overcorrected getting back on road, causing UTV to flip
Based on injuries, it looks like the UTV might have rolled over Victim 1
Victim 2 might have been ejected (more scratches and abrasions)
Not sure of speed of travel at time (probably 15-20 mph)

(b)(5)

1. Task Number		2. Investigator's ID	EPIDEMIOLOGIC INVESTIGATION REPORT
081028CCC3069		9105	
3. Office Code	**4. Date of Accident** YR MO DAY	**5. Date Initiated** YR MO DAY	
840	2007 04 14	2008 11 06	

6. Synopsis of Accident or Complaint **UPC**

The victim is a 20-year-old female who was driving an off-road utility vehicle at a sand dune recreation area with a passenger. The victim made a sharp turn, causing one of the front wheels to sink into the sand, and lost control of the vehicle. The victim was ejected from the vehicle and it rolled over and on top of her. She suffered fatal blunt force trauma injuries to her head. She was reported to have not been wearing a helmet nor using the vehicles safety restraints. The victim was airlifted to hospital and pronounced dead. The female passenger in this incident suffered broken bones, but survived.

MFR/PRVLBR NOTIFIED

COMMENTS: __YES ✓NO 5/18/09
__OVERRULED; __ATTACHED
✓EXCISIONS/FOIA EXS. 552.6
✓DO NOT RE-NOTIFY __RE-NOTIFY

7. Location (Home, School, etc)	8. City	9. State
5 - OTHER PUBLIC PROPERTY	BRAWLEY	CA

10A. First Product	10B. Trade/Brand Name	10C. Model Number
5044 - Utility Vehicles	YAMAHA	RHINO

10D. Manufacturer Name and Address
YAMAHA MOTOR CORPORATION, USA
6555 Katella Avenue
Cypress, CA 90630

11A. Second Product	11B. Trade/Brand Name	11C. Model Number
0	NONE	NONE

11D. Manufacturer Name and Address
NONE

12. Age of Victim	13. Sex	14. Disposition	15. Injury Diagnosis
20	2 - Female	8 - Death	54 - Crushing
16. Body Part(s) Involved	**17. Respondent**	**18. Type of Investigation**	**19. Time Spent (Operational / Travel)**
75 - HEAD	3 - 2nd Hand Info Only	2 - Telephone	8 / 0

20. Attachment(s)	21. Case Source	22. Sample Collection Number
2 - Documents	02 - City/County/State Health Dept.	

23. Permission to Disclose Name (Non NEISS Cases Only)

○ Yes ● No ○ Verbal ○ Yes for Manuf. Only

24. Review Date	25. Reviewed By	26. Regional Office Director
12/02/2008	9087	Frank J. Nava

27. Distribution	28. Source Document Number
Streeter, Robin	X08A0307A

081028CCC3069

This investigation was based on a State Health Departments notification of a fatal accident involving an off road utility vehicle. The information in this report was obtained from the responsible Medical Examiners Office. The Law Enforcement Agencies Report was not available.

The Medical Examiners Report indicated that Victim was a 20 year old female weighing 133 pounds and 66 inches in height. The Report indicated that Victim had no significant medical history and she was reported to not use alcohol, tobacco, or illegal substances.

The scene where this fatal accident occurred was only described as a sand dunes recreation area.

The Medical Examiners Report reflected that on the morning of 04/14/2007 Victim was driving the off road utility vehicle and lost control of it in the sand. The vehicle was reported to have rolled over and ejected Victim. It was further detailed that Victim was the driver of the off road utility vehicle and there was another female passenger in the vehicle with her. It was reported that Victim turned the vehicle sharply, causing one of the front wheels to sink into the sand. Victim was ejected and the utility vehicle rolled over on top of her. The Report indicated the passenger was treated at a local hospital for broken bones. Victim was airlifted to a hospital located in an adjacent state. Death was attributed to Blunt Force Head Injuries and pronounced at the hospital at 01:35 pm.

The Report stated that a Law Enforcement Officer was dispatched to the scene at 11:02 am and arrived at 11:22 am. The Report showed that Victims Husband said Victim was experienced in riding four wheel All Terrain Vehicles but had only learned to drive the off road utility vehicle the previous evening. The Medical Examiners Report further indicated Victim was not wearing a helmet nor using the vehicles safety restraints.

PRODUCT IDENTIFICATION

The Off Road Utility Vehicle involved in this incident was only described as a Yamaha two passenger Rhino Off Road Vehicle. It was reported to have side by side seating in the passenger compartment. No other information about the vehicle was in the Report.

081028CCC3069

ATTACHMENTS

1. Medical Examiners Report (11 pages)
2. Missing Documents Form (1 page)

081028CCC3069 page 1/11
Attachment #1

County of San Diego

GLENN N. WAGNER, D.O.
CHIEF MEDICAL EXAMINER

OFFICE OF THE MEDICAL EXAMINER
5555 OVERLAND AVE., SUITE 1441, SAN DIEGO, CALIFORNIA 92123-1245
TEL. (858) 694-2895 FAX (858) 495-5956

CHRISTINA STANLEY, M.D.
CHIEF DEPUTY MEDICAL EXAMINER

INVESTIGATIVE REPORT

4/27/2007

CALL INFO

NAME OF DECEASED (LAST, FIRST, MIDDLE)	AKA	HID	CASE NUMBER
b)(3) CPSA Section 25(c),(b)(6) [redacted]			

INVESTIGATOR	REPORTED BY	REPORTING AGENCY	PREVIOUS WAIVE #
b)(6) [redacted]		UCSD Medical Center	

CALL DATE AND TIME	ARRIVAL DATE AND TIME	RETURN DATE AND TIME
04/14/2007 1400	04/14/2007 1450	04/14/2007 1639

DECEDENT

DATE AND TIME OF DEATH	DATE OF BIRTH	AGE	GENDER	RACE
04/14/2007 1335	b)(3) CPSA Section 25(c), b)(6) [redacted]	20 Years	Female	White

RESIDENCE (STREET, CITY, STATE, ZIP)	COUNTY	LAST SEEN ALIVE
b)(3) CPSA Section 25(c),(b)(6) [redacted]		

SOCIAL SECURITY NO.	CITIZENSHIP	OCCUPATION	PAID AUTOPSY
b)(3) CPSA Section 25(c),(b)(6) [redacted]	USA	Waitress	

DEATH

LOCATION OF DEATH	TYPE OF PLACE
UCSD Medical Center	Other

ADDRESS (STREET, CITY, STATE, ZIP)
200 W. Arbor Drive San Diego, CA 92103

FND/PRN	BY	AGENCY
Pronounced	b)(6) [redacted]	UCSD Medical Center

SUMMARY
b)(3) CPSA Section 25(c),(b)(6) [redacted] a married 20 year-old White female, lived with her family in Wabash, Indiana. On the morning of 4/14/2007, the decedent was driving a Rhino off-road vehicle near Gordon's Wells in the Imperial Sand Dunes Recreation area. She lost control of the vehicle in the sand, it rolled over, and was ejected. She was airlifted to UCSD Medical Center. Despite life saving efforts by medical staff, the decedent was pronounced dead at 1335 hours by b)(6) [redacted]

Medical Examiner's jurisdiction invoked according to the California Government Code 27491: Deaths due to known or suspected as resulting in whole or in part from or related to accident or injury, either old or recent.

INCIDENT

LOCATION OF INCIDENT	INCIDENT PLACE TYPE	AT WORK	AT RESIDENCE
Desert area			

ADDRESS (STREET, CITY, STATE, ZIP)	COUNTY
Gordons Wells Desert Recreational Park Brawley, CA 92227	Imperial

DATE AND TIME OF INCIDENT	INVESTIGATING AGENCY	OFFICER	DADBC #	REPORT #
4/14/2007 Unk		b)(6) [redacted]		

DECEDENT WAS	BELTED	REMOVED	POSITION	ON PRIVATE PROPERTY
Driver	No	☐ Yes ☐ No	Driver	☐ Yes ☐ No

VEHICLE	LICENSE NUMBER	STATE
Rhino Off-Road Vehicle		

NOTIFICATION

IDENTIFIED BY	METHOD	DATE AND TIME
b)(6) [redacted]	Visual	04/14/2007 1315

FUNERAL HOME	PROPERTY	PUBLIC ADMINISTRATOR	TYPE OF EXAM
Azdan Funeraria	☐ Yes ☑ No	☐ Yes ☑ No	Autopsy

NAME OF NOK OR OTHER	RELATIONSHIP		DATE NOTIFIED	NOTIFIED BY
b)(6) [redacted]	Husband		4/14/2004	Family

San Diego Medical Examiner
5555 Overland Avenue, Ste 1411
San Diego, CA 92123
(858) 694-2895

Case Number b(6)
Investigator
Date of Death 04/14/2007
Date Today 05/02/2007

INVESTIGATIVE NARRATIVE

Decedent: b(3) CPSA Section 25(c),b(6)

Antemortem Events:
b(6) the decedent's friend, provided the following information on 04/14/2007 at approximately 1615 hours in a personal interview at UCSD Medical Center: On the morning of 04/14/2007, the decedent was the driver of a two passenger Rhino off-road recreational vehicle. Her cousin, b(6) was riding as a passenger. The decedent turned the Rhino sharply causing one of the front wheels to sink in the sand. The decedent was ejected from the Rhino. The Rhino overturned on top of the decedent. The decedent was airlifted to UCSD Medical Center b(6) was transported to a hospital in Yuma, Arizona via ambulance for treatment of broken bones.

Medical Examiner Investigator b(6) obtained the following information from Deputy b(6) b(6) of Bureau of Land Management in a telephonic interview on 04/16/2007 at approximately 1600 hours: b(6) was dispatched to accident at approximately 1102 hours on 04/14/2007. He arrived at the scene at approximately 1122 hours. When he arrived, the Rhino was upright. The decedent was out of the vehicle. He was unable to determine if the Rhino had rolled over on top of the decedent.

b(6) the decedent's husband, provided the following information on 04/14/2007: The decedent was not wearing a helmet nor was she wearing the Rhino's safety restraints. The Rhino's passenger compartment is side-by-side seating. She was experienced in operating quad all terrain vehicles, but had learned how to drive the Rhino the previous evening.

Past Medical History and Surgery:
b(6) the decedent's husband, provided the following information on 04/14/2007 at approximately 1615 hours in a personal interview: The decedent had no significant medical history and was not taking any medication. He denied that the decedent used tobacco products, alcohol, or illegal substances.

Medical Intervention and Hospitalization:
The following information was obtained on 4/14/2007 in review of the decedent's UCSD Medical Center medical records: The decedent was asystole at the scene. Cardiopulmonary resuscitation (CPR) was started. Mercy Air crew administered atropine, epinephrine, and dopamine. The decedent was intubated and transported to UCSD Medical Center. She arrived and was admitted at approximately 1315 hours. Blood was noted fluxing from her mouth. Her right ear was avulsed. She had a hematoma on the right side of her head. She had no movement. No deformities were noted in her extremities. She was in asystole and was pulseless. CPR was in progress. Medical staff transported the decedent to the trauma room and continued advanced cardiac life support measures. Bilateral chest tubes were placed. Despite their efforts, b(6) pronounced the decedent dead at 1335 hours.

Body and Scene Description:
The incident occurred in an area called Patton Valley. Patton Valley is part of the Imperial Sand Dunes Recreation area and is located in the southern portion of Glamis, near the U.S.-Mexican border. The GPS coordinates are N32°46'59" W114°56'43". I did not view the location.

The decedent was originally viewed in the UCSD Medical Center trauma room. She was transferred to UCSD Medical Center Intensive Care Unit Room 4 for further examination. She was covered head-to-toe in white

blankets and sheets. Upon removal of the items, she was nude. Cut clothes and a back board were underneath the decedent. Blood and sand covered the board. Evidence of medical intervention included an intravenous line in right arm, oximeter on right finger, EKG pads, blood pressure cuff on left arm, cervical collar, needle thoracentesis, endotracheal tube and tube tamer, and bilateral chest tubes. The tube tamer was noted to be off center.

The body was warm to the touch and flaccid. Some blanching lividity was noted on the posterior aspect. The scalp felt boggy. Abrasions and hematoma were noted on the head above the right temple. The top of the right ear was torn resulting in an open wound. Right periorbital ecchymosis was noted. Dark periorbital discoloration was noted on the left eye. Possible fractions were noted upon palpation of the chest. No deformities were noted in the extremities. Dried blood and apparent abrasions were noted on the left hand and elbow. Dried blood was on the left bicep underneath the pressure cuff. Blood was noted on the right anterior wrist. Abrasions and contusion were noted on the right shoulder. Contusions were on both legs. An apparent abrasion ran on the lateral left leg between the hip and knee. Apparent abrasions were noted on the right ankle and right hip. Blood was noted on the back.

HS&B Transportation personnel b(6) placed the body in a new white pouch with help from medical staff and myself. A blue ankle identification band with her name and case number was attached to her right ankle. The bag was secured with green tamper-evident seal 0104819 at approximately 1624 hours on 04/14/2007.

Special Requests:
None.

Identification:
Several family members and friends visually identified the decedent on 04/14/2007.

Tissue Donation:
Information was provided to Life Sharing.

Antemortem Blood:
According to UCSD medical staff, no Antemortem blood was available. They provided copies of laboratory tests on admitting samples.

Public Administrator:
No referral was made. The decedent and her family were visiting from out-of-state.

Other Important Factors:
None.

Signed: b(6)

Date Signed: 5/2/2007

Approved by: b(6)

County of San Diego

b)(6)
CHIEF MEDICAL EXAMINER

b)(6)
CHIEF DEPUTY MEDICAL EXAMINER

OFFICE OF THE MEDICAL EXAMINER
5555 OVERLAND AVE., SUITE 1411, SAN DIEGO, CALIFORNIA 92123-1245
TEL: (858) 694-2895 FAX: (858) 495-5956

AUTOPSY REPORT

Name:	b)(3) CPSA Section 25(c),b)(6)	**ME#:**	07-0840
Place of death:	UCSD Medical Center San Diego, CA 92103	**Age:**	20 Years
		Sex:	Female
Date of death:	April 14, 2007; 1335 Hours		
Date of autopsy:	April 15, 2007; 1015 Hours		

CAUSE OF DEATH: BLUNT FORCE HEAD INJURIES

MANNER OF DEATH: ACCIDENT

AUTOPSY SUMMARY:

I. Blunt force injuries (consistent with ATV accident).
   - A. Laceration of right ear and scalp.
   - B. Multiple scalp hemorrhages.
   - C. Extensive basal skull fractures.
   - D. Very small left subdural hemorrhage.
   - E. Thin subarachnoid hemorrhages.
   - F. Laceration of brain.
   - G. Multiple petechial hemorrhages of brain and brain stem.
   - H. Miscellaneous abrasions and contusions of skin.
   - I. General pallor of organ and tissues.

II. Medical therapeutic intervention (terminal).

b)(3) CPSA Section 25(c),(b)(6)

OPINION: According to the Investigative Report, this 20 year old woman was driving an ATV in sand dunes in Imperial County when she lost control and the vehicle rolled on top of her. She was unresponsive at the scene, transported to a hospital in Yuma and then to San Diego where she died shortly thereafter. Her medical history was unremarkable.

The autopsy findings were consistent with the history. In particular, she had devastating blunt force head injuries accounting for her rapid death. No alcohol or drugs of abuse were detected on postmortem toxicologic studies.

Based on the findings and the history and circumstances of the death as currently known, it is classified as an accident.

b)(6)

Date signed: 5/15/07

IDENTIFICATION: The body is identified by a Medical Examiner's band on the right ankle bearing the decedent's name and case number.

WITNESSES: There are no outside witnesses.

CLOTHING: The body is unclad when initially viewed. There is a separate bag of clothing not examined at this time.

EVIDENCE OF MEDICAL INTERVENTION: The mouth contains an endotracheal intubation tube at the 21.0 cm mark. There is a cervical support around the neck and an EKG pad is on the anterior left shoulder. There are small punctures in either side of the upper chest. Chest tubes on each side of the chest exit small incisions. A blood pressure cuff is around the left upper arm. Intravenous catheters are in the right antecubital fossa and dorsal right forearm. The right wrist contains a hospital identification band with the name [redacted] NMN. There are multiple needle punctures in the inguinal regions.

EXTERNAL DESCRIPTION

GENERAL: The body is that of a well developed, well nourished, nonembalmed Caucasian female appearing the listed age of 20 years, measuring 66 inches in length and weighing 133 pounds as received.

HEAD AND NECK: The head hair is mixed brown and blond measuring up to about 10 inches in length. It is gathered in the back by an elastic band. The sclerae are white with hemorrhage on the lateral right side. The irides are blue-gray, and the pupils are dilated. No petechiae are noted. The nose and ears are normally formed. The earlobes are pierced several times. The right ear is lacerated and partially absent. There is blood in the ear canals. The mouth shows the natural teeth to be intact. There is a superficial contusion of the gum on the lower right side. The neck is straight and symmetrical.

TORSO: The thorax and back are symmetrical. The abdomen is flat and soft. There is a piercing through the upper umbilicus. The pubic hair is shaved. The external genitalia and breasts are those of an adult female. There are no palpable masses.

EXTREMITIES: The extremities have no edema, deformities or amputations. The fingernails and toenails are trim and have polish. The fingernails are long and artificial.

BODY MARKINGS: No surgical scars, wrist scars, needle tracks marks or tattoos are noted.

POSTMORTEM CHANGES: Rigor mortis is well developed. Lividity is posterior, unfixed and very sparse.

EXTERNAL EVIDENCE OF INJURY

HEAD:
Through the right ear is an irregular curved horizontal 2 inch laceration. The upper part of the ear is fragmented and partially amputated. The laceration extends to the fascia and undermines anteriorly. There are surrounding dark red abrasions.

Extending from the right side of the forehead to behind the ear is a 7 by up to 2 inch band of dark pink-purple contusion. This is a linear pattern near the lower edge and at the medial end is a pattern of multiple tiny aligned dark red abrasions, which are about 1/16 inch in diameter and slightly greater than 1/16 inch apart.

There is blue-purple ecchymosis of the right lower eyelid.

Along and just below the left side of the jaw is a very faint 1-1/4 inch linear red-purple ecchymosis.

TORSO:
On the mid chest are a couple of dark tan abrasions measuring 3/8 inch in maximum dimension. These may be related to efforts of cardiopulmonary resuscitation.

On the lateral right lower hip are several irregular superficial red-orange abrasions that individually measure up to 1-1/2 inches in maximum dimension.

ARMS:
On the lateral right upper arm is a 3 x 2 inch irregular faint blue-purple contusion. At the upper edge of this is a transverse 1-1/8 x 1/8 inch abrasion.

On the dorsal left forearm is a faint 3/8 inch purple contusion.

LEGS:
On the lateral distal right thigh is an irregular, approximately 2-1/4 inch area of red-purple contusion. A small superficial abrasion is superimposed on this, and there is similar adjacent contusion.

On the anterolateral right lower leg is a faint 1-1/2 x 1 inch contusion.

On the medial left thigh is a faint diagonal 3 x 3/4 inch discontinuous contusion. A similar faint 2 x 3/4 inch contusion is on the anteromedial lower leg just below the knee. On the medial left lower calf is a rounded 2-1/4 x 1-1/2 inch dark purple contusion.

On the lateral left ankle extending to the foot is an ill-defined 3 x 2-1/2 inch blue-purple contusion. There is extension to the foot and a couple of small superimposed abrasions.

INTERNAL EXAMINATION

BODY CAVITIES: The right chest tube enters the lateral 7th intercostal space and the left the 6th. The tubes are loose within the pleural cavities. There is a minimal amount of bloody fluid on each side and no adhesions. The pericardial sac is intact, free of adhesions and contains a moderate amount of clear yellow-tan fluid. The diaphragm is intact. The peritoneal cavity contains a small amount of watery bloody fluid. The organs are in their normal anatomical positions and are very pale. The abdominal subcutaneous fat measures 2.0 cm in thickness. The thoracic and abdominal cavities have no evidence of significant recent trauma.

CARDIOVASCULAR SYSTEM: The heart weighs 280 grams and is not enlarged. The epicardium is smooth. There is no ventricular hypertrophy or dilatation. The right ventricular wall measures 0.3 cm in thickness, and the left, 1.2 cm. The ventricular septum is slightly thicker, but has no gross defects. The myocardium is pink-brown, firm and uniform. There is thin endocardial hemorrhage on the left ventricular side of the septum. There is also a small subendocardial hemorrhage of the right atrium adjacent to the tricuspid valve. The endocardium is smooth. The valves all have a normal caliber with pliable intact leaflets. There are no vegetations or calcifications.

The coronary arteries have a normal branching pattern and are all widely patent. The aorta and other major arteries are essentially free of atherosclerosis and have no aneurysms or thromboses.

RESPIRATORY SYSTEM: The right lung weighs 490 grams, and the left 390 grams. The lungs are partly expanded, and the pleural surfaces are smooth. The subpleural parenchyma is dark purple posteriorly and in the left lower lobe. The anterior edges are light pink. There is minimal anthracotic pigment. The bronchial tree and pulmonary arteries are unobstructed. The bronchi contain dark tan gastric-type material with similar staining of the mucosa. Sections through the lungs are variably pink to dark maroon and moist. There are no consolidations, tumors, abscesses or infarcts.

HEPATOBILIARY SYSTEM: The 1130 gram liver is not enlarged. The capsule is smooth and thin. The parenchyma is light brown, firm and uniform. There is no gross fibrosis, tumor or hemorrhage. The gallbladder is intact with a moderate amount of bile and no stones. The gallbladder wall is thin and uniform.

The pancreas has a normal size and shape. Sections are light tan, firm, uniform and have the usual lobular structure.

HEMOLYMPHATIC SYSTEM: The 200 gram spleen is not enlarged, but is lobated. There is a superficial 2.0 cm laceration on one side. The parenchyma is maroon, firm, moist and uniform.

No lymphadenopathy is noted. The thymus gland is very pale, but uniform and of expected size for the decedent's age. The intravascular blood is watery and sparse.

GASTROINTESTINAL SYSTEM: The esophagus is patent. The stomach contains about 60 ml of opaque dark green-brown liquid with a few tiny food particles. There are no pills or pill residue. The gastric mucosa is intact. The small and large intestines are patent and unremarkable to inspection and palpation. There is no evidence of gastrointestinal hemorrhage. The appendix is intact and normally located.

UROGENITAL SYSTEM: The kidneys weigh 120 grams each. The surfaces are smooth. The kidneys are pale and have a normal corticomedullary structure. Both kidneys have double ureters. There are no tumors or cysts. The pelves and ureters are not dilated or thickened.

The bladder contains about 150 ml of clear yellow-tan urine. The mucosa is smooth and intact. The bladder wall is not hypertrophied.

The uterus, tubes and ovaries are intact and have smooth serosal surfaces. The ovaries have small cysts, but are otherwise unremarkable. The myometrium is uniform. The endometrial cavity is mildly dilated, and the endometrium is red-tan and soft. The cervix is patent.

ENDOCRINE SYSTEM: The thyroid gland is not enlarged, and the lobes are symmetrical. The parenchyma is light tan, firm, glossy and uniform. The adrenals are small with thin uniform yellow-tan cortices. The medullae are gray without hemorrhage or tumor. The pituitary is grossly unremarkable.

MUSCULOSKELETAL SYSTEM: The musculoskeletal system is well developed. There is a slight kyphotic curvature of the upper spine. The ribs are not brittle. The only fractures are those of the skull described under the heading HEAD below. The skeletal muscle has a normal color.

NECK: The tongue, anterior neck muscles and adjacent soft tissues are free of hemorrhages or tumors. The hyoid bone, thyroid, cricoid and tracheal cartilages are intact and free of fracture. The larynx and trachea are patent and have a smooth moist intact mucosa. There is no evidence of airway obstruction. The endotracheal tube is in its proper place. The cervical vertebrae have no hypermobility or crepitance.

HEAD: There is diffuse scalp hemorrhage on the lateral right side involving the temporal and frontal regions, which measures up to 10.0 cm in width. There is a large hemorrhage in the right temporalis muscle. There is a 9.0 x 7.0 cm scalp hemorrhage in the posterior left parietal region, which is primarily subgaleal. There is similar hemorrhage on the lateral right side behind the ear. There are smaller hemorrhages in the upper left frontal

scalp. The skull has a basal hinge-type fracture that courses through the posterior portions of both middle fossae and the dorsum sella. A branch of the fracture extends anterior to the sella turcica. There is small fracture of the lateral left orbital roof. There are fractures through the lateral portions of the temporal bones on both sides and a fracture through the right sphenoid bone. There is no epidural hemorrhage. There is a small diffuse left-sided subdural hemorrhage coating the brain, which has no significant thickness or volume.

CENTRAL NERVOUS SYSTEM: The unfixed brain weighs 1260 grams. There is mild flattening of the gyri without apparent herniation. There appears to be a normal gyral pattern. There is thin diffuse subarachnoid hemorrhage of the hemispheres, which is greater on the left. There is also thin diffuse subarachnoid hemorrhage over the brain stem and cerebellum. The leptomeninges are otherwise thin and clear. The cerebral arteries are free of atherosclerosis.

Sections through the cerebral hemispheres show a uniform cortical ribbon. There is a laceration through the right basal ganglia extending into the left side to this just above the optic nerves. There are adjacent small, mostly petechial hemorrhages. There are similar small hemorrhages in the medial temporal lobes. There are a few other petechial-like hemorrhages scattered throughout the white matter. The ventricles are not enlarged, but contain blood throughout. No tumors, abscesses or infarcts are noted. There are numerous small hemorrhages within the mid brain and pons. The anterior portion of the basis pontis is softened and discolored. Sections through the cerebellum reveal a few petechial hemorrhages.

SPECIMENS

TOXICOLOGY: Samples of central blood, a small amount of peripheral blood, bloody abdominal fluid, urine and vitreous are saved.

HISTOLOGY: Representative sections of organs and tissues are retained. No sections are submitted for microscopic examination at the time of autopsy.

PHOTOGRAPHS: Multiple external body photographs are taken. Photographs are also taken of the skull.

X-RAYS: None.

b(6)

D: 4/15/07 T: 4/17/07
Rev. 5/15/07 b(6)

County of San Diego

b(6)
CHIEF MEDICAL EXAMINER

b(6)
CHIEF DEPUTY MEDICAL EXAMINER

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TEL: (858) 694-2895 FAX: (858) 496-5966

TOXICOLOGY REPORT

Name: b(3) CPSA Section 25(c),(b)(6)

Medical Examiner Number:

Date of Death: 04/14/2007

Pathologist: b(6) SH

Specimens Received: **Abdominal Blood, Central Blood, Peripheral Blood, Urine, Vitreous**

Test Name (Method of Analysis)	Specimen Tested	Result
Alcohol Analysis (GC)	Peripheral Blood	
Alcohol (Ethanol)		Not Detected
Acetone, Methanol, Isopropanol		Not Detected
Drugs of Abuse Screen (ELISA)	Central Blood	
Cocaine metabolites		Not Detected
Opiates		Not Detected
Amphetamines		Not Detected
Benzodiazepines		Not Detected
Fentanyl		Not Detected
Cannabinoids		Not Detected

End Results

Approved and Signed:
04/23/2006

b(6)
(All Inquiries/Correspondence)

Reviewed b(6)
Toxicologist III

Task Number: 081028CCC3069
Attachment #: 2
Date: 12/02/2008

Status of Missing Document(s)

The official records below were requested for this investigation report but could not be obtained.

1. California Highway Patrol, 2331 Highway 86, Imperial, CA 92251

2. _____

3. _____

4. _____

5. _____

DATE: 12/02/2008 **INVESTIGATOR NO:** (b)(6)

REGIONAL OFFICE:_____ **SUPERVISOR NO:**_____

081028CCC3069

REPORT IDENTIFIERS

Victim- (b)(3):CPSA Section 25(c),(b)(6)

Medical Examiners Office- 5556 Overland Ave., Suite 1411, San Diego, CA 92123

Law Enforcement Agency- California Highway Patrol, 2331 Highway 86, Imperial, CA 92251

(b)(5)

1. Task Number	2. Investigator's ID	EPIDEMIOLOGIC INVESTIGATION REPORT
081028CCC3070	8232	

3. Office Code	4. Date of Accident YR MO DAY	5. Date Initiated YR MO DAY
840	2008 04 24	2008 10 29

6. Synopsis of Accident or Complaint **UPC** unknown

A 37 year old male victim and a 51 year old male victim died from multiple traumatic injuries when their four-wheeled, off-road utility vehicle overturned and rolled down a 45 degree slope in a remote mountain area. The victims were attempting to drive across the steep slope when the vehicle overturned and tumbled downhill approximately 200 or 250 yards before coming to rest against a tree. The victims did not appear to be wearing helmets. Alcohol and drugs were not involved. Both victims died at the scene.

MFR/PRVLBR NOTIFIED

COMMENTS: __YES ✓NO
__OVERRULED; __ATTACHED
✓EXCISIONS/FOIA EXS. 2Sec. 6
✓DO NOT RE-NOTIFY __RE-NOTIFY
6/15/09

7. Location (Home, School, etc)	8. City	9. State
9 - SPORTS OR RECREATION PLACE	JACKSONVILLE	OR

10A. First Product	10B. Trade/Brand Name	10C. Model Number
5044 - Utility Vehicles	POLARIS	RANGER RAZOR

10D. Manufacturer Name and Address
POLARIS INDUSTRIES INC.
1225 Highway 169 North
Minneapolis, MN 55441

11A. Second Product	11B. Trade/Brand Name	11C. Model Number
0	NONE	NONE

11D. Manufacturer Name and Address
NONE

12. Age of Victim	13. Sex	14. Disposition	15. Injury Diagnosis
37	1 - Male	8 - Death	54 - Crushing

16. Body Part(s) Involved	17. Respondent	18. Type of Investigation	19. Time Spent (Operational / Travel)
85 - ALL OF BODY	3 - 2nd Hand Info Only	2 - Telephone	19 / 0

20. Attachment(s)	21. Case Source	22. Sample Collection Number
9 - Multiple Attachments	05 - Newspaper	

23. Permission to Disclose Name (Non NEISS Cases Only)

○ Yes ● No ○ Verbal ○ Yes for Manuf. Only

24. Review Date	25. Reviewed By	26. Regional Office Director
12/15/2008	9021	Frank J. Nava

27. Distribution	28. Source Document Number
Topka, Tanya	N0840459A

Information was obtained from the Medical Examiner's Report and the Sheriff's report.

Narrative

This investigation was initiated by Compliance staff in response to a news report regarding two off duty fire fighters who were killed when their utility vehicle overturned and rolled down a steep slope in a remote mountain forest.

The driver of the vehicle was a 37 year old male who worked as a professional fire fighter in a fire department that serves a city with a population of approximately 76,000 people. The victim was 71 inches tall and weighed 200 pounds. No physical impairments or existing medical conditions were listed as contributing factors. No alcohol was detected in the victim's blood. Drugs were not mentioned as contributing factors.

The passenger was a 51 year old male who was a professional fire fighter working at the same fire department as the driver of the vehicle. The passenger was 68 inches tall and weighed 190 pounds. No physical impairments or existing medical conditions were listed as contributing factors. No alcohol was detected in the victim's blood. Drugs were not mentioned as contributing factors.

The driver and passenger were wearing jeans and sweatshirts at the time of the event. The passenger was wearing boots when found. The driver's foot wear was not listed in the official reports. Helmets were not listed as part of the clothing worn by the victims. There was no mention of the recovery of helmets the scene of the event. The driver's past experience driving the vehicle was not documented in the official reports.

The driver and passenger were riding in a four-wheel off road utility vehicle at the time of the event. The vehicle was equipped with two side by side seats, steering wheel, roll cage and rear cargo bed. The vehicle was equipped with lap belts and shoulder restraints. The manufacturer's Internet web site states that similar vehicles are powered by a 760cc gasoline engine.

The age and history of the incident vehicle was not documented in the official reports. The ownership and source of the vehicle were not listed. Aftermarket modifications were not listed as contributing factors in the official reports.

The driver and passenger were riding the vehicle in a mountain forest. The area has steep terrain that is covered by a combination of grass, brush and trees. They were riding off road on a steep slope when the event occurred. The angle of the slope was not documented by the investigating officials. A topographic map of the area shows mountains with peak elevations ranging from approximately 2700 to over 2800 feet high and slopes of approximately 45 to 50 degrees. The elevation of the access road was approximately 2200 feet at the address listed by the investigating officials as a reference point for the location of the event. Images of the topographic map and satellite photographs are attached to this report as an exhibit.

The event occurred on April 24, 2008. The exact time of the event is unknown. According to National Weather Service archive data, the daily high temperature was 50 degrees and the low was 24 degrees. The day was clear with 1.6 mile per hour wind and no precipitation. There was .13 inches of rain on the day before the event and a total of .24 inches of precipitation during the seven consecutive days before the event.

The victim's transported the off road vehicle with a truck into the mountains. They parked the truck and unloaded the vehicle on a forest access road at a location with an elevation of approximately 2200 feet. They proceeded to drive the vehicle off of the road in that area. The victims were alone at the time of the event. The activities and amount of time that transpired before the event occurred were not determined by the investigating officials. The event was not witnessed.

The Sheriff's investigator concluded that the driver drove the vehicle up a steep slope, turned to the right and attempted to drive across face of the slope. The vehicle speed at the time of the event was not determined by the investigating officials. While crossing the face of the slope the vehicle overturned and rolled down the slope a distance of 200 to 250 yards. The vehicle overturned multiple times while rolling down the slope. The driver and passenger remained restrained in the vehicle as it tumbled down the hill. The vehicle came to rest against a tree with the passenger side of the vehicle on the ground and the bottom of the vehicle resting against the tree.

The driver and passenger did not return home at the expected time on the day of the event. The families contacted the Sheriff's office and filed a missing persons report. Search parties failed to locate the victims during the evening. A helicopter spotted the vehicle at approximately 9:00 am on the following day. Ground searchers found the driver and passenger deceased, still belted inside the vehicle.

The local Medical Examiner conducted an external examination of the victim's bodies. There was no autopsy. The Medical Examiner noted that both victims sustained head lacerations and fractured skulls. The driver appeared to have sustained a fractured neck according to the report. Both victims sustained multiple injuries over the rest of their bodies. The cause of death was listed as "Multiple Blunt Injuries".

Copies of the Sheriff's report and the Medical Examiner's reports are attached to this report as an exhibit. The Sheriff's Deputy did not respond to requests for additional information.

Product Identification

Brand: **Polaris**

Manufacturer: **Polaris Industries Inc.**
2100 HWY 55
Medina, MN 55340

Model: **Razor OHV**

The brand and model were obtained from the Sheriff's report. The manufacturer's name and address were obtained from the Internet. The Sheriff's report listed the vehicle color as "red". The Sheriff's report did not list the Vehicle Identification Number, model year or other specific identification information.

The vehicle is a four-wheel off road utility vehicle. The vehicle was equipped with two side by side seats, steering wheel, roll cage and a rear cargo bed. The vehicle was equipped with lap belts and shoulder restraints. The manufacturer's Internet web site states that similar vehicles are powered by a 760cc gasoline engine.

The model year of the incident vehicle was not documented by the investigating officials. According to information posted on the manufacturer's Internet web site, the incident vehicle model appears to have been introduced in **2008** as a variation on the firm's existing **Ranger** utility vehicle. A copy of the manufacturer's brochure is attached to this report as an exhibit.

Attachments

Exhibit # 1A: Medical Examiner's Report-Driver (5 pages) **For Official Use Only**

Exhibit # 1B: Medical Examiner's Report-Passenger (6 pages) **For Official Use Only**

Exhibit # 2: Sheriff's Report (5 pages) **For Official Use Only**

Exhibit # 3: Topographic Map (1 page)

Exhibit # 4: Satellite Photos (2 pages)

Exhibit # 5: Brochure (12 pages)

(b)(7)(D)

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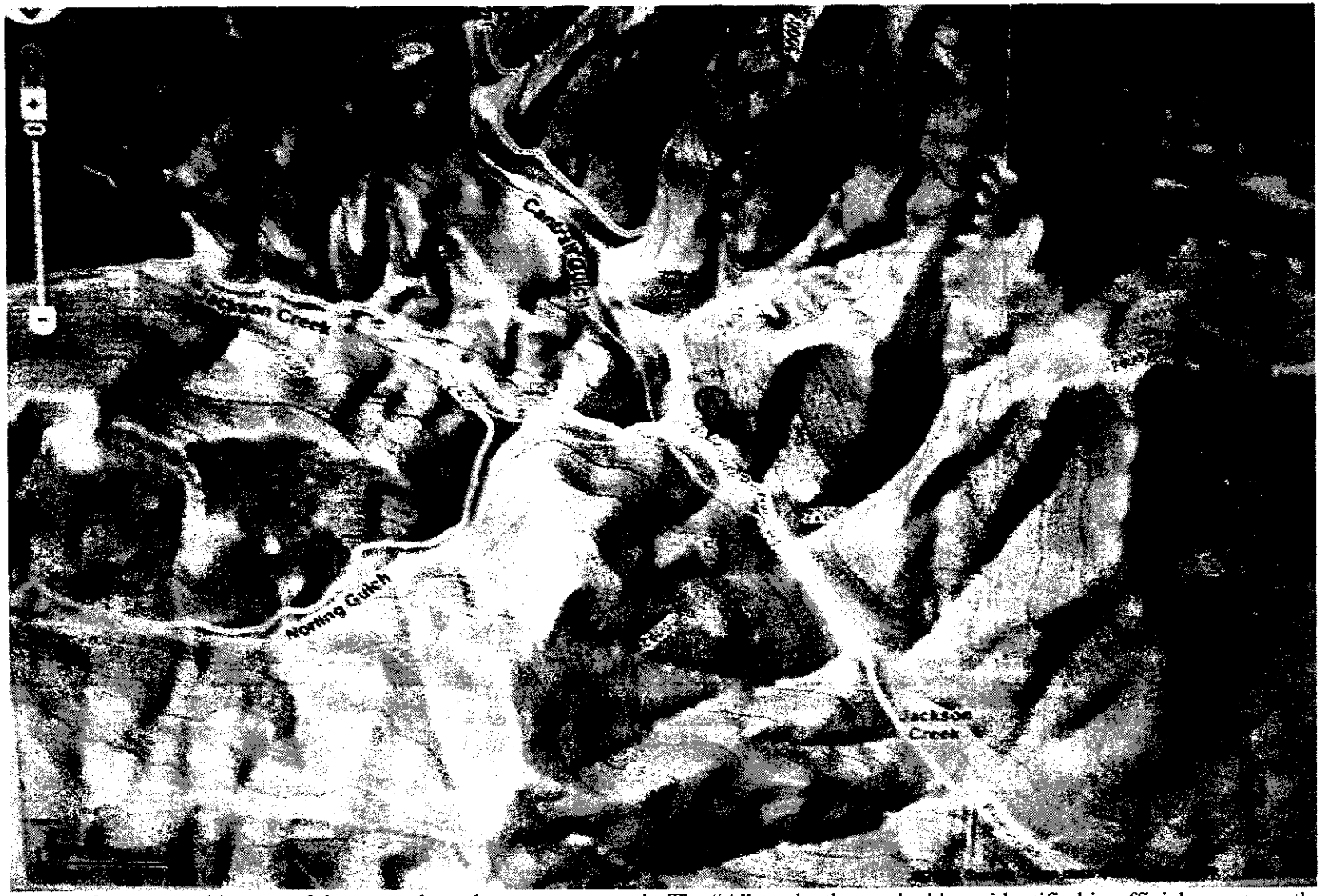


Image of a topographic map of the area where the event occurred. The "A" marks the road address identified in official reports as the address near the site of the event.

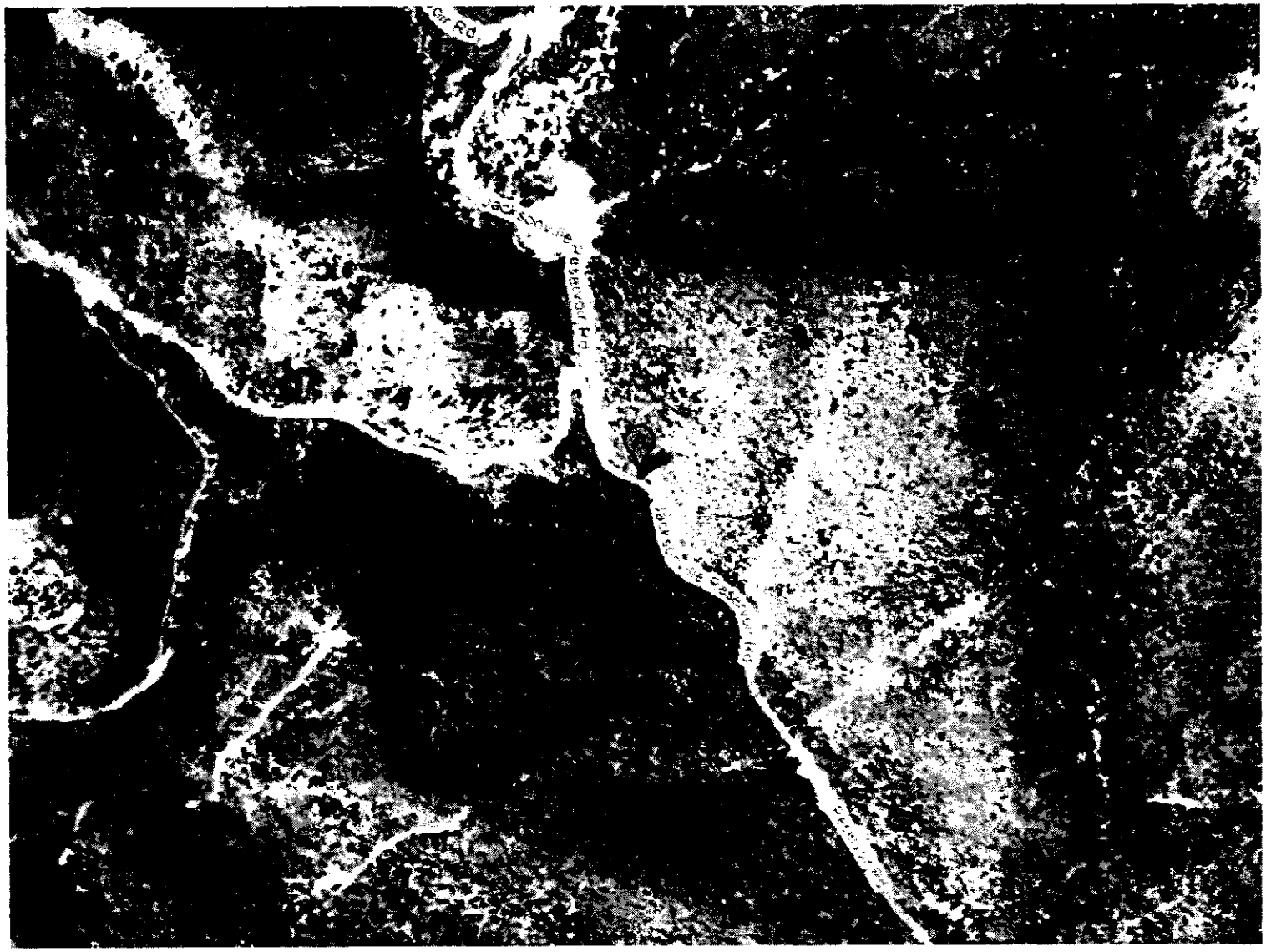
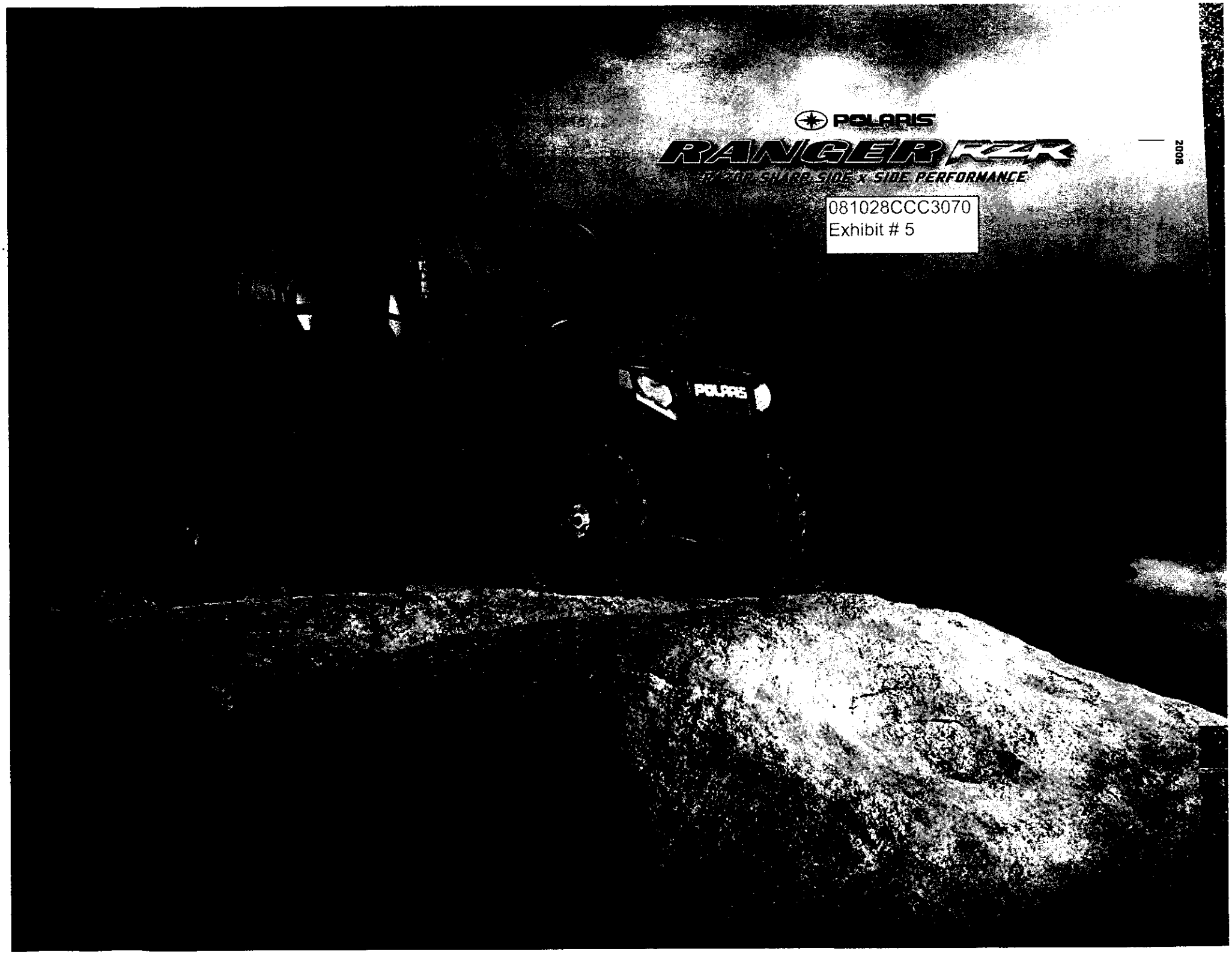


Photo # 1: Copy of a satellite photo showing an overall view of the area where the event occurred.

Photo # 2: Copy of a satellite photo showing a closer view of the area where the event occurred.



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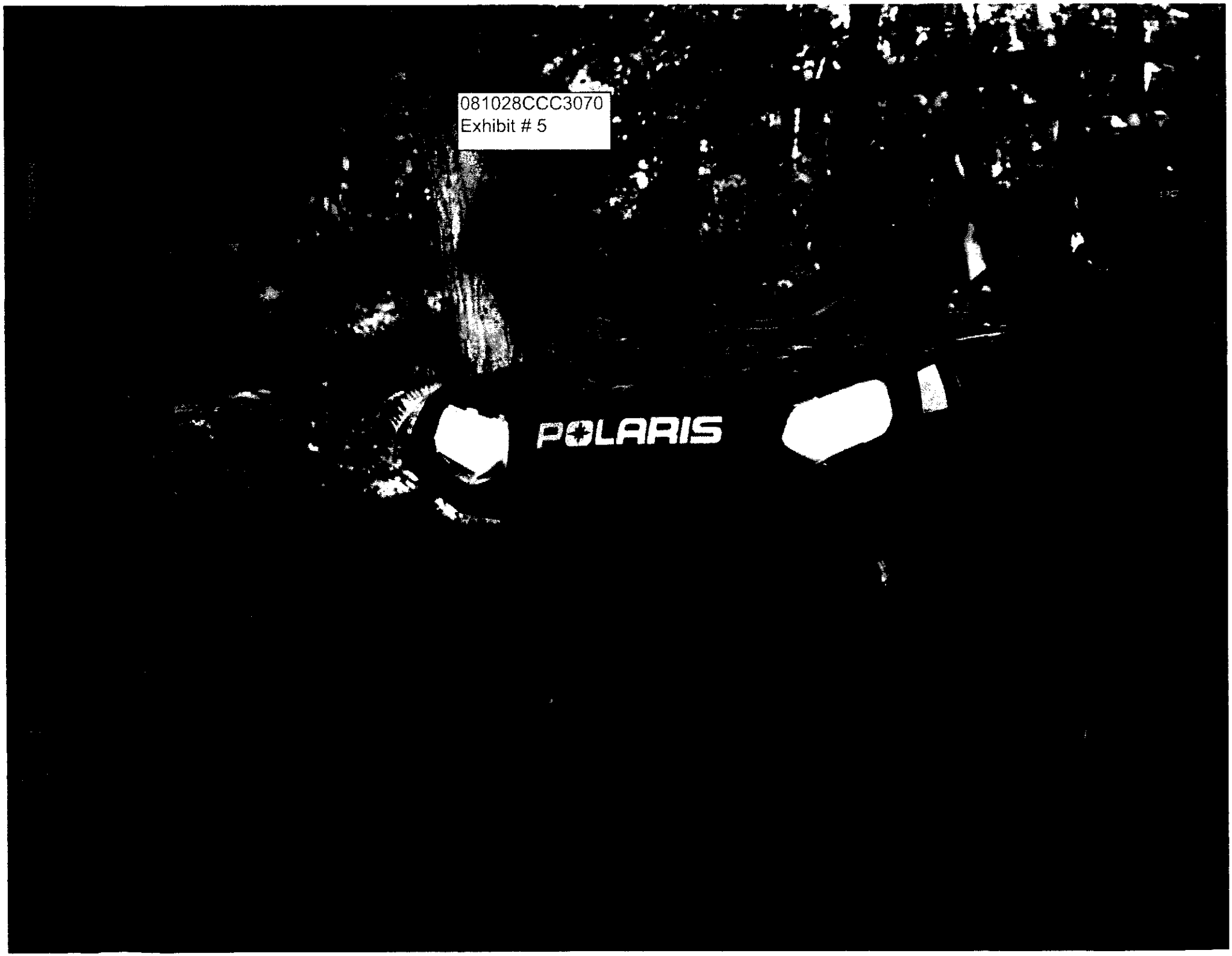

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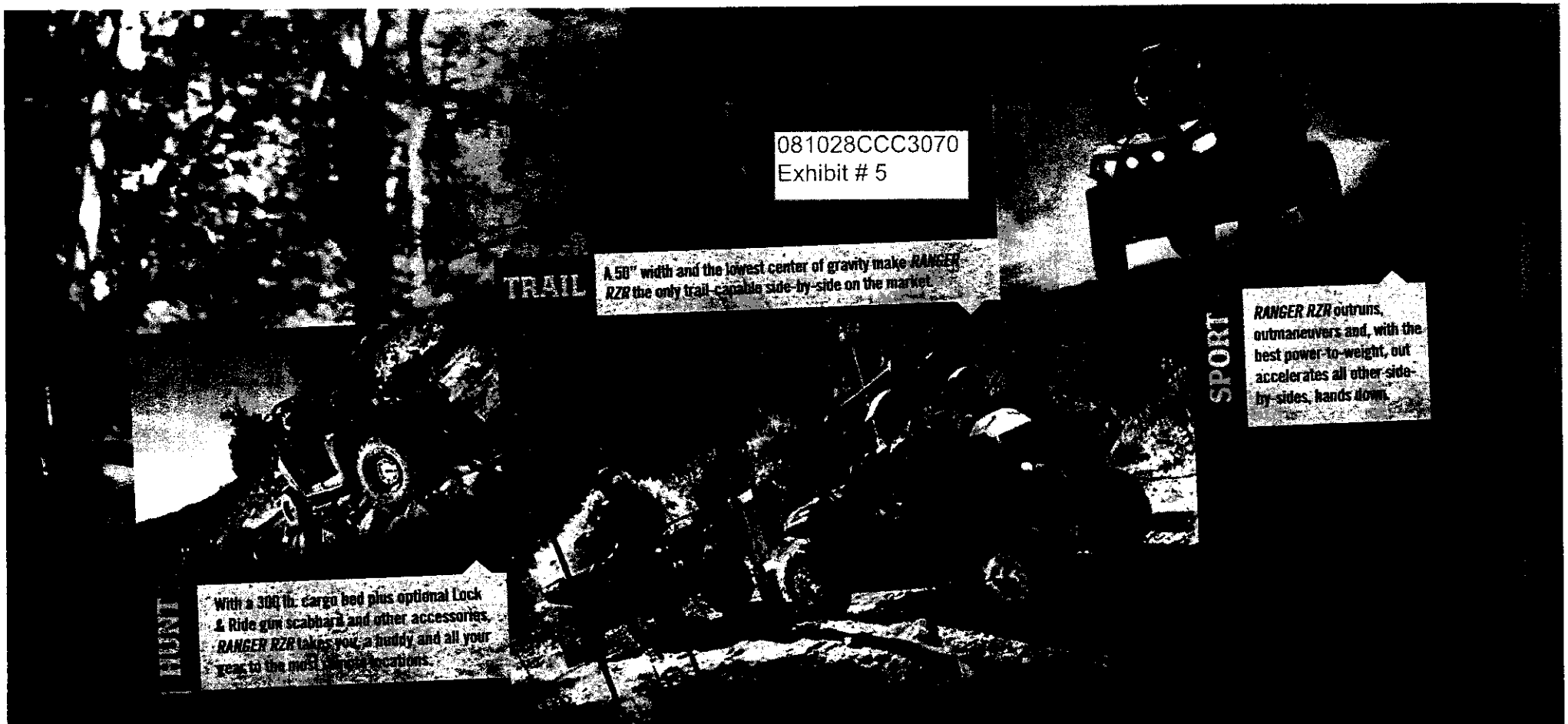

INTRODUCING RANGER RZR.

The all-new *RANGER RZR* is the only side-by-side that delivers performance – razor-sharp performance. *RANGER RZR* is the most trail-capable side-by-side you can buy. With the most responsive handling, the fastest acceleration, the highest top speed and, for all you hard-working off-roaders, plenty of utility. Simply put, *RANGER RZR* is in a class by itself. No other side-by-side can touch it. Not on the trail, the hunt or the open country. Sit down, strap in and attack the off-road. *RANGER RZR* is a power trip for two, and quickly leaves all other side-by-sides choking in its dust.

RANGER RZR

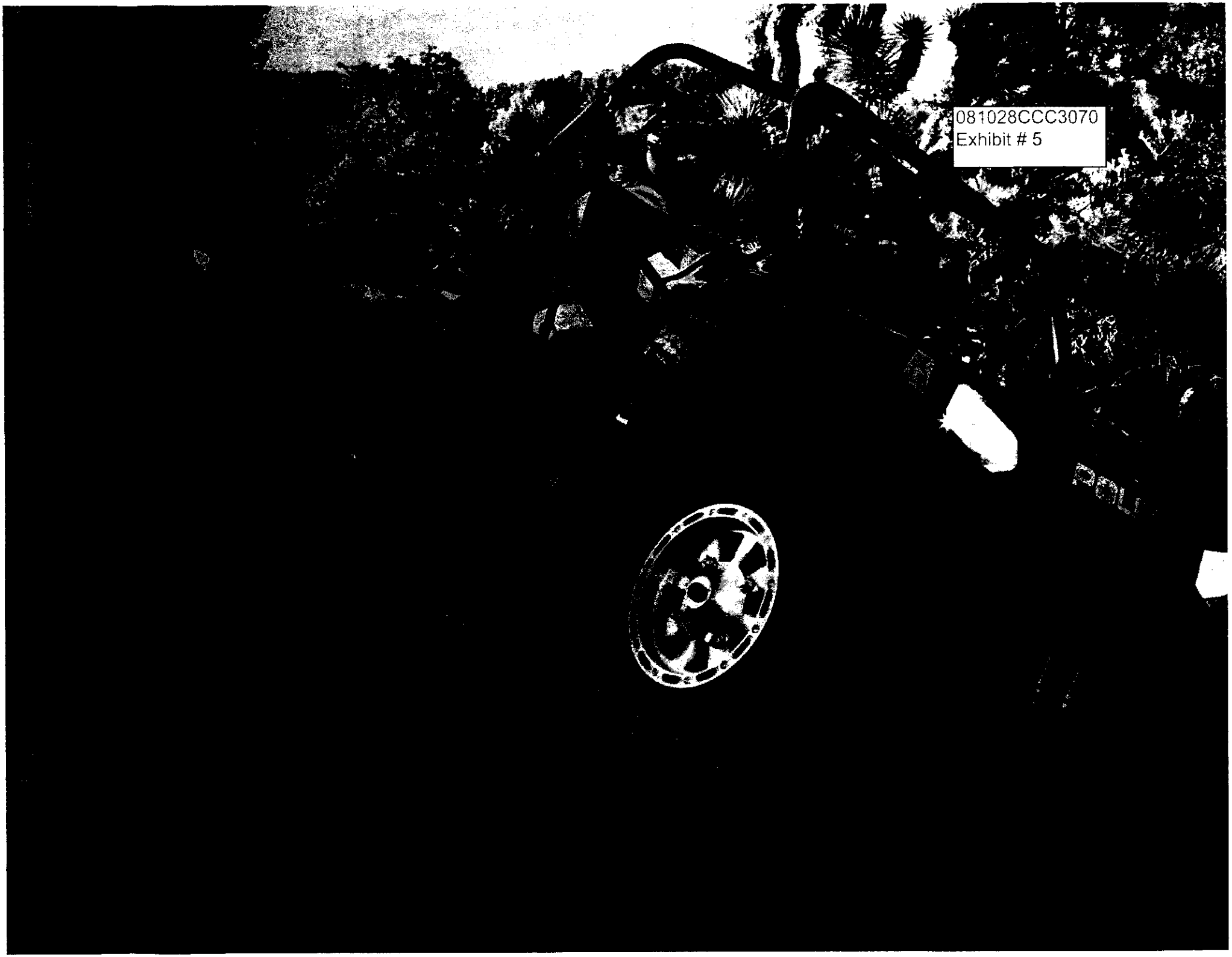

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Exhibit # 5

RANGER RZR Shown with additional **PURE** Polaris Accessories: 12" Aluminum Rims, Warn 3,000 LB Winch.

081028CCC3070
Exhibit # 5

GOES ANYWHERE AN ATV CAN,

If you want the world's toughest ATV, throw your leg over a Polaris Sportsman®. If you want the hardest-working utility vehicle, climb in a *RANGER* XP®. And if you want a razor-sharp trail performance side-by-side, jump in the all-new *RANGER RZR*. It has the lowest center-of-gravity, thanks to its patented & exclusive engine-behind-the-seat design. Combine that with its 50" trail-accessible width and *RANGER RZR* takes you anywhere an ATV can go. And everywhere other side-by-sides can't. You'll be maneuvering through the tightest places. Cornering with confidence. Climbing boulders. And pouring on the power at every opportunity. The dual A-arm, long-travel front suspension with exclusive anti-sway bar corners smooth and flat, while the rolled independent rear suspension soaks up the bumps. *RANGER RZR* is the boldest, the fastest and totally trail-capable.

TRAIL-CAPABLE 50" WIDTH

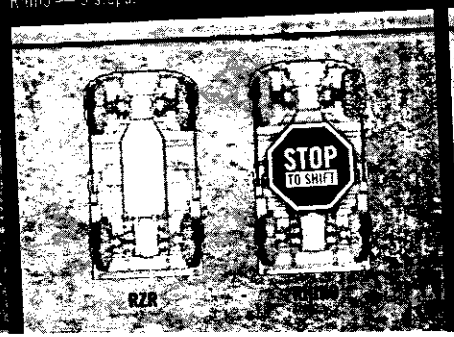
The *RANGER RZR* is the only trail-capable side-by-side. It's just 2" wider than a common ATV and almost 5" narrower than a Rhino, so it keeps going when the trails get tight.

LOWEST CENTER-OF-GRAVITY

Seat height is 7" lower than a Rhino, thanks to a patented design that positions the engine behind the seat. The result is a low center-of-gravity and razor-sharp handling and performance.

ON-DEMAND ALL-WHEEL-DRIVE

The *RANGER RZR* features On-Demand AWD. When you need more traction, you've got it. Shifting from 2WD to 4WD with the front diff. locked is a one-step, on-the-fly process. Rhino — 5 steps.



FRONT SUSPENSION TRAVEL

The *RANGER RZR* has 9" of travel. That's 235% more than the Yamaha Rhino. Whether you're creeping over boulders or racing down washouts, you get nimble handling and less feedback.

081028CCC3070
Exhibit # 5

BUILT FOR THOSE WHO

Nothing hunts like a *RANGER*™. And the *RANGER RZR* is a whole new animal in side-by-sides. It combines the traction of a mountain goat with the speed and agility of a whitetail. Its compact size and razor-sharp handling are perfect for maneuvering down tight wooded trails. Its true all-wheel traction and boulder-clearing ground clearance are ideal for taking you and your hunting buddy to the most remote locations. And its payload and towing capacity are ready, willing and able to haul out that four-legged wall hanger.

RANGER RZR Shown with additional PURE Polaris Accessories: Lock & Ride™ Accessory Rack, Lock & Ride Gun Scabbard Mount, Mossy Oak® Gun Scabbards, Lock & Ride Fuel Can Mounts

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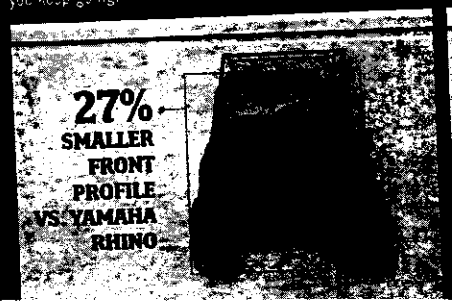
Exhibit # 5

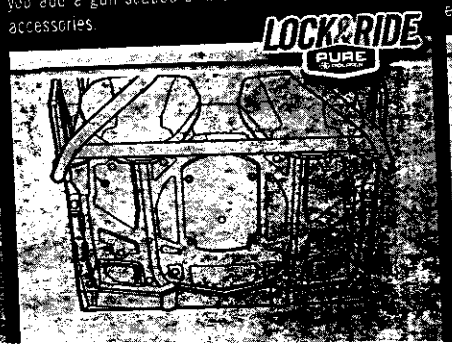
SMALLEST FRONT PROFILE

The *RANGER RZR* has a sleek, low cage profile. In fact, at its tallest point it's about the height of a rider on an ATV. So while low-hanging branches stop other side-by-sides, you keep going.



LOCK & RIDE STEEL BED

The rugged composite box won't dent or rust like the Rhino's steel box. The exclusive Lock & Ride™ system lets you add a gun scabbard in seconds, or quickly change accessories.



REAR SUSPENSION TRAVEL

Comfort is measured in back. The *RANGER RZR* has 9.5" of rear independent suspension travel. That's over 2" more than the Rhino's design, for a smoother ride everywhere you hunt.

ROLLED IRS

The *RANGER RZR* features "rolled" independent rear suspension, a Polaris exclusive. Its recessional wheel travel plus 10" of ground clearance create a smooth, comfortable ride.

RANGER RZR Shown with additional PURE Polaris Accessories: Bounty Hunter Tires, 14" Bruiser 4-Spoke Rims, Rock Slider, Nerf Bars, Pre-Runner Front Bumper, Rally Lights, Lock & Ride Accessory Rack, Spare Tire Holder, Lock & Ride Fuel Can Mount, Pre-Runner Rear Bumper

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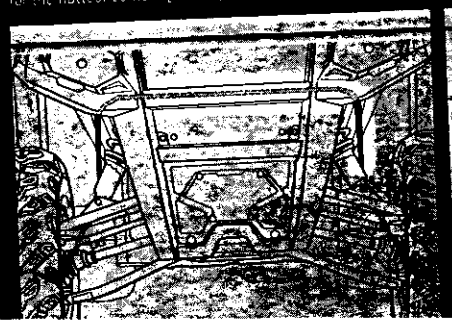
Exhibit # 5

800 CC's OF TOTAL

Dump all the money you want into a tricked-out competitive side-by-side and it still won't outrun, outmaneuver or outride the *RANGER RZR*. Anyway you look at it, the razor-sharp performance of the *RANGER RZR* devours the entire class. Fact check! *RANGER RZR* has 30% more HP and is 100 lbs. lighter than Rhino, giving it an amazing 44% higher HP-to-weight ratio. It also accelerates quicker and is 15 MPH faster at the top end. *RANGER RZR* has 30% more rear suspension travel than Rhino, plus a front anti-sway bar for flatter, more responsive handling. Add to that list lighter steering, a lower center-of-gravity and lower seat height and cage height. And did we mention *RANGER RZR* has EFI, tilt steering, adjustable seats and an adjustable passenger grab bar? No doubt about it— total side-by-side domination.

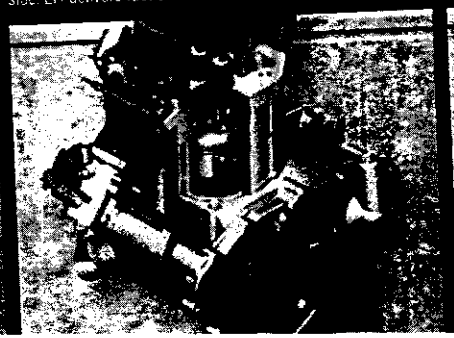
FRONT ANTI-SWAY BAR

The *RANGER RZR*'s front suspension is the only dual A-arm in the industry with a front anti-sway bar, stabilizing the chassis for the flattest cornering and by far the best handling.



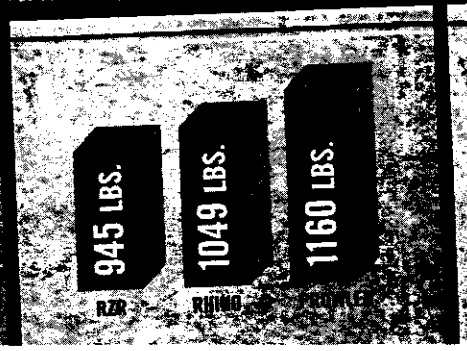
800 TWIN EFI ENGINE

The proven Polaris 800 Twin EFI engine pumps out 30% more HP than a Rhino, with the best power curve of any side-by-side. EFI delivers fast starts and consistent performance.



MORE THAN 100 LBS. LIGHTER

The *RANGER RZR* has the absolute best power-to-weight ratio in its class. In fact, compared to the Yamaha Rhino, it has 30% more power and 10% less weight.



FASTEST ACCELERATION

The *RANGER RZR* has the quickest acceleration of any side-by-side. It reaches 35 MPH 25% faster than the Yamaha Rhino, and uses its 55 MPH top speed to make the entire class eat dust.

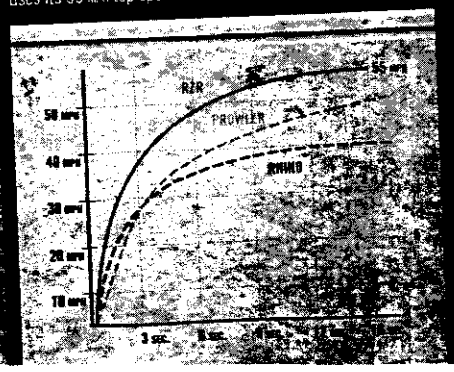


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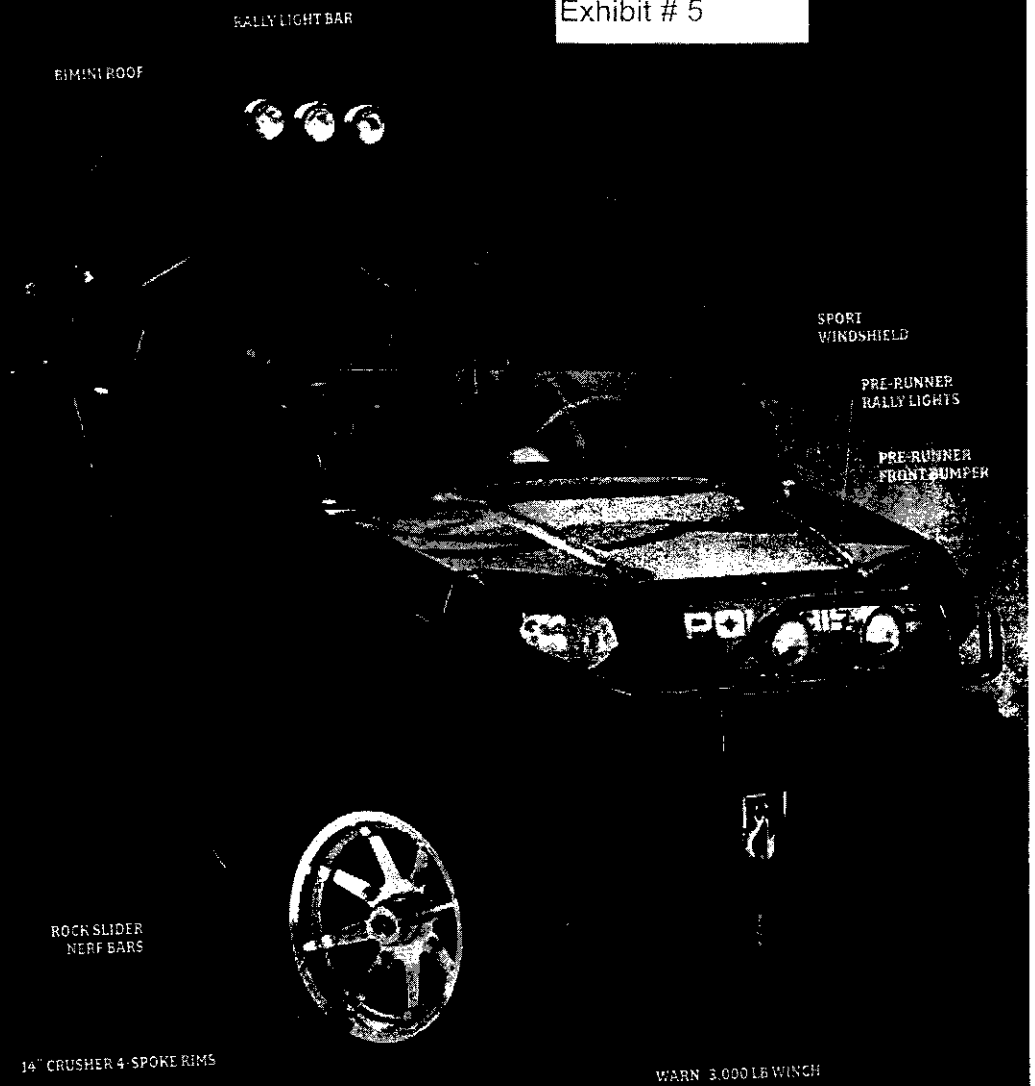
Exhibit # 5

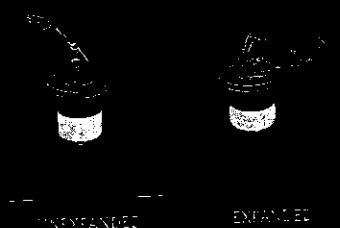
EVERYTHING TO SHARPEN YOUR *RANGER RZR.*

Heads turn. Eyebrows raise. Ears perk. Nothing looks sharper than a customized *RANGER RZR*. Whether you're headed for the trails or dunes, mud or deer stand, we've got you covered with cutting-edge, Polaris-designed accessories.



LOCK & RIDE™ CARGO SYSTEM

Put away the tools. Thanks to Expansion Anchor Technology from Polaris, accessories are on or off in seconds. Add a gun scabbard and mount for the morning hunt, then quickly and easily switch to the accessory rack and fuel can mount to attack the trails or the chore list. And only Polaris guarantees a perfect fit on every *RANGER RZR* accessory we sell.



EXPANSION ANCHOR TECHNOLOGY

With rubber expansion chambers your Lock & Ride accessories lock into position and stay there.

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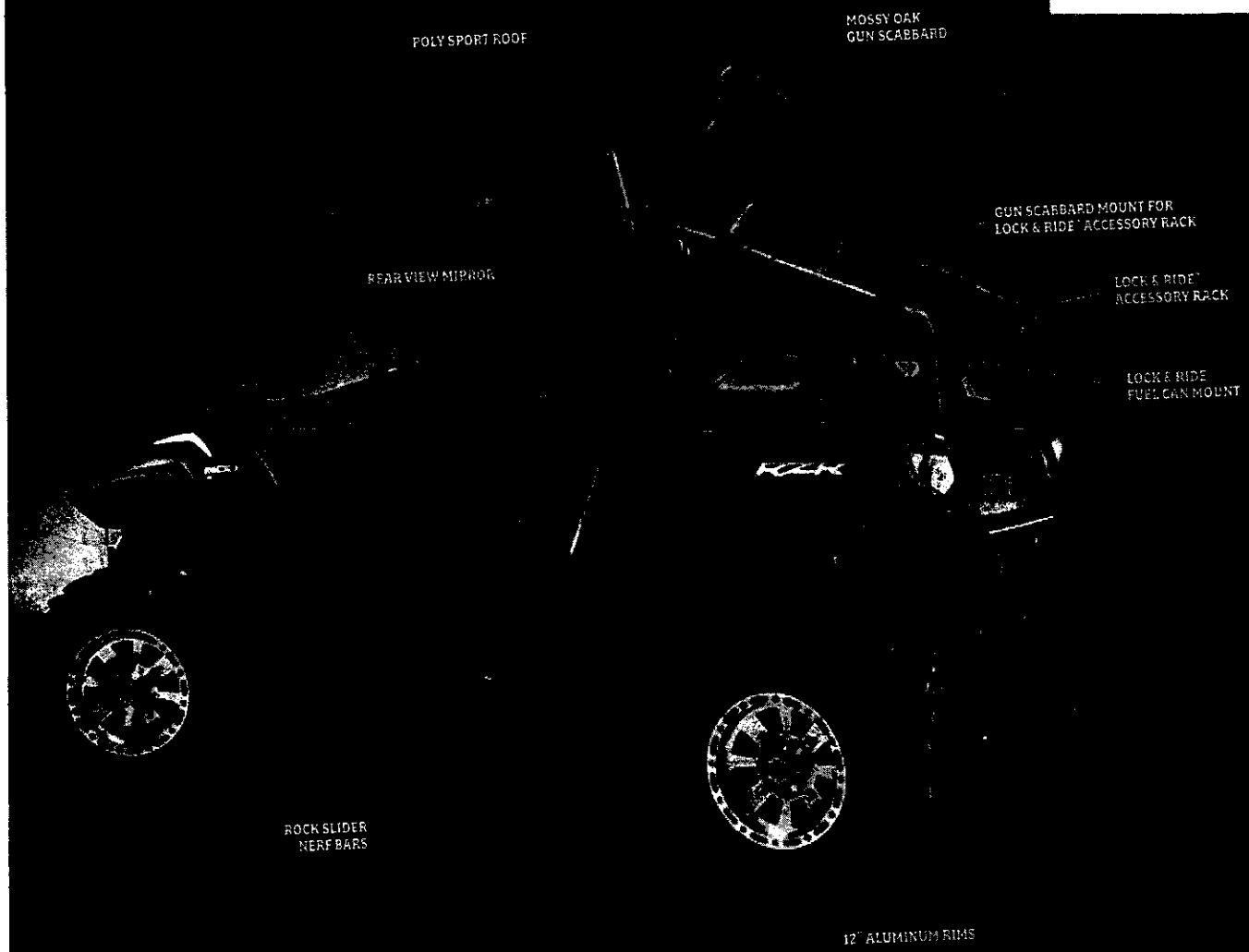


POLY SPORT ROOF

PRE-RUNNER REAR BUMPER

SPARE TIRE HOLDER

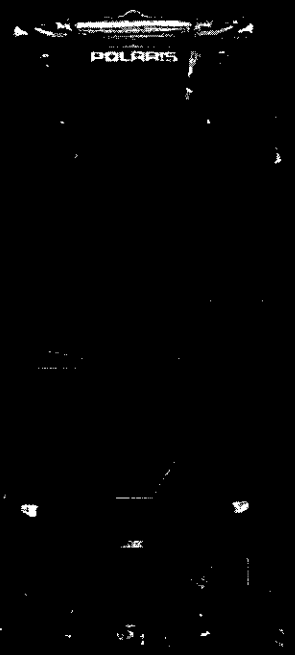
FULL POLYCARBONATE WINDSHIELD

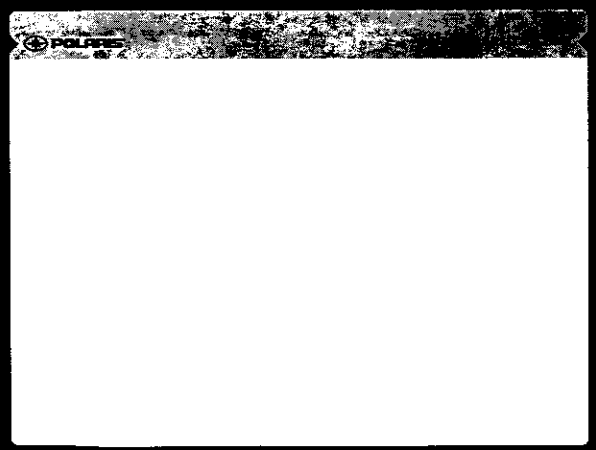
MEET OUR DEVELOPMENT PARTNERS

Polaris is partnering with leading companies in hunting, camo, performance products and aftermarket accessories. Watch their web sites and polarisindustries.com for new and exciting additions to the *RANGER RZR* accessory lineup.

081028CCC3070
Exhibit # 5

Displacement / HP	
Cooling	
Engine Type	
Lubrication	
Oil Capacity	
Carburetion	
Fuel Capacity	
Coolant Capacity	
Alternator	
Starting Battery	
Transmission	
Gear Range	
Drive	
Front Suspension	
Rear Suspension	
Tires (Front / Rear	
Wheelbase	
Turning Radius (approx.)	
Dry Weight	
Length / Width / Height	
Brakes	
Bed Dimension	
Bed Capacity	
Hitch Tow Capacity	
Multi-function Speedometer	





RANGER

RANGER RZR

081028CCC3070

Contact Sheet

Medical Examiner: Kari Ellis
Oregon State Police
Oregon State Medical Examiner Division
13309 SE 84th Ave STE 100
Clackamas, OR 97015
(971) 673-8321

Contacted by FAX: 10/29/2008

Police: Deputy: Randy Arnold
Deputy
Jackson County Sheriff's Office
781 W. 8th Street
Medford, OR 97058
(541) 774-6800

Contacted by FAX/Phone: 10/29/2008

The CPSC investigator visited the manufacturer's Internet web site but did not contact the manufacturer.

The investigating officials did not identify the source of the incident utility vehicle. The manufacturer's Internet web site listed one dealer within the city where the victims lived and two additional dealers within 50 miles of the city where the victims lived:

Smith Schefers Inc.
3735 Crater Lake Hwy.
Medford, Or 97504

Oregon's Best Cars (25 miles)
715 Union Ave.
Grants Pass, OR 97527

Yreka Extreme Sports (43 miles)
1101 South Main
Yreka, CA 96097

The dealers were not contacted as part of this investigation.

Victims: (b)(3):CPSA Section 25(c)

The CPSC Investigtor did not have permission from the Medical Examiner to contact the victim's family.

N0840459A 4/29/08

ISSUE; 31

Two Medford Firefighters killed in ATV accident

By NEWS10's Juliane Ngan --
April 26, 2008 - 8:21PM

Funeral arrangements for two Medford firefighters killed in an off-duty accident are tentatively scheduled for next Wednesday.

(b)(3):CPSA Section 25(c) had worked for the Medford Fire Department for 15 years.

He is survived by a wife and a college-aged daughter.

(b)(3):CPSA Section 25(c) had been with the Medford Fire Department for nine years and leaves behind a wife and two young girls.

The firefighters had gone out for an ATV ride Thursday afternoon near John's Peak.

They were only supposed to be gone for three hours and when they didn't return a search was launched by friends and family.

The Jackson County Sheriff's Office then joined in on the search that went through the night.

It wasn't until Friday morning that families and friends received the devastating news.

Searchers were optimistic Friday Morning as they looked for two longtime Medford firefighters.

"We know they're out there, we know we're going to find them," said longtime friend Mark Burns.

(b)(3):CPSA Section 25(c) had gone out in the John's Peak area Thursday on a new two-seater RZR ATV.

Hundreds of searchers from all over Southern Oregon, including fellow firefighters, hoped the two may simply have run out of gas or lost their way.

As five helicopters were sent out, hope soon turned to suspicion that something was wrong.

"We had a feeling we knew we had a problem looking the road systems knowing the guys are firefighters know they're fit firefighters," said Jackson County Sheriff Mike Winters.

Shortly after 9 a.m. they received word of a possible sighting. A helicopter flown by two firefighters from Fire District 3, were sent to the Forest Creek Road drainage area where the men's bodies were found, nearly 2,000 feet down an embankment.

"It appears they were climbing that embankment and got to the top and had to turn out and then the vehicle went end over end back down to the bottom before striking a tree," said Winters.

Officials say the remains were transported to a funeral home in Medford. The start of a long grieving process for family and friends.

"That's our number one thing we're after right now, anything the spouse and family needs for both of these firefighters we'll do the best we can to take care of them," said Medford Fire Chief Dave Bierwiler.

Chief Bierwiler said they held a counseling session for medford firefighters Friday morning and plan to hold more sessions in the next few days. Firefighters from throughout the state are coming to Medford to help out.

As for the funeral, he says it's up to the families to decide if they'd like to have private services or a firefighter procession.

If you're interested in helping firefighter's families and fellow emergency responders, the Medford Fire Department says the best thing to do is contact the Medford Firefighters Association or send a donation to:

Medford Fire Fighters Association

P.O. Box 1202

Medford, OR 97501

1. Task Number	2. Investigator's ID	EPIDEMIOLOGIC INVESTIGATION REPORT
081030CCC3081	9105	

3. Office Code	4. Date of Accident YR MO DAY	5. Date Initiated YR MO DAY
840	2008 10 25	2008 11 03

6. Synopsis of Accident or Complaint **UPC**

Victim was a 56 year old man who was riding an off-road utility vehicle on a dirt trail. For unknown reasons he lost control and was ejected from the vehicle. The victim's foot was entangled in the vehicle and he was dragged before the vehicle overturned. The victim, the only person in the vehicle, was pronounced deceased at the scene. The victim was not using a helmet nor using the vehicles lap and shoulder restraining belts.

MFR/PRVLBR NOTIFIED

COMMENTS: __YES ✓NO
__OVERRULED; __ATTACHED
✓EXCISIONS/FOIA EXS. b6, 2, 5e
✓DO NOT RE-NOTIFY __RE-NOTIFY
[illegible] 4/30/09

7. Location (Home, School, etc)	8. City	9. State
5 - OTHER PUBLIC PROPERTY	VICTORVILLE	CA

10A. First Product	10B. Trade/Brand Name	10C. Model Number
5044 - Utility Vehicles	ALL TERRAIN UTILITY VEHICLE	RHINO

10D. Manufacturer Name and Address
YAMAHA MOTOR CORPORATION, USA
6555 Katella Avenue
Cypress, CA 90630

11A. Second Product	11B. Trade/Brand Name	11C. Model Number
0	NONE	NONE

11D. Manufacturer Name and Address
NONE

12. Age of Victim	13. Sex	14. Disposition	15. Injury Diagnosis
56	1 - Male	8 - Death	71 - Other
16. Body Part(s) Involved	**17. Respondent**	**18. Type of Investigation**	**19. Time Spent (Operational / Travel)**
75 - HEAD	3 - 2nd Hand Info Only	2 - Telephone	8 / 0

20. Attachment(s)	21. Case Source	22. Sample Collection Number
2 - Documents	05 - Newspaper	

23. Permission to Disclose Name (Non NEISS Cases Only)

○ Yes ● No ○ Verbal ○ Yes for Manuf. Only

24. Review Date	25. Reviewed By	26. Regional Office Director
12/02/2008	9087	Frank J. Nava

27. Distribution	28. Source Document Number
Streeter, Robin	X08A0706A

1. Task Number	2. Investigator's ID	EPIDEMIOLOGIC INVESTIGATION REPORT
081030CCC3081	9105	

3. Office Code	4. Date of Accident YR MO DAY	5. Date Initiated YR MO DAY
840	2008 10 25	2008 11 03

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5 - OTHER PUBLIC PROPERTY	VICTORVILLE	CA

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12/02/2008	9087	Frank J. Nava

27. Distribution	28. Source Document Number
Streeter, Robin	X08A0706A

081030CCC3081

This investigation was based on a news story that reported a man was killed when the all terrain utility vehicle he was ejected from rolled over him. The information in this report was obtained from the Law Enforcement Agencies Collision Report. The Coroners Office Report was not available.

The Collision Report described Victim as a 56 year old male weighing 250 pounds and standing 66 inches tall. The Report did not contain any medical or health information in regards to Victim. The Report indicated that Victim had consumed an unknown amount of beer throughout the day and prior to the collision. The Report stated that the toxicology report was still pending. Injuries described in the Report included head and face trauma, left leg fracture, and numerous cuts, scrapes, and abrasions to the entire body.

The location of this incident was described as an unimproved dirt trail rough in nature but relatively straight. The trail had several small washes crossing it with approximately 18 inches of grade separation between peaks and valleys. The trail was listed as being dry and the weather clear at the time of the accident.

The Report indicated that on 10/25/2008 a law enforcement officer was dispatched to an off highway collision at approximately 7:04 pm with an ambulance also dispatched. The Report stated that the officer arrived on the scene at 7:45 pm. The Report related that for unknown reasons, possibly due to the rough terrain, Victim lost control of the vehicle and was ejected. The speed of the vehicle at the time of the accident was unknown. It was suspected that Victims left foot became entangled in the area between the left front tire and the left front fender. It was further believed that the vehicle began rotating in a clock wise direction and rolled up onto its left side. It was believed Victim was dragged during this time. The vehicle came to rest on its left side with Victims left foot entangled in the area between the left front tire and fender. It was noted in the Report Victim was not wearing a helmet or using the vehicles lap and shoulder belts. The belts were found in the fully retracted position when inspected by the law enforcement officer.

The Report stated that Victim was found by friends who attempted CPR but stopped when it was realized he was deceased. Death was pronounced on the scene by a paramedic.

PRODUCT IDENTIFICATION

The off road utility vehicle involved in this accident was identified as a blue 2008 Yamaha Rhino. No other vehicle description was contained in the Report. Moderate damage to the entire left side, rear bumper, left taillight, and left front tie rod were listed in the Report. The Report stated that the left front tie rod was broken off at the spindle. It was unknown if this damage occurred before or after Victim was ejected and the subsequent rollover.

081030CCC3081

ATTACHMENTS

1. Law Enforcement Accident Report (10 pages)

2. Missing Document Form (1 page)

STATE OF CALIFORNIA

TRAFFIC COLLISION REPORT

CHP 555 CARS PAGE 1 (REV 11-06) OPI 065

ORIGINAL

081030CCC3081 page 1/10 attachment #1

SPECIAL CONDITIONS	NUMBER INJURED	HIT & RUN FELONY	CITY	JUDICIAL DISTRICT	LOCAL REPORT NUMBER
FATAL	0		UNINCORPORATED	VICTORVILLE SUPERIOR	b)(6)
	NUMBER KILLED	HIT & RUN MISDEMEANOR	COUNTY / REPORTING DISTRICT	BEAT	DAY OF WEEK / TOW AWAY
	1		SAN BERNARDINO	906	SATURDAY / YES [ ] NO [X]

LOCATION

COLLISION OCCURRED ON:	MO DAY YEAR	TIME (2400)	NCIC #	OFFICER I.D.
OFF HIGHWAY	10/25/2008	1830	9850	017113

MILEPOST INFORMATION: N/A

GPS COORDINATES: LATITUDE 34.79146° LONGITUDE -117.51708°

PHOTOGRAPHS BY: [ ] NONE b)(6)

[ ] AT INTERSECTION WITH:
[X] OR 2.5 MILE(S) WEST OF US 395

STATE HWY REL: [ ] YES [X] NO

25 PHOTOS 35MM

PARTY	DRIVER'S LICENSE NUMBER	STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YEAR	MAKE / MODEL / COLOR	LICENSE NUMBER	STATE
1	E1186840	CA	C	P	V	2008	YAM RHINO BLU	06C54P	CA

DRIVER [X] NAME(FIRST, MIDDLE, LAST): b)(3) CPSA Section 25(c),(b)(6)

PEDESTRIAN [ ] STREET ADDRESS: b)(3) CPSA Section 25(c),(b)(6)

PARKED VEHICLE [ ] CITY / STATE / ZIP: b)(3) CPSA Section 25(c),(b)(6)

OWNER'S NAME: b)(6) [ ] SAME AS DRIVER

OWNER'S ADDRESS: b)(6) [ ] SAME AS DRIVER

DISPOSITION OF VEHICLE ON ORDERS OF: [X] OFFICER [ ] DRIVER [ ] OTHER

RELEASED TO FAMILY

BICYCLIST	SEX	HAIR	EYES	HEIGHT	WEIGHT	BIRTHDATE (MO DAY YEAR)	RACE
	M	BRN	BRN	5-06	250	b)(3) CPSA Section 25(c),(b)(6)	W

OTHER [ ] HOME PHONE: b)(3) CPSA Section 25(c),(b)(6) BUSINESS PHONE:

INSURANCE CARRIER: NOT REQUIRED POLICY NUMBER:

DIR OF TRAVEL: S ON STREET OR HIGHWAY: OFF HIGHWAY SPEED LIMIT: N/A

PRIOR MECH. DEFECTS: [X] NONE APP. [ ] REFER TO NARRATIVE

VEHICLE IDENTIFICATION NUMBER: b)(6)

VEHICLE TYPE: 06 DESCRIBE VEHICLE DAMAGE: [ ] UNK. [ ] NONE [ ] MINOR [X] MOD. [ ] MAJOR [ ] ROLL-OVER SHADE IN DAMAGED AREA (TOP VIEW)

CA ____ DOT ____ CAL-T ____ TCP/PSC ____ MC/MX ____

PARTY	DRIVER'S LICENSE NUMBER	STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YEAR	MAKE / MODEL / COLOR	LICENSE NUMBER	STATE
2									

DRIVER [ ] NAME(FIRST, MIDDLE, LAST):

PEDESTRIAN [ ] STREET ADDRESS:

PARKED VEHICLE [ ] CITY / STATE / ZIP:

OWNER'S NAME: [ ] SAME AS DRIVER

OWNER'S ADDRESS: [ ] SAME AS DRIVER

DISPOSITION OF VEHICLE ON ORDERS OF: [ ] OFFICER [ ] DRIVER [ ] OTHER

BICYCLIST	SEX	HAIR	EYES	HEIGHT	WEIGHT	BIRTHDATE (MO DAY YEAR)	RACE

PRIOR MECHANICAL DEFECTS: [ ] NONE APP. [ ] REFER TO NARRATIVE

OTHER [ ] HOME PHONE: BUSINESS PHONE:

INSURANCE CARRIER: POLICY NUMBER:

DIR OF TRAVEL: ON STREET OR HIGHWAY: SPEED LIMIT:

VEHICLE IDENTIFICATION NUMBER:

VEHICLE TYPE: DESCRIBE VEHICLE DAMAGE: [ ] UNK [ ] NONE [ ] MINOR [ ] MOD [ ] MAJOR [ ] ROLL-OVER SHADE IN DAMAGED AREA

CA ____ DOT ____ CAL-T ____ TCP/PSC ____ MC/MX ____

PARTY	DRIVER'S LICENSE NUMBER	STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YEAR	MAKE / MODEL / COLOR	LICENSE NUMBER	STATE
3									

DRIVER [ ] NAME(FIRST, MIDDLE, LAST):

PEDESTRIAN [ ] STREET ADDRESS:

PARKED VEHICLE [ ] CITY / STATE / ZIP:

OWNER'S NAME: [ ] SAME AS DRIVER

OWNER'S ADDRESS: [ ] SAME AS DRIVER

DISPOSITION OF VEHICLE ON ORDERS OF: [ ] OFFICER [ ] DRIVER [ ] OTHER

BICYCLIST	SEX	HAIR	EYES	HEIGHT	WEIGHT	BIRTHDATE (MO DAY YEAR)	RACE

PRIOR MECHANICAL DEFECTS: [ ] NONE APP. [ ] REFER TO NARRATIVE

OTHER [ ] HOME PHONE: BUSINESS PHONE:

INSURANCE CARRIER: POLICY NUMBER:

DIR OF TRAVEL: ON STREET OR HIGHWAY: SPEED LIMIT:

VEHICLE IDENTIFICATION NUMBER:

VEHICLE TYPE: DESCRIBE VEHICLE DAMAGE: [ ] UNK [ ] NONE [ ] MINOR [ ] MOD [ ] MAJOR [ ] ROLL-OVER SHADE IN DAMAGED AREA

CA ____ DOT ____ CAL-T ____ TCP/PSC ____ MC/MX ____

PREPARER'S NAME: b)(6)

DISPATCH NOTIFIED: [X] YES [ ] NO [ ] N/A

REVIEWER'S NAME: A/I: b)(6) 1334 10/31/08 Sgt: b)(6) 12/1/08 Commander: b)(6)

DATE REVIEWED

STATE OF CALIFORNIA

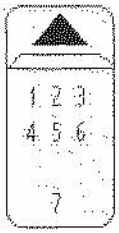
TRAFFIC COLLISION CODING

CHP 555 CAR5 PAGE2 (REV. 11-06) OPI 065

DATE OF COLLISION (MO. DAY YEAR)	TIME(2400)	NCIC #	OFFICER I.D.	NUMBER
10/25/2008	1830	9850	017113	D(6)

PROPERTY DAMAGE	OWNER	OWNER ADDRESS	NOTIFIED
	DESCRIPTION OF DAMAGE		☐ YES ☐ NO

SEATING POSITION



1 - DRIVER
2 TO 6 - PASSENGERS
7 - STA. WGN REAR
8 - RR. OCC TRK. OR VAN
9 - POSITION UNKNOWN
0 - OTHER

SAFETY EQUIPMENT

OCCUPANTS
A - NONE IN VEHICLE
B - UNKNOWN
C - LAP BELT USED
D - LAP BELT NOT USED
E - SHOULDER HARNESS USED
F - SHOULDER HARNESS NOT USED
G - LAP/SHOULDER HARNESS USED
H - LAP/SHOULDER HARNESS NOT USED
J - PASSIVE RESTRAINT USED
K - PASSIVE RESTRAINT NOT USED

L - AIR BAG DEPLOYED
M - AIR BAG NOT DEPLOYED
N - OTHER
P - NOT REQUIRED

CHILD RESTRAINT
Q - IN VEHICLE USED
R - IN VEHICLE NOT USED
S - IN VEHICLE USE UNKNOWN
T - IN VEHICLE IMPROPER USE
U - NONE IN VEHICLE

M/C BICYCLE - HELMET

DRIVER	PASSENGER
V - NO	X - NO
W - YES	Y - YES

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

INATTENTION CODES

A - CELL PHONE HANDHELD
B - CELL PHONE HANDSFREE
C - ELECTRONIC EQUIPMENT
D - RADIO / CD
E - SMOKING
F - EATING
G - CHILDREN
H - ANIMALS
I - PERSONAL HYGIENE
J - READING
K - OTHER

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

	PRIMARY COLLISION FACTOR (LIST NUMBER (#) OF PARTY AT FAULT)		TRAFFIC CONTROL DEVICES	1	2	3	SPECIAL INFORMATION	1	2	3	MOVEMENT PRECEDING COLLISION
1	A VC SECTION VIOLATED: CITED ☐ YES ☒ NO 38306		A CONTROLS FUNCTIONING				A HAZARDOUS MATERIAL				A STOPPED
	B OTHER IMPROPER DRIVING*		B CONTROLS NOT FUNCTIONING*				B CELL PHONE HANDHELD IN USE	X			B PROCEEDING STRAIGHT
			C CONTROLS OBSCURED				C CELL PHONE HANDSFREE IN USE				C RAN OFF ROAD
		X	D NO CONTROLS PRESENT / FACTOR*	X			D CELL PHONE NOT IN USE				D MAKING RIGHT TURN
	C OTHER THAN DRIVER*		TYPE OF COLLISION				E SCHOOL BUS RELATED				E MAKING LEFT TURN
	D UNKNOWN*		A HEAD - ON				F 75 FT MOTORTRUCK COMBO				F MAKING U TURN
			B SIDE SWIPE				G 32 FT TRAILER COMBO				G BACKING
			C REAR END				H CELL PHONE USE UNKNOWN				H SLOWING / STOPPING
	WEATHER (MARK 1 TO 2 ITEMS)		D BROADSIDE				I				I PASSING OTHER VEHICLE
X	A CLEAR		E HIT OBJECT				J				J CHANGING LANES
	B CLOUDY		F OVERTURNED				K				K PARKING MANEUVER
	C RAINING		G VEHICLE / PEDESTRIAN				L				L ENTERING TRAFFIC
	D SNOWING	X	H OTHER*: EJECTED				M				M OTHER UNSAFE TURNING
	E FOG / VISIBILITY FT.						N				N XING INTO OPPOSING LANE
	F OTHER:*		MOTOR VEHICLE INVOLVED WITH				O				O PARKED
	G WIND	X	A NON - COLLISION				P				P MERGING
	LIGHTING		B PEDESTRIAN				Q				Q TRAVELING WRONG WAY
X	A DAYLIGHT		C OTHER MOTOR VEHICLE	1	2	3	OTHER ASSOCIATED FACTORS (MARK 1 TO 2 ITEMS)				R OTHER*:
	B DUSK - DAWN		D MOTOR VEHICLE ON OTHER ROADWAY								
	C DARK - STREET LIGHTS		E PARKED MOTOR VEHICLE				A VC SECTION VIOLATED: CITED ☐ YES ☐ NO				
	D DARK - NO STREET LIGHTS		F TRAIN								
	E DARK - STREET LIGHTS NOT FUNCTIONING*		G BICYCLE				B VC SECTION VIOLATED: CITED ☐ YES ☐ NO				
			H ANIMAL:								
	ROADWAY SURFACE						C VC SECTION VIOLATED: CITED ☐ YES ☐ NO	1	2	3	SOBRIETY - DRUG PHYSICAL (MARK 1 TO 2 ITEMS)
X	A DRY		I FIXED OBJECT:				D				A HAD NOT BEEN DRINKING
	B WET						E VISION OBSCUREMENT:				B HBD - UNDER INFLUENCE
	C SNOWY - ICY		J OTHER OBJECT:				F INATTENTION*				C HBD - NOT UNDER INFLUENCE*
	D SLIPPERY (MUDDY, OILY, ETC.)						G STOP & GO TRAFFIC	X			D HBD - IMPAIRMENT UNKNOWN*
	ROADWAY CONDITION(S) (MARK 1 TO 2 ITEMS)		PEDESTRIAN'S ACTIONS				H ENTERING / LEAVING RAMP				E UNDER DRUG INFLUENCE*
	A HOLES, DEEP RUT*	X	A NO PEDESTRIANS INVOLVED				I PREVIOUS COLLISION				F IMPAIRMENT - PHYSICAL*
	B LOOSE MATERIAL ON ROADWAY*		B CROSSING IN CROSSWALK AT INTERSECTION				J UNFAMILIAR WITH ROAD				G IMPAIRMENT NOT KNOWN
	C OBSTRUCTION ON ROADWAY*						K DEFECTIVE VEH. EQUIP.: CITED ☐ YES ☐ NO				H NOT APPLICABLE
	D CONSTRUCTION - REPAIR ZONE		C CROSSING IN CROSSWALK - NOT AT INTERSECTION								I SLEEPY / FATIGUED
	E REDUCED ROADWAY WIDTH										
	F FLOODED*		D CROSSING - NOT IN CROSSWALK				L UNINVOLVED VEHICLE				
X	G OTHER*: DIRT		E IN ROAD - INCLUDES SHOULDER				M OTHER*:				
	H NO UNUSUAL CONDITIONS		F NOT IN ROAD	X			N NONE APPARENT				
			G APPROACHING / LEAVING SCHOOL BUS				O RUNAWAY VEHICLE				

SKETCH FOR SKETCH DIAGRAM, SEE PAGE 4

INDICATE NORTH

MISCELLANEOUS

STATE OF CALIFORNIA

INJURED / WITNESSES / PASSENGERS

CHP 555 CARS PAGE 3 (REV 11-06) OPI 065

DATE OF COLLISION (MO. DAY YEAR)	TIME(2400)	NCIC #	OFFICER I.D.	NUMBER
10/25/2008	1830	9850	017113	b)(6)

WITNESS ONLY	PASSENGER ONLY	AGE	SEX	EXTENT OF INJURY('X' ONE)				INJURED WAS ('X' ONE)					PARTY NUMBER	SEAT POS.	AIR BAG	SAFETY EQUIP.	EJECTED
				FATAL INJURY	SEVERE INJURY	OTHER VISIBLE INJURY	COMPLAINT OF PAIN	DRIVER	PASS.	PED.	BICYCLIST	OTHER					
#		56	M	X				X					1	1	P	Y	1

NAME / D.O.B. / ADDRESS — TELEPHONE

b)(3) CPSA Section 25(c),(b)(6)

(INJURED ONLY) TRANSPORTED BY: CORONER'S OFFICE — TAKEN TO: CORONER'S OFFICE

DESCRIBE INJURIES: HEAD AND FACE TRAUMA, LEFT LEG FRACTURE, NUMEROUS CUTS, SCRAPES, AND ABRASIONS TO ENTIRE BODY. PRONOUNCED BY PARAMEDIC b)(6) AT 1943 HOURS. DEPUTY CORONER b)(6)

☐ VICTIM OF VIOLENT CRIME NOTIFIED

X # 1		39	F														

NAME / D.O.B. / ADDRESS — TELEPHONE

b)(3) CPSA Section 25(c),(b)(6)

(INJURED ONLY) TRANSPORTED BY: — TAKEN TO:

DESCRIBE INJURIES:

☐ VICTIM OF VIOLENT CRIME NOTIFIED

X # 2		57	M														

NAME / D.O.B. / ADDRESS — TELEPHONE

b)(3) CPSA Section 25(c),(b)(6)

(INJURED ONLY) TRANSPORTED BY: — TAKEN TO:

DESCRIBE INJURIES:

☐ VICTIM OF VIOLENT CRIME NOTIFIED

#																	

NAME / D.O.B. / ADDRESS — TELEPHONE

(INJURED ONLY) TRANSPORTED BY: — TAKEN TO:

DESCRIBE INJURIES:

☐ VICTIM OF VIOLENT CRIME NOTIFIED

#																	

NAME / D.O.B. / ADDRESS — TELEPHONE

(INJURED ONLY) TRANSPORTED BY: — TAKEN TO:

DESCRIBE INJURIES:

☐ VICTIM OF VIOLENT CRIME NOTIFIED

#																	

NAME / D.O.B. / ADDRESS — TELEPHONE

(INJURED ONLY) TRANSPORTED BY: — TAKEN TO:

DESCRIBE INJURIES:

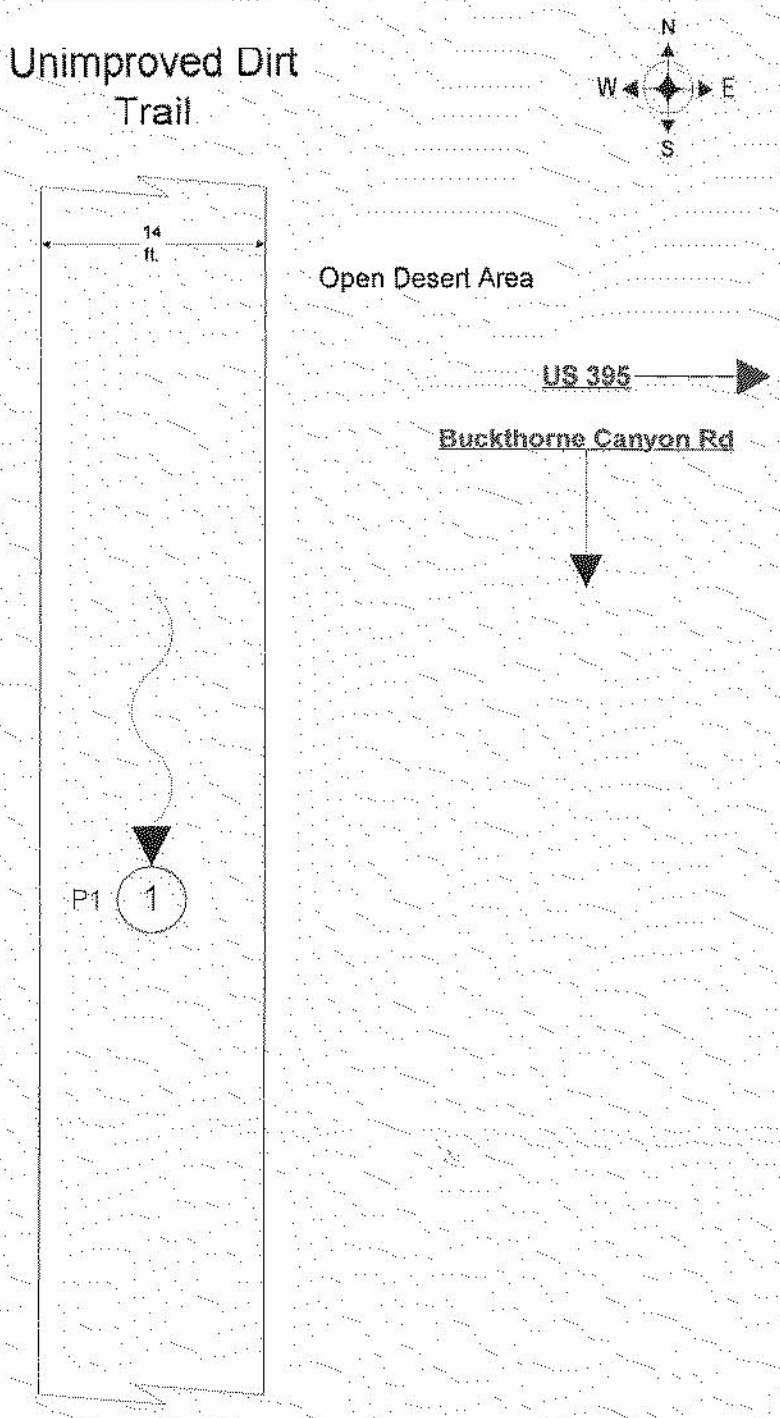
☐ VICTIM OF VIOLENT CRIME NOTIFIED

PREPARER'S NAME	I.D. NUMBER	MO. DAY YEAR	REVIEWER'S NAME	MO. DAY YEAR
b)(6)		10/25/2008		

STATE OF CALIFORNIA
SKETCH DIAGRAM
CHP 553 Page 4(Rev. 8-97) OPI 042

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
10/25/2008	1830	9850	(b)(6)	

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

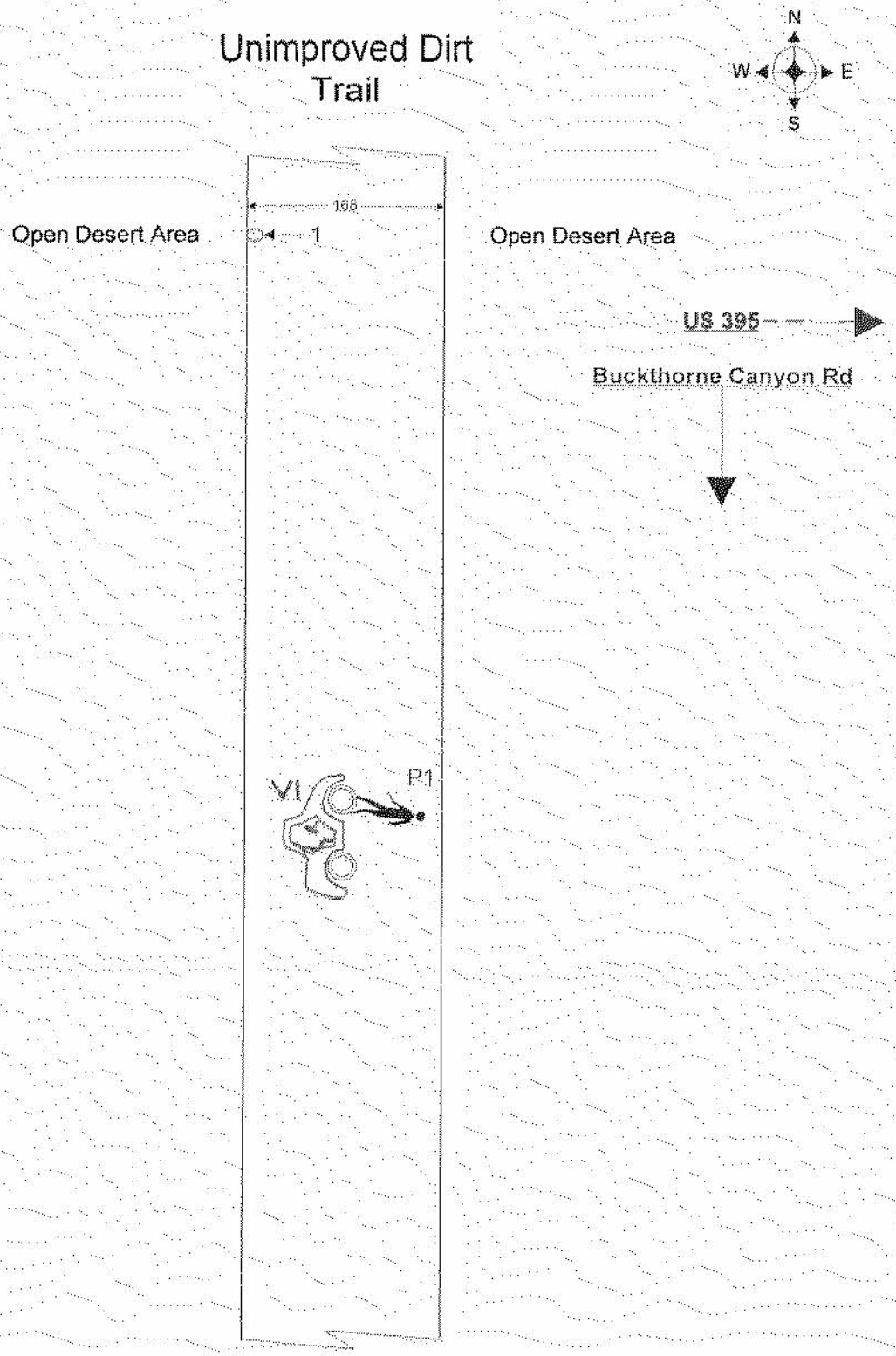


PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
(b)(6)		10/25/2008		

STATE OF CALIFORNIA
FACTUAL DIAGRAM
CHP 555 Page 4(Rev. 8-97) OPI 042

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
10/25/2008	1830	9850	(b)(6)	

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



PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
(b)(6)		10/25/2008		

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
10/25/2008	1830	9850	(b)(6)	

PHYSICAL EVIDENCE LEGEND:

STATION LINE:

A station line was established along the west edge of an unimproved dirt trail. Station 0+00 was established at a GPS Coordinates of latitude 34.79146 and longitude -117.51708. The station line increases as you proceed south. All measurements were taken at right angles to the station line.

PHYSICAL EVIDENCE DESCRIPTION:

1) Motorcycle helmet

PHYSICAL EVIDENCE LOCATION:

ITEM	STATION	OFFSET	DIR	DESCRIPTION
1	0+82'	None	--	Helmet
2	1+17'	7'	E	V1's left front tire
3	1+22'	7'	E	V1's left rear tire
4	1+18' 6"	11'	E	Center of P1's groin area
5	1+19'	13'	E	Top of P1's head

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
10/25/2008	1830	9850	(b)(6)	

FACTS

NOTIFICATION:

I was dispatched to a call of an off highway collision (possible fatality) with an ambulance responding at approximately 1904 hours. I responded from Phelan Rd and Sheep Creek Rd and arrived at the collision scene at approximately 1945 hours. All times, speeds, and measurements in this investigation are approximate. Measurements were taken by GPS, roll meter, and visual estimation.

SCENE:

The scene of this collision is an unimproved dirt trail within the county of San Bernardino. The trail is rough in nature but relatively straight. The trail has several small washes crossing it with approximately eighteen inches of grade separation between the peaks and valleys. The trail was dry and the weather at the time of my arrival was clear, cool and dry. See physical evidence legend and factual diagram for further scene description.

PARTIES:

Party # 1 (P1 Ayrapetyan): was located at the collision scene, at his point of rest. P1 was identified by a California Driver's License and verbally by witnesses #1 and #2. P1 had been pronounced deceased prior to my arrival. P1 was not wearing a helmet at the time of my arrival. P1 was placed as a party in this collision by the following:

- P1's location.
- P1's injuries.
- Witness statements.

Vehicle # 1 (V1 Yamaha Rhino ATV): was located at the collision scene, at its point of rest. V1 sustained moderate damage as a result of this collision including damage to the following:

- Entire left side
- Rear bumper.
- Left taillight
- Left front tie rod (steering component)

A visual inspection of V1's restraint system was conducted on scene. The driver's lap and shoulder belt were fully retracted in an upright position. The seat belt moved freely and it did not appear to have been utilized during the collision.

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
10/25/2008	1830	9850	(b)(6)	

PHYSICAL EVIDENCE:

Refer to physical evidence legend and factual diagram for further information.

OTHER FACTUAL INFORMATION:

I was assisted in this collision by the following:

(b)(6)

San Bernardino County Fire / Medic Engine #4 (909-356-3805)
(b)(6)

San Bernardino County Coroner's Office (909-387-2314)
(b)(6)

STATEMENTS:

STATEMENTS ARE NOT VERBATIM AND ARE WRITTEN IN SUMMARY FORM. THE STATEMENTS WERE READ BACK TO THE INVOLVED PARTIES FOR VERIFICATION.

Party # 1 (P1 Ayrapetyan): Due to P1's injuries no statement was obtained.

Witness # 1 (W1 (b)(6) **:** was contacted at the collision scene and was identified verbally. W1 related to me in essence that she did not witness the collision but she and W2 were the ones who located P1 when he did not return to their camp. W1 stated that prior to sundown (approximately 5:00pm) that P1 went out for a ride. The rest of their party began packing up to go home. At sunset they (their group) became concerned when P1 did not return to camp. They did not see any dust in the area or other signs of riding. They got on top of their trailer and used binoculars but still did not locate P1. W1's husband began driving in a northwesterly direction but after 30 minutes did not locate P1. She (W1) and W2 began driving in a southeasterly direction. Approximately 15 minutes later they located P1 and V1. She stated that the Rhino (V1) was on its side and P1 was lying on his left side next to it. They rolled P1 onto his back to examine him. W1 stated that P1 was not breathing and he was cold to the touch. They tried CPR but stopped after about 30 seconds. It was obvious to W1 that P1 was not alive. W1 called her husband who then called 911 to report the incident. When asked, W1 stated that P1 had consumed a few beers during the day but he did not appear intoxicated to her.

W1 stated that she only moved P1 onto his back and turned on V1's lights. She did not disturb anything else. She turned on V1's lights to assist others in locating the collision scene.

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
(b)(1)		10/25/2008		

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
10/25/2008	1830	9850	b)(6) [redacted]	

Witness # 2 (W2 Aslanyan): was contacted at the collision scene and was identified verbally. W2 related to me in essence that he too did not witness the collision but he and W1 were the ones who located P1 when he did not return to their camp. He stated that he was riding with W1 when they located P1. W2 assisted W1 in attempting CPR on P1. He stated that they stopped a short time later when they realized that P1 was not alive. Prior to my arrival W2 gathered up some of the ropes that where thrown from V1 and put them in a pile. He did not move V1 or the helmet.

24 HOUR PROFILE:

At approximately 0040 hours I contacted b)(6) [redacted] (P1's daughter) at their camp. b)(6) [redacted] stated that P1 went to bed between 10:30 to 11:00pm the night prior and had a normal night of sleep. He woke up at 8:00am and had coffee. They left their home and arrived at the camp at 10:30am. Between 11:00 and 12:00 noon P1 had a sandwich and then shortly there after had a "heavy" lunch. He had a beer after lunch and rested in a hammock for about an hour. The rest of the afternoon was normal. P1 went on several rides lasting about an hour each time. b)(6) [redacted] stated that P1 did not have any medical problems and was not taking any medications. She stated that P1 was not depressed in any way and that he was having a "happy" day.

OPINIONS AND CONCLUSIONS:

THE SUMMARY, AREA OF IMPACT(S) AND CAUSE WERE BASED ON PHYSICAL EVIDENCE, VEHICLE DAMAGE, INJURIES, AND STATEMENTS.

SUMMARY:

P1 was driving V1, S/B on an unimproved dirt trail, at an unknown speed. For unknown reasons, (possibly due to the rough terrain) P1 lost control of V1, and was ejected from V1. During the sequence of events, P1's left foot became entangled in the area between the left front tire and the left front fender. V1 began rotating in a clockwise direction and rolled up onto its left side all while traveling in a southerly direction. It is believed that P1 was being dragged during this time. V1 came to rest, on its left side, facing in a northerly direction. P1 came to rest, lying on his left side, perpendicular to V1 (facing east), with his left foot entangled in the area between the left front tire and the left front fender.

P1 was not wearing a helmet or utilizing V1's lap and shoulder belts.

AREA OF IMPACT:

A.O.I. #1 (P1 ejected from V1) was located approximately .5 miles north of Buckthorne Canyon Rd, and approximately 2.5 miles west of US 395.

STATE OF CALIFORNIA
NARRATIVE/SUPPLEMENTAL

DATE OF INCIDENT	TIME	NCIC NUMBER	OFFICER I.D.	NUMBER
10/25/2008	1830	9850	(b)(6)	

INTOXICATION NARRATIVE:

During the investigation it was revealed that P1 had consumed an unknown amount of beer throughout the day and prior to the collision. There were no witnesses to P1's driving, and I was unable to determine P1's level of impairment or BAC (if any) at the time of collision. A toxicology report is pending and will be conducted by the coroner's office.

CAUSE:

P1 caused this collision by driving V1 in violation of 38305 VC – Basic Speed Law (Off road)

ADDITIONAL INFORMATION:

V1 sustained damage to the left front tie rod (broke off at the spindle) during this collision. It is unknown if the damage occurred before or after P1's ejection from V1 and subsequent rollover.

RECOMMENDATIONS:

None.

PREPARED BY	I.D. NUMBER	DATE	REVIEWER'S NAME	DATE
(b)(6)		10/25/2008		

Task Number: 081030CCC3081
Attachment : 2
Date: 12/02/2008

Status of Missing Document(s)

The official records below were requested for this investigation report but could not be obtained.

1. San Bernardino County Sheriffs Office- Coroners Division, 175 S. Lena Road, San Bernardino, CA 92415

2. _____

3. _____

4. _____

DATE: 12/02/2008 **INVESTIGATOR NO:** 9105

REGIONAL OFFICE:_____ **SUPERVISOR NO:**_____

081030CCC3081

REPORT IDENTIFIERS

Victim- (b)(3):CPSA Section 25(c),(b)(6)

Law Enforcement Agency- California Highway Patrol, 14210 Amargosa Road, Victorville, CA 92392

Coroners Office- San Bernardino County Sheriffs Office- Coroners Division, 175 S. Lena Road, San Bernardino, CA 92415

TASK NUMBER : 081030CCC3081

(b)(5)

1. Task Number	2. Investigator's ID	EPIDEMIOLOGIC INVESTIGATION REPORT
081031HWE7821	9105	

3. Office Code	4. Date of Accident YR MO DAY	5. Date Initiated YR MO DAY
840	2008 10 18	2008 11 03

6. Synopsis of Accident or Complaint UPC

A 37-year-old, male victim was killed when the side-by-side, utility vehicle he was driving rolled over. It was determined he was traveling on a sand dune slope too steep for this vehicle and it rolled several times, partially ejecting victim. When he was found by friends the safety restraint belt was not in use. Toxicology reports revealed that alcohol was found in his blood system. The victim's cause of death was listed as blunt-force trauma to the head.

MFR/PRVLBR NOTIFIED

COMMENTS: __YES ✓NO
__OVERRULED; __ATTACHED
✓EXCISIONS/FOIA EXS. 25c, 6
✓DO NOT RE-NOTIFY __RE-NOTIFY
JM 6/15/09

7. Location (Home, School, etc)	8. City	9. State
9 - SPORTS OR RECREATION PLACE	DUMONT DUNES	CA

10A. First Product	10B. Trade/Brand Name	10C. Model Number
5044 - Utility Vehicles	POLARIS UTILITY VEHICLE	RAZOR

10D. Manufacturer Name and Address
POLARIS INDUSTRIES INC.
1225 Highway 169 North
Minneapolis, MN 55441

11A. Second Product	11B. Trade/Brand Name	11C. Model Number
0	NONE	NONE

11D. Manufacturer Name and Address
NONE

12. Age of Victim	13. Sex	14. Disposition	15. Injury Diagnosis
37	1 - Male	8 - Death	66 - Hemorrhage

16. Body Part(s) Involved	17. Respondent	18. Type of Investigation	19. Time Spent (Operational / Travel)
75 - HEAD	3 - 2nd Hand Info Only	2 - Telephone	9 / 0

20. Attachment(s)	21. Case Source	22. Sample Collection Number
2 - Documents	05 - Newspaper	

23. Permission to Disclose Name (Non NEISS Cases Only)

○ Yes ● No ○ Verbal ○ Yes for Manuf. Only

24. Review Date	25. Reviewed By	26. Regional Office Director
12/17/2008	8554	Frank J. Nava

27. Distribution	28. Source Document Number
Streeter, Robin	N08A0408A

081031HWE7821

This investigation was based on a news article that reported a man died when the off-road vehicle he was riding overturned for unknown reasons. The information in this report was obtained from the Law Enforcement Agencies Report (attachment #1) and the Coroners Office Report (attachment #2).

The Victim in this incident was described as a 37 year old male weighing 200 pounds and standing 73 inches in height. No other health/medical information was reported.

The location of this incident was described as an Off Highway Vehicle (OHV) recreation area consisting of sand dunes. The Law Enforcement Report indicated there are no posted speed limits or designated traffic lanes in the area. The surface was listed as being mainly fine sand and rocks. The location where Victim and the off road utility vehicle he was driving were found was listed as being a large sand dune. Weather conditions were listed as being clear and cool.

The Report stated that according to Victims friends they arrived at the OHV area at about 6:00 pm on 10/17/2008. It was reported that they barbecued and consumed beer and mixed drinks until about midnight. It was not determined how much alcohol Victim had consumed during that period. Victim's friends related to the police that at about midnight they decided to go to sleep except for Victim who stated he was going to "putt around" for a little bit on the side by side utility vehicle. Victim was the only person in the vehicle at the time of this rollover accident.

The Report showed that at about 6:00 am on 10/18/2008 the friends noticed that Victim had not returned. One of the friends noticed some headlights near the top of one of the sand dunes and upon arriving at the spot found Victim. The friend told the law enforcement officer Victim was found half in and half out of the vehicle.

Upon arrival of the law enforcement officer at 7:45 am death was pronounced. It was thought that Victim was traveling across the side of a sand dune at an undetermined and unsafe speed. It was further determined that because of the slope of the terrain and the unsafe speed the vehicle exceeded its lateral limits and rolled over. The side by side utility vehicle was rolled over several times partially ejecting Victim and causing the fatal injuries. It was also noted Victim was not wearing a seat belt when found. It was not noted in either Report if Victim was wearing a helmet at the time of this incident.

The Coroners Report and Law Enforcement Report both indicated that the vehicle was equipped with a five point restraint system for passenger and drivers seat. The Law Enforcement Report reflected that one of Victims friends stated he and Victim had installed the restraint system and the vehicles roll cage.

The Coroners Report reflected that when Victim was found by his friends the drivers seat belt was found unbuckled and the lights on. This Report indicated utility vehicle involved in this accident was manufactured on 04/15/2008. It was also found during the toxicology

tests that Victims alcohol level was found to be between 0.17% and 0.19% blood alcohol content. Cause of death was listed as being Blunt Force Trauma injuries to the head.

PRODUCT IDENTIFICATION

The off road utility vehicle involved in this accident was identified as a red in color four wheel drive Polaris Raze RZR with a 800 cc motor and manufactured on 04/15/2008. It was described as having side by side passenger and driver seat. It was noted in the Law Enforcement Report that Victim and a friend had installed the five point safety restraint system and roll bar. The Report further indicated the restraint system appeared to be working properly but was found unbuckled at the time of the accident.

081031HWE7821

ATTACHMENTS

1. Law Enforcement Report (11 pages)
2. Coroners Report (7 pages)