

SURVIVAL FACTORS ATTACHMENT 2

OPD Injured Passenger Report

Oxnard, California

HWY15MH006

(17 pages)

1022/2015 5994 5172 2015-00021/246 1022 1023		D Page 3 (F			TIME (2400)		NCIC#		OFFICE	210				NUMBER			Page 2	of 4
WITHOUT PARTICIPATION OF SAY MARKET OF HAURY ("YO NE") INJURED WAS ("YO NE") EAST FOR A MARKET POR AN AND AND AND AND AND AND AND AND AND	DATE OF CO.		02/24/2015				5604 5172 2015-000212										1246	
MARCH ON PAINT OF PAIN TO LEFT LEG BELOW KNEE, AND LOWER BACK ST. JOHNS PLEASANT VALLEY TECHNOLOGY TEC			AGE	SEX	FATAL	_,			IN.	JUREC	WAS	("X" ON	E)	PARTY	SEAT		1	[
TRANSPORT TO DE PRODUCTION TO THE PRODUCTION OF			-				INJURY	OF PAIN		PASS.	PED.	BICYCLIST	OTHER	NUMBEH	POS,	BAG	EQUIP,	EJECTE
INJURIES OF TRANSPORTED WE ST. JOHNS PLEASANT VALLEY JOHNS PLEASANT VALLEY JOHNS PLEASANT VALLEY JOHNS PLEASANT VALLEY ST. JOHNS PLEASANT VALLEY JOHNS PLEASANT VAL		D (ADODESS	35	F				X	X					02	0	P	A	0
AMBULANCE ST. JOHNS PLEASANT VALLEY NOTIFIC ORIGINATION PAIN TO LEFT LEG BELOW KNEE, AND LOWER BACK NOTIFIC ORIGINATION PAIN TO LEFT LEG BELOW KNEE, AND LOWER BACK NOTIFIC ORIGINATION PAIN TO LEFT SHOULDER AND COMPLAINT OF PAIN TO LEFT SHOE OF HEAD NOTIFIC ORIGINATION PAIN REDNES TO LEFT SHOULDER AND COMPLAINT OF PAIN TO LEFT SHOE OF HEAD NOTIFIC ORIGINATION PAIN REDNES TO LEFT SHOULDER AND COMPLAINT OF PAIN TO LEFT SHOE OF HEAD NOTIFIC ORIGINATION PAIN REDNES TO LEFT SHOULDER AND COMPLAINT OF PAIN TO LEFT SHOE OF HEAD NOTIFIC ORIGINATION PAIN REDNES TO LEFT SHOULDER AND COMPLAINT OF PAIN TO LEFT SHOE OF TORSO. NOTIFIC ORIGINATION PAIN REDNES TO LEFT SHOULDER AND COMPLAINT OF PAIN TO LEFT SHOE OF TORSO. NOTIFIC ORIGINATION PAIN REDNESS ON RIGHT HAND, BROKEN RIBS ON RIGHT SIDE OF TORSO. NOTIFIC ORIGINATION PAIN REDNESS ON RIGHT HAND, BROKEN RIBS ON RIGHT SIDE OF TORSO. NOTIFIC ORIGINATION PAIN REDNESS ON RIGHT THOMBS, SWELLING ON RIGHT HAND, BROKEN RIBS ON RIGHT SIDE OF TORSO. NOTIFIC ORIGINATION PAIN REDNESS ON RIGHT SHOE OF TORSO. NOTIFIC ORIGINATION PAIN REDNESS ON RIGHT SHOE OF TORSO. NOTIFIC ORIGINATION PAIN REDNESS ON RIGHT SHOE OF TORSO. NOTIFIC ORIGINATION PAIN REDNESS ON RIGHT SHOE OF TORSO. NOTIFIC ORIGINATION PAIN REDNESS ON RIGHT SHOE OF TORSO. NOTIFIC ORIGINATION PAIN REDNESS ON RIGHT SHOE OF TORSO. NOTIFIC ORIGINATION PAIN REDNESS ON RIGHT SHOE OF TORSO. NOTIFIC ORIGINATION PAIN TO RESNESS ON RIGHT SHOE OF TORSO. NOTIFIC ORIGINATION PAIN TO RESNESS ON RIGHT SHOE OF TORSO. NOTIFIC ORIGINATION PAIN TO RESNESS ON RIGHT SHOE OF TORSO. NOTIFIC ORIGINATION PAIN TO RESNESS ON RIGHT SHOE OF TORSO. NOTIFIC ORIGINATION PAIN TO RESNESS ON RIGHT SHOE OF TORSO. NOTIFIC ORIGINATION PAIN TO RESNESS ON RIGHT SHOE OF TORSO. NOTIFIC ORIGINATION PAIN TO RESNESS ON RIGHT SHOE OF TORSO. NOTIFIC ORIGINATION PAIN TO RESNESS ON RIGHT SHOE ORIGINATION PAIN TO RESNESS ON RIGHT SHOE ORIGINATION PAIN TO RESNESS ON RIGHT SHOE ORIGINATION PAIN TO RES																TELEF	HONE	
WARRING COMPLAINT OF PAIN TO LEFT LEG BELOW KNEE, AND LOWER BACK	(INJURED ON AMBUL	LY) TRANSPOR	TED BY:				_		HNS P	LEASA	NT V	ALLEY						_
MARBULANCE MARBUL	DESCRIBE IN.	JURIES) A IAI T	0 I EE1	LECP	TI OW I	AIFE AND LOWE		<u> </u>				-					·
WESTER OF WARD WARD TO REST ON P. A 0 TRESTORY WARD TO STANDARD WARD WARD TO REST ON P. A 0 TRESTORY WARD WARD WARD WARD WARD WARD WARD WARD	COMPL	AINT OF F	'AIN I	O LEFI	LEG B	ELOW K	NEE, AND LOWE	R BACK										
WESTER OF WARD WARD TO REST ON P. A 0 TRESTORY WARD TO STANDARD WARD WARD TO REST ON P. A 0 TRESTORY WARD WARD WARD WARD WARD WARD WARD WARD																		
TRANSPORT TOWNS TO LEFT SHOULDER AND COMPLAINT OF PAIN TO LEFT SIDE OF HEAD TRANSPORT OF PAIN REDNES TO LEFT SHOULDER AND COMPLAINT OF PAIN TO LEFT SIDE OF HEAD TO SECOND THAN SHOWN TOWN TOWN TOWN TOWN TOWN TOWN TOWN T			Ī	1 _				T	1	T		l	<u> </u>	VICTIM OF	VIOLENT	RIME NO	TIFIED	
TAMBULANCE ST. JOHNS PLEASANT VALLEY WIGHING WOLENT CRIME HOTPED ## 46 F X			45	F			<u> </u>	X		X				02	0	<u> </u>		0
AMBULANCE ST. JOHNS PLEASANT VALLEY SECRIFICATIONS COMPLAINT OF PAIN REDNES TO LEFT SHOULDER AND COMPLAINT OF PAIN TO LEFT SIDE OF HEAD WICHNOF WORKST CHARGE NOTIFED WICHNOF WORKST CHARGE NOTIFED WICHNOF WORKST CHARGE NOTIFED TAMES NO. AND PLEASANT VALLEY WICHNOF WORKST CHARGE NOTIFED WICHNOF WORKST CHARGE NOTIFIED WICHNOF WORKST CHARGE NOTIFIED WICHNOF WORKST CHARGE NOTIFIED WICHNOF WORK															1	TELEP	HONE	
DISCREGATION TO PAIN/ REDNES TO LEFT SHOULDER AND COMPLAINT OF PAIN TO LEFT SIDE OF HEAD VICTIM OF WOLENT CRAME HOTIPRED			ED 8Y:						HNS P	LEASA	NT V	ALLEY						
WILLIAMORE MOLIBRY CRIME HOTPRED WARREN TO, ST. JOHNS PLEASANT VALLEY WARREN TO, ST. JOHNS PLEASANT VALLEY WARREN TO, ST. JOHNS PLEASANT VALLEY WARREN ORLY) TRANSPORTED BY WARREN TO, ST. JOHNS PLEASANT VALLEY WARREN ORLY) TRANSPORTED BY WARREN ORLY DATASET BY WAR			AIN! D	EDNES	TOLE	ET SHOI	II DED AND COM											
# 46 F X D DESCRIPTION OF VOLENT CRIME NOTIFIED MACHINE OR AND PLEASANT VALLEY MACHINE OF TORSO,	COMPLA	AIN OF P	AIN/ K	CONES) IO LE	ri shot	JEDER AND COM	PLAINT OF PA	AIN TO	LEFT	SIDE	OF HEA	D					
# 46 F X D DESCRIPTION OF VOLENT CROWN POTENTION THE PROPERTIES OF TORSO, THE PROPERTIES OF TO													-					
THE PROPER STANDARD OF THE PROPER ST. JOHNS PLEASANT VALLEY THE PROPER ST. JOHNS PLEASANT VALLEY ST. JOHNS PLEASANT VALLEY ST. JOHNS PLEASANT VALLEY ST. JOHNS PLEASANT VALLEY JELEPHONE JELEPHO			Τ	 		T	T		T				الل	VICTIM OF	VIOLENT C	RIME NO	TIFIED	
INJURED ONLY) TRANSPORTED BY AMBULANCE ST. JOHNS PLEASANT VALLEY SECRETE RUADRICS DISLOCATED RIGHT THUMB, SWELLING ON RIGHT HAND, BROKEN RIBS ON RIGHT SIDE OF TORSO, VICTAM OF VOCENT CRIME ROTIFED VICTAM OF VOCENT CRI	#		46	F		X				X				02	0			0
AMBULANCE DISLOCATED RIGHT THUMB, SWELLING ON RIGHT HAND, BROKEN RIBS ON RIGHT SIDE OF TORSO, VICTIM OF WOLENT CRAME NOTIFED												<u> </u>			1	TELEPI	ONE	
DISLOCATED RIGHT THUMB, SWELLING ON RIGHT HAND, BROKEN RIBS ON RIGHT SIDE OF TORSO, VICTIMO OF VIOLENT GRAME NOTIFIED			EO BY:						HNS P	LEASA	NT V	MIFV				•	,	
WICTIAN OF VIOLENT CRIME NOTIFIED ## 63 F	DESCRIBE INJ	URIES	17 7410	134D 0		10 011 0	IOLIT III DOG										~	
MARRED ONLY) TRANSPORTED BY:	DISLOCA	ATED RIGI	יחו ור	UIVIB, S	VAFELLIN	NG ON R	IGHT HAND, BRO	OKEN RIBS OF	N RIGH	f SIDE	OF 1	ORSO,						
MARRED ONLY) TRANSPORTED BY:																		
NAURED ONLY) TRANSPORTED BY: ADBILLANCE LOS ROBLES SOCIALISM NAURED ONLY) TRANSPORTED BY: LOS ROBLES LOS ROBLES VICTIM OF WOLENT CRIME NOTIFIED TELEPHONE TAKEN TO: AMBULANCE SECRIBE MAURES SHATTERED LEFT CLAVICAL, 5 FRACTURED RIBS ON LEFT SIDE OF TORSO, HEMATOMA ON LEFT SIDE OF HEAD, PAIN ON RIGHT SIDE TAKEN TO: VICTIM OF WOLENT CRIME NOTIFIED TELEPHONE TAKEN TO: VICTIM OF WOLENT CRIME NOTIFIED TO 2 0 P; A 0 TELEPHONE TAKEN TO: VICTIM OF WOLENT CRIME NOTIFIED TAKEN TO: VICTIM OF WOLENT CRIME NOTIFIED TAKEN TO: LOS ROBLES RECIRIES MAURES LOS ROBLES REVIEWERS MAURES LOS ROBL	#						· – –		 -	·			<u> </u>	VICTIM OF	VIOLENT C	RIME NOT	IFIEO	
AMBULANCE LOS ROBLES DESCRIBE MUNICES L12 VERTEBRAE COMPRESSION INJURY, COMPLAINT OF PAIN TO LEFT KNEE AND BACK OF HEAD ### 44 F	#		63	F	<u></u>			[X]		X				02	0			0
AMBULANCE DESCRIBE INJURIES L12 VERTEBRAE COMPRESSION INJURY, COMPLAINT OF PAIN TO LEFT KNEE AND BACK OF HEAD VICTIM OF VICINIA OF VICINIA ENTIFIED																TELEPH	IONE	
DESCRIBE NAUVIES L12 VERTEBRAE COMPRESSION INJURY, COMPLAINT OF PAIN TO LEFT KNEE AND BACK OF HEAD VICTIM OF WOLENT CRIME NOTIFIED	• • • • • • • • • • • • • • • • • • • •		:O BY:				_		OBLES									
WICTIM OF VIOLENT CRIME NOTIFIED # 44 F X	DESCRIBE INJL	JRIE8	OMDE	Eeelo	AL INI 11 (1	DV CON	IDI AINT OF DAIN						,,, ,,,,					
# 44 F X D TELEPHONE INJURED ONLY) TRANSFORED BY: AMBULANCE LOS ROBLES SHATTERED LEFT CLAVICAL, 5 FRACTURED RIBS ON LEFT SIDE OF TORSO, HEMATOMA ON LEFT SIDE OF HEAD, PAIN ON RIGHT SIDE OF BACK # 41 F X D X D P; A 0 TELEPHONE WICHMOF VIOLENT CRIME NOTIFIED INJURED ONLY) TRANSPORTED BY: AMBULANCE LOS ROBLES INJURED ONLY) TRANSPORTED BY: AMBULANCE LOS ROBLES RECRIBE MUDRIES LOS ROBLES LOS ROBLES ID. NUMBER MO. DAY YEAR REVIEWER'S NAME MO. DAY YEAR	LIZ VER	IEBRAE C	ONIFF	(69910	וטכאוו אוי	RT, CON	IPLAINT OF PAIN	I JO LEFI KN	EE ANI	BAC	K OF	HEAD						İ
# 44 F X D TELEPHONE INJURED ONLY) TRANSFORED BY: AMBULANCE LOS ROBLES SHATTERED LEFT CLAVICAL, 5 FRACTURED RIBS ON LEFT SIDE OF TORSO, HEMATOMA ON LEFT SIDE OF HEAD, PAIN ON RIGHT SIDE OF BACK # 41 F X D X D P; A 0 TELEPHONE WICHMOF VIOLENT CRIME NOTIFIED INJURED ONLY) TRANSPORTED BY: AMBULANCE LOS ROBLES INJURED ONLY) TRANSPORTED BY: AMBULANCE LOS ROBLES RECRIBE MUDRIES LOS ROBLES LOS ROBLES ID. NUMBER MO. DAY YEAR REVIEWER'S NAME MO. DAY YEAR																		
INJURED ONLY) TRANSPORTED BY: AMBULANCE DESCRIBE INJURIES SHATTERED LEFT CLAVICAL, 5 FRACTURED RIBS ON LEFT SIDE OF TORSO, HEMATOMA ON LEFT SIDE OF HEAD, PAIN ON RIGHT SIDE OF BACK TAKEN TO: VICTIMOF VIOLENT CRIME NOTIFIED INJURED ONLY) TRANSPORTED BY: TAKEN TO: LOS ROBLES INJURED ONLY) TRANSPORTED BY: TAKEN TO: LOS ROBLES DESCRIBE RIJURIES LOS ROBLES DESCRIBE RIJURIES LARGE LUMP ON BACK OF HEAD IN THE LEFT SIDE, BRUISING ON LEFT THIGH, CAMPLAINT OF PAIN TO LEFT SIDE OF TORSO PREPARER'S NAME I.D. NUMBER NO. DAY YEAR REVIEWER'S NAME MO. DAY YEAR					L3	(20)	T	T (***)		J			<u></u> _	VICTIM OF	VIOLENT C	RIME NOT	FIED	
INJURED ONLY) TRANSPORTED BY: # 41 F X INJURED ONLY) TRANSPORTED BY: AMBULANCE LOS ROBLES SHATTERED LEFT CLAVICAL, 5 FRACTURED RIBS ON LEFT SIDE OF TORSO, HEMATOMA ON LEFT SIDE OF HEAD, PAIN ON RIGHT SIDE # 41 F X INJURED ONLY) TRANSPORTED BY: AMBULANCE LOS ROBLES INJURED ONLY) TRANSPORTED BY: AMBULANCE LOS ROBLES L	, , ,		44	F		<u> X</u>	<u> </u>			X			Ш	02	0			0
AMBULANCE SHATTERED LEFT CLAVICAL, 5 FRACTURED RIBS ON LEFT SIDE OF TORSO, HEMATOMA ON LEFT SIDE OF HEAD, PAIN ON RIGHT SIDE WICHIMOF VIOLENT CRIME NOTIFIED # 41 F X 0 02 0 P; A 0 INJURED ONLY) TRANSPORTED BY: AMBULANCE LOS ROBLES LOS ROBLES LOS ROBLES LARGE LUMP ON BACK OF HEAD IN THE LEFT SIDE, BRUISING ON LEFT THIGH, CAMPLAINT OF PAIN TO LEFT SIDE OF TORSO WICHIMOF VIOLENT CRIME NOTIFIED VICTIM OF VIOLENT CRIME NOTIFIED VICTIM OF VIOLENT CRIME NOTIFIED VICTIM OF VIOLENT CRIME NOTIFIED WICH OF VIOLENT CRIME NOTIFIED VICTIM OF VIOLENT CRIME NOTIFIED VICTIM OF VIOLENT CRIME NOTIFIED															·	TELEPH	ONE	
SHATTERED LEFT CLAVICAL, 5 FRACTURED RIBS ON LEFT SIDE OF TORSO, HEMATOMA ON LEFT SIDE OF HEAD, PAIN ON RIGHT SIDE WICTIMOF VIOLENT CRIME NOTIFIED	1"		D BY:						OBLES									
WICTIM OF VIOLENT CRIME NOTIFIED # 41 F X D X D YEAR INJURED ONLY) TRANSPORTED BY: AMBULANCE LOS ROBLES DESCRIBE INJURIES LARGE LUMP ON BACK OF HEAD IN THE LEFT SIDE, BRUISING ON LEFT THIGH, CAMPLAINT OF PAIN TO LEFT SIDE OF TORSO WICTIM OF VIOLENT CRIME NOTIFIED VICTIM OF VIOLENT CRIME NOTIFIED VICTIM OF VIOLENT CRIME NOTIFIED WICTIM OF VIOLENT CRIME NOTIFIED PREPARERS NAME 1D. NUMBER MO. DAY YEAR REVIEWER'S NAME MO. DAY YEAR			CL AV	CAL 5	ED A OTI	unen n	20 ON LEST 010											
# 41 F X D DOZ 0 P A 0 INJURED ONLY) TRANSPORTED BY: AMBULANCE LOS ROBLES DESCRIBE INJURIES LARGE LUMP ON BACK OF HEAD IN THE LEFT SIDE, BRUISING ON LEFT THIGH, CAMPLAINT OF PAIN TO LEFT SIDE OF TORSO VICTIM OF VIOLENT CRIME NOTIFIED PREPARER'S NAME 1D. NUMBER MO. DAY YEAR REVIEWER'S NAME MO. DAY YEAR MO. DAY YEAR	OF BACK	(CD CERT	CLAVI	CAL, S	PRACT	UKEU KI	B2 ON LEFT SID	E OF TORSO,	HEMAT	OMA	ON LE	FT SIDI	E OF	HEAD,	PAIN (ON RIC	€HT S	DE
# 41 F X D DOZ 0 P A 0 INJURED ONLY) TRANSPORTED BY: AMBULANCE LOS ROBLES DESCRIBE INJURIES LARGE LUMP ON BACK OF HEAD IN THE LEFT SIDE, BRUISING ON LEFT THIGH, CAMPLAINT OF PAIN TO LEFT SIDE OF TORSO VICTIM OF VIOLENT CRIME NOTIFIED PREPARER'S NAME 1D. NUMBER MO. DAY YEAR REVIEWER'S NAME MO. DAY YEAR MO. DAY YEAR																		1
INJURED ONLY) TRANSPORTED BY: AMBULANCE LOS ROBLES LOS ROBLES LARGE LUMP ON BACK OF HEAD IN THE LEFT SIDE, BRUISING ON LEFT THIGH, CAMPLAINT OF PAIN TO LEFT SIDE OF TORSO VICTIM OF VIOLENT CRIME NOTIFIED PREPARER'S NAME 1D. NUMBER MO. DAY YEAR MO. DAY YEAR MO. DAY YEAR	<u></u>		· · · · · ·			((2)		Т ==					<u>`</u>	/ICTIM OF	VIOLENT CR	IME NOTI	FÆD	
TAKEN TO: AMBULANCE LOS ROBLES DESCRIBE INJURIES LARGE LUMP ON BACK OF HEAD IN THE LEFT SIDE, BRUISING ON LEFT THIGH, CAMPLAINT OF PAIN TO LEFT SIDE OF TORSO VICTIM OF VIOLENT CRIME NOTIFIED PREPARER'S NAME 1D. NUMBER MO. DAY YEAR REVIEWER'S NAME MO. DAY YEAR			41	F		[X]				X				02	0	,	_^_	0
AMBULANCE LOS ROBLES DESCRIBE INJURIES LARGE LUMP ON BACK OF HEAD IN THE LEFT SIDE, BRUISING ON LEFT THIGH, CAMPLAINT OF PAIN TO LEFT SIDE OF TORSO VICTIM OF VIOLENT CRIME NOTIFIED PREPARERS NAME ID. NUMBER MO. DAY YEAR REVIEWER'S NAME MO. DAY YEAR																TELEBRA	DAG	
LARGE LUMP ON BACK OF HEAD IN THE LEFT SIDE, BRUISING ON LEFT THIGH, CAMPLAINT OF PAIN TO LEFT SIDE OF TORSO VICTIM OF VIOLENT CRIME NOTIFIED PREPARER'S NAME I.D. NUMBER MO. DAY YEAR REVIEWER'S NAME MO. DAY YEAR	•		BY:						OBLES									
PREPARER'S NAME I.D. NUMBER MO. DAY YEAR REVIEWER'S NAME MO. DAY YEAR MO. DAY YEAR	DESCRIBE INJUR	RIES	ACK C	TE DE	10 IN T	JE 1 222	CIDE ABOUT											
PREPARER'S NAME 1D. NUMBER MO. DAY YEAR REVIEWER'S NAME MO. DAY YEAR	LARGE LI	DINIP ON B	MUR (or MEA	או או טיי	ac LEPT	SINE, BKUISING	ON LEFT TH	IGH, CA	MPLA	INT C	F PAIN	TO L	EFT SI	DE OF	TORS	0	
PREPARER'S NAME 1D. NUMBER MO. DAY YEAR REVIEWER'S NAME MO. DAY YEAR													_					
MO. DAY YEAR	DDCDADCS:D+14	ME				10.20	MADEO	140 544	,				V	CTIM OF	VIOLENT CR			
Fermin Hernandez 5172						l		MO. DAY YEAR	· R	:VIEWER'S	NAME					MO. DA	Y YEA	R

STATE OF CALIFORNIA

NJURED / WITNESS	1	PASSENGERS
------------------	---	------------

	age 3 (Rev. 1-0					γ								P/	AGE_	OF	
DATE OF COL 02/24/201	LISION (MO. DAY	YEAR)		TIME (24 0544	00)	NCIC#		OFFICEF 5310	R I.D.				NUMBE 15-21				•
UZIZ41ZU		400 A 400			NT OF IN		X" ONE)	0010	MILIDI	D WA	S ("X" ONE)	1. *** *****	10-21	1240		- September - Sept	
WITNESS ONLY	PASSENGER ONLY	AGE	SEX	FATAL INJURY	SEVERE INJURY	OTHER VISIBLE INJURY	COMPLAINT OF PAIN	DRIVER	PASS.	PED.	BICYCLIST	OTHER	PARTY NO.	SEAT POS.	AIR BAG	SAFETY EQUIP.	EJECTE
□#	⋈	62	М		×				×							 	
NAME / D.O.B.	/ ADDRESS						-						TELEPH	ONE			I. <u></u>
(INJURED ONL	_y) transporte	D BY:							NTO:	TY ME	MORIAL HO	SPITAL					<u> </u>
DESCRIBE INJ	URIES ED LEFT ELE	30W		,,			**										
									····			Г	П мети	05/10/1	TAIT OFFI	E NOTIFIED	
□#	×	54	М				\boxtimes		×				_ vicinv	OF VIOLE	INT CRIMI	= NOTIFIED	
NAME / D.O.B.					·	1			.1. ==	,	<u> </u>	<u> </u>	TELEPH	IONE	L	L	
(INJURED ONL	Y) TRANSPORTE	D BY:							 N TO: MMUNIT	Y ME	MORIAL HO	OSPITAL	_				
DESCRIBE INJ SORE RIG					· · · · · · · · · · · · · · · · · · ·					7 (1112		-	<u> </u>				
SORE LOV			•														
					P==-							[VICTIM	OF VIOLE	NT CRIME	NOTIFIED	
□# NAME / D.O.B.	/AODRESS	45	М										TELEPH	IONE	<u> </u>		
(INJURED ONL	Y) TRANSPORTED	BY:						TAKE						·			
DESCRIBE INJI					·			CON	MUNIT	Y MEI	MORIAL HO	SPITAL	-				
BACK SPA				· · · · ·										=	· 		
													☐ VICTIM	OF VIOLE	NT CRIME	NOTIFIED	
□#	ADDRESS	68	М				×		X				TELEPH	IONE			
MUNDED OM	y) transported	DV.						T.1//C/					recern	ONE			
		ют:		- n <u>-</u> .				TAKEI CON		Y MEI	MORIAL HO	SPITAL					
DESCRIBE INJU COMPLAIN	JRIES T OF PAIN TO) LEFT	ΓKNE	E, GROI	N, NECK	AND SI	HOULDER	R, HEAD									
													□ VICTIM	OE VIOLE	NT CRIME	MOTIFIED	
 #	Ø	65	M				Ø		×				3 4101114	OF VIOLE	IVI CRIME	NOTIFIED	-
NAME / D.O.B. /	ADDRESS						-		· ·				TELEPH	ONE			
(INJURED ONLY	') TRANSPORTED	BY:					-	TAKEI COM		Y MEI	MORIAL HO	SPITAL					
DESCRIBE INJU	IRIES T OF PAIN TO	SPIN	E, HE	AD, SHO	OULDER	S, HIPS,	KNEES						<u> </u>				
															· · · · · · · · · · · · · · · · · · ·		
□#		57	M		×								_ VICTIM	OF VIOLE	ENT CRIME	NOTIFIED	
NAME / D.O.B. /	ADDRESS	·-								_ 		<u></u>	TELEPH	ONF	└ ─── 		_
(INJURED ONLY) TRANSPORTED (BY:		VI.	~~			TAKEN	TO:	Y MFN	MORIAL HC	SPITAI					
DESCRIBE INJU FRACTURE						,				. 341-[1			·		· · ·		
	OF PAIN TO	RIGH	T SH	OULDER	LEFT F	RIBS, LEI	FT SHIN		-						<u>-</u>	<u> </u>	
PREPARER'S NA	ME .				110	NUMBER	MO	DAY YE	ΔR	- DI	EVIEWER'S NAI		VICTIM	OF VIOLE	NT CRIME !		
					- 1	10		. DAT TE	-A13		-vicyyck 6 NAI	VIC.			MO, DA	Y YEAR	

STATE OF CALIFORNIA INJURED / WITNESS / PASSENGERS CHP 555 Page 3 (Rev. 1-03) OPI 061 PAGE OF DATE OF COLLISION (MO. DAY YEAR) TIME (2400) NCIC# OFFICER I.D. NUMBER 0544 5604 2-24-15 5310 15-21246 EXTENT OF INJURY ("X" ONE) INJURED WAS ("X" ONE) OTHER WITNESS PASSENGER ONLY SEVERE COMPLAINT FATAL PARTY NO. SEAT POS. AGE SEX SAFETY EQUIP VISIBLE DRIVER BICYCLIST PASS PED. OTHER ONLY INJURY INJURY OF PAIN EJECTED INJURY BAG \boxtimes 67 **□**# Μ \boxtimes \boxtimes 図 NAME / D.O.B. / ADDRESS TELEPHONE (INJURED ONLY) TRANSPORTED BY: TAKEN TO: COMMUNITY MEMORIAL HOSPITAL DESCRIBE INJURIES COMPLAINT OF PAIN TO LEFT FACE AND CHEST LACERATION ON LEFT SHIN VICTIM OF VIOLENT CRIME NOTIFIED □# \boxtimes 42 \Box \boxtimes NAME / D.O.B. / ADDRESS TELEPHONE (INJURED ONLY) TRANSPORTED BY: TAKEN TO: COMMUNITY MEMORIAL HOSPITAL DESCRIBE INJURIES UNKNOWN LOWER BODY INJURY VICTIM OF VIOLENT CRIME NOTIFIED □# \boxtimes 39 М \times \boxtimes TELEPHONE (INJURED ONLY) TRANSPORTED BY: TAKEN TO: COMMUNITY MEMORIAL HOSPITAL DESCRIBE INJURIES COMPLAINT OF PAIN TO NECK ☐ VICTIM OF VIOLENT CRIME NOTIFIED □# NAME / D.O.B. / AODRESS 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

5310

2-24-15

STATE OF CA		0 / 0 /		10550														
CHP 555 Pa	/ WITNES : age 3 (Rev. 1-	S / P A 03) OF	455EF Pl061	NGERS										P/	AGE 3	OF		
DATE OF COLLISION (MO. DAY YEAR) TIME (2400) NCIC# OFFICER I.D.										NUMBER								
02/24/2015 0544 5604 5097										15-21	246							
		ł		EXT	ENT OF I	NJURY ("	X" ONE)		INJURE	D WAS	("X" ONE)	·					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
WITNESS ONLY	PASSENGER ONLY	AGE	+	FATAL INJURY	SEVERE INJURY	OTHER VISIBLE INJURY	COMPLAINT OF PAIN	DRIVER	PASS.	PEO.	BICYCLIST	OTHER	PARTY NO.	SEAT POS.	AIR BAG	SAFETY EQUIP.	EJECTED	
□#		58	M														0	
NAME / D.O.B.	/ ADDRESS												TELEPH	ONE				
(INJURED ONL	Y) TRANSPORTI JLANCE	ED BY:						TAKEI LOS		S HO	SPITAL					<u> </u>		
DESCRIBE INJURIES FRACTURE TO LOWER BACK, ADMITTED TO LOS ROBLES HOSPITAL																		
TRAIN CO	NDUCTOR												VICTIM	OF VIOLE	NT CRIMI	E NOTIFIED		
□#		31	M				×		Ø							.,	0	
NAME / D.O.B.	/ ADDRESS												TELEPH	ONE		J		
(INJURED ONL	Y) TRANSPORTE JLANCE	ED 8Y:						TAKEI ST	NTO: JOHNS	HOSP	ITAL, OXN	ARD						
DESCRIBE INJU ABRASION		r ELBO	DW, PA	AIN TO B	ACK AN	D NECK	AREA.									<u> </u>		
													· · · · · · · · · · · · · · · · · · ·					
TRAIN ENG	and the second of the	INEE	- المستحددة	/*	· ·	,		parameter 1				[☐ VICTIM	OF VIOLE	NT CRIME	NOTIFIED		
⊠#		59	M															
NAME / D.O.B. /	ADDRESS												TELEPA	IONE				
(INJURED ONL)	Y) TRANSPORTE	D BY:						TAKE	NTO:									
DESCRIBE INJU	JRIES						······································											
										········								
						· · · · · · · ·						[VICTIM	OF VIOLE	NT CRIME	NOTIFIED	<u>-</u>	
□ #			}		П			Гп		П	П				or cityle	NOTHIED		
NAME / D.O.B. /	ADDRESS		1	<u> </u>	l. <u></u>		·	L . 		l_ 	L	<u> </u>	TELEPH	ione	Li			
														· · · · · · · · · · · · · · · · · · ·				
(INJURED ONL)	/) TRANSPORTE	D BY:			· · · · · · · · · · · · · · · · · · ·			TAKEI	NTO:		,, <u>.</u>							
DESCRIBE INJU	JRIES					· · · · · · · · · · · · · · · · · · ·			,, , <u>-</u>									
					· · · · · · · · · · · · · · · · · · ·	·		 			<u>.</u>	-		051401				
						· -							VICTIM	OF AIOTE	NT CRIME	NOTIFIED		
NAME / D.O.8. /		L	1					<u> </u>					TELEPI	ONE	L,l			
(INJURED ONLY) TRANSPORTE	D BY;	• • •					TAKEI	NTO:			-		<u>-</u>	 -			
DESCRIBE INJU	RIES										<u></u>					,		
	·····			— ——					-	····					 ,			
	-							•				ſ	VICTIM	OF VIOLE	NT CRIME	NOTIFIED	——	
□ #															ST TIME			
NAME / D.O.B. /						·			·			<u> </u>	TELEPH	ONE	'			

TAKEN TO:

REVIEWER'S NAME

MO. DAY YEAR

02/24/2015

I.D. NUMBER

5097

☐ VICTIM OF VIOLENT CRIME NOTIFIED

MO. DAY YEAR

(INJURED ONLY) TRANSPORTED BY:

DESCRIBE INJURIES

PREPARER'S NAME

INJURED / WITNESS / PASSENGERS CHP 555 Page 3 (Rev. 11-06) OPI 065 Page of DATE OF COLLISION (MO. DAY YEAR) TIME (2400) OFFICER I.D. NUMBER EXTENT OF INJURY ("X" ONE) WITNESS ONLY PASSENGER ONLY INJURED WAS ("X" ONE) AGE SEX PARTY SEAT POS. SAFET SEVERE OTHER VISIBLE COMPLAINT OF PAIN EJECTED DRIVER PASS. PED. BICYCLIST OTHER INJURY INJURY INJURY 7# NAME / D. O. B. / A (INJURED ONLY) DESCRIBE INJURI WA) 10 FIRST PASSENGER CAR ____ VICTIM OF VIOLENT CRIME NOTIFIED NAME / D. O. (INJURED ON DESCRIBE IN PASSENGER CAR VICTIM OF VIOLENT CRIME NOTIFIED (INJUI DESC FIRST PASSENGER CAR TRAIN PASSENGERS TIM OF VIOLENT CRIME NOTIFIED NAME / D. C TELEPHONE 93033 (INJURED ONLY) TRANSPORTED BY DESCRIBE INJURIES TUAS 174 E THIRD TIM OF VIOLENT CRIME NOTIFIED NAME / D TELEPHONE 93033 (INJURED ONLY) TRANSPORTED BY 0075 DESCRIBE INJURIES WAS SECOND 02 VICTIM OF VIOLENT CRIME NOTIFIED NAME (INJUR DESCR #206 on CAR 0,0 THE BOTTOM VICTIM OF VIOLENT CRIME NOTIFIED PREPAR I.D. NUMBER DAY YEAR REVIEWER'S NAME MO. DAY 5098 42 20 15

STATE OF CALIFORNIA

DATE OF COLLISION (MO. DAY YEAR) 02/24/2015				TIME (2400))	NCIC #	604			OFFIC	ER I.D		<u></u>				NUM	MBER				
		Ī		EXTER		JURY ("X"	ONE		+	M.JL	517 JREC	WAS	· ("X"	' ON	JE\		\neg	2015-	0002	1246		
WITNESS ONLY	PASSENGER ONLY	AGE	SEX	FATAL SNJURY	SEVERE		HER VISIBLE INJURY	T	COMPLAINT OF PAIN	DRIVE		PA9\$.	PEO.	$\overline{}$		ОТН		RTY	SEAT POS.	AIR BAG	SAFETY EQUIP.	EJECTE
 		19	F					_	X	X	T	П	П	1	7	F	7 0)2	0	P		
N				,								لبينا			<u></u> _		., <u> </u>		<u> </u>		PHONE	0
(INJURED ON AMBUL	ILY) TRANSPORT	ED BY:							TAKEN TO: LOS R	OBLE						 -						
DESCRIBE IN	JURIES						- , , , , , , , , , , , , , , , , , , ,			OBLE	0							• • •				
COMPL	AINT OF P	AIN TO	O FOM	ER BA	CK, SORI	ENESS 1	TO LEFT A	ARM														
		1	· ·	I						ļ							VICTIA	OF 1	VIOLENT C	RIMEN	OTIFIED	
		<u> </u>	M						X			X]] 0	2	0	Р	¦ A	0
N																				TELE	PHONE	
(INJURED ON AMBUL)	ILY) TRANSPORTI ANCE	ED 8Y:							TAKEN TO: LOS R	OBI E	s									~		_
DESCRIBE IN.	JURIES			• • • • • • • • • • • • • • • • • • • •			 -			ODLL	<u>. </u>											
UNKNO'	WN																					
ļ																						
<u> </u>						1	······································				- -						VICTIA	A OF	VIOLENT CI	RIME NO	TIFIED	
# NAME / D. O. E	LADOUEGO			Щ.							Щ]_]					
<u> </u>						. <u>.</u>														TELEP	HONE	
(INJURED ON	LY) TRANSPORTE	D BY:							TAKEN TO:													
DESCRIBE INJ	JURIES																			···-		
																_	_					
					T					1		 1				L	VICTIM	OF Y	VIOLENT CE	RIME NO	TIFIED	
# NAME / 0. 0. B	3 (ADDRESS					<u> </u>		Щ.]_						1	
										<u>.</u>										TELEPI	HONE	
(INJURED ONL	LY) TRANSPORTE	D BY:							TAKEN TO:													
DESCRIBE INJ	IURIES																					
																_	_					
<i></i> #		Т	т			· · · · · · ·				T	1.						VICTIA	OF \	VIOLENT CR	ME NOT	FIED	
NAME / D. O. B	/ADDRESS					<u> </u>]			,	1	
																				TELEPH	ONE	
(INJURED ONL	Y) TRANSPORTE) BY:							TAKEN TO:													
DESCRIBE INJ	URIES													· · · · · · · ·								
																_						ŀ
<u> </u> #		—т				1	r1	T		Τ.	Τ.						VICTIM	OF V	/IOLENT CRI	ME NOT	FIED	
NAME / D. O. B.	(ADDRESS]]			1		
								·				· · · · · · · · · · · · · · · · · · ·								TELEPHO	ONE	
<u> </u>	Y) TRANSPORTED	01:		- · · · · · · · · · · · · · · · · · · ·					TAKEN TO:									_	-			
DESCRIBE INJU	URIES																					
																						1
																	,					
PREPARER'S N	IAME				ID NI	JMBER		MO	DAY YEAR	- "- T.	DEVIC	WER'S	MAUE				VICTIM	OF V	IOLENT CRI			
					517			,,,,	OAI IEAN		VC AIF	.,ven 8	**ANTE							MO. DA	Y YEA	R
Į.																			- 1			1

train 206 top floor

Train 263 Bottom floor

Train 263 Top floor

Train 211 Top Floor

I contacted the following people:



Passangers info 15-21246

1 message



Wed, Feb 25, 2015 at 10:33 AM





Re: Names of train passengers

1 message

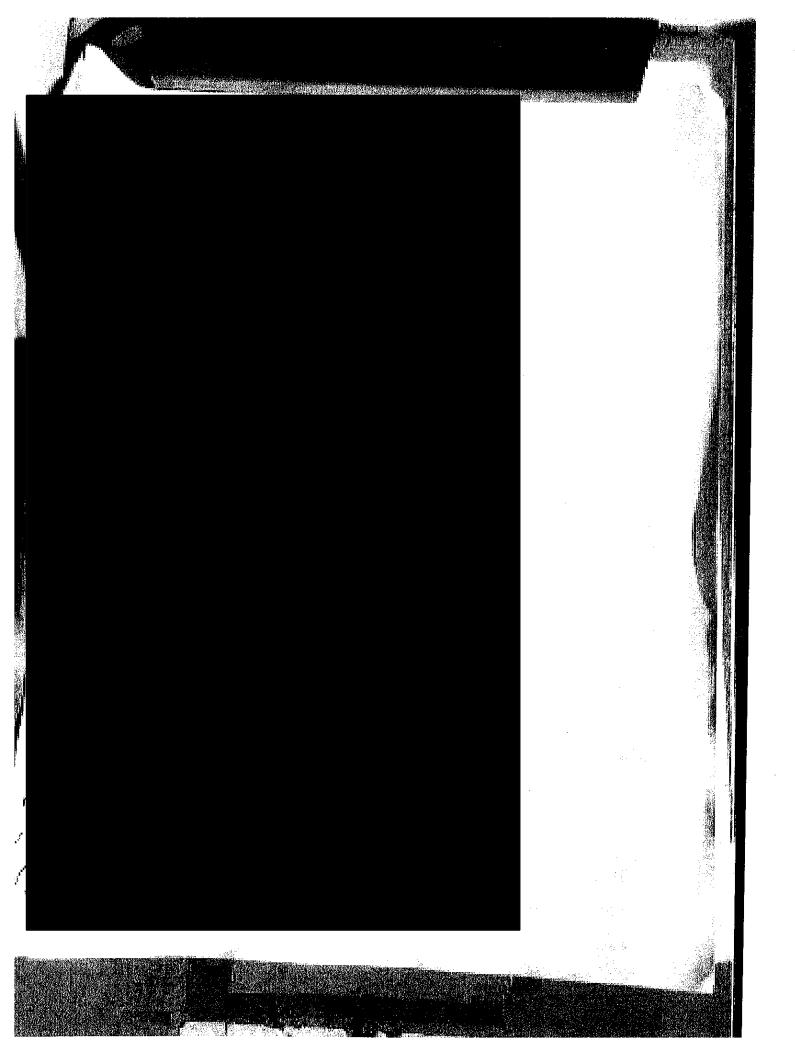
Wed, Feb 25, 2015 at 2:37 AM

here is the list of passenger info I obtained

4th car, upstairs
3rd car, bottom
3rd car, bottom
4th car, middle.



.



This guy was a walk-in patient at VCMC. He may have been contacted and interviewed at the scene prior to leaving; however, I took his info again and additional photos.	
No phone # personal email:	
Statement: seated in car #211 on second level towards front, but facing the rear. He saw flames and crash and felt sudded derailment of the car. Said his car was perpendicular to tracks then landed on its side. Was thrown down the stairs of the compartment and when the train came to rest he was then on the first level. Broke a window to exit but saw how close they were to flames. He returned inside the train to help others injured until help arrived. Complaint of pain to lower left back and base of back of head. Pain to both hip areas Abrasions/lacerations to back possibly from glass.	
Photos taken by myself and Officer from VCMC and CMH were left with Sgt as well as photos from Los Robles by Det.	
Officer	

STATE OF CALIFORNIA - OXNARD POLICE DEPARTMENT NARRATIVE/SUPPLEMENTAL

5135

PAGE OF

//Pitting C. F. and James	NCIC.	065	er ID No.	D.R. Number	The state of the s		
Date/Time of Incident: 2/24/15 / 0545	NCIC: 5604	5135		15-21246	er:		
"X" ONE "X" ONE	TYPE SUPPLEMENTA		and the second of the second and the second of the second	10 21210			
Narrative Collision Report	BA Updat		Fatal	Hit and Run	Update		
Supplemental Uther:	Hazardous	Materials _	School Bus	Other:	CITATION NUMBER		
OXNARD / VENTURA / VENTU	ЛRA			/31	c		
LOCATION / SUBJECT			STATE H	IGHWAY RELATED	⊠ No		
RICE AVE / FIFTH ST					Z 110		
W-2							
STATE FARM INS. STATEMENTS: SAID SHE WAS SHE LOOKED TOWARDS THE TRACE PARTIALLY ON THE TRACE. SHE DESSHE SAID THE TRUCK WAS AT AN WERE OFF. SHE THEN SAW THE TRACE ANYONE IN THE TRUCK, OR GOING RAILROAD TRACE CROSSING GO DO	AS MAKING A CK ON HER SCRIBED IT A ANGLE. SHE AIN COMING B TO OR FRO	TURN FROM RIGHT AND S A CITY OF SAID THE DO FROM THE WO	SAW A TRI OXNARD GF OORS WERI /EST GOING SAID SHE S	JCK PULLING RAFFITI REMO E SHUT AND B EAST. SHE AW THE AR	OVAL TRUCK. THE LIGHTS DID NOT SEE MS FOR THE		
SAID HE WAS IN VEHICLE HE WAS STOPPED AT THE LIMIT LIN LIGHTS WERE WORKING. HE WAS S PASSED IN FRONT. HE DESCRIBED NOT SEE WHERE THE TRUCK THAT THE TRACKS IN THE ROAD BECAUSE HE SAID HE WAS VERY SCARED, AN TO UNDERSTAND. HE WAS RAMBLIN CALM DOWN AND SPEAK TO ME. THE WINDOW TO BREAK.	IE. HE SAID TARTLED BY WHAT HE S GOT HIT WA HE DID NOT ID WHEN I FI IG AND AFTE	THE ARMS W A LOUD AND AW LATER A AS. HE KEPT T SEE A TRUG RST SPOKE ER ABOUT AN	ERE DOWN VERY CLO S "AN EXPL ASKING ME CK THERE F TO HIM HIS N HOUR ON	AND THE FL SE "BOOM" A OSION." HE E IF IT WAS S PRIOR TO TH SPEECH WA SCENE HE V	ASHING RED AS THE TRAIN SAID HE DID STOPPED ON E COLLISION. AS DIFFICULT		
OFFICER ACTIONS: ON 2-24-15, AT A WITH A COLLISION INVOLVING UPON ARRIVAL, I USED MY VEHICLE	A TRAIN VE	RSUS A VEHI	CLE.				
THE INTERSECTION. PREPARER'S NAME AND I.D. NUMBER	DATE	REVIEWER'S NAME		· · · · · · · · · · · · · · · · · · ·	DATE		

2-24-15

STATE OF CALIFORNIA - OXNARD POLICE DEPARTMENT NARRATIVE/SUPPLEMENTAL

PAGE OF

Date/Time of Incident:	NCIC:	Officer ID No.	D.R. Number:
2-24-15 / 0544	5604	4879	15-21246
"X" ONE Narrative Supplemental Other: OXNARD / VENTURA		Fatal School Bus REPORTH 1/12	Hit and Run Update Other: OG DISTRICT/BEAT CITATION NUMBER CGHWAY RELATED
	SINGE /		
STATEMENTS:			
Victim:			
W/M 5'10"/160 Brown/Hazel			
VV/IVI 3 10 / 100 BIOWII/I Iazei			
to the flames. He decided to return insicular complained of pain to his lower also sustained some abrasions downloaded them to a CD.	iter providing his info ore, he went to VCM was on the second I mes as car 211 was ne impact car 211 wa 11 came to rest, rindow in an attempt ide to help assess the r left back, the base s to his back from br	rmation. di C for treatment. evel and facing the passing it then the second found himself to get out and saw to injuries of the vict of the back of his hocken glass. I took p	told me he was rear of the train. sudden derailment. he tracks, causing him to on the first level with the that they were very close ims until help arrived. ead, and to both hips.
OFFICER ACTIONS:			
On 2-24-15 at approximately 0900 hour responded to Ventura County Medical Collision that occurred in Oxnard. I responded	Center to assist in co	n Oxnard School Rontacting victims invo	esource Officer when I olved in a Metrolink and Officer
At Ventura County Medical Center Office took photos of the victims (barcode #26 information. For details, refer to all other	9993), and I obtaine	d authorizations for	medical release of
At VCMC I obtained authorizations for n			
I learned that the following subjects	s were also being tre	ated, but unable to	contact and sign the
PREPARER'S NAME AND I.D. NUMBER / 4879	DATE REVIEWER	S NAME	DATE