



FLORIDA HIGHWAY PATROL
 MEDIA RELEASE
 TALLAHASSEE REGIONAL COMMUNICATIONS CENTER



12/7/15 3:45 AM State Road 85 /Thomas Road OKALOOSA
 DATE TIME PM LOCATION OF INCIDENT COUNTY

VEHICLE #	1	1998	Chev	Pickup	\$ 5000	ALCOHOL RELATED?	Yes <input type="checkbox"/> No <input type="checkbox"/> Pend <input checked="" type="checkbox"/>
		YEAR	MAKE	MODEL	DAMAGE	SEATBELT / HELMET IN USE?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
						RELATIVE NOTIFIED?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
DRIVER:	James D Lack			49	Crestview, FL		
	NAME			AGE	CITY / STATE OF RESIDENCE		
INJURIES:	NONE <input type="checkbox"/>	MINOR <input type="checkbox"/>	SERIOUS <input type="checkbox"/>	CRITICAL <input type="checkbox"/>	FATAL <input checked="" type="checkbox"/>	HOSPITAL	
PASSENGER:	Kevin P Lack			42	Crestview, FL		
	NAME			AGE	CITY / STATE OF RESIDENCE		
INJURIES:	NONE <input type="checkbox"/>	MINOR <input checked="" type="checkbox"/>	SERIOUS <input type="checkbox"/>	CRITICAL <input type="checkbox"/>	FATAL <input type="checkbox"/>	SEATBELT / HELMET IN USE?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
					HOSPITAL	RELATIVE NOTIFIED?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

VEHICLE #	<input type="checkbox"/>	YEAR	MAKE	MODEL	\$	ALCOHOL RELATED?	Yes <input type="checkbox"/> No <input type="checkbox"/> Pend <input type="checkbox"/>
					DAMAGE	SEATBELT / HELMET IN USE?	Yes <input type="checkbox"/> No <input type="checkbox"/>
						RELATIVE NOTIFIED?	Yes <input type="checkbox"/> No <input type="checkbox"/>
DRIVER:	NAME			AGE	CITY / STATE OF RESIDENCE		
INJURIES:	NONE <input type="checkbox"/>	MINOR <input type="checkbox"/>	SERIOUS <input type="checkbox"/>	CRITICAL <input type="checkbox"/>	FATAL <input type="checkbox"/>	HOSPITAL	
PASSENGER:	NAME			AGE	CITY / STATE OF RESIDENCE		
INJURIES:	NONE <input type="checkbox"/>	MINOR <input type="checkbox"/>	SERIOUS <input type="checkbox"/>	CRITICAL <input type="checkbox"/>	FATAL <input type="checkbox"/>	SEATBELT / HELMET IN USE?	Yes <input type="checkbox"/> No <input type="checkbox"/>
					HOSPITAL	RELATIVE NOTIFIED?	Yes <input type="checkbox"/> No <input type="checkbox"/>

PEDESTRIAN:	NAME			AGE	CITY / STATE OF RESIDENCE		
INJURIES:	NONE <input type="checkbox"/>	MINOR <input type="checkbox"/>	SERIOUS <input type="checkbox"/>	CRITICAL <input type="checkbox"/>	FATAL <input type="checkbox"/>	ALCOHOL RELATED?	Yes <input type="checkbox"/> No <input type="checkbox"/> Pend <input type="checkbox"/>
						RELATIVE NOTIFIED?	Yes <input type="checkbox"/> No <input type="checkbox"/>
HOSPITAL	_____						

CHARGES: Pending Traffic Homicide Investigation

NARRATIVE:
 V01 was travelling south on State Road 85, north of the intersection with Thomas Road. Driver 1 failed to negotiate a left curve in the road. V01 left the roadway and entered the west grass shoulder. V01 struck an embankment and overturned. V01 came to final rest on the State Road 85 west shoulder, upside down, facing south.

 Driver 1 succumbed to injuries he received in this crash and was pronounced deceased at the scene.

Corporal R. Miller
 CRASH INVESTIGATOR
 Sgt. J.D. Johnson
 REVIEWED BY

Send completed Press Release to:
TallPR@fhp.hsmv.state.fl.us
 Or call
 850-245-7701

Corporal M. Collins
 HOMICIDE INVESTIGATOR
 FHPA15OFF04809
 CASE NUMBER