FLORIDA HIGHWAY PATROL
MEDIA RELEASE
TALLAHASSEE REGIONAL COMMUNICATIONS CENTER

DATE	TIME		LOCATION OF INCIDENT	COUNTY
04/27/14	07:00	☒ AM ☐ PM	West 10 Mile Road @ Haley St	ESCAMBIA

VEHICLE # 1 | YEAR: 2000 | MAKE: Nissan | MODEL: **Maxima** | DAMAGE: $ 8000.00

ALCOHOL RELATED? Yes ☐ No ☒ Pend ☐
SEATBELT / HELMET IN USE? Yes ☐ No ☒
RELATIVE NOTIFIED? Yes ☒ No ☐

DRIVER: KA' DARIUS J. BROADNAX (NAME) | AGE: 20 | CITY / STATE OF RESIDENCE: Pensacola, Florida

INJURIES: NONE ☐ MINOR ☐ SERIOUS ☐ CRITICAL ☒ FATAL ☐ HOSPITAL: Sacred Heart

PASSENGER: None (NAME) | AGE: | CITY / STATE OF RESIDENCE:

INJURIES: NONE ☐ MINOR ☐ SERIOUS ☐ CRITICAL ☐ FATAL ☐ HOSPITAL:
SEATBELT / HELMET IN USE? Yes ☐ No ☐
RELATIVE NOTIFIED? Yes ☐ No ☐

VEHICLE # | YEAR: | MAKE: | MODEL: | DAMAGE: $

ALCOHOL RELATED? Yes ☐ No ☐ Pend ☐
SEATBELT / HELMET IN USE? Yes ☐ No ☐
RELATIVE NOTIFIED? Yes ☐ No ☐

DRIVER: (NAME) | AGE: | CITY / STATE OF RESIDENCE:

INJURIES: NONE ☐ MINOR ☐ SERIOUS ☐ CRITICAL ☐ FATAL ☒ HOSPITAL:

PASSENGER: (NAME) | AGE: | CITY / STATE OF RESIDENCE:

INJURIES: NONE ☐ MINOR ☐ SERIOUS ☐ CRITICAL ☐ FATAL ☐ HOSPITAL:
SEATBELT / HELMET IN USE? Yes ☐ No ☐
RELATIVE NOTIFIED? Yes ☐ No ☐

PEDESTRIAN: (NAME) | AGE: | CITY / STATE OF RESIDENCE:

INJURIES: NONE ☐ MINOR ☐ SERIOUS ☐ CRITICAL ☐ FATAL ☐
ALCOHOL RELATED? Yes ☐ No ☐ Pend ☐
RELATIVE NOTIFIED? Yes ☐ No ☐

HOSPITAL:

CHARGES:

NARRATIVE:

V01 was traveling eastbound on West 10 Mile Road at a high rate of speed. D-1 let V01's right side tires leave the paved portion of the roadway. V01 then crossed the intersection of Haley Lane and partially re-entered the eastbound shoulder of West 10 Mile Road. V01 then re-entered the eastbound lane of West 10 Mile Road continued to travel in a northeasterly direction. V01 crossed the westbound lane leaving paved portion of the roadway, and entered the westbound shoulder still traveling in a northeasterly direction with its left side leading and subsequently, V01's left front collided with a large tree.

Tpr. JA. Freeman	Send completed Press Release to:	N/A
CRASH INVESTIGATOR		HOMICIDE INVESTIGATOR
Sgt. R.L. Padgett	TallPR@fhp.hsmv.state.fl.us	FHPA14OFF020071
REVIEWED BY		CASE NUMBER

REV 2/08

FLORIDA HIGHWAY PATROL
MEDIA RELEASE
TALLAHASSEE REGIONAL COMMUNICATIONS CENTER

DATE _____ TIME _____ ☐ AM ☐ PM LOCATION OF INCIDENT _____ COUNTY ESCAMBIA

VEHICLE # ☐ YEAR _____ MAKE _____ MODEL _____ $ DAMAGE _____
ALCOHOL RELATED Yes ☐ No ☐ Pend ☐
SEATBELT / HELMET IN USE? Yes ☐ No ☐
RELATIVE NOTIFIED Yes ☐ No ☐

DRIVER: NAME _____ AGE _____ CITY / STATE OF RESIDENCE _____

INJURIES: NONE ☐ MINOR ☐ SERIOUS ☐ CRITICAL ☐ FATAL ☐ HOSPITAL _____

PASSENGER: NAME _____ AGE _____ CITY / STATE OF RESIDENCE _____

INJURIES: NONE ☐ MINOR ☐ SERIOUS ☐ CRITICAL ☐ FATAL ☐ HOSPITAL _____
SEATBELT / HELMET IN USE? Yes ☐ No ☐
RELATIVE NOTIFIED? Yes ☐ No ☐

VEHICLE # ☐ YEAR _____ MAKE _____ MODEL _____ $ DAMAGE _____
ALCOHOL RELATED Yes ☐ No ☐ Pend ☐
SEATBELT / HELMET IN USE? Yes ☐ No ☐
RELATIVE NOTIFIED Yes ☐ No ☐

DRIVER: NAME _____ AGE _____ CITY / STATE OF RESIDENCE _____

INJURIES: NONE ☐ MINOR ☐ SERIOUS ☐ CRITICAL ☐ FATAL ☐ HOSPITAL _____

PASSENGER: NAME _____ AGE _____ CITY / STATE OF RESIDENCE _____

INJURIES: NONE ☐ MINOR ☐ SERIOUS ☐ CRITICAL ☐ FATAL ☐ HOSPITAL _____
SEATBELT / HELMET IN USE? Yes ☐ No ☐
RELATIVE NOTIFIED? Yes ☐ No ☐

VEHICLE # ☐ YEAR _____ MAKE _____ MODEL _____ $ DAMAGE _____
ALCOHOL RELATED Yes ☐ No ☐ Pend ☐
SEATBELT / HELMET IN USE? Yes ☐ No ☐
RELATIVE NOTIFIED Yes ☐ No ☐

DRIVER: NAME _____ AGE _____ CITY / STATE OF RESIDENCE _____

INJURIES: NONE ☐ MINOR ☐ SERIOUS ☐ CRITICAL ☐ FATAL ☐ HOSPITAL _____

PASSENGER: NAME _____ AGE _____ CITY / STATE OF RESIDENCE _____

INJURIES: NONE ☐ MINOR ☐ SERIOUS ☐ CRITICAL ☐ FATAL ☐ HOSPITAL _____
SEATBELT / HELMET IN USE? Yes ☐ No ☐
RELATIVE NOTIFIED? Yes ☐ No ☐

VEHICLE # ☐ YEAR _____ MAKE _____ MODEL _____ $ DAMAGE _____
ALCOHOL RELATED Yes ☐ No ☐ Pend ☐
SEATBELT / HELMET IN USE? Yes ☐ No ☐
RELATIVE NOTIFIED Yes ☐ No ☐

DRIVER: NAME _____ AGE _____ CITY / STATE OF RESIDENCE _____

INJURIES: NONE ☐ MINOR ☐ SERIOUS ☐ CRITICAL ☐ FATAL ☐ HOSPITAL _____

PASSENGER: NAME _____ AGE _____ CITY / STATE OF RESIDENCE _____

INJURIES: NONE ☐ MINOR ☐ SERIOUS ☐ CRITICAL ☐ FATAL ☐ HOSPITAL _____
SEATBELT / HELMET IN USE? Yes ☐ No ☐
RELATIVE NOTIFIED? Yes ☐ No ☐

CRASH INVESTIGATOR _____

Send completed Press Release to:

TallPR@fhp.hsmv.state.fl.us

HOMICIDE INVESTIGATOR _____

REVIEWED BY _____

CASE NUMBER _____

REV 2/08

FLORIDA HIGHWAY PATROL
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TALLAHASSEE REGIONAL COMMUNICATIONS CENTER

ADDITIONAL PASSENGER SECTION

VEH# _____ PASS# _____ _____ NAME _____ AGE _____ CITY / STATE OF RESIDENCE
INJURIES: NONE ☒ MINOR ☐ SERIOUS ☐ CRITICAL ☐ FATAL ☐ _____ HOSPITAL SEATBELT / HELMET IN USE? Yes ☐ No ☐
RELATIVE NOTIFIED? Yes ☒ No ☐

VEH# _____ PASS# _____ _____ NAME _____ AGE _____ CITY / STATE OF RESIDENCE
INJURIES: NONE ☐ MINOR ☐ SERIOUS ☐ CRITICAL ☐ FATAL ☐ _____ HOSPITAL SEATBELT / HELMET IN USE? Yes ☐ No ☐
RELATIVE NOTIFIED? Yes ☐ No ☐

VEH# _____ PASS# _____ _____ NAME _____ AGE _____ CITY / STATE OF RESIDENCE
INJURIES: NONE ☐ MINOR ☐ SERIOUS ☐ CRITICAL ☐ FATAL ☐ _____ HOSPITAL SEATBELT / HELMET IN USE? Yes ☐ No ☐
RELATIVE NOTIFIED? Yes ☐ No ☐

VEH# _____ PASS# _____ _____ NAME _____ AGE _____ CITY / STATE OF RESIDENCE
INJURIES: NONE ☐ MINOR ☐ SERIOUS ☐ CRITICAL ☐ FATAL ☐ _____ HOSPITAL SEATBELT / HELMET IN USE? Yes ☐ No ☐
RELATIVE NOTIFIED? Yes ☐ No ☐

VEH# _____ PASS# _____ _____ NAME _____ AGE _____ CITY / STATE OF RESIDENCE
INJURIES: NONE ☐ MINOR ☐ SERIOUS ☐ CRITICAL ☐ FATAL ☐ _____ HOSPITAL SEATBELT / HELMET IN USE? Yes ☐ No ☐
RELATIVE NOTIFIED? Yes ☐ No ☐

VEH# _____ PASS# _____ _____ NAME _____ AGE _____ CITY / STATE OF RESIDENCE
INJURIES: NONE ☐ MINOR ☐ SERIOUS ☐ CRITICAL ☐ FATAL ☐ _____ HOSPITAL SEATBELT / HELMET IN USE? Yes ☐ No ☐
RELATIVE NOTIFIED? Yes ☐ No ☐

VEH# _____ PASS# _____ _____ NAME _____ AGE _____ CITY / STATE OF RESIDENCE
INJURIES: NONE ☐ MINOR ☐ SERIOUS ☐ CRITICAL ☐ FATAL ☐ _____ HOSPITAL SEATBELT / HELMET IN USE? Yes ☐ No ☐
RELATIVE NOTIFIED? Yes ☐ No ☐

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INJURIES: NONE ☐ MINOR ☐ SERIOUS ☐ CRITICAL ☐ FATAL ☐ _____ HOSPITAL SEATBELT / HELMET IN USE? Yes ☐ No ☐
RELATIVE NOTIFIED? Yes ☐ No ☐

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INJURIES: NONE ☐ MINOR ☐ SERIOUS ☐ CRITICAL ☐ FATAL ☐ _____ HOSPITAL SEATBELT / HELMET IN USE? Yes ☐ No ☐
RELATIVE NOTIFIED? Yes ☐ No ☐

VEH# _____ PASS# _____ _____ NAME _____ AGE _____ CITY / STATE OF RESIDENCE
INJURIES: NONE ☐ MINOR ☐ SERIOUS ☐ CRITICAL ☐ FATAL ☐ _____ HOSPITAL SEATBELT / HELMET IN USE? Yes ☐ No ☐
RELATIVE NOTIFIED? Yes ☐ No ☐

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INJURIES: NONE ☐ MINOR ☐ SERIOUS ☐ CRITICAL ☐ FATAL ☐ _____ HOSPITAL SEATBELT / HELMET IN USE? Yes ☐ No ☐
RELATIVE NOTIFIED? Yes ☐ No ☐

VEH# _____ PASS# _____ _____ NAME _____ AGE _____ CITY / STATE OF RESIDENCE
INJURIES: NONE ☐ MINOR ☐ SERIOUS ☐ CRITICAL ☐ FATAL ☐ _____ HOSPITAL SEATBELT / HELMET IN USE? Yes ☐ No ☐
RELATIVE NOTIFIED? Yes ☐ No ☐