

125 EAST 11TH STREET, AUSTIN, TEXAS 78701-2483 | WWW.TXDOT.GOV

Mon, 17 July 2023

## STATE OF TEXAS

This is to certify that I, Jim Markham, am employed by the Texas Department of Transportation (Department); that I am the Custodian of Motor Vehicle Crash Records for such Department; that the attached is a true and correct copy of the peace officer's report filed with the Department referred to in the attached request with the crash date of Tue, 11 July 2023, which occurred in Nueces County; that the investigations of motor vehicle crashes by peace officers are authorized by law; that this Texas Peace Officer's Crash Report is required by law to be completed and filed with this Department; that this report sets forth matters observed pursuant to duty imposed by law as to which matters there was a duty to report, or factual findings resulting from an investigation made pursuant to authority granted by law.

Jim Markham
Director, Crash Data & Analysis Section
Traffic Safety Division
125 East 11<sup>th</sup> Street

Austin, TX 78701-2483



	Law Enforcement and TxDOT Use ONLY  ACTIVE SCHOOL SCHOOL SCHOOL BUS RAILROAD MAB SUPPLEMENT ZONE  Total Num. Units   3 Prsns.   8 Crash ID /202333427  Refer to the attached code sheet for numbered fields  ACTIVE SCHOOL SCHOOL Num. Units   3 Prsns.   8 Crash ID /202333427  Questions? Call 844/274-7457																													
	Texa Departi	ns ment	R)	– Refe	r to the	- attacl	ned cod	e sh	Texas	- s Peace	Officered f	cer's Cı ields		-	•				Ques						<b>)</b> .	Pa	ge 1	of 5		
	of Transp *Crash						· 	h Time				<u> </u>	ase			•				ı.	ocal	,		,	<b>,</b>					
	(MM/DI *County		<b>Y</b> )	07/12	1 / 2	0 2 3		RMM)		2	2	0 III		C2304	1349	)					lse						Outs	ide		
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	Veh. Year   2   0   1   4   Color SIL   Wake JEEP   Veh. Model COMPASS   Style SV    Responder Struck (Explain in Narrative if checked)   B Autonomous Unit (Explain in Narrative if checked)   DL/ID   DL/ID																													
	Type 1 State TX Num. 48132516 Class C End.													96		13 DL Rest.			- 1	B W/DD/Y	/YYY) <sub> </sub>	0	5  /  1	0   /	1	9   8	8   6			
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HCLE,	Address (Street, City, State, ZIP) 12113 DESSAU RD BLDG 6 APT 304, AUSTIN, TX 78754  Name: Last, First, Middle Enter Driver or Primary Person for this Unit on first line  1 1 1 BERRY, JAMES																			_	Drug	Applicab Results river/Pri	are or	lly rep	orted					
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	Fin. Res	sp.		Exempt R		e 2		Nam	ie c	0.	. <del></del>			, <b></b>		Num.	91	.8204	1810						\\\\\	hicle		Yes		
	Phone	-	(80	00) 776-47	737					Rating 1				B D					2				F	<b>D</b>   -	رما ا			'		
Fin. Resp. Phone Num. (800) 776-4737  Towed By DRIVER  29 Vehicle Damage Rating 1													<b>ZA</b> Y																	

	Law Enforcement and TxDOT Use ONLY. Form CR-3 (Rev. 4/1/2023)  Case ID C2304349  Cra											196461		Page 2 of 5							
	Unit Prsn. Taken To										Taken By				Date of (MM/DD	f Death	n Time of Death Y) (24HRMM)				
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▮ ∟	33 Bus Type			RGVW			HazMat (	′es 34 Hazľ		HazMat			34 HazN		azMat			35 Cargo			
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l	Num. Sequen	ce o	•	GVWR	27.000		Type	<b>I</b>	nage?		Num.	<del>                                     </del>	GVWR   lal Shipping		ctual	Туре		Damage? Total Num.	□No		
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	/ Enforcement a FATAL □ C				□ RA	AILROAE	> <b></b>	MAB	SUPF	PLEM	ENT	SCH	TIVE HOC NE			To Nu Un	ital um. nits	l	3	To Nu Pre					DOT ash ID	19646 /2023		
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21	Name <b>NUE</b> In your opinior			sult in at	t least	X Yes	Latitu	ıde				Name	C	ORPUS C	CHRISTI  Longitude —										Limit			
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SONS	City, State, ZIP) 543 CR 396 KENEDY, TX 78119																		g	T	Т			Τ_				
R & PER	Address (Street, City, State, ZIP) 543 CR 396 KENEDY, TX 78119  Name: Last, F Enter Driver or Primary Personal State of Control of C										nit on	first line	e		16 Injury Severity	Age	17 Ethnicity	18 Sex	19 Eject.	20 Restr.	21 Airbag	22 Helmet	23	Sol. 24 Alc. Spec.	Alc. Result	25. Drug Spec.	26 Drug Result	27 Drug Category
DRIVE	1 1	1	PEREZ, IRMA												С	64	н	2	1	1	1	97	N	96		96	97	97
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VEH	3 2	3 2 4 SERENA, ELIDA												C 87 H 2 1 1 97 N for each Unit.														
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& PER	Address (Stree Num. 14 Prsn. Type Type	osition		Ente	r Driv				irst, Mid on for th		nit on	first line	е		16 Injury Severity	√ge	17 Ethnicity	18 Sex	19 Eject	20 Restr	21 Airba	22 Helmet		Sol. 24 Alc. Spec.	Alc. Result	25. Druę Spec.	% Drug ?esult	27 Drug Categor
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	Ву								То																			

Form CR-3 (Rev. 4/1/2023)																		334272					
	Unit Num. Taken To											Taken By	,			Date of (MM/DE	of Death Time of Death (24HRMM)						
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3E			Dama	ged Property Of	ther Than	Vehic	les				Own	er's Name					Own	er's Address					
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ORS &	5 Un	it#		Contributing		Ma	y Have Conti	rib.	Contr	ributing		May Hav	e Contrib.	40 Weather	41 Light	42 Entering	43 Roadway	1	45 Surface	46 Traffic			
FACTORS &														Cond.	Cond.	Roads	Туре	Alignment	Condition	Control			
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