

Kent County Sheriff Department

Public Information Officer: 632-6236
Monday - Friday, 8 a.m. to 5 p.m.

701 Ball Ave. NE, Grand Rapids, MI 49503
Dispatch - 632-6100 / 1-800-442-4661

Information Services: 632-6200
Detective Bureau: 632-6125

News Release

Incident # 13-135484 Date: 8/11/2013 Time of Incident: 0238 Township: 07-Caledonia

Type of Incident: Fatal Accident

Location: 108th St. SE / East of Cherry Valley Ave. SE

Reporting Officer: Deputy Joel Langeland

Assisting Departments: Caledonia Fire/Rescue, Life EMS

Release Completed By: Sgt .Kelley

Fire Ambulance Helicopter Other Police Agencies Utilities etc.

ALCOHOL Contributing Factor?

Y N UNK

Vehicles

ALCOHOL Contributing Factor?

Y N UNK

Veh: 1 Make: Chevy Model: 2500 Pickup Yr: 2002

Veh: _____ Make: _____ Model: _____ Yr: _____

Driver: NOT RELEASED Age: 18

Driver: _____ Age: _____

City: FREEMPORT Twp: _____ State: MI

City: _____ Twp: _____ State: _____

Injuries: FATAL Seatbelt: Y N UNK

Injuries: _____ Seatbelt: Y N UNK

Direction of Travel: E/B

Direction of Travel: S/B

Hospital: NONE Transport By: _____

Hospital: _____ Transport By: _____

Relatives Notified **NO** Names Can Be Released **NO**

Relatives Notified Names Can Be Released

Passengers

Passengers

Name: _____ Age: _____

Name: _____ Age: _____

City: _____ Twp: _____ State: MI

City: _____ Twp: _____ State: _____

Injuries: _____ Seatbelt:

Injuries: _____ Seatbelt:

Hospital: _____ Transport By: _____

Hospital: _____ Transport By: _____

Name: _____ Age: _____

Name: _____ Age: _____

City: _____ Twp: _____ State: _____

City: _____ Twp: _____ State: _____

Injuries: _____ Seatbelt:

Injuries: _____ Seatbelt:

Hospital: _____ Transport By: _____

Hospital: _____ Transport By: _____

Name: _____ Age: _____

Name: _____ Age: _____

City: _____ Twp: _____ State: _____

City: _____ Twp: _____ State: _____

Injuries: _____ Seatbelt:

Injuries: _____ Seatbelt:

Hospital: _____ Transport By: _____

Hospital: _____ Transport By: _____

Name: _____ Age: _____

Name: _____ Age: _____

City: _____ Twp: _____ State: _____

City: _____ Twp: _____ State: _____

Injuries: _____ Seatbelt:

Injuries: _____ Seatbelt:

Hospital: _____ Transport By: _____

Hospital: _____ Transport By: _____

For Additional Vehicles and/or Passengers, Use another News Release Face Sheet

