

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 # 16-135192 Date: 7/19/2016 Time of Incident: 532p Township: 13-Lowell

Type of Incident: Personal injury accident

Location: Segwun Ave SE/Alden Nash Ave SE

Reporting Officer: Deputy Moorehead

Assisting Departments: Lowell Fire and Rockford Ambulance

Release Completed By: Deputy Moorehead

Fire Ambulance Helicopter Other Police Agencies Utilities etc.

ALCOHOL Contributing Factor?

Y N UNK

Vehicles

ALCOHOL Contributing Factor?

Y N UNK

Veh: 1 Make: Licln Model: Mark 7 Yr: 2001

Veh: 2 Make: Freightliner Model: Semi Yr: 2013

Driver: Augustine Theodore Age: 40

Driver: Darby Oconnor Age: 47

City: Greenville Twp: _____ State: MI

City: Kenosha Twp: _____ State: WI

Injuries: Head laceration, knee, neck and elbow pain Seatbelt: Y N UNK

Injuries: none Seatbelt: Y N UNK

Direction of Travel: N/B

Direction of Travel: S/B

Hospital: Spectrum/BW/DT Transport By: RAS

Hospital: _____ Transport By: _____

Relatives Notified YES Names Can Be Released YES

Relatives Notified YES Names Can Be Released YES

Passengers

Passengers

Name: Joshua Streiff Age: 29

Name: _____ Age: _____

City: Greenville Twp: _____ State: MI

City: _____ Twp: _____ State: MI

Injuries: Minor Seatbelt:

Injuries: _____ Seatbelt:

Hospital: None Transport By: _____

Hospital: _____ Transport By: _____

Name: Andrew Mulder Age: 35

Name: _____ Age: _____

City: Greenville Twp: _____ State: MI

City: _____ Twp: _____ State: _____

Injuries: Neck and back pain Seatbelt:

Injuries: _____ Seatbelt:

Hospital: St. Mary's Transport By: RAS

Hospital: _____ Transport By: _____

Name: Nicholas Johnson Age: 20

Name: _____ Age: _____

City: Greenville Twp: _____ State: MI

City: _____ Twp: _____ State: _____

Injuries: Neck and back pain Seatbelt:

Injuries: _____ Seatbelt:

Hospital: St. Mary's Transport By: RAS

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

