



# OFFICIAL MEDIA RELEASE

## KENT COUNTY SHERIFF DEPARTMENT



### Traffic Crash Supplement

Incident # 16-145338      Date: 09/13/2016      Time of Incident: 0643      Township: 05 - Byron

Type of Incident: Fatal Traffic Crash      Location: 76th Street Sw / Caterpillar Court Sw

Reporting Officer: Deputy Dan Forman      Assisting Departments: Cutlerville Fire, Byron Fire, AMR ambulance

Release Completed By: Sgt. Sal Vitale

Fire \_\_\_ Ambulance \_\_\_ Helicopter \_\_\_ Other Police Agencies \_\_\_ Utilities etc.

**ALCOHOL Contributing Factor?**  
Y  N  UNK

#### Vehicles

**ALCOHOL Contributing Factor?**  
Y  N  UNK

Veh: 1    Make: Pontiac    Model: Grand Prix    Yr: 2008  
 Driver: Melinda Sue Farias    Age: 60  
 City: Gaines Township    Twp: Gaines Twp    State: MI  
 Injuries: Fatal    Seatbelt: Y  N  UNK   
 Direction of Travel: N/B  
 Hospital: \_\_\_\_\_    Transport By: None

Veh: 2    Make: GMC    Model: Acadia    Yr: 2016  
 Driver: Jenny Frances Rodgers    Age: 28  
 City: Byron Center    Twp: Byron    State: MI  
 Injuries: non-life threatening    Seatbelt: Y  N  UNK   
 Direction of Travel: E/B  
 Hospital: Metro    Transport By: AMR

Relatives Notified  YES    Names Can Be Released  YES

Relatives Notified     Names Can Be Released

#### Passengers

Name: None    Age: \_\_\_\_\_  
 City: \_\_\_\_\_    Twp: \_\_\_\_\_    State: \_\_\_\_\_  
 Injuries: \_\_\_\_\_    Seatbelt:   
 Hospital: \_\_\_\_\_    Transport By: \_\_\_\_\_

#### Passengers

Name: None    Age: \_\_\_\_\_  
 City: \_\_\_\_\_    Twp: \_\_\_\_\_    State: \_\_\_\_\_  
 Injuries: \_\_\_\_\_    Seatbelt:   
 Hospital: \_\_\_\_\_    Transport By: \_\_\_\_\_

Name: \_\_\_\_\_    Age: \_\_\_\_\_  
 City: \_\_\_\_\_    Twp: \_\_\_\_\_    State: \_\_\_\_\_  
 Injuries: \_\_\_\_\_    Seatbelt:   
 Hospital: \_\_\_\_\_    Transport By: \_\_\_\_\_

Name: \_\_\_\_\_    Age: \_\_\_\_\_  
 City: \_\_\_\_\_    Twp: \_\_\_\_\_    State: \_\_\_\_\_  
 Injuries: \_\_\_\_\_    Seatbelt:   
 Hospital: \_\_\_\_\_    Transport By: \_\_\_\_\_

Name: \_\_\_\_\_    Age: \_\_\_\_\_  
 City: \_\_\_\_\_    Twp: \_\_\_\_\_    State: \_\_\_\_\_  
 Injuries: \_\_\_\_\_    Seatbelt:   
 Hospital: \_\_\_\_\_    Transport By: \_\_\_\_\_

Name: \_\_\_\_\_    Age: \_\_\_\_\_  
 City: \_\_\_\_\_    Twp: \_\_\_\_\_    State: \_\_\_\_\_  
 Injuries: \_\_\_\_\_    Seatbelt:   
 Hospital: \_\_\_\_\_    Transport By: \_\_\_\_\_

Name: \_\_\_\_\_    Age: \_\_\_\_\_  
 City: \_\_\_\_\_    Twp: \_\_\_\_\_    State: \_\_\_\_\_  
 Injuries: \_\_\_\_\_    Seatbelt:   
 Hospital: \_\_\_\_\_    Transport By: \_\_\_\_\_

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 City: \_\_\_\_\_    Twp: \_\_\_\_\_    State: \_\_\_\_\_  
 Injuries: \_\_\_\_\_    Seatbelt:   
 Hospital: \_\_\_\_\_    Transport By: \_\_\_\_\_