## **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 # 16-156637 Date: 11/20/2016 T			Time of Incident: 0354 Township: 15-Oakfield					
Type of Incident: <u>Injury Crash Involving Deputy</u>			Location: Podunk Ave NE South of 14 Mile Rd NE					
Reporting Officer: Michigan State Police			Assisting Departments: Oakfield Fire, Rockford Ambulance,					
Release Completed By: Sergeant Lude			Courtland Fire					
Fire Ambulance Helicopter Ot	her Police Agencies Ut	ilities etc.						
ALCOHOL Contributing Factor?  Y □ N ☑ UNK □ Vehi				ALCOHOL Contributing Factor?  Y ☑ N ☐ UNK ☐				
Veh: 1 Make: Chevrolet Mode	: Tahoe Yr:	2015	Veh:_2_	Make: Bu	iick	Model: <u>Larcrosse</u>	2 Yr	: 2005
Driver:	Age:		Driver: _				Age	:
ity:		City: Belding . Twp:			Sta	State: MI		
Injuries: Non life threatening S	Seatbelt: Y□ N□ U	JNK 🛛	Injuries:	Non life th	reatening	Seatbelt: \	⁄⊠ N□	UNK□
Dir	rection of Travel:]	E/B				Direction of Tr	avel:	S/B
	ansport By: Rockford					Transport By:		
Relatives Notified YES Nam	es Can Be Released	NO	Relative	s Notified	NO	Names Can Be I	Released	NO
Passen	gers			•	Pass	sengers		
Name: NONE	Age	:	Name:				Age	:
City:Twp:	Sta	te:	City:			_Twp:	Sta	te: MI
Injuries:								
Hospital: T	ransport By:		Hospital	:		Transport By	:	
Name:	Age		Name:				Age	
City:Twp:						_Twp:		
Injuries:	Sea	itbelt: 🔲	Injuries:				Sea	tbelt:
Hospital: T	ransport By:	_	Hospital	:		Transport By	:	
Name:	Age	:	Name:				Age	:
City:Twp:	-					_Twp:	-	
Injuries:	Sea	tbelt: 🔲	Injuries:				Sea	tbelt: 🔲
Hospital: T	ransport By:		Hospital	:		Transport By	<u>.                                    </u>	
Name:	Age	:	Name:				Age	:
City:Twp:	Sta	te:	City:			_Twp:	Sta	te:
Injuries:								
Hospital: T	ransport By:		Hospital	:		Transport By	/:	

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Release Completed By:	Sergeant Lude	Courtland Fire					
Fire Ambulance Helicopter	. Other Police Agencies Utilities etc	KCSD Officers and Titles or Specialities					
DESCRIPTION OF INCIDENT:							
Supervisor Signa	ature:	Date:					