SAINT JOSEPH COUNTY POLICE DEPARTMENT	CASE NO.
CASE REPORT COMPLAINANT Sgt. J. F. Russell AGE DOB ADDRESS 129 S. Main St., South Bend, Indiana	CLASSIFICATION: 10-50 PITA DATE 6/4/83 TIME 7:54 P.M.
HOME PHONE BUSINESS PHONE 284-9763 VICTIM THOMAS, Basil F. AGE 55DOB	PLACE OF OCCURRENCE: Juniper Rd., South of
ADDRESS Basil Hall University of Notre Dame	Pendle St.,
HOME PHONE BUSINESS PHONE	TOWNSHIP CLAY
DETAILS OF INCIDENT: DRIVER OF VEH #1: ZAPPIA, Lorras 1827 Hartman Dr., South Bend, Indiana	
INVESTIGATING OFFICER: Cpl., R. Gerkey	
ASSISTING OFFICERS: Capt., Grise Off. R. Gartee RPD	
The undersigned Officer was contacted at 7: that Unit 104, Capt., Grise was requesting that Juniper and Pendle in regards to a serious injury	I make the scene at
Upon my arrivial at the scene, I observed a ting crossways on Juniper Rd., with the front of the Southeast. In front of the vehicle a short bicycle. Also at the raody ways edge was a pool	the vehicle facing to distance, was a blue mans
I was then advised by Capt., Grise and Cpl. was being driven south bound on Juniper Rd., by further advised that a man was riding the bicycl south bound lane and was struck by the vehicle. LOSSES: Give full description of all losses and stolen veh	the listed driver. They Le in the middle of the
HELD PROPERTY: Not to include evidence.	
HELD PROPERTY: NOT to include evidence.	
SUSPECT INFORMATION:	
WITNESS INFORMATION:	
EVIDENCE INFORMATION:	
⁹ 4.	
EVIDENCE TAGGED? YES NO. WHO WAS EVIDENCE TURNED OVER	R TO?
DATE TIME	
Water and the second se	REPORTING OFFICER

SAINT JOSEPH COUNTY POLICE DEPARTMENT

CONTINUATION

CASE NO. 138136
CLASSIFICATION:
10-50 PITA

COMPLAINANT Sgt., J. F. Russell ADDRESS 129 S. Main St., South Bend, Indiana

VICTIM: THOMAS, Basil F.

DRIVER: ZAPPIA, Lorras

At this point I proceeded to take photos of the accident scene. After taking all necessary photos, a drawing of the scene was then made. Capt., Grise and Officer Gartee of Roseland Police Dept., assisted me in the taking of the measurments.

I then spoke with the driver, Lorras Zappia. I requested of Mr. Zappia to relate to me what had taken place. Mr. Zappia stated he was traveling south bound on Juniper Rd., and saw the bicycle rider traveling in the same direction. He further advised me that the bike rider moved to the middle of his lane of traffic, at which time he applied his brakes and was not able to stop in time to avoid striking the bicycle, and then he saw the subject flip up and hit is windshield and roll off onto the pavement.

It should be noted that on the front of the hood of the vehicle were two black marks of a bicycle tire. The front windshield of the vehicle was smashed with the main point of impact being directly in the middle of the windshield.

The bicycle had no lights but did have reflectors.

At the time of this accident it was still fairly light out.

Upon completing my investigation at the scene I then went to St., Joseph Medical Center to check on the condition of the victim. Upon my arrivial there I spoke with hospital officials in the emergency room. They advised that the victims condition was critical. They further advised that he had a skull fracture, broken left leg and several cuts. I was also advised that it would not be possible for me to speak with him at this time do to his condition.

This accident will remain under investigation until such time the victim can be talked to.

SAINT JOSEPH COUNTY POLICE DEPARTMENT CONTINUATION

CASE NO. 138136
CLASSIFICATION:
10-50 PITA

COMPLAINANT Sgt. I. F. Russell
ADDRESS 129 S. Main St., South Bend, Indiana

VICTIM: THOMAS, Basil F.

DRIVER: ZAPPIA, Lorras

Listed below is the ledgen of the attached drawing of this accident scene.

- A. X indicates that point of impact.
- B. 22 Ft., width of Juniper Rd.,
- C. 92 Ft., south of intersection to point of impact.
- D. 5 Ft. 6 In., west edge of Juniper Rd., to point of impact.
- E. 74 Ft., skid marks from point of impact to where vehicle stopped.
- F. 6 Ft. 10 In., from west edge of Juniper Rd., to left rear of vehicle.
- G. 18 Ft., length of vehicle on angle.
- H. 8 Ft. 10 In., from west edge of Juniper Rd., to right front of vehicle.
- I. 21 Ft., distance from vehicle(Point H) along edge of road to victim.
- J. 1 Ft., 6 In., victims head from west edge of Juniper Rd.
- K. 17 Ft. 8 In., distance from victim to bicycle.
- L. 1 Ft. 8 In., rear tire of bicycle to west edge of Juniper Rd.

11_	100		and the second		FICER'S S	TANDA	ARD A	CCIDEN	TRE	PORT		f	Acciden		No.	E	7
S V	State Form 23558H/Stock 302 Mail to: Indiana State Police, Accident Records Section 100 N. Senate Avenue, Indianapolis, IN 46204									140	140	<u> </u>				12	
40		MONTH		1 42.3	Say of W	/eek	Actual I	ocal Time	********	☐ AM M PM	No. Veh	icles	No. Injur	€d	No. Dead	No. Treliers	8.
8		Count	en en		03	Town			- 3	10.00	City/To	wn or	Ben .		Town		7
72	TION	Inside	-	e Limits? Pro		DNR				om Corporat	Miles So				les East	Miles V	los t
2. V1	7007		Accident	Occurred O		Other) Miles h		rsecting Rose			nterchang	-	N. Carlot	1. S. C.	
V2		If not a	AT Interse	ction, numb		Near	est Interes	cting Road	/Mite !	Malker/interd	hanga			-			- LE
3.	>		5	(Last, First,	Santh MI)		Υ.	ENDLE		Ver's Name (Lust	t, M1)					710
183		Za	SUSTRE	t, City, State		TRICK			Ad	drass (Street	Gity, St	251 to, 21		_			-2
V1		187	27 1	aRTM;	- (So BE	Arreste	d2	17.	SZEL F	Jall	5	DUTH of Birth	131	ENDA I	Arrested?	[1]
V3	RIVER	Stat(e	ent Phys nter no.)	m	29	165	No No		DRIVER 9	t (enter no.)	m	MONT	н о.	PC	Z7	Yes No Lic. St Res	. 2
V2/	DR	Delvar	's I Ican			OPS	Lic. St.	\$				-	-		OPS	IN Q	5)12
V2		BIK !	Stor	74	Buck	Model	ash (20)		Slue	Veh. y	un	علا		Breyel		1
		Vall.	Type	BZ		310	Lic. St	100	Ve	h. Type iter no.)	Lic. Ye	Licer	No.			Lic. State	T (III)
Ö		Veh. l		Speed Limi	t Fuel Tax N	0.			(er	h. Use iter no,)	Speed I		Fuel Tax	No.			12
V1		Direct	tion of	No. Occupan	Yes	No. AxI	es 4 Whee		I	rection of	No. Oca		Fire? Yeş		No. Axles	4 Wheel Dr	14]
ğ	EHICLE	Towe			(A) (A)	ed By	No.	the contract	To	wed To	7			-	HEES M		
<u>5</u>	VEH.	Regist	tered Ov	ner's Name	DWN RS (Last, First, M	KEqu	aest)	— 1 5	The same of	gistered Own		e (Las	t, First, I	(II)	nesii ii	عا ود	15]
V1 V2		Addre	appi	a, Ma et, City, Star					A	Same 35 above Address (Street, City, State, Zip)							
2		182		Sern 79 8	N DR . S	SOUTH	الكفي	het a	R	ngistered Own	ner's Nam	e (Lat	t, First, I	MI)			\preceq_{\wp}
6				et, City, Sta					Z A	Registered Owner's Name (Last, First, MI) Address (Street, City, State, Zip)						-12	
	I EB			et, city, ste		15.		To v	2			<u> </u>	Make	-	Year	Lic. St. Li	c. Yr.
	TRAIL	L.icon	ee No.		Make	Year	Lic, St	Lic. Yr.	TRA	centa No.							٧
		INITIAL Y	Y2 O	Areas Dam	aged (Multiple		ercarriage	¥ 3	4 6	7.10	Direc- tion		at/Highw		Arrested?	Apparent i	110.1
		BAMAG 12	V2		9 6	11 · Trai			B 7	7 12		Not	istrian dol In roadw ding in re ing in roa	av	,	7 Enter No.	
	AMAGE								TOam	age Est.	1. 2. 3. 4. 5. 6. 7. 8. 7. 8. 7.	Oth	ing or w	orkin	g an vehicle badway	lic	
	PA	Nemac	or Objec		OWNERSINA	WIE AND	2004			Chart	7 8 9 10	Gett	ing on o	off v	school bus		
											ليلر				ng not at int	res N	
	16	6. 17. 18	3. 19.				20.				21. 2	And in case of	7raffic 24.	-	25. 26. 27.		\preceq
	DRIVER OF VEHICLE 1 (as listed above)								-		_						
					DRIVERO	F VEHI	CLE 2 (as listed al	bove)	***							
	F	381	3	Basil	homas	- Bas	LHZL	L Aldes	Dan	e Int.	85	: 4	094		SMI	/	
	5				ATILITY							1		ľ			
			+									7					7
	×							w. w.e									

Diagram			•							
i										
	~ ~									
				\ldots 1						
			· · · · · · · · · · · · · · · · · · ·	Indicate NORTH						
				by an arrow						
	· · ·									
Pendle STREET	1040									
	The same of the sa									
1				: : :						
l	-	.								
	•	JUNDIPER.								
		, , , , , , , , , , , , , , , , , , ,								
	[414]	Kopa.								
[111111111									
	1027									
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	• • • • • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·						
	ا ۱۰۰۰ ۱۰۰۰ ا									
1 1 1 1 2										
VEhicle #2	ا ایم . ا	· · · · · · · · · · · · · · · · · · ·	: . .							
	1 (3) : }			•						
1	11/2/									
1	(K))									
	/ . Aby.									
	X A									
	_ 788 - 1 - }									
[··不~····									
	P~3									
1		 								
	1 : : 1									
1			, 							
				\cdot \cdot \cdot \cdot						
	. , ——,									
	·····; ··; · ·;		· · · · · · · · · · · · · · · · · · ·							
<u> </u>										
/ NA	RRATIVE (Refer to	Vehicle by Number)		, i						
		¥								
X A Y			(C_{ij})	^						
Bruss " Latates his usa	Ltuas a	I me brusell	MAN MAN	tous !						
		Bruse 1 states he was southbound on Junger Good, just								
1										
court al by de son	? t_~ 4.	Park all lasting	10 5#10	Dour+L-						
exto white Ja Laures	itor, to	Rander Ches	es#2, alao	South-						
exto albument la stude	itar, to	Red whel	es#2 also	South-						
exto albut la suas	et, moti Leud Je	lane, and	estruck also	South-						
exto abust la seuce	et, noti best	lane, and	etruck o	South-						
exto abust la stude	et, noti	lane, and	etruck	South-						
exto abuet la suas	et, noti	lane, and	odruck c	South-						
esto albuer la seuce	et, note Lead y	lane, and	odruck o	South-						
exto album la stude	et, noti	lane, and	etruck o	South-						
ecto albumer for suco	et, moti	lanes, and	etruck o	South-						
esto albuer la suas	et, noti	lane, and	odruck c	South-						
exto albuer la suas a utur ant La Canual 35 acast alandel - atoly	et, note of the I	lane, and	etruck o							
exto abuer la suas autres ant De Consuad 35 aug Tulandell - atal	et, noti of the I of Bien	lanes, and	etruck o	South-						
esto albuir la stude o situal ant Granual or in surante										
exto abuer la succession de la successio	-									
exto allered such a suc	-									
exto abust lo stude out of Subanad out of Su		This is to certify	that this is a	ent						
esto albuit la stude 3 situal and the Colonial		This is to certify	that this is a	ent						
Such of Ludes Such Canter		This is to certify	that this is a	ent						
esto albuer la suas Sustante de la Constante d		This is to certify	that this is a	ent						
esto alburt fo stude surfaced and the Consumed Saggir which when - who I		This is to certify	that this is a original docum with the Saint blice Departmen	ent						
esto albuir la stude 3 situal and the Colon		This is to certify	that this is a original docum with the Saint blice Departmen	ent						
esto albuir la stude 3 sutured and cutoff		This is to certify true copy of the which is on file Joseph County Po	that this is a	ent						
exto all followed on the Control of Sunday Contr		This is to certify	that this is a original docum with the Saint blice Departmen	ent						
esta albuir la stude 3 setup and the Sugar alanguar alang		This is to certify true copy of the which is on file Joseph County Po	that this is a original docum with the Saint blice Departmen	ent						
		This is to certify true copy of the which is on file Joseph County Posigned	that this is a original docum with the Saint blice Departmen	ent						
Note - We have types 75		This is to certify true copy of the which is on file Joseph County Po	that this is a original docum with the Saint blice Departmen	ent						
©1 Insured By		This is to certify true copy of the which is on file Joseph County Posigned	that this is a original docum with the Saint blice Departmen	ent						
		This is to certify true copy of the which is on file Joseph County Posigned	that this is a original docum with the Saint blice Departmen	ent						
D1 Insured By		This is to certify true copy of the which is on file Joseph County Posigned	that this is a original docum with the Saint blice Departmen	ent						
Other Participant(s) Name, Address (etc.)	Address	This is to certify true copy of the which is on file Joseph County Posigned	that this is a original docum with the Saint blice Departmen Date	Time of Accident						
Other Participant(s) Name, Address (etc.) Name of Witness No. 1	Address	This is to certify true copy of the which is on file Joseph County Posigned	that this is a original docum with the Saint blice Departmen Date	Time of Accident						
Other Participant(s) Name, Address (etc.) Name of Witness No. 1 DRADED LESI 200 288-8466	Address 1319 Ebst.	This is to certify true copy of the which is on file Joseph County Posigned	that this is a original docum with the Saint blice Departmen Date	Time of Accident						
Other Participant(s) Name, Address (etc.) Name of Witness No. 1 SERABRA LESS BASS Name of Witness No. 2	Address	This is to certify true copy of the which is on file Joseph County Posigned	that this is a original docum with the Saint blice Departmen Date	Time of Accident						
Other Participant(s) Name, Address (etc.) Name of Witness No. 1 Name of Witness No. 2	Address 1319 Ebili	This is to certify true copy of tine which is on file Joseph County Posigned	that this is a original docum with the Saint blice Departmen Date	Time of Accident						
Other Participant(s) Name, Address (etc.) Name of Witness No. 1 DELARD LESI and 288-8466 Name of Witness No. 2	Address 1319 Ebst.	This is to certify true copy of the which is on file Joseph County Posigned	that this is a original docum with the Saint blice Departmen Date	lent t						
Other Participant(s) Name, Address (etc.) Name of Witness No. 1 DERAMPO LESIANA 288-8466 Name of Witness No. 2 DEB: GLISON 2594316 Name of Person Arrested	Address 1319 Ebs. Address 1.C. Code(e)	This is to certify true copy of tine which is on file Joseph County Posigned	that this is a original docum with the Saint blice Departmen Date	Time of Acadent (23) Des Tursione Time of Acadent (23) Des Tursione Time of Acadent (23) Des Tursione (24) (25) Des Tursione (26)						
Other Participant(s) Name, Address (etc.) Name of Witness No. 1 SEASON LESI DAY Name of Witness No. 2 DEBG SULISON 2 Name of Person Arrested Time Notified AM Time Arrived AM Other Location	Address 1319 Ebb. Address 1.C. Code(e)	This is to certify true copy of the which is on file Joseph County Posigned D2 Insured By Name of Person Arrested	that this is a original document the Saint blice Department Date Department Date Department Docation at Location at Location at Location at Location of Location o	Time of Accident Time of Accident Time of Accident Time of Accident I.C. Gode(s) Photos Taken						
Other Participant(s) Name, Address (etc.) Name of Witness No. 1 SERABRO LESI DAG 288-8466 Name of Witness No. 2 LESI DAG 289-8466 Name of Person Arrested Z Time Notified AM Time Arrived AM Other Location	Address 1319 Ebb. Address 1.C. Code(e)	This is to certify true copy of the which is on file Joseph County Posigned D2 Insured By Name of Person Arrested	that this is a original document the Saint blice Department Date Department Date Department Docation at Location at Location at Location at Location of Location o	Time of Accident (a) Don Junio 62 Time of Accident (a) Don Junio 62 Time of Accident (a) Don Junio 62 I.C. Code(e)						
Other Participant(s) Name, Address (etc.) Name of Witness No. 1 SERABRO LESI DAG 288-8466 Name of Witness No. 2 LESI DAG 289-8466 Name of Person Arrested Z Time Notified AM Time Arrived AM Other Location	Address 1319 Ebb. Address 1.C. Code(s) on of Investigation	This is to certify true copy of the which is on file Joseph County Posigned D2 Insured By Name of Person Arrested Charter	that this is a original docum with the Saint Dice Departmen Date Location at Clocation at Location at	Time of Accident (a) Don Junio 62 Time of Accident (a) Don Junio 62 Time of Accident (a) Don Junio 62 I.C. Code(e)						
Other Participant(s) Name, Address (etc.) Name of Witness No. 1 SEADERS LESS DAY 288-8466 Name of Witness No. 2 LESS DAY 288-8466 Name of Person Arrested Z Time Notified AM Time Arrived AM Other Location	Address 1319 Ebt. Address 1.C. Codele) on of Investigation the metal	This is to certify true copy of the which is on file Joseph County Posigned D2 Insured By Name of Person Arrested Charter	that this is a original docum with the Saint Dice Departmen Date Location at Clocation at Location at	Time of Accident (a) Don Junio 62 Time of Accident (a) Don Junio 62 Time of Accident (a) Don Junio 62 I.C. Code(e)						
Other Participant(s) Name, Address (etc.) Name of Witness No. 1 Name of Witness No. 2 Name of Witness No. 2 Name of Witness No. 2 Name of Person Arrested Z Time Notified AM Time Arrived AM Other Location	Address 1319 Ebt. Address 1.C. Code(e) on of Investigation 1.D. No.	This is to certify true copy of tine which is on file Joseph County Position of Position Arrested Name of Person Arrested Causer St. Toseph County The company of Position Arrested Causer St. Toseph County	that this is a original docum with the Saint blice Departmen	Time of Accident (a) Don Junio 62 Time of Accident (a) Don Junio 62 Time of Accident (a) Don Junio 62 I.C. Code(e)						
Other Participant(s) Name, Address (etc.) Name of Witness No. 1 SEADERS LESS DAY 288-8466 Name of Witness No. 2 LESS DAY 288-8466 Name of Person Arrested Z Time Notified AM Time Arrived AM Other Location	Address 1319 Ebt. Address 1.C. Codele) on of Investigation the metal	This is to certify true copy of tine which is on file Joseph County Position of Position Arrested Name of Person Arrested Causer St. Toseph County The company of Position Arrested Causer St. Toseph County	that this is a original docum with the Saint blice Departmen	Time of Accident (a) Don Junio 62 Time of Accident (a) Don Junio 62 Time of Accident (a) Don Junio 62 I.C. Code(e)						
Other Participant(s) Name, Address (etc.) Name of Witness No. 1 SRANRO LEN 2 Name of Witness No. 2 LEN 3U:SON 2 Time Notified AM Time Arrived AM Other Located 7:UL XPM 7:UZ XPM ST Jos Assisting Officer C Assisting Officer	Address 1319 Ebb. Address 1.C. Code(e) on of Investigation 1.D. No. 1.D. No.	This is to certify true copy of the which is on file Joseph County Position of Position Arrested Name of Person Arrested Charter Agency Structure Agency Agenc	that this is a original docum with the Saint blice Departmen	Time of Accident Lent Time of Accident Local Control Local Code (s) Photos Taken Yes Date of Report Class 183						
Other Participant(s) Name, Address (etc.) Hame of Witness No. 1 DEPARA LESI and 288-8466 Name of Witness No. 2 LESI ALLISON 2594316 Name of Person Arrested Time Notified AM Time Arrived AM Other Located 7:41 XPM 7:42 XPM ST Jos	Address 1319 Ebt. Address 1.C. Code(e) on of Investigation 1.D. No.	This is to certify true copy of tine which is on file Joseph County Position of Position Arrested Name of Person Arrested Causer St. Toseph County The company of Position Arrested Causer St. Toseph County	that this is a original docum with the Saint blice Departmen	Time of Accident (a) Don Junio 62 Time of Accident (a) Don Junio 62 Time of Accident (a) Don Junio 62 I.C. Code(e)						

OFF, R. GARTEE R.P.D.

(SC

JUNIPER RD. PENOLE ST. DRAWING NOT TO SCALE. Sot. 9. 7. Russell Spork 6-3-83 ASSISTING ON MEASURMENT CAPT, H. GRISE STEPD.

INTER-DIVISION MEMO

TO3	Sergeant Russell	DATE:	June 7, 1983	
SPOM:	Lieutenant JD. Molnar	TINE:	10:20 A.M.	
REF: _	Traffic Acc. 14046			
Chi	ef Myers received word fr	rom the Hospital	that Basil F. Thomas	
was	removed from life suppor	rt systems at ab	out 10:20 A.M. this	
dat	e.			_
Jur	ne 7, 1983 11:05 A.M. S	ue Kalinowski re	eceived word from	
Men	norial Hospital that Brot	her Basil F. Tho	omas expired at 10:27	<u>A</u> .M.
SURVE INDEX	#14-01	· /7:	forps 12 14)	(luns