

INFORMATION FOR POLICE OFFICERS AND PROSECUTORS

PASSING SCHOOL BUS WHILE LOADING OR UNLOADING
CLASS "A" INFRACTION
9-21-12-1

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Name of Driver (If Known): _____

Description of Driver (Sex, Race, Age, Hair): _____

Description of Vehicle (Make, Model, Year, Color): _____

License Number of Vehicle: _____ State: _____

Date: _____ Time: _____

Location of Offense (Road Name or Number, Direction of Travel for
Bus and Violator. Give as much information as possible.): _____

Bus Number: _____ Name of School: _____

County Offense Occurred In: _____

Bus Loading _____ Bus Unloading: _____

Witnesses: _____

Bus Driver's Name (Print): _____

Bus Driver's Phone Number: _____

Bus Driver's Signature: _____

Date Signed: _____ Date Sent: _____

Fax to: Greendale Police Department 812-537-1459

Mail to: Greendale Police Department
480 Ludlow St.
Lawrenceburg, In. 47025

Date Received: _____ Action Taken: _____