

Exhibit A, is a falsified document.

This is directly refuted by Exhibit B, Mr. Russell reported the
Crash two days after the incident with limited information.

undisputed

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|--|---|---|--------------------------------|--|--|---|---|---|--|
| Crash Date AUGUST 17, 2023 | | Time of Crash 12:38 PM | | Date of Report October 3, 2023 | | Reporting Agency Case Number 23004654 | | HSMV Crash Report Number 25610819 | |
| PERSON | | | | | | | | | |
| Person # 01 | Description 1 DRIVER | Vehicle # 01 | Name JON DOE23004654 | | Date of Birth | | Sex 1 MALE | Phone Number | Re-Exam 2 NO |
| Address | | | | City & State | | | Zip Code | | |
| Driver License Number | | State | Expires | DL Type | Req. End. | Injury Severity 1 NONE | | Ejection 1 NOT EJECTED | |
| Restraint Systems 3 SHOULDER AND LAP BELT USED | | Air Bag Deployed 2 NOT DEPLOYED | | Helmet Use 3 NO HELMET | | Eye Protection 3 NOT APPLICABLE | Seating Location Seat 1 LEFT | Seating Location Row 1 FRONT | Seating Location Other 1 NOT APPLICABLE |
| Drivers Actions at Time of Crash (First) 77 ALL OTHER (EXPLAIN IN NARRATIVE) | | | | Drivers Actions at Time of Crash (Second) | | | Driver-Distracted By 88 UNKNOWN | | Vision Obstruction 77 OTHER (EXPLAIN IN NARRATIVE) |
| Drivers Actions at Time of Crash (Third) | | | | Drivers Actions at Time of Crash (Fourth) | | | Drivers Condition at Time of Crash 88 UNKNOWN | | |
| Suspected Alcohol Use 88 UNKNOWN | | Alcohol Tested | Alcohol Test Type | Alcohol Test Result | BAC | Suspected Drug Use 88 UNKNOWN | | Drug Tested | Drug Test Type |
| Source of Transport to Medical Facility 88 UNKNOWN | | EMS Agency Name or ID | | | EMS Run Number | | Medical Facility Transported To | | |
| PERSON | | | | | | | | | |
| Person # 02 | Description 2 NON-MOTORIST | Name BEIRRY O. RUSSELL | | | Date of Birth AUGUST 1, 1949 | | Sex 1 MALE | Injury Severity 3 | Phone Number (305) 432-6032 |
| Address 2706 FLAGLER AVE 4 | | | | City & State KEY WEST, FL | | | Zip Code 33040 | | |
| Non-Motorist Description Detail 3 BICYCLIST | | | | Non-Motorist Action Prior to Crash 5 WALKING/CYCLING ON SIDEWALK | | | Non-Motorist Location at Time of Crash 8 SIDEWALK | | |
| Non-Motorist Actions/Circumstances (First) 1 NO IMPROPER ACTION | | Non-Motorist Actions/Circumstances (Second) | | | Non-Motorist Safety Equipment (One) 1 NONE | | Non-Motorist Safety Equipment (Two) | | |
| Suspected Alcohol Use 88 UNKNOWN | | Alcohol Tested | Alcohol Test Type | Alcohol Test Result | BAC | Suspected Drug Use 88 UNKNOWN | | Drug Tested | Drug Test Type |
| Source of Transport to Medical Facility 88 UNKNOWN | | EMS Agency Name or ID | | | EMS Run Number | | Medical Facility Transported To | | |
| NARRATIVE | | | | | | | | | |
| <p>On 8/15/23 between 1300hrs & 1500hrs. P2 was riding his bike and traveling West on the South sidewalk of N. Roosevelt Blvd. He said that as he was passing the enterprise driveway entrance a blue Ram 1500 struck him and knocked him off of his bike. He said the driver of the Ram asked him if he was ok and then left the area once he had an opportunity to pull out.</p> <p>I asked P2 why he didn't call the police. He said his phone was broken and he thought someone else would call. P2 was unable to get a tag or any other identifying factors of the suspect vehicle.</p> <p>i spoke to workers at enterprise who stated that nothing like this occurred yesterday that they were aware of.</p> <p>At this time I am unable to confirm wheter or not a crash occurred.</p> <p>No further information at this time.</p> <p>GAUFILLET, ALEXANDRE 10/03/2023</p> <p>On 10/3/23 at approximately 1108hrs, I went over to Enterprise located at 2516 N. Roosevelt Blvd. I spoke with a manager and asked them if the have any video surveillance that covers the sidewalk and road. He stated no. I asked him if they rent pickup trucks from this location and again he stated, no. He explained to me the closest location to rent a pickup truck by Enterprise is Hialeah.</p> <p>I mentioned to him that I was following up on a crash that occurred on 8/1723 between the hours of 1300 to 1500. He said he had no knowledge of this incident.</p> <p>I tried to contact Mr. Russell but was unable to and left a message. His updated phone number is 305-766-2057.</p> <p>No further information at this time.</p> | | | | | | | | | |
| REPORTING OFFICER | | | | | | | | | |
| ID/Badge Number 3600 | Rank and Name POLICE OFFICER GAUFILLET, ALEXANDRE | | | | | Department KEY WEST POLICE DEPARTMENT | | Type of Department 2 PD | |

Exhibit 4