

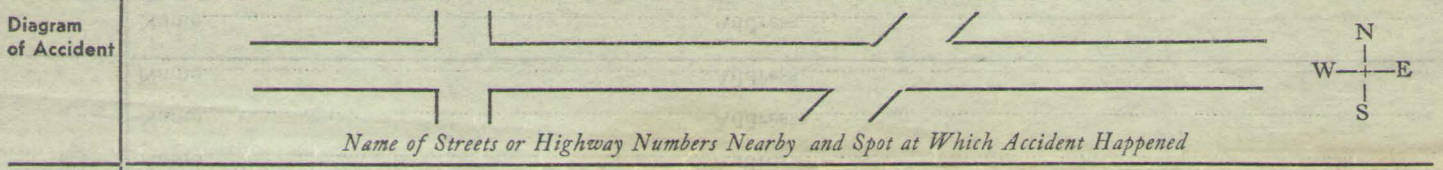
NORTHERN PACIFIC RAILWAY COMPANY

NORTHERN PACIFIC TRANSPORT COMPANY

NORTHWESTERN IMPROVEMENT COMPANY

REPORT OF ACCIDENT

Time and Place of Accident: Date and Hour of Accident 4 PM MAY 13TH 1935 19... A. M. P. M.
 Exact Place of Accident ABOUT CITY LIMITS



Driver: Name..... Age.....
 Address..... License No.....

Bus, Truck or Other Vehicle: Our Number..... Trade Name..... Type of Body.....
 State License No..... R. R. W. C. No..... Speed Traveling..... Miles
 Direction EAST Side of Road MAIN HI WAY

Vehicle Damaged: Name of Owner..... Address.....
 Make of Car..... Type..... State License No.....
 Name of Driver..... Address.....
 Age of Driver..... Speed..... Direction..... Side of Road.....

Passengers: Number of Passengers in Each Vehicle Involved: Company Car..... Other Vehicle.....

Injured: Name..... Address.....
 Name..... Address.....
 Name..... Address.....
 Where Taken.....
 By Whom?..... Dr. Name.....
 Were Injured Passengers in Company Car?.....

Injuries: Nature and Extent 1 EUW SHEEP KILLED

Property Damaged: Name of Owner FOSTER BROS Address SHERIDAN MONT
 Nature and Extent..... Value.....

Weather: Clear CLEAR Cloudy..... Rainy.....

Lights: Headlights Burning?: Co. Car..... Other Vehicle..... Tail Lights: Co. Car..... Other.....

Highway: Dry DRY Wet..... Icy..... Smooth..... Rough.....

Signals: What Signals Given by Co. Car YES By Other Vehicle.....

Description of Accident

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SEE REVERSE SIDE

Safety First—Better Cause a Delay Than An Accident

Damage To Company Car

Portion of Body.....	Wheel, Front, Right.....	Fender, Front, Right.....
Radiator.....	Wheel, Front, Left.....	Fender, Front, Left.....
Headlights.....	Wheel, Rear, Right.....	Fender, Rear, Right.....
Front End.....	Wheel, Rear, Left.....	Fender, Rear, Left.....
Other Damage.....		

Damage To Other Vehicle

Portion of Body.....	Wheel, Front, Right.....	Fender, Front, Right.....
Radiator.....	Wheel, Front, Left.....	Fender, Front, Left.....
Headlights.....	Wheel, Rear, Right.....	Fender, Rear, Right.....
Front End.....	Wheel, Rear, Left.....	Fender, Rear, Left.....
Other Damage.....		

	Name.....	Address.....
Passengers in Company Car	Name.....	Address.....
	Name.....	Address.....
	Name.....	Address.....
	Name.....	Address.....
	Name.....	Address.....
	Name.....	Address.....
	Name.....	Address.....
	Name.....	Address.....
	Name.....	Address.....
	Name.....	Address.....
Passengers in Other Vehicle	Name.....	Address.....
	Name.....	Address.....
	Name.....	Address.....
	Name.....	Address.....
Bystanders	Name.....	Address.....
	Name.....	Address.....
	Name.....	Address.....
	Name.....	Address.....
Passing Vehicles	Name.....	Address.....
	Name.....	Address.....
	Name.....	Address.....

Signed.....

Dated.....19..... Address.....