| | | | | | - | | | | | | | |
|----------|-------------------------------|------|------------------|----------------------------|--|--------------------|-------------|----------------|---------------|----------------|------|--------------|
| Agen | cy | | Officer Name | | Cas | se Number | | | Date of Crash | | Time | |
| BLC | DOMINGTON POLICE | DEPT | OFFICER | MERSETH, DANIEL | 25 | 25005360 00 | | | 06/17/ | 06/17/2025 03 | | □ AM ■ PM |
| | | | | | | | | | | | | |
| Road | of Occurrence | | | | | | | City | | County | | |
| 1 | 1 | | | | | | Bloomington | | | IEP I N | | |
| | | | | | | | | | | | | |
| | Person Type | Name | (Last,First,Mi) | | Address (Street, City, State, Zip) | | | | | | | |
| ٢ | DRIVER | KILL | AM, ROBERT, BART | | 5001 W 114TH ST, BLOOMINGTON, MN 554373416 | | | | | | | |
| \vdash | DOB | Sex | | Injury | | | Safety Equ | uipment | | | | |
| N | 9/12/1949 | М | | SUSPECTED MINOR INJURY (B) | | B) LAP AND SHOULDE | | ID SHOULDER BE | LT USED | | | |
| \cap | Transported Alcohol Test | | | | Alco | ohol Test Result | | | | | | |
| | EMS Ground No, Test Not Given | | | | | | | | | | | |
| | | | | | | | | | | | | |

| | Person Type | Nam | e (Last,First,Mi) | | | | Address (Street, City, State, Zip) | | | | |
|--------|--------------------------------|-----|--------------------|------------------|-------------------------|---|------------------------------------|------------------|---------------|--|--|
| 2 | DRIVER | ALL | AR, MEAGHAN, MARIE | l. | | 9728 COUNTY ROAD 8, KIMBALL, MN 553539736 | | | /IN 553539736 | | |
| | DOB | - | | | Injury Safety Equipment | | | Safety Equipment | | | |
| INIT | 9/20/2005 F NO APPARENT INJURY | | | | | LAP AND SHOULDER BELT USED | | | | | |
| \cap | Transported Alcohol Test | | | | Alc | lcohol Test Result | | | | | |
| | | | No, Test Not Given | | | | | | | | |
| | Passenger Name | | | Passenger Injury | | | | | Passenger DOB | | |
| | TOLLEFSON, THEODORE | | | | NO APPARENT | INJU | JRY | | 1/1/2020 | | |
| | Passenger Safety Equipment | | | Transported | | Passenger Age | | | | | |
| | BOOSTER SEAT PROPERLY | | | | | | | | 5 | | |

Property Damage Information:

| Agency/Organization | Property Description | Property Type | Yellow Tag # | Owned By: |
|---------------------|----------------------|---------------|--------------|-----------|
| city of bloomington | STOP SIGN | PUBLIC | | CITY |

Witness Information:

| Name | Sex |
|----------------------|-----|
| PURCELL, DIANE RENEE | F |
| | |

Unit 1 was driving east in the 5300 block of West Old Shakopee Rd in the right lane. Unit 1 swerved to the right and sideswiped unit 2, which was stopped in traffic in the right lane. Unit 1 ran off the road to the right, jumped a dirt mound and struck a large tree.

Driver of unit 1 said he doesn't remember anything and has a stroke history.

| Ager | су | | Officer Name | | Cas | e Number | | | Date of Cra | sh | Time | |
|-------------------------------|------------------|-------------|-------------------|----------------------------|---|------------|----------------------------------|---------|-------------|--------|-------|--------------|
| BLO | DOMINGTON POLICE | DEPT | MILLER, A | ANGELA | B | BP25005369 | | | 06/17/2025 | | 08:29 | □ AM ■ PM |
| Road | of Occurrence | | | | | | | City | | County | | |
| W | 94TH ST 150 FEE | T We | st From Its Inter | зто | ON FWY W Blooming | | | I | HENN | NEPIN | | |
| | | | | | | | | | | | | |
| | Person Type | Name (L | .ast,First,Mi) | | Address (Street, City, State, Zip) | | | | | | | |
| 7 | DRIVER | JOHN | SON, DOMINIC, BRA | NDON | 13699 ASHCROFT ALCOVE, SAVAGE, MN 553782375 | | | | | | | |
| ⊢ | DOB | Sex | | Injury | | | Safety Eq | uipment | | | | |
| 6/5/2007 M | | | | SUSPECTED MINOR INJURY (B) | | | DOT COMPLIANT FULL FACE, UNKNOWN | | | | | |
| Transported Alcohol Test | | lcohol Test | Fest , | | Alcohol Test Result | | | | | | | |
| EMS Ground No, Test Not Given | | | | | | | | | | | | |

Witness Information:

| Name | Sex |
|----------------------|-----|
| HASHI, AMINA MAULIAH | F |
| Name | Sex |
| MOHAMED, SHERHAN | F |

On 06/17/25 at approximately 2029 hours, officers were dispatched to a personal injury accident involving a motorcycle on 94th Street just West of Interstate 35W. Dispatch advised that the victim was having difficulty breathing. Officers arrived on scene and located a male in the grass laying on his back on the Southside of 94th Street. The motorcycle was also in the grass just to the West of the victim.

Witness #1 and Witness #2 were on scene and are the ones who called 911. Both Witness #1 and Witness #2 stated that they were traveling East on 94th at approximately 40 MPH behind Unit #1. They saw Unit #1 do a wheelie, come back down, lose control, hit the curb and crash into the grass. Witness #1 and Witness #2 stated that the driver of Unit #1 then went flipping and tumbling from where the bike had landed. Witness #2 ran over to the driver of Unit #1 and heard that he was having trouble breathing so she removed the helmet off the driver's head. Witness #2 stated the driver of Unit #1 was gasping for air and might have seized on scene at one point.

Driver of Unit #1 stated not to have remembered anything and did not know how he got there.

Bloomington Fire arrived on scene to treat the driver of Unit #1 while waiting for Allina. A C-collar was placed on driver of Unit #1 and was then transported to HCMC (Hennepin County Medical Center) via Allina ambulance. (Allina run #061725-0641).

Mother of Unit #1 was notified of the accident and advised on where the ambulance would be going.

Driver of Unit #1 was wearing a full helmet with a face shield and riding gloves. No other protective equipment was seen on the driver. There was a Go-Pro camera located on scene, but it was not on or active at the time of the accident. Photos of the scene were taken, along with a couple injuries to the driver of Unit #1. Driver of Unit #1 was given a card with the report number in his personal property that went with to the hospital.

Nothing further at this time.

| Ager | icy | | Officer Name | | Ca | se Number | | | Date of Cra | ısh | Time | |
|------|------------------------------------|---------|---------------|---------------------|---------------------------------------|---------------------|-----------------|----------------|-------------|-------|--------------|--|
| BLC | DOMINGTON POLICE | DEPT | OFFICER | MERSETH, DANIEL | 25005385 | | | 06/18/2025 | | 01:00 | □ AM ■ PM | |
| | of Occurrence 84TH ST | | | | | City Bloomington | | | _ | | | |
| •• | 0111101 | | | | Bioonnington | | | | | | | |
| | Person Type Name (Last,First,Mi) | | | | | Address (Street, C | 'ity, State, Zi | p) | | | | |
| Γ | DRIVER | JOHNSON | , ANDREW, BER | NHARD | 6887 LANGFORD DR, EDINA, MN 554361646 | | | | | | | |
| | DOB | Sex | | Injury | | | Safety Eq | uipment | | | | |
| Ν | 2/26/1939 | м | | POSSIBLE INJURY (C) | | | LAP AN | ND SHOULDER BE | ELT USED | | | |
| Π | Transported Alcohol Test | | | | Alcohol Test Result | | | | | | | |
| | Not Transported No, Test Not Given | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | Demon Turne Nome (Least First Mi) | | | | | Address (Street C | Ster. State 7 | (m) | | | | |

| | Person Type | Name (Last,First,Mi) | | | Address (Street, G | Address (Street, City, State, Zip) | | | |
|-----|-------------|-----------------------------|--------------------|--------|---------------------|--|--|--|--|
| 2 | DRIVER | YER MONROE, HANNAH, DAWN | | | 32996 SUMA | 32996 SUMAC RD, DEER RIVER, MN 566362380 | | | |
| | DOB Sex | | | Injury | | Safety Equipment | | | |
| NΙΤ | 2/1/2002 | 1/2002 F NO APPARENT INJURY | | | | LAP AND SHOULDER BELT USED | | | |
| Π | Transported | | Alcohol Test | | Alcohol Test Result | | | | |
| | | | No, Test Not Given | | | | | | |

| | Person Type | Name | Name (Last,First,Mi) | | | Address (Street, City, State, Zip) | | | | |
|---|-------------|-------------------------------|----------------------|--------|---------------------|--|----------------------------|--|--|--|
| З | DRIVER | PHA | PHAM, DOUG, THE | | | 8306 QUINN RD, BLOOMINGTON, MN 554371232 | | | | |
| | DOB | Sex | | Injury | | | Safety Equipment | | | |
| Ν | 7/5/1969 | 7/5/1969 M NO APPARENT INJURY | | | | | LAP AND SHOULDER BELT USED | | | |
| Π | Transported | | Alcohol Test | | Alcohol Test Result | | | | | |
| | | | No, Test Not Given | | | | | | | |

Unit 1 was driving north on France Ave S attempting to make a left turn on 84th Street at a flashing yellow arrow. Driver said he though it was clear and he could make the turn. He turned in front of unit 2, which was driving south on France Ave. Unit 2 struck the passenger side of unit 1, causing it to spin into the front of unit 3, which was stopped at the red light facing east on 84th Street.

| Ager | icy | | Officer Name | | Ca | ase Number | | | Date of Cra | ısh | Time | |
|-----------------------------------|--|-------------------|--------------------|--------------------|--------------------|------------------------------------|-----------|----------------|------------------|--------|--------------|------------------|
| BLC | DOMINGTON POLICE | DEPT | MILLER, | ANGELA | BP25005446 | | | 06/19/2025 08 | | 08:41 | □ AM ■ PM | |
| Road | l of Occurrence | | | | | | | City | | County | | — • • • • |
| At | the Intersection of | E AN | IERICAN BLVD | | | Bloomingtor | ı | | NEPIN | | | |
| | | | | | | | | | | | | |
| | Person Type | e (Last,First,Mi) | | | Address (Street, C | lity, State, Zi | p) | | | | | |
| Γ | DRIVER ATKINS, DAVID | | | |] | 3238 ELLIOT AVE APT 2, MINNEAPOLIS | | | IS, MN 554074511 | | | |
| | DOB Sex | | | Injury Safety Equ | | | uipment | | | | | |
| N | 4/6/1963 | м | | NO APPARENT INJURY | | | | ND SHOULDER BE | LT USED | | | |
| Π | Transported | | Alcohol Test | | Alc | cohol Test Result | | | | | | |
| | | | No, Test Not Given | | | | | | | | | |
| | | | | | | | | | | | | |
| Person Type Name (Last,First,Mi) | | | | | Address (Street, C | City, State, Zi | p) | | | | | |
| Non-motorist Carlson, James, Alan | | I | | 7515 W 105TI | H ST, BLC | DOMINGTON, MN | 554382120 |) | | | | |
| DOB Sex Injury | | Safety Equipment | | | | | | | | | | |
| Ν | 8/12/1965 M SUSPECTED MINOR INJURY (B) | | | | NONE | | | | | | | |

Transported
Not Transported

On 06/19/2025 at approximately 2241 hours, Officers were dispatched to the intersection of American Blvd and Nicollet Ave S for a report of a personal injury crash involving a limousine and a bicyclist.

Officers and Bloomington Fire arrived in a the area but were unable to locate anyone hit in the intersection. A few minutes later, Officers located the victim at Holiday Gas station (7901 Nicollet Ave S) and he was alert and talking. Unit #2 stated he was riding his bike South on Nicollet Ave crossing American Blvd at the crosswalk. He stated that he saw the little man at the crosswalk so he rode through the intersection and that's when Unit #1 struck him. Unit #2 was traveling on American Blvd as it approached Nicollet Ave. Unit #1 was in the left lane and did not see Unit #2 in the intersection. The front of Unit #1 struck the bike pedal of Unit #2 and knocked the wheels out from under the rider, causing him to fall on his right knee and sustain a small rip to his jeans and a small scratch on the inside of his knee. Unit #2 declined medical attention and stated he was fine. I asked Unit #2 where Unit #1 was, he stated Unit #1 went to Speedway to obtain \$100.00 cash to help with the damages to his bike. Unit #1 had advised Unit #2 that he would be back.

While officers were on scene, the driver of Unit #1 came back and handed Unit #2 some cash. Unit #1 stated that he did not see Unit #2 as he crossed the street.

It should be noted that Unit #2 did not have any lights on the bike to help be seen at night.

Insurance was not collected from Unit #1 on scene.

Unit #2 was transported home via my squad car.

Nothing further at this time.

| Age BL | ney OOMINGTON POLICE | DEPT | Officer Name | ON, IAN | Case Number BP25005542 | | | Date of Crash 06/22/2025 | | Time 07:47 | □ AM ■ PM | |
|----------------------------|----------------------------------|------|--------------|---------|---------------------------------|------------------------------------|---------|--------------------------|--|---------------|--------------|--|
| | d of Occurrence | | 1 | | City County Bloomington HENN | | | NEPIN | | | | |
| - | Person Type Name (Last,First,Mi) | | | | | Address (Street, City, State, Zip) | | | | | | |
| DOB Sex Injury | | | | | | Safety Eq | uipment | | | | | |
| Transported Alcohol Test A | | | | Alco | hol Test Result | | | | | | | |

| | Person Type | Name | Name (Last,First,Mi) | | | Address (Street, City, State, Zip) | | | |
|---|-------------|-----------|----------------------|--------------------|---------------------|---|------------------|--|--|
| 2 | DRIVER | TUN | TUMA, GAGE, JUSTIN | | | 22571 GLYNVIEW TRAIL, FARIBAULT, MN 55021 | | | |
| Т | DOB | Sex | | Injury | iry | | Safety Equipment | | |
| Ν | 1/8/2002 | /8/2002 M | | NO APPARENT INJURY | | | UNKNOWN | | |
| Π | Transported | | Alcohol Test | | Alcohol Test Result | | | | |
| | | | No, Test Not Given | | | | | | |

Unit 1 was parked at Mall of America. Vehicle was hit unattended. Unit 2 fled the scene without leaving insurance information. Minor damage suffered to unit 1 but was still drivable. I made phone contact with unit 2 who admitted to being at the mall and driving. He thought he didn't hit the vehicle. No injuries reported.