



Governor Kim Reynolds
Lt. Governor Adam Gregg
Adam Steen, Director

Date: March 3, 2021

To: Tammy Hollingsworth, Auditor of State
Victoria Newton, Treasurer of State
Executive Council

From: Mariah Flowers, Fleet Manager
DAS Fleet Services
Department of Administrative Services

Re: ALLOCATION REQUEST - 29C20 Claim for Executive Council Consideration

Vehicle / Event	# 217/Deer
Event Date	January 6, 2022
Summary	Vehicle #217 struck a deer. (231960)
Amount Requested	\$7,555.19 - Estimate
Supporting Documentation	29C20 Email Notification, Accident Report, Repair Estimate(s), Photos

If you have any questions or are in need of additional information, please do not hesitate to contact me.

Thank you,

Mariah Flowers, Fleet Manager
DAS Fleet Services
Mariah.Flowers@iowa.gov
515-414-6582



Risk, DAS <das.risk@iowa.gov>

FW: Trooper Miller Car deer

1 message

Adams Jeannie <jadams@dps.state.ia.us>

Fri, Jan 7, 2022 at 8:06 AM

To: "tammy.hollingsworth@aos.iowa.gov" <tammy.hollingsworth@aos.iowa.gov>, "executivecouncil@tos.iowa.gov" <executivecouncil@tos.iowa.gov>

Cc: "DAS.Risk@iowa.gov" <DAS.Risk@iowa.gov>

Good morning

Please accept this email as a 24 hour notification of an AON. Trp. Miller (#125) was driving #217 and hit a deer. We have not yet received an estimate but I will send it along once it is sent in.

Thank you

Jeannie Adams

ISP Fleet & Supply, Fleet Asset Manager

Department of Public Safety

30 N.E. 48th Place

Des Moines, Iowa 50313

Direct #: 515-725-0643

Cell Phone: 515-204-3019

Shop: 515-281-3277

Fax: 515-242-6321

Email: jadams@dps.state.ia.us

From: Anderson Allen <aanderso@dps.state.ia.us>**Sent:** Thursday, January 6, 2022 8:11 PM**To:** vehicledamage <vehicledamage@dps.state.ia.us>**Cc:** post2sup <post2sup@dps.state.ia.us>; Mitchell Britney <bmitchel@dps.state.ia.us>**Subject:** Trooper Miller Car deer

On 1-6-22 at 18:15 pm Trooper Miller # 125 Struck a deer at the 4 mile marker on I-35 south bound causing damage to the patrol vehicle. Trooper Miller was operating Trooper Nguyen's # 217s patrol vehicle.

Vin# 2C3CDXKT4KH622752

Mileage 72898

Thanks,

Sergeant Allen Anderson

Assistant District Commander

Iowa State Patrol- District 2

1619 Truro Pavement

Osceola, IA 50213

3 attachments



P1000231.JPG

4692K



ISP Memo.docx

39K



MARS_Unit_Report-2022000490.pdf

106K

INVESTIGATING OFFICER'S REPORT OF MOTOR VEHICLE ACCIDENT

MAIL REPORTS TO: Iowa Department of Transportation, Office of Driver Services, P.O. Box 9204, Des Moines, Iowa 50306-9204

Law Enforcement Case Number:

202200490

Date of Accident 01/06/2022		Time of Accident 18:30 Hrs.		County DECATUR - 27		Accident occurred within corporate limits of (city)											
UNIT 1	Driver's Name - Last MILLER					First TAYLOR					Middle JAMES						
	Address 1619 TRURO PAVEMENT					City OSCEOLA					State IA		Zip 50123				
	Date of Birth 05/19/1991		Driver's License Number 123BB4511			CDL Yes <input type="radio"/> No <input checked="" type="radio"/>		Citation Charge 1				Citation Charge 2					
	Male <input checked="" type="radio"/> Female <input type="radio"/>	State IA	Class C	Endorsements	Restrictions B	Citation Charge 3				Citation Charge 4							
	Alcohol Test Given: 1		Test Results:		Drug Test Given: 1		Test Result:		Re-exam: Yes <input type="radio"/> No <input checked="" type="radio"/>		Reason for Re-Exam Request:						
	Owner's Name - Last STATE OF IOWA					First					Middle						
	Address 109 SE 13TH ST					City DES MOINES					State IA		Zip 50319-9018				
	License Plate No. 217		State IA	Year 2099	VIN: 2C3CDXKT4KH622752		Color GRY		Year 2019	Make DODG		Model CHA		Style SD			
	Trailer Plate No.		State	Year	VIN:		Tow 1	Tow #		Towed To		Approx. Cost to Repair or Replace \$8,000.00					
	Insurance Company Name STATE OF IOWA					Insurance Co. Phone Number (515) 281-5512					Insurance Policy Number NONE						
Initial Travel Direction		Veh. Act.	Veh. Config. 01	Cargo Body Type 01	Veh. Defect	Point of Initial Impact		Most Damaged Area		Extent of Damage		Total Occ. in Veh. 1					
Special Veh. Func.		Emergency Status		Bus Use	Driver Condition	Vision Obscured		Contributing Circumstances Driver (up to two) 88			Driver Distractions 02		Speed Limit				
Traffic Controls		Horizontal Alignment		Vertical Alignment		SEQUENCE OF EVENTS		First Event		Second Event		Third Event		Fourth Event		Most Harmful Event	
COMMERCIAL	Carrier Name/Lessee																
	Street Address						City						State		Zip Code		
	Number of Axles		Gross Vehicle Weight Rating				US DOT Number				MC Number		Override/Override				
	Haz Mat Involvement		Haz Mat Placard		Placard Number		Haz. Mat Released		Haz Mat Class		Haz Mat Name						
	Trailer Plate:		State	Year	VIN		<div style="display: flex; justify-content: space-between;"> <div>Sex</div> <div>Seating Position</div> <div>Injury Status</div> <div>Occupant Protection</div> <div>Airbag Deployment</div> <div>Ejection</div> <div>Ejection Path</div> <div>Trapped/extricated</div> <div>Source of Transport</div> <div>Died at scene/enroute</div> </div>										
	Trailer Plate:		State	Year	VIN												
	Converter Dolly		Dolly Plate:		State	Plate Year									VIN		
PERSONS INVOLVED	DRIVER OF UNIT 1					Phone Number:				Transported by:							
						Transported to:											
	Name				Phone Number				DOB:								
	Address				Transported to:				Transported by:								
	Name				Phone Number				DOB:								
	Address				Transported to:				Transported by:								
	Name				Phone Number				DOB:								
	Address				Transported to:				Transported by:								
	Name				Phone Number				DOB:								
	Address				Transported to:				Transported by:								

INVESTIGATING OFFICER'S REPORT OF MOTOR VEHICLE ACCIDENT

Sheet 2 of 3

MAIL REPORTS TO: Iowa Department of Transportation, Office of Driver Services, P.O. Box 9204, Des Moines, Iowa 50306-9204

Law Enforcement Case Number:

202200490

L O C A T I O N	Date of Accident 01/06/2022	Time of Accident 18:30 Hrs.	County DECATUR - 27	Accident occurred within corporate limits of (city)		Legal Intervention? <input type="checkbox"/>	Private Property? <input type="checkbox"/>
	Literal Description I 35 N 1.5MM NB					County: 27	Route:
	If accident occurred outside of city limits show general vicinity <div style="display: flex; justify-content: space-around;"> NNEESESSWWNW </div> <div style="display: flex; justify-content: space-around;"> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> </div> of nearest city					X Coordinate: 422244.468	
	On Road, Street or Highway:			At Intersection with:		Y Coordinate: 4493902.5	
	Note: Unless accident occurred at an intersection which is completely described above, use the space below to give the exact location from a milepost or definable intersection, bridge, or railroad crossing, using two distances and directions if necessary of					If Divided Highway, Provide Route (Cardinal) Travel Direction	
<div style="display: flex; justify-content: space-around;"> NNEESESSWWNW </div> <div style="display: flex; justify-content: space-around;"> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> </div> and <div style="display: flex; justify-content: space-around;"> NNEESESSWWNW </div> <div style="display: flex; justify-content: space-around;"> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> </div>					<div style="display: flex; justify-content: space-around;"> NBSBEBWB </div> <div style="display: flex; justify-content: space-around;"> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> </div>		
Milepost Number		Definable intersection, bridge, or railroad crossing					
ACCIDENT ENVIRONMENT				ROADWAY CHARACTERISTICS			
Location of First Harmful Event		Weather Conditions (up to two)		Major Contributing Circumstances Environment			
Manner of Crash/Collision		Surface Conditions		Roadway			
Light Conditions				Type of Roadway Junction/Feature			
				FRA No.			
First Harmful Event (Crash)	WORKZONE RELATED?	Yes <input type="radio"/> No <input type="radio"/>	Activity	Location	Type	Workers Present	
31							
N O N M O T O R I S T S	Name 001		Phone Number		DOB:		
	Address:				Alcohol Test Given	Test Results:	
	Transported to:				Drug Test Given	Result	Charged Yes No <input type="radio"/> <input type="radio"/>
	Name		Phone Number		DOB:		
	Address:				Alcohol Test Given	Test Results:	Drug Test Given Result Charged Yes No <input type="radio"/> <input type="radio"/>
Transported to:				Transported by:			
N P R O P E R T Y	If Property other than vehicles damaged explain		Object Damaged				Estimate of Damage
	Owner's Last Name		First Name		Middle Name		Phone Number
	Address		City		State	Zip Code	Was owner or tenant notified? 1 = Yes 2 = No 9 = Unknown
	If Property other than vehicles damaged explain		Object Damaged				Estimate of Damage
	Owner's Last Name		First Name		Middle Name		Phone Number
U L D A M R G	Address		City		State	Zip Code	Was owner or tenant notified? 1 = Yes 2 = No 9 = Unknown
	Last Name		First Name		Address		City State Zip Code Phone Number
	Last Name		First Name		Address		City State Zip Code Phone Number
	Last Name		First Name		Address		City State Zip Code Phone Number
	Last Name		First Name		Address		City State Zip Code Phone Number
W I T N E S S	Last Name		First Name		Address		City State Zip Code Phone Number
	Last Name		First Name		Address		City State Zip Code Phone Number
	Last Name		First Name		Address		City State Zip Code Phone Number
	Last Name		First Name		Address		City State Zip Code Phone Number
	Last Name		First Name		Address		City State Zip Code Phone Number
Is This a Secondary Crash? Y <input type="radio"/> N <input checked="" type="radio"/>		Type of Primary Incident				Roadway Clearance Date 01/06/2022	Incident Clearance Date 01/06/2022
Signature of Officer TROOPER T HOWARD		Badge Number 059	Time Officer Notified of Accident 18:30 Hrs.		Roadway Clearance Time 18:35 Hrs.	Incident Clearance Time 20:01 Hrs.	
Name of Agency IOWA STATE PATROL - DIST 02		Date of Report 01/06/2022	Time Officer Arrived At Scene 18:30 Hrs.		Total Roadway Clearance Time 000:05	Total Incident Clearance Time 001:31	
Report Reviewed By		Date of Review	Investigation made at scene? Y <input checked="" type="radio"/> N <input type="radio"/>		T.I. No.	Other Technical Investigating Agency	

INVESTIGATING OFFICER'S REPORT
OF MOTOR VEHICLE ACCIDENT

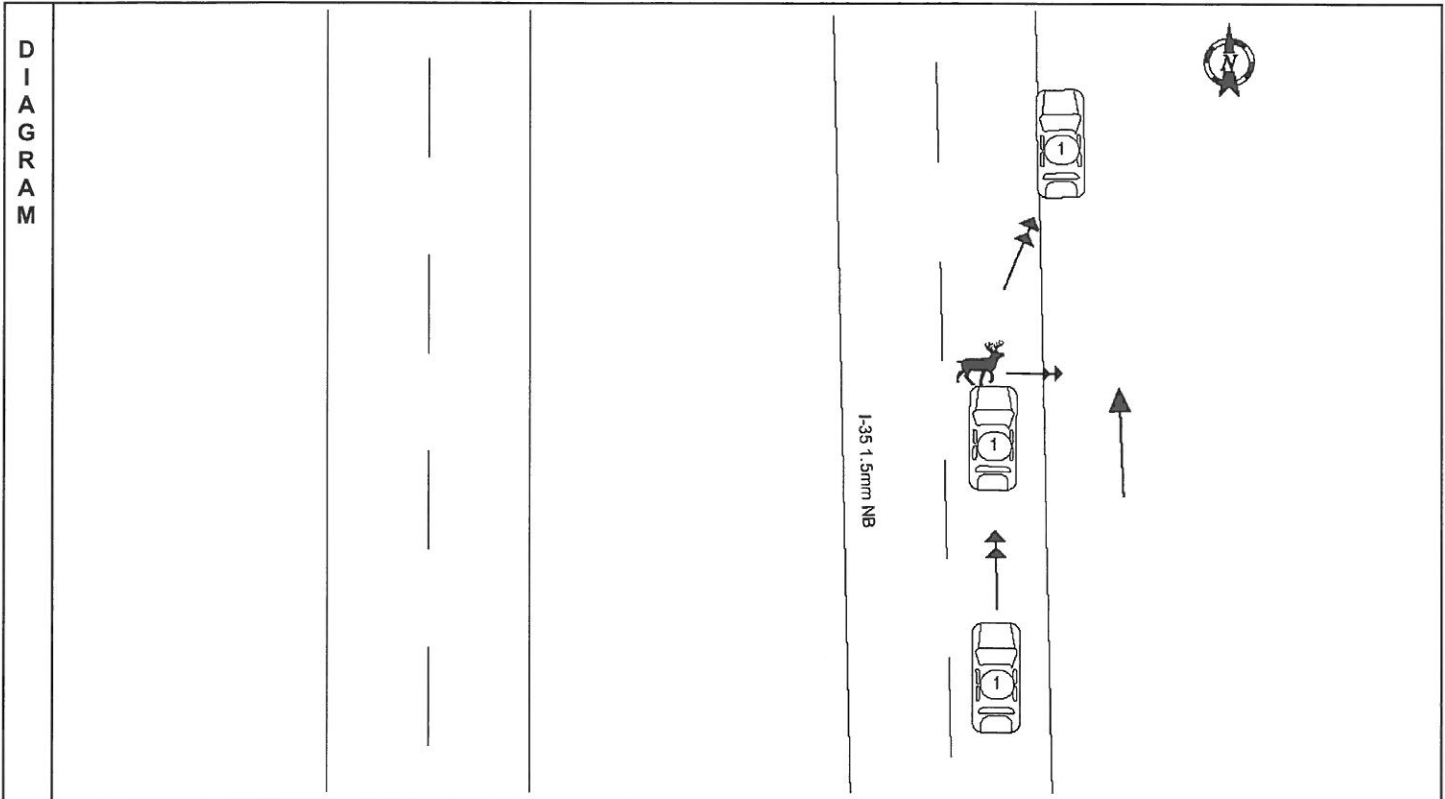
Sheet 3 of 3

Form 4433003 (11-13)

Law Enforcement Case Number:

2022000490

MAIL REPORTS TO: Iowa Department of Transportation, Office of Driver Services, P.O. Box 9204, Des Moines, Iowa 50306-9204



**N
A
R
R
A
T
I
V
E**

Unit 1 was a marked patrol car.
Unit 1 was traveling North bound on Interstate 35 at approximately the 1.5 mile marker, when a deer entered the roadway.
Unit 1 came in contact with the deer causing damage to the patrol car.
Unit 1 came to a stop on the outsider shoulder of the interstate.



MEMORANDUM

TO: Sgt. Allen Anderson #438

FROM: Trooper Miller #125

DATE: 01/06/2022

SUBJECT: Patrol Car Deer Accident

On 01/06/22 at approximately 1815 I was southbound on I35 in the right lane, a deer came out of the left ditch and I struck it with the front of the patrol car. All damage was functional and I was able to drive it away. I notified supervision immediately after.

Date: 3/ 1/2022 09:26 AM
 Estimate ID: 7762010034
 Estimate Version: 2
 Supplement: 2 (P F) 2/16/2022 09:41:32
 Profile ID: * Mitchell

Property Damage Appraisers (PDA Des Moines)

P.O. Box 144, Collins, IA 50055
 (515) 222-1906
 Fax: (515) 222-1929
 Email: pdadesmoines@pdaorg.net

* Not An Authorization For Repair *
 Read disclaimers following appraisal calculations.

Damage Assessed By: CALEB CUTLER
 Supplemented By: CALEB CUTLER
 Classification: Field

Appraised For: JESSICA HACKBARTH

Condition Code: Good
 Date of Loss: 1/14/2022
 Deductible: 0.00
 File Number: 7762010034
 Claim Number: APDSOI0231901-001

Type of Loss: Collision

Insured: STATE OF IOWA
 Owner: STATE OF IOWA
 Address: 1619 TRURO PAVEMENT, OSCEOLA, IA 50213
 Telephone: Work Phone: (641) 342-2108

Mitchell Service: 911667

Description: 2019 Dodge Charger Police
 Body Style: 4D Sed
 VIN: 2C3CDXKT4KH622752
 Mileage: 74,775
 OEM/ALT: A
 Parts Profile: Des Moines
 Color: GRAY

Vehicle Production Date: 5/19
 Drive Train: 5.7L Inj 8 Cyl 5A AWD
 License: 217 IA

Parts Profile Version: 2

Line Item	Entry Number	Labor Type	Operation	Line Item Description	Part Type/ Part Number	Dollar Amount	Labor Units
Information Labels							
1	103015	BDY	REMOVE/REPLACE	Inform Label Emission Information	68406451AA	5.40	0.1*
2	103522	BDY	REMOVE/REPLACE	Inform Label Air Cond Caution	68420855AB	1.75	0.1*
Front Bumper							
3		BDY	OVERHAUL	Frnt Bumper Cover Assy			4.0 #
4	102899	BDY	REMOVE/REPLACE	Frnt Bumper Cover	68267765AC	740.00	INC #
5		REF	REFINISH	Frnt Bumper Cover			C 2.7 #
6	100935	BDY	REMOVE/REPLACE	R Frnt Bumper Bracket	** QUAL REPL PART	27.00	INC #
7	100936	BDY	REMOVE/REPLACE	L Frnt Bumper Bracket	** QUAL REPL PART	27.00	INC #
8	100937	BDY	REMOVE/REPLACE	R Frnt Bumper Support Bracket	** QUAL REPL PART	7.00	INC #
9		BDY	REMOVE/INSTALL	Frnt Bumper Cover			INC #
10	100938	BDY	REMOVE/REPLACE	L Frnt Bumper Support Bracket	** QUAL REPL PART	7.00	INC #
11	103658	BDY	REMOVE/REPLACE	Frnt Bumper License Plate Bracket	** QUAL REPL PART	44.00	INC
12	100939	BDY	REMOVE/REPLACE	R Frnt Otr Bumper Reinforcement	** QUAL REPL PART	27.00	INC
13	100940	BDY	REMOVE/REPLACE	L Frnt Otr Bumper Reinforcement	** QUAL REPL PART	27.00	INC
S2 14	100942	BDY	REMOVE/REPLACE	Frnt Bumper Pin 12@5.40	06509960AA	64.80	* INC
S2 15	100931	BDY	REMOVE/REPLACE	Frnt Lwr Bumper Grille	68240583AB	110.00	* INC #
16	100945	BDY	REMOVE/REPLACE	Frnt Bumper Energy Absorber	** QRP Certified	83.00	INC #
Grille							
17	101091	BDY	REMOVE/REPLACE	Grille	** QRP Certified	311.00	INC #
18	102762	BDY	REMOVE/REPLACE	Grille Nameplate	68357731AA	95.80	INC
Special/Manual Entry							
S2 19	900500	BDY*	REMOVE/REPLACE	Charger Insert	68240582AB	31.45	* INC*
Front Lamps							

This estimate has been re-calculated with a modified profile.

ESTIMATE RECALL NUMBER: 01/19/2022 12:18:31 7762010034
 Mitchell Data Version: OEM: JAN_22_V0211 Alternate Parts: 02/16/2022 09:23:34
 Copyright (C) 1994 - 2022 Mitchell International
 Software Version: 7.1.242 All Rights Reserved

Date: 3/ 1/2022 09:26 AM
 Estimate ID: 7762010034
 Estimate Version: 2
 Supplement: 2 (P F) 2/16/2022 09:41:32
 Profile ID: * Mitchell

20	100377	BDY	REMOVE/INSTALL	R Front Combination Lamp				INC #
21	100389	BDY	REMOVE/INSTALL	L Front Combination Lamp				INC #
<u>Hood</u>								
22	100559	BDY	REMOVE/REPLACE	Hood Panel (Alum)	68265445AB	1,160.00	1.6	
23		REF	REFINISH	Hood Outside			C 2.8	
24		REF	REFINISH	Add For Hood Underside			C 1.4	
25	102478	BDY	REMOVE/INSTALL	Hood Insulator	Existing		INC r	
<u>Additional Operations</u>								
26	931127	MCH	ADD'L LABOR OP	Pre Repair Scan	Existing		0.5*	
27	931128	MCH	ADD'L LABOR OP	Post Repair Scan	Existing		0.5*	
<u>Hood</u>								
28	100593	BDY	REMOVE/REPLACE	Frt Hood Seal	68271447AB	52.25	0.2	
29	100569	BDY	REMOVE/REPLACE	Hood Weatherstrip	68040220AC	40.10	INC	
<u>Special/Manual Entry</u>								
S2 30	900500	BDY*	ADD'L LABOR OP	Whelen Horn	SA315P	0.00	* 1.0*	
S2 31	900500	BDY*	ADD'L LABOR OP	Push Bar	New	0.00	* 6.0*	
<u>Cooling</u>								
S2 32	102112	BDY	REMOVE/REPLACE	R Cooling Air Deflector Seal	** QUAL REPL PART	21.00	*	
S2 33	102113	BDY	REMOVE/REPLACE	L Cooling Air Deflector Seal	** QUAL REPL PART	21.00	*	
34	102481	BDY	REMOVE/REPLACE	Cooling Radiator	68050126AB	541.00	INC #	
35		BDY	REMOVE/REPLACE	Vacuum-Fill & Bleed Cooling System			0.6	
S2 36	102482	BDY	REMOVE/REPLACE	R Upr Cooling Insulator	4596474AD	24.45		
S2 37	102483	BDY	REMOVE/REPLACE	L Upr Cooling Insulator	4596474AD	24.45		
<u>Additional Costs & Materials</u>								
S2 38	936003		ADD'L COST	Coolant		25.70	*	
<u>Cooling</u>								
39	102491	BDY	REMOVE/REPLACE	Upr Cooling Radiator Seal	** QUAL REPL PART	62.00		
40	102492	BDY	REMOVE/REPLACE	R Lwr Cooling Seal	ORDER FROM DEALER	52.25		
41	102493	BDY	REMOVE/REPLACE	L Lwr Cooling Seal	ORDER FROM DEALER	52.25		
42	102494	BDY	REMOVE/REPLACE	Lwr Cooling Radiator Seal	** QUAL REPL PART	62.00		
<u>A/C /Heater/Ventilation</u>								
43	101057	MCH	REMOVE/REPLACE	A/C Condenser/Trans Cooler -M	68085784AA	521.00	1.3 #	
44		MCH	REMOVE/REPLACE	Evacuate & Recharge A/C -M			1.4	
<u>Front Inner Structure</u>								
45	100524	BDY	REMOVE/REPLACE	Frt Body Upper Crossmember	68200478AC	311.00	2.0 #	
46		MCH	REMOVE/REPLACE	Add To R&I/R&R Mechanical Components -M			0.5 #	
47		REF	REFINISH	Upr Rad Supt Crossmember			1.5	
48		BDY	CHECK/ADJUST	Headlamps			0.4	
49	100447	BDY	REMOVE/REPLACE	Frt Body Closing Panel	** QUAL REPL PART	143.00	INC #	
<u>Electrical</u>								
S2 50	101211	BDY	REMOVE/REPLACE	Low Note Horn Assy	68238001AC	33.55	INC #	
S2 51	101212	BDY	REMOVE/REPLACE	High Note Horn Assy	68238002AE	32.85	INC #	
<u>Additional Costs & Materials</u>								
52	936012		ADD'L COST	Hazardous Waste Disposal		5.00	*	
53	936014		ADD'L COST	Flex Additive		5.00	*	
<u>Additional Operations</u>								
S2 54	933000	REF	ADD'L OPR	Two Tone			1.0*	
55				GLOSS BLACK FRT COVER				
56		REF	ADD'L OPR	Clear Coat			1.9	
57	933003	REF	ADD'L OPR	Tint Color			0.5*	
58	933005	BDY	ADD'L OPR	Restore Corrosion Protection		6.00	* 0.3*	
59	933018	REF	ADD'L OPR	Mask For Overspray		5.00	* 0.2*	
<u>Special/Manual Entry</u>								
S2 60	900500	BDY*	REMOVE/REPLACE	Seam Sealer	** QUAL REPL PART	47.94	* 1.0*	

* - Judgment Item
 # - Labor Note Applies
 ** QRP Certified - Quality Replacement Parts - Certified
 ** QUAL REPL PART - Quality Replacement Parts
 C - Included in Clear Coat Calc
 r - CEG R&R Time Used For This Labor Operation

This estimate has been re-calculated with a modified profile.

ESTIMATE RECALL NUMBER: 01/19/2022 12:18:31 7762010034

Mitchell Data Version: OEM: JAN_22_V0211 Alternate Parts: 02/16/2022 09:23:34

Copyright (C) 1994 - 2022 Mitchell International

Software Version: 7.1.242

All Rights Reserved

KEYSTONE KEYSIQ
100 E. 5TH ST.
WATERLOO
IA 50703
(319) 234-3414 (800) 258-8885

KEYSTONE KEYSIQ
810 SE CORP WOODS DR.
STE. 120
ANKENY
IA 50021
(800) 845-1515 (515) 727-7857

49	** CH1224101	143.00	6	** CH1043111	27.00
			7	** CH1042111	27.00
			8	** CH1043118	7.00
			10	** CH1042118	7.00
			11	** CH1068145	44.00
			12	** CH1043112	27.00
			13	** CH1042112	27.00
			16	** CH1070836C	83.00
			17	** CH1200388C	311.00
			39	** CH1218120	62.00
			42	** CH1218120	62.00

Estimate Totals

I. Labor Subtotals		Units	Rate	Add'l Labor Amount	Sublet Amount	Totals	II. Part Replacement Summary		Amount
	Body	17.3	64.00	6.00	0.00	1,113.20 T		Taxable Parts	4,811.29
	Refinish	12.0	108.00	5.00	0.00	1,301.00 T			
	Mechanical	4.2	70.00	0.00	0.00	294.00 T		Total Replacement Parts Amount	4,811.29
	Taxable Labor					2,708.20			
	Labor Summary	33.5				2,708.20			
III. Additional Costs				Amount		IV. Adjustments		Amount	
	Taxable Costs			35.70			Insurance Deductible	0.00	
	Total Additional Costs			35.70			Customer Responsibility	0.00	
						I.	Total Labor:	2,708.20	
						II.	Total Replacement Parts:	4,811.29	
						III.	Total Additional Costs:	35.70	
							Gross Total:	7,555.19	
						IV.	Total Adjustments:	0.00	
							Net Total:	7,555.19	
							Less Original Net Total:	7,692.20	
							Net Supplement Amount:	137.01-	
							S1: CALEB CUTLER	21.00-	
							S2: CALEB CUTLER	116.01-	

Point(s) of Impact
12 Front Center (P)

Insurance Co: DAS FLEET SERVICES
DES MOINES, IA 50139
Work Phone: (877) 544-7843

Inspection Site: OTHER
Address: 1619 TRURO PAVEMENT
OSCEOLA, IA 50213
Inspection Date: 1/19/2022

This estimate has been re-calculated with a modified profile.

ESTIMATE RECALL NUMBER: 01/19/2022 12:18:31 7762010034
Mitchell Data Version: OEM: JAN_22_V0211 Alternate Parts: 02/16/2022 09:23:34
Copyright (C) 1994 - 2022 Mitchell International
Software Version: 7.1.242 All Rights Reserved