

**Accident or Vehicle Damage Report
Carolina Honduras Health Foundation**

Immediately after an accident or any physical damage to a CHHF vehicle, fill out this form. Give it to David Kelly and send one copy to Christine Mitchell at christinemitchell@chhf.org asap. If making a copy is not possible, send Christine at CHHF, PO Box 528, Barnwell, SC 29812

CHHF Vehicle: (Check one) Toyota 16 passenger van Nissan 11 passenger van
 Ford F 250 truck Utility Trailer
 Yellow Bus

Name of Driver: _____

Team Leader Name: _____

Team Leader phone & email: _____

Date of accident or vehicle damage: _____

Accident location: _____

Police office location and report number: _____

For what purpose was vehicle being used? _____

Occupants of vehicle at time of accident (list all names):

Name, address, and phone number for all injured: (Use back of sheet if necessary.)

Describe damage to CHHF vehicle.

Describe damage to other vehicle(s).

Draw a diagram of accident if other vehicles involved. Use back of this sheet.

Take digital photos of all damage and accident scene and forward with a copy of this form to David Kelly at 504 9988-4034 and Christine Mitchell at 331-588-4229 or via email at christinemitchell@chhf.org