20-02713

WISCONSIN MOTOR VEHICLE CRASH REPORT

	Document Number Override	Primary Crash D	ocument #	Agency 20-027	Crash Number 13		Investigating Officer/Deputy DEPUTY B. SCHLOUGH		
מ	Crash Date 03/12/2020	Crash Time 09:18 AM		Date Ar 03/12/2			Time Arrived 09:28 AM		
	Date Notified 03/12/2020	Time Notified 09:21 AM		Total Ui 02		Total Injured	00 00		
USU	On Emergency	and Run	Lane Closu	ıre	Work Zone	Trailer	or Towed	Reporting Threshold	
0 I L	Government Property	Active Sc	hool Zone	School NO	Bus Related	Tags			
	Reportable	Crash Type DT4000 (STA	NDARD CRASH	)		Ameno	led	Secondary Crash	
l	Description								
	Diagram		CTU V			Þ	Reconstruction Photos By Additional Info		
		CTH W							
	KOHLMEYER RE				RAWING NOT TO				
	UNIT 2 WAS TRAVELING E/B ON C								
	TRAVELING E/B ON CTH W. UNIT REAR ENDED UNIT 2. BOTH UNITS	1 CRESTED THE	HILL AND AND ATT	EMPTED	TO SLOW DOWN. UNIT				

20-02713

2

UNIT

5

UNIT

# WISCONSIN MOTOR VEHICLE **CRASH REPORT**

### SAUK COUNTY SHERIFFS DEPARTMEN **1300 LANGE COURT BARABOO, WI 53913** (608) 356-4895

Location					Ĩ				
ON CTHWEB 36 FT W					Latitude 43.444141896			Longitude -89.837164639	
OF KOHLMEYER RI	ר				X Coordinate Y Coord				
IN THE TOWN OF B		00							
IN SAUK COUNTY					270414.75 4814048.5 Structure Type			+0.5	
					Structure	туре			
Crash Scene									
First Harmful Event					First Harm	ful Event	Location		
MOTOR VEH IN TRANSPORT					ON ROADWAY				
Manner of Collision					Light Condition				
03 - FRONT TO REAR					DAYLIG	НТ			
Road Surface Condition(s)					Roadway	Factor(s)			
WET									
Environment Factor(s)									
NONE					NONE				
Weather Condition(s)									
CLOUDY, RAIN									
Animal Type					Relation T	o Trafficw	ау		
					TRAFFICWAY - ON ROAD				
Crash Classification - Lo					Crash Classification - Jurisdiction				
PUBLIC PROPERTY					NO SPECIAL JURISDICTION				
Tribal Land					Access Control Special Stu NO CONTROL			Special Study	
Within Interchange Area		Junction Location		Intersectio	n Type				4
NO		INTERSECTION-RELATE	D	T-INTER	SECTION				
Unit Summary									
Unit Status							Link Terra		
				erating As C	lassification		Unit Type		
IN TRANSIT			D CLASS	erating As C	lassification		TRUCK		
IN TRANSIT Vehicle Type	кир т	RUCK		erating As C	lassification			s Endorse	ments
IN TRANSIT	КИР Т	RUCK				Total Tra	TRUCK Operating A		ments Mat Types
IN TRANSIT Vehicle Type UTILITY TRUCK/PIC	KUP T		D CLASS				TRUCK Operating A		
IN TRANSIT Vehicle Type UTILITY TRUCK/PIC Total Occs	KUP T		D CLASS			Total Tra	TRUCK Operating A	Total Haz	Mat Types
IN TRANSIT Vehicle Type UTILITY TRUCK/PIC Total Occs 1	KUP T	Train/Bus # Recorded	D CLASS	tions Issued CrashTire Mark		Total Tra	TRUCK Operating A ailers	Total Haz 0 Total Lan 2	Mat Types es
IN TRANSIT Vehicle Type UTILITY TRUCK/PIC Total Occs 1 Insurance? YES Most Harmful Event: Co	llision W	Train/Bus # Recorded Direction Of Travel EASTBOUND	D CLASS	tions Issued CrashTire Mark Inction		Total Tra <b>0</b> Speed L	TRUCK Operating A iilers imit Emergency	Total Haz <b>0</b> Total Lan <b>2</b> Motor Veh	Mat Types es icle Use
IN TRANSIT Vehicle Type UTILITY TRUCK/PIC Total Occs 1 Insurance? YES Most Harmful Event: Co MOTOR VEH IN TRA	llision W	Train/Bus # Recorded Direction Of Travel EASTBOUND	D CLASS	tions Issued CrashTire Mark Iction IAL FUNC		Total Tra <b>0</b> Speed L	TRUCK Operating A iilers imit Emergency NOT APP	Total Haz 0 Total Lan 2 Motor Veh LICABLE	Mat Types es icle Use
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IN TRANSIT Vehicle Type UTILITY TRUCK/PIC Total Occs 1 Insurance? YES Most Harmful Event: Co MOTOR VEH IN TRA Traffic Way TWO-WAY, NOT DIV Surface Type BLACKTOP (BITUM Truck Bus or HazMat NO Vehicle License Plate Num DP5468 Vehicle Identificati 1GCVKSEC3E2	Ilision W ANSPO /IDED INOUS	Train/Bus # Recorded Direction Of Travel EASTBOUND //ith PRT	D CLASS	tions Issued CrashTire Mark ICTION IAL FUNC rol ROL ature T	TION	Total Tra 0 Speed L 55 St WI Year	TRUCK Operating A illers imit Emergency NOT APP Traffic Cont NO Road Grade DOWNHIL Country of Is UNITED S Model	Total Haz 0 Total Lan 2 Motor Veh LICABLE rol Inopera - L - - - - - - - - - - - - -	Mat Types es icle Use
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# WISCONSIN MOTOR VEHICLE CRASH REPORT

I I		Towed Due To Damage		Va	nicle Removed By				
		-			•				
					OPERATOR Vahida Eastara				
	What Driver Was Doing			Ve	Vehicle Factors				
		GOING STRAIGHT							
		Driver Prior Action Other		NC	OT APPLICABLE				
		Driver Actions							
	ш	FAILURE TO CONTROL							
E	5								
UNIT	VEHICLE								
2	Ē								
	>								
		Owner Name			Owner Address				
		HARLYN G BRAUN			S6467 COUNTY ROAD PF				
2	2	(608) 522-4242			NORTH FREEDOM, WI 53951 , US	6			
	•								
	ę	Sequence Of Events							
	5		OPT						
	0	MOTOR VEH IN TRANSPO							
	2	Event							
	02								
	-	Event							
	03								
		Event							
	04	Lvent							
E		Policy Holder							
UNIT		Insurance Company			Individual				
		JOHNSON INSURANCE		1	HARLYN BRAUN				
	1	Individual							
		Driver			Citations Issued	Sex			
		HARLYN G BRAUN			1	MALE			
	AL	(608) 522-4242			Date of Birth	Race			
	Ď					WHITE			
UNIT	5	Address			Driver Lieenee Number				
5	INDIVIDUAL	S6467 COUNTY ROAD PF	-		Driver License Number				
	Z	NORTH FREEDOM, WI 53		:	STATE: WISCONSIN COUNTRY: UNITED STATES				
			<b>2</b>						
	Sat	fety Equipment	Crash	:	Safety Equipment				
	Our	ety Equipment							
		Row	Seat Position	:	SHOULDER & LAP BELT				
		01 - FRONT ROW	07 - LEFT						
		elmet Use		Helmet Compliance					
		Eye Protection			Tint Compliance				
					Fint Compliance				
L I	5	Eye Protection	everity		Tint Compliance Airbag				
01	001	Eye Protection	everity PARENT INJURY						
01	001	Eye Protection			Airbag	Trapped/Extricated			
01	001	Eye Protection Injury Se NO AP	PARENT INJURY	,	Airbag NON DEPLOYED	Trapped/Extricated NOT TRAPPED			
01	001	Eye Protection Injury Se NO AP Ejected	PARENT INJURY Ejection Path		Airbag NON DEPLOYED				
01	001	Eye Protection Injury Se NO AP Ejected NOT EJECTED	PARENT INJURY Ejection Path		Airbag NON DEPLOYED	NOT TRAPPED			
01	001	Eye Protection Injury Se NO AP Ejected NOT EJECTED Medical Transport	PARENT INJURY Ejection Path		Airbag NON DEPLOYED	NOT TRAPPED			
01	001	Eye Protection Injury Se NO AP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED	PARENT INJURY Ejection Path		Airbag NON DEPLOYED CABLE EMS Agency Identifier	NOT TRAPPED EMS Run #			
01	001	Eye Protection Injury Se NO AP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital Distracte	PARENT INJURY Ejection Path NOT EJECTED/NOT A	APPLIC	Airbag NON DEPLOYED CABLE EMS Agency Identifier Date of Death	NOT TRAPPED EMS Run #			
01	001	Eye Protection Injury Se NO AP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital Distracte	PARENT INJURY Ejection Path NOT EJECTED/NOT A	APPLIC	Airbag NON DEPLOYED CABLE EMS Agency Identifier Date of Death	NOT TRAPPED EMS Run #			
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20-02713

# WISCONSIN MOTOR VEHICLE CRASH REPORT

		Non Motorist	Striking Unit #	Location						
		Prior Action								
		Action								
		ACIION								
	Ļ									
I.	٩N									
UNIT	ē									
5	INDIVIDUAL									
	Z									
		Action Other						To/From School		
		Action Other						To/From School		
-			Suspected Alcohol L	Jse	Suspected Drug Use					
		Drug & Alcohol	& Alcohol NO			NO				
		Alcohol Test Given		Alcohol Test Type	•		Alcohol Tes	st Results		
		TEST NOT GIVEN								
		Drug Test Given TEST NOT GIVEN		Drug Test Type	e Drug Test Results		esults			
2	001	Drug Type								
	U									
		Individual Condition								
			141							
Violations										
		UTC Number		tute Number				N		
	6	AD978022		tute Number 6.57(2)	Description FAILURE TO KEEP	VEHICLE UI		DL		
	5 Uni	AD978022 t Summary ■		6.57(2)	FAILURE TO KEEP			DL		
	ଧି Unit Unit	AD978022 t Summary Status		6.57(2)	FAILURE TO KEEP		Unit Type			
	ତ Unit Unit IN T	AD978022 t Summary Status TRANSIT		6.57(2)	FAILURE TO KEEP		Unit Type AUTOMO	BILE		
02	5 Unit Unit IN T Vehi	AD978022 t Summary Status RANSIT icicle Type		6.57(2)	FAILURE TO KEEP		Unit Type AUTOMO			
	5 Unit Unit IN T Vehi PAS	AD978022 t Summary Status TRANSIT		6.57(2) V D	FAILURE TO KEEP	fication	Unit Type AUTOMO	BILE		
	5 Unit Unit IN T Vehi PAS	AD978022 t Summary Status RANSIT icle Type SSENGER CAR	001 344	6.57(2) V D	FAILURE TO KEEP ehicle Operating As Classi CLASS	fication	Unit Type AUTOMO Operating A	BILE As Endorsements		
	5 Unit Unit IN T Vehi PAS Tota 1 Insu	AD978022 t Summary Status RANSIT icle Type SSENGER CAR I Occs rance?	001 344 Train/Bus # Re Direction Of Tr	6.57(2)	FAILURE TO KEEP ehicle Operating As Classi CLASS	fication Total <b>0</b> Spee	Unit Type AUTOMO Operating A	BILE As Endorsements Total HazMat Types 0 Total Lanes		
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	Dunit Unit IN T Vehi PAS Tota 1 Insur YES Most	AD978022 t Summary Status RANSIT icle Type SSENGER CAR il Occs rance? S t Harmful Event: Collisic	001 344	6.57(2)	FAILURE TO KEEP         ehicle Operating As Classic         o CLASS         otal # Citations Issued         Pre CrashTire         Mark         pecial Function	fication Total 0 Spee 55	Unit Type AUTOMO Operating A Trailers d Limit Emergency	BILE As Endorsements Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use		
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UNIT 02	5 Unit Unit IN T Vehi PAS Tota 1 Insur YES Most Traff Truc NO	AD978022 t Summary Status RANSIT icle Type SSENGER CAR I Occs I Cocs t Harmful Event: Collisic TOR VEH IN TRANS fic Way D-WAY, NOT DIVIDE ace Type ACKTOP (BITUMINC k Bus or HazMat Vehicle License Plate Number AGD5168 Vehicle Identification N	001 344	6.57(2)	FAILÚRE TO KEEP         ehicle Operating As Classi         octal # Citations Issued         Pre CrashTire         Mark         pecial Function         IO SPECIAL FUNCTIO         raffic Control         O CONTROL         oad Curvature         TRAIGHT         Plate Type         AUT - AUTOMOBILE	fication Total 0 Spee 55 VN	Unit Type AUTOMO Operating A Trailers d Limit Emergency NOT APP Traffic Cont NO Road Grade DOWNHII	BILE As Endorsements Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use VLICABLE trol Inoperative/Missing e LL ssuance TATES		
NIT 02	5 Unit Unit IN T Vehi PAS Tota 1 Insuu YES MOS Traff TWO Surfa BLA Truc NO	AD978022 t Summary Status FRANSIT icle Type SSENGER CAR I Occs rance? S t Harmful Event: Collisic TOR VEH IN TRANS fic Way O-WAY, NOT DIVIDE ace Type ACKTOP (BITUMINC ik Bus or HazMat Vehicle License Plate Number AGD5168 Vehicle Identification N 1HGCP26339A052	001 344	6.57(2)	FAILÚRE TO KEEP         ehicle Operating As Classi         octal # Citations Issued         Pre CrashTire         Mark         pecial Function         IO SPECIAL FUNCTIO         raffic Control         O CONTROL         oad Curvature         TRAIGHT         Plate Type         AUT - AUTOMOBILE         Make         HONDA	fication Total 0 Spee 55	Unit Type AUTOMO Operating A Trailers d Limit Emergency NOT APP Traffic Cont NO Road Grad DOWNHII Country of Is UNITED S Model ACCORD	BILE As Endorsements Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use VLICABLE trol Inoperative/Missing e LL ssuance TATES		
UNIT 02	5 Unit Unit IN T Vehi PAS Tota 1 Insur YES Most Traff Truc NO	AD978022 t Summary Status FRANSIT icle Type SSENGER CAR I Occs I Occs TOR VEH IN TRANS fic Way D-WAY, NOT DIVIDE ace Type ACKTOP (BITUMINC ik Bus or HazMat Vehicle License Plate Number AGD5168 Vehicle Identification N 1HGCP26339A052 Color	001 344	6.57(2)	FAILÚRE TO KEEP         ehicle Operating As Classi         octal # Citations Issued         Pre CrashTire         Mark         pecial Function         IO SPECIAL FUNCTIO         raffic Control         O CONTROL         oad Curvature         TRAIGHT         Plate Type         AUT - AUTOMOBILE	fication Total 0 Spee 55 VN	Unit Type AUTOMO Operating A Trailers d Limit Emergency NOT APP Traffic Cont NO Road Grade DOWNHII	BILE As Endorsements Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use VLICABLE trol Inoperative/Missing e LL ssuance TATES		
UNIT 02	5 Unit Unit IN T Vehi PAS Tota 1 Insur YES Most Traff Truc NO	AD978022 t Summary Status FRANSIT icle Type SSENGER CAR I Occs rance? S t Harmful Event: Collisic TOR VEH IN TRANS fic Way O-WAY, NOT DIVIDE ace Type ACKTOP (BITUMINC ik Bus or HazMat Vehicle License Plate Number AGD5168 Vehicle Identification N 1HGCP26339A052	001 344	6.57(2)	FAILÚRE TO KEEP         ehicle Operating As Classi         otal # Citations Issued         Pre CrashTire Mark         pecial Function         IO SPECIAL FUNCTIO         raffic Control         O CONTROL         oad Curvature         TRAIGHT         Plate Type         AUT - AUTOMOBILE         Make         HONDA         Body Style	fication Total 0 Spee 55 VN	Unit Type AUTOMO Operating A Trailers d Limit Emergency NOT APP Traffic Cont NO Road Grad DOWNHII Country of Is UNITED S Model ACCORD	BILE As Endorsements Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use VLICABLE trol Inoperative/Missing e LL ssuance TATES		

20-02713

# WISCONSIN MOTOR VEHICLE CRASH REPORT

	щ			Vehicle Damage					
UNIT	<u></u>	Extent Of Damage							
5	VEHICLE			06 - REAR					
	>	FUNCTIONAL DAMAGE		Vehicle Removed By					
		Towed Due To Damage <b>NOT TOWED</b>		OPERATOR					
		What Driver Was Doing		Vehicle Factors					
		STOP IN TRAFFIC							
		Driver Prior Action Other		NOT APPLICABLE					
		Driver Actions NO CONTRIBUTING ACTIO	N						
⊢	Ë		IN						
UNIT									
	Ψ								
	_								
		Owner Name		Owner Address					
02	02	JEFFREY JOHN MILLER (608) 522-4427		S6413 COUNTY ROAD PF NORTH FREEDOM, WI 53951, U	e				
0	0	(000) 322-4421			5				
		Sequence Of Events Event							
	0	MOTOR VEH IN TRANSPOR	RT						
	2	Event							
	02								
	03	Event							
	0								
	8	Event							
		Policy Holder							
UNIT		Insurance Company		Individual					
UNIT		Insurance Company ERIE-INS-CO		Individual JEFFREY MILLER					
UNIT		Insurance Company ERIE-INS-CO Individual		JEFFREY MILLER	Sex				
UNIT		Insurance Company ERIE-INS-CO Individual Driver JEFFREY JOHN MILLER			Sex MALE				
UNIT		Insurance Company ERIE-INS-CO Individual Driver		Citations Issued					
		Insurance Company ERIE-INS-CO Individual Driver JEFFREY JOHN MILLER		Citations Issued 0	MALE				
		Insurance Company ERIE-INS-CO Individual Driver JEFFREY JOHN MILLER (608) 522-4427 Address		Citations Issued 0	MALE Race				
UNIT UNIT	<b>NDIVIDUAL</b>	Insurance Company ERIE-INS-CO Individual Driver JEFFREY JOHN MILLER (608) 522-4427 Address S6413 COUNTY ROAD PF	51 . US	JEFFREY MILLER       Citations Issued       0       Date of Birth       Driver License Number	MALE Race WHITE				
		Insurance Company ERIE-INS-CO Individual Driver JEFFREY JOHN MILLER (608) 522-4427 Address	51 , US	JEFFREY MILLER         Citations Issued         0         Date of Birth	MALE Race WHITE				
	INDIVIDUAL	Insurance Company ERIE-INS-CO Individual Driver JEFFREY JOHN MILLER (608) 522-4427 Address S6413 COUNTY ROAD PF NORTH FREEDOM, WI 5395		JEFFREY MILLER         Citations Issued         0         Date of Birth         Driver License Number         STATE: WISCONSIN COUNTRY: UN	MALE Race WHITE				
	INDIVIDUAL	Insurance Company ERIE-INS-CO Individual Driver JEFFREY JOHN MILLER (608) 522-4427 Address S6413 COUNTY ROAD PF		JEFFREY MILLER       Citations Issued       0       Date of Birth       Driver License Number	MALE Race WHITE				
	INDIVIDUAL	Insurance Company ERIE-INS-CO Individual Driver JEFFREY JOHN MILLER (608) 522-4427 Address S6413 COUNTY ROAD PF NORTH FREEDOM, WI 5395		JEFFREY MILLER         Citations Issued         0         Date of Birth         Driver License Number         STATE: WISCONSIN COUNTRY: UN	MALE Race WHITE				
	INDIVIDUAL	Insurance Company ERIE-INS-CO Individual Driver JEFFREY JOHN MILLER (608) 522-4427 Address S6413 COUNTY ROAD PF NORTH FREEDOM, WI 5395 fety Equipment	rash	JEFFREY MILLER         Citations Issued         0         Date of Birth         Driver License Number         STATE: WISCONSIN COUNTRY: UN         Safety Equipment         SHOULDER & LAP BELT	MALE Race WHITE				
	INDIVIDUAL	Insurance Company ERIE-INS-CO Individual Driver JEFFREY JOHN MILLER (608) 522-4427 Address S6413 COUNTY ROAD PF NORTH FREEDOM, WI 5395 fety Equipment	rash Seat Position	JEFFREY MILLER         Citations Issued         0         Date of Birth         Driver License Number         STATE: WISCONSIN COUNTRY: UN         Safety Equipment	MALE Race WHITE				
	INDIVIDUAL	Insurance Company ERIE-INS-CO Individual Driver JEFFREY JOHN MILLER (608) 522-4427 Address S6413 COUNTY ROAD PF NORTH FREEDOM, WI 5395 fety Equipment Row 01 - FRONT ROW Helmet Use	rash Seat Position	JEFFREY MILLER Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance	MALE Race WHITE				
	INDIVIDUAL	Insurance Company ERIE-INS-CO Individual Driver JEFFREY JOHN MILLER (608) 522-4427 Address S6413 COUNTY ROAD PF NORTH FREEDOM, WI 5395 fety Equipment Row 01 - FRONT ROW	rash Seat Position	JEFFREY MILLER         Citations Issued         0         Date of Birth         Driver License Number         STATE: WISCONSIN COUNTRY: UN         Safety Equipment         SHOULDER & LAP BELT	MALE Race WHITE				
UNIT	INDIVIDUAL Sau	Insurance Company ERIE-INS-CO Individual Driver JEFFREY JOHN MILLER (608) 522-4427 Address S6413 COUNTY ROAD PF NORTH FREEDOM, WI 5395 fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection	rash Seat Position <b>07 - LEFT</b>	JEFFREY MILLER Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance	MALE Race WHITE				
	INDIVIDUAL	Insurance Company ERIE-INS-CO Individual Driver JEFFREY JOHN MILLER (608) 522-4427 Address S6413 COUNTY ROAD PF NORTH FREEDOM, WI 5395 fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Seve NO APP/	rash Seat Position 07 - LEFT erity ARENT INJURY	JEFFREY MILLER Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance	MALE Race WHITE				
UNIT	INDIVIDUAL Sau	Insurance Company ERIE-INS-CO Individual Driver JEFFREY JOHN MILLER (608) 522-4427 Address S6413 COUNTY ROAD PF NORTH FREEDOM, WI 5395 fety Equipment NORTH FREEDOM, WI 5395 fety Equipment On Duty C fety Equipment No Duty C Fety Equipment No Duty C Injury Seve No APP/ Ejected	rash Seat Position 07 - LEFT erity ARENT INJURY jection Path	JEFFREY MILLER Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED	MALE Race WHITE NITED STATES				
UNIT	INDIVIDUAL Sau	Insurance Company ERIE-INS-CO Individual Driver JEFFREY JOHN MILLER (608) 522-4427 Address S6413 COUNTY ROAD PF NORTH FREEDOM, WI 5395 fety Equipment NORTH FREEDOM, WI 5395 fety Equipment On Duty C fety Equipment No Duty C fety Equipment Injury Seve No APP/ Ejected NOT EJECTED	rash Seat Position 07 - LEFT erity ARENT INJURY	JEFFREY MILLER         Citations Issued         0         Date of Birth         Driver License Number         STATE: WISCONSIN COUNTRY: UN         Safety Equipment         Shoulder & LAP BELT         Helmet Compliance         Tint Compliance         Airbag         NON DEPLOYED	MALE Race WHITE NITED STATES Trapped/Extricated NOT TRAPPED				
UNIT	INDIVIDUAL Sau	Insurance Company ERIE-INS-CO Individual Driver JEFFREY JOHN MILLER (608) 522-4427 Address S6413 COUNTY ROAD PF NORTH FREEDOM, WI 5395 fety Equipment On Duty C fety Equipment C Row 01 - FRONT ROW Helmet Use Eye Protection	rash Seat Position 07 - LEFT erity ARENT INJURY jection Path	JEFFREY MILLER Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED	MALE Race WHITE NITED STATES				
UNIT	INDIVIDUAL Sau	Insurance Company ERIE-INS-CO Individual Driver JEFFREY JOHN MILLER (608) 522-4427 Address S6413 COUNTY ROAD PF NORTH FREEDOM, WI 5395 fety Equipment NORTH FREEDOM, WI 5395 fety Equipment NOT TRANSPORTED	rash Seat Position 07 - LEFT erity ARENT INJURY jection Path	JEFFREY MILLER         Citations Issued         0         Date of Birth         Driver License Number         STATE: WISCONSIN COUNTRY: UN         Safety Equipment         SHOULDER & LAP BELT         Helmet Compliance         Tint Compliance         Airbag         NON DEPLOYED         EMS Agency Identifier	MALE Race WHITE NITED STATES Trapped/Extricated NOT TRAPPED EMS Run #				
UNIT	INDIVIDUAL Sau	Insurance Company ERIE-INS-CO Individual Driver JEFFREY JOHN MILLER (608) 522-4427 Address S6413 COUNTY ROAD PF NORTH FREEDOM, WI 5395 fety Equipment On Duty C fety Equipment C Row 01 - FRONT ROW Helmet Use Eye Protection	rash Seat Position 07 - LEFT erity ARENT INJURY jection Path	JEFFREY MILLER         Citations Issued         0         Date of Birth         Driver License Number         STATE: WISCONSIN COUNTRY: UN         Safety Equipment         Shoulder & LAP BELT         Helmet Compliance         Tint Compliance         Airbag         NON DEPLOYED	MALE Race WHITE NITED STATES Trapped/Extricated NOT TRAPPED				

20-02713

### WISCONSIN MOTOR VEHICLE CRASH REPORT

		Distracted By	Distracted By Source NOT APPLICABL					
		Distracted By Action NOT DISTRACTE	п					
		Non Motorist	Striking Unit #	Location				
		Prior Action						
		Action						
	٦L							
⊢	INDIVIDUAL							
UNIT	5							
	D							
	Z							
		Action Other						To/From School
			Suspected Alcohol U	lse	Suspected Drug Use			ļ
	-	Drug & Alcohol	NO		NO			
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results	
		TEST NOT GIVEN				•		
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
80	002	Drug Type						
0	8							
		Individual Condition						
		APPEARED NOR	ΜΔΙ					