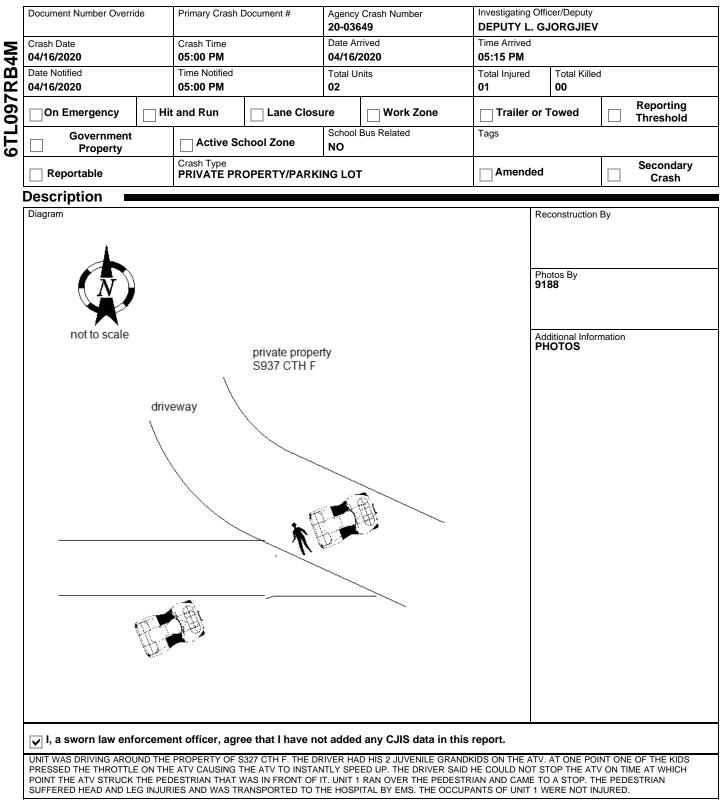
20-03649

### WISCONSIN MOTOR VEHICLE CRASH REPORT



### 20-03649

# WISCONSIN MOTOR VEHICLE CRASH REPORT

					(608) 356-4895		
Location							
PRIVATE PROPERTY				Latitude Longitude			
S937 CTHF NB				43.611197022	-90.035340758		
(FIRE \$937)				X Coordinate	Y Coordinate		
IN THE TOWN OF WINF	IFI D			255055	4833168.5		
IN SAUK COUNTY			Structure Type				
				FIRE			
Crash Scene							
First Harmful Event		First Harmful Event Locatio	n				
PEDESTRIAN				OFF ROADWAY, LOCA	ATION UNKNOWN		
Manner of Collision			Light Condition				
00 - NO COLLISION W/	VEHICLE IN TRANSPORT			DAYLIGHT			
Road Surface Condition(s)			Roadway Factor(s)				
OTHER							
Environment Factor(s)				-			
NONE				NONE			
Weather Condition(s)							
CLEAR							
Animal Type				Relation To Trafficway			
				NON TRAFFICWAY - OTHER			
Crash Classification - Location	on			Crash Classification - Jurisdiction			
PRIVATE PROPERTY		PRIVATE PROPERTY					
Tribal Land				Access Control	Special Study		
				NO CONTROL			
Within Interchange Area	Junction Location		Intersectio	tion Type			
NO	NON-JUNCTION		NOT AN	INTERSECTION			
Unit Summary							

	Unit Status			Vehicle Operating As Classifica	tion	Unit Type			
01	IN TRANSIT			O CLASS		EQUIPMENT			
	Vehicle Type					Operating /	As Endorsements		
ò	ATV	//UTV (UTILITY TERRAI	N VEHICLE)						
	Tota	Occs	Train/Bus # Recorded	Total # Citations Issued	Total Trai	lers	Total HazMat Types		
Г	3			0	0		0		
	Insu	ance?	Direction Of Travel	Pre CrashTire	Speed Lir	nit	Total Lanes		
	NO		NOT ON ROADWAY	Mark	N/A				
UNIT	Most	Harmful Event: Collision Wi	th	Special Function			Motor Vehicle Use		
>	PEDESTRIAN			NO SPECIAL FUNCTION		NOT APP	LICABLE		
	Traffic Way			Traffic Control		Traffic Con	trol Inoperative/Missing		
	PARKING LOT OR PRIVATE PROPERTY			NO CONTROL		NO			
	Surfa	асе Туре		Road Curvature		Road Grade			
	OTH	IER							
	Truc	k Bus or HazMat							
	NO								
	١	Vehicle							
		License Plate Number		Plate Type St		Country of Issuance			
		9166CH		ATV	WI	UNITED S	TATES		
-	_	Vehicle Identification Number		Make	Year	Model			
5	6	4XAMH50A27A209056	i	POLARIS	2007	ATV			
		Color		Body Style		Bus Use			
		RED - RED		AT - ALL TERRAIN VEHIC	CLE				
	щ	Initial Contact Point		Vehicle Damage					
E	U	00 - NON-COLLISION							
UNIT	VEHICL	Extent Of Damage		00 - NO DAMAGE					
_									

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# WISCONSIN MOTOR VEHICLE CRASH REPORT

		Towed Due To Damage			ehicle Removed By				
		NOT TOWED			PERATOR				
		What Driver Was Doing LEAVING A PARKED POS		Ve	ehicle Factors				
		Driver Prior Action Other	BITION	N	OT APPLICABLE				
		Driver Actions							
	щ								
UNIT	<u></u>								
5	VEHICLE								
	>								
		Owner Name			Owner Address				
	_	BARBARA A OFLAHRITY			S937 COUNTY ROAD F				
6	6				REEDSBURG, WI 53959, US				
	ę	Sequence Of Events							
	2	Event PEDESTRIAN							
	-	Event							
	02	Lvent							
	e	Event							
	03								
	64	Event							
	-								
	I	ndividual							
		Driver DAVID LEE WITTHUHN (608) 393-7007			Citations Issued	Sex			
	AL				0 Date of Birth	MALE Race			
L	INDIVIDUAL					WHITE			
UNIT	Ξ	Address			Driver License Number				
	g	S937 COUNTY ROAD F			STATE: WISCONSIN COUNTRY: UNITED STATES				
	-	REEDSBURG, WI 53959	03		STATE. WISCONSIN COUNTRY. UNITED STATES				
		On Duty	Crash		Safety Equipment				
	Sat	fety Equipment	Clash		Salety Equipment				
		Row	Seat Po	osition	NOT APPLICABLE				
		01 - FRONT ROW	07 - L	EFT					
		Helmet Use			Helmet Compliance				
		Eye Protection			Tint Compliance				
		Lye Flotection							
-	Ξ	Injury Se	verity		Airbag				
01	001	Injury <sub>NO AP</sub>	PARENT	NJURY	NON DEPLOYED				
		Ejected	Ejection Pa			Trapped/Extricated			
		NOT APPLICABLE	NOT EJE	CTED/NOT APPL		NOT TRAPPED			
	Medical Transport NOT TRANSPORTED				EMS Agency Identifier	EMS Run #			
		Hospital			Date of Death	Time of Death			
		Distracted By Source							
		Distracted By NOT APPLICABLE (NOT DISTRACTED)							
		Distracted By Action							
		Striking	Jnit #	Location					
		Non Motorist	c						
				1					

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# WISCONSIN MOTOR VEHICLE CRASH REPORT

		Prior Action						
UNIT	INDIVIDUAL	Action						
		Action Other					To/From School	
		Suspec	cted Alcohol Use	Suspected Drug Use				
	L	Drug & Alcohol No		NO				
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	e		Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results			
0	001	Drug Type			ļ			
		Individual Condition						
		APPEARED NORMAL						
	l	Individual						
		Passenger AUBREE A DORN		Citations Issued 0		Sex FEMALE		
	<b>NDIVIDUAL</b>			Date of Birth		Race WHITE		
	IVIC	Address		Driver License Number				
	IND	421 N LOCUST ST REEDSBURG, WI 53959	, US					
	Sat	On Dut	y Crash	Safety Equipment				
		Row 99 - UNKNOWN	Seat Position	NOT APPLICABLE				
		Helmet Use		Helmet Compliance				
		Eye Protection		Tint Compliance				
6	002		Severity	Airbag				
Ū	0	Ejected NO A	PPARENT INJURY Ejection Path	NON DEPLOYED		Trapped/Extricated		
		NOT APPLICABLE	NOT EJECTED/NOT APP	LICABLE		NOT TRAPPED		
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #		
		Hospital		Date of Death		Time of Death		
		Distracted By	ted By Source	1		1		
		Distracted By Action						
		Non Motorist	g Unit # Location					
		Prior Action	1					

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# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

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		Action								
	Ļ									
┝┍	INDIVIDUAL									
UNIT	2 N									
ر ا	IDI									
	≤									
		Action Other						To/From School		
		Susp	pected Alcohol L	lse	Suspected Drug Use					
	L	Drug & Alcohol No			NO					
		Alcohol Test Given		Alcohol Test Type	)		Alcohol Test Results			
		TEST NOT GIVEN Drug Test Given		Drug Test Type		Drug Test Results	, ,			
		TEST NOT GIVEN		Drug root rypo		Drug rest Results	2			
01	002	Drug Type		<u> </u>		Į				
	õ									
		Individual Condition								
		APPEARED NORMAL								
	I	ndividual								
		Passenger KANE B DORN			Citations Issued 0		Sex MALE			
	AL				Date of Birth		Race			
E	D						WHITE			
UNIT	INDIVIDUAL	Address 421 N LOCUST ST			Driver License Number					
	Z	REEDSBURG, WI 5395	59 , US							
	Sat	fety Equipment	Duty Crash		Safety Equipment					
	oui	Row	Seat Po	sition						
		99 - UNKNOWN	Seatro	SHOT						
		Helmet Use			Helmet Compliance					
		Eye Protection			Tint Compliance					
		Lye Flotection			Tint Compliance					
6	003	Injur	y Severity		Airbag					
	ō	Ejected	APPARENT I		NON DEPLOYED           Trapped/Extricated					
				CTED/NOT APPI			NOT TRAPPED			
		Medical Transport			EMS Agency Identifier		EMS Run #			
		NOT TRANSPORTED								
		Hospital			Date of Death		Time of Death			
	Distracted By Source									
		Distracted By								
		Distracted By Action								
		Strik	ing Unit #	Location						
		Non Motorist	J							
		Prior Action								
					t does not include any CJ		Crash Date	04/16/2020		

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# WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT	INDIVIDUAL	Action Action Other								To/From School
		Susp	pected Alcohol U	lse	Suspected Drug U	se				
		Drug & Alcohol No			NO					
		Alcohol Test Given		Alcohol Test Ty	ре			Alcohol Tes	t Results	
		TEST NOT GIVEN		Drug Test Type		Deve				
		Drug Test Given TEST NOT GIVEN		Diug rest type		Drug	Test Results			
6	003	Drug Type								
		Individual Condition								
		APPEARED NORMAL								
	Uni	t Summary								
		Status			Vehicle Operating As	Classification	1	Unit Type		
		RANSIT			O CLASS			PEDESTRIAN		
02		cle Type DESTRIAN						Operating A	s Endorsem	ients
U		-			Total # Citations Issued Total Trail			ers	Total HazM	Nat Types
	Total Occs Train/Bus # Recorded 1				0 0		0	0		
F	Insu NO	rance?	Direction Of Tra		Pre CrashTire Speed Lir Mark		Speed Lim			S
UNIT		Harmful Event: Collision Wi			Special Function NO SPECIAL FUNCTION			Emergency NOT APP	Motor Vehic	cle Use
		TOR VEH TRAN OTHER ic Way	RDWY					Traffic Control Inoperative/Missing		
			E PROPERTY		Traffic Control NO CONTROL			NO		
		асе Туре			Road Curvature			Road Grade		
	Truc NO	k Bus or HazMat								
	:	Sequence Of Even	ts							
	0	Event PEDESTRIAN								
	02	Event								
	03	Event								
	04	Event								
		Individual								
		Pedestrian			Citations Issued			Sex		
	AL	BARABARA A OFLAH	IKI I Y		0 Data of Disth			FEMALE Race		
╘	IDUAL				Date of Birth			WHITE		

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## WISCONSIN MOTOR VEHICLE CRASH REPORT

_										
NU	NDIV				Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
	Safety Equipment					Safety Equipment				
		Row Seat Pos		sition	NONE	NONE				
		Helmet Use			Helmet Compliance					
		Eye Protection			Tint Compliance					
2	4		Injury Seve	rity		Airbag				
02	004	Injury			NOUS INJUR	NOT APPLICABLE				
		Ejected		Ejection Path				Trapped/Extricated		
		NOT APPLICABLE Medical Transport	N	OT EJEC	CTED/NOT APP					
		EMS GROUND				EMS Agency Identifier 6001024		EMS Run #		
		Hospital				Date of Death		Time of Death		
		UNIVERSITY OF WI HOSPITALS & CLINICS AUT								
		Distracted By	Distracted I	By Source						
		Distracted By Action								
		Non Motorist	Striking Uni 01	it #	Location NON-TRAFFIC	WAY AREA				
		Prior Action NONE								
	_	Action								
UNIT	INDIVIDUAL	NO IMPROPER ACTION								
		Action Other							To/From School	
	I	Drug & Alcohol	Suspected NO	Alcohol U	se	Suspected Drug Use				
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type	De la		Alcohol Test Results		
n.		Drug Test Given Drug Test Type TEST NOT GIVEN			Drug Test Results					
02	004	Drug Type					1			
		Individual Condition								
		APPEARED NORN	1.							