

6TL09KMM1P
20-04338

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

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Document Number Override		Primary Crash Document #	Agency Crash Number 20-04338	Investigating Officer/Deputy DEPUTY S. FINNEGAN	
Crash Date 05/10/2020		Crash Time 10:22 AM	Date Arrived 05/10/2020	Time Arrived 10:35 AM	
Date Notified 05/10/2020		Time Notified 10:23 AM	Total Units 02	Total Injured 01	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input checked="" type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone	<input type="checkbox"/> Trailer or Towed	<input type="checkbox"/> Reporting Threshold
<input type="checkbox"/> Government Property	<input type="checkbox"/> Active School Zone	School Bus Related NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

<p>Diagram</p> <p>NOT DRAWN TO SCALE</p>	Reconstruction By
	Photos By
	Additional Information NONE

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

UNIT 1 WAS STOPPED AT THE STOP SIGN ON CTH W AT STH 23. UNIT 2 WAS S/B ON STH 23. UNIT 1 DRIVER STATED HE LOOKED BOTH WAYS AND DIDN'T SEE ANYONE COMING SO HE PROCEEDED TO CROSS STH 23 IN THE PATH OF UNIT 2 AND WAS STRUCK ON THE PASSENGER SIDE. UNIT 1 DRIVER STATED HE NEVER SAW UNIT 2. UNIT 2 DRIVER STATED HE WAS S/B ON STH 23 WHEN UNIT 1 PULLED OUT IN FRONT OF HIM AND THERE WAS NOTHING HE COULD DO TO AVOID HITTING UNIT 1.

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Location

ON CTHW WB 45 FT E OF FRIENDSHIP RD IN THE TOWN OF WESTFIELD IN SAUK COUNTY	Latitude 43.395565336	Longitude -90.03632175
	X Coordinate 254101.3125	Y Coordinate 4809221.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 01 - ANGLE		Light Condition DAYLIGHT	
Road Surface Condition(s) WET		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) RAIN, SNOW			
Animal Type		Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY		Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land		Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location INTERSECTION	Intersection Type FOUR-WAY INTERSECTION	
Closure Type CLOSURE-ONE DIRECTION		Reasons for Closure LAW ENFORCEMENT	
Date Initial Lane/Rd Closed 05/10/2020	Time Initial Lane/Rd Closed 10:22 AM		
Date All Lanes Open 05/10/2020	Time All Lanes Open 12:01 PM	Date Scene Cleared 05/10/2020	Time Scene Cleared

Unit Summary

UNIT	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type TRUCK		
	Vehicle Type UTILITY TRUCK/PICKUP TRUCK	Operating As Endorsements				
	Total Occs 6	Train/Bus # Recorded	Total # Citations Issued 2	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control STOP SIGN		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					
	Vehicle					
	01	License Plate Number 300143F		Plate Type FRM - FARM	St WI	Country of Issuance UNITED STATES
Vehicle Identification Number 1FT7W2BT5FEB02700		Make FORD	Year 2015	Model F250 SUPER		

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UNIT VEHICLE	Color BLK - BLACK	Body Style PK - PICKUP	Bus Use
	Initial Contact Point 03 - RIGHT SIDE MIDDLE	Vehicle Damage	
	Extent Of Damage DISABLING DAMAGE	03 - RIGHT SIDE MIDDLE, 14 - UNDERCARRIAGE	
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By STEVES AUTO SERVICE	
	What Driver Was Doing GOING STRAIGHT	Vehicle Factors	
	Driver Prior Action Other	NOT APPLICABLE	
UNIT VEHICLE	Driver Actions FAILED TO YIELD RIGHT-OF-WAY, OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER, LOOKED BUT DID NOT SEE		
	Owner Name GREGORY D WILKINSON (608) 415-0639	Owner Address E7071 COUNTY ROAD PF NORTH FREEDOM, WI 53951 , US	
UNIT 01	Sequence Of Events		
	01	Event MOTOR VEH IN TRANSPORT	
	02	Event	
	03	Event	
	04	Event	
UNIT	Policy Holder		
	Insurance Company FIRST AUTO CASUALTY	Individual GREGORY WILKINSON	
UNIT INDIVIDUAL	Individual		
	Driver GREGORY D WILKINSON	Citations Issued 2	Sex MALE
		Date of Birth	Race WHITE
	Address E7071 COUNTY ROAD PF NORTH FREEDOM, WI 53951 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
UNIT 01	Safety Equipment		
	On Duty Crash		Safety Equipment
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	Injury	Injury Severity NO APPARENT INJURY	Airbag DEPLOYED-SIDE
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT INDIVIDUAL	Hospital		Date of Death		Time of Death	
	Distracted By		Distracted By Source			
	Distracted By Action UNKNOWN					
	Non Motorist		Striking Unit #		Location	
	Prior Action					
	Action					
	Action Other					To/From School
	Drug & Alcohol		Suspected Alcohol Use NO		Suspected Drug Use NO	
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type		Alcohol Test Results	
	Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	
01 001 UNIT INDIVIDUAL	Drug Type					
	Individual Condition APPEARED NORMAL					
	Individual					
	Passenger JACKIE LEE WILKINSON (608) 415-0639			Citations Issued 0		Sex FEMALE
	Address E7071 COUNTY HWY PF NORTH FREEDOM, WI 53951 , US			Date of Birth		Race WHITE
				Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
	Safety Equipment		On Duty Crash		Safety Equipment SHOULDER & LAP BELT	
	Row 01 - FRONT ROW		Seat Position 08 - MIDDLE			
	Helmet Use			Helmet Compliance		
	Eye Protection			Tint Compliance		
01 002 UNIT INDIVIDUAL	Injury		Injury Severity NO APPARENT INJURY		Airbag NOT APPLICABLE	
	Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED	
	Medical Transport NOT TRANSPORTED			EMS Agency Identifier		EMS Run #
	Hospital		Date of Death		Time of Death	

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT	INDIVIDUAL	Distracted By Distracted By Source			
		Distracted By Action			
		Non Motorist	Striking Unit # Location		
		Prior Action			
		Action			
		Action Other To/From School			
		Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO	
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results	
		Drug Type			
UNIT	INDIVIDUAL	Individual Condition APPEARED NORMAL			
		Individual			
		Passenger TYLER J WILKINSON	Citations Issued 0	Sex MALE	
		Date of Birth		Race WHITE	
		Address E7071 COUNTY ROAD PF NORTH FREEDOM, WI 53951 , US		Driver License Number	
		Safety Equipment	On Duty Crash	Safety Equipment SHOULDER & LAP BELT	
		Row 01 - FRONT ROW	Seat Position 09 - RIGHT	Helmet Compliance	
		Helmet Use		Tint Compliance	
		Eye Protection			
		UNIT	INDIVIDUAL	Injury	Injury Severity NO APPARENT INJURY
Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE			Trapped/Extricated NOT TRAPPED	
Medical Transport NOT TRANSPORTED				EMS Agency Identifier	EMS Run #
Hospital				Date of Death	Time of Death
Distracted By				Distracted By Source	

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT	Distracted By Action					
	Non Motorist	Striking Unit #	Location			
		Prior Action				
	INDIVIDUAL	Action				
		Action Other				
		To/From School				
		Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO		
	01	003	Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	Alcohol Test Results	
			Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results	
		Drug Type				
Individual Condition APPEARED NORMAL						
Individual						
UNIT	INDIVIDUAL	Passenger TAYLOR L WLKINSON	Citations Issued 0	Sex FEMALE		
		Date of Birth		Race WHITE		
		Address E7071 COUNTY ROAD PF NORTH FREEDOM, WI 53951 , US		Driver License Number		
	01	004	Safety Equipment	On Duty Crash		Safety Equipment SHOULDER & LAP BELT
			Row 02 - SECOND ROW	Seat Position 09 - RIGHT		
Helmet Use		Helmet Compliance				
Eye Protection		Tint Compliance				
01	004	Injury	Injury Severity NO APPARENT INJURY	Airbag DEPLOYED-SIDE		
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED		
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #		
	Hospital		Date of Death	Time of Death		
	Distracted By	Distracted By Source				
Distracted By Action						

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UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
		Action Other				To/From School	
01	004	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO		
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results		
		Drug Type					
		Individual Condition APPEARED NORMAL					
		Individual					
		Passenger ALYSON R WILKINSON			Citations Issued 0	Sex FEMALE	
		Address E7071 COUNTY ROAD PF NORTH FREEDOM, WI 53951 , US			Date of Birth Race WHITE		
		Driver License Number					
		01	005	Safety Equipment		On Duty Crash	Safety Equipment
Row 02 - SECOND ROW	Seat Position 07 - LEFT			BOOSTER SEAT			
Helmet Use				Helmet Compliance			
Eye Protection				Tint Compliance			
Injury				Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED		
Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE			Trapped/Extricated NOT TRAPPED			
Medical Transport NOT TRANSPORTED				EMS Agency Identifier	EMS Run #		
Hospital				Date of Death	Time of Death		
Distracted By				Distracted By Source			
Distracted By Action							
Non Motorist		Striking Unit #	Location				

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UNIT	INDIVIDUAL	Prior Action			
		Action			
		Action Other		To/From School	
01	005	Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO	
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results	
		Drug Type			
		Individual Condition APPEARED NORMAL			
		Individual			
		Passenger ERIK W WILKINSON		Citations Issued 0	Sex MALE
				Date of Birth	Race WHITE
		Address E7071 COUNTY ROAD PF NORTH FREEDOM, WI 53951 , US		Driver License Number	
		01	006	Safety Equipment	On Duty Crash
Row 02 - SECOND ROW	Seat Position 08 - MIDDLE				
Helmet Use				Helmet Compliance	
Eye Protection				Tint Compliance	
Injury	Injury Severity NO APPARENT INJURY			Airbag NON DEPLOYED	
Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE			Trapped/Extricated NOT TRAPPED	
Medical Transport NOT TRANSPORTED				EMS Agency Identifier	EMS Run #
Hospital				Date of Death	Time of Death
Distracted By	Distracted By Source				
Distracted By Action					
UNIT	INDIVIDUAL	Non Motorist	Striking Unit #	Location	
		Prior Action			

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UNIT	INDIVIDUAL	Action				
		Action Other			To/From School	
	01	006	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO
			Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	Alcohol Test Results	
			Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results	
			Drug Type			
			Individual Condition APPEARED NORMAL			
	01	Violations				
		UTC Number AE757114	Issue To? 001	Statute Number 346.18(3)	Description FAIL/YIELD RIGHT/WAY FROM STOP SIGN	
		UTC Number AE757115	Issue To? 001	Statute Number 344.62(2)	Description OPERATE MOTOR VEHICLE W/O PROOF OF INSURANCE	

Unit Summary

UNIT	02	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
		Vehicle Type PASSENGER CAR	Operating As Endorsements			
		Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
		Insurance? YES	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2
		Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE	
		Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL	Traffic Control Inoperative/Missing NO	
		Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT	Road Grade LEVEL	
		Truck Bus or HazMat NO				

02	02	Vehicle			
		License Plate Number AG13919	Plate Type AUT - AUTOMOBILE	St IL	Country of Issuance UNITED STATES
		Vehicle Identification Number 2G1WT55KX69380416	Make CHEVROLET	Year 2006	Model IMPALA
		Color BGE - BEIGE	Body Style 4D - 4DR	Bus Use	
		Initial Contact Point 11 - LEFT FRONT CORNER			

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UNIT VEHICLE	Vehicle Damage	
	Extent Of Damage DISABLING DAMAGE	
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	
	What Driver Was Doing GOING STRAIGHT	
UNIT VEHICLE	Vehicle Removed By STEVES AUTO SERVICE	
	Vehicle Factors	
	Driver Prior Action Other NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION	
02 02	Owner Name AMBER L HARTMAN (815) 441-8870	Owner Address 1245 N 4TH ST APT 204 PLATTEVILLE, WI 53818 , US
	Sequence Of Events	
01 02 03 04	Event MOTOR VEH IN TRANSPORT	
	Event	
	Event	
	Event	
UNIT	Policy Holder	
	Insurance Company STATE-FARM-MUTUAL-AUTOMOBILE-INS-CO	Individual AMBER HARTMAN
UNIT INDIVIDUAL	Individual	
	Driver ANDREW P DEWEY	Citations Issued 0
		Sex MALE
		Date of Birth
	Race WHITE	
Address 209 W BUFFALO ST POLO 61064 POLO, IL 61064 , US		Driver License Number STATE: ILLINOIS COUNTRY: UNITED STATES
02 007	Safety Equipment	
	On Duty Crash	Safety Equipment
	Row 01 - FRONT ROW	Seat Position 07 - LEFT
	SHOULDER & LAP BELT	
	Helmet Use	
	Helmet Compliance	
Eye Protection		
Tint Compliance		
Injury		
Injury Severity NO APPARENT INJURY	Airbag DEPLOYED-FRONT	
Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #
Hospital	Date of Death	Time of Death

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UNIT	Distracted By Distracted By Source	
	Distracted By Action	
	Non Motorist	Striking Unit # Location
	Prior Action	
	Action	
	Action Other To/From School	
	Drug & Alcohol	Suspected Alcohol Use NO Suspected Drug Use NO
	Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type Alcohol Test Results
	Drug Test Given TEST NOT GIVEN	Drug Test Type Drug Test Results
	Drug Type	
Individual Condition APPEARED NORMAL		
UNIT	Individual	
	Passenger AMBER LYNN HARTMAN (815) 441-8870	Citations Issued 0 Sex FEMALE
	Date of Birth Race WHITE	
	Address 1245 N 4TH ST # 204 PLATTEVILLE, WI 53818 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES
	Safety Equipment	On Duty Crash Safety Equipment SHOULDER & LAP BELT
	Row 01 - FRONT ROW Seat Position 09 - RIGHT	Helmet Use Helmet Compliance
	Eye Protection Tint Compliance	
	Injury	Injury Severity POSSIBLE INJURY Airbag DEPLOYED-FRONT
	Ejected NOT EJECTED Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED	EMS Agency Identifier EMS Run #
Hospital Date of Death Time of Death		
Distracted By Distracted By Source		

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	Non Motorist	Striking Unit #	Location		
		Prior Action			
	INDIVIDUAL	Action			
		Action Other		To/From School	
		Drug & Alcohol	Suspected Alcohol Use	Suspected Drug Use	
			NO	NO	
	02	008	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 Type					
Individual Condition					
APPEARED NORMAL					

Witness

WITN ESS 01	Individual	Address	Date of Birth
	MATTHEW J BENNETT (608) 445-1173	238 MADISON ST SAUK CITY, WI 53583 , US	