#### 6TL0D0GSFK 20-05291

## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override		Primary Crash Document #		Agency Crash Number 20-05291				Investigating Officer/Deputy DEPUTY S. FINNEGAN			
H Y	Crash Date <b>06/05/2020</b>		Crash Time 11:05 AM		Date Arrived		Tim	Time Arrived				
<b>6TL0D0GSFK</b>	Date Notified <b>06/05/2020</b>		Time Notified 11:11 AM		Total Units <b>01</b>			Tot <b>00</b>	· · · · · · · · · · · · · · · · · · ·		Total Killed <b>00</b>	
0.	On Emergency	Hit	and Run	Lane Clos		Ш	ork Zone		Trailer or T	owed	Reporting Threshold	
<b>6T</b> L	Government Active School Zone  Crash Type				School Bus Related NO			Tag	Tags			
	<b>✓</b> Reportable	TICATED ANIM	ANIMAL W/ NO INJURY				Amended		Secondary Crash			
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.											
	Location <b>—</b>											
Ŧ	ON CTHA SB						Latitude	Latitude Longitude			de	
	214 FT S						43.50274	5653		-89.738715674		
	OF TRAP SHOOT RD							Coordinate			Y Coordinate	
	IN THE TOWN OF BARA IN SAUK COUNTY	THE TOWN OF BARABOO SAUK COUNTY						278595.875			4820290.5	
						Structure Type NO STRUCTURE						
-	Crash Scene											
,	First Harmful Event						Ter					
								First Harmful Event Location				
	NON DOMESTICATED	ANIMA	AL (ALIVE)					ON ROADWAY				
	Manner of Collision						Light Condition					
	00 - NO COLLISION W/\	VEHIC	LE IN TRANSF	PORT								
	Road Surface Condition(s)						Roadway I	Roadway Factor(s)				
ļ												
	Environment Factor(s)											
	Weather Condition(s)											
	Weather Condition(s)											
								1				
ŀ	Animal Type						Relation To Trafficway					
	DEER						TRAFFICWAY - ON ROAD					
ŀ	Crash Classification - Location						Crash Classification - Jurisdiction					
	PUBLIC PROPERTY							NO SPECIAL JURISDICTION				
ŀ	Tribal Land						Access Co				Special Study	
											opoolal olddy	
l												
	Unit Summary =			LV			01 '6' 4'		1			
	Unit Status		Vehicle Operating As Class				Unit Type					
	IN TRANSIT D CLASS								AUTOMOBILE			
5	Vehicle Type						Operating As Endorsements					
0	(SPORT) UTILITY VEHICLE											
	Total Occs Train/Bus # Recorded				tal # Citatio	ns Issue	ed				Mat Types	
	1				0			0	0			
_	Insurance? YES		irection Of Travel			rashTir Iark	Speed Lin		imit Total Lanes		es	
LNO	Most Harmful Event: Collision With				ecial Funct			I		Emergency Motor Vehicle Use		
<b>-</b>	NON DOMESTICATED ANIMAL (ALIVE)				SPECIA		TION		NOT APPLICABLE			
ŀ	Traffic Way				affic Contro	I				Traffic Control Inoperative/Missing		
					20							
ŀ	Surface Type			Ro	Road Curvature			Road Grade				

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	Truck Bus or HazMat									
	,	Vehicle								
01		License Plate Number 709PAU		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES				
	5	Vehicle Identification Number 1FM5K8HC4LGB14961		Make FORD	Year <b>2020</b>	Model EXPLORER				
	VEHICLE	Color RED - RED		Body Style UT - SPORT UTILITY VE	Bus Use					
UNIT		Initial Contact Point  11 - LEFT FRONT CORNER  Extent Of Damage  FUNCTIONAL DAMAGE		11 - LEFT FRONT CORNER, 12 - FRONT						
		Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR						
		What Driver Was Doing		Vehicle Factors						
		Driver Action Other								
LIND	VEHICLE	NO CONTRIBUTING ACTION								
01	70	Owner Name		Owner Address						
⊨		Policy Holder								
UNIT		Insurance Company HANOVER-INS-CO,-THE		Individual ALLEN STEELE						
		Individual		Citations Issued						
		Driver ALLEN DEANE STEELE		0	Sex MALE					
<b>—</b>	INDIVIDUAL	(608) 963-0574		Date of Birth		Race WHITE				
LINO		Address 847 IROQUOIS CIRCLE BARABOO, WI 53913, US		Driver License Number  STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sa	fety Equipment	rash	Safety Equipment						
		Row	SHOULDER & LAP BELT							
		Helmet Use		Helmet Compliance						
1		Eye Protection	ovih :	Tint Compliance  Airbag						
01	00		ARENT INJURY Ejection Path	Trapped/Extricated						
			.joodon raur			Trapped/Extricated				
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run#				
		Hospital		Date of Death		Time of Death				

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		Distracted By Source								
		Distracted By Action								
		Non Motorist	Striking Unit #	Location						
		Prior Action								
		Action								
_	UAL									
UNIT	INDIVIDUAL									
	N N									
		Action Other						To/From School		
		Action Other						TO/FIOM SCHOOL		
	ı	Drug & Alcohol	Suspected Alcohol U NO	se	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				
10	001	Drug Type								
		Individual Condition								
		APPEARED NORMAL								