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20-05682

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

**Location**

ON STH78 NB 717 FT W OF GOETTE RD IN THE TOWN OF MERRIMAC IN SAUK COUNTY	Latitude <b>43.370676731</b>	Longitude <b>-89.69303442</b>
	X Coordinate <b>281814.625</b>	Y Coordinate <b>4805501.5</b>
	Structure Type	

**Crash Scene**

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>		First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>06 - SIDESWIPE/OPPOSITE DIRECTION</b>		Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>DRY</b>		Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>			
Weather Condition(s) <b>CLEAR</b>			
Animal Type		Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>		Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land		Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>	

**Unit Summary**

<b>UNIT</b>	Unit Status <b>HIT AND RUN</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
	Vehicle Type <b>(SPORT) UTILITY VEHICLE</b>				Operating As Endorsements	
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>2</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>NO</b>	Direction Of Travel <b>NORTHBOUND</b>	<input type="checkbox"/> <b>Pre Crash Tire Mark</b>	Speed Limit <b>55</b>	Total Lanes <b>2</b>	
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>CURVE RIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>					

**Vehicle**

<b>UNIT</b>	<b>VEHICLE</b>	<b>01</b>	License Plate Number <b>ACM6502</b>				Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
			Vehicle Identification Number <b>5GZER23768J199964</b>				Make <b>SATURN</b>	Year <b>2008</b>	Model <b>OUTLOOK</b>	
			Color <b>DBL - BLUE, DARK</b>				Body Style <b>UT - SPORT UTILITY VEHICLE</b>		Bus Use	
			Initial Contact Point <b>10 - LEFT SIDE FRONT</b>				Vehicle Damage			
			Extent Of Damage <b>MINOR DAMAGE</b>				<b>10 - LEFT SIDE FRONT</b>			

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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>	
	What Driver Was Doing <b>NEGOTIATING CURVE</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>FAILED TO KEEP IN DESIGNATED LANE</b>			
01	Owner Name <b>D'ANGELO O MADDOX (608) 370-0394</b>		Owner Address <b>627 W MAIN ST MERRIMAC, WI 53561 , US</b>	
	<b>Sequence Of Events</b>			
01 02 03 04	Event <b>CROSS CENTERLINE</b>			
	Event <b>MOTOR VEH IN TRANSPORT</b>			
	Event			
	Event			
UNIT INDIVIDUAL	Driver <b>KELLY MARIE MADDOX (608) 370-0394</b>		Citations Issued <b>2</b>	Sex <b>FEMALE</b>
	Address <b>627 W MAIN ST MERRIMAC, WI 53561 , US</b>		Date of Birth	Race <b>WHITE</b>
	On Duty Crash		Driver License Number	
	<b>Safety Equipment</b>		<b>RESTRAINT USE UNKNOWN</b>	
01 001	Row <b>01 - FRONT ROW</b>		Seat Position <b>07 - LEFT</b>	STATE: WISCONSIN COUNTRY: UNITED STATES
	Helmet Use		Safety Equipment	
	Eye Protection		Helmet Compliance	
	Tint Compliance		Airbag	
	<b>Injury</b>		<b>NO APPARENT INJURY</b>	
	Ejected <b>NOT APPLICABLE</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT APPLICABLE</b>
	Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #
	Hospital		Date of Death	Time of Death
<b>Distracted By</b>		Distracted By Source		
Distracted By Action		Distracted By Action		
<b>Non Motorist</b>		Striking Unit #	Location	

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<b>UNIT</b>	<b>INDIVIDUAL</b>	Prior Action				
		Action				
		Action Other			To/From School	
	<b>01</b>	<b>001</b>	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use	Suspected Drug Use
			Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type		Alcohol Test Results
			Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results	
			Drug Type			
			Individual Condition <b>NOT OBSERVED</b>			
	<b>01</b>	<b>01</b>	<b>Violations</b>			
			UTC Number <b>AE138451</b>	Issue To? <b>001</b>	Statute Number <b>344.62(1)</b>	Description <b>OPERATE MOTOR VEHICLE W/O INSURANCE</b>
UTC Number <b>AE138452</b>			Issue To? <b>001</b>	Statute Number <b>346.05(1)</b>	Description <b>OPERATING LEFT OF CENTER</b>	

## Unit Summary

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

## Vehicle

<b>02</b>	License Plate Number <b>692UVE</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>KNDPCCA20C7325346</b>	Make <b>KIA MOTORS CORPORA</b>	Year <b>2012</b>	Model <b>SPORTAGE</b>
	Color	Body Style <b>UT - SPORT UTILITY VEHICLE</b>		Bus Use
	Initial Contact Point <b>10 - LEFT SIDE FRONT</b>			

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UNIT VEHICLE	Vehicle Damage	
	Extent Of Damage <b>MINOR DAMAGE</b>	<b>10 - LEFT SIDE FRONT</b>
	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OPERATOR</b>
	What Driver Was Doing <b>NEGOTIATING CURVE</b>	Vehicle Factors
UNIT VEHICLE	Driver Prior Action Other	<b>NOT APPLICABLE</b>
	Driver Actions <b>NO CONTRIBUTING ACTION</b>	
	Owner Name <b>LAWRENCE DARBY ASHER (608) 622-9002</b>	Owner Address <b>706 MACFARLANE RD PORTAGE, WI 53901 , US</b>
	<b>Sequence Of Events</b>	
UNIT VEHICLE	01 Event <b>MOTOR VEH IN TRANSPORT</b>	
	02 Event	
	03 Event	
	04 Event	
UNIT	<b>Policy Holder</b>	
	Insurance Company <b>GEICO-ADVANTAGE-INSURANCE-CO</b>	Individual <b>LAWRENCE ASHER</b>
UNIT INDIVIDUAL	<b>Individual</b>	
	Driver <b>LAWRENCE DARBY ASHER (608) 622-9002</b>	Citations Issued <b>0</b>
		Sex <b>MALE</b>
		Date of Birth
UNIT INDIVIDUAL	Address <b>706 MACFARLANE RD PORTAGE, WI 53901 , US</b>	Race <b>WHITE</b>
		Driver License Number
		<b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>
UNIT INDIVIDUAL	<b>Safety Equipment</b>	On Duty Crash
		Safety Equipment
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>
		<b>SHOULDER &amp; LAP BELT</b>
UNIT INDIVIDUAL	Helmet Use	Helmet Compliance
	Eye Protection	Tint Compliance
	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>
		Airbag <b>NON DEPLOYED</b>
UNIT INDIVIDUAL	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>
		Trapped/Extricated <b>NOT TRAPPED</b>
	Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier
		EMS Run #
UNIT INDIVIDUAL	Hospital	Date of Death
		Time of Death

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UNIT	INDIVIDUAL	<b>Distracted By</b> Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>	
		Distracted By Action <b>NOT DISTRACTED</b>	
		<b>Non Motorist</b>	Striking Unit # Location
		Prior Action	
		Action	
		Action Other	
		To/From School	
		<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>
		Suspected Drug Use <b>NO</b>	
		Alcohol Test Given <b>TEST NOT GIVEN</b>	
Alcohol Test Type			
Alcohol Test Results			
Drug Test Given <b>TEST NOT GIVEN</b>			
Drug Test Type			
Drug Test Results			
Drug Type			
Individual Condition <b>APPEARED NORMAL</b>			
UNIT	INDIVIDUAL	<b>Individual</b>	
		Passenger <b>TIFFANY M HORN (608) 622-9003</b>	Citations Issued <b>0</b>
			Sex <b>FEMALE</b>
			Date of Birth
			Race <b>WHITE</b>
		Address <b>706 MACFARLANE RD PORTAGE, WI 53901 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>
		<b>Safety Equipment</b>	On Duty Crash
		Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
		Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b>
		Helmet Use	
Helmet Compliance			
Eye Protection			
Tint Compliance			
UNIT	INDIVIDUAL	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>
		Airbag <b>NON DEPLOYED</b>	
		Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>
		Trapped/Extricated <b>NOT TRAPPED</b>	
		Medical Transport <b>NOT TRANSPORTED</b>	
		EMS Agency Identifier	
		EMS Run #	
		Hospital	
		Date of Death	
		Time of Death	
UNIT	INDIVIDUAL	<b>Distracted By</b> Distracted By Source	

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UNIT	Distracted By Action			
	<b>Non Motorist</b>	Striking Unit #	Location	
		Prior Action		
	<b>INDIVIDUAL</b>	Action		
		Action Other	To/From School	
		<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
			Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type
	Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results	
	Drug Type			
	<b>02</b>	<b>003</b>	Individual Condition	
<b>APPEARED NORMAL</b>				