

6TL0D5DXW2  
20-12738

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 20-12738		Investigating Officer/Deputy DEPUTY C. FRANK	
Crash Date 11/02/2020		Crash Time 03:56 PM		Date Arrived		Time Arrived	
Date Notified 11/02/2020		Time Notified 03:56 PM		Total Units 01		Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input 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 NON-DOMESTICATED ANIMAL W/ NO INJURY		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

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

**Location**

ON CTHA SB 153 FT S OF TRAP SHOOT RD IN THE TOWN OF FAIRFIELD IN SAUK COUNTY	Latitude 43.502912489		Longitude -89.738714307	
	X Coordinate 278596.59375		Y Coordinate 4820309	
	Structure Type			

**Crash Scene**

First Harmful Event NON DOMESTICATED ANIMAL (ALIVE)		First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT		Light Condition	
Road Surface Condition(s)		Roadway Factor(s)	
Environment Factor(s)			
Weather Condition(s)			
Animal Type DEER		Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY		Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land		Access Control	Special Study

**Unit Summary**

01       UNIT	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type (SPORT) UTILITY VEHICLE				Operating As Endorsements	
	Total Occs 1	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	Total Lanes	
	Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE)		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way		Traffic Control		Traffic Control Inoperative/Missing	
	Surface Type		Road Curvature		Road Grade	

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Truck Bus or HazMat			
<b>Vehicle</b>			
01 UNIT VEHICLE	License Plate Number <b>441PCG</b>		Plate Type <b>AUT - AUTOMOBILE</b>
	Vehicle Identification Number <b>1FMEU73EX6ZA04423</b>		St <b>WI</b>
	Color <b>SIL - SILVER (ALUMINUM)</b>		Country of Issuance <b>UNITED STATES</b>
	Initial Contact Point <b>12 - FRONT</b>		Make <b>FORD</b>
	Extent Of Damage <b>DISABLING DAMAGE</b>		Year <b>2006</b>
	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Model <b>EXPLORER X</b>
	What Driver Was Doing		Body Style <b>UT - SPORT UTILITY VEHICLE</b>
01 UNIT VEHICLE	Driver Prior Action Other		Bus Use
	Vehicle Damage <b>01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT</b>		
	Vehicle Removed By <b>MIKES TOWING</b>		
	Vehicle Factors		
	Driver Actions <b>NO CONTRIBUTING ACTION</b>		
	Owner Name		Owner Address
<b>Policy Holder</b>			
01 UNIT	Insurance Company <b>STATE-FARM-GENERAL-INS-CO</b>		Individual <b>JEANNE DEFOREST</b>
	<b>Individual</b>		
01 UNIT INDIVIDUAL	Driver <b>JEANNE KOSS DEFOREST</b>		Citations Issued <b>0</b>
	Address <b>305 S MAPLE ST NORTH FREEDOM, WI 53951 , US</b>		Sex <b>FEMALE</b>
	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		Date of Birth <b>[REDACTED]</b>
			Race <b>WHITE</b>
01 UNIT	On Duty Crash		Safety Equipment
	<b>Safety Equipment</b>		<b>SHOULDER &amp; LAP BELT</b>
	Row	Seat Position	Helmet Compliance
	Helmet Use		Tint Compliance
	Eye Protection		Airbag
	Injury Severity <b>Injury NO APPARENT INJURY</b>		
Ejected		Ejection Path	Trapped/Extricated
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #
Hospital		Date of Death	Time of Death

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UNIT             01  001	<b>Distracted By</b>		Distracted By Source		
	Distracted By Action				
	<b>Non Motorist</b>		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other			To/From School	
	<b>Drug &amp; Alcohol</b>		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				