# WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913 (609) 356.4995

						(608) 356-4895
Document Number Override	Primary Crash Document#	Agend <b>21-0</b> 4	cy Crash Number 1516	Investigating Of DEPUTY A. K	1	
Crash Date <b>05/24/2021</b>	Crash Time 05:25 PM	I	Arrived 1/2021	Time Arrived 05:33 PM		
Date Notified <b>05/24/2021</b>	Time Notified 05:26 PM	Total I	Units	Total Injured 04	Total Kille	ed
On Emergency H	it and Run	Closure	Work Zone	Trailer or	Towed	Reporting  Threshold
Government Property	Active School Zone	School NO	ol Bus Related	Tags		
▼ Reportable	Crash Type DT4000 (STANDARD C	RASH)		Amended		Secondary Crash
Description				1		
	U1 U1		Not to scale  S. Shore Rd.	N Ac	notos By KING Iditional Info	ormation

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

U1 WAS A 1994 GREEN CHEVROLET SUBURBAN. OPERATOR OF U1 WAS SIDNEY POPPLE. OPERATOR WAS TRAVELING NORTHBOUND ON S. SHORE RD., WITH THREE OCCUPANTS. OCCUPANTS WERE MALICHI RAINES, EMILY RAMIREZ, AND FRANCISCO ROBLES. U1 OPERATOR ADMITTED TO CONSUMING ALCOHOL PRIOR TO DRIVING. OPERATOR OF U1 STATED HE WAS GOING AROUND THE CURVE TOO QUICKLY AND LOST CONTROL. U1 WAS NAVIGATING THE CURVE WHEN IT ENTERED THE OUTSIDE SHOULDER THEN OVER CORRECTED. WHICH IT THEN CROSSED THE CENTER OF THE ROADWAY IN A SIDEWAYS MANNER. U1 CONTINUED ACROSS THE ROADWAY AND ENTERED THE DITCH OF THE ONCOMING LANE AND STRIKING A TREE. U1 THEN SPUN SIDEWAYS AND LANDED ON IT'S PASSENGER WHEELS AGAINST A TREE WITH THE DRIVER SIDE WHEELS IN THE AIR. EMILY RAMIREZ AND MALICHI RAINES WERE EJECTED FROM THE VEHICLE. NO OCCUPANTS IN THE VEHICLE WERE WEARING SAFETY BELTS AND NO AIRBAGS DEPLOYED. VEHICLE REMOVED BY CRAIG'S TOWING. EMILY AND MALICHI WERE TRANSPORTED BY AMBULANCE THEN TRANSPORTED BY MEDFLIGHT. SYDNEY AND FRANCISCO WERE TRANSPORTED VIA AMBULANCE. ALSO A DOG WAS LOCATED RUNNING AWAY FROM THE CRASH SCENE AND GIVEN ANIMAL CONTROL.

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Crash Date 05/24/2021

1	Location ====										
i	ON S SHORE RD					Latitude			Longitud	te	
	471 FT S					43.43217	73488		1 -	853118	
	OF LAKE WOOD PARK RE					X Coordin	ate		Y Coord	inate	
	IN THE TOWN OF BARAB IN SAUK COUNTY	300				277922.09375 4812466					
						Structure 7			•		
Į						NO STR	JCTURE				
(	Crash Scene 📉										
Ì	First Harmful Event					FirstHarm	ful Event Lo	ocation			
	OVERTURN/ROLLOVER					ROADSII					
	Manner of Collision					Light Cond					
ŀ	00 - NO COLLISION W/VEHICLE IN TRANSPORT  Road Surface Condition(s)					Roadway					
	DRY					stoadway	s actor(s)				
ł	Environment Factor(s)					1					
	NONE					NONE					
Ì	Weather Condition(s)					1					
	CLEAR										
	Animal Type					1	o Trafficwa				
1	Crash Classification - Location										
	PUBLIC PROPERTY					I	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION				
	Tribal Land				Access Control Special Study NO CONTROL						
	Within Interchange Area NO		Intersection NOT AN		n Type INTERSE	CTION					
Ì	Closure Type			Reasons for Closure							
l	FULL CLOSURE			ļ							
	Date Initial Lane/Rd Closed 05/24/2021	Time Initial Lane/Rd Clo 05:32 PM	osed	d LAW ENFORCI			EMENT, TOW TRUCK, FIRE/EMS				
I	Date All Lanes Open	Time All Lanes Open			Scene Clea	red		ne Scene Clea	red		
l	05/24/2021	07:08 PM		05/24	1/2021		07	:08 PM			
ļ	Unit Summary 💳										
I	Unit Status				erating As C	lassification		UnitType			
ŀ	Vehicle Type		טכ	LASS				TRUCK Operating As Endorsements			
	(SPORT) UTILITY VEHICL	.E						Operating As Endorsements			
-	Total Occs	Train/Bus#Recorded	Tota	Total#Citations Issued		1	Total Trail	 ers		zMat Types	
١	4		0				0		0		
ĺ	Insurance?	Direction Of Travel	V	Pre	CrashTire		Speed Lin	nit	Total Land	es	· ·
	UNKNOWN  Most Harmful Event: Collision \	NORTHBOUND		cial Fur	Mark		35	Emergency		icle Use	
	TREE	T FINE			IAL FUNC	TION		Emergency Motor Vehicle Use NOT APPLICABLE  Traffic Control Inoperative/Missing NO			
ĺ	Traffic Way			fic Con							
	TWO-WAY, NOT DIVIDED			CONT							
	Surface Type  BLACKTOP (BITUMINOUS	S)		d Curva <b>RVE L</b> I				Road Grade			
	Truck Bus or HazMat	<del>-,</del>	001		1			DOMME	-		
	NO NO										
	Vehicle										
	License Plate Number SK4898		I	te Type	SHT TRUC	: <b>K</b>	St WI	Country of Iss UNITED ST			
	Vehicle Identification Nur	mber	Ma		IAVV		Year	Model	,,,_0		
Perfect de la constitue de la	<b>5</b>   1GNFK16K8RJ37536		- 1		LET		1994 SUBURBAN				
	-8088668880 <b>4</b>	O 1GNFK16K8RJ375362 CHEVROLET									

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Crash Date 05/24/2021

		Color GRN - GREEN		Body Style UT - SPORT UTILITY VEHICLE	Bus Use				
	Ш	Initial Contact Point	1	Vehicle Damage					
UNIT	VEHICLE	11 - LEFT FRONT CORNER Extent Of Damage		15 - ALL AREAS					
_	¥	DISABLING DAMAGE							
		Towed Due To Damage TOWED DUE TO DISABLING	1	Vehicle Removed By CRAIGS TOWING					
		What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors					
		Driver Prior Action Other		NOT APPLICABLE					
		Driver Actions							
UNIT	EHICLE	<b>3</b>	ED TOO FAST/COND, F	AILURE TO CONTROL, RAN OFF ROA	ADWAY, FAILED TO KEEP IN				
	>								
_		OwnerName SIDNEY JAY POPPLE		Owner Address S7559 US HIGHWAY 12 # H-11					
2	6	(608) 402-5868		NORTH FREEDOM, WI 53951 , US	5				
		Sequence Of Events		I					
	5	Event MOTOR VEH IN TRANSPOR	RT						
	70	Event							
	8	Event							
	8	Event							
		individual							
		Driver SIDNEY JAY POPPLE		Citations Issued	Sex				
	4	(608) 402-5868		Date of Birth	MALE Race				
ţ	₫				WHITE				
ENS.	INDIVIDUAL	Address S7559 US HIGHWAY 12 # H-		Driver License Number					
		NORTH FREEDOM, WI 5395	1 , US	STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sai	On Duty Cr	rash	Safety Equipment					
		Row	SeatPosition	NONE USED - VEHICLE OCCUPANT					
		01 - FRONT ROW	07 - LEFT						
		HelmetUse		Heimet Compliance					
		Eye Protection		Tint Compliance					
5	8	Injury Seve	erity TED SERIOUS INJUR	Airbag NON DEPLOYED					
		3 '	jection Path OT EJECTED/NOT APP	LICABLE	Trapped/Extricated TRAPPED/EXTRICATED				
		Medical Transport EMS GROUND		EMS Agency Identifier 6000123	EMS Run# 210965				
		Hospital		Date of Death	Time of Death				
		UW HEALTH-AMERICAN CE	INTER						

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

		Distracted By Source UNKNOWN										
		Distracted By Action UNKNOWN										
		Non Motorist	ing Unit#	Location								
		Prior Action Prior Action										
		Action										
	3											
E S	NDIVIDUAL											
_	₹											
		Action Other						To/From School				
	ı	Orug & Alcohol Yes	pected Alcohol U S	S <del>C</del>	Suspected Drug Use NO							
		AlcoholTestGiven TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results					
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results						
2	g	Drug Type										
		Individual Condition										
		UNDER THE INFLUEN	CE OF MEDIC	ATIONS/DRUGS	/ ALCOHOL							
		l Individual										
	٥	Passenger FRANCISCO JABIER F	OBLES		Citations Issued  0		Sex MALE					
<b>-</b>	INDIVIDUAL				Date of Birth		Race WHITE					
	8	Address 1300 OAK ST			Drivert icense Number							
	=	PLAIN, WI 53577 , US			STATE: WISCONSIN COUNTRY: UNITED STATES							
	Sai	on E fety Equipment	Outy Crash		Safety Equipment							
		Row 99 - UNKNOWN	SeatPo	sition	NONE USED - VEHICLE OCCUPANT							
		HelmetUse			Helmet Compliance							
		Eye Protection			Tint Compliance							
5	700	Injury Severity SUSPECTED MINOR INJURY			Airbag							
		Ejected	Ejection Pat	ħ	NON DEPLOYED		Trapped/Extricated					
		UNKNOWN  Medical Transport	UNKNOW	N	EMS Agency Identifier		UNKNOWN EMS Run#					
		EMS GROUND Hospital			6000555 Date of Death		2105588 Time of Death					
		UW HEALTH-AMERICA			Date 0, Deats		, and 0: Death:					
		Distracted By Distr	acted By Source									

Crash Date 05/24/2021 Crash Time 05:25 PM

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

Crash Date 05/24/2021

		Distracted By Action								
		Striking	Unit#	Location						
		Prior Action								
		Action								
	M									
UNIT										
ר	INDIVIDUAL									
		Action Other						To/From School		
				1	10					
	I	Drug & Alcohol NO	ed Alcohol U	Jse	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				
_	2	Drug Type								
01	002	2 mg , ypc								
		ndividual Condition								
		CONFUSED OR DISORIEN	ITED (NOI	N LUCID)						
		individual								
	851HHHH	HUIVIUUAI	2020202020							
		Passenger			Citations Issued		Sex			
		ETTTHER OF THE DESCRIPTION OF THE PROPERTY OF					Sex FEMALE Race			
TN		Passenger EMILY MARIE RAMIREZ			Oitations issued  O Date of Birth		Sex FEMALE			
UNT	NDIVIDUAL	Passenger EMILY MARIE RAMIREZ  Address 206 W ONEIDA ST			Otations issued  Date of Birth  Driver License Number		Sex FEMALE Race WHITE			
LNO		Passenger EMILY MARIE RAMIREZ			Oitations issued  O Date of Birth		Sex FEMALE Race WHITE			
UNT	INDIVIDUAL	Passenger EMILY MARIE RAMIREZ  Address 206 W ONEIDA ST PORTAGE, WI 53901 , US			Otations issued  Date of Birth  Driver License Number		Sex FEMALE Race WHITE			
TNO	INDIVIDUAL	Passenger EMILY MARIE RAMIREZ  Address 206 W ONEIDA ST PORTAGE, WI 53901 , US  On Duty  Row			Otations issued  Date of Birth  Driver License Number  STATE: WISCONSI	N COUNTRY: UNI	Sex FEMALE Race WHITE TED STATES			
UNT	INDIVIDUAL	Passenger EMILY MARIE RAMIREZ  Address 206 W ONEIDA ST PORTAGE, Wt 53901 , US  Fety Equipment	Crash		Otations issued ODate of Birth Driver License Number STATE: WISCONSI	N COUNTRY: UNI	Sex FEMALE Race WHITE TED STATES			
TNO	INDIVIDUAL	Passenger EMILY MARIE RAMIREZ  Address 206 W ONEIDA ST PORTAGE, WI 53901 , US  On Duty  ety Equipment  Row 99 - UNKNOWN  Helmet Use	Crash		Citations issued  Date of Birth  Driver License Number  STATE: WISCONSIN  Safety Equipment  NONE USED - VEHI  Helmet Compliance	N COUNTRY: UNI	Sex FEMALE Race WHITE TED STATES			
LNU	INDIVIDUAL	Passenger EMILY MARIE RAMIREZ  Address 206 W ONEIDA ST PORTAGE, WI 53901 , US  Fety Equipment  Row 99 - UNKNOWN	Crash		Otations issued ODate of Birth Driver License Number STATE: WISCONSIN Safety Equipment NONE USED - VEH	N COUNTRY: UNI	Sex FEMALE Race WHITE TED STATES			
01 UNT	g INDIVIDUAL	Passenger EMILY MARIE RAMIREZ  Address 206 W ONEIDA ST PORTAGE, WI 53901 , US  ety Equipment  Row 99 - UNKNOWN  Helmet Use  Eye Protection	Crash Seat Po	osition	Citations issued  Date of Birth  Driver License Number  STATE: WISCONSIN  Safety Equipment  NONE USED - VEHI  Helmet Compliance  Tint Compliance	N COUNTRY: UNI	Sex FEMALE Race WHITE TED STATES			
	INDIVIDUAL	Address 206 W ONEIDA ST PORTAGE, WI 53901 , US  Pety Equipment  Row 99 - UNKNOWN  Helmet Use  Eye Protection  Injury Se SUSPE  Ejected	Crash Seat Po	osition  RIOUS INJUR	Citations issued  Date of Birth  Driver License Number  STATE: WISCONSIN  Safety Equipment  NONE USED - VEHI  Helmet Compliance  Tint Compliance	N COUNTRY: UNI	Sex FEMALE Race WHITE  TED STATES			
	g INDIVIDUAL	Passenger EMILY MARIE RAMIREZ  Address 206 W ONEIDA ST PORTAGE, WI 53901 , US  Fety Equipment  Row 99 - UNKNOWN  Helmet Use  Eye Protection  Injury Se SUSPE  Ejected TOTALLY EJECTED	Crash Seat Po	osition  RIOUS INJUR	Citations issued  0 Date of Birth  Driver License Number  STATE: WISCONSIN  Safety Equipment  NONE USED - VEHI  Heimet Compliance  Tint Compliance  Airbag  NON DEPLOYED	N COUNTRY: UNI	Sex FEMALE Race WHITE  TED STATES  Trapped/Extricated NOT APPLICABLE			
	g INDIVIDUAL	Address 206 W ONEIDA ST PORTAGE, WI 53901 , US  Fety Equipment  Row 99 - UNKNOWN  Helmet Use  Eye Protection  Injury Se SUSPE  Ejected TOTALLY EJECTED  Medical Transport EMS GROUND	Crash Seat Po	osition  RIOUS INJUR	Citations issued 0 Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment NONE USED - VEHI Helmet Compliance Tint Compliance Airbag NON DEPLOYED  EMS Agency Identifier 6000368	N COUNTRY: UNI	Sex FEMALE Race WHITE  TED STATES  Trapped/Extricated NOT APPLICABLE EMS Run # 211463			
	g INDIVIDUAL	Address 206 W ONEIDA ST PORTAGE, WI 53901 , US  Sety Equipment  Row 99 - UNKNOWN  Helmet Use  Eye Protection  Injury Sety Suspection  Injury Sety Suspection  Medical Transport	Crash Seat Po	osition  RIOUS INJUR	Citations issued  Date of Birth  Driver License Number  STATE: WISCONSIN  Safety Equipment  NONE USED - VEHI  Heimet Compliance  Tint Compliance  Airbag  NON DEPLOYED	N COUNTRY: UNI	Sex FEMALE Race WHITE  TED STATES  Trapped/Extricated NOT APPLICABLE EMS Run#			
	g INDIVIDUAL	Address 206 W ONEIDA ST PORTAGE, WI 53901 , US  Pety Equipment  Row 99 - UNKNOWN  Helmet Use  Eye Protection  Injury  Injury  SUSPE  Ejected  TOTALLY EJECTED  Medical Transport EMS GROUND  Hospital ST CLARE HOSP	Crash Seat Po	esition RIOUS INJUR	Citations issued 0 Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment NONE USED - VEHI Helmet Compliance Tint Compliance Airbag NON DEPLOYED  EMS Agency Identifier 6000368	N COUNTRY: UNI	Sex FEMALE Race WHITE  TED STATES  Trapped/Extricated NOT APPLICABLE EMS Run # 211463			
	g INDIVIDUAL	Address 206 W ONEIDA ST PORTAGE, WI 53901 , US  Fety Equipment  Row 99 - UNKNOWN  Helmet Use  Eye Protection  Injury Se SUSPE  Ejected TOTALLY EJECTED  Medical Transport EMS GROUND  Hospital ST CLARE HOSP	Crash Seat Po	esition RIOUS INJUR	Citations issued 0 Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment NONE USED - VEHI Helmet Compliance Tint Compliance Airbag NON DEPLOYED  EMS Agency Identifier 6000368	N COUNTRY: UNI	Sex FEMALE Race WHITE  TED STATES  Trapped/Extricated NOT APPLICABLE EMS Run # 211463			

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		Striking Non Motorist	Unit#	Location					
		Prior Action							
		Action							
	4								
<b>HN</b>	INDIVIDUAL								
>	ğ								
		Action Other						To/From School	
		 Drug & Alcohol NO	ted Alcohol (	Jse	Suspected Drug Use				
		AlcoholTestGiven		Alcohol Test Type	NO		Alcohol Test Results		
		TEST NOT GIVEN							
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	<b>L</b>		
2	8	Drug Type							
		Individual Condition							
		NOT OBSERVED							
		  ndividual							
		Passenger			Citations Issued		Sex		
	7	MALICHI CHARLES STAN	ILEY RAIN	IES	0 Date of Birth				
╘	3						Race WHITE		
N	INDIVIDUA	Address 502 MIDWAY DR	110		Driver License Number	COUNTRY IN	TED STATES		
		REEDSBURG, WI 53959	, us		STATE: WISCONSIN COUNTRY: UNITED STATES				
	Sai	On Duty	Crash	PONDER	Safety Equipment				
		Row 99 - UNKNOWN	SeatPo		NONE USED - VEHICLE OCCUPANT				
		HelmetUse			Helmet Compliance				
		Eye Protection			Tint Compliance				
_	3	Injury Severity			Airbag				
2	8	Injury suspe	CTED SE		NON DEPLOYED  Trapped/Extricated				
		TOTALLY EJECTED	UNKNOW				NOT TRAPPED		
		Medical Transport EMS GROUND			EMS Agency Identifier 6000368		EMS Run# 211463		
		Hospital ST CLARE HOSP			Date of Death		Time of Death		
			ed By Sourc	e			<u> </u>		
		Distracted By Action							
		Striking	Unit#	Location					
		Non Motorist							

Crash Date 05/24/2021 Crash Time 05:25 PM

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1 :		B: A.C					
		Prior Action					
		Action					
200							
200							
	3						
	0						
TINO	INDIVIDUAL						
-	0						
	£						
3							
		Action Other					To/From School
1							
		Suspected Alcohol	Use	Suspected Drug Use			1
0.00	1	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	<b>,</b>	
		TEŠT NOT GIVEN					
<b> </b> -	X	Drug Type	•		•		
0	80						
		Individual Condition					
Š		07.150					
		OTHER					
1 1							