

6TL0D1PTLN  
21-07424

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 21-07424	Investigating Officer/Deputy DEPUTY S. MESSNER	
Crash Date 08/07/2021		Crash Time 05:16 PM	Date Arrived 08/07/2021	Time Arrived 05:22 PM	
Date Notified 08/07/2021		Time Notified 05:16 PM	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>	Reconstruction By
	Photos By DEP. S. MESSNER
	Additional Information PHOTOS

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

ON SATURDAY, 8/8/2021, AT APPROXIMATELY 5:16 PM, UNIT 1, A YELLOW 2016 INTERNATIONAL STRAIGHT TRUCK, BEARING WISCONSIN REGISTRATION PLATE # 40042X, WAS BEING DRIVEN BY ALBERT L SMITH JR. UNIT 1 WAS SOUTHBOUND ON US 12 IN ITS DESIGNATED LANE WHEN A STORM BEGAN RAINING HEAVILY. UNIT 2, A RED 2015 TOYOTA RAV4 BEARING WISCONSIN REGISTRATION PLATE #403KEA, WAS BEING DRIVEN BY KATHLEEN K. LA MASNEY. UNIT 2 WAS NORTHBOUND, CROSSED OVER THE CENTER LINE INTO THE SOUTHBOUND LANE. UNIT 1 ATTEMPTED TO AVOID UNIT 2 AND ATTEMPTED TO SWERVE RIGHT. UNIT 2 STRUCK UNIT 1 BEHIND THE CAB AREA. UNIT 1 CAME TO A REST IN THE SOUTHBOUND LANE. UNIT 2 SPUN COUNTER CLOCKWISE AND CAME TO A REST. DRIVER FOR UNIT 1 WAS UNINJURED. DRIVER 1 ADVISED HE SAW UNIT 2 ENTER THE NORTHBOUND LANES AS IF IT WAS PASSING OTHER VEHICLES. DRIVER 2 ADVISED THAT SHE WAS BLOWN INTO THE SOUTHBOUND LANES. DURING THIS TIME THE WIND WAS COMING FROM THE WEST WITH HEAVY RAIN. DRIVER FOR UNIT 2 HAD POSSIBLE INJURIES AND WAS TRANSPORTED BY SAUK PRAIRIE AMBULANCE TO SAUK PRAIRIE HOSPITAL. BOTH UNITS WERE REMOVED BY BILL'S TOWING. WITNESS, MICHAEL MILLER, OBSERVED UNIT 2 CROSS THE CENTER LINE AND STRIKE UNIT 1, CONFIRMING THE DRIVER OF UNIT 1'S NARRATIVE.

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Location

ON USH12 EB 0.44 MI N OF USH12 EB IN THE TOWN OF PRAIRIE DU SAC IN SAUK COUNTY	Latitude 43.299464245	Longitude -89.759012335
	X Coordinate 276207.40625	Y Coordinate 4797767.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>		First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>02 - FRONT TO FRONT</b>		Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>WET</b>		Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>WEATHER CONDITIONS</b>			
Weather Condition(s) <b>RAIN</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>	
Closure Type <b>FULL CLOSURE</b>		Reasons for Closure <b>LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS</b>	
Date Initial Lane/Rd Closed <b>08/07/2021</b>	Time Initial Lane/Rd Closed <b>05:16 PM</b>		
Date All Lanes Open <b>08/07/2021</b>	Time All Lanes Open <b>06:16 PM</b>	Date Scene Cleared <b>08/07/2021</b>	Time Scene Cleared <b>06:16 PM</b>

Unit Summary

UNIT 01	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>TRUCK</b>	
	Vehicle Type <b>STRAIGHT TRUCK (INSERT TRUCK)</b>				Operating As Endorsements	
	Total Occs <b>1</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>EASTBOUND</b>	<input type="checkbox"/> Pre Crash 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>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>					

Vehicle

01 01	License Plate Number <b>40042X</b>	Plate Type <b>APO - APPORTIONED</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>1HTMMML2GH209806</b>	Make <b>INTERNATIONAL</b>	Year <b>2016</b>	Model <b>STRAIGHT</b>

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UNIT VEHICLE	Color <b>YEL - YELLOW</b>	Body Style <b>2D - 2DR</b>	Bus Use	
	Initial Contact Point <b>09 - LEFT SIDE MIDDLE</b>	Vehicle Damage <b>06 - REAR, 07 - LEFT REAR CORNER, 08 - LEFT SIDE REAR, 09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT, 14 - UNDERCARRIAGE</b>		
	Extent Of Damage <b>DISABLING DAMAGE</b>	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>	Vehicle Removed By <b>BILLS TOWING</b>	
	What Driver Was Doing <b>GOING STRAIGHT</b>	Driver Prior Action Other	Vehicle Factors <b>NOT APPLICABLE</b>	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>	Owner Name <b>URSA MAJOR CORPORATION</b>	Owner Address <b>6925 S 6TH ST # 100 OAK CREEK, WI 53154 , US</b>	
UNIT VEHICLE	<b>Sequence Of Events</b>			
	Event <b>MOTOR VEH IN TRANSPORT</b>			
	Event			
	Event			
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>TRAVELERS-INDEMNITY-CO-OF-CONNECTICUT</b>	Organization/Company <b>URSA MAJOR CORPORATION</b>		
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>ALBERT L SMITH JR</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>	
	Address <b>5211 BYRNE ROAD FITCHBURG, WI 53575 , US</b>	Date of Birth [REDACTED]	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 <b>SHOULDER &amp; LAP BELT</b>		
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</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#	

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UNIT 01 INDIVIDUAL
Hospital, Date of Death, Time of Death
Distracted By Source: NOT APPLICABLE (NOT DISTRACTED)
Distracted By Action: NOT DISTRACTED
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 Summary

UNIT 02
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: NORTHBOUND, 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

Vehicle


UNIT 02
License Plate Number: 403KEA, Plate Type: AUT - AUTOMOBILE, St: WI, Country of Issuance: UNITED STATES
Vehicle Identification Number: JTMRFREV2FJ036788, Make: TOYOTA, Year: 2015, Model: RAV4
Color: RED - RED, Body Style: 4D - 4DR, Bus Use

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	Extent Of Damage <b>DISABLING DAMAGE</b>				
	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>BILLS TOWING</b>		
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors <b>NOT APPLICABLE</b>		
UNIT VEHICLE	Driver Prior Action Other				
	Driver Actions <b>SPEED TOO FAST/COND, FAILED TO KEEP IN DESIGNATED LANE</b>				
02 02	Owner Name <b>KATHLEEN K LA MASNEY</b>		Owner Address <b>510 5TH ST BARABOO, WI 53913 , 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 02	<b>Policy Holder</b>				
	Insurance Company <b>CINCINNATI-INS-CO.-THE</b>		Individual <b>KATHLEEN LA MASNEY</b>		
UNIT INDIVIDUAL	<b>Individual</b>				
	Driver <b>KATHLEEN K LA MASNEY</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>	
			Date of Birth [REDACTED]	Race <b>WHITE</b>	
	Address <b>510 5TH ST BARABOO, WI 53913 , US</b>		Driver License Number [REDACTED] <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
02 002	<b>Safety Equipment</b>		On Duty Crash		
			Safety Equipment <b>SHOULDER &amp; LAP BELT</b>		
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>			
	Helmet Use		Helmet Compliance		
	Eye Protection		Tint Compliance		
<b>Injury</b>		Injury Severity <b>SUSPECTED MINOR INJURY</b>		Airbag <b>DEPLOYED-SIDE</b>	
Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>	
Medical Transport <b>EMS GROUND</b>		EMS Agency Identifier <b>6000555</b>		EMS Run#	
Hospital <b>SAUK PRAIRIE HOSP</b>		Date of Death		Time of Death	

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UNIT INDIVIDUAL          02 002	<b>Distracted By</b> Distracted By Source NOT APPLICABLE (NOT DISTRACTED)	
	Distracted By Action NOT DISTRACTED	
	<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		

### Witness

WITN 01 ESS	Individual MICHAEL DAVID MILLER	Address E11793 GALL RD BARABOO, WI 53913 , US	Date of Birth [REDACTED]