WISCONSIN MOTOR VEHICLE CRASH REPORT

Document Number Override	Primary Crash D	ocument #	Agency 24-057	Crash Number '41		g Officer/Deputy B. TRAGER	У		
Crash Date 06/03/2024	Crash Time 07:57 AM			Date Arrived 06/03/2024 Total Units 02		Time Arrived 08:20 AM			
Date Notified 06/03/2024 On Emergency Government Property						d Total Kill	ed		
On Emergency	Hit and Run	Lane Clos		Work Zone	Traile	r or Towed	Reporting Threshold		
Government Property	Active Sc	hool Zone	School NO	Bus Related	Tags				
✓ Reportable	Crash Type DT4000 (STA	NDARD CRASH	l)		Amen	ded	Secondary Crash		
Diagram Diagram						Reconstruction	on Rv		
				A		Photos By Additional Info			
	2	e Rd. 60		Not to Scale		NONE			
	US H	wy 14				-			
I, a sworn law enforce									
ON JUNE 3, 2024 AT APPROX STATE RD. 60 IN THE TURNIN CITED FOR FAILURE TO YIELI REPORTED AT THE TIME OF	IG LANE AND PULLED D THE RIGHT OF WAY.	OUT STRIKING UN	NT 2 WHC	WAS BEHIND THE SEM	II IN THE LANE (OF TRAVEL. OP	ERATOR OF UNIT 1 WAS		

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/03/2024

Crash Time 07:57 AM

	LOC	cation								
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	3 F				4	43.189143808		-90.069	-90.069892678	
		STH60 WB THE TOWN OF SPRING	C CREEN		X	Coordinate			Y Coord	linate
		SAUK COUNTY	G GREEN		2	50539.281	25		478639	95.5
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					N	IO STRUC	TURE			
(Cra	sh Scene								
1	First	t Harmful Event			Fi	irst Harmful	Event Lo	cation		
	MO	TOR VEH IN TRANSPO	ORT			N ROADV				
		nner of Collision				ight Conditio				
	01 -	- ANGLE				AYLIGHT				
	-	d Surface Condition(s)				Roadway Fac				
	DR	` ,					(-)			
	Envi	ironment Factor(s)								
	NO	NE			N	IONE				
	Wea	ather Condition(s)								
		OUDY								
	Anin	nal Type				Relation To T	•			
						RAFFICW				
		sh Classification - Location	1			rash Classifi				
		BLIC PROPERTY						SDICTION		
	Triba	al Land				ccess Contr				Special Study
			T			IO CONTR	ROL			
		nin Interchange Area	Junction Location		Intersection T					
	NO		INTERSECTION		I-INIERSE	CHON				
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į		t Summary 💻								
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	Unit IN T Vehi	Status FRANSIT icle Type		-	-	sification				ments
01	Unit IN T Vehi (SP	Status FRANSIT icle Type ORT) UTILITY VEHICL		D CLASS	-			AUTOMOR Operating A	s Endorse	
	Unit IN T Vehi (SP Tota	Status FRANSIT icle Type	LE Train/Bus # Recorded	D CLASS	-	Тс	otal Traile	AUTOMOR Operating A	s Endorse Total Haz	ments zMat Types
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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Towed Due To Damage		Vehicle Removed By			
		NOT TOWED		OWNER			
		What Driver Was Doing		Vehicle Factors			
		RIGHT TURN		NOT ADDITIONED E			
		Driver Prior Action Other		NOT APPLICABLE			
LINO	VEHICLE	Driver Actions FAILED TO YIELD RIGHT	-OF-WAY				
10	01	Owner Name JESSICA SCHMUDLACH (608) 408-7666		Owner Address 413 OAK ST BARABOO, WI 53	3913 , US		
		Sequence Of Events					
	01	MOTOR VEH IN TRANSP	ORT				
	02	Event					
	03	Event					
	04	Event					
_	l	Policy Holder					
LIND		Insurance Company GENERAL-CASUALTY-IN	s-co	Individual JESSICA SCHMUD	LACH		
		Individual					
		Driver		Citations Issued	Sex		
	Ļ	JESSICA SCHMUDLACH (608) 408-7666		1			
⊨	DUA	(000) 400-7000		Date of Birth Race WHITE			
LNO	INDIVIDUAL	Address 413 OAK ST BARABOO, WI 53913 , U	s	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
	Sat	On Duty fety Equipment	v Crash	Safety Equipment			
		Row	Seat Position	SHOULDER & LAP	BELT		
		01 - FRONT ROW	07 - LEFT				
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
2	00	Injury Son AP	everity PARENT INJURY	Airbag NON DEPLOYED			
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APP	PLICABLE		Trapped/Extricated NOT TRAPPED	
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #	
		Hospital		Date of Death		Time of Death	
		Distracted Ry No. A	ed By Source PPLICABLE (NOT DISTRA	ACTED)		l	
		Distracted By Action	FFLICABLE (NUI DISTRA	HOTED)			
		NOT DISTRACTED					

WISCONSIN MOTOR VEHICLE CRASH REPORT

			A		T						
		Non Motorist	Strik	ing Unit#	Location						
		Prior Action									
		Action									
	INDIVIDUAL										
I≡	DO										
LIND	Σ										
	P										
	=										
		Action Other								To/From School	
	,	Drug & Alcohol	Susp	ected Alcohol	Use	Suspected Dru NO	ıg Use				
	-		110		TAL 1 17 17	_				18. "	
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Ty	/pe			Alcohol Tes	t Results	
		Drug Test Given			Drug Test Type	<u> </u>	Drug	Test Results			
		TEST NOT GIVEN			9,		Diag	1 oot 1 toodito			
_	7	Drug Type			L						
2	001										
		Individual Condition									
		Individual Condition									
		APPEARED NORM	/IAL								
		L Violations									
		UTC Number	Issu	ie To? St	atute Number	Description					
	01	BG113053	001		46.37(1)(c)3		YIELD RIGH	T OF WAY			
' i	Unit	t Summary		<u> </u>		'					
		Status				Vehicle Operating	As Classification	1	Unit Type		
		IN TRANSIT				D CLASS			AUTOMOBILE		
02									Operating A	s Endorsements	
		icle Type									
	PAS	cle Type SSENGER CAR		Train/Dua # D	Donordo d	T 1 1 1 0 1 1 1		Total Trail			
	PAS Tota	icle Type		Train/Bus # R	Recorded	Total # Citations Is	ssued	Total Trail	ers	Total HazMat Types	
)	Tota 1	cle Type SSENGER CAR I Occs				0		0		Total HazMat Types	
	Tota 1	SSENGER CAR I Occs		Train/Bus # R Direction Of T	ravel		nTire			Total HazMat Types	
NIT	Total 1 Insur	SSENGER CAR I Occs	on Wi	Direction Of T	ravel	Pre Crash Mark Special Function	nTire	0 Speed Lim	nit Emergency	Total HazMat Types 0 Total Lanes 3 Motor Vehicle Use	
П	Total 1 Insur YES	cle Type SSENGER CAR I Occs rance? S t Harmful Event: Collision		Direction Of T WESTBOU	ravel	Pre Crash Mark	nTire	0 Speed Lim	Emergency	Total HazMat Types 0 Total Lanes 3 Motor Vehicle Use LICABLE	
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WISCONSIN MOTOR VEHICLE CRASH REPORT

	Щ			/ehicle Damage				
⊑ا	2			01 - RIGHT FRONT C	ORNER, 02 - RIGHT S	IDE		
E N	VEHICLE	Extent Of Damage		FRONT, 03 - RIGHT S	IDE MIDDLE, 04 - RIG	HT SIDE		
	7	DISABLING DAMAGE		REAR, 05 - RIGHT RE	AR CORNER			
		Towed Due To Damage TOWED DUE TO DISABLI		/ehicle Removed By				
		What Driver Was Doing		/ehicle Factors				
		GOING STRAIGHT		omene i detere				
		Driver Prior Action Other	ı	NOT APPLICABLE				
		Driver Actions NO CONTRIBUTING ACTI	ON					
-	LE	NO CONTRIBUTING ACTI	ON					
E	9							
7	VEHICL							
		Owner Name JASON RYNES		Owner Address	E DD			
05	02	(608) 490-1582		N2565 OAK RIDG BRODHEAD, WI 5				
				·				
		Sequence Of Events						
	01	Event MOTOR VEH IN TRANSPO	ORT					
	0		JKI					
	02	Event						
	03	Event						
		Event						
	04	Lyon						
⊨ا	ı	Policy Holder		_				
L N		Insurance Company FOUNDERS-INS-CO		Individual				
				JASON RYNES				
		Individual Driver		Citations Issued	Sex			
		JASON RYNES		0	MALE			
	M	(608) 490-1582		Date of Birth	Race			
⊨ ا	IDIVIDUAL				WHITE			
E	2	Address N2565 OAK RIDGE RD		Driver License Number				
	Z	BRODHEAD, WI 53520 , U	JS	STATE: WISCONSIN COUNTRY: UNITED STATES				
	Cod	On Duty	Crash	Safety Equipment				
	Sai	fety Equipment						
		Row	Seat Position	SHOULDER & LAP	BELT			
			Seat Position 07 - LEFT		BELT			
		Row 01 - FRONT ROW		Helmet Compliance	BELT			
		Row 01 - FRONT ROW			BELT			
22	02	Row 01 - FRONT ROW Helmet Use Eye Protection Injury Se	07 - LEFT	Helmet Compliance Tint Compliance Airbag	BELT			
02	002	Row 01 - FRONT ROW Helmet Use Eye Protection Injury Se	07 - LEFT everity PARENT INJURY	Helmet Compliance Tint Compliance		oped/Extricated		
02	002	Row 01 - FRONT ROW Helmet Use Eye Protection Injury Se	07 - LEFT	Helmet Compliance Tint Compliance Airbag DEPLOYED-SIDE	Trap	oped/Extricated T TRAPPED		
02	002	Row 01 - FRONT ROW Helmet Use Eye Protection Injury NO AP Ejected NOT EJECTED Medical Transport	everity PARENT INJURY Ejection Path	Helmet Compliance Tint Compliance Airbag DEPLOYED-SIDE	Traț NO	-		
02	005	Row 01 - FRONT ROW Helmet Use Eye Protection Injury Se NO AP Ejected NOT EJECTED	everity PARENT INJURY Ejection Path	Helmet Compliance Tint Compliance Airbag DEPLOYED-SIDE	Traș NO EMS	T TRAPPED		

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/03/2024

Crash Time 07:57 AM

		Distracted By	NOT APPLICABL	E (NOT DISTRAC	CTED)			
		Distracted By Action NOT DISTRACTED)					
		Non Motorist	Striking Unit #	Location				
		Prior Action						
		Action						
_	UAL							
LNO	INDIVIDUAL							
	IND							
		Action Other						To/From School
		Action Other			To			TO/T TOTAL SCHOOL
	L	Orug & Alcohol	Suspected Alcohol U 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		
05	002	Drug Type						
		Individual Condition						
		APPEARED NORM	//AL					