WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash D	ocument #	24-06374 DEPUTY S.					
Q Q	Crash Date 06/18/2024	Crash Time 02:32 PM Time Notified 02:32 PM and Run Lane Closu		06/18/2024 02:40 Total Units Total 00 02 00		Time Arrived 02:40 PM			
L0D1PTPQ	Date Notified 06/18/2024						Total Injured Total Killed 00 00		
O	On Emergency Hit					Trailer	or Towed	Reporting Threshold	
eTL	Government Property	Active Scl	nool Zone	School NO	Bus Related	Tags			
	✓ Reportable	Crash Type DT4000 (STAI	NDARD CRASH)		Amend	led	Secondary Crash	
	Description						I D		
	Diagram	Both units pu		ТН А	Not to scale		Reconstruction	on By	
	Un	the side of ro	ad.			*	Photos By DEP. S. ME	SSNER #9134	
	Moo Road	==)	Unit 1 spins struck.	after b	eing		Additional Info	ormation	
		STOP	Unit 2		Unit 1 move right should roadway. U possibly act right turn si 2 moves lef unit 1. Unit activates le signal and turn. Unit 2 Unit 1 in the side rear co pannel.	der of the nit 1 tivated gnal. Unit t to pass 1 possibly ft turn makes left strikes e driver's			

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

ON 6/18/2024, AT APPROXIMATELY 2:32 PM, UNIT 1, A 2010 TAN TOYOTA CAMRY,WI# 32212DS, WAS BEING DRIVEN BY KRISTIN JOHNSON. FRONT PASSENGER WAS EVANGELINE JOHNSON AND REAR DRIVER'S SIDE PASSENGER WAS REMINGTON STEFFES. UNIT 1 WAS NORTHBOUND ON CTH A. UNIT 1 MOVED OVER TO THE RIGHT SHOULDER OF THE ROADWAY. UNIT 2, A 2024 GRAY HYUNDAI PALISADE, BEARING WI# CHAMBO6, WAS DRIVEN BY AMBER CHAMBERS. UNIT 2 MOVED TO PASS, ON THE LEFT, OF UNIT 1. THE ROADWAY WAS MARKED AS NO PASSING ZONE. UNIT 1 THEN TURN LEFT IN FRONT OF UNIT 2. UNIT 2 STRUCK UNIT 1 IN THE REAR DRIVER'S SIDE CORNER PANEL. UNIT 1 SPUN ACROSS THE ONCOMING LANE OF TRAFFIC. THE DRIVER OF UNIT 2 ADVISED UNIT 1 ACTIVATED IT'S RIGHT TURN SIGNAL WHEN IT MOVED TO THE RIGHT SHOULDER. UNIT 1'S DRIVER ADVISED SHE ACTIVATED HER LEFT TURN SIGNAL AND TURNED LEFT WHEN SHE WAS STRUCK. THE CRASH WAS WITNESSED BY BARABOO AMBULANCE 578 IN WHICH EMT LOGAN LAMASNEY AND WITNESSED. ADVISED UNIT 1 MOVED TO THE RIGHT, UNIT 2 ATTEMPTED TO PASS, AND UNIT 1 TURNED LEFT IN FRONT OF UNIT 2. EMT LAMSNEY DID NOT OBSERVE A RIGHT TURN SIGNAL. BOTH OCCUPANTS OF UNIT 1 & UNIT 2 REFUSED MEDICAL ASSISTANCE. UPON REQUEST BOTH DRIVER'S PROVIDED INSURANCE. UNIT 1'S INSURANCE WAS MCMILLAN WARNER MUTUAL INSURANCE COMPANY. UNIT 2 HAD ALLSTATE PROPERTY AND CASUALTY INSURANCE COMPANY. UNIT 1 DRIVER WAS CITED FOR IMPROPER LEFT TURN. BOTH UNITS WERE REMOVED WITHOUT TOW SERVICE.

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Crash Date 06/18/2024

L	_oc	ation ====									
Ī	ON	CTHA NB				Latitude			Longitue	de	
	208	FT S				43.56074	18546		_	3626419	
		MOON RD				X Coordina	ate		Y Coord	dinate	
		HE TOWN OF DELTC	DN			278815.34375		482673			
	IN S	AUK COUNTY				Structure 7				-	
L						NO STR					
(Cra	sh Scene									
Ī	First	Harmful Event				First Harm	nful Event Lo	cation			
	MO	TOR VEH IN TRANSP	PORT			ON ROA	DWAY				
f	Manı	ner of Collision				Light Cond	dition				
	01 -	ANGLE				DAYLIGI	HT				
ŀ	Road Surface Condition(s) DRY						Factor(s)				
ŀ	Envi	onment Factor(s)									
	МОИ	IE				NONE					
ŀ	Weather Condition(s) CLEAR										
ŀ	Anim	al Type			Relation T	o Trafficway	,				
L							CWAY - ON				
		h Classification - Location	ı				ssification				
	PUBLIC PROPERTY					NO SPE	CIAL JURI	SDICTION			
	Triba	Il Land				Access Control Special Study NO CONTROL			Special Study		
ŀ	Within Interchange Area Junction Location Interse				Intersection	n Type					
	YES	1	INTERSECTION		T-INTER	SECTION					
Į		Summary =									
T	Unit	Status			erating As C	lassification		Unit Type			
	IN T	TRANSIT D CLASS					AUTOMOBILE				
		cle Type SSENGER CAR						Operating As Endorsements			
Ļ			Train/Bus # Recorded	T-4-1 # 6'4-	l	s Issued Total Trail				Mot Types	
	3	Occs	Train/bus # Recorded	1 Otal # Cita	itions issued					ziviai Types	
ļ			Direction Of Travel				_	imit Total I		200	
		ance?		Pre	CrashTire	55		imit Total Lanes 2 Emergency Motor Vehicle Use NOT APPLICABLE		Lanes	
L	YES	Harmful Event: Collision	NORTHBOUND	Special Fur	Mark					ido Heo	
		FOR VEH IN TRANSP			IAL FUNC						
ŀ		ic Way		Traffic Cont	trol			Traffic Control Inoperative/Missing			
	TWO	D-WAY, NOT DIVIDED)	NO CONT				NO			
ŀ		ace Type		Road Curva				Road Grade LEVEL			
	BLA	CKTOP (BITUMINOL	JS)	STRAIGH							
ŀ	Truc	k Bus or HazMat	,					I			
4	NO,	/akiala									
	Ì	Vehicle License Plate Number		Plate Type	<u> </u>	I	St	Country of Is:	suance		
ı		32212DS		DIS - DISABLED		WI	UNITED STATES Model				
	Vehicle Identification Number			Make					Year		
	01	4T1BF3EK0AU0263		TOYOTA			2010				
		Color		Body Style		ļ		Bus Use			
		TAN - TAN		4D - 4DR							
	Щ	Initial Contact Point		Vehicle Da			ļ				
	C	07 - LEFT REAR CO	RNER		_					7 8 9 10 11	
	VEHICL	Extent Of Damage			AR, 07 - LE	FT REAR	CORNER	, 08 - LEFT	SIDE	6 Pg 12	
/	Ш	MINOR DAMAGE		REAR						5 4 3 2 1	
	>	MINTON DAMAGE									

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

		Towed Due To Damage		Vehicle Removed By			
		NOT TOWED		OPERATOR			
		What Driver Was Doing		Vehicle Factors			
		LEFT TURN					
		Driver Prior Action Other		NOT APPLICABLE			
		Driver Actions					
	щ	IMPROPER TURN					
╘	VEHICLE						
LNO	王						
	7						
		Owner Name		Owner Address 1427 JEFFERSO	N CT		
7	2	KRISTIN JOHNSON		BARABOO, WI 5			
J					, , , ,		
	•	Sequence Of Events Event					
	5	MOTOR VEH IN TRANSP	ORT				
	02	Event					
	03	Event					
		Event					
	04						
⊨	- 1	Policy Holder					
LNO		Insurance Company MCMILLAN WARNER INS	CLIDANCE COMPANY	Individual KRISTIN JOHNSOI	NI .		
			BURANCE COMPANY	KKISTIN JOHNSOI	<u> </u>		
		Individual					
		Driver KRISTIN JOHNSON		Citations Issued 1	Sex		
	A F	Tarabilit Gorintoon		Date of Birth	FEMALE Race		
_	INDIVIDUAL			Date of Birtin	WHITE		
	≥	Address		Driver License Numbe	r		
_	9	1427 JEFFERSON ST	c	STATE: WISCONSI	IN COLINTRY: LIN	ITED STATES	
	=	BARABOO, WI 53913 , U	3	STATE. WISCONS	iii COONTRI. ON	IILD SIKILS	
	Sat	On Duty fety Equipment	Crash	Safety Equipment			
		Row	Seat Position	SHOULDER & LAF	BELT		
		01 - FRONT ROW	07 - LEFT				
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
	_	Injury So	everity	Airbag			
2	00	Injury NO AP	PARENT INJURY	NON DEPLOYED			
		Ejected	Ejection Path			Trapped/Extricated	
		NOT EJECTED	NOT EJECTED/NOT API	PLICABLE		NOT TRAPPED	
		Medical Transport		EMS Agency Identifier		EMS Run #	
		NOT TRANSPORTED					
		Hospital		Date of Death		Time of Death	
		Distracto	ed By Source			<u> </u>	
		Distracted By UNKNO	OWN				
		Distracted By Action UNKNOWN					

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		_							
		Non Motorist	Striking U	Jnit #	Location				
		Prior Action							
UNIT	INDIVIDUAL	Action							
•	Z	Action Other							To/From School
		Action Other							10/110m ocnoor
	ı	Drug & Alcohol	Suspecte NO	ed Alcohol U	lse	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	3	
10	00	Drug Type							
		Individual Condition							
		APPEARED NORM	//AL						
	ı	Individual							
	_	Passenger EVANGELINE JOH	INSON			Citations Issued 0	Sex FEMALE		
_	DUA					Date of Birth	Race WHITE		
TINO	INDIVIDUAL	Address 1427 JEFFERSON BARABOO, WI 539		3		Driver License Number			
	Sat	fety Equipment	On Duty	Crash		Safety Equipment			
		Row 01 - FRONT ROW		Seat Po		SHOULDER & LAP	BELT		
		Helmet Use				Helmet Compliance			
		Eye Protection				Tint Compliance			
5	005	I	Injury Se	verity PARENT I	NJURY	Airbag NON DEPLOYED			
		Ejected NOT EJECTED		Ejection Pa	th CTED/NOT APPI	LICABLE		Trapped/Extricated NOT TRAPPED	
		Medical Transport				EMS Agency Identifier		EMS Run #	
		NOT TRANSPORT Hospital	ED			Date of Death		Time of Death	
			Distracte	d By Source	•				
		Distracted By							
		Distracted By Action							
		Non Motorist	Striking U	Jnit #	Location				

4 of 8

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	_										
		Prior Action									
LIND	INDIVIDUAL	Action Action Other To/From School									
	L	Orug & Alcohol	Suspected NO	Alcohol Us	se	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				
7	005	Drug Type					-				
		Individual Condition APPEARED NORMAL									
		ام داندناد دها									
		ndividual Passenger				Citations Issued	Sex				
	ᆛ	REMINGTON STEFFES			0	MALE Race					
╘	JDQ1					Date of Birth	WHITE				
LINO	INDIVIDUAL	Address 1427 JEFFERSON BARABOO, WI 539				Driver License Number					
	Saf	ety Equipment	On Duty Cr	ash		Safety Equipment					
		Row 02 - SECOND ROW	v	Seat Pos 07 - LE		CHILD RESTRAINT SYSTEM - FORWARD FACING					
		Helmet Use				Helmet Compliance					
		Eye Protection				Tint Compliance					
0	003	Injury	NO APPA	rity ARENT IN	IJURY	Airbag NON DEPLOYED					
		Ejected NOT EJECTED	Ej	ection Pat	h CTED/NOT APPL	ICABI E		Trapped/Extricated NOT TRAPPED			
		Medical Transport	14	OT LUL	TED/NOT ALLE	EMS Agency Identifier		EMS Run #			
		NOT TRANSPORT	ED								
		Hospital				Date of Death		Time of Death			
		Distracted By	Distracted I	By Source							
		Distracted By Action									
		Non Motorist	Striking Uni	it #	Location						
		Prior Action									

Crash Date 06/18/2024 Crash Time 02:32 PM

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		Action										
	INDIVIDUAL											
LIND	<u></u>											
5	≥											
	Ĭ											
		Action Other										To/From School
	,	Drug & Alcohol	Suspected Alc	ohol U	se	Suspecte NO	d Drug Use					
	_	Alcohol Test Given	NO		Alcohol Test Typ	_			- 1	Alcohol Test	t Dogulto	
		TEST NOT GIVEN			Alcohol Test Typ	e				Alcohol Tes	i Kesulis	•
		Drug Test Given			Drug Test Type			Drug T	est Results			
		TEŠT NOT GIVEN										
5	003	Drug Type			·			•				
	0											
		Individual Condition										
		APPEARED NORM	IAL									
	\ 	Violations UTC Number	Issue To?	Stat	tute Number	Description	on.					
	0	BG944222	001		5.31(3)	IMPROF	ËR LEFT TI	JRN				
	Unit	t Summary										
	Unit :	t Summary Status					ating As Class	ification		Unit Type		
	Unit :	Status RANSIT				Vehicle Oper	ating As Class	ification		AUTOMOI		noments.
02	Unit :	Status RANSIT cle Type	CLE				ating As Class	ification				sements
	Unit : IN T Vehice (SPC	Status RANSIT	CLE	s#Re				ification	Total Traile	AUTOMOI Operating A	s Endors	sements azMat Types
	Unit : IN T Vehice (SPC	Status RANSIT cle Type ORT) UTILITY VEHI	Train/Bus		corded	D CLASS		ification	0	AUTOMOI Operating A	s Endors Total H 0	azMat Types
02	Unit S IN T Vehice (SPC) Total 1	Status RANSIT cle Type ORT) UTILITY VEHI Occs rance?	Train/Bus	Of Tra	corded	Total # Citation Pre C	ons Issued	ification	0 Speed Limit	AUTOMOI Operating A	Total H Total La	azMat Types
02	Vehice (SPC) Total 1 Insur YES	Status RANSIT cle Type ORT) UTILITY VEHI I Occs rance?	Train/Bus Direction NORTH	Of Tra	corded avel	Total # Citation Pre C	ons Issued CrashTire Mark	ification	0	AUTOMOI Operating A	Total H Total La Total La	azMat Types anes
	Unit s IN T Vehice (SPC Total 1 Insur YES	Status RANSIT cle Type ORT) UTILITY VEHI Occs rance?	Direction NORTH on With	Of Tra	corded avel	Total # Citation Pre C	ons Issued CrashTire Mark		0 Speed Limit	AUTOMOI Operating A	Total H Total La Total La Motor Ve	azMat Types anes ehicle Use
02	Unit : IN T Vehic (SPC Total 1 Insur YES Most MOT	Status FRANSIT cle Type ORT) UTILITY VEHI I Occs rance? B Harmful Event: Collision TOR VEH IN TRANS ic Way	Direction NORTH on With	Of Tra	corded avel	Total # Citatio Pre C Special Func NO SPECI. Traffic Control	crashTire Mark tion AL FUNCTIO		0 Speed Limit	AUTOMOI Operating A	Total H 0 Total La 2 Motor Ve	azMat Types anes ehicle Use
02	Unit : IN T Vehic (SPC Total 1 Insur YES Most MO1 Traffi	Status RANSIT cle Type ORT) UTILITY VEHI I Occs rance? B Harmful Event: Collision TOR VEH IN TRANS ic Way D-WAY, NOT DIVIDE	Direction NORTH on With	Of Tra	corded avel ND	Total # Citatio Pre C Special Func NO SPECIA Traffic Contre	ons Issued CrashTire Mark tion AL FUNCTIO		0 Speed Limit	AUTOMOI Operating A rs t Emergency NOT APPI Traffic Contr	Total H Total La Z Motor Ve LICABL	azMat Types anes ehicle Use
02	Unit : IN T Vehic (SPC Total 1 Insur YES Most MO1 Traffi TWC	Status RANSIT cle Type ORT) UTILITY VEHI I Occs rance? B Harmful Event: Collision TOR VEH IN TRANS ic Way D-WAY, NOT DIVIDE ace Type	Direction NORTH on With SPORT	Of Tra	corded avel ND	Total # Citatio Pre C Special Func NO SPECI. Traffic Contro NO CONTF	ons Issued CrashTire Mark tion AL FUNCTIO		0 Speed Limit	AUTOMOI Operating A rs t Emergency NOT APPI Traffic Contr NO Road Grade	Total H Total La Z Motor Ve LICABL	azMat Types anes ehicle Use
02	Unit: IN T Vehic (SPC Total 1 Insur YES Most MOT Traffi TWC Surfa	Status RANSIT cle Type ORT) UTILITY VEHI I Occs rance? B Harmful Event: Collision TOR VEH IN TRANS ic Way D-WAY, NOT DIVIDE	Direction NORTH on With SPORT	Of Tra	corded avel ND	Total # Citatio Pre C Special Func NO SPECIA Traffic Contre	ons Issued CrashTire Mark tion AL FUNCTIO		0 Speed Limit	AUTOMOI Operating A rs t Emergency NOT APPI Traffic Contr	Total H Total La Z Motor Ve LICABL	azMat Types anes ehicle Use
02	Unit: IN T Vehic (SPC Total 1 Insur YES Most MOT Traffi TWC Surfa	Status RANSIT cle Type ORT) UTILITY VEHI Cocs rance? Harmful Event: Collision TOR VEH IN TRANS ic Way D-WAY, NOT DIVIDE ace Type ACKTOP (BITUMING	Direction NORTH on With SPORT	Of Tra	corded avel ND	Total # Citatio Pre C Special Func NO SPECI. Traffic Contro NO CONTF	ons Issued CrashTire Mark tion AL FUNCTIO		0 Speed Limit	AUTOMOI Operating A rs t Emergency NOT APPI Traffic Contr NO Road Grade	Total H Total La Z Motor Ve LICABL	azMat Types anes ehicle Use
02	Unit: IN T Vehice (SPC Total 1 Insur YES Most MOT Traffif TWC Surfa BLA Truck	Status RANSIT cle Type ORT) UTILITY VEHI I Occs rance? Status Harmful Event: Collision TOR VEH IN TRANS ic Way D-WAY, NOT DIVIDE ACKTOP (BITUMING IK Bus or HazMat	Direction NORTH On With SPORT ED	Of Tra	corded avel ND	Total # Citation Pre Company Special Function NO SPECIA Traffic Control NO CONTE	ons Issued CrashTire Mark tion AL FUNCTIO		Speed Limits 55	AUTOMOI Operating A rs t Emergency NOT APPI Traffic Contr NO Road Grade LEVEL	Total H 0 Total La 2 Motor Ve LICABL rol Inope	azMat Types anes ehicle Use
02	Unit: IN T Vehice (SPC Total 1 Insur YES Most MOT Traffif TWC Surfa BLA Truck	Status RANSIT cle Type ORT) UTILITY VEHI I Occs rance? St Harmful Event: Collision TOR VEH IN TRANS ic Way D-WAY, NOT DIVIDE ace Type ACKTOP (BITUMINO Ik Bus or HazMat Vehicle License Plate Number	Direction NORTH On With SPORT ED	Of Tra	corded avel ND	Total # Citation Pre Company Special Function NO SPECIA Traffic Control NO CONTE	crashTire Mark tion AL FUNCTIO		Speed Limits 55	AUTOMOI Operating A rs t Emergency NOT APPI Traffic Conti NO Road Grade LEVEL	Total H 0 Total La 2 Motor Ve LICABL rol Inope	azMat Types anes ehicle Use
UNIT 02	Unit: IN T Vehic (SPC Total 1 Insur YES Most MOT Traffit TWC Surfa BLA NO	Status RANSIT cle Type ORT) UTILITY VEHI I Occs rance? 6 Harmful Event: Collision TOR VEH IN TRANS ic Way D-WAY, NOT DIVIDE ace Type ACKTOP (BITUMINO k Bus or HazMat Vehicle License Plate Number CHAMB06	Direction NORTH ON With SPORT ED DUS)	Of Tra	corded avel ND	Total # Citation Pre Company Special Function NO SPECIA Traffic Control NO CONTE	ons Issued CrashTire Mark tion AL FUNCTIO		Speed Limits 55 St WI	AUTOMOI Operating A rs t Emergency NOT APPI Traffic Contr NO Road Grade LEVEL	Total H 0 Total La 2 Motor Ve LICABL rol Inope	azMat Types anes ehicle Use
02	Unit: IN T Vehice (SPC Total 1 Insur YES Most MOT Traffif TWC Surfa BLA Truck	Status RANSIT cle Type ORT) UTILITY VEHI I Occs rance? St Harmful Event: Collision TOR VEH IN TRANS ic Way D-WAY, NOT DIVIDE ace Type ACKTOP (BITUMINO Ik Bus or HazMat Vehicle License Plate Number	Direction NORTH ON With SPORT ED DUS)	Of Tra	corded avel ND	Total # Citation Pre Control Special Function NO SPECIA Traffic Control NO CONTE Road Curvatt STRAIGHT Plate Type AUT - AUT	crashTire Mark tion AL FUNCTIO		Speed Limits 55 St WI Year	AUTOMOI Operating A rs t Emergency NOT APPI Traffic Contr NO Road Grade LEVEL Country of Is:	Total H Total La Motor Ve LICABL rol Inope	azMat Types anes ehicle Use
UNIT 02	Unit: IN T Vehic (SPC Total 1 Insur YES Most MOT Traffit TWC Surfa BLA NO	Status RANSIT Cle Type ORT) UTILITY VEHI OCCS rance? A Harmful Event: Collision TOR VEH IN TRANS ic Way D-WAY, NOT DIVIDE ace Type ACKTOP (BITUMINO k Bus or HazMat Vehicle License Plate Number CHAMB06 Vehicle Identification N KM8R3DGE9RU65 Color	Direction NORTH ON With SPORT ED DUS)	Of Tra	corded avel ND	Total # Citation Pre Control Special Function NO SPECIA Traffic Control Road Curvate STRAIGHT Plate Type AUT - AUT Make HYUNDAI Body Style	CrashTire Mark tion AL FUNCTIO	DN	St WI Year 2024	AUTOMOI Operating A rs t Emergency NOT APPI Traffic Conti NO Road Grade LEVEL Country of Is: UNITED ST	Total H Total La Motor Ve LICABL rol Inope	azMat Types anes ehicle Use
UNIT 02	Unit: IN T Vehic (SPC Total 1 Insur YES Most MOT Traffit TWC Surfa BLA NO	Status RANSIT Cle Type ORT) UTILITY VEHI I Occs rance? B Harmful Event: Collision TOR VEH IN TRANS ic Way D-WAY, NOT DIVIDE ace Type ACKTOP (BITUMING k Bus or HazMat Vehicle License Plate Number CHAMB06 Vehicle Identification N KM8R3DGE9RU65 Color GRY - GRAY	Direction NORTH ON With SPORT ED DUS)	Of Tra	corded avel ND	Total # Citation Pre Control Special Function NO SPECIA Traffic Control NO CONTF Road Curvate STRAIGHT Plate Type AUT - AUT Make HYUNDAI Body Style UT - SPOR	CrashTire Mark tion AL FUNCTIO DI ROL ure	DN	St WI Year 2024	AUTOMOI Operating A rs t Emergency NOT APPI Traffic Contr NO Road Grade LEVEL Country of Is: UNITED ST Model PALISADE	Total H Total La Motor Ve LICABL rol Inope	azMat Types anes ehicle Use
02 UNIT 02	Unit: IN T Vehic (SPC Total 1 Insur YES MOST Traffit TWC Surfa BLA Truck NO	Status RANSIT Cle Type ORT) UTILITY VEHI I Occs rance? B I Harmful Event: Collision TOR VEH IN TRANS IC Way D-WAY, NOT DIVIDE ACKTOP (BITUMING IK Bus or HazMat Vehicle License Plate Number CHAMB06 Vehicle Identification IN KM8R3DGE9RU65 Color GRY - GRAY Initial Contact Point	Direction NORTH ON With SPORT ED Number 66318	Of Tra	corded avel ND	Total # Citation Pre Company Special Function NO SPECIA Traffic Control NO CONTE Road Curvati STRAIGHT Plate Type AUT - AUT Make HYUNDAI Body Style UT - SPOF Vehicle Dan	crashTire Mark tion AL FUNCTIO DI ROL ure FOMOBILE RT UTILITY V	ON /EHICL	St WI Year 2024	AUTOMOI Operating A rs t Emergency NOT APPI Traffic Contr NO Road Grade LEVEL Country of Is: UNITED ST Model PALISADE Bus Use	Total H Total La Motor Ve LICABL rol Inope	azMat Types anes ehicle Use E rative/Missing
UNIT 02	Unit: IN T Vehic (SPC Total 1 Insur YES Most MOT Traffit TWC Surfa BLA NO	Status RANSIT Cle Type ORT) UTILITY VEHI I Occs rance? B Harmful Event: Collision TOR VEH IN TRANS ic Way D-WAY, NOT DIVIDE ace Type ACKTOP (BITUMING k Bus or HazMat Vehicle License Plate Number CHAMB06 Vehicle Identification N KM8R3DGE9RU65 Color GRY - GRAY	Direction NORTH ON With SPORT ED Number 66318	Of Tra	corded avel ND	Total # Citation Pre Company Special Function NO SPECIA Traffic Control NO CONTE Road Curvati STRAIGHT Plate Type AUT - AUT Make HYUNDAI Body Style UT - SPOR Vehicle Dan 01 - RIGH	CrashTire Mark tion AL FUNCTIO DI ROL ure	ON /EHICL	St WI Year 2024	AUTOMOI Operating A rs t Emergency NOT APPI Traffic Contr NO Road Grade LEVEL Country of Is: UNITED ST Model PALISADE Bus Use	Total H Total La Motor Ve LICABL rol Inope	azMat Types anes ehicle Use E rative/Missing

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Crash Date 06/18/2024

		Towed Due To Damage		Vehicle Removed By				
		NOT TOWED		OPERATOR				
		What Driver Was Doing		Vehicle Factors				
		OVERTAKE LEFT		NOT APPLICABLE				
		Driver Prior Action Other		NOT ALL LICABLE				
		Driver Actions						
	щ	IMPROPER OVERTAKING	/ PASSING LEFT					
╘	VEHICL							
LNO	표							
	VE							
		Own on Name		L Owner Address				
		Owner Name AMBER CHAMBERS		Owner Address N2051 COUNTY	ROAD N			
02	02			LYNDON STATIC	ON, WI 53944 , US	3		
		Sequence Of Events						
	01	Event MOTOR VEH IN TRANSPO	ORT					
		Event						
	02							
	03	Event						
		Event						
	04							
╘	I	Policy Holder		1				
		Insurance Company ALLSTATE-PROPERTY-&	-CASUALTY-INS-CO	Individual AMBER CHAMBE	RS			
		ndividual						
		Driver		Citations Issued	Sex			
	_	AMBER CHAMBERS		0				
	INDIVIDUAL			Date of Birth	Race			
╘	JDI							
LNO	DIV	Address N2051 COUNTY ROAD N		Driver License Number	er			
	Z	LYNDON STATION, WI 539	944 , US	STATE: WISCONS	SIN COUNTRY: UN	IITED STATES		
		On Duty	Crash	Safety Equipment				
	Sai	fety Equipment						
		Row	Seat Position	SHOULDER & LA	P BELT			
		01 - FRONT ROW Helmet Use	07 - LEFT	Helmet Compliance				
		Heimet Ose		Heimet Compliance				
		Eye Protection		Tint Compliance				
05	004	Injury Se		Airbag				
O	Ō		PARENT INJURY	NON DEPLOYED		T		
			Ejection Path NOT EJECTED/NOT APF	DI ICABI E		Trapped/Extricated NOT TRAPPED		
		Medical Transport	NOT EJECTED/NOT AFF	EMS Agency Identifie	r	EMS Run #		
		NOT TRANSPORTED						
		Hospital		Date of Death		Time of Death		
		Distracted By Distracted UNKNO	d By Source DWN					
		Distracted By Action UNKNOWN						

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

Crash Date 06/18/2024

		Non Motorist Striking U	Jnit # Lo	cation				
		Prior Action	<u>.</u>					
TIND	INDIVIDUAL	Action						
		Action Other						To/From School
	ı	Drug & Alcohol NO	d Alcohol Use		Suspected Drug Use NO			
		Alcohol Test Given TEST NOT GIVEN	Alc	cohol Test Type			Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN	Dre	ug Test Type		Drug Test Results		
05	004	Drug Type	·					
		Individual Condition APPEARED NORMAL						
		ness IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII			Address			Date of Birth
WITN 01	LOC	BOAN LAMASNEY B) 356-3455		1	135 4TH ST BARABOO, WI 53913	, US		Date of Butt