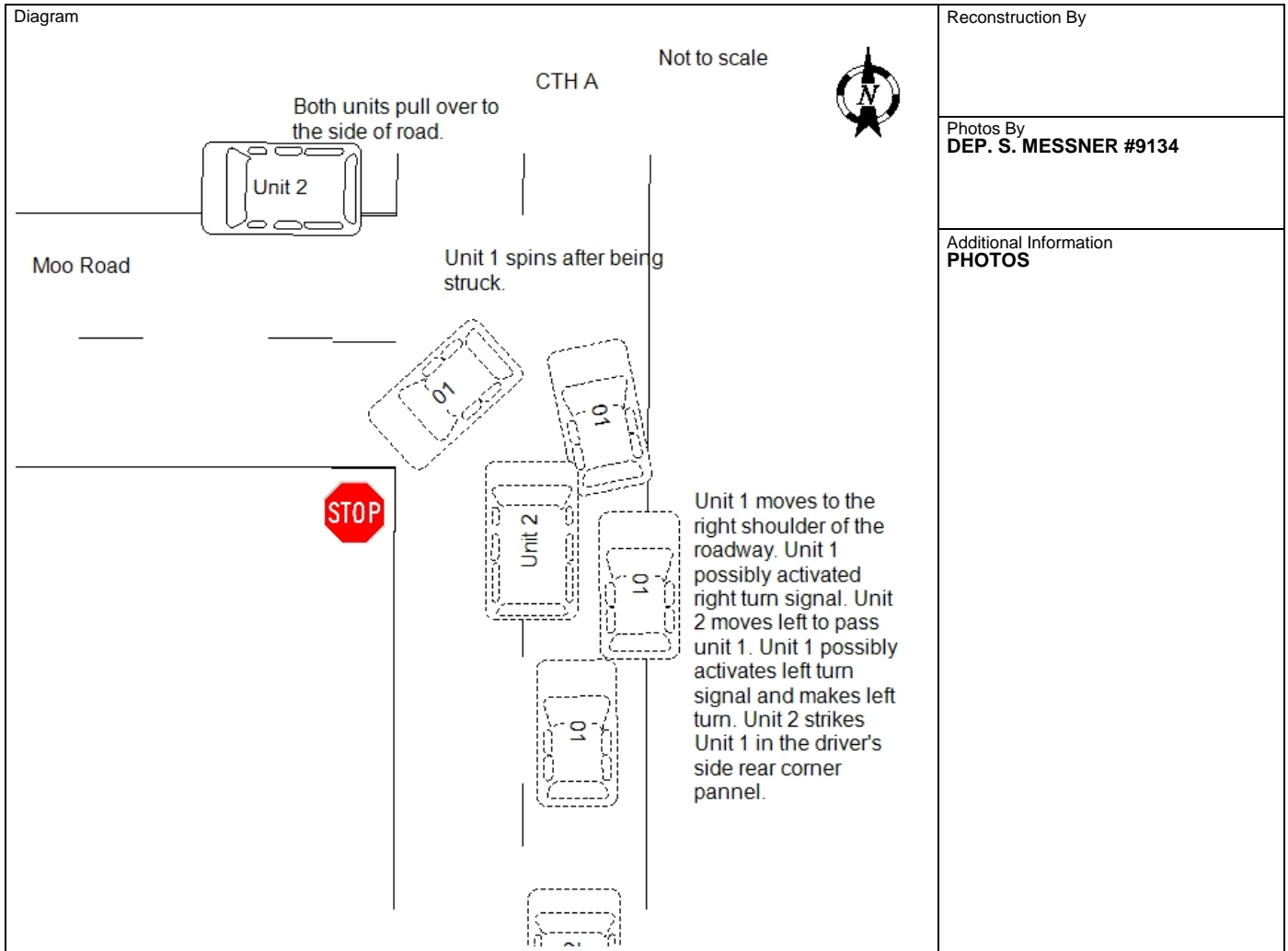


WISCONSIN MOTOR VEHICLE  
CRASH REPORT

6TL0D1PTPQ

Document Number Override		Primary Crash Document #	Agency Crash Number <b>24-06374</b>	Investigating Officer/Deputy <b>DEPUTY S. MESSNER</b>	
Crash Date <b>06/18/2024</b>		Crash Time <b>02:32 PM</b>	Date Arrived <b>06/18/2024</b>	Time Arrived <b>02:40 PM</b>	
Date Notified <b>06/18/2024</b>		Time Notified <b>02:32 PM</b>	Total Units <b>02</b>	Total Injured <b>00</b>	Total Killed <b>00</b>
<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 <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description



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# CHAMB06, 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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WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

Location

ON CTHA NB 208 FT S OF MOON RD IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude <b>43.560748546</b>	Longitude <b>-89.738626419</b>
	X Coordinate <b>278815.34375</b>	Y Coordinate <b>4826732</b>
	Structure Type <b>NO STRUCTURE</b>	

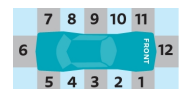
Crash Scene

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>	First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>01 - ANGLE</b>	Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>DRY</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>		
Weather Condition(s) <b>CLEAR</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>YES</b>	Junction Location <b>INTERSECTION</b>	Intersection Type <b>T-INTERSECTION</b>

Unit Summary

UNIT 01	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
	Vehicle Type <b>PASSENGER CAR</b>	Operating As Endorsements			
	Total Occs <b>3</b>	Train/Bus # Recorded	Total # Citations Issued <b>1</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>YES</b>	Direction Of Travel <b>NORTHBOUND</b>	<input type="checkbox"/> <b>Pre CrashTire Mark</b>	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>				

UNIT 01 VEHICLE	<b>Vehicle</b>			
	License Plate Number <b>32212DS</b>	Plate Type <b>DIS - DISABLED</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>4T1BF3EK0AU026381</b>	Make <b>TOYOTA</b>	Year <b>2010</b>	Model <b>CAMRY/SE/L</b>
	Color <b>TAN - TAN</b>	Body Style <b>4D - 4DR</b>		Bus Use
	Initial Contact Point <b>07 - LEFT REAR CORNER</b>	Vehicle Damage <b>06 - REAR, 07 - LEFT REAR CORNER, 08 - LEFT SIDE REAR</b>		
Extent Of Damage <b>MINOR DAMAGE</b>				



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WISCONSIN MOTOR VEHICLE  
CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMENT  
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(608) 356-4895

UNIT	VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>		
		What Driver Was Doing <b>LEFT TURN</b>		Vehicle Factors		
		Driver Prior Action Other		<b>NOT APPLICABLE</b>		
		Driver Actions <b>IMPROPER TURN</b>				
01	01	Owner Name <b>KRISTIN JOHNSON</b>		Owner Address <b>1427 JEFFERSON ST BARABOO, WI 53913 , US</b>		
		<b>Sequence Of Events</b>				
UNIT	VEHICLE	01	Event <b>MOTOR VEH IN TRANSPORT</b>			
		02	Event			
		03	Event			
		04	Event			
UNIT	VEHICLE	<b>Policy Holder</b>				
		Insurance Company <b>MCMILLAN WARNER INSURANCE COMPANY</b>		Individual <b>KRISTIN JOHNSON</b>		
UNIT	INDIVIDUAL	<b>Individual</b>				
		Driver <b>KRISTIN JOHNSON</b>		Citations Issued <b>1</b>	Sex <b>FEMALE</b>	
		Date of Birth		Race <b>WHITE</b>		
		Address <b>1427 JEFFERSON ST BARABOO, WI 53913 , US</b>		Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
01	001	<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>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 #
Hospital		Date of Death		Time of Death		
<b>Distracted By</b>		Distracted By Source <b>UNKNOWN</b>				
Distracted By Action <b>UNKNOWN</b>						

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

<b>UNIT</b>	<b>Non Motorist</b>		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other			To/From School	
<b>01</b>	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>	
	Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type	Alcohol Test Results	
	Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type	Drug Test Results	
	Drug Type				
	Individual Condition <b>APPEARED NORMAL</b>				
	<b>Individual</b>				
<b>UNIT</b>	Passenger <b>EVANGELINE JOHNSON</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>	
			Date of Birth	Race <b>WHITE</b>	
	Address <b>1427 JEFFERSON ST BARABOO, WI 53913 , US</b>		Driver License Number		
<b>01</b>	<b>Safety Equipment</b>		On Duty Crash	Safety Equipment	
	Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b>	<b>SHOULDER &amp; LAP BELT</b>		
	Helmet Use		Helmet Compliance		
	Eye Protection		Tint Compliance		
	<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 #		
Hospital		Date of Death	Time of Death		
<b>Distracted By</b>		Distracted By Source			
Distracted By Action					
<b>Non Motorist</b>		Striking Unit #	Location		

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WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

UNIT	INDIVIDUAL	Prior Action		
		Action		
01	002	Action Other		To/From School
		<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
01	003	Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results
		Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results
01	INDIVIDUAL	Drug Type		
		Individual Condition <b>APPEARED NORMAL</b>		
01	INDIVIDUAL	<b>Individual</b>		
		Passenger <b>REMINGTON STEFFES</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>
01	INDIVIDUAL	Date of Birth		Race <b>WHITE</b>
		Address <b>1427 JEFFERSON ST BARABOO, WI 53913 , US</b>		Driver License Number
01	003	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment
		Row <b>02 - SECOND ROW</b>	Seat Position <b>07 - LEFT</b>	<b>CHILD RESTRAINT SYSTEM - FORWARD FACING</b>
01	003	Helmet Use		Helmet Compliance
		Eye Protection		Tint Compliance
01	003	<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>
01	003	Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier
		Hospital		EMS Run #
01	003	Date of Death		Time of Death
		<b>Distracted By</b> Distracted By Source		
01	003	Distracted By Action		
		<b>Non Motorist</b>	Striking Unit #	Location
01	003	Prior Action		

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WISCONSIN MOTOR VEHICLE CRASH REPORT

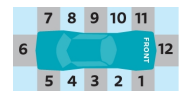
SAUK COUNTY SHERIFFS DEPARTMENT
1300 LANGE COURT
BARABOO, WI 53913
(608) 356-4895

UNIT INDIVIDUAL
Action
Action Other To/From School
Drug & Alcohol Suspected Alcohol Use Suspected Drug Use
Alcohol Test Given Alcohol Test Type Alcohol Test Results
Drug Test Given Drug Test Type Drug Test Results
Drug Type
Individual Condition
Violations
UTC Number Issue To? Statute Number Description

Unit Summary

UNIT 02
Unit Status Vehicle Operating As Classification Unit Type
Vehicle Type Operating As Endorsements
Total Occs Train/Bus # Recorded Total # Citations Issued Total Trailers Total HazMat Types
Insurance? Direction Of Travel Pre Crash Tire Mark Speed Limit Total Lanes
Most Harmful Event: Collision With Special Function Emergency Motor Vehicle Use
Traffic Way Traffic Control Traffic Control Inoperative/Missing
Surface Type Road Curvature Road Grade
Truck Bus or HazMat

UNIT 02 VEHICLE
Vehicle
License Plate Number Plate Type St Country of Issuance
Vehicle Identification Number Make Year Model
Color Body Style Bus Use
Initial Contact Point Vehicle Damage
Extent Of Damage



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# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>	
	What Driver Was Doing <b>OVERTAKE LEFT</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>IMPROPER OVERTAKING / PASSING LEFT</b>			
02	Owner Name <b>AMBER CHAMBERS</b>		Owner Address <b>N2051 COUNTY ROAD N LYNDON STATION, WI 53944 , US</b>	
	<b>Sequence Of Events</b>			
01 02 03 04	Event <b>MOTOR VEH IN TRANSPORT</b>			
	Event			
	Event			
	Event			
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>ALLSTATE-PROPERTY-&amp;-CASUALTY-INS-CO</b>		Individual <b>AMBER CHAMBERS</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>AMBER CHAMBERS</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>
	Address <b>N2051 COUNTY ROAD N LYNDON STATION, WI 53944 , US</b>		Date of Birth	
	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		Race	
02	<b>Safety Equipment</b>		On Duty Crash	
	Row <b>01 - FRONT ROW</b>		Seat Position <b>07 - LEFT</b>	
	Helmet Use		Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
	Eye Protection		Helmet Compliance	
004	<b>Injury</b>		Airbag	
	Injury Severity <b>NO APPARENT INJURY</b>		<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>	
Hospital		EMS Agency Identifier		
Date of Death		EMS Run #		
Time of Death		Distracted By Source <b>UNKNOWN</b>		
<b>Distracted By</b>		Distracted By Action <b>UNKNOWN</b>		

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# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

<b>UNIT</b>  <b>INDIVIDUAL</b>       <b>02</b> <b>004</b>	<b>Non Motorist</b>	Striking Unit #	Location	
	Prior Action			
	Action			
	Action Other		To/From School	
	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>	
	Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results	
	Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results	
	Drug Type			
	Individual Condition <b>APPEARED NORMAL</b>			
	<b>Witness</b>			
<b>WITN 01</b> <b>ESS</b>	Individual <b>LOGAN LAMASNEY</b> <b>(608) 356-3455</b>	Address <b>135 4TH ST</b> <b>BARABOO, WI 53913 , US</b>	Date of Birth	