

6TL0DKRB20
24-07907

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 24-07907		Investigating Officer/Deputy DEPUTY R. BARNES	
Crash Date 07/19/2024		Crash Time 08:26 PM		Date Arrived		Time Arrived	
Date Notified 07/19/2024		Time Notified 08:26 PM		Total Units 01		Total Injured 00	Total Killed 00
<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 NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type NON-DOMESTICATED ANIMAL W/ NO INJURY				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

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

Location

ON LINN ST/ STH136 WB 0.48 MI E OF RAVEN ACRES DR IN THE TOWN OF BARABOO IN SAUK COUNTY	Latitude 43.479855687	Longitude -89.793850476
	X Coordinate 274053.0625	Y Coordinate 4817896.5
	Structure Type	

Crash Scene

First Harmful Event NON DOMESTICATED ANIMAL (ALIVE)	First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition	
Road Surface Condition(s)	Roadway Factor(s)	
Environment Factor(s)		
Weather Condition(s)		
Animal Type DEER	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control	Special Study

Unit Summary

01 UNIT	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type TRUCK	
	Vehicle Type UTILITY TRUCK/PICKUP TRUCK				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 WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit	Total Lanes	
	Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE)		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way		Traffic Control		Traffic Control Inoperative/Missing	
	Surface Type		Road Curvature		Road Grade	

NO

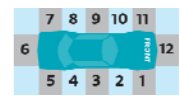
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		Truck Bus or HazMat	
01	UNIT	Vehicle	
		License Plate Number TM5943	Plate Type LTK - LIGHT TRUCK
		Vehicle Identification Number 1C6RR7TTXHS663790	Make RAM
		Color GRY - GRAY	Body Style PK - PICKUP
		Initial Contact Point 11 - LEFT FRONT CORNER	Vehicle Damage 01 - RIGHT FRONT CORNER, 09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT
		Extent Of Damage FUNCTIONAL DAMAGE	
		Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR
		What Driver Was Doing	Vehicle Factors
		Driver Prior Action Other	
		Driver Actions NO CONTRIBUTING ACTION	
Owner Name	Owner Address		
01	UNIT	Policy Holder	
		Insurance Company AMERICAN-FAMILY-INS-CO	Individual MELLISA MCPHERSON
		Individual	
01	UNIT	Driver MELLISA MCPHERSON	Citations Issued 0
			Sex FEMALE
			Race WHITE
		Address 900 FURNACE ST LA VALLE, WI 53941 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES
01	UNIT	Safety Equipment	
		On Duty Crash	Safety Equipment SHOULDER & LAP BELT
		Row	Seat Position
		Helmet Use	Helmet Compliance
		Eye Protection	Tint Compliance
		Injury	Injury Severity NO APPARENT INJURY
			Airbag
Ejected	Ejection Path	Trapped/Extricated	
Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #	
Hospital	Date of Death	Time of Death	



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UNIT	Distracted By		Distracted By Source		
	Distracted By Action				
	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				
01	001	Individual Condition			
		APPEARED NORMAL			