WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| 08/30/2024 06:47 PM 08/30/2024 07:24 PM Date Notified D8/30/2024 Time Notified O6:47 PM Total Units O1 Total Injured O1 Total Killed O1 On Emergency On Eme | Document Number Override | Primary Crash [| Jocument # | Agency 24-096 | Crash Number 86 | DEPUTY D | Officer/Deput D. HORN | ty | |
|--|------------------------------------|---|-----------------|----------------------|---------------------------|-----------|--------------------------|-----------------|--|
| 06:47 PM 01 01 00 On Emergency Hit and Run Lane Closure Work Zone Trailer or Towed Reporting Threshold Government Property Active School Zone NO School Bus Related NO Tags Crash Type DT4000 (STANDARD CRASH) Amended Secondary Crash Diagram Reconstruction By HIGHWAY 58 / 6TH STREET IRONTON Additional Information NONE | Crash Date 08/30/2024 | | 06:47 PM | | | | 07:24 PM | | |
| Government Property Active School Zone Reportable Crash Type DT4000 (STANDARD CRASH) Reconstruction By Reconstruction By Reconstruction By Reconstruction By Redditional Information NONE Reconstruction By | Date Notified 08/30/2024 | | | | its | | | lled | |
| Reportable DT4000 (STANDARD CRASH) Additional Information NONE | On Emergency | Hit and Run | Lane Closu | ıre | Work Zone | Trailer | or Towed | | |
| Reconstruction By HIGHWAY 58 / 6TH STREET IRONTON Additional Information NONE Amended Crash Crash Crash Additional Information | | Active Sc | hool Zone | | Bus Related | Tags | | | |
| Photos By HIGHWAY 58 / 6TH STREET IRONTON Additional Information NONE | <u> </u> | | NDARD CRASH | 1) | | Amend | ed | Secondary Crash | |
| HIGHWAY 58 / 6TH STREET IRONTON Additional Information NONE | escription | L | | | | | | <u>'</u> | |
| | | >> ∩ | Y 58 / 6TH STRI | EET IRC | ONTON | ——– না | Photos By Additional In | · | |
| | A DEER JUM | TRAVELING WEST PED IN FRONT OF). UNIT 1 SUSTAINI | UNIT 1 AND ST | TRUCK | T'S | | | | |

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

1 of 6

Crash Date **08/30/2024**Crash Time **08:47 PM**

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| LO | cation | | | | | | | | |
|--|--|---|--|---|---|--|---|---|--------------------------|
| | STH58 SB | | | | Latitude | | | Longitud | de |
| | 39 FT W | | | | 43.54090 | 19656 | | -90.146 | |
| | 6TH ST | | | , | | | | | |
| | THE TOWN OF IRONTO | ON | | | X Coordin | | | Y Coord | |
| | SAUK COUNTY | | | | 245789.6 | 509375 | | 482569 | 95.5 |
| | | | | | Structure Type NO STRUCTURE | | | | |
| Cra | sh Scene | | | | | | | | |
| | t Harmful Event | | | | First Harm | nful Event I | ocation | | |
| | N DOMESTICATED AN | IIMAL (ALIVE) | | | First Harmful Event Location ON ROADWAY | | | | |
| | nner of Collision | | | | | | | | |
| | | HICLE IN TRANSPORT | | | Light Condition DAYLIGHT | | | | |
| | ad Surface Condition(s) | INCLE IN TRANSPORT | | | Roadway Factor(s) | | | | |
| | ` ' | | | | Roadway | Factor(s) | | | |
| DR | Υ | | | | | | | | |
| Fn | vironment Factor(s) | | | | - | | | | |
| | , , | | | | NONE | | | | |
| NO | NONE Weather Condition(s) | | | | | | | | |
| We | | | | | | | | | |
| | EAR | | | | | | | | |
| | | | | | | | | | |
| Ani | mal Type | | | Relation T | o Trafficwa | ıy | | | |
| DE | ER | | | TRAFFIC | CWAY - O | N ROAD | I ROAD | | |
| Cra | sh Classification - Location | | | Crash Cla | ssification - | Jurisdiction | | | |
| PU | BLIC PROPERTY | | | NO SPECIAL JURISDICTION | | | | | |
| Trib | oal Land | | | Access Co | ontrol | | | Special Study | |
| | | | | | NO CON | ITROL | | | |
| Within Interchange Area Junction Location | | | | ntersectio | n Type | | | | |
| - I | | | | | INTERSECTION | | | | |
| | it Summary == | NON CONCINCI | | 1017 | | | | | |
| UII | it Sullilliary 💳 | | | | | | | | |
| | | | Vehicle Opera | ting As Cl | laccification | | Unit Typo | | |
| Uni | t Status | | Vehicle Opera | ting As Cl | lassification | 1 | Unit Type | DII E | |
| Uni IN | t Status TRANSIT | | Vehicle Opera | ting As Cl | lassification | l | AUTOMO | | monto |
| Uni IN | t Status TRANSIT nicle Type | | - | ting As Cl | lassification | 1 | | | ments |
| Uni IN Ver PA | t Status TRANSIT nicle Type SSENGER CAR | | D CLASS | | | | AUTOMO Operating A | s Endorser | |
| Uni IN Ver PA Tota | t Status TRANSIT nicle Type | Train/Bus # Recorded | D CLASS Total # Citation | | | Total Trai | AUTOMO Operating A | s Endorser | ments Mat Types |
| Uni IN Ver PA Tota | t Status TRANSIT nicle Type SSENGER CAR al Occs | | D CLASS | | | Total Trai | AUTOMO Operating A | Total Haz | Mat Types |
| Uni IN Ver PA Tota 3 | t Status TRANSIT nicle Type SSENGER CAR al Occs urance? | Train/Bus # Recorded Direction Of Travel | Total # Citation | | ı | Total Trai | AUTOMO Operating A | s Endorser | Mat Types |
| Ver PA | t Status TRANSIT nicle Type SSENGER CAR al Occs urance? | | Total # Citation 0 Pre Cr | ns Issued | ı | Total Trai | AUTOMO Operating A | Total Haz | Mat Types |
| Uni IN Ver PA Tota 3 Insu | t Status TRANSIT nicle Type SSENGER CAR al Occs urance? | Direction Of Travel WESTBOUND | Total # Citation 0 Pre Cr M Special Function | ns Issued rashTire ark on | | Total Trai 0 Speed Lir | AUTOMO Operating A lers mit | Total Haz 0 Total Land 2 Motor Vehi | Mat Types es |
| Uni IN Ver PA Tota 3 Insu YE | t Status TRANSIT nicle Type SSENGER CAR al Occs urance? S | Direction Of Travel WESTBOUND With | Total # Citation 0 | ns Issued rashTire ark on | | Total Trai 0 Speed Lir | AUTOMO Operating A lers | Total Haz 0 Total Land 2 Motor Vehi | Mat Types es |
| Uni IN Ver PA Tot: 3 Insi YE Mo: | t Status TRANSIT nicle Type SSENGER CAR al Occs urance? S st Harmful Event: Collision V | Direction Of Travel WESTBOUND With | Total # Citation 0 Pre Cr M Special Function | ns Issued ashTire ark on L FUNC | | Total Trai 0 Speed Lir | AUTOMO Operating A lers mit Emergency NOT APP | Total Haz 0 Total Lan 2 Motor Vehi | Mat Types es |
| Uni IN Ver PA Tota 3 Insu YE Mos NO Tra | t Status TRANSIT sicle Type SSENGER CAR al Occs urance? S st Harmful Event: Collision V | Direction Of Travel WESTBOUND With | Total # Citation 0 Pre Cr M Special Function NO SPECIA | ashTire ark on L FUNC | | Total Trai 0 Speed Lir | AUTOMO Operating A lers mit Emergency NOT APP | Total Haz 0 Total Lan 2 Motor Vehi | es icle Use |
| Uni IN Ver PA Tota 3 Insu YE Mos Tra TW | t Status TRANSIT nicle Type SSENGER CAR al Occs urance? S st Harmful Event: Collision V N DOMESTICATED AN | Direction Of Travel WESTBOUND With | Total # Citation 0 Pre Cr M Special Function NO SPECIA Traffic Control | ns Issued ashTire ark on L FUNC | | Total Trai 0 Speed Lir | AUTOMO Operating A lers mit Emergency NOT APP Traffic Cont | Total Haz 0 Total Land 2 Motor Vehi LICABLE | es icle Use |
| Uni IN Ver PA Tot: 3 Insi YE Mos NC Tra TW | t Status TRANSIT nicle Type SSENGER CAR al Occs urance? S st Harmful Event: Collision V N DOMESTICATED AN ffic Way 'O-WAY, NOT DIVIDED face Type | Direction Of Travel WESTBOUND With IIMAL (ALIVE) | Total # Citation 0 Pre Cr M Special Function NO SPECIA Traffic Control NO CONTRO Road Curvatur | ns Issued ashTire ark on L FUNC | | Total Trai 0 Speed Lir | AUTOMO Operating A lers mit Emergency NOT APP Traffic Cont NO | Total Haz 0 Total Land 2 Motor Vehi LICABLE | es icle Use |
| Uni IN Ver PA Tot: 3 Inst YE Mo: NO Tra TW Sur BL | t Status TRANSIT nicle Type SSENGER CAR al Occs urance? S st Harmful Event: Collision V N DOMESTICATED AN ffic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS | Direction Of Travel WESTBOUND With IIMAL (ALIVE) | Total # Citation 0 Pre Cr M Special Function NO SPECIA Traffic Control NO CONTRO | ns Issued ashTire ark on L FUNC | | Total Trai 0 Speed Lir | AUTOMO Operating A lers mit Emergency NOT APP Traffic Cont NO Road Grade | Total Haz 0 Total Land 2 Motor Vehi LICABLE | es icle Use |
| Uni IN Ver PA Tot 3 Insu YE Mos NO Tra TW Sur BL | t Status TRANSIT nicle Type SSENGER CAR al Occs urance? S st Harmful Event: Collision V N DOMESTICATED AN ffic Way 'O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS ck Bus or HazMat | Direction Of Travel WESTBOUND With IIMAL (ALIVE) | Total # Citation 0 Pre Cr M Special Function NO SPECIA Traffic Control NO CONTRO Road Curvatur | ns Issued ashTire ark on L FUNC | | Total Trai 0 Speed Lir | AUTOMO Operating A lers mit Emergency NOT APP Traffic Cont NO Road Grade | Total Haz 0 Total Land 2 Motor Vehi LICABLE | es icle Use |
| Uni IN Ver PA Tot: 3 Inst YE Mo: NO Tra TW Sur BL | t Status TRANSIT nicle Type SSENGER CAR al Occs urance? S st Harmful Event: Collision V N DOMESTICATED AN ffic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS ck Bus or HazMat | Direction Of Travel WESTBOUND With IIMAL (ALIVE) | Total # Citation 0 Pre Cr M Special Function NO SPECIA Traffic Control NO CONTRO Road Curvatur | ns Issued ashTire ark on L FUNC | | Total Trai 0 Speed Lir | AUTOMO Operating A lers mit Emergency NOT APP Traffic Cont NO Road Grade | Total Haz 0 Total Land 2 Motor Vehi LICABLE | es icle Use |
| Uni IN Ver PA Tot 3 Insu YE Mos NO Tra TW Sur BL | t Status TRANSIT nicle Type SSENGER CAR al Occs urance? S st Harmful Event: Collision W N DOMESTICATED AN ffic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS ck Bus or HazMat | Direction Of Travel WESTBOUND With IIMAL (ALIVE) | Total # Citation 0 Pre Cr M Special Function NO SPECIA Traffic Control NO CONTRO Road Curvatur STRAIGHT | ns Issued ashTire ark on L FUNC | | Total Trai 0 Speed Lin 55 | AUTOMO Operating A lers mit Emergency NOT APP Traffic Cont NO Road Grade UPHILL | Total Haz 0 Total Land 2 Motor Vehi LICABLE rol Inoperat | es icle Use |
| Uni IN Ver PA Tot 3 Insu YE Mos NO Tra TW Sur BL | t Status TRANSIT nicle Type SSENGER CAR al Occs urance? S st Harmful Event: Collision V N DOMESTICATED AN ffic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS ck Bus or HazMat Vehicle License Plate Number | Direction Of Travel WESTBOUND With IIMAL (ALIVE) | Total # Citation 0 Pre Cr M Special Function NO SPECIA Traffic Control NO CONTRO Road Curvatur STRAIGHT Plate Type | rashTire ark on L FUNC | ETION | Total Trai 0 Speed Lin 55 | AUTOMO Operating A lers mit Emergency NOT APP Traffic Cont NO Road Grade UPHILL Country of Is | Total Haz 0 Total Land 2 Motor Vehi LICABLE rol Inoperat | es icle Use |
| Uni IN Ver PA Tot: 3 Insu YE Mo: NO Tra TW Surr BL | t Status TRANSIT nicle Type SSENGER CAR al Occs urance? S st Harmful Event: Collision W N DOMESTICATED AN ffic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS ck Bus or HazMat | Direction Of Travel WESTBOUND With IIMAL (ALIVE) | Total # Citation 0 Pre Cr M Special Function NO SPECIA Traffic Control NO CONTRO Road Curvatur STRAIGHT | rashTire ark on L FUNC | ETION | Total Trai 0 Speed Lin 55 | AUTOMO Operating A lers mit Emergency NOT APP Traffic Cont NO Road Grade UPHILL | Total Haz 0 Total Land 2 Motor Vehi LICABLE rol Inoperat | es icle Use |
| Uni IN Ver PA Tot: 3 Insu YE Mo: NC Tra TW Sur BL Tru NC | t Status TRANSIT nicle Type SSENGER CAR al Occs urance? S st Harmful Event: Collision V N DOMESTICATED AN ffic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS ck Bus or HazMat Vehicle License Plate Number | Direction Of Travel WESTBOUND With IIIMAL (ALIVE) | Total # Citation 0 Pre Cr M Special Function NO SPECIA Traffic Control NO CONTRO Road Curvatur STRAIGHT Plate Type | rashTire ark on L FUNC | ETION | Total Trai 0 Speed Lin 55 | AUTOMO Operating A lers mit Emergency NOT APP Traffic Cont NO Road Grade UPHILL Country of Is | Total Haz 0 Total Land 2 Motor Vehi LICABLE rol Inoperat | es icle Use |
| Uni IN Ver PA Tott 3 Inst YE Mos NO Tra TW Sur BL | t Status TRANSIT nicle Type SSENGER CAR al Occs urance? S st Harmful Event: Collision V N DOMESTICATED AN ffic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS ck Bus or HazMat Vehicle License Plate Number ABG7522 | Direction Of Travel WESTBOUND With IIIMAL (ALIVE) | Total # Citation 0 Pre Cr M Special Function NO SPECIA Traffic Control NO CONTRO Road Curvatur STRAIGHT Plate Type AUT - AUTO | rashTire ark on L FUNC | ETION | Total Trai 0 Speed Lin 55 St WI | AUTOMO Operating A lers mit Emergency NOT APP Traffic Cont NO Road Grade UPHILL Country of Is UNITED S | Total Haz 0 Total Land 2 Motor Vehi LICABLE rol Inoperat | es icle Use |
| Uni IN Ver PA Tot: 3 Insu YE Mo: NC Tra TW Sur BL Tru NC | t Status TRANSIT nicle Type SSENGER CAR al Occs urance? S st Harmful Event: Collision V N DOMESTICATED AN ffic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS ck Bus or HazMat Vehicle License Plate Number ABG7522 Vehicle Identification Num | Direction Of Travel WESTBOUND With IIIMAL (ALIVE) | Total # Citation 0 Pre Cr M Special Function NO SPECIA Traffic Control NO CONTRO Road Curvatur STRAIGHT Plate Type AUT - AUTO Make | rashTire ark on L FUNC | ETION | Total Trai 0 Speed Lin 55 | AUTOMO Operating A lers Emergency NOT APP Traffic Cont NO Road Grade UPHILL Country of Is UNITED ST | Total Haz 0 Total Land 2 Motor Vehi LICABLE rol Inoperat | es icle Use |
| Uni IN Ver PA Tot: 3 Insu YE Mo: NC Tra TW Sur BL Tru NC | t Status TRANSIT nicle Type SSENGER CAR al Occs urance? S st Harmful Event: Collision V N DOMESTICATED AN ffic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS ck Bus or HazMat Vehicle License Plate Number ABG7522 Vehicle Identification Nun 2T3RFREV6HW66374 | Direction Of Travel WESTBOUND With IIIMAL (ALIVE) | Total # Citation 0 Pre Cr M Special Function NO SPECIA Traffic Control NO CONTRO Road Curvatur STRAIGHT Plate Type AUT - AUTO Make TOYOTA | rashTire ark on L FUNC OL re | ETION | Total Trai 0 Speed Lir 55 St WI Year 2017 | AUTOMO Operating A lers Emergency NOT APP Traffic Cont NO Road Grade UPHILL Country of Is UNITED ST Model RAV4 | Total Haz 0 Total Land 2 Motor Vehi LICABLE rol Inoperat | es icle Use |
| Uni IN Ver PA Tot: 3 Insu YE Mo: NC Tra TW Sur BL Tru NC | t Status TRANSIT nicle Type SSENGER CAR al Occs urance? S st Harmful Event: Collision V N DOMESTICATED AN ffic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS ck Bus or HazMat Vehicle License Plate Number ABG7522 Vehicle Identification Num 2T3RFREV6HW66374 Color | Direction Of Travel WESTBOUND With IIIMAL (ALIVE) | Total # Citation 0 Pre Cr M Special Function NO SPECIA Traffic Control NO CONTRO Road Curvatur STRAIGHT Plate Type AUT - AUTO Make TOYOTA Body Style | rashTire ark on L FUNC | ETION | Total Trai 0 Speed Lir 55 St WI Year 2017 | AUTOMO Operating A lers Emergency NOT APP Traffic Cont NO Road Grade UPHILL Country of Is UNITED ST Model RAV4 | Total Haz 0 Total Land 2 Motor Vehi LICABLE rol Inoperat | es icle Use tive/Missing |
| Uni IN Ver PA Tot: 3 Instruction NO Trans TW NO | t Status TRANSIT sicle Type SSENGER CAR al Occs urance? S st Harmful Event: Collision V N DOMESTICATED AN ffic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS ck Bus or HazMat Vehicle License Plate Number ABG7522 Vehicle Identification Num 2T3RFREV6HW66374 Color DBL - BLUE, DARK | Direction Of Travel WESTBOUND With IIIMAL (ALIVE) | Total # Citation 0 Pre Cr M Special Function NO SPECIA Traffic Control NO CONTRO Road Curvatur STRAIGHT Plate Type AUT - AUTO Make TOYOTA Body Style UT - SPOR* | rashTire ark on L FUNC | ETION | Total Trai 0 Speed Lir 55 St WI Year 2017 | AUTOMO Operating A lers Emergency NOT APP Traffic Cont NO Road Grade UPHILL Country of Is UNITED ST Model RAV4 | Total Haz 0 Total Land 2 Motor Vehi LICABLE rol Inoperat | es icle Use tive/Missing |
| Uni IN Ver PA Tot 3 Insu YE Moo NO Tra TW Sur BL Tru NO | t Status TRANSIT sicle Type SSENGER CAR al Occs urance? S st Harmful Event: Collision V N DOMESTICATED AN ffic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS ck Bus or HazMat Vehicle License Plate Number ABG7522 Vehicle Identification Num 2T3RFREV6HW66374 Color DBL - BLUE, DARK Initial Contact Point 13 - TOP | Direction Of Travel WESTBOUND With IIIMAL (ALIVE) | Total # Citation 0 Pre Cr M Special Function NO SPECIA Traffic Control NO CONTRO Road Curvatur STRAIGHT Plate Type AUT - AUTO Make TOYOTA Body Style UT - SPOR | rashTire ark on L FUNC | ETION | Total Trai 0 Speed Lir 55 St WI Year 2017 | AUTOMO Operating A lers Emergency NOT APP Traffic Cont NO Road Grade UPHILL Country of Is UNITED ST Model RAV4 | Total Haz 0 Total Land 2 Motor Vehi LICABLE rol Inoperat | es icle Use tive/Missing |
| Uni IN Ver PA Tot 3 Inst YE Mo: NO Tra TW Sur BL Tru NO | t Status TRANSIT sicle Type SSENGER CAR al Occs urance? S st Harmful Event: Collision V N DOMESTICATED AN ffic Way 'O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS ck Bus or HazMat) Vehicle License Plate Number ABG7522 Vehicle Identification Nun 2T3RFREV6HW66374 Color DBL - BLUE, DARK Initial Contact Point 13 - TOP Extent Of Damage | Direction Of Travel WESTBOUND With IIIMAL (ALIVE) S) | Total # Citation 0 Pre Cr M Special Function NO SPECIA Traffic Control NO CONTRO Road Curvatur STRAIGHT Plate Type AUT - AUTO Make TOYOTA Body Style UT - SPOR* | rashTire ark on L FUNC | ETION | Total Trai 0 Speed Lir 55 St WI Year 2017 | AUTOMO Operating A lers Emergency NOT APP Traffic Cont NO Road Grade UPHILL Country of Is UNITED ST Model RAV4 | Total Haz 0 Total Land 2 Motor Vehi LICABLE rol Inoperat | es icle Use tive/Missing |
| Uni IN Vet PA Tot 3 Insu YE Moo NO Tra TW Sur BL Tru NO | t Status TRANSIT sicle Type SSENGER CAR al Occs urance? S st Harmful Event: Collision V N DOMESTICATED AN ffic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS ck Bus or HazMat Vehicle License Plate Number ABG7522 Vehicle Identification Num 2T3RFREV6HW66374 Color DBL - BLUE, DARK Initial Contact Point 13 - TOP | Direction Of Travel WESTBOUND With IIIMAL (ALIVE) S) | Total # Citation 0 Pre Cr M Special Function NO SPECIA Traffic Control NO CONTRO Road Curvatur STRAIGHT Plate Type AUT - AUTO Make TOYOTA Body Style UT - SPOR | rashTire ark on L FUNC | ETION | Total Trai 0 Speed Lir 55 St WI Year 2017 | AUTOMO Operating A lers Emergency NOT APP Traffic Cont NO Road Grade UPHILL Country of Is UNITED ST Model RAV4 | Total Haz 0 Total Land 2 Motor Vehi LICABLE rol Inoperat | es icle Use tive/Missing |

Wisconsin Motor Vehicle Crash Form DT4000

is report does not include any CJIS data. 2 of 6

Crash Time 06:47 PM

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | | Towed Due To Damage TOWED DUE TO DISABL | ING DAMAGE | Vehicle Removed By SHIELDS TOWING | | | | | | |
|-----|------------|---|---------------------------------------|--------------------------------------|----------------|--------------------|--|--|--|--|
| | | What Driver Was Doing | into Damage | Vehicle Factors | | | | | | |
| | | GOING STRAIGHT | | | | | | | | |
| | | Driver Prior Action Other | | NOT APPLICABLE | | | | | | |
| | | Driver Actions | | | | | | | | |
| L | 쁘 | NO CONTRIBUTING ACT | ION | | | | | | | |
| ş | ₽ | | | | | | | | | |
| > | VEHICLE | | | | | | | | | |
| | | | | | | | | | | |
| | | Owner Name REBECCA SCHINE | KER | Owner Address 1830 HUNTINGTO | N PARK DR # 22 | 215 | | | | |
| 2 | 2 | | | REEDSBURG, WI | 53959 , US | | | | | |
| | | | | | | | | | | |
| | : | Sequence Of Events | | | | | | | | |
| | 2 | S Event NON DOMESTICATED ANIMAL (ALIVE) | | | | | | | | |
| | 02 | Event | | | | | | | | |
| | 03 | First Control of the | | | | | | | | |
| | | Const | | | | | | | | |
| | 9 | | | | | | | | | |
| ⊨ | - 1 | Policy Holder | | | | | | | | |
| F | | Insurance Company STATE-FARM-MUTUAL-A | AUTOMORII F-INS-CO | Individual REBECCA SCHINKER | | | | | | |
| | | Individual | 4010HIODILL-II40-00 | REDECCA SCHINKER | | | | | | |
| | | Driver | | Citations Issued | Sex | | | | | |
| | ۲ | STEVEN STETTLE | R | 0 MALE | | | | | | |
| | INDIVIDUAL | | | Date of Birth Race WHITE | | | | | | |
| FIN | ⋛ | Address 1270 MAIN ST | | Driver License Number | | | | | | |
| | Ĭ | PLAIN, WI 53577 , US | | | | | | | | |
| | | | | | | | | | | |
| | Sat | On Duty | y Crash | Safety Equipment | | | | | | |
| | | Row | Seat Position | SHOULDER & LAP | BELT | | | | | |
| | | 01 - FRONT ROW | 07 - LEFT | | | | | | | |
| | | Helmet Use | | Helmet Compliance | | | | | | |
| | | Eye Protection | | Tint Compliance | | | | | | |
| | | Laive C | averity. | Airbon | | | | | | |
| 2 | 90 | Injury S SUSPE | ECTED MINOR INJURY | Airbag NON DEPLOYED | | | | | | |
| | | Ejected | Ejection Path | | | Trapped/Extricated | | | | |
| | | NOT EJECTED | NOT EJECTED/NOT AP | | | NOT TRAPPED | | | | |
| | | Medical Transport NOT TRANSPORTED | | EMS Agency Identifier | | EMS Run # | | | | |
| | | Hospital | | Date of Death | | Time of Death | | | | |
| | | - District | ad Du Cauras | | | | | | | |
| | | Distracted By NOT A | ed By Source APPLICABLE (NOT DISTR | ACTED) | | | | | | |
| | | Distracted By Action NOT DISTRACTED | | | | | | | | |
| 1 | | | | | | | | | | |

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data. $3 \quad \text{of} \quad 6$

Crash Date 08/30/2024
Crash Time 06:47 PM

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | | | | | | | | ` , |
|------|------------|-----------------------------------|----------------------------------|-------------------|-----------------------|-------------------|-----------------------|----------------|
| | | Non Motorist | Striking Unit # | Location | | | | |
| | | Prior Action | | | | | | |
| | | Action | | | | | | |
| | A. | | | | | | | |
| FIND | INDIVIDUAL | | | | | | | |
| 5 | \geq | | | | | | | |
| | = | | | | | | | |
| | | Action Other | | | | | | To/From School |
| | | | Suspected Alcohol U | lee | Suspected Drug Use | | | |
| | L | Drug & Alcohol | NO | | NO | | | |
| | | Alcohol Test Given TEST NOT GIVEN | | Alcohol Test Type | 1 | | Alcohol Test Results | |
| | | Drug Test Given TEST NOT GIVEN | | Drug Test Type | | Drug Test Results | | |
| 2 | 100 | Drug Type | | | | | | |
| | 0 | | | | | | | |
| | | Individual Condition | | | | | | |
| | | APPEARED NORM | AL | | | | | |
| | - 1 | Individual | | | Citations Issued | Low | | |
| | ب | Passenger REBECCA S | CHINKER | | Citations Issued 0 | Sex FEMALE | | |
| Ļ | INDIVIDUAL | | | | Date of Birth | Race WHITE | | |
| Ę | <u> </u> | Address 1830 HUNTINGTON | PARK DR # 221 | 5 | Driver License Number | | | |
| | Z | REEDSBURG, WI 5 | | | | | | |
| | 0-4 | [| On Duty Crash | | Safety Equipment | | | |
| | Sai | fety Equipment | Seat Po | sition | SHOULDER & LAP | BELT | | |
| | | 01 - FRONT ROW | 09 - RI | | | | | |
| | | Helmet Use | | | Helmet Compliance | | | |
| | | Eye Protection | | | Tint Compliance | | | |
| 2 | 005 | | njury Severity NO APPARENT II | NIIIRY | Airbag NON DEPLOYED | | | |
| | | Ejected | Ejection Pa | th | | | Trapped/Extricated | |
| | | NOT EJECTED Medical Transport | NOT EJE | CTED/NOT APPL | EMS Agency Identifier | | NOT TRAPPED EMS Run # | |
| | | NOT TRANSPORTE | D | | | | Time of Dooth | |
| | | Hospital | | | Date of Death | | Time of Death | |
| | | Distracted By | Distracted By Source | • | | | | |
| | | Distracted By Action | | | | | | |
| | | Non Motorist | Striking Unit # | Location | | | | |
| | | .ion motorist | | | | | | |

Wisconsin Motor Vehicle Crash Form DT4000

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4 of 6

Crash Date 08/30/2024
Crash Time 06:47 PM

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| | | | | | | | | ` ' | |
|----------|------------|----------------------------------|---------------|-------------------|-----------------------|-------------------|----------------------|----------------|--|
| | | Prior Action | | | | | | | |
| | | Action | | | | | | | |
| | | | | | | | | | |
| | A | | | | | | | | |
| - | INDIVIDUAL | | | | | | | | |
| ENS. | ₹ | | | | | | | | |
| - | ₫ | | | | | | | | |
| | Z | | | | | | | | |
| | | | | | | | | | |
| | | Action Other | | | | | | To/From School | |
| | | | | | | | | | |
| | | Suspec | ted Alcohol U | Jse | Suspected Drug Use | | | | |
| | L | Drug & Alcohol NO | | | NO | | | | |
| | | Alcohol Test Given | | Alcohol Test Type |) | | Alcohol Test Results | | |
| | | TEST NOT GIVEN | | Dave Tool Tool | | In | | | |
| | | Drug Test Given TEST NOT GIVEN | | Drug Test Type | | Drug Test Results | 3 | | |
| | ~ | Drug Type | | <u> </u> | | | | | |
| 2 | 002 | Diag Type | | | | | | | |
| | | | | | | | | | |
| | | Individual Condition | | | | | | | |
| | | APPEARED NORMAL | | | | | | | |
| | | | | | | | | | |
| | - 1 | Individual | | | | | | | |
| | | Passenger EMMA DIECKMAN Address | | | Citations Issued | Sex | | | |
| | 7 | | | | 0 | FEMALE Race | | | |
| L | INDIVIDUAL | | | | Date of Birth | WHITE | | | |
| F | ቜ | | | | Driver License Number | | | | |
| > | ₫ | 1830 HUNTINGTON PARI | | | | | | | |
| | = | REEDSBURG, WI 53959 | , 05 | | | | | | |
| | | I On Dut | . Oh | | 0.61.5 | | | | |
| | Saf | On Duty | Crasn | | Safety Equipment | | | | |
| | | Row | Seat Po | eition | CHILD RESTRAINT | SYSTEM - FOR | WARD FACING | | |
| | | 02 - SECOND ROW | 07 - LI | | | | | | |
| | | Helmet Use | | | Helmet Compliance | | | | |
| | | | | | | | | | |
| | | Eye Protection | | | Tint Compliance | | | | |
| | ~ | Injury S | everity | | Airbag | | | | |
| 2 | 003 | Injury NO AF | PARENT I | NJURY | NON DEPLOYED | | | | |
| | | Ejected | Ejection Pa | ath | | | Trapped/Extricated | | |
| | | NOT EJECTED | NOT EJE | CTED/NOT APPL | LICABLE | | NOT TRAPPED | | |
| | | Medical Transport | | | EMS Agency Identifier | | EMS Run # | | |
| | | NOT TRANSPORTED | | | 5 | | T: (D !! | | |
| | | Hospital | | | Date of Death | | Time of Death | | |
| | | Distract | ed By Souro | e | | | | | |
| | | Distracted By | , 222.0 | | | | | | |
| | | Distracted By Action | | | | | | | |
| | | | | | | | | | |
| | | Non Motorist Striking | Unit # | Location | | | | | |
| | | Prior Action | | | | | | | |
| | | I HOI ACION | | | | | | | |

Wisconsin Motor Vehicle Crash Form DT4000 This report does not include any CJIS data. 5 of 6

Crash Date 08/30/2024
Crash Time 06:47 PM

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | | Action | | | | | |
|----------|------------|--------------------------------|-------------------|--------------------|-------------------|----------------------|----------------|
| | Ļ | | | | | | |
| - | υV | | | | | | |
| LIND | VIE | | | | | | |
| | INDIVIDUAL | | | | | | |
| | = | | | | | | |
| | | | | | | | T |
| | | Action Other | | | | | To/From School |
| ł | | Suspected Al | cohol Use | Suspected Drug Use | | | |
| | L | Drug & Alcohol No | | NO | | | |
| | | Alcohol Test Given | Alcohol Test Type | | | Alcohol Test Results | |
| | | TEST NOT GIVEN | | | | | |
| | | Drug Test Given TEST NOT GIVEN | Drug Test Type | | Drug Test Results | 3 | |
| _ | 003 | Drug Type | | | | | |
| 9 | 00 | | | | | | |
| ŀ | | Individual Condition | | | | | |
| | | | | | | | |
| | | APPEARED NORMAL | | | | | |
| | | | | | | | |

SC24-09686