### 6TL0DRXHKM 24-11749

## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

|        | Document Number Override  | Primary Crash Document # |                     | Agency Crash Nur<br>24-11749 |                                     |                           |               | stigating Officer/Deputy PUTY S. ELLICKSON |                    |               |  |
|--------|---|--------------------------|---------------------|------------------------------|-------------------------------------|---------------------------|---------------|--|--------------------|---------------|--|
|        | 0 1 0 1   | 0 1 7                    |                     | Date Arrived                 |                                     |                           |               | ne Arrived                                 |                    |               |  |
| DRXHKM | Crash Date         Crash Time           10/22/2024         07:14 AM                           |                          |                     | Date An                      | rivea                               |                           | TIME          | Arrived                                    |                    |               |  |
| I      | Date Notified   | Time Notified            |                     | Total Ur                     | nits                                |                           | Tota          | l Injured                                  | Total Killed       | i             |  |
| X      | 10/22/2024  | 07:14 AM                 |                     | 01                           |                                     |                           | 00            |  | 00                 |               |  |
|        | On Emergency Hit and Run Lane Clos  |                          | sure Work Zone      |                              |                                     | Trailer or Towed          |               | Reporting Threshold                        |                    |               |  |
| 6TL0   | Government Active School Zone   |                          |                     | School Bus Related NO        |                                     |                           | Tags          | ags  |                    |               |  |
| 9      | Reportable  | TED ANIM                 | ANIMAL W/ NO INJURY |                              |                                     |                           | Amended       |  | Secondary<br>Crash |               |  |
|        | I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report. |                          |                     |                              |                                     |                           |               |  |                    |               |  |
| ì      | ocation   |                          |                     |                              |                                     |                           |               |  |                    |               |  |
| i      | ON STH33 WB   |                          |                     |                              |                                     | Latitude                  |               |  | Longitud           | 10            |  |
|        | 0.39 MI W   |                          |                     |                              |                                     | 43.61969                  | 7715          | -90.154798                                 |                    |               |  |
|        | OF WILKINSON RD   |                          |                     |                              |                                     |                           |               |  |                    |               |  |
|        | IN THE TOWN OF LA VALLE   |                          |                     |                              |                                     | X Coordinate              |               |  |                    | Y Coordinate  |  |
|        | IN SAUK COUNTY  |                          |                     |                              |                                     | 245450.4                  | 184375        |  | 483447             | 2             |  |
|        |   |                          |                     |                              |                                     | Structure                 | Туре          |  |                    |               |  |
|        |   |                          |                     |                              |                                     | NO STR                    | UCTURE        |  |                    |               |  |
|        | Crash Scene   |                          |                     |                              |                                     |                           |               |  |                    |               |  |
| 1      | First Harmful Event   |                          |                     |                              |                                     | First   Isra              | oful Event Le | aatian                                     |                    |               |  |
|        |   | AL (ALD/E)               |                     |                              |                                     |                           | nful Event Lo | ocation                                    |                    |               |  |
|        | NON DOMESTICATED ANIM   | AL (ALIVE)               |                     |                              |                                     | ON ROADWAY                |               |  |                    |               |  |
|        | Manner of Collision   |                          | _                   |                              |                                     | Light Condition           |               |  |                    |               |  |
|        | 00 - NO COLLISION W/VEHIC   | CLE IN TRANSPORT         |                     |                              |                                     |                           |               |  |                    |               |  |
|        | Road Surface Condition(s)   |                          |                     |                              |                                     | Roadway                   | Factor(s)     |  |                    |               |  |
|        |   |                          |                     |                              |                                     |                           |               |  |                    |               |  |
|        | For the second For the selection  |                          |                     |                              |                                     |                           |               |  |                    |               |  |
|        | Environment Factor(s)   |                          |                     |                              |                                     |                           |               |  |                    |               |  |
|        |   |                          |                     |                              |                                     |                           |               |  |                    |               |  |
| ŀ      | Weather Condition(s)  |                          |                     |                              |                                     |                           |               |  |                    |               |  |
|        | Weather Condition(s)  |                          |                     |                              |                                     |                           |               |  |                    |               |  |
|        |   |                          |                     |                              |                                     |                           |               |  |                    |               |  |
| ŀ      | Animal Type   |                          |                     |                              |                                     | Relation To Trafficway    |               |  |                    |               |  |
|        | DEER  |                          |                     |                              | TRAFFICWAY - ON ROAD                |                           |               |  |                    |               |  |
| ŀ      | Crash Classification - Location   |                          |                     |                              | Crash Classification - Jurisdiction |                           |               |  |                    |               |  |
|        |   |                          |                     |                              |                                     | NO SPECIAL JURISDICTION   |               |  |                    |               |  |
| ŀ      | PUBLIC PROPERTY Tribal Land   |                          |                     |                              |                                     |                           |               |  |                    | Special Study |  |
|        | TIDAL CATO  |                          |                     |                              | Access Control Special Study        |                           |               |  |                    |               |  |
| Ĺ      |   |                          |                     |                              |                                     |                           |               |  |                    |               |  |
|        | Unit Summary 💳  |                          |                     |                              |                                     |                           |               |  |                    |               |  |
|        | Unit Status   |                          | Veh                 | icle Opera                   | ating As C                          | lassification             | 1             | Unit Type                                  |                    |               |  |
|        | IN TRANSIT  |                          |                     | D CLASS                      |                                     |                           | AUTOMO        |  | BILE               |               |  |
| _      | Vehicle Type  |                          |                     |                              |                                     | Operating As Endorsements |               |  |                    |               |  |
| 01     | (SPORT) UTILITY VEHICLE   |                          |                     |                              |                                     |                           |               |  |                    |               |  |
|        | Total Occs Train/Bus # Recorded   |                          |                     | Total # Citations Issued     |                                     | Total Trail               |               | lers Total Hazi                            |                    | Mat Types     |  |
|        | 1   |                          | 0                   | 0                            |                                     | 0                         |               | 0  |                    |               |  |
| ŀ      |   | Direction Of Travel      | V.T.                |                              |                                     | 0 11                      |               |  |                    | es            |  |
| ا ہے   | ES WESTBOUND  |                          |                     | Pre CrashTire Mark           |                                     |                           | F             |  |                    |               |  |
| LIND   | Most Harmful Event: Collision With Special Function   |                          |                     |                              |                                     |                           |               | Emergency Motor Vehicle Use                |                    |               |  |
| 5      |   |                          |                     |                              |                                     | TION                      |               | NOT APPLICABLE                             |                    |               |  |
| ļ      | NON DOMESTICATED ANIMAL (ALIVE)   |                          |                     | NO SPECIAL FUNCT             |                                     |                           |               |  |                    |               |  |
|        | Traffic Way   |                          |                     | ffic Contro                  | I                                   |                           |               | Traffic Control Inoperative/Missing        |                    |               |  |
| Į      |   |                          |                     |                              |                                     |                           |               |  |                    |               |  |
|        | Surface Type  |                          |                     | Road Curvature               |                                     |                           |               | Road Grade                                 |                    |               |  |
|        |   |                          |                     |                              |                                     |                           |               |  |                    |               |  |

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|      | Truc                                  | k Bus or HazMat  |                                    |   |                                   |  |  |  |  |
|------|---------------------------------------|--|------------------------------------|---|-----------------------------------|--|--|--|--|
|      | ,                                     | Vehicle  |                                    |   |                                   |  |  |  |  |
| 01   |                                       | License Plate Number 267WCK  | Plate Type AUT - AUTOMOBILE        | St<br>WI  | Country of Issuance UNITED STATES |  |  |  |  |
|      | VEHICLE 01                            | Vehicle Identification Number ZACNJBBBXLPL20550                                | Make<br><b>JEEP</b>                | Year <b>2020</b>                                      | Model RENEGADE                    |  |  |  |  |
|      |                                       | Color<br>BLU - BLUE  | Body Style UT - SPORT UTILITY      | Body Style Bus Use UT - SPORT UTILITY VEHICLE         |                                   |  |  |  |  |
| LINI |                                       | Initial Contact Point 11 - LEFT FRONT CORNER Extent Of Damage DISABLING DAMAGE | Vehicle Damage  11 - LEFT FRONT CO | Vehicle Damage  7 8 9 10 11  6 7 8 9 10 11  5 4 3 2 1 |                                   |  |  |  |  |
|      |                                       | Towed Due To Damage TOWED DUE TO DISABLING DAMAGE                              | Vehicle Removed By                 |   |                                   |  |  |  |  |
|      |                                       | What Driver Was Doing  | Vehicle Factors                    | Vehicle Factors                                       |                                   |  |  |  |  |
|      |                                       | Driver Prior Action Other  |                                    |   |                                   |  |  |  |  |
| NIL  | Driver Actions NO CONTRIBUTING ACTION |  |                                    |   |                                   |  |  |  |  |
| 1    | _                                     | Owner Name   | Owner Address                      |   |                                   |  |  |  |  |
| 01   | 5                                     |  |                                    |   |                                   |  |  |  |  |
| LIND |                                       | Policy Holder Insurance Company  | The state of                       |   |                                   |  |  |  |  |
| 5    |                                       | STATE-FARM-GENERAL-INS-CO  | Individual STEPHANIE WUNS          | СН  |                                   |  |  |  |  |
|      |                                       | Individual Driver  | Citations Issued                   | Sex   |                                   |  |  |  |  |
|      | _                                     | STEPHANIE WUNSCH   | 0                                  | FEMALE  |                                   |  |  |  |  |
| _    | INDIVIDUAL                            | (608) 415-0410   | Date of Birth                      | Race<br>WHITE   |                                   |  |  |  |  |
| LIND |                                       | Address<br>448 8TH ST<br>REEDSBURG, WI 53959 , US                              |                                    | STATE: WISCONSIN COUNTRY: UNITED STATES               |                                   |  |  |  |  |
|      | Sai                                   | On Duty Crash  fety Equipment  | Safety Equipment                   | Safety Equipment                                      |                                   |  |  |  |  |
|      |                                       | Row Seat Position  | SHOULDER & LAP                     | SHOULDER & LAP BELT                                   |                                   |  |  |  |  |
|      | 001                                   | Helmet Use   | Helmet Compliance                  |   |                                   |  |  |  |  |
|      |                                       | Eye Protection   | Tint Compliance                    |   |                                   |  |  |  |  |
| 5    |                                       | 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                     |  |  |  |  |

Crash Date 10/22/2024 Crash Time 07:14 AM

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Crash Date 10/22/2024

Crash Time 07:14 AM

| Distracted By Source |            |                                   |                 |                   |                       |  |                      |                |  |
|----------------------|------------|-----------------------------------|-----------------|-------------------|-----------------------|--|----------------------|----------------|--|
|                      |            | Distracted By Action              |                 |                   |                       |  |                      |                |  |
|                      |            | Non Motorist                      | Striking Unit # | Location          |                       |  |                      |                |  |
|                      |            | Prior Action                      |                 |                   |                       |  |                      |                |  |
|                      |            | Action                            |                 |                   |                       |  |                      |                |  |
|                      | NAL        |                                   |                 |                   |                       |  |                      |                |  |
| LNO                  | INDIVIDUAL |                                   |                 |                   |                       |  |                      |                |  |
|                      | ND         |                                   |                 |                   |                       |  |                      |                |  |
|                      |            |                                   |                 |                   |                       |  |                      | I              |  |
|                      |            | Action Other                      |                 |                   |                       |  |                      | To/From School |  |
|                      | ı          | Drug & Alcohol 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     |  |                      |                |  |
| 10                   | 001        | Drug Type                         |                 |                   |                       |  |                      |                |  |
|                      |            | Individual Condition              |                 |                   |                       |  |                      |                |  |
|                      |            | APPEARED NORM                     | MAL             |                   |                       |  |                      |                |  |