

6TL0DJJ8XV  
24-12480

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

6TL0DJJ8XV

|  |   |   |  |  |  |
|--|---|---|--|--|--|
| Document Number Override                       |   | Primary Crash Document #                                  | Agency Crash Number<br><b>24-12480</b> | Investigating Officer/Deputy<br><b>DEPUTY J. TROTH</b> |  |
| Crash Date<br><b>11/08/2024</b>                |   | Crash Time<br><b>06:34 PM</b>                             | Date Arrived                           | Time Arrived   |  |
| Date Notified<br><b>11/08/2024</b>             |   | Time Notified<br><b>06:36 PM</b>                          | Total Units<br><b>01</b>               | Total Injured<br><b>00</b>                             | Total Killed<br><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<br><b>NO</b>                           |  | Tags   |  |
| <input checked="" type="checkbox"/> Reportable |   | Crash Type<br><b>NON-DOMESTICATED ANIMAL W/ NO INJURY</b> |  | <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

|   |                                     |                                   |
|---|-------------------------------------|-----------------------------------|
| <b>ON STH23 WB<br/>1133 FT N<br/>OF SHADY LANE RD<br/>IN THE TOWN OF EXCELSIOR<br/>IN SAUK COUNTY</b> | Latitude<br><b>43.550687237</b>     | Longitude<br><b>-89.842198473</b> |
|   | X Coordinate<br><b>270411.78125</b> | Y Coordinate<br><b>4825895.5</b>  |
|   | Structure Type                      |                                   |

### Crash Scene

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

### Unit Summary

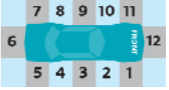
|                    |  |   |  |  |                                |
|--------------------|--|---|--|--|--------------------------------|
| <b>UNIT<br/>01</b> | Unit Status<br><b>IN TRANSIT</b>   | Vehicle Operating As Classification<br><b>D CLASS</b> | Unit Type<br><b>AUTOMOBILE</b>                 |  |                                |
|                    | Vehicle Type<br><b>(SPORT) UTILITY VEHICLE</b>                               |   |  | Operating As Endorsements                            |                                |
|                    | Total Occs<br><b>1</b>   | Train/Bus # Recorded                                  | Total # Citations Issued<br><b>0</b>           | Total Trailers<br><b>0</b>                           | Total HazMat Types<br><b>0</b> |
|                    | Insurance?<br><b>YES</b>   | Direction Of Travel<br><b>WESTBOUND</b>               | <input type="checkbox"/> Pre Crash Tire Mark   | Speed Limit  | Total Lanes                    |
|                    | Most Harmful Event: Collision With<br><b>NON DOMESTICATED ANIMAL (ALIVE)</b> |   | Special Function<br><b>NO SPECIAL FUNCTION</b> | Emergency Motor Vehicle Use<br><b>NOT APPLICABLE</b> |                                |
|                    | Traffic Way  |   | Traffic Control                                | Traffic Control Inoperative/Missing                  |                                |
|                    | Surface Type   |   | Road Curvature                                 | Road Grade   |                                |

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|   |               |   |  |  |   |   |
|---|---------------|---|--|--|---|---|
|   |               | Truck Bus or HazMat                                     |  |  |   |   |
| 01  | UNIT          | VEHICLE   | <b>Vehicle</b>   |  |   |   |
|   |               |   | License Plate Number<br><b>AHZ4449</b>                         | Plate Type<br><b>AUT</b>   | St<br><b>WI</b>   | Country of Issuance<br><b>UNITED STATES</b> |
|   |               |   | Vehicle Identification Number<br><b>5GAKRDED5CJ183476</b>      | Make<br><b>BUIC</b>  | Year<br><b>2012</b>   | Model<br><b>ENCLAVE</b>                     |
|   |               |   | Color<br><b>BRO - BROWN</b>                                    | Body Style<br><b>UT - SPORT UTILITY VEHICLE</b>  | Bus Use   |   |
|   |               |   | Initial Contact Point<br><b>11 - LEFT FRONT CORNER</b>         | Vehicle Damage<br><b>01 - RIGHT FRONT CORNER, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT</b> |  |   |
|   |               |   | Extent Of Damage<br><b>DISABLING DAMAGE</b>                    |  |   |   |
|   |               |   | Towed Due To Damage<br><b>TOWED DUE TO DISABLING DAMAGE</b>    | Vehicle Removed By<br><b>STEVES AUTO SERVICE</b>   |   |   |
|   |               |   | What Driver Was Doing  | Vehicle Factors  |   |   |
|   |               |   | Driver Prior Action Other                                      |  |   |   |
|   |               |   | 01   | UNIT   | VEHICLE   | Driver Actions<br><b>123</b>                |
| Owner Name                                  | Owner Address |   |  |  |   |   |
| <b>Policy Holder</b>                        |               |   |  |  |   |   |
| 01  | UNIT          | Insurance Company<br><b>PROGRESSIVE-CASUALTY-INS-CO</b> | INDIVIDUAL<br><b>VICTORIA STABNOW</b>                          |  |   |   |
|   |               | <b>Individual</b>                                       |  |  |   |   |
| 01  | UNIT          | INDIVIDUAL  | DRIVER<br><b>VICTORIA STABNOW</b>                              | Citations Issued<br><b>0</b>   | Sex<br><b>FEMALE</b>  |   |
|   |               |   |  | Date of Birth  | Race<br><b>WHITE</b>  |   |
|   |               |   | Address<br><b>312 FRANKLIN ST<br/>REEDSBURG, WI 53959 , US</b> | Driver License Number<br><b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>                                    |   |   |
| 01  | UNIT          | 001   | <b>Safety Equipment</b>  |  | On Duty Crash   | Safety Equipment                            |
|   |               |   | Row  | Seat Position  | <b>SHOULDER &amp; LAP BELT</b>  |   |
|   |               |   | Helmet Use   |  | Helmet Compliance   |   |
|   |               |   | Eye Protection   |  | Tint Compliance   |   |
|   |               |   | <b>Injury</b>  | Injury Severity<br><b>NO APPARENT INJURY</b>   | Airbag  |   |
| Ejected                                     |               | Ejection Path   |  | Trapped/Extricated   |   |   |
| Medical Transport<br><b>NOT TRANSPORTED</b> |               | EMS Agency Identifier                                   |  | EMS Run #  |   |   |
| Hospital                                    |               | Date of Death   |  | Time of Death  |   |   |

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|  |                      |   |  |                                 |                   |
|--|----------------------|---|--|---------------------------------|-------------------|
| <b>UNIT</b>                                    | <b>Distracted By</b> | Distracted By Source                        |  |                                 |                   |
|  |                      | Distracted By Action                        |  |                                 |                   |
|  | <b>Non Motorist</b>  | Striking Unit #                             | Location                                 |                                 |                   |
|  |                      | Prior Action                                |  |                                 |                   |
|  | <b>INDIVIDUAL</b>    | Action                                      |  |                                 |                   |
|  |                      | Action Other                                |  | To/From School                  |                   |
|  |                      | <b>Drug &amp; Alcohol</b>                   | Suspected Alcohol Use<br><b>NO</b>       | Suspected Drug Use<br><b>NO</b> |                   |
|  |                      | Alcohol Test Given<br><b>TEST NOT GIVEN</b> | Alcohol Test Type                        | Alcohol Test Results            |                   |
|  | <b>01</b>            | <b>001</b>                                  | Drug Test Given<br><b>TEST NOT GIVEN</b> | Drug Test Type                  | Drug Test Results |
|  |                      |   | Drug Type                                |                                 |                   |
| Individual Condition<br><b>APPEARED NORMAL</b> |                      |   |  |                                 |                   |