

6TL0CX0QDB  
24-12498

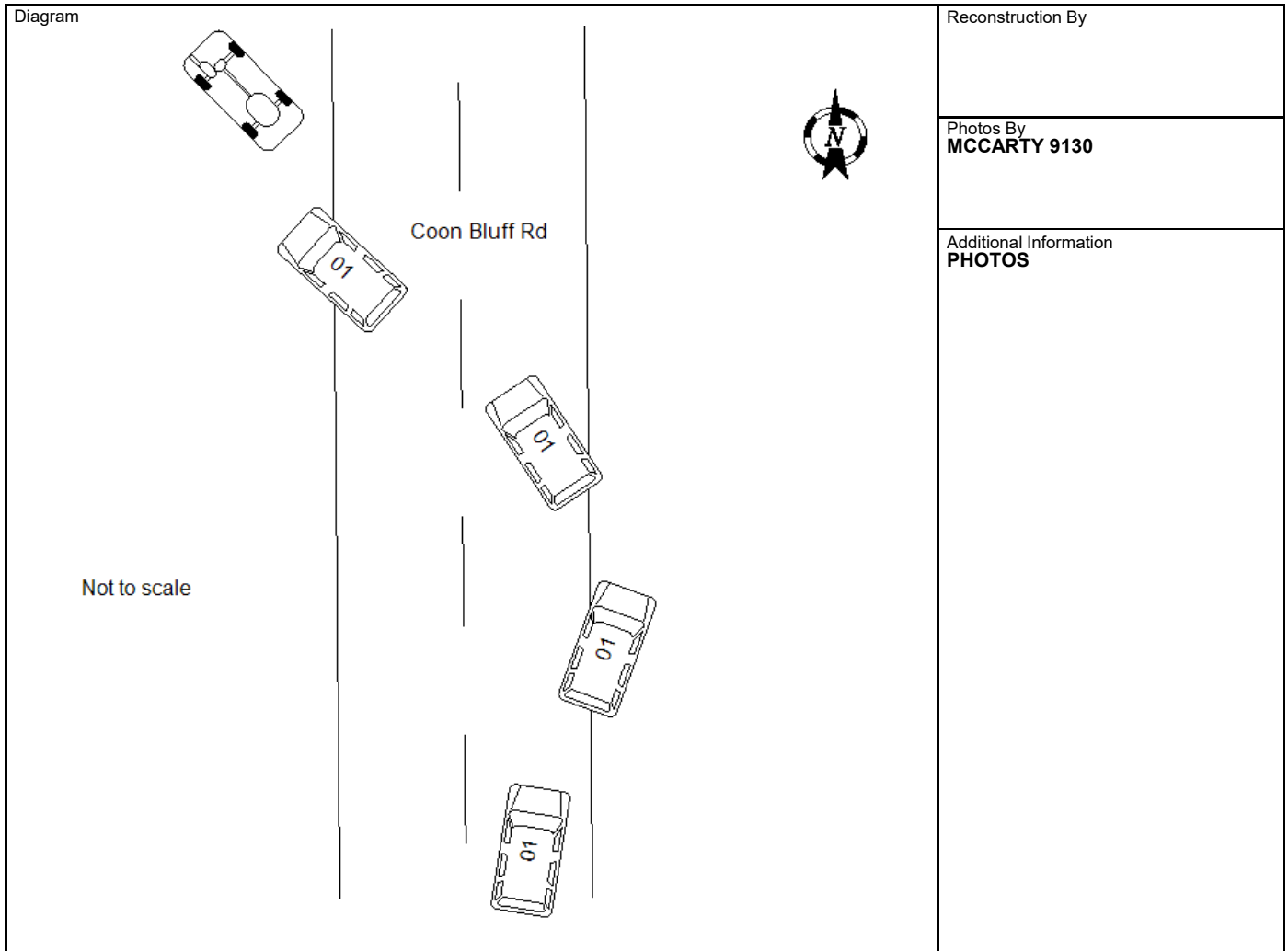
WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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 <b>24-12498</b>	Investigating Officer/Deputy <b>DEPUTY K. MCCARTY</b>	
Crash Date <b>11/09/2024</b>		Crash Time <b>99:99</b>	Date Arrived <b>11/09/2024</b>	Time Arrived <b>03:56 AM</b>	
Date Notified <b>11/09/2024</b>		Time Notified <b>03:46 AM</b>	Total Units <b>01</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.

UNIT 1 WAS TRAVELING NB ON COON BLUFF RD JUST SOUTH OF SOUTH AVE. UNIT 1 DRIFTED OUTSIDE OF THE NB LANE AND PARTIALLY INTO THE NB DITCH. UNIT 1 OVER CORRECT, CROSSED CENTERLINE, CROSSED SB LANE, AND ENTERED THE SB DITCH. UNIT 1 ROLLED ONTO ITS PASSENGER SIDE WHERE IT CAME TO A REST IN THE SB DITCH. UNIT 1 WAS UNOCC UPON LE ARRIVAL. CRAIGS REMOVED VEHICLE DUE TO DISABLING DAMAGE. FOLLOW-UP INVESTIGATION IDENTIFIED ALEXANDRA PHILLIPS AS THE DRIVER. THE CRASH WAS NOT REPORTED TO LE AS THE OPERATOR WAS SCARED SHE WOULD BE IN TROUBLE. OPERATOR CITED FOR FAILURE TO REPORT ACCIDENT TO LAW ENFORCEMENT. CITE ISSUED AND EXPLAINED.

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## Location

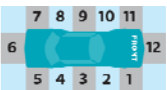
ON COON BLUFF RD 0.37 MI S OF SOUTH AVE IN THE TOWN OF DELLONA IN SAUK COUNTY	Latitude <b>43.571055902</b>	Longitude <b>-89.867131374</b>
	X Coordinate <b>268475.71875</b>	Y Coordinate <b>4828227</b>
	Structure Type	

## Crash Scene

First Harmful Event <b>OVERTURN/ROLLOVER</b>	First Harmful Event Location <b>ROADSIDE</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DARK/UNLIT</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>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN 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>(SPORT) UTILITY VEHICLE</b>	Operating As Endorsements			
	Total Occs <b>2</b>	Train/Bus # Recorded	Total # Citations Issued <b>1</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>NO</b>	Direction Of Travel <b>NORTHBOUND</b>	<input checked="" type="checkbox"/> <b>Pre CrashTire Mark</b>	Speed Limit <b>45</b>	Total Lanes <b>2</b>
	Most Harmful Event: Collision With <b>OVERTURN/ROLLOVER</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>AKZ9072</b>	Plate Type <b>AUT</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>1GNEK13Z42J308485</b>	Make <b>CHEV</b>	Year <b>2002</b>	Model <b>TAHOE</b>
	Color <b>RED - RED</b>	Body Style <b>UT - SPORT UTILITY VEHICLE</b>		Bus Use
	Initial Contact Point <b>12 - FRONT</b>	Vehicle Damage <b>15 - ALL AREAS</b>		
Extent Of Damage <b>DISABLING DAMAGE</b>				

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UNIT VEHICLE	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>CRAIGS TOWING</b>		
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors <b>UNKNOWN</b>		
	Driver Prior Action Other				
	Driver Actions <b>107,116,120</b>				
01 01	Owner Name <b>MATTHEW KNEELAND</b>		Owner Address <b>308 UNION STREET LA VALLE, WI 53941 , US</b>		
	<b>Sequence Of Events</b>				
01 02 03 04	Event <b>RUN OFF ROADWAY RIGHT</b>				
	Event <b>CROSS CENTERLINE</b>				
	Event <b>DITCH</b>				
	Event <b>OVERTURN/ROLLOVER</b>				
UNIT INDIVIDUAL	<b>Individual</b>				
	DRIVER <b>ALEXANDRA PHILLIPS</b>		Citations Issued <b>1</b>	Sex <b>FEMALE</b>	
	Address <b>331 BLY ST # 207 WAUPUN, WI 53963 , US</b>		Date of Birth	Race <b>WHITE</b>	
			Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
<b>Safety Equipment</b>		On Duty Crash			
Row <b>01 - FRONT ROW</b>		Seat Position <b>07 - LEFT</b>		<b>RESTRAINT USE UNKNOWN</b>	
Helmet Use		Helmet Compliance			
Eye Protection		Tint Compliance			
01 001	<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>		
			Airbag <b>NON DEPLOYED</b>		
	Ejected <b>UNKNOWN</b>		Ejection Path <b>UNKNOWN</b>		Trapped/Extricated <b>UNKNOWN</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>					
<b>Non Motorist</b>		Striking Unit #		Location	

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UNIT	INDIVIDUAL	Prior Action			
		Action			
		Action Other		To/From School	
01	001	<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>NOT OBSERVED</b>			
		<b>Individual</b>			
		PASSENGER <b>ANGEL WILK</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>
				Date of Birth	Race <b>WHITE</b>
		Address <b>308 UNION ST LA VALLE, WI 53941 , US</b>		Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
		01	002	<b>Safety Equipment</b>	On Duty Crash
Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b>			<b>RESTRAINT USE UNKNOWN</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>UNKNOWN</b>	Ejection Path <b>UNKNOWN</b>			Trapped/Extricated <b>UNKNOWN</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					
01	002	<b>Non Motorist</b>	Striking Unit #	Location	
		Prior Action			

# WISCONSIN MOTOR VEHICLE CRASH REPORT

<b>UNIT</b>	<b>INDIVIDUAL</b>				
	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>Violations</b>				
	<b>01</b>	<b>002</b>	UTC Number <b>BJ676040</b>	Issue To? <b>001</b>	Statute Number <b>346.70(1)</b>