WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | Document Number Overrid | e Primary Crash I | Primary Crash Document # | | Agency Crash Number Investigating | | | g Officer/Deputy | | |
|------------------|--|--|--------------------------|---------------------|-----------------------------------|-----------------------|--------------------------|--------------------------------|--|--|
| | | | Crash Time 99:99 | | 5 , - | | Y B. BRUNKEN | | | |
| 61 | Crash Date 12/23/2024 | | | | rrived 2024 | Time Arrived 02:11 AM | | | | |
| 9 | Date Notified | Time Notified | | Total U | nits | Total Injured | Total Kille | ed | | |
| 9 | 12/23/2024 | 01:49 AM | | 01 | 1 | 01 | 00 | 1 | | |
| 6TL0D6N06 | On Emergency | Hit and Run | Lane Close | | Work Zone | | or Towed | Reporting Threshold | | |
| 6TI | Government Property | Active Sc | chool Zone | School NO | Bus Related | Tags | | | | |
| | ▼ Reportable | Crash Type DT4000 (STA | NDARD CRASH | l) | | Amendo | ed | Secondary Crash | | |
| ĺ | Description = | | | | | | | | | |
| | Diagram 11/23/2024 - Thom Town of La Valle, S SC24-13971 | npson Road, North o Sauk County, WI | f Dutch Hollow | Road, | b | NA⊅⊳E | Reconstruction Photos By | · | | |
| | | The | | | 24 GOSTIO | | DEPUTÝ MO | CCARTY #9130 | | |
| | | NOT TO SCALE | on R. | | | | PHOTOS, D | ASH CAMERA VIDEO, ERA VIDEO | | |
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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 12/23/2024

Crash Time 99:99

| ON THOMPSON RD 0.31 MIN ACCOUNTY ASSYSPATES 40.138507546 30.13807 | L | _oc | | | | | | | | | |
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| | | Unit IN T Vehi PAS Tota 4 Insur YES Most TRE Trafff BLA Truc NO | Status RANSIT Cle Type SSENGER CAR I Occs Tance? St Harmful Event: Collision EE fic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOU Ik Bus or HazMat Vehicle License Plate Number APN9299 Vehicle Identification Nur 1FAHP34N99W25090 Color | Direction Of Travel NORTHBOUND With S) | Total # Cita 1 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva CURVE R Plate Type AUT Make FORD Body Style | CrashTire Mark action CIAL FUNC TROL ature | 1 | Total Trai 0 Speed Lii 45 St WI Year | AUTOMOI Operating A lers mit Emergency NOT APPI Traffic Cont NO Road Grade DOWNHIL Country of Is UNITED ST Model FOCUS S | Total Haz Total Lar Total Lar Motor Ver LICABLE Total Inopera | zMat Types nes nicle Use |
| Extent Of Damage DISARI ING DAMAGE 12 - FRONT | | Unit IN T Vehi PAS 4 Insur YES Most TREE Truck BLA Truck NO | Status RANSIT cle Type SSENGER CAR I Occs rance? St Harmful Event: Collision EE fic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOU Ik Bus or HazMat Vehicle License Plate Number APN9299 Vehicle Identification Num 1FAHP34N99W25090 Color LBL - BLUE, LIGHT | Direction Of Travel NORTHBOUND With S) | Total # Cita 1 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva CURVE R Plate Type AUT Make FORD Body Style 4D - 4DR | CrashTire Mark Diction EIAL FUNC Trol ROL BATTER BA | 1 | Total Trai 0 Speed Lii 45 St WI Year | AUTOMOI Operating A lers mit Emergency NOT APPI Traffic Cont NO Road Grade DOWNHIL Country of Is UNITED ST Model FOCUS S | Total Haz Total Lar Total Lar Motor Ver LICABLE Total Inopera | zMat Types nes nicle Use E ative/Missing |
| DISABI ING DAMAGE | | Unit IN T Vehin PAS Tota 4 Insur YES Most TREE Trafff TWC Surfa BLA Truc NO | Status RANSIT cle Type SSENGER CAR I Occs rance? St Harmful Event: Collision EE fic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOU Ik Bus or HazMat Vehicle License Plate Number APN9299 Vehicle Identification Num 1FAHP34N99W25090 Color LBL - BLUE, LIGHT Initial Contact Point | Direction Of Travel NORTHBOUND With S) | Total # Cita 1 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva CURVE R Plate Type AUT Make FORD Body Style 4D - 4DR | CrashTire Mark Diction EIAL FUNC Trol ROL BATTER BA | 1 | Total Trai 0 Speed Lii 45 St WI Year | AUTOMOI Operating A lers mit Emergency NOT APPI Traffic Cont NO Road Grade DOWNHIL Country of Is UNITED ST Model FOCUS S | Total Haz Total Lar Total Lar Motor Ver LICABLE Total Inopera | zMat Types nes nicle Use Eative/Missing |
| > DIGADEING DAIMAGE | | Unit IN T Vehin PAS Tota 4 Insur YES Most TREE Trafff TWC Surfa BLA Truc NO | Status RANSIT cle Type SSENGER CAR I Occs rance? St Harmful Event: Collision EE fic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOU ack Bus or HazMat Vehicle License Plate Number APN9299 Vehicle Identification Num 1FAHP34N99W25090 Color LBL - BLUE, LIGHT Initial Contact Point 12 - FRONT | Direction Of Travel NORTHBOUND With S) | Total # Cita 1 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva CURVE R Plate Type AUT Make FORD Body Style 4D - 4DR Vehicle Da | CrashTire Mark notion EIAL FUNCTOR TROL ature IIGHT | 1 | Total Trai 0 Speed Lii 45 St WI Year | AUTOMOI Operating A lers mit Emergency NOT APPI Traffic Cont NO Road Grade DOWNHIL Country of Is UNITED ST Model FOCUS S | Total Haz Total Lar Total Lar Motor Ver LICABLE Total Inopera | zMat Types nes nicle Use ative/Missing 7 8 9 10 11 6 2 2 12 |

6TL0D6N061

24-13971

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 12/23/2024

Crash Time 99:99

| | | Towed Due To Damage | | Ve | nicle Removed By | | | | | |
|-----------|--|-------------------------------------|---------------------|---------------------|---|------------|--------------------|--|--|--|
| | | TOWED DUE TO DISABL | ING DAMAGE | | IIELDS TOWING | | | | | |
| | | What Driver Was Doing | | Ve | nicle Factors | | | | | |
| | | NEGOTIATING CURVE | | | | | | | | |
| | | Driver Prior Action Other | | - NC | T APPLICABLE | | | | | |
| | | | | | | | | | | |
| | | Driver Actions | | | | | | | | |
| | ш | SPEED TOO FAST/COND |) | | | | | | | |
| ⊨ | VEHICLE | | | | | | | | | |
| LNO | Ħ | | | | | | | | | |
| _ | Æ | | | | | | | | | |
| | _ | | | | | | | | | |
| | | Owner Name | | | Owner Address | | | | | |
| | | SCOTT BRUER | | | 78 ME ME LN | | | | | |
| 5 | 01 | | | | REEDSBURG, WI | 53959 , US | | | | |
| | | | | | | | | | | |
| | | Sequence Of Events | | | | | | | | |
| | | Event | | | | | | | | |
| | 01 | DITCH | | | | | | | | |
| | 02 | Event TREE | | | | | | | | |
| | 0 | | | | | | | | | |
| | 03 | Event | | | | | | | | |
| | | Event | | | | | | | | |
| | 04 | LVOIR | | | | | | | | |
| _ | | Policy Holder | | | | | | | | |
| LINO | | Insurance Company | | Ti | INDIVIDUAL | | | | | |
| 5 | | AMERICAN-FAMILY-MUT | TUAL-INS-CO | | SCOTT BRUER | | | | | |
| | | Individual | | | | | | | | |
| | | DRIVER | | Τ, | Citations Issued | Sex | | | | |
| | | BENJAMIN BRUER | | | 1 MALE Date of Birth Race | | | | | |
| | AL | (608) 495-9029 | | | | | | | | |
| _ | INDIVIDUAL | | | [| WHITE | | | | | |
| | ⋝ | Address | | | Driver License Number | | | | | |
| \supset | | 78 ME ME LN | | | OTATE MICCONON COUNTRY UNITED OTATES | | | | | |
| | = | REEDSBURG, WI 53959 | , US | 1 | STATE: WISCONSIN COUNTRY: UNITED STATES | | | | | |
| | | | | | | | | | | |
| | | On Dut | y Crash | ; | Safety Equipment | | | | | |
| | Sai | fety Equipment | | | | | | | | |
| | | Row | Seat Position | SHOULDER & LAP BELT | | | | | | |
| | | 01 - FRONT ROW | 07 - LEFT | | | | | | | |
| | | Helmet Use | | | Helmet Compliance | | | | | |
| | | | | | | | | | | |
| | | Eye Protection | | | Tint Compliance | | | | | |
| | | Injury S | Coverity | | Airbog | | | | | |
| 5 | 00 | In : | PPARENT INJURY | | Airbag DEPLOYED-COMBINATION | | | | | |
| | _ | 1 110 71 | Ejection Path | | DEPLOTED-COMBI | NATION | Trapped/Extricated | | | |
| | Ejected Ejection Path NOT EJECTED NOT EJECTED/NOT AP | | | | ARI F | | NOT TRAPPED | | | |
| | | Medical Transport | | | EMS Agency Identifier | | EMS Run # | | | |
| | | NOT TRANSPORTED | | [" | 5 . igooj idonimor | | | | | |
| | | Hospital | | | Date of Death | | Time of Death | | | |
| | | | | | | | | | | |
| | | Distract Distract | ted By Source | | | | | | | |
| | | Distracted By NOT A | APPLICABLE (NOT DIS | TRACT | ED) | | | | | |
| | | Distracted By Action NOT DISTRACTED | | | | | | | | |
| | | i | | | | | | | | |

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | | <u>_</u> | | | | | | | | |
|------|------------|---|---------------------|-------------|---------------------|--------------------------------------|-------------------|--------------------------------|----------------|--|
| | | Non Motorist | Striking U | nit# | Location | | | | | |
| | | Prior Action | | | | | | | | |
| TINO | INDIVIDUAL | Action | | | | | | | | |
| | | | | | | | | | | |
| | | Action Other | | | | | | | To/From School | |
| | L | Drug & Alcohol | Suspected NO | d Alcohol U | Jse | 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 | | | |
| 2 | 001 | Drug Type | | | | | 1 | | | |
| | | Individual Condition APPEARED NORM | 1AL | | | | | | | |
| | | Individual | | | | | | | | |
| | | PASSENGER | | | | Citations Issued | Sex | | | |
| | | ISAIAH RUDDY | | | | 0 MALE | | | | |
| _ | DUA | | | | | Date of Birth | Race WHITE | | | |
| LIND | INDIVIDUAL | Address 241 3RD ST REEDSBURG, WI 53959 , US | | | | Driver License Numbe STATE: WISCONSI | | ITED STATES | | |
| | Sat | fety Equipment | On Duty C | Crash | | Safety Equipment | | | | |
| | | Row 01 - FRONT ROW | | Seat Po | | SHOULDER & LAP | BELT | | | |
| | | Helmet Use | | • | | Helmet Compliance | | | | |
| | | Eye Protection | | | | Tint Compliance | | | | |
| 2 | 005 | Injury | NO APP | ARENT II | | Airbag DEPLOYED-COMB | BINATION | | | |
| | | Ejected NOT EJECTED | | jection Pa | th CTED/NOT APPI | LICABLE | | Trapped/Extricated NOT TRAPPED | | |
| | | Medical Transport NOT TRANSPORT | ED | | | EMS Agency Identifier | | EMS Run # | | |
| | | Hospital | | | | Date of Death | | Time of Death | | |
| | | Distracted By | Distracted | By Source | 9 | 1 | | 1 | | |
| | | Distracted By Action | | | | | | | | |
| | | Non Motorist | Striking U | nit# | Location | | | | | |

Crash Date 12/23/2024
Crash Time 99:99

6TL0D6N061

24-13971

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | | Prior Action | | | | | | | | | |
|------|------------|-----------------------------------|-------------------------|--------------------|----------------------|-------------------|-------------------|------------------------|----------------|--|--|
| LIND | INDIVIDUAL | Action | | | | | | | | | |
| | | Action Other | | | | | | | To/From School | | |
| | | | Suspected A | Alcohol Use | Suspected | Drug Use | | | | | |
| | L | Orug & Alcohol | NO | | NO | | | | | | |
| | | Alcohol Test Given TEST NOT GIVEN | | Alcohol Tes | t Type | | | Alcohol Test Results | | | |
| | | Drug Test Given TEST NOT GIVEN | | Drug Test T | уре | | Drug Test Results | | | | |
| 01 | 005 | Drug Type | | 1 | | | | | | | |
| | | Individual Condition | | | | | | | | | |
| | | APPEARED NORM | IAL | | | | | | | | |
| | i | ndividual | | | | | | | | | |
| | _ | PASSENGER ARIANNA NOGA | | | Citations Is | ssued | Sex FEMALE | | | | |
| ⊨ | INDIVIDUAL | (608) 415-0946 |) 415-0946 | | | th | Race WHITE | | | | |
| LIND | IDIV | Address 616 MIDWAY DR | 16 MIDWAY DR | | | | | | | | |
| | = | REEDSBURG, WI | | | SIAIE: V | WISCONSIN | COUNTRY: UNI | IED STATES | | | |
| | Saf | ety Equipment | On Duty Cra | ash | Safety Equ | uipment | | | | | |
| | | Row 02 - SECOND ROV | Seat Position 07 - LEFT | | ER & LAP I | BELT | | | | | |
| | | Helmet Use | | | Helmet Co | Helmet Compliance | | | | | |
| | | Eye Protection | | | Tint Comp | Tint Compliance | | | | | |
| 7 | 003 | Injury | Injury Seven | ity RENT INJURY | Airbag DEPLOY | ED-SIDE | | | | | |
| | | Ejected | Eje | ection Path | I | | | Trapped/Extricated | | | |
| | | NOT EJECTED Medical Transport | N | OT EJECTED/NOT | | ncy Identifier | | NOT TRAPPED EMS Run # | | | |
| | | NOT TRANSPORT | ED | | | | | LING INGII # | | | |
| | | Hospital | | | Date of De | eath | | Time of Death | | | |
| | | Distracted By | Distracted E | By Source | | | | | | | |
| | | Distracted By Action | | | | | | | | | |
| | | Non Motorist | Striking Uni | t# Location | | | | | | | |
| | | Prior Action | | | | | | | | | |

Crash Date 12/23/2024 Crash Time 99:99

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | _ | | | | | | | | | | |
|----------|------------|--|-------------|-------------------------|---|--------------------------|-------------------|----------------------|----------------|--|--|
| | | | | | | | | | | | |
| | | Action | | | | | | | | | |
| | | | | | | | | | | | |
| _ | NDIVIDUAL | | | | | | | | | | |
| LNO | JDI | | | | | | | | | | |
| 5 | | | | | | | | | | | |
| | Z | | | | | | | | | | |
| | | | | | | | | | | | |
| | | Action Other | | | | | | | To/From School | | |
| | | l Si | uspected | Alcohol Us | e | Suspected Drug Use | | | | | |
| | L | Drug & Alcohol N | 0 | | | NO | | | | | |
| | | Alcohol Test Given | | | Alcohol Test Type | | | Alcohol Test Results | | | |
| | | TEST NOT GIVEN Drug Test Given | | | Drug Test Type | | Drug Test Results | | | | |
| | | TEST NOT GIVEN | | | 9 | | Brag root recalls | • | | | |
| 7 | 003 | Drug Type | | | | | • | | | | |
| | 0 | | | | | | | | | | |
| | | Individual Condition | | | | | | | | | |
| | | APPEARED NORMA | L | | | | | | | | |
| | | ndividual | | | | | | | | | |
| | | PASSENGER | | | Citations Issued | Sex | | | | | |
| | إـ | MADYSEN HILL (608) 495-5913 | | | 0 FEMALE | | | | | | |
| _ | INDIVIDUAL | (608) 493-3913 | | | | Date of Birth Race WHITE | | | | | |
| LNO | M | Address | | | | Driver License Number | er | | | | |
| – | ND | 536 2ND ST REEDSBURG, WI 53959 , US | | | STATE: WISCONSIN COUNTRY: UNITED STATES | | | | | | |
| | | , | , , , | • | | | | | | | |
| | 0-4 | 0 | n Duty Cr | ash | | Safety Equipment | | | | | |
| | Sai | ety Equipment | | 1 | | | | | | | |
| | | Row 02 - SECOND ROW | | Seat Pos | | SHOULDER & LA | PBELI | | | | |
| | | Helmet Use | 1001 | | | Helmet Compliance | | | | | |
| | | | | | | Tist Countings | | | | | |
| | | Eye Protection | | | | Tint Compliance | | | | | |
| 5 | 004 | Injury | jury Seve | erity | | Airbag | | | | | |
| _ | 0 | Ejected | USPECT | TED MINO ection Path | OR INJURY | DEPLOYED-SIDE | | Trapped/Extricated | | | |
| | | NOT EJECTED | 1 - | | TED/NOT APPL | ICABLE | | NOT TRAPPED | | | |
| | | Medical Transport | _ | | | EMS Agency Identifie | er | EMS Run # | | | |
| | | NOT TRANSPORTEI Hospital | D | | | Date of Death | | Time of Death | | | |
| | | Ποσριταί | | | | Date of Death | | Time of Death | | | |
| | | Distracted By | istracted E | By Source | | | | - | | | |
| | | Distracted By Action | | | | | | | | | |
| | | | | | | | | | | | |
| | | Non Motorist | triking Uni | it# | Location | | | | | | |
| | | Prior Action | | | | | | | | | |
| | | | | | | | | | | | |

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 12/23/2024

Crash Time 99:99

| UNIT | INDIVIDUAL | Action | | | | | | |
|------|------------|-----------------------------------|-------------------------|------------------------------------|-----------------------------|-------------------|----------------------|----------------|
| | 2 | Action Other | | | | | | To/From School |
| | L | Drug & Alcohol | Suspected Alco | hol Use | 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 | 004 | Drug Type | | | | | | |
| | | Individual Condition | | | | | | |
| | | APPEARED NORM | /IAL | | | | | |
| | 1 | Violations | | | | | | |
| | 01 | UTC Number BG110932 | Issue To? 001 | Statute Number 343.44(1)(a) | Description OPERATING WHILE | SUSPENDED | | |