#### 6TL09B7DC0

19-15334

## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash D	-		Agency Crash Number 19-15334			Investigating Officer/Deputy DEPUTY A. MEEKER			
ည	Crash Date 12/14/2019	Crash Time 09:02 PM			Date Arrived		Tim	Time Arrived			
09B7D	Date Notified 12/14/2019	Time Notified 09:04 PM			Total Units <b>01</b>		Tota <b>00</b>		Injured Total Killed <b>00</b>		
160-	On Emergency	lit and Run	Lane Closu	ure Work Zo				Trailer or To		Reporting Threshold	j i
eTL)	Government Active School Zone			School Bus Related NO			Tag	Tags			
	<b>✓</b> Reportable	Crash Type NON-DOMESTICATED ANIMAL W/ NO INJUR			RYAmended			Secondar Crash	ry		
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
Ī	Location										
F	ON STH33 EB					Latitude Longitude					
	913 FT S					43.537253757 X Coordinate				0369795	
	OF LA VALLE RD								Y Coord	oordinate	
	IN THE TOWN OF REEDSB	URG				255156.484375				4824941	
	IN SAUK COUNTY					Structure Type				1021011	
						Structure	Туре				
L	Overale Cooper										
,	Crash Scene					T					
	First Harmful Event					First Harmful Event Location					
	NON DOMESTICATED ANII				ON ROADWAY						
	Manner of Collision					Light Condition					
	00 - NO COLLISION W/VEH	ICLE IN TRANSI	PORT								
	Road Surface Condition(s)					Roadway	Factor(s)				
ŀ	Environment Factor(s)										
	Weather Condition(s)										
	Animal Type					Relation To Trafficway					
	DEER  Coast Classification Leasting				TRAFFICWAY - ON ROAD  Crash Classification - Jurisdiction						
	Crash Classification - Location	UII				NO SPECIAL JURISDIC					
-	PUBLIC PROPERTY Tribal Land					Access Co		NODICTION		Special Study	
	ar Edito					7.00033 00:11101				opecial Study	
L											
	Unit Summary		111	iala O-	lina ^ ^	loogifi ''		In			
				Vehicle Operating As Classification				Unit Type			
	IN TRANSIT D CLA				CLASS			AUTOMOBILE Operating As Endorseme			
01	Vehicle Type  (SPORT) LITH ITY VEHICLE							Operating I	As Endorser	ments	
	(SPORT) UTILITY VEHICLE  Total Occs   Train/Bus # Recorded   Total # Citations Issued					Total Trail		ailers Total HazM		Mat Tunas	
	1 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 -			Total # Citations Issued						iviat Types	
-	02	Direction Of Trave	0				0 Canad Liv	0			
	Insurance? Direction Of Travel YES EASTBOUND			Pre CrashTire		Speed Lim		it Total Lanes		లం	
LINO	YES EASTBOUND  Most Harmful Event: Collision With			Special Function					Emergency Motor Vehicle Use		
5	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCTION					OT APPLICABLE		
-	Traffic Way										
	Traine way			Traffic Control					Traffic Control Inoperative/Missing		
-	Surface Type			d Curvatur	e			Road Grade			
	71 -			Trodu Odivatuis							

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	Truc	ck Bus or HazMat							
	,	Vehicle							
		License Plate Number 608ACC	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES				
5	VEHICLE 01	Vehicle Identification Number 2FMPK4J91KBC00279	Make FORD	Year <b>2019</b>	Model EDGE				
		Color WHI - WHITE	Body Style UT - SPORT UTILITY VE	HICLE	Bus Use				
LINI		Initial Contact Point 03 - RIGHT SIDE MIDDLE Extent Of Damage MINOR DAMAGE	Vehicle Damage  02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE						
		Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR						
		What Driver Was Doing	Vehicle Factors						
		Driver Prior Action Other							
TINO	VEHICLE	Driver Actions NO CONTRIBUTING ACTION							
_		Owner Name	Owner Address						
0	2								
UNIT	I	Policy Holder Insurance Company Individual							
5		WISCONSIN-AUTOMOBILE-INS-PLAN	GARY RULAND						
	INDIVIDUAL	Individual Driver	Citations Issued		Sex				
		GARY JOSEPH RULAND	0		MALE				
_		(608) 393-2888	Date of Birth		Race WHITE				
TINO		Address 66 ME ME LN REEDSBURG, WI 53959 , US	Driver License Number  STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sai	On Duty Crash  fety Equipment	Safety Equipment						
	001	Row Seat Position	SHOULDER & LAP BELT						
		Helmet Use	Helmet Compliance						
		Eye Protection	Tint Compliance						
6		Injury Severity NO APPARENT INJURY	Airbag						
		Ejected Ejection Path			Trapped/Extricated				
		Medical Transport NOT TRANSPORTED	EMS Agency Identifier	IS Agency Identifier EMS Run #					
		Hospital	Date of Death	Time of Death					

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		Distracted By	Distracted By Source					
		Distracted By Action						
	,	Non Motorist	Striking Unit #	Location				
		Prior Action						
		Action						
_	UAL							
UNIT	INDIVIDUAL							
	IND							
		Action Other						To/From School
							TO/TTOIN SCHOOL	
	L	Drug & Alcohol NO			Suspected Drug Use NO			
		Alcohol Test Given Alcohol Test Ty TEST NOT GIVEN					Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
5	001	Drug Type						
		Individual Condition						
		APPEARED NOR	MAL					