WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Override	Primary Crash I	Document #	Agency 19-150	Crash Number 046		gating Officer/Deputy JTY K. MUELLER		
Crash Date 12/07/2019			Time Arrived 02:03 PM					
Date Notified 12/07/2019	Time Notified 02:03 PM			nits	Total Injured Total Kille 00 00		led	
On Emergency	Hit and Run	Lane Clos	ure	Work Zone	☐ Trailer o	r Towed	Reporting Threshold	
Government Property	Active Sc	chool Zone	School NO	Bus Related	Tags			
Reportable	Crash Type DT4000 (STA	NDARD CRASH	H)		Amende	d	Secondary Crash	
Description Diagram						Reconstruction		
					,	Additional Info	ormation	
							_	
I, a sworn law enforce						IO VANINIDOI IZZ	D. IT IC NOT BELIEVES .	
THIS TIME THAT THE LOSS OF THE TIME OF THE INCIDENT	OF CARGO IS KNOWN	BY UNIT 2. UNIT 2	'S OWNER	R HAS MULTIPLE TRUCK	KS AND WASN'T SU	RE EXACTLY	WHO WAS DRIVING AT	

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Crash Date 12/07/2019

Crash Time 01:55 PM

		STH33 WB B MI W				Latitude 43.47702	2439		Longitud -89.649	
	OF CTHX WB IN THE TOWN OF GREENFIELD IN SAUK COUNTY					X Coordin. 285679.3			Y Coordi 481720	
	IN S	SAUK COUNTY				Structure Type				
	Cra	sh Scene								
		Harmful Event				First Harm	nful Event Lo	cation		
	CAF	RGO/EQUIPMENT LOS	SS OR SHIFT			ON ROADWAY				
	Mani	ner of Collision				Light Condition				
					DAYLIG					
	Road	d Surface Condition(s)				Roadway	Factor(s)			
	DRY	Y								
	Envi	ronment Factor(s)								
	МОИ	NE				NONE				
	Wea	ther Condition(s)								
	CLE	EAR								
	Anim	nal Type					o Trafficway			
	Cras	sh Classification - Location					ssification -			
	PUE	PUBLIC PROPERTY			NO SPECIAL JURISDICTION					
	Tribal Land				Access Control Special Study NO CONTROL			Special Study		
	With	Within Interchange Area Junction Location Intersection								
					INTERSECTION					
	Unit	t Summary 💳								
	•	. Garrina y								
		Status		Vehicle Ope	•	lassification		Unit Type		
	Unit IN T	Status RANSIT		Vehicle Ope	•	lassification	l	AUTOMOI		
01	Unit IN T Vehi	Status			•	lassification				nents
	Unit IN T Vehi	Status RANSIT cle Type	Train/Bus # Recorded				Total Traile	AUTOMOI Operating A		
	Unit IN T Vehi	Status RANSIT cle Type SSENGER CAR	Train/Bus # Recorded	D CLASS				AUTOMOI Operating A	s Endorsen	
	Unit IN T Vehice PAS Total 1	Status RANSIT cle Type SSENGER CAR	Direction Of Travel	D CLASS Total # Cita 0			Total Traile	AUTOMOI Operating A	s Endorsen	Mat Types
04	Unit IN T Vehic PAS Total 1 Insur YES	Status RANSIT cle Type SSENGER CAR I Occs rance?	Direction Of Travel WESTBOUND	Total # Cita 0 Pre	tions Issued CrashTire Mark		Total Traile	AUTOMOI Operating A	Total Hazl Total Lane 2	Mat Types
04	Unit IN T Vehic PAS Total 1 Insur YES	Status RANSIT cle Type SSENGER CAR I Occs rance?	Direction Of Travel WESTBOUND With	D CLASS Total # Cita 0	tions Issued CrashTire Mark action)	Total Traile 0 Speed Lim	AUTOMOI Operating A	Total Hazi Total Lane 2 Motor Vehice	Mat Types
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5	Unit IN T Vehic PAS Total 1 Insur YES Most CAF Traff	Status RANSIT cle Type SSENGER CAR I Occs rance? St Harmful Event: Collision N RGO/EQUIPMENT LOS fic Way D-WAY, NOT DIVIDED	Direction Of Travel WESTBOUND With SS OR SHIFT	Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont	CrashTire Mark Inction IIAL FUNC)	Total Traile 0 Speed Lim	AUTOMOI Operating A ers it Emergency NOT APPI Traffic Contr NO	Total Hazl 0 Total Lane 2 Motor Vehic LICABLE rol Inoperat	Mat Types es cle Use
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04	Unit IN T Vehin PAS Total 1 Insur YES Most CAF TWO Surfa BLA Truck	Status RANSIT cle Type SSENGER CAR I Occs rance? St Harmful Event: Collision N RGO/EQUIPMENT LOS fic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOUS ik Bus or HazMat	Direction Of Travel WESTBOUND With SS OR SHIFT	Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva CURVE R	CrashTire Mark action HAL FUNC rol ROL ature)	Total Traile 0 Speed Lim 55	AUTOMOI Operating A ers it Emergency NOT APPI Traffic Conti NO Road Grade LEVEL	Total Hazi 0 Total Lane 2 Motor Vehi LICABLE rol Inoperat	Mat Types es cle Use
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6	Unit IN T Vehin PAS Total 1 Insur YES Most CAF TWO Surfa BLA Truck	Status RANSIT cle Type SSENGER CAR I Occs rance? St Harmful Event: Collision Narrow RGO/EQUIPMENT LOS cic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOUS k Bus or HazMat Vehicle License Plate Number 424ZZK	Direction Of Travel WESTBOUND With SS OR SHIFT S)	Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva CURVE R Plate Type AUT - AU	CrashTire Mark action HAL FUNC rol ROL ature	ETION	Total Traile 0 Speed Lim 55	AUTOMOI Operating A ers it Emergency NOT APPI Traffic Contr NO Road Grade LEVEL Country of Is UNITED ST	Total Hazi Total Lane 2 Motor Vehi LICABLE rol Inoperat	Mat Types es cle Use
	Unit IN T Vehin PAS Total 1 Insur YES Most CAF TWO Surfa BLA Truck	Status RANSIT cle Type SSENGER CAR I Occs rance? St Harmful Event: Collision N RGO/EQUIPMENT LOS fic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOUS ik Bus or HazMat Vehicle License Plate Number	Direction Of Travel WESTBOUND With SS OR SHIFT S)	Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva CURVE R	CrashTire Mark action EIAL FUNC TROL ature IGHT	ETION	Total Traile 0 Speed Lim 55	AUTOMOI Operating A ers it Emergency NOT APPI Traffic Conti NO Road Grade LEVEL	Total Hazi Total Lane 2 Motor Vehi LICABLE rol Inoperat	Mat Types es cle Use
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	Unit IN T Vehic PAS Total 1 Insury YES Most CAR Truff TWO Surfa BLA Truck	Status RANSIT cle Type SSENGER CAR I Occs rance? S t Harmful Event: Collision Nace Type ACKTOP (BITUMINOUS & Bus or HazMat Vehicle License Plate Number 424ZZK Vehicle Identification Nur 2T1BURHE7EC04753	Direction Of Travel WESTBOUND With SS OR SHIFT S)	Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva CURVE R Plate Type AUT - AU Make TOYOTA Body Style SD - SED	CrashTire Mark Inction IAL FUNC ITOI ITOI ITOMOBIL	ETION	Total Traile 0 Speed Lim 55 St WI Year	AUTOMOI Operating A Pris Emergency NOT APPI Traffic Contr NO Road Grade LEVEL Country of Is UNITED ST Model COROLLA	Total Hazi Total Lane 2 Motor Vehi LICABLE rol Inoperat	Mat Types es cle Use
ONI 001	Unit IN T Vehic PAS Total 1 Insur YES Most CAF TWO Surfa BLA Truck NO	Status RANSIT cle Type SSENGER CAR I Occs rance? St Harmful Event: Collision Naco/EQUIPMENT LOS fic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOUS) k Bus or HazMat Vehicle License Plate Number 424ZZK Vehicle Identification Nur 2T1BURHE7EC04753 Color BLK - BLACK Initial Contact Point	Direction Of Travel WESTBOUND With SS OR SHIFT S)	Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva CURVE R Plate Type AUT - AU Make TOYOTA Body Style	CrashTire Mark Inction IAL FUNC ITOI ITOI ITOMOBIL	ETION	Total Traile 0 Speed Lim 55 St WI Year	AUTOMOI Operating A it Emergency NOT APPI Traffic Conti NO Road Grade LEVEL Country of Is UNITED ST Model COROLLA Bus Use	Total Hazi Total Lane 2 Motor Vehi LICABLE rol Inoperat	Mat Types es cle Use
01 ONI 01	Unit IN T Vehic PAS Total 1 Insur YES Most CAF TWO Surfa BLA Truck NO	Status RANSIT cle Type SSENGER CAR I Occs rance? St Harmful Event: Collision Name RGO/EQUIPMENT LOS fic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOUS k Bus or HazMat Vehicle License Plate Number 424ZZK Vehicle Identification Nur 2T1BURHE7EC04753 Color BLK - BLACK Initial Contact Point NON-COLLISION	Direction Of Travel WESTBOUND With SS OR SHIFT S)	Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva CURVE R Plate Type AUT - AU Make TOYOTA Body Style SD - SED Vehicle Da	CrashTire Mark Inction IIAL FUNC ITOI ITOI ITOMOBIL	ETION	Total Traile 0 Speed Lim 55 St WI Year	AUTOMOI Operating A it Emergency NOT APPI Traffic Conti NO Road Grade LEVEL Country of Is UNITED ST Model COROLLA Bus Use	Total Hazi Total Lane 2 Motor Vehi LICABLE rol Inoperat	Mat Types es cle Use
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	Towed Due To Damage			/ehicle Removed By						
		NOT TOWED What Driver Was Doing GOING STRAIGHT Driver Prior Action Other		OWNER						
				/ehicle Factors						
				NOT APPLICABLE						
		Driver Actions								
	Щ	NO CONTRIBUTING ACT	ION							
L N	VEHICL									
5	ᇤ									
	>									
		Owner Name		Owner Address						
_		RUSSELL L KUHL		N9937 FOX RIVER RD						
2	01	(608) 566-6391		PORTAGE, WI 53901 , US						
	3	Sequence Of Events								
	01	Event CARGO/EQUIPMENT LOS	SS OR SHIFT							
	02	Event STRUCK BY FALLING, SI	HIFTING CARGO OR ANYT	HING SET IN MOTION BY MOTOR V	EHICLE					
	03	Event								
		Event								
	04	Lvent								
		Policy Holder								
L N		Insurance Company		Individual						
D		PROGRESSIVE-CASUAL	TY-INS-CO	RUSSELL KUHL						
		Individual								
		ınaıvıauaı								
		Driver		Citations Issued	Sex					
				Citations Issued 0	Sex MALE					
		Driver			MALE Race					
Ę		Driver RUSSELL L KUHL		Date of Birth	MALE					
LIND		Driver		0	MALE Race					
TINO	INDIVIDUAL	Driver RUSSELL L KUHL Address	5	Date of Birth	MALE Race WHITE					
TINO		Driver RUSSELL L KUHL Address N9937 FOX RIVER RD	S	Date of Birth Driver License Number	MALE Race WHITE					
LIND	INDIVIDUAL	Driver RUSSELL L KUHL Address N9937 FOX RIVER RD PORTAGE, WI 53901 , US		Date of Birth Driver License Number	MALE Race WHITE					
TINO	INDIVIDUAL	Address N9937 FOX RIVER RD PORTAGE, WI 53901, US		Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: U Safety Equipment	MALE Race WHITE					
LIND	INDIVIDUAL	Address N9937 FOX RIVER RD PORTAGE, WI 53901 , US fety Equipment Seat Position	r Crash	Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: U	MALE Race WHITE					
TINU	INDIVIDUAL	Address N9937 FOX RIVER RD PORTAGE, WI 53901 , US fety Equipment Seat Position 1FRONT SEAT-LEFT SII	r Crash	Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: U Safety Equipment RESTRAINT USE UNKNOWN	MALE Race WHITE					
TINO	INDIVIDUAL	Address N9937 FOX RIVER RD PORTAGE, WI 53901 , US fety Equipment Seat Position	r Crash	Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: U Safety Equipment	MALE Race WHITE					
TINO	INDIVIDUAL	Address N9937 FOX RIVER RD PORTAGE, WI 53901 , US fety Equipment Seat Position 1FRONT SEAT-LEFT SII	r Crash	Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: U Safety Equipment RESTRAINT USE UNKNOWN	MALE Race WHITE					
	INDIVIDUAL	Address N9937 FOX RIVER RD PORTAGE, WI 53901 , US fety Equipment Seat Position 1FRONT SEAT-LEFT SII Helmet Use Eye Protection	DE (DRIVER/MOTORCY	Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: U Safety Equipment RESTRAINT USE UNKNOWN Helmet Compliance	MALE Race WHITE					
UNIT UNIT	INDIVIDUAL	Address N9937 FOX RIVER RD PORTAGE, WI 53901 , US fety Equipment Seat Position 1FRONT SEAT-LEFT SII Helmet Use Eye Protection	DE (DRIVER/MOTORCY	Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: U Safety Equipment RESTRAINT USE UNKNOWN Helmet Compliance Tint Compliance	MALE Race WHITE					
	INDIVIDUAL	Address N9937 FOX RIVER RD PORTAGE, WI 53901 , US fety Equipment Seat Position 1FRONT SEAT-LEFT SII Helmet Use Eye Protection Injury Figure RD Injury NO AP Ejected	DE (DRIVER/MOTORCY everity PARENT INJURY Ejection Path	O Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: U Safety Equipment RESTRAINT USE UNKNOWN Helmet Compliance Tint Compliance Airbag NON DEPLOYED	MALE Race WHITE NITED STATES Trapped/Extricated					
	INDIVIDUAL	Address N9937 FOX RIVER RD PORTAGE, WI 53901 , US fety Equipment Seat Position 1FRONT SEAT-LEFT SIII Helmet Use Eye Protection Injury NO AP Ejected NOT EJECTED	DE (DRIVER/MOTORCY everity PARENT INJURY	Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: U Safety Equipment RESTRAINT USE UNKNOWN Helmet Compliance Tint Compliance Airbag NON DEPLOYED	MALE Race WHITE NITED STATES Trapped/Extricated NOT TRAPPED					
	INDIVIDUAL	Address N9937 FOX RIVER RD PORTAGE, WI 53901 , US fety Equipment Seat Position 1FRONT SEAT-LEFT SII Helmet Use Eye Protection Injury Se NO AP Ejected NOT EJECTED Medical Transport	DE (DRIVER/MOTORCY everity PARENT INJURY Ejection Path	O Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: U Safety Equipment RESTRAINT USE UNKNOWN Helmet Compliance Tint Compliance Airbag NON DEPLOYED	MALE Race WHITE NITED STATES Trapped/Extricated					
	INDIVIDUAL	Address N9937 FOX RIVER RD PORTAGE, WI 53901 , US Fety Equipment Seat Position 1FRONT SEAT-LEFT SII Helmet Use Eye Protection Injury RO AP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED	DE (DRIVER/MOTORCY everity PARENT INJURY Ejection Path	Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: U Safety Equipment RESTRAINT USE UNKNOWN Helmet Compliance Tint Compliance Airbag NON DEPLOYED ICABLE EMS Agency Identifier	MALE Race WHITE NITED STATES Trapped/Extricated NOT TRAPPED EMS Run #					
	INDIVIDUAL	Address N9937 FOX RIVER RD PORTAGE, WI 53901 , US fety Equipment Seat Position 1FRONT SEAT-LEFT SII Helmet Use Eye Protection Injury Se NO AP Ejected NOT EJECTED Medical Transport	DE (DRIVER/MOTORCY everity PARENT INJURY Ejection Path	Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: U Safety Equipment RESTRAINT USE UNKNOWN Helmet Compliance Tint Compliance Airbag NON DEPLOYED	MALE Race WHITE NITED STATES Trapped/Extricated NOT TRAPPED					
	INDIVIDUAL	Address N9937 FOX RIVER RD PORTAGE, WI 53901 , US fety Equipment Seat Position 1FRONT SEAT-LEFT SII Helmet Use Eye Protection Injury NO AP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital	everity PARENT INJURY Ejection Path NOT EJECTED/NOT APPL	Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: U Safety Equipment RESTRAINT USE UNKNOWN Helmet Compliance Tint Compliance Airbag NON DEPLOYED ICABLE EMS Agency Identifier	MALE Race WHITE NITED STATES Trapped/Extricated NOT TRAPPED EMS Run #					
	INDIVIDUAL	Address N9937 FOX RIVER RD PORTAGE, WI 53901 , US Fety Equipment Seat Position 1FRONT SEAT-LEFT SII Helmet Use Eye Protection Injury NO AP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital	everity PARENT INJURY Ejection Path NOT EJECTED/NOT APPL	Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: U Safety Equipment RESTRAINT USE UNKNOWN Helmet Compliance Tint Compliance Airbag NON DEPLOYED ICABLE EMS Agency Identifier	MALE Race WHITE NITED STATES Trapped/Extricated NOT TRAPPED EMS Run #					

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		Non Motorist	Striking Unit #	Location					
		Prior Action							
UNIT	INDIVIDUAL	Action							
		Action Other						To/From School	
	ı	Drug & Alcohol	Suspected Alcohol U NO	lse	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 Result	Drug Test Results		
01	001	Drug Type							
		Individual Condition							
		NOT OBSERVED							
		t Summary •					I —		
		Status			ehicle Operating As Classi CLASS	fication	Unit Type TRUCK		
	HIT AND RUN Vehicle Type			טן	CLASS		Operating As Endorsements		
02		AIGHT TRUCK (IN	SERT TRUCK)				operating the Endors	, c	
	Total Occs Train/Bus # Recorded 1		corded To	Total # Citations Issued Total		ers Total H	azMat Types		
_	Insurance? Direction Of Travel UNKNOWN UNKNOWN			Pre CrashTire Mark	Speed Lir	-	anes		
UNIT	Most Harmful Event: Collision With CARGO/EQUIPMENT LOSS OR SHIFT			Special Function UNKNOWN		Emergency Motor Vehicle Use UNKNOWN			
	Traffic Way			Tı	Traffic Control Traffic Control Inoperative/Missing			rative/Missing	
	UNKNOWN Surface Type UNKNOWN				NKNOWN		UNKNOWN Road Grade UNKNOWN		
					oad Curvature NKNOWN				
		k Bus or HazMat		1 -					
		Vehicle							
		License Plate Numbe	r		Plate Type	St	Country of Issuance		
		JB14052			HTK - HEAVY TRUCK	WI	UNITED STATES Model		
05	05	Vehicle Identification Number 1HTLDTVN0FHA34981			NTERNATIONAL				
		Color RED - RED			INTERNATIONAL 1985 S-SERIES				
	щ	Initial Contact Point			/ehicle Damage		1		
UNIT	길	NON-COLLISION			JO DAMAGE				
5	VEHICLE	NO DAMAGE			NO DAMAGE				
		Towed Due To Damage NOT TOWED			/ehicle Removed By DPERATOR				

Crash Date 12/07/2019 Crash Time 01:55 PM

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		g .		Vehicle Factors			
		UNKNOWN		LINUCALO MAN			
		Driver Prior Action Other		UNKNOWN			
		Driver Actions					
	щ	UNKNOWN					
LIND	VEHICLE						
5	ᇤ						
	>						
		Owner Name		Owner Address			
05	02	MITCHELL J SCHOENOF (608) 345-6383	F	E13401 VAN HOOSEN DR BARABOO, WI 53913 , US			
0	0	(000) 343-0303		BARABOO, WI 33913 , 03			
	Į	Sequence Of Events					
		Event					
	0	CARGO/EQUIPMENT LO	SS OR SHIFT				
	02	Event					
		Event					
	03						
	04	Event					
		Individual					
		Unknown		Citations Issued	Sex		
	إ			0			
	UA			Date of Birth	Race		
NO L	INDIVIDUAL	Address		Driver License Number			
-	ᅙ						
	=	, ,					
		On Duty	v Crash	Safety Equipment			
	Saf	fety Equipment	,	2			
		Seat Position		RESTRAINT USE UNKNOWN			
		Helmet Use		Helmet Compliance			
		Tiomics Goo		Trainer compilance			
		Eye Protection		Tint Compliance			
~	2	Injury S	Severity	Airbag			
05	005	<i>Injury</i> NO AP	PPARENT INJURY	NOT APPLICABLE			
		Ejected	Ejection Path		Trapped/Extricated		
		NOT APPLICABLE Medical Transport	NOT EJECTED/NOT APP		NOT APPLICABLE EMS Run #		
		NOT TRANSPORTED		EMS Agency Identifier	EWS Ruff #		
		Hospital		Date of Death	Time of Death		
		Dietroot	ted By Source				
		Distracted By	led by Source				
		Distracted By Action					
		Non Motorist	Unit # Location				
		Prior Action					
		FIIOI ACIIOII					

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		Action					
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UNIT	≥						
	INDIVIDUAL						
	=						
		A 11 OII					T /5 0 1 1
		Action Other					To/From School
		_					
		Drug & Alcohol	hol Use	Suspected Drug Use			
		Drug & Alconol					
		Alcohol Test Given	Alcohol Test Type)		Alcohol Test Results	
		TEST NOT GIVEN					
		Drug Test Given	Drug Test Type		Drug Test Results	l .	
		TEŠT NOT GIVEN					
02	005	Drug Type	•				
0	8						
		Individual Condition					
		NOT OBSERVED					
		NOT OBSERVED					