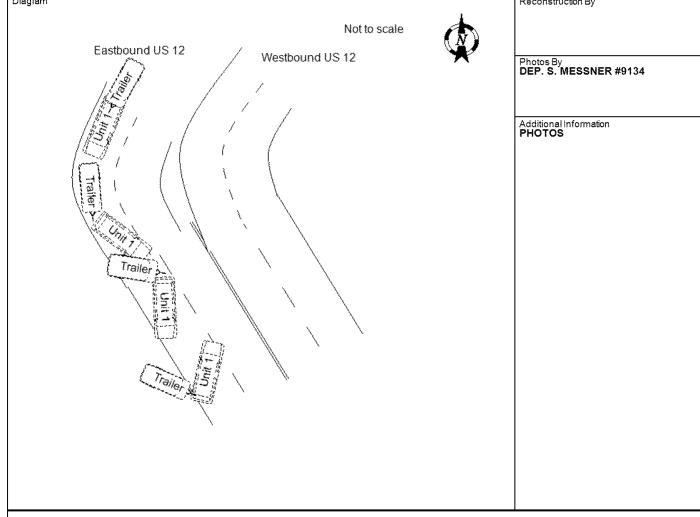
6TL0D1PTLJ 21-05832

WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913

								(608) 356-4895
Document Number Override	Primary Crash Document# Crash Time 12:10 PM		Agency 21-058	Crash Number	Investigating Officer/Deputy DEPUTY S. MESSNER			
Crash Date 06/27/2021			Date Arrived 06/27/2021		Time Arrived 12:18 PM			
Date Notified 06/27/2021	Time Notified 12:10 PM		Total U	nits	Total Injured 00	Total Killed 00		
On Emergency Hi	it and Run	Lane Closu	ıre	☐ Work Zone	▼ Trailer or 1	owed		Reporting Threshold
Government Property	Active School Zone		School Bus Related NO		Tags			
Reportable	Crash Type DT4000 (STA	NDARD CRASH	l)		Amended		0	Secondary Crash
Description								
Diagram Eastbound	112 12	,		Not to scale	Red	construction (Ву	
Lastionio	UJ IZ	/ Westbou	ind US	12	Pho	tos By		



, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

ON SUNDAY, 6/27/2021, AT APPROXIMATELY 12:10 PM, UNIT 1, A 2016 RED CHEVROLET SUBURBAN, BEARING WI #276LWD, WAS BEING DRIVEN BY PAUL T. CORNELL, FRONT PASSENGER OF MALLORY J. CORNELL WITH PASSENGERS IN REAR SEAT OF LONDON J. CORNELL AND HARPER L. CORNELL. UNIT 1 WAS EASTBOUND ON US 12 ON SAUK HILL WITH WARNING SIGNS OF 7% GRADE AND POST SPEED LIMIT OF 55 MPH. UNIT 1 WAS PULLING A TRAILER, A RECREATIONAL TRAILER BEARING WISCONSIN PLATE #RV103812. UNIT 1 NEGOTIATED A LEFT CORNER AT WHICH TIME THE TRAILER BEGAN FISH-TAILING. THE TRAILER CAME AROUND TO THE LEFT SIDE OF THE UNIT 1, ROLLED OVER TO ITS SIDE AND FORCED UNIT 1 INTO A TURN OF APPROXIMATE 180 DEGREES. THE TRAILER CAME TO REST IN THE DITCH WITH UNIT 1, STILL ATTACHED, CAME TO REST IN LANE 2. NO ONE WAS INJURED. DEP. MESSNER PHOTOGRAPHED THE SCENE. UNIT 1 AND TRAILER WERE REMOVED BY BILL'S TOWING.

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

Crash Date 06/27/2021

Crash Time 12:10 PM

L	ocation ===										
	ON USH12 EB 1.23 MI N					Latitude 43.39714	40677		Longitud		
	IN THE TOWN OF SUMPTER IN SAUK COUNTY						X Coordinate Y Coordinate 275444.25 4808653				
							Type UCTURE				
Č	Crash Scene										
Γ	First Harmful Event					FirstHarm	nful Event Lo	ocation			
	OVERTURN/ROLLOVER					ON ROA	DWAY				
	Manner of Collision 00 - NO COLLISION W/VE	LICI E IN TRANSPORT				Light Cond					
L	Road Surface Condition(s)	THOLE IN TRANSPORT				Roadway Factor(s)					
	DRY						(-)				
f	Environment Factor(s)					1					
	NONE					NONE					
ŀ	Weather Condition(s)										
	CLOUDY										
ŀ	Animal Type					Relation To Trafficway					
-	Crash Classification - Location					TRAFFICWAY - ON ROAD Crash Classification - Jurisdiction					
L	PUBLIC PROPERTY	NO SPECIAL JURISDICTION									
	Tribal Land Within Interchange Area Junction Location Intersection NO NON-JUNCTION NOT AN						Access Control NO CONTROL on Type INTERSECTION				
	Closure Type FULL CLOSURE			Reas	ons for Clos						
	Date Initial Lane/Rd Closed 06/27/2021	Time Initial Lane/Rd Cl 12:10 PM	osed			EMENT, TOW TRUCK					
- 1	Date All Lanes Open 06/27/2021	Time All Lanes Open 01:55 PM		I I			I	ne Scene Clea :55 PM	red		
Ū	Jnit Summary 💻						•				
	Unit Status		I .		erating As C	lassification	1	UnitType			
L	IN TRANSIT		DC	LASS				TRUCK			
- 1	Vehicle Type (SPORT) UTILITY VEHICL	.E						Operating As Endorsements			
⊢	Total Occs	Train/Bus#Recorded	Tota	al#Citat	tions Issued	t Total Tra		ers	Total Haz	MatTypes	
	4	18: 4: 6(7	0			1		0			
	Insurance? YES	Direction Of Travel EASTBOUND		Pre	CrashTire Mark		Speed Lin 55	na	Total Lanes 4		
	Most Harmful Event: Collision With OVERTURN/ROLLOVER			cial Fur SPEC	nction IAL FUNC	TION			Emergency Motor Vehicle Use NOT APPLICABLE		
Traffic Way				ffic Conf				Traffic Control Inoperative/Missing			
					ROL				NO Road Grade		
BLACKTOP (BITUMINOUS)				Road Curvature CURVE LEFT			DOWNHILL				
	Truck Bus or HazMat NO		•								
1	Vehicle									S S S S S S S S S S S S S S S S S S S	
	License Plate Number 276LWD	man mang mengangkan kecina kaci bada bada bada bada mengan kecina di mengan mengan kecina kecina kecina kecina		ite Type JT - AL	ITOMOBIL	E	St W I	Country of lss		THE STATE OF THE S	
	Vehicle Identification Nu	mber		ıke	11	-	Year	Model			
	5 1GNSKHKC7GR2121	87	CI	IEVRO	LET		2016	SUBURBAN	1		

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/27/2021

Crash Time 12:10 PM

		Color RED - RED				Body S	-	 T UTILITY \	VEHICLE	Ţ	Bus Use		
	ш	Initial Contact Point			UT - SPORT UTILITY VEHICLE Vehicle Damage								
≒	ಠ	Extent Of Damage		05 - RIGHT REAR CORNER, 06 - REAR, 07 - LEFT REAR CORNER, 14 -									
NN	VEHICLE					RRIAGE			, or - LEFT REARCOOKER, 14 -				
	>	DISABLING DAMAGE Towed Due To Damage			Vehicle Removed By								
		TOWED DUE TO DISABLING DAMAGE			BILLS		-						
		What Driver Was Doing NEGOTIATING CURVE			Vehicle	e Facto	ors						
	T0011000						APPL	CABLE					
	ш	Driver Actions SPEED TOO FAST/C0	OND										
⊨	d												
NI	VEHICLE												
	>												
		Owner Name						ddress					
5	5	MALLORY JEAN COR (920) 573-9798	RNELL			920 AZURE CT S OREGON, WI 53575 , US							
		Sequence Of Ever	nts							00000			
	5	Event OVERTURN/ROLLOV	ER										
	8	Event											
		Event											
	8												
	Event												
⊨		Policy Holder											
LINO		Insurance Company ALLMERICA-FINANC	AL-BEN	EFIT-	INS-CO	Individual PAUL CORNELL							
		T I											
10			Plate Type	21-1221-1221	Make	State Cor WI UN			С	ounl	untry of issuance ITED STATES		
0			RVT - RI	_	FRRV								
E	ER.	UnitType MOBILE HOME		MAI	ridual _LORY JEAN CO	RNEL	L		9:		AZURE CT S		
3	TRAIL	Vehicle Identification Nun		(920) 573-9798				l°	RE	GON, WI 53575 , US		
		4X4TWDT19LY095200	0										
		Individual Driver					Citations Issued				Sex		
		PAUL T CORNELL				0	10011011	SSuca			MALE		
	NDIVIDUA	(920) 573-9798				Date	e of Bir	th			Race WHITE		
LIND	3	Address				Driver License Number				*******			
\supset	9	920 AZURE CT S	110						I COUNTRY: 1	INI'	TEN STATES		
		OREGON, WI 53575 ,	, 03			"			. 200111111	-141	3 //		
		On	Duty Cras	h		Safe	ety Equ	uipment					
	Sai	fety Equipment					•						
		Row 01 - FRONT ROW		Seat Po 07 - Li	osition EFT	SHO	UULD	ER & LAP I	BELT				
		Helmet Use			•	Heli	metCo	mpliance					

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Eye Protection			Tint Compliance					
 		Injury Severity			Airbag					
2	9	Injury no apparent injury			NON DEPLOYED					
		Ejected NOT EJECTED	Ejection Pa	ath CTED/NOT APPL	ICABLE		Trapped/Extricated NOT TRAPPED			
		Medical Transport			EMS Agency Identifier		EMS Run#			
		NOT TRANSPORTED								
		Hospital			Date of Death		Time of Death			
		Distracted By NOT A	ed By Sourc	e .E (NOT DISTRA)	CTED)					
		Distracted By Action NOT DISTRACTED								
			4 () ()	1						
		Non Motorist Striking	Unit#	Location						
		Prior Action								
İ	INDIVIDUAL	Action								
	4									
 	3									
NE NE	Ħ									
_	₫									
	=									
		Action Other						To/From School		
		Drug & Alcohol NO	ted Alcohol t	Use	Suspected Drug Use NO					
		Alcohol Test Given		Nicebel Test Time			Alcohol Test Results			
		TEST NOT GIVEN		Alcohol Test Type			Alcohol restResums			
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results				
5	8	Drug Type								
		Individual Condition								
		APPEARED NORMAL								
		Individual								
		Passenger MALLORY JEAN CORNE	L		Citations Issued 0		Sex FEMALE			
	4	(920) 376-4446	_		Date of Birth		Race			
<u>⊢</u>	INDIVIDUAL				Date of Billi		WHITE			
Ž	7	Address 920 AZURE CT S			Driver License Number					
	Z	OREGON, WI 53575 , US			STATE: WISCONSIN	COUNTRY: UNI	TED STATES			
		On Duty	Crash		Safety Equipment					
	Sai	fety Equipment								
		Row Seat Position			SHOULDER & LAP BELT					
		01 - FRONT ROW	09 - R	IGHT						
		Helmet Use			Helmet Compliance					
		Eye Protection			TintCompliance					
i .	SMIRE IN	1			I					

Crash Date 06/27/2021 Crash Time 12:10 PM

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

5	602	Injury NO A	Severity	N II IDV	Airbag NON DEPLOYED					
		Ejected	Ejection Pa		Trapped/Extricated					
		NOT EJECTED	NOT EJE	CTED/NOT APP	LICABLE		NOT TRAPPED			
		Medical Transport			EMS Agency Identifier		EMS Run#			
		NOT TRANSPORTED								
		Hospital			Date of Death		Time of Death			
		Distracted By Distra	cted By Sourc	e						
		Distracted By Action								
		Non Motorist	ng Unit#	Location						
		Prior Action		1						
		Action								
	INDIVIDUAL									
╘	Ž									
ENO.	Z									
	Z									
		Action Other						To/From School		
		Susp	ected Alcohol (Jse	Suspected Drug Use					
		Drug & Alcohol No			NO		I			
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results			
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results				
		3								
2	805	Drug Type								
		la distributa Canaditian								
		Individual Condition								
		APPEARED NORMAL								
		Individual								
		Passenger			Citations Issued	<u>omanomanomanomano</u>	Sex	:n/men/men/men/men/men/men/men/men/men/me		
	ď	LONDON J CORNELL (920) 573-9798			O Detect Dist		FEMALE Race			
_	INDIVIDUAL				Date of Birth		WHITE			
L N	2	Address			Driver License Number					
ر	9	920 AZURE CT S OREGON, WI 53575 , U	9							
		OK200K, W 55575 , 6								
		On Di	ty Crash		Safety Equipment					
	Sa.	fety Equipment								
		Row 02 - SECOND ROW	Seat Po		CHILD RESTRAINT	SYSTEM - FORM	VARD FACING			
		HelmetUse	1 20 10		Helmet Compliance					
		Eye Protection			Tint Compliance					
					так оопциалое					
2	8	Injury Infuru	Severity	N ILIBY	Airbag					
	8 Injury no apparent injury			NUURI	NON DEPLOYED					

Crash Date 06/27/2021 Crash Time 12:10 PM

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		Ejected NOT EJECTED	NOT EJE	th CTED/NOT APPL	ICABLE		Trapped/Extricated NOT TRAPPED			
		Medical Transport			EMS Agency Identifier		EMS Run#			
		NOT TRANSPORTED Hospital			Date of Death		Time of Death			
		Distracted By Distract	ed By Source	•						
		Distracted By Action								
	Striking Unit # Location Non Motorist									
		Prior Action								
		Action								
_	ΠAL									
	INDIVIDUAL									
	2									
		Asian Other						To Trans Robots		
		Action Other						To/From School		
		Drug & Alcohol NO	ted Alcohol U	se	Suspected Drug Use					
		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	603	Drug Type								
		Individual Condition								
		APPEARED NORMAL								
		 Individual								
		Passenger HARPER L CORNELL	<u>enenenenenen</u>	<u>enonenonenonenonenon</u>	Citations issued	<u>menonenonenoneno</u>	Sex FEMALE	MANEHANEMANEMANEMANEMANEMANEMANEMANEMANEMANEM		
	MI	(920) 573-9798			Date of Birth		Race WHITE			
Ę	INDIVIDUA	Address			Driver License Number					
_	Z	920 AZURE CT S OREGON, WI 53575 , US								
		On Duty	/ Crash		Safety Equipment					
	Sai	lety Equipment	SeatPo	-141	BOOSTER SEAT					
		02 - SECOND ROW	07 - LE							
		Helmet Use			Helmet Compliance					
		Eye Protection			TintCompliance					
2	8	Injury Si Injury NO AP	everity PARENT IN	IJURY	Airbag NON DEPLOYED					
		Ejected NOT EJECTED	Ejection Par NOT EJEC	th CTED/NOT APPL	ICABLE		Trapped/Extricated NOT TRAPPED			

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****		Medical Transport		EMS Agency Identifier		EMS Run#				
		NOT TRANSPORTED								
		Hospital		Date of Death		Time of Death				
		Distracted By Distracted By Source	;	l		I				
		Distracted By Action								
		Non Motorist Striking Unit#	Location							
		Prior Action								
		Action								
	UAL									
TIND	NDIWIDUAL									
	Z									
		Action Other					To/From School			
	1	Drug & Alcohol NO Suspected Alcohol Use NO 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	•				
9	984	Drug Type								
		Individual Condition APPEARED NORMAL								