WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override		Primary Crash E	locument#	Agency 21-061	Crash Number 170	Investigating DEPUTY B		· ·				
2	Crash Date 07/05/2021		Crash Time 04:46 PM		Date Ar 07/05/2		Time Arrived 04:49 PM	ł					
OILUDZAVP	Date Notified 07/05/2021		Time Notified 04:49 PM		Total Ui	nits	Total Injured	Tot	tal Killed				
) L	On Emergency	Hit	and Run	∠ Lane Closu	ıre	☐ Work Zone	Trailer or Towed		ed	Reporting Threshold			
0	Government Property		Active Sc	hool Zone	School NO	Bus Related	Tags						
	Reportable		Crash Type DT4000 (STA	NDARD CRASH)		Amend	ed		Secondar Crash	y		
İ	Description Diagram					'	Reconstruction By						
	DRAWING NOT T	ALE .	U1 U2 U3 U4 U5 U5 U5 U5 U5 U5 U5		USH 12		Addition NONE		mation				
•	i, a sworn law enfo	orceme	nt officer, agre	e that I have no	ot added	d any CJIS data in t	his report.						
•	ALL UNITS WERE TRAVELI OBSERVE THE OTHER UNI THE OTHER UNITS. ALL U HAVE ENOUGH TIME TO S	ITS SLOV INITS CA	WING/STOPPING.	UNIT 1 REAR END	DED UNIT	2 WHICH CAUSED A C	HAIN REACTION F	REAR END	D TYPE	COLLISION BETWEE	N		

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/05/2021

Crash Time 04:46 PM

Location ——									
ON USH12 EB					Latitude			Longitud	l e
1275 FT S					43.27825	4395		-89.759	075068
OF SAUK PRAIRIE RD					X Coordina	ıte		Y Coord	inate
IN THE TOWN OF PRAIRI	E DU SAC				276124.4			479541	
IN SAUK COUNTY								1	-
					Structure Type NO STRUCTURE				
					140 3110	CIONE			
Crash Scene									
First Harmful Event					First Harmf	ulEventL	ocation		
MOTOR VEH IN TRANSPO	ORT				ON ROAD	WAY			
Manner of Collision					Light Cond	ition			
03 - FRONT TO REAR					DAYLIGH				
					Roadway F				
Road Surface Condition(s)					Roadway	actor(s)			
DRY									
Environment Factor(s)					1				
NONE					BVCKIID	DUE TO	REGULAR (ONGES.	TION
INOINE					BACKUE	502 10	REGULARY	.O.4GE3	HON
Weather Condition(s)					1				
CLEAR									
Animal Type					Relation To		•		
					TRAFFIC				
Crash Classification - Location					1		Jurisdiction		
PUBLIC PROPERTY					NO SPECIAL JURISDICTION				
TribalLand					Access Co				Special Study
					NO CONT	ROL			
Within Interchange Area	Junction Location			Intersection	on Type				
NO	NON-JUNCTION			NOT AN	INTERSEC	TION			
Closure Type			Reas	ons for Clos	ure				
CLOSURE-ONE DIRECTION	ON								
Date Initial Lane/Rd Closed	Time Initial Lane/Rd Close	∍d	LAW	ENFORC	EMENT, TO	OW TRU	CK		
07/05/2021	04:46 PM								
Date All Lanes Open	Time All Lanes Open		Date 8	Scene Clear	red	Tir	ne Scene Clea	red	
07/05/2021	05:20 PM		07/05	/2021		05	:20 PM		
Unit Summary =									
Unit Status		LVohi	ala Ona	ratina As C	lassification		I i in it Tours		
IN TRANSIT			LASS	riading As O	iassilicatori		Unit Type AUTOMOE)H E	
			LASS						
Vehicle Type	_						Operating A	s⊨naorse	ments
(SPORT) UTILITY VEHICL									** -=
Total Occs	Train/Bus#Recorded	- 1	# Citat	ions Issued	t	Total Trai	lers		MatTypes
1	<u> </u>	1				0		0	
Insurance?	Direction Of Travel			CrashTire	•	Speed Lir	mit	TotalLan	es
YES	EASTBOUND			Mark		55		2	
Most Harmful Event: Collision			cial Fun		TION		Emergency NOT APPL		
MOTOR VEH IN TRANSPO	ORT	NO.	SPEC	IAL FUNC	HUN				
Traffic Way		Traff	ic Cont	rol			Traffic Cont	rol Inopera	tive/Missing
TWO-WAY, NOT DIVIDED		NO (CONT	ROL			NO		
Surface Type		Road	d Curva	iture			Road Grade	,	
BLACKTOP (BITUMINOUS	S)	STR	AIGH	T			LEVEL		
Truck Bus or HazMat							•		
NO									
Vehicle									
License Plate Number		ni-4	·o T		Т	St	Country of Iss	euanco	
		- 1	е Туре т _ ли			WI	1		
AGS3082 AUT - A Vehicle Identification Number Make				OWICE					
Vehicle Identification Nul		- 1				Year	Model		
□ 1FMCU9GX4GUC296	วช	FO	KU			2016	ECP		

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21-06170

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/05/2021

		Color		Во	dy Style	Bus Use
		WHI - WHITE			- 4DR	
		Initial Contact Point			hicle Damage	
I∟		12 - FRONT		'	note Daniage	
	¥			۰,	EBONT	
⋽	VEHICLE	Extent Of Damage		112	- FRONT	
	3	DISABLING DAMAGE				
		Towed Due To Damage		- 1	hicle Removed By	
		TOWED DUE TO DISABL	NG DAMAGE	ΕV	ERETTS TOWING	
		What Driver Was Doing		Ve	hicle Factors	
		GOING STRAIGHT				
		Driver Prior Action Other		□ NC	OT APPLICABLE	
		Driver Actions				
	Ш	FOLLOWING TOO CLOSE				
<u>⊨</u>	VEHICLE					
	Ŧ					
-	Ш					
		OwnerName			Owner Address	
		LUCAS D FLOM			W4609 GREENBUSH RD	
2	5	(608) 214-5539			MONROE, WI 53566 , US	
		Sequence Of Events		YYSYYSYY		
	5	Event MOTOR VEH IN TRANSPO	ORT			
	8	Event				
	8	Event				
	8	Event				
	9					
l <u>∟</u>		Policy Holder				
EN S		Insurance Company		*****	ndividu al	
⋽		QUARTZ INSURANCE			LUCAS FLOM	
		Driver LUCAS D FLOM			Citations Issued	Sex
		(608) 214-5539		Ľ	1	MALE
	DUAL	(000)214-0000		1	Date of Birth	Race
⊨	9					WHITE
3	INDIN	Address		1	Driver License Number	
-	ij	W4609 GREENBUSH RD			STATE: WISCONSIN COUNTRY: UNI	TEN OTATEO
		MONROE, WI 53566 , US		١,	SIATE. WISCONSIN COORTET. UNI	TED STATES
		On Duty	Crash	- 1	Safety Equipment	
	Sai	fety Equipment				
		Row	Seat Position	- ;	SHOULDER & LAP BELT	
		01 - FRONT ROW	07 - LEFT			
		HelmetUse		- ;	Helmet Compliance	
					·	
		Eye Protection			Fint Compliance	
		•				
l_		Injury Se	everity	-	Airbag	
2	Injury Severity Injury NO APPARENT INJURY			- 1	DEPLOYED-FRONT	
		Ejected	Ejection Path			Trapped/Extricated
	NOT EJECTED NOT EJECTED/NOT API					
		Medical Transport			EMS Agency Identifier	EMS Run#
		NOT TRANSPORTED		Ι,		
ı	420000	i		- 1		I

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/05/2021

Crash Time 04:46 PM

		Hospital				Date of Death			Time of Dea	ith	
		Distracted By	Distracted By NOT APPL	/Source ICABLE (NOT D	ISTRA	CTED)					
		Distracted By Action NOT DISTRACTED)								
		Non Motorist	Striking Unit	# Location							
		Prior Action		•							
		Action									
	UAL										
UNIT	NDIVIDUAL										
	INC										
		Action Other									To/From School
			Suspected A	lacheli iso		Suspected Drug Use					TON TOTAL CENSOR
	1	Drug & Alcohol	NO			NO			T		
		Alcohol Test Given TEST NOT GIVEN		Alcohol T		•			Alcohol Tes	t Results	
		Drug Test Given TEST NOT GIVEN Drug Test Ty			t Туре	Drug Test Results					
2	001	Drug Type									
		Individual Condition	dividual Condition								
		APPEARED NORM	IAL								
	,	Violations	555555555555		*****		*****	eeeeeeeee	********		* 575 5 575 575 575 575 575 575 575 575
	0-1	UTC Number BG024591	Issue To?	Statute Numbe 346.14(1m)	r	Description AUTOMOBILE FOLL	OWIN	G TOO CL	.OSELY		
		t Summary ■									
		Status –			V	ehicle Operating As Class	ification		UnitType		
		RANSIT			D	CLASS			AUTOMO		
05		cle Type SSENGER CAR							Operating A		
	Tota	lOccs	Train/B	us#Recorded	T 0	otal#Citations Issued		Total Trail	ers	Total Hazñ 0	Mat Types
Е	Insu YES	rance?		n Of Travel BOUND	g.,	Pre CrashTire Mark		Speed Lin	nit	TotalLane 2	S
LINO		tHarmfulEvent: Collision TOR VEH IN TRANS				pecialFunction OSPECIAL FUNCTIO	N		NOT APP		cle Use
	Traffic Way TWO-WAY, NOT DIVIDED					raffic Control			Traffic Conf	rol Inoperat	ive/Missing
	Surface Type BLACKTOP (BITUMINOUS)					load Curvature			Road Grade)	
		k Bus or HazMat	,						<u> </u>		
		Vehicle									
		License Plate Number			1	Plate Type		St	Country of Is	suance	
		AHY7240				AUT - AUTOMOBILE		WI	UNITED S	TATES	

Form DT4000

21-06170

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/05/2021

۱ 🗸	*********	Vehicle Identification Number		Make		Year	Model			
8		JF1GPAP60G8349767		SUBARU		2016	UNKNOWN			
		Color		Body Style			Bus Use			
		WHI - WHITE		4D - 4DR						
	ш	Initial Contact Point		Vehicle Dame	age					
⊢	VEHICLE	06 - REAR								
N N	#	Extent Of Damage		06 - REAR, 12 - FRONT						
⊃	ü	FUNCTIONAL DAMAGE		OU - IXEAIX,	12 - 1 1(0)(1)					
	-			<u> </u>						
		Towed Due To Damage		Vehicle Rem	•					
		NOT TOWED		OPERATOR						
		What Driver Was Doing		Vehicle Facto	ors					
		SLOW/STOPPING		J						
		Driver Prior Action Other		NOT APPL	CABLE					
		DriverActions								
	VEHICLE	NO CONTRIBUTING ACT	ION							
	Ō									
	I									
–	щ									
		Owner Name		Owner A	ddress					
۱		TAIZO MURAKAMI			DMORE DR					
8	22	(608) 345-3542		MADIS	ON, WI 53713 , U	S				
				<u> </u>						
		Sequence Of Events								
	5	Event MOTOR VEH IN TRANSP	ORT							
	8	Event								
	8	Event								
	9									
	Z	Event								
I∟		Policy Holder								
		Insurance Company		Individual		3)3)3)3)3)3)3)3)3				
=		ADDISON-INS-CO			URAKAMI					
		(4)111112(11(2)(4)122(12)11(114)1212(12)(12)(14)(14)(14)(14)(14)(14)(14)(14)(14)(14		$\alpha_1 \alpha_2 \alpha_3 \alpha_4 \alpha_5 \alpha_5 \alpha_5 \alpha_5 \alpha_5 \alpha_5 \alpha_5 \alpha_5 \alpha_5 \alpha_5$	101010101010101010101010101010					
		Driver TAIZO MURAKAMI		Citations is	ssued		Sex			
	4	(608) 345-3542		0			MALE			
	MDIVIDUA	(000,010 00 12		Date of Bir	th		Race WHITE			
⊨	<u> </u>						AAUITE			
E S	2	Address		Driver Lice	nse Number					
-	¥	109 ARDMORE DR		STATE: N	VISCONSIN COU	RTDV: HA	ITED STATES			
		MADISON, WI 53713 , US	•	SIAIE. V	VISCONSIN CODE	KIKI. UK	TIED STATES			
		On Duty	/ Crash	Safety Equ	aipment					
	Sai	fety Equipment								
		Row	Seat Position	SHOULD	ER & LAP BELT					
		01 - FRONT ROW	07 - LEFT							
		HelmetUse		Helmet Co	mpliance					
					•					
		Eye Protection		Tint Comp	liance					
		_, -,		, and only						
۱.	N	Injury S	everity	Airbag						
8	8	03034034034034034034034034034 <u>03233334034</u> 03	PARENT INJURY	NON DEF	PLOYED					
		Ejected	Ejection Path				Trapped/Extricated			
		NOT EJECTED	NOT EJECTED/NOT AP	PLICAB! F			NOT TRAPPED			
ı	SERVER!	1 	/ / 							

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/05/2021

		Medical Transport NOT TRANSPORTED			EMS Agency Identifier EMS Run#			:			
		Hospital			Date of Death		Time of De	ath			
		Distracted By NO	racted By Source T APPLICABLI	E (NOT DISTRA	CTED)						
		Distracted By Action NOT DISTRACTED									
		Non Motorist Strik	ing Unit#	Location							
		Prior Action									
UNIT	INDIVIDUAL	Action									
		Action Other							To/From School		
	l L	Susp Drug & Alcohol NO	pected Alcohol U	se	Suspected Drug Use NO						
	Alcohol Test Given Alcohol Test Ty TEST NOT GIVEN)		Alcohol Tes	st Results			
		Drug Test Given TEST NOT GIVEN		Drug Test Type	pe Drug Test Results						
05	002	Drug Type									
		Individual Condition APPEARED NORMAL									
	Unit	t Summary									
		Status		l l	ehicle Operating As Class	ification	UnitType	D11 E			
		CIE Type			CLASS		AUTOMO Operating A	biLE As Endorsem	nents		
03		SENGER CAR					' '				
	Tota 3	lOccs	Train/Bus#Red	0	otal#Citations Issued	TotalTı 0		Total HazN	1at Types		
ь	YES		Direction Of Tra		Pre CrashTire Mark	Speed 55		Total Lane			
LINO	MO.	tHarmfulEvent: Collision Wi FOR VEH IN TRANSPOR		N	pecial Function IO SPECIAL FUNCTIO	N	NOT APP				
	Traffic Way TWO-WAY, NOT DIVIDED				raffic Control IO CONTROL		NO	trol Inoperati	ve/Missing		
	Surface Type BLACKTOP (BITUMINOUS)				load Curvature STRAIGHT		Road Grad	2			
		k Bus or HazMat		1-							
		Vehicle	\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$	seconores e conse		**************************************	SSSSSSSSSSS				
		License Plate Number AAJ2742			Plate Type AUT - AUTOMOBILE	St WI	Country of Is				
03	03	Vehicle Identification Number 5NPE34AF8JH617111	per	1	Make HYUNDAI	Year 2018	Model SONATA	Model			

21-06170

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/05/2021

		Color		Body	y Style	Bus Use
		WHI - WHITE		4D -	· 4DR	
	ш	Initial Contact Point		Vehi	cle Damage	
l⊨∄	ਜ	06 - REAR				
L N N	Ť	Extent Of Damage		d 06 -	REAR, 12 - FRONT	
그	VEHICLE	DISABLING DAMAGE				
	7	Towed Due To Damage		Vohi	icle Removed By	
		TOWED DUE TO DISABLIN	IC DAMAGE	1	RETTS TOWING	
			IG DAMAGE			
		What Driver Was Doing		Vehi	icle Factors	
		SLOW/STOPPING				
		Driver Prior Action Other		NO	T APPLICABLE	
		Driver Actions				
	щ	NO CONTRIBUTING ACTIO	ON			
๒	VEHICLE					
IN IN	I					
–	Ш					
		OwnerName			Owner Address	
		ANDREW G SPREEN			2039 STEPHANIE CT	
8	8	(608) 572-4517			BLACK EARTH, WI 53515 , US	
		•				
		Sequence Of Events		Y6\Y6\Y6\		enenenenenenenenenenenenenenenenenenen
	_	Event				
	5	MOTOR VEH IN TRANSPO	RT			
		Event				
	05					
		Event				
	63	Lydik				
	2	Event				
⊢ {		Policy Holder				
IN S		Insurance Company			dividu al	
⊃ }		STATE-FARM-GENERAL-I	NS-CO	A	NDREW SPREEN	
		ndividual				
}		<u> Синичения выполняющий и принце на прин</u>				
		Driver ANDREW G SPREEN			itations Issued	Sex
	_	(608) 572-4517		0		MALE
}		(000) 012-4011		D	ate of Birth	Race
l⊑∄	DUA					WHITE
5	NON	Address		Ð	river License Number	
ا ح	9	2039 STEPHANIE CT			TATE IMPOSING A CONTON AND	TED 074750
		BLACK EARTH, WI 53515	, US	5	TATE: WISCONSIN COUNTRY: UNI	IED STATES
		On Duty (Crash	Sa	afety Equipment	
	Saf	ety Equipment				
			Seat Position	— s	HOULDER & LAP BELT	
		Row 01 - FRONT ROW	07 - LEFT	"	nooloen a Lan Olli	
			Or - LEF I	1,1		
		1 1 1 4 411			elmet Compliance	
		HelmetUse		"		
		Helmet Use Eye Protection			nt Compliance	
		Eye Protection		Ti	·	
)3	63	Eye Protection	verity	Ti	rbag	
03	5003	Eye Protection	verity ARENT INJURY	Ti	·	
03	003	Eye Protection Injury Ser Injury NO APP	verity ARENT INJURY Ejection Path	Ti	rbag	Trapped/Extricated
03	003	Eye Protection Injury Section NO APP	ARENT INJURY	Ti Ai	rbag ON DEPLOYED	Trapped/Extricated NOT TRAPPED
03	003	Eye Protection Injury Ser Injury NO APP	ARENT INJURY Ejection Path	Ai N	rbag ON DEPLOYED	l

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Hospital				Date of Death Time of Death					
		Distracted By	Distracted B	By Source LICABL	E (NOT DISTRAC	CTED)					
		Distracted By Action NOT DISTRACTED)								
		Non Motorist	Striking Uni	t#	Location						
		Prior Action									
		Action									
	¥										
∐N O	INDIVIDUAL										
_	Ź										
		Action Other							To/From School		
		Drug & Alcohol	Suspected.	Alcohol U	se	Suspected Drug Use					
		Alcohol Test Given	****		Alcohol Test Type			Alcohol Test Results			
		TEST NOT GIVEN									
		Drug Test Given TEST NOT GIVEN Drug Test Type					Drug Test Results	3			
03	8	Drug Type									
		Individual Condition									
		APPEARED NORMAL									
		Individual									
		Passenger CHRISTIAN MICHA	AEL PATZ	(A		Citations issued 0		Sex MALE			
	3	(608) 284-1092				Date of Birth		Race			
LNN	DIVIDUAL	Add						WHITE			
ź		Address 2041 STEPHANIE				Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
	Z	BLACK EARTH, W	153515 ,	US		STATE: WISCONSIN	I COUNTRY: UNI	TEUSTATES			
	Sai	fety Equipment	On Duty Cra	ish		Safety Equipment					
		Row		SeatPo		SHOULDER & LAP	BELT				
		01 - FRONT ROW HelmetUse		09 - Ri	GHT	Helmet Compliance					
		Eye Protection				Tint Compliance					
		_		_							
03	8	Injury	Injury Seve	rity RENT IN	JURY	Airbag NON DEPLOYED					
		Ejected NOT EJECTED	Eje	ection Pa		ICAB! E		Trapped/Extricated NOT TRAPPED			
		Medical Transport		21 EUE(JIEDINOI MEEL	EMS Agency Identifier		EMS Run#			
		NOT TRANSPORT	ED			Data of Danth		Time of Section			
		Hospital	spital			Date of Death		Time of Death			

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Distracted By Distracte	ed By Source	2						
		Distracted By Action								
		Non Motorist	Jnit#	Location						
		Prior Action		•						
		Action								
	W									
TINO	3									
5	NDIVIDUAL									
	=									
		Action Other						To/From School		
			ed Alcohol U	Inc	Supported Dividalise					
	ı	Drug & Alcohol NO	ed Alconol C	/S G	Suspected Drug Use NO					
		AlcoholTestGiven TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results			
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	<u> </u>			
03	8	Drug Type								
0	5									
		Individual Condition								
		APPEARED NORMAL								
					Citations ssued		<u> </u>			
	_	Passenger NATHAN J NEITZEL (608) 535-2688			0		Sex MALE			
⊢	INDIVIDUAL	(000) 333-2000			Date of Birth		Race WHITE			
L N	8	Address 424 DUNHILL DR			Driver License Number					
	Z	VERONA, WI 53593 , US			STATE: WISCONSIN	I COUNTRY: UNI	TED STATES			
		On Duty	Crash		Safety Equipment					
	Sai	ety Equipment Row	SeatPo	sition	SHOULDER & LAP I	BELT				
		02 - SECOND ROW	08 - MI							
		Helmet Use			Helmet Compliance					
		Eye Protection			Tint Compliance					
03	902	Injury Se	verity PARENT IN	ALII IDV	Airbag NON DEPLOYED					
		Ejected	Ejection Pa	th			Trapped/Extricated			
		NOT EJECTED Medical Transport	NOT EJE	CTED/NOT APPL	.ICABLE EMS Agency Identifier		NOT TRAPPED EMS Run#			
		NOT TRANSPORTED								
		Hospital			Date of Death		Time of Death			
		Distracted By Distracte	d By Source	•						

Crash Date 07/05/2021 Crash Time 04:46 PM

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/05/2021

		Distracted By Action						
		Non Motorist	king Unit#	Location				
		Prior Action						
		Action						
	Æ							
UNIT	NDIVIDUAL							
5	ă							
	=							
		Action Other						To/From School
	1	Drug & Alcohol NO	pected Alcohol U	ise	Suspected Drug Use NO			
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	е		Alcohol Tes	st Results
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Resu	lts	
03	900	Drug Type						
0	8							
		Individual Condition						
		APPEARED NORMAL						
		4						
	Uni	t Summary						
1		t Summary Status			/ehicle Operating As Clas:	sification	UnitType	
	Unit				/ehicle Operating As Class	sification	UnitType AUTOMO	BILE
04	Unit IN T Vehi	Status FRANSIT icle Type	<u> </u>			sification	AUTOMO	BILE as Endorsements
	Unit IN T Vehi (SP	Status FRANSIT	Train/Bus#Re	corded 7	O CLASS	TotalTra	AUTOMO Operating A	s Endorsements Total HazMatTypes
	Unit IN T Vehi (SP Tota 1	Status FRANSIT icle Type ORT) UTILITY VEHICLE		corded 7	O CLASS Total # Citations Issued		AUTOMO Operating A	s Endorsements
04	Unit IN T Vehi (SP) Tota 1 Insu YES	Status FRANSIT icle Type ORT) UTILITY VEHICLE II Occs France?	Train/Bus#Re Direction Of Tra	corded T C	Total#Citations Issued Pre CrashTire Mark	Total Tra	AUTOMOI Operating A	Total HazMat Types Total Lanes 2
	Unit IN T Vehi (SP) Tota 1 Insu YES MOS	Status FRANSIT icle Type ORT) UTILITY VEHICLE Il Occs France? St Harmful Event: Collision W	Train/Bus#Re Direction Of Tra EASTBOUNI	corded 7 C	Total#Citations Issued Pre CrashTire	Total Tra 0 Speed L 55	AUTOMOI Operating A	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use
04	Unit IN T Vehi (SP) Tota 1 Insu YES Mos MO	Status FRANSIT icle Type ORT) UTILITY VEHICLE Il Occs France? S t Harmful Event: Collision W	Train/Bus#Re Direction Of Tra EASTBOUNI	corded T C avel D E T	O CLASS Fotal # Citations Issued Pre CrashTire Mark Special Function	Total Tra 0 Speed L 55	AUTOMOI Operating A tilers imit Emergency NOT APP	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use
04	Unit IN T Vehi (SP) Tota 1 Insu YES MO Traft TWO Surf.	Status FRANSIT icle Type ORT) UTILITY VEHICLE ICOCCS rance? It Harmful Event: Collision W TOR VEH IN TRANSPO fic Way O-WAY, NOT DIVIDED ace Type	Train/Bus#Re Direction Of Tra EASTBOUNE	corded T C avel D T F	O CLASS Fotal # Citations Issued Pre CrashTire Mark Special Function NO SPECIAL FUNCTION Fraffic Control NO CONTROL Road Curvature	Total Tra 0 Speed L 55	AUTOMO Operating A tillers Emergency NOT APP Traffic Cont NO Road Grade	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use LiCABLE trol Inoperative/Missing
04	Unit IN T Vehi (SP) Tota 1 Insu YES MO Traff TWC Surfa	Status FRANSIT icle Type ORT) UTILITY VEHICLE II Occs France? St Harmful Event: Collision W TOR VEH IN TRANSPO fic Way O-WAY, NOT DIVIDED	Train/Bus#Re Direction Of Tra EASTBOUNE	corded T C avel D T F	O CLASS Fotal # Citations Issued Pre CrashTire Mark Special Function NO SPECIAL FUNCTION Fraffic Control NO CONTROL	Total Tra 0 Speed L 55	AUTOMO Operating A iilers imit Emergency NOT APP Traffic Cont	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use LiCABLE trol Inoperative/Missing
04	Unit IN T Vehi (SPC Tota 1 Insu YES Mos MO Traff TWC Surf. BLA	Status FRANSIT icle Type ORT) UTILITY VEHICLE ILOCCS Trance? St Harmful Event: Collision W TOR VEH IN TRANSPO fic Way O-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOUS ek Bus or HazMat	Train/Bus#Re Direction Of Tra EASTBOUNE	corded T C avel D T F	O CLASS Fotal # Citations Issued Pre CrashTire Mark Special Function NO SPECIAL FUNCTION Fraffic Control NO CONTROL Road Curvature	Total Tra 0 Speed L 55	AUTOMO Operating A tillers Emergency NOT APP Traffic Cont NO Road Grade	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use LiCABLE trol Inoperative/Missing
04	Unit IN T Vehi (SPC Tota 1 Insu YES Mos MO Traff TWC Surf. BLA	Status FRANSIT icle Type ORT) UTILITY VEHICLE II Occs rance? It Harmful Event: Collision W TOR VEH IN TRANSPO fic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS	Train/Bus#Re Direction Of Tra EASTBOUNE	corded T	O CLASS Fotal # Citations Issued Pre CrashTire Mark Special Function NO SPECIAL FUNCTION Fraffic Control NO CONTROL Road Curvature	Total Tra 0 Speed L 55	AUTOMO Operating A tillers Emergency NOT APP Traffic Cont NO Road Grade	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use LICABLE trol Inoperative/Missing
04	Unit IN T Vehi (SPC Tota 1 Insu YES Mos MO Traff TWC Surf. BLA	Status FRANSIT icle Type ORT) UTILITY VEHICLE II Occs France? St Harmful Event: Collision W TOR VEH IN TRANSPO fic Way O-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOUS sk Bus or HazMat	Train/Bus#Re Direction Of Tra EASTBOUNE	corded T C avel D F S	Pre CrashTire Mark Special Function NO SPECIAL FUNCTION Fraffic Control NO CONTROL Road Curvature STRAIGHT	Total Tra 0 Speed L 55	AUTOMO Operating A sillers imit Emergency NOT APP Traffic Cont NO Road Grade LEVEL	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use LICABLE trol Inoperative/Missing
04	Unit IN T Vehi (SPC Tota 1 Insu YES Mos MO Traff TWC Surf. BLA	Status FRANSIT icle Type ORT) UTILITY VEHICLE Il Occs France? St Harmful Event: Collision W TOR VEH IN TRANSPO fic Way O-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOUS ick Bus or HazMat Vehicle License Plate Number	Train/Bus#Re Direction Of Tra EASTBOUNE //ith RT	corded T	Plate Type	Total Tra 0 Speed L 55	AUTOMO Operating A tilers imit Emergency NOT APP Traffic Cont NO Road Grade LEVEL	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use LiCABLE trol Inoperative/Missing
UNIT 04	Unit IN T Vehic (SP) Tota 1 Insu YES MOS MO' Traff TWO Surf. BLA	Status FRANSIT icle Type ORT) UTILITY VEHICLE al Occs rance? St Harmful Event: Collision W TOR VEH IN TRANSPO fic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS ick Bus or HazMat Vehicle License Plate Number 221VZU Vehicle Identification Num JF2GPACC2D2852027 Color	Train/Bus#Re Direction Of Tra EASTBOUNE //ith RT	corded T	Plate Type AUT - AUTOMOBILE Make SUBARU Bootal# Citations Issued O) Pre CrashTire Mark Special Function NO SPECIAL FUNCTION Fraffic Control NO CONTROL Road Curvature BTRAIGHT	Speed L 55	AUTOMO Operating A tillers Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED S	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use LiCABLE trol Inoperative/Missing
UNIT 04	Unit IN T Vehit (SP) Tota 1 Insu YES MOO Traff TWO Surf. BLA Truc NO	Status FRANSIT icle Type ORT) UTILITY VEHICLE II Occs Trance? St Harmful Event: Collision W TOR VEH IN TRANSPO fic Way O-WAY, NOT DIVIDED TACKTOP (BITUMINOUS EX Bus or HazMat Vehicle License Plate Number 221VZU Vehicle Identification Num JF2GPACC2D2852027	Train/Bus#Re Direction Of Tra EASTBOUNE //ith RT	corded T	Plate Type AUT - AUTOMOBILE Motal# Citations Issued Pre CrashTire Mark Brecial Function NO SPECIAL FUNCTION Fraffic Control NO CONTROL Road Curvature BTRAIGHT	Speed L 55	AUTOMOI Operating A illers imit Emergency NOT APP Traffic Conf NO Road Grade LEVEL Country of Is UNITED ST Model UNKNOWN	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use LiCABLE trol Inoperative/Missing
UNIT 04	Unit IN T Vehic (SP) Tota 1 Insu YES MOS MO' Traff TWO Surf. BLA	Status FRANSIT icle Type ORT) UTILITY VEHICLE II Occs Trance? St Harmful Event: Collision W TOR VEH IN TRANSPO fic Way O-WAY, NOT DIVIDED TACE Type ACKTOP (BITUMINOUS IX Bus or HazMat Vehicle License Plate Number 221VZU Vehicle Identification Num JF2GPACC2D2852027 Color GRN - GREEN	Train/Bus#Re Direction Of Tra EASTBOUNE //ith RT	corded T C avel D F S	Plate Type AUT - AUTOMOBILE Make SUBARU BOCLASS Pre CrashTire Mark Special Function NO SPECIAL FUNCTIO Road Curvature BTRAIGHT	St Wi Year 2013	AUTOMOI Operating A illers imit Emergency NOT APP Traffic Conf NO Road Grade LEVEL Country of Is UNITED ST Model UNKNOWN	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use LiCABLE trol Inoperative/Missing

21-06170

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/05/2021

		Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
		What Driver Was Doing		Vehicle Factors	
		SLOW/STOPPING Driver Prior Action Other		NOT APPLICABLE	
		District			
	щ	Driver Actions NO CONTRIBUTING ACT	ION		
HN	VEHICL				
₽	VE!				
		Owner Name		Owner Address	
94	•	DIANNE M LITTMAN (608) 513-9885		405 WALNUT GROVE DR MADISON, WI 53717 , US	
0	8	(000) 513-9005		MADISON, WI 33717 , US	
		ı Seguence:©il≘vents:			SHEDISHISHISHISHISHISHISHISHISHISHISHISHISHI
	5	Event MOTOR VEH IN TRANSPO	ORT		
	8	Event			
		Event			
	8				
	75	Event			
 		PolicyHolder			
IN N		Insurance Company AMICA-MUTUAL-INS-CO		Individual DIANNE LITTMAN	
		Driver DIANNE M LITTMAN		Citations Issued	Sex FEMALE
	W	(608) 513-9885		0 Date of Birth	Race
FIND		Address		Driver License Number	WHITE
5	NDIVIDUA	405 WALNUT GROVE DR MADISON, WI 53717, US		STATE: WISCONSIN COUNT	PY LINITED STATES
		WADISON, WESSTET, US	•	STATE. MISCORDIN COOK!	AL SHIED STATES
	Ç.,	On Duty Fety Equipment	y Crash	Safety Equipment	
		Row	Seat Position	SHOULDER & LAP BELT	
		01 - FRONT ROW	07 - LEFT		
		HelmetUse		Helmet Compliance	
		Eye Protection		Tint Compliance	
8	900	Injury S	everity	Airbag	
	9	Ejected NO AP	PARENT INJURY Ejection Path	NON DEPLOYED	Trapped/Extricated
		NOT EJECTED	NOT EJECTED/NOT AP		NOT TRAPPED
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run#
		Hospital		Date of Death	Time of Death
				1	
I		Distract	ted By Source		
		Distracted By NOT A	ted By Source IPPLICABLE (NOT DISTR	RACTED)	
		Distracted By Action NOT DISTRACTED	ted By Source PPLICABLE (NOT DISTR	RACTED)	•

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/05/2021

		Non Motorist	triking Unit#	Location					
		Prior Action							
TINO	INDIVIDUAL	Action							
	4								
		Action Other						To/From School	
	l	Drug & Alcohol N	uspected Alcohol U O		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	ilts		
04	900	Drug Type							
		Individual Condition APPEARED NORMA	L						
	Uni	t Summary 💻							
	Unit	Status RANSIT		I .	ehicle Operating As Class	ification	UnitType AUTOMOBILE		
05	Vehi	icle Туре			CLAGG		Operating As Endors	ements	
	_	ORT) UTILITY VEHICI	LE Train/Bus#Re	corded Te	otal#Citations Issued	Total Trail	ers Total Ha	azMatTypes	
	1 Insu	rance?	Direction Of Tra	avel	_ Pre CrashTire	0 Speed Lin	0 mit Total Lanes		
UNIT		(NOWN t Harmful Event: Collision	EASTBOUNE With	Nessee	☐ Mark 55 2		2 Emergency Motor Ve	hicle Use	
)		TOR VEH IN TRANSP	ORT		O SPECIAL FUNCTIO	N	NOT APPLICABLE Traffic Control Inope		
		D-WAY, NOT DIVIDED ace Type)		O CONTROL oad Curvature		NO Road Grade		
	BLA	CKTOP (BITUMINOU	S)		TRAIGHT		LEVEL		
	Truc NO	k Bus or HazMat							
	,	Vehicle						KISTORIA KKIKITORIA KKIKITORIA KKIK	
		License Plate Number EUK289			Plate Type AUT - AUTOMOBILE	St MN	Country of Issuance UNITED STATES		
05	ន	Vehicle Identification Nu 1FMCU0F74DUA937			Make FORD	Year 2013	Model ESCAPE		
		Color		E	Body Style	1	Bus Use		
	Щ	BLK - BLACK Initial Contact Point			/ehicle Damage				
L N	VEHICLE	06 - REAR Extent Of Damage			06 - REAR				
	2	MINOR DAMAGE Towed Due To Damage		1	/ehicle Removed By				
		NOT TOWED			OPERATOR				

21-06170

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/05/2021

		What Driver Was Doing		Vehicle Factors						
		SLOW/STOPPING		NOT APPLICABLE						
		Driver Prior Action Other								
		Dul con A etions								
		Driver Actions NO CONTRIBUTING ACT	ION							
l∟	VEHICLE	10 00111111011111011111011111								
	2									
⋽	1									
	A									
		O		LOw- and disease						
		OwnerName ISABELLA J FOX (503) 313-7960		Owner Address 378 CRYSTAL SPRINGS LN N KEIZER, OR 97303 , US						
9	8									
-										
		L Canuanaa Af Evante								
		Sequence Of Events Event								
	5	MOTOR VEH IN TRANSPORT								
		Event	vent							
	8	27011	· weik							
		Event								
	63									
	_	Event								
	2									
		Individual								
		Driver		Citations issued	Sex	3000300				
		ISABELLA J FOX		0	FEMALE					
	5	(503) 313-7960		Date of Birth	Race					
—	Ճ				WHITE					
_	35.			I 						
톡	M	Address		Driver License Number						
TND	NON	378 CRYSTAL SPRINGS I	LN N		TED STATES					
N N	INDIVIDUA		LN N	Driver License Number STATE: OREGON COUNTRY: UNI	TED STATES					
JN5	NON	378 CRYSTAL SPRINGS I KEIZER, OR 97303 , US		STATE: OREGON COUNTRY: UNI	TED STATES					
in in		378 CRYSTAL SPRINGS I KEIZER, OR 97303 , US			TED STATES					
JND		378 CRYSTAL SPRINGS I KEIZER, OR 97303 , US On Dub	y Crash	STATE: OREGON COUNTRY: UNI	TED STATES					
JNO		378 CRYSTAL SPRINGS I KEIZER, OR 97303 , US On Duty ety Equipment	y Crash Seat Position	STATE: OREGON COUNTRY: UNI	TED STATES					
IND		378 CRYSTAL SPRINGS I KEIZER, OR 97303 , US On Dub	y Crash	STATE: OREGON COUNTRY: UNI Safety Equipment SHOULDER & LAP BELT	TED STATES					
JNO		378 CRYSTAL SPRINGS I KEIZER, OR 97303 , US Fety Equipment Row 01 - FRONT ROW	y Crash Seat Position	STATE: OREGON COUNTRY: UNI	TED STATES					
NO		378 CRYSTAL SPRINGS I KEIZER, OR 97303 , US Fety Equipment Row 01 - FRONT ROW	y Crash Seat Position	STATE: OREGON COUNTRY: UNI Safety Equipment SHOULDER & LAP BELT	TED STATES					
	Sat	378 CRYSTAL SPRINGS I KEIZER, OR 97303 , US Tety Equipment Row 01 - FRONT ROW Helmet Use	y Crash Seat Position	STATE: OREGON COUNTRY: UNI Safety Equipment SHOULDER & LAP BELT Helmet Compliance	TED STATES					
	Sat	378 CRYSTAL SPRINGS I KEIZER, OR 97303 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection	Seat Position 07 - LEFT	STATE: OREGON COUNTRY: UNI Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag	TED STATES					
	Sal	378 CRYSTAL SPRINGS I KEIZER, OR 97303 , US On Duty Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury S NO AP	Seat Position 07 - LEFT everity PARENT INJURY	STATE: OREGON COUNTRY: UNI Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance						
	Sat	378 CRYSTAL SPRINGS I KEIZER, OR 97303 , US On Duty Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury S NO AP Ejected	Seat Position 07 - LEFT everity PPARENT INJURY Ejection Path	STATE: OREGON COUNTRY: UNI Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED	₹rapped/Extricated					
	Sat	378 CRYSTAL SPRINGS I KEIZER, OR 97303 , US On Duty ety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury S Injury NO AP Ejected NOT EJECTED	Seat Position 07 - LEFT everity PARENT INJURY	STATE: OREGON COUNTRY: UNI Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED	Trapped/Extricated NOT TRAPPED					
	Sat	378 CRYSTAL SPRINGS I KEIZER, OR 97303 , US On Duty ety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury S NO AP Ejected NOT EJECTED Medical Transport	Seat Position 07 - LEFT everity PPARENT INJURY Ejection Path	STATE: OREGON COUNTRY: UNI Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED	₹rapped/Extricated					
	Sat	378 CRYSTAL SPRINGS I KEIZER, OR 97303 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury NO AP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED	Seat Position 07 - LEFT everity PPARENT INJURY Ejection Path	STATE: OREGON COUNTRY: UNI Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier	Trapped/Extricated NOT TRAPPED EMS Run#					
	Sat	378 CRYSTAL SPRINGS I KEIZER, OR 97303 , US On Duty ety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury S NO AP Ejected NOT EJECTED Medical Transport	Seat Position 07 - LEFT everity PPARENT INJURY Ejection Path	STATE: OREGON COUNTRY: UNI Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED	Trapped/Extricated NOT TRAPPED					
	Sat	378 CRYSTAL SPRINGS I KEIZER, OR 97303 , US Con Duty City Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury S NO AP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital	Seat Position 07 - LEFT everity PARENT INJURY Ejection Path NOT EJECTED/NOT AP	STATE: OREGON COUNTRY: UNI Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier Date of Death	Trapped/Extricated NOT TRAPPED EMS Run#					
	Sat	378 CRYSTAL SPRINGS I KEIZER, OR 97303 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury NO AP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital	Seat Position 07 - LEFT everity PARENT INJURY Ejection Path NOT EJECTED/NOT AP	STATE: OREGON COUNTRY: UNI Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier Date of Death	Trapped/Extricated NOT TRAPPED EMS Run#					
	Sat	378 CRYSTAL SPRINGS I KEIZER, OR 97303 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Injury NO AP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital Distracted By Distracted By Distracted By Distracted By Action	Seat Position 07 - LEFT everity PARENT INJURY Ejection Path NOT EJECTED/NOT AP	STATE: OREGON COUNTRY: UNI Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier Date of Death	Trapped/Extricated NOT TRAPPED EMS Run#					
	Sat	378 CRYSTAL SPRINGS IN KEIZER, OR 97303 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Signatury NO AP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital Distracted By Action NOT DISTRACTED	Seat Position 07 - LEFT everity PARENT INJURY Ejection Path NOT EJECTED/NOT AP	STATE: OREGON COUNTRY: UNI Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier Date of Death	Trapped/Extricated NOT TRAPPED EMS Run#					
	Sat	378 CRYSTAL SPRINGS I KEIZER, OR 97303 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury NO AP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital Distracted By Action NOT DISTRACTED Striking	Seat Position 07 - LEFT everity PARENT INJURY Ejection Path NOT EJECTED/NOT AP	STATE: OREGON COUNTRY: UNI Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier Date of Death	Trapped/Extricated NOT TRAPPED EMS Run#					
	Sat	378 CRYSTAL SPRINGS I KEIZER, OR 97303 , US Con Duty Con	Seat Position 07 - LEFT everity PARENT INJURY Ejection Path NOT EJECTED/NOT AP	STATE: OREGON COUNTRY: UNI Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier Date of Death	Trapped/Extricated NOT TRAPPED EMS Run#					
	Sat	378 CRYSTAL SPRINGS I KEIZER, OR 97303 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury NO AP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital Distracted By Action NOT DISTRACTED Striking	Seat Position 07 - LEFT everity PARENT INJURY Ejection Path NOT EJECTED/NOT AP	STATE: OREGON COUNTRY: UNI Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier Date of Death	Trapped/Extricated NOT TRAPPED EMS Run#					

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/05/2021

UNIT	NDIVIDUAL	Action					
n	NIGNI	Action Other					To/From School
	L	Drug & Alcohol NO	Use	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		
05	200	Drug Type			•		
		Individual Condition					
		APPEARED NORMAL					