WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Overrid	de Primary Crash	Document#	Agence 21-06	y Crash Number 329	DEPUTY C.		
Crash Date 07/09/2021	Crash Time 04:53 PM		Date A 07/09		Time Arrived 05:19 PM		
Date Notified 07/09/2021	Time Notified 04:53 PM		Total U	Inits	Total Injured	Total Kill	ed
On Emergency	Hit and Run	Lane Clos	ure	Work Zone	Trailer o	r Towed	Reporting Threshold
Government Property	Active S	chool Zone	Schoo NO	I Bus Related	Tags		·
Reportable	Crash Type DT4000 (ST	ANDARD CRAS	H)		Amende	d	Secondary Crash
escription =	l				I		
Off ramp 194			No RD) DE	Photos By DEPUTY C. Additional Inf PHOTOS	GALLAGHER
	2 [STH 12		Not to Sc	ale		

UNIT 1 WAS TRAVELING EB ON THE EXIT RAMP TO STH 12 FROM 194. UNIT 1 APPROACHED THE SIGNAL CONTROLLED INTERSECTION OF STH 12. UNIT 1 CONTINUED THROUGH A RED SIGNAL LIGHT TO MAKE A LEFT HAND TURN, TRAVELING NB ON STH 12. UNIT 2 WAS TRAVELING SB ON STH 12 APPROACHING THE SIGNAL CONTROLLED INTERSECTION. UNIT 2 HAD A GREEN LIGHT AND CONTINUED THROUGH THE INTERSECTION. BOTH UNIT 1 AND 2 HIT COLLIDED SUFFERING FUNCTIONAL DAMAGE

Crash Date 07/09/2021 Crash Time 04:53 PM

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Crash Date 07/09/2021

	Location ——									
	ON USH12 EB				Latitude			Longitud	de .	
	572 FT S				43.56815	50317		-89.778	563403	
	OF RAMP IH90 EB				X Coordin	ate		Y Coord	inate	
	IN THE VILLAGE OF LAKE IN SAUK COUNTY	EDELTON			275617.1875 4827661.5			51.5		
	IN SAUK COURT				Structure			1		
					NUSIR	UCTURE				
1	Crash Scene									
	First Harmful Event				FirstHarm	nful Event Lo	cation			
	MOTOR VEH IN TRANSPO	ORT			ON ROA	DWAY				
	Manner of Collision				Light Con-					
	01 - ANGLE				DAYLIG	HT				
	Road Surface Condition(s)				Roadway	Factor(s)				
	DRY									
	Environment Factor(s)				1					
	NONE				NONE					
	Weather Condition(s)				1					
	CLEAR									
	Animal Type				Relation T	o Trafficway	1			
					1	Relation To Trafficway TRAFFICWAY - ON ROAD				
	Crash Classification - Location				Crash Classification - Jurisdiction					
	PUBLIC PROPERTY				NO SPE	CIAL JURI	SDICTION			
	Tribal Land					Access Control Special Study PARTIAL CONTROL				
		Junction Location		Intersection Type			•			
	NO	INTERSECTION		FOUR-W	AY INTER	RSECTION				
- 1	Unit Summary 🗨									
	Unit Status			erating As C	Classification	1	UnitType			
	IN TRANSIT		D CLASS				AUTOMOI			
-	Vehicle Type						Operating As Endorsements			
,	PASSENGER CAR	Train/Bus#Recorded	[#			I T - 4 - 1 T 31		T-4-111	NA-4T:	
	Total Occs 2	rain/Bus#Recorded	1 otal# Cita	tions Issued	t .	Total Traile	ers	0	MatTypes	
	Insurance?	Direction Of Travel		CrashTire		Speed Lim	nit	TotalLan	es	
	YES	EASTBOUND		Mark	45		1 Otal Lanes			
	Most Harmful Event: Collision V	 Vith	SpecialFu	nction		1	Emergency Motor Vehicle Use			
}	MOTOR VEH IN TRANSPO			IAL FUNC	TION		NOT APPLICABLE Traffic Control Inoperative/Missing NO Road Grade LEVEL			
	Traffic Way		Traffic Con							
	DIVIDED HWY W/O TRAFF	IC BARRIER	TRAFFIC							
	Surface Type CONCRETE		Road Curvi							
	Truck Bus or HazMat		SIRAIGH	• •		LEVEL				
	NO									
	Vehicle				e e e e e e e e e e e e					1555555
	License Plate Number		Plate Type	•		St	Country of Is	suance		
	AML156		AUT - AL	JTOMOBII	LE	MN	UNITED ST	TATES		
. :	Vehicle Identification Nun	nber	Make			Year	Model			
	る KMHGN4JEXFU07677	75	HYUNDA	M	2015		GENESIS			
	Color		Body Style				Bus Use			
	SIL - SILVER (ALUMII	NUM)	SD - SEE							
_	Initial Contact Point	DUED	Vehicle Da	amage						
5	11 - LEFT FRONT CO Extent Of Damage	אבא	40 - 1 55	T SINE EE	ONT 44 -	FFT ED/	אד רחייים	ER 19 - =	RONT	
: כ	Extent Of Damage FUNCTIONAL DAMAGE		10-12	LOWERN	FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT					

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		Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER		
		What Driver Was Doing		Vehicle Factors		
		LEFT TURN		versione's declars		
		Driver Prior Action Other		NOT APPLICABLE		
		Driver Actions				
	щ					
IN N	VEHICLE					
5	I					
	>					
		Owner Name		Owner Address		
_		TODD WAYNE PETERSO	N	5112 WINDSOR AVE		
2	5	(612) 741-8633		EDINA, MN 55436 2443, US		
	5	Event MOTOR VEH IN TRANSP	ORT			
	8	Event				
		Event				
	8	CARIN				
	3	Event				
 -		Policy Holder				
INN		Insurance Company		Individual		
∃ §		STATE-FARM-GENERAL	-INS-CO	TODD PETERSON		
] }	C	1		TODD TETEROOM		
		la di sidual				
		Individual Driver			Sex	
		Individual Driver TODD WAYNE PETERSO		Citations issued	Sex MALE	
_		Individual Driver		Citations Issued	Sex	
LN		Individual Driver TODD WAYNE PETERSO		Citations issued	Sex MALE	
UNIT		Driver TODD WAYNE PETERSO (612) 741-8633 Address 5112 WINDSOR AVE	<u>N</u>	Citations Issued 1 Date of Birth Driver License Number	Sex MALE Race	
TINO	INDIVIDUAL	Driver TODD WAYNE PETERSO (612) 741-8633 Address	<u>N</u>	Citations Issued 1 Date of Birth	Sex MALE Race	
TINO		Driver TODD WAYNE PETERSO (612) 741-8633 Address 5112 WINDSOR AVE EDINA, MN 55436 2443,	N US	Citations Issued 1 Date of Birth Driver License Number STATE: MINNESOTA COUNTI	Sex MALE Race	
TIND	INDIVIDUAL	Driver TODD WAYNE PETERSO (612) 741-8633 Address 5112 WINDSOR AVE EDINA, MN 55436 2443, On Duty	N US	Citations Issued 1 Date of Birth Driver License Number	Sex MALE Race	
LIND	INDIVIDUAL	Driver TODD WAYNE PETERSO (612) 741-8633 Address 5112 WINDSOR AVE EDINA, MN 55436 2443, On Duty	US y Crash	Citations Issued 1 Date of Birth Driver License Number STATE: MINNESOTA COUNTI	Sex MALE Race	
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TINO	INDIVIDUAL	Driver TODD WAYNE PETERSO (612) 741-8633 Address 5112 WINDSOR AVE EDINA, MN 55436 2443, On Duty Row	US y Crash Seat Position	Citations Issued 1 Date of Birth Driver License Number STATE: MINNESOTA COUNTI	Sex MALE Race	
TIND	INDIVIDUAL	Driver TODD WAYNE PETERSO (612) 741-8633 Address 5112 WINDSOR AVE EDINA, MN 55436 2443, fety Equipment Row 01 - FRONT ROW	US y Crash Seat Position	Citations Issued 1 Date of Birth Driver License Number STATE: MINNESOTA COUNTI Safety Equipment SHOULDER & LAP BELT	Sex MALE Race	
TNN	INDIVIDUAL	Driver TODD WAYNE PETERSO (612) 741-8633 Address 5112 WINDSOR AVE EDINA, MN 55436 2443, Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection	US y Crash Seat Position 07 - LEFT	Citations Issued 1 Date of Birth Driver License Number STATE: MINNESOTA COUNTI Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance	Sex MALE Race	
	g INDIVIDUAL	Driver TODD WAYNE PETERSO (612) 741-8633 Address 5112 WINDSOR AVE EDINA, MN 55436 2443, Pety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection	US y Crash Seat Position 07 - LEFT	Citations Issued 1 Date of Birth Driver License Number STATE: MINNESOTA COUNTI Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance	Sex MALE Race	
	INDIVIDUAL	Driver TODD WAYNE PETERSO (612) 741-8633 Address 5112 WINDSOR AVE EDINA, MN 55436 2443, Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury S NO AF	US y Crash Seat Position 07 - LEFT	Citations Issued 1 Date of Birth Driver License Number STATE: MINNESOTA COUNTI Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance	Race Race RY: UNITED STATES	
	g INDIVIDUAL	Driver TODD WAYNE PETERSO (612) 741-8633 Address 5112 WINDSOR AVE EDINA, MN 55436 2443, Pety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection	US y Crash Seat Position 07 - LEFT	Citations Issued 1 Date of Birth Driver License Number STATE: MINNESOTA COUNTI Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED	Sex MALE Race	
	g INDIVIDUAL	Driver TODD WAYNE PETERSO (612) 741-8633 Address 5112 WINDSOR AVE EDINA, MN 55436 2443, Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury S NO AF	US y Crash Seat Position 07 - LEFT EVERTLY PPARENT INJURY Ejection Path	Citations Issued 1 Date of Birth Driver License Number STATE: MINNESOTA COUNTI Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED	Race Race RY: UNITED STATES	
	g INDIVIDUAL	Priver TODD WAYNE PETERSO (612) 741-8633 Address 5112 WINDSOR AVE EDINA, MN 55436 2443, Pety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury NO AF Ejected NOT EJECTED Medical Transport NOT TRANSPORTED	US y Crash Seat Position 07 - LEFT EVERTLY PPARENT INJURY Ejection Path	Citations Issued 1 Date of Birth Driver License Number STATE: MINNESOTA COUNTI Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED PPLICABLE EMS Agency Identifier	Race Race RY: UNITED STATES Trapped/Extricated NOT TRAPPED EMS Run#	
	g INDIVIDUAL	Driver TODD WAYNE PETERSO (612) 741-8633 Address 5112 WINDSOR AVE EDINA, MN 55436 2443, On Duty Cory Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury S NO AF Ejected NOT EJECTED Medical Transport	US y Crash Seat Position 07 - LEFT EVERTLY PPARENT INJURY Ejection Path	Citations Issued 1 Date of Birth Driver License Number STATE: MINNESOTA COUNTI Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED	Race Race RY: UNITED STATES Trapped/Extricated NOT TRAPPED	
	g INDIVIDUAL	Driver TODD WAYNE PETERSO (612) 741-8633 Address 5112 WINDSOR AVE EDINA, MN 55436 2443, Pety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury S Injury NO AF Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital	Seat Position 07 - LEFT Evenity PPARENT INJURY Ejection Path NOT EJECTED/NOT AF	Citations Issued 1 Date of Birth Driver License Number STATE: MINNESOTA COUNTI Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED PPLICABLE EMS Agency Identifier Date of Death	Race Race RY: UNITED STATES Trapped/Extricated NOT TRAPPED EMS Run#	
	g INDIVIDUAL	Driver TODD WAYNE PETERSO (612) 741-8633 Address 5112 WINDSOR AVE EDINA, MN 55436 2443, Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury NO AF Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital	Seat Position 07 - LEFT Evenity PPARENT INJURY Ejection Path NOT EJECTED/NOT AF	Citations Issued 1 Date of Birth Driver License Number STATE: MINNESOTA COUNTI Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED PPLICABLE EMS Agency Identifier Date of Death	Race Race RY: UNITED STATES Trapped/Extricated NOT TRAPPED EMS Run#	

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		Striking Non Motorist	Unit#	Location				
		Prior Action		I				
	ML	Action						
UNIT	INDIVIDUAL							
		Action Other						To/From School
	1	Drug & Alcohol NO	ed Alcohol U		Suspected Drug Use NO			
		AlcoholTestGiven TEST NOT GIVEN		Alcohol Test Type	9		Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
10	100	Drug Type						
		Individual Condition						
		APPEARED NORMAL						
		Individual			Citations ssued		Sex	
	4	Passenger LANDON J PETERSON (612) 741-8633			0		MALE	
<u>⊢</u>	6 00	(012)141-0000			Date of Birth		Race WHITE	
TNU	INDIVIDUA	Address 5112 WINDSOR AVE EDINA, MN 55436 2443, L	JS		Driver License Number			
	Sai	On Duty Tety Equipment	Crash		Safety Equipment			
		Row 01 - FRONT ROW	SeatPo		SHOULDER & LAP E	BELT		
		Helmet Use	•		Helmet Compliance			
		Eye Protection			Tint Compliance			
٤	200	Injury Se	PARENT I		Airbag NON DEPLOYED			
		Ejected NOT EJECTED	Ejection Pa	in CTED/NOT APPI	LICABLE		Trapped/Extricated NOT TRAPPED	
		Medical Transport NOT TRANSPORTED			EMS Agency Identifier		EMS Run#	
		Hospital			Date of Death		Time of Death	
		Distracted By	ed By Source	•	1		I	
		Distracted By Action						
		Non Motorist	Unit#	Location				

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		Prior Action											
!		Action											
	4												
E	NDIVIDUAL												
UNIT	3												
	2												
		Action Other										To/From School	_
			Suspected Alc	cohol Us	Δ	Ts.	uspected Drug Use						
	į	Drug & Alcohol	NO	201101 03	•		0						
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test T	уре				Alcohol Tes	t Results		
		Drug Test Given TEST NOT GIVEN		+	Drug Test Type	e		Drug 1	est Results				_
0	002	Drug Type											
		Individual Condition											
		APPEARED NORM	5 A I										
		AFFEARED NORW	IAL										
	1	Violations	TERRESHEE STEELE	1818181818181	Suuruunuu suuruun suur	o erererer			*****	KKKKKKKKKK	KKKKKKKK	********	SS
	01	UTC Number BG112782	Issue To?	Statu 346	te Number 37(1)(c)1	Ď	escription PERATOR VIOLAT	C DCL	TDAEEIC	LIGHT			
			1001	10.00	31 (1)(6)1	١٠	PERATOR VIOLAT		INAFFIC	LIGITI			
l			001	10101	31(1)(6)1		PERATOR VIOLAT		TRAFFIC	LIGITI			
	Uni	t Summary Status	001			Vehic	cle Operating As Class		TRAFFIC	UnitType			
	Unit Unit IN T	t Summary Status RANSIT			51(1)(6)1	Vehic			TRAFFIC	UnitType TRUCK	us Endorsen	nants	
05	Unit Unit IN T	t Summary ■ Status			37(1)(0)1	Vehic	cle Operating As Class		TRAFFIC	UnitType	s Endorser	nents	
02	Unit IN T Vehi UTI	t Summary Status RANSIT				Vehic D CI	cle Operating As Class		TotalTraile	Unit Type TRUCK Operating A	TotalHazi		
02	Unit IN T Vehi UTII Tota 2	t Summary Status RANSIT icle Type Lity TRUCK/PICKU	IP TRUCK	s#Rec	orded	Vehic D CL	cle Operating As Class ASS # Citations Issued			UnitType TRUCK Operating A		Vlat Types	
	Unit IN T Vehi UTII Tota 2 Insu YES	t Summary Status RANSIT icle Type LITY TRUCK/PICKU IOccs rance?	JP TRUCK Train/Bus Direction SOUTH	s#Reco	orded /el	Vehic D CL	# Citations Issued Pre CrashTire Mark		Total Traile	UnitType TRUCK Operating A	Total Hazi 0 Total Lane	MatTypes ⊧s	
UNIT 02	Unit IN T Vehi UTII Tota 2 Insu YES	t Summary Status RANSIT icle Type LITY TRUCK/PICKU	DP TRUCK Train/Bus Direction SOUTH	s#Reco	orded /el	Vehice D CL	cle Operating As Class ASS # Citations Issued Pre CrashTire	ification	Total Traile 0 Speed Lim	UnitType TRUCK Operating A	Total Hazi 0 Total Lane 2 Motor Vehi	MatTypes ⊧s	
	Unit IN T Vehi UTII Tota 2 Insu YES Mos MO	t Summary Status RANSIT icle Type LITY TRUCK/PICKU IOccs rance? St Harmful Event: Collision TOR VEH IN TRANS fic Way	Direction SOUTH SPORT	s#Reco	orded /el	Total 0 Spec NO:	# Citations Issued Pre CrashTire Mark ial Function SPECIAL FUNCTIO	ification	Total Traile 0 Speed Lim	UnitType TRUCK Operating A ers Emergency NOT APP	Total Hazi 0 Total Lane 2 Motor Vehi	MatTypes es cle Use	
	Unit IN T Vehi UTII Tota 2 Insu YES Mos MO Traff	t Summary Status RANSIT icle Type LITY TRUCK/PICKU I Occs rance? I tharmful Event: Collision TOR VEH IN TRANS fic Way DED HWY W/O TRA	Direction SOUTH SPORT	s#Reco	orded /el	Total 0 Spec NO 3 Traffi	# Citations Issued Pre CrashTire Mark ital Function SPECIAL FUNCTIO	ification	Total Traile 0 Speed Lim	UnitType TRUCK Operating A ers it Emergency NOT APP	Total Hazi 0 Total Lane 2 Motor Vehi LICABLE	MatTypes es cle Use	
	Unit IN T Vehi UTII Tota 2 Insu YES MOO Traff DIVI Surf.	t Summary Status RANSIT icle Type LITY TRUCK/PICKU IOccs rance? St Harmful Event: Collision TOR VEH IN TRANS fic Way	Direction SOUTH SPORT	s#Reco	orded /el	Total 0 Spec NO 3 Trafff TRA	# Citations Issued Pre CrashTire Mark ial Function SPECIAL FUNCTIO	ification	Total Traile 0 Speed Lim	UnitType TRUCK Operating A ors ers Emergency NOT APP	Total Hazi 0 Total Lane 2 Motor Vehi LICABLE	MatTypes es cle Use	
	Unit IN T Vehi UTII Tota 2 Insu YES MOS MO Traff DIVI	Status FRANSIT Icle Type LITY TRUCK/PICKU I Occs rance? I Harmful Event: Collision TOR VEH IN TRANS Iclic Way IDED HWY W/O TRA ace Type	Direction SOUTH SPORT	s#Reco	orded /el	Total 0 Spec NO 3 Trafff TRA	# Citations Issued Pre CrashTire Mark ital Function SPECIAL FUNCTIO ic Control FFIC SIGNAL ICUTYATURE	ification	Total Traile 0 Speed Lim	UnitType TRUCK Operating A ors ers it Emergency NOT APP Traffic Cont NO Road Grade	Total Hazi 0 Total Lane 2 Motor Vehi LICABLE	MatTypes es cle Use	
	Unit Unit IN T Vehi UTIII Tota Insu YES Mos MO Traff DIVI Surf CON	t Summary Status FRANSIT ICLE Type LITY TRUCK/PICKU IOCCS FRANCE? B ITHER TRUCK Collision TOR VEH IN TRANS FIC Way FIC	Direction SOUTH SPORT	s#Reco	orded /el	Total 0 Spec NO 3 Trafff TRA	# Citations Issued Pre CrashTire Mark ital Function SPECIAL FUNCTIO ic Control FFIC SIGNAL ICUTYATURE	ification	Total Traile 0 Speed Lim	UnitType TRUCK Operating A ors ers it Emergency NOT APP Traffic Cont NO Road Grade	Total Hazi 0 Total Lane 2 Motor Vehi LICABLE	MatTypes es cle Use	
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TINO	Unit Unit IN T Vehi UTIII Tota Insu YES Mos MO Traff DIVI Surf CON	Status RANSIT Icle Type LITY TRUCK/PICKU I Occs rance? I Harmful Event: Collision TOR VEH IN TRANS fic Way DED HWY W/O TRA ace Type NCRETE Ik Bus or HazMat Vehicle License Plate Number PF3510	Direction SOUTH ON With SPORT	s#Reco	orded /el	Total 0 Spec NO 3 Trafff TRA Roac STR	# Citations Issued Pre CrashTire Mark ial Function ic Control FFIC SIGNAL It Curvature AIGHT	ification	Total Trails 0 Speed Lim 45 St	UnitType TRUCK Operating A operating A it Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST	Total Hazi 0 Total Lane 2 Motor Vehi LICABLE trol Inoperat	MatTypes es cle Use	
	Unit Unit IN T Vehi UTIII Tota Insu YES Mos MO Traff DIVI Surf CON	Status RANSIT icle Type LITY TRUCK/PICKU IOccs rance? StHarmful Event: Collision TOR VEH IN TRANS fic Way DED HWY W/O TRA ace Type NCRETE Ik Bus or HazMat Vehicle License Plate Number	Direction SOUTH ON With SPORT AFFIC BARRI	s#Reco	orded /el	Total 0 Spec NO 3 Trafff TRA Roac STR Platt LTP Mak	# Citations Issued Pre CrashTire Mark ital Function SPECIAL FUNCTIO it Control FFIC SIGNAL I Curvature AIGHT e Type (- LIGHT TRUCK e RD	ification	Total Traile 0 Speed Lim 45	Unit Type TRUCK Operating A operating A it Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of is UNITED ST Model F150	Total Hazi 0 Total Lane 2 Motor Vehi LICABLE trol Inoperat	MatTypes es cle Use	
TINO	Unit Unit IN T Vehi UTIII Tota Insu YES Mos MO Traff DIVI Surf CON	Status Status FRANSIT Icle Type LITY TRUCK/PICKU I Occs rance? I Harmful Event: Collision TOR VEH IN TRANS IIIC Way IDED HWY W/O TRA IICLE ILICENSE Plate Number PF3510 Vehicle Identification 1FTEW1E53LFC19 Color	Direction SOUTH ON With SPORT AFFIC BARRI	s#Reco	orded /el	Total 0 Spec NO 3 Trafff TRA Road STR Platt LTP Make FOI Bod	# Citations Issued Pre CrashTire Mark ital Function SPECIAL FUNCTIO ic Control FFIC SIGNAL I Curvature AIGHT e Type (- LIGHT TRUCK e RD y Style	ification	Total Traile 0 Speed Lim 45 St WI Year	UnitType TRUCK Operating A Operating A It Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of is UNITED ST	Total Hazi 0 Total Lane 2 Motor Vehi LICABLE trol Inoperat	MatTypes es cle Use	
02 UNIT	Unit Unit IN T Vehi UTII Tota 2 Insu YES Mos MO' Traff DIVI Surf. CON Truc NO	Status FRANSIT ICIE Type LITY TRUCK/PICKU I Occs rance? St Harmful Event: Collisia TOR VEH IN TRANS FIG Way DED HWY W/O TRA Bace Type NCRETE Ik Bus or HazMat Vehicle License Plate Number PF3510 Vehicle Identification 1FTEW1E53LFC19 Color WHI - WHITE Initial Contact Point	Direction SOUTH ON With SPORT AFFIC BARRI	s#Reco	orded /el	Total 0 Spec NO: Traff TRA Roac STR Platt LT# Mak FOI Bod PK	# Citations Issued Pre CrashTire Mark ital Function SPECIAL FUNCTIO it Control FFIC SIGNAL I Curvature AIGHT e Type (- LIGHT TRUCK e RD	ification	Total Traile 0 Speed Lim 45 St WI Year	Unit Type TRUCK Operating A operating A it Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of is UNITED ST Model F150	Total Hazi 0 Total Lane 2 Motor Vehi LICABLE trol Inoperat	MatTypes es cle Use	
TINO	Unit Unit IN T Vehi UTIII Tota Insu YES Mos MO Traff DIVI Surf CON	Status Status FRANSIT ICIE Type LITY TRUCK/PICKU IOCCS TRANSIT ICIE Type LITY TRUCK/PICKU IOCCS TRUCK/PICK	Direction SOUTH ON With SPORT AFFIC BARRI	s#Reco	orded /el	Total 0 Spec NO: Traff TRA Roac STR Platt LTP Mak FOI Bod PK Veh	# Citations Issued Pre CrashTire Mark iial Function SPECIAL FUNCTIO ic Control FFIC SIGNAL II Curvature AIGHT e Type (- LIGHT TRUCK e RD y Style - PICKUP	N	Total Traile 0 Speed Lim 45 St WI Year 2020	Unit Type TRUCK Operating A ors ers iit Emergency NOT APPI Traffic Cont NO Road Grade LEVEL Country of is UNITED ST Model F150 Bus Use	Total Hazi 0 Total Lane 2 Motor Vehi LICABLE trol Inoperate suance FATES	MatTypes es cle Use ive/Missing	

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Crash Time 04:53 PM

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-	What Driver Was Doing GOING STRAIGHT Driver Prior Action Other Driver Actions NO CONTRIBUTING ACT	FION	Vehicle Factors NOT APPLICABLE				
-	Driver Prior Action Other Driver Actions NO CONTRIBUTING ACT Owner Name	TION	NOT APPLICABLE				
ш.	Driver Actions NO CONTRIBUTING ACT	TION	NOT APPLICABLE				
	NO CONTRIBUTING ACT	FION					
	Owner Name	TON .					
UNI (EHIC	1						
	1						
	1						
-			Owner Address				
	OTTO ELROY SCHLADW (715) 459-3198	VEILER	12360 80TH ST S WISCONSIN RAPI	DS, WI 54494 , US			
	, ,						
5	Sequence Of Events						
	Event MOTOR VEH IN TRANSP	PORT					
8	Event						
	Event						
80							
8	Event						
E	Policy Holder						
	Insurance Company AMERICAN-FAMILY-INS-	-co	Individual OTTO SCHLADWEI	LER			
l	Individual						
	Driver		Citations Issued	Sex			
2000333333	OTTO ELROY SCHLADW (715) 459-3198	VEILER	0 Date of Birth	MALE Race			
UNIT			Date of Bitti	WHITE			
TIND	Address 12360 80TH ST S		Driver License Number				
Z	WISCONSIN RAPIDS, WI	54494 , US	STATE: WISCONSI	N COUNTRY: UNITED STATES			
		_					
Saf	ety Equipment	y Crash	Safety Equipment				
5500022542223	Row	Seat Position	SHOULDER & LAP	BELT			
3000	01 - FRONT ROW HelmetUse	07 - LEFT	Helmet Compliance				
			· ·				
	Eye Protection		Tint Compliance				
80 03	Injury S	Severity	Airbag				
200000	Ejected NO AF	PPARENT INJURY Ejection Path	NON DEPLOYED	Trapped/Extricated			
EEEEEEEE	NOT EJECTED	NOT EJECTED/NOT AP	PLICABLE	NOT TRAPPED			
25728888	Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run#			
	Hospital		Date of Death	Time of Death			
	Distracted By NOT A	ted By Source APPLICABLE (NOT DISTR	ACTED)				
	Distracted By Action NOT DISTRACTED						
	Distracted By NOT A Distracted By Action	ted By Source APPLICABLE (NOT DISTR	ACTED)				

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Non Motorist	Unit#	Location				
		Prior Action		I .				
TINO	INDIVIDUAL	Action						
		Action Other						To/From School
	1	Drug & Alcohol NO	ted Alcohol L	Jse	Suspected Drug Use NO			•
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	2		Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
03	603	Drug Type						
		Individual Condition						
		APPEARED NORMAL						
		Individual			Citations Issued			
	4	Passenger TAMARA LYNN SCHLADV (715) 459-3198	VEILER		0		Sex FEMALE	
⊢	3	(110)400 0100			Date of Birth		Race WHITE	
TNU	INDIVIDUAL	Address 12360 80TH ST S WISCONSIN RAPIDS, WI		3	Driver License Number STATE: WISCONSIN	COUNTRY: UNI	TED STATES	
	Sai	On Duty	Crash		Safety Equipment			
		Row 01 - FRONT ROW	Seat Po		SHOULDER & LAP E	BELT		
		HelmetUse	•		Helmet Compliance			
		Eye Protection			Tint Compliance			
05	984	Injury Se	PARENT II		Airbag NON DEPLOYED			
		Ejected NOT EJECTED	Ejection Pa	th CTED/NOT APPI	LICABLE		Trapped/Extricated NOT TRAPPED	
		Medical Transport NOT TRANSPORTED			EMS Agency Identifier		EMS Run#	
		Hospital			Date of Death		Time of Death	
		Distracted By	ed By Source	•				
		Distracted By Action						
		Non Motorist	Unit#	Location				

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/09/2021

1 #							
		Prior Action					
		Action					
TIND	INDIVIDUAL						
							I = '=
		Action Other					To/From School
	I	Drug & Alcohol NO	Jse	Suspected Drug Use NO			
		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	
02	004	Drug Type					
٥	0						
		Individual Condition					
		APPEARED NORMAL					