WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash E	· ·					ng Officer/Deputy NT T. CLAUER		
27	Crash Date Crash Time 10/26/2021 05:20 PM					Time Arrived				
_	Date Notified 10/26/2021	Time Notified 05:25 PM		Total U	Total Units 02		Total Kill	ed		
֓֞֟֝֟֝֟֝֟֝֝֟֝֝֟֝֝֟֝֟֝֟֝֟֝֟֝֟֝֟֝ ֖֪֓֞֞֞֞֞֞֞֞֞֞֞֞֞֞֓֓֞֞֞֞֞֞֞֞֞	On Emergency	lit and Run	Lane Closu	ıre	☐ Work Zone	Trailer	or Towed	Reporting Threshold		
֓֟֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֡֡֡֓֓֓֡֓֡֡֡֡	Government Property	Active Sc	chool Zone	School NO	Bus Related	Tags		_		
	▼ Reportable	Crash Type PRIVATE PR	OPERTY/PARKI	NG LOT		Amend	ed	Secondary Crash		
[Description ——									
							Photos By			
	•	C			Oad to Casino Pa	rking lot	Additional Info	ormation		
				NOT	TO SCALE					
	I, a sworn law enforcem Unit one was attempting to HOWEVER WAS UNABLE TO SEE	PULL OUT OF PRI'S UNIT ONE STOPP	VATE ROAD OF TH	ie Casino Sign and) TO ENTER CTH BD. U STRUCK UNIT ONE IN	NIT TWO THOUGH THE REAR. THE S	UN PLAYED A	ROLE IN SHINING INTO		
	BOTH OPERATORS EYES MAKIN	G IT HARD TO SEE	:. UNIT ONE OPERA	ATOR WA	S COMPLAINING OF MI	NOR INJURIES. BO	TH VEHICLES	HAD MINOR DAMAGE.		

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

Crash Date 10/26/2021

	Location —							
	ON S3268 CTHBD NB			Latitude	1		Longit	ude
	1010 FT N			43.527	43.527924934 -		-89.77	77785287
	OF COOP LN	co)		X Coord	linate		Y Cooi	rdinate
	(HOUSE/BUILDING S32 	00)		275530	275530.6875 4823191.5			
	IN THE TOWN OF DELT	ON		Structui HOUSI	e Type E/BUILDING	3		
	Crash Scene							
•	First Harmful Event			FirstHa	rmful Event L	ocation.		
	MOTOR VEH IN TRANS	PORT		OUTS	DE RIGHT	OF-WAY (TR	RAFFICV	VAY)
	Manner of Collision			Light Co	ndition			
	03 - FRONT TO REAR			DAYL	GHT			
	Road Surface Condition(s)			Roadwa	ay Factor(s)			
	DRY							
	Environment Factor(s)							
	NONE			NONE				
	Weather Condition(s)							
	CLEAR							
	Animal Type			Relation	To Trafficwa	av		
						Y - PARKIN	G LOT	
	Crash Classification - Locati	ion		Crash C	lassification	-Jurisdiction		
	TRIBAL LAND			INDIA	RESERVA	ATION/TRUS	T	
	TribalLand				Access Control Special Study			Special Study
	HO-CHUNK NATION	1			PARTIAL CONTROL			
	Within Interchange Area NO	Junction Location DRIVEWAY ACCESS		Intersection Type NOT AN INTERS	N INTERSECTION			
	Unit Summary							
	Unit Summary ■ Unit Status		Vehicle Ope	erating As Classificati	on	UnitType		
			Vehicle Ope	erating As Classificati	on	Unit Type AUTOMOI	BILE	
	Unit Status		1	erating As Classificati	on	1		ements
2	Unit Status IN TRANSIT		D CLASS	-		AUTOMOI Operating A	s Endors	
	Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY VEHI Total Occs	CLE Train/Bus#Recorded	D CLASS Total#Citat	erating As Classificati	TotalTra	AUTOMOI Operating A	s Endors Total Ha	ements azMatTypes
	Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY VEHI Total Occs 02	Train/Bus#Recorded	D CLASS Total # Citat 0	ions Issued	Total Tra	AUTOMOI Operating A	s Endors Total Ha	azMatTypes
01	Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY VEHI Total Occs 02 Insurance?	Train/Bus#Recorded Direction Of Travel	D CLASS Total # Citat 0	ions Issued	Total Tra 0 Speed Li	AUTOMOI Operating A	s Endors Total Ha O Total La	azMatTypes
01	Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY VEHI Total Occs 02 Insurance? NO	Direction Of Travel WESTBOUND	Total#Citat 0 Pre	ions Issued CrashTire Mark	Total Tra	AUTOMOI Operating A illers	Total Ha O Total La 02	azMatTypes ines
	Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY VEHI Total Occs 02 Insurance?	Train/Bus#Recorded Direction Of Travel WESTBOUND on With	Total # Citat 0 Pre Special Fur	ions Issued CrashTire Mark	Total Tra 0 Speed Li	AUTOMOI Operating A	Total Ha 0 Total La 02 Motor Ve	azMatTypes ines phicle Use
01	Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY VEHI Total Occs 02 Insurance? NO Most Harmful Event: Collision	Train/Bus#Recorded Direction Of Travel WESTBOUND on With	Total # Citat 0 Pre Special Fur	ions Issued CrashTire Mark ction IAL FUNCTION	Total Tra 0 Speed Li	AUTOMOI Operating A illers mit Emergency NOT APPI	Total Ha 0 Total La 02 Motor Ve	azMatTypes ines phicle Use
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01	Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY VEHICTOTAL OCCS 02 Insurance? NO Most Harmful Event: Collision MOTOR VEH IN TRANS Traffic Way PARKING LOT OR PRIV	Direction Of Travel WESTBOUND On With PORT	Total # Citat 0 Pre Special Fur NO SPEC Traffic Cont STOP SIG	ions Issued CrashTire Mark Iction IAL FUNCTION rol N	Total Tra 0 Speed Li	AUTOMOI Operating A iilers mit Emergency NOT APPI Traffic Cont NO Road Grade	Total Ha Total La Total La O2 Motor Ve ICABLI rol Inoper	azMatTypes unes shicle Use
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UNIT 01	Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY VEHIT Total Occs 02 Insurance? NO Most Harmful Event: Collision MOTOR VEH IN TRANS Traffic Way PARKING LOT OR PRIV Surface Type BLACKTOP (BITUMINO) Truck Bus or HazMat NO Vehicle License Plate Number AJC5053 Vehicle Identification I	Train/Bus#Recorded Direction Of Travel WESTBOUND On With PORT (ATE PROPERTY DUS)	Total # Cital 0 Pre Special Fur NO SPEC Traffic Cont STOP SIG Road Curva STRAIGH	ions Issued CrashTire Mark ction IAL FUNCTION rol N	TotalTra 0 Speed Li N/A	AUTOMOI Operating A illers mit Emergency NOT APPI Traffic Cont NO Road Grade LEVEL Country of Is	Total Ha 0 Total La 02 Motor Ve ICABLI rol Inoper	azMatTypes unes shicle Use
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01 UNIT 01	Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY VEHINALITY VEHINALITY Total Occs 02 Insurance? NO Most Harmful Event: Collision MOTOR VEH IN TRANS Traffic Way PARKING LOT OR PRIV Surface Type BLACKTOP (BITUMINO) Truck Bus or HazMat NO Vehicle License Plate Number AJC5053 Vehicle Identification If 3C4PDCAB6LT199 Color RED - RED Initial Contact Point	Train/Bus # Recorded Direction Of Travel WESTBOUND ON With PORT (ATE PROPERTY DUS)	Total # Citat 0 Pre Special Fur NO SPEC Traffic Conf STOP SIG Road Curva STRAIGH Plate Type AUT - AU Make DODGE Body Style	ions Issued CrashTire Mark ction IAL FUNCTION ITOI IN Inture IT	TotalTra 0 Speed Li N/A St Wi Year	AUTOMOI Operating A illers mit Emergency NOT APPI Traffic Cont NO Road Grade LEVEL Country of is UNITED ST Model DURANGO	Total Ha 0 Total La 02 Motor Ve ICABLI rol Inoper	azMatTypes unes shicle Use
UNIT 01	Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY VEHIT Total Occs 02 Insurance? NO Most Harmful Event: Collision MOTOR VEH IN TRANS Traffic Way PARKING LOT OR PRIV Surface Type BLACKTOP (BITUMINO) Truck Bus or HazMat NO Vehicle License Plate Number AJC5053 Vehicle Identification If 3C4PDCAB6LT199 Color RED - RED	Train/Bus # Recorded Direction Of Travel WESTBOUND ON With PORT (ATE PROPERTY DUS)	Total # Citat 0 Pre Special Fur NO SPEC Traffic Cont STOP SIG Road Curva STRAIGH Plate Type AUT - AU Make DODGE Body Style 4D - 4DR	ions Issued CrashTire Mark ction IAL FUNCTION rol IN Isture T TOMOBILE	TotalTra 0 Speed Li N/A St Wi Year	AUTOMOI Operating A illers mit Emergency NOT APPI Traffic Cont NO Road Grade LEVEL Country of is UNITED ST Model DURANGO	Total Ha 0 Total La 02 Motor Ve ICABLI rol Inoper	azMatTypes anes chicle Use E rative/Missing

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21-10295

WISCONSIN MOTOR VEHICLE CRASH REPORT SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913 (608) 356-4895

Crash Date 10/26/2021

		Towed Due To Damage		^	ehicle Removed By				
		NOT TOWED			2011 F 3				
		What Driver Was Doing RIGHT TURN		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Vehicle Factors				
		Driver Prior Action Other		N	OT APPLICABLE				
		Dilver Filor Action Chief							
UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTIO	N	-					
9	0.1	OwnerName JENNIFER LYNN FRYE (608) 495-9691			Owner Address 527 ALEXANDER REEDSBURG, WI				
		Saguance Of Events							
	Sequence Of Events Event								
	0	MOTOR VEH IN TRANSPO	RT						
	02	Event							
	03	Event							
	_	Event							
	4								
		Driver JENNIFER LYNN FRYE (608) 495-9691			Citations issued	Sex FEMALE			
	Ŧ				Date of Birth	Race			
⊢	INDIVIDUAL				Date of Billi	WHITE			
5	3	Address 527 ALEXANDER AVE #18 REEDSBURG, WI 53959 , US			Driver License Number	•			
	Z				STATE: WISCONSIN COUNTRY: UNITED STATES				
		On Duty Crash			Safety Equipment				
	Sai	afety Equipment							
					SHOULDER & LAP	BELT			
		HelmetUse			Heimet Compliance				
		Eye Protection			Tint Compliance				
_ :		Injury Sev	erity						
2	呂	Injury Possib	LE INJUF	RY	NON DEPLOYED				
		Ejected E	jection Pa				Trapped/Extricated NOT TRAPPED		
		Medical Transport			EMS Agency Identifier		EMS Run#		
		NOT TRANSPORTED							
		Hospital			Date of Death Time of Death				
Distracted By Source NOT APPLICABLE (NOT DISTRACTED)									
		Distracted By Action NOT DISTRACTED							
		Non Motorist	nit#	Location					
		IVUIT WUIDTISL							

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Crash Date 10/26/2021

ı									
		Prior Action							
TINO	Action Action								
		Action Other						To/From School	
		Suspec	ed Alcohol t	Jse	Suspected Drug Use				
	1	Drug & Alcohol NO			NO				
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	•		Alcohol TestResults		
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results			
٤	100	Drug Type		1		•			
		Individual Condition							
		APPEARED NORMAL							
		021-0-20-042-042-03-01110-03-0-0-0-0-0-0-0-0-0-0-0-0-0-0	ndividual						
		Passenger HALLIE KAY LARIDAEN-MITCHELL			Citations ssued 0	Sex FEMALE			
 -	INDIWIDUAL				Date of Birth	Race WHITE			
FNO		Address 527 ALEXANDER AVE # 18			Driver License Number				
	=	REEDSBURG, WI 53959 , US			STATE: WISCONSIN COUNTRY: UNITED STATES				
	Saf	On Duty Crash Tety Equipment			Safety Equipment				
		Row Seat Position 01 - FRONT ROW 09 - RIGHT			SHOULDER & LAP BELT				
		HelmetUse		HelmetCompliance					
		Eye Protection			Tint Compliance				
2	200	Injury Severity NO APPARENT INJURY			Airbag NON DEPLOYED				
		Ejected	Ejection Pa	ith	l		Trapped/Extricated		
		NOT EJECTED Medical Transport	NOT EJE	CTED/NOT APPL	LICABLE EMS Agency Identifier		NOT TRAPPED		
		NOT TRANSPORTED					EMS Run#		
		Hospital			Date of Death		Time of Death		
		Distracted By	ed By Source	9	•		•		
		Distracted By Action							
		Non Motorist	Unit#	Location					
		Prior Action							

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 10/26/2021

		Action							
	7								
╘	NDIVIDUAL								
LIND	DΙΚ								
	N								
		Action Other							To/From School
		Drug & Alcohol NO	pected Alcohol U	se	Suspected Drug Use				
		Alcohol Test Given		Alcohol Test Typ			Alcohol Tes	st Results	
		TEST NOT GIVEN		Drug Test Type		Dwg Taat Baay	<u> </u>		
		Drug Test Given TEST NOT GIVEN		Diag restrype		Drug Test Resu	ıs		
10	005	Drug Type							
		Individual Condition APPEARED NORMAL							
		t Summary Status		Iv	Vehicle Operating As Class	ification	UnitType		
		RANSIT			D CLASS	TRUCK			
02		cle Type				Operating As Endorsements			
_		ORT) UTILITY VEHICLE II Occs Train/Bus#Recorded			Total # Citations Issued	ailers Total HazMat Types			
	01	rance?	Direction Of Tra		0 0 Speed Lin		0 imit Total Lanes		26
⊨	YES		WESTBOUND		Pre CrashTire Spee N/A		02		
		:Harmful Event: Collision W FOR VEH IN TRANSPOI			Special Function NO SPECIAL FUNCTIO	Emergency Motor Vehicle Use NOT APPLICABLE			
		ic Way KING LOT OR PRIVATI	F PROPERTY	1	Traffic Control STOP SIGN	Traffic Control Inoperative/Missing NO			
		ace Type		§	Road Curvature		Road Grade		
		CKTOP (BITUMINOUS))		STRAIGHT	LEVEL			
	NO NO	k Bus or HazMat							
	1	Vehicle				cecececececece			
		License Plate Number RSR920			Plate Type LTK - LIGHT TRUCK	St WI	Country of Is		
02	02	Vehicle Identification Numl			Make	Year	Model	Model	
_	0	5LMJJ2J5XCEL02709 Color			LINCOLN Body Style	2012	NAV Bus Use		
		WHI - WHITE			4D - 4DR				
⊨	CLE	Initial Contact Point 12 - FRONT			Vehicle Damage	DENIED 44 LE	ET EDONT		7 8 9 10 11
L N	VEHICLE	Extent Of Damage MINOR DAMAGE			01 - RIGHT FRONT CO CORNER, 12 - FRONT		FIFKUNI		6 T2 5 4 3 2 1
		Towed Due To Damage NOT TOWED			Vehicle Removed By				
		What Driver Was Doing ENTERING TRAFFIC L	ANE						

6TL0B8M7ZB

21-10295

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Crash Date 10/26/2021

Insurance Company STATE-FARM-GENERAL-INS-CO Individual Driver RITA AGNES MC GUINNESS (773) 502-8393 Address 23564 JUNCTION AVE WILTON, WI 54670 , US Safety Equipment Row 01 - FRONT ROW 101 - FRONT ROW 103 - LEFT 103 - LEFT 103 - LEFT 104 - LEFT 105 - LEFT 105 - LEFT 106 - LEFT 107 - LEFT 108 - LEFT 109					_				
Differ Actions FAILURE TO CONTROL Owner Name STEVEN D RANDALL (773) 502-8393 Sequence Of Events Event Event Event Event Event FOICY Holder Insurance Compeny STATE-PARM-GENERAL-INS-CO Individual Differ Actions SEVEN RANDALL Individual Differ Insurance Compeny STEVEN RANDALL Individual Differ Insurance Compeny STEVEN RANDALL Individual Differ Insurance Compeny STEVEN RANDALL Individual Differ Insurance Compeny STATE-PARM-GENERAL-INS-CO Individual Differ STATE-PARM-GENERAL-INS-CO Date of Birth Rose WHITE Actions Actions 23564 JUNCTION AVE WILTON, WI 54670 , US STEVEN RANDALL Individual Differ STATE-PARM-GENERAL-INS-CO Date of Birth Rose WHITE Actions SAFETY Equipment STATE: WISCONSIN COUNTRY: UNITE STATE: WISCONSIN COUNTRY: UNITE Row 01 - FRONT ROW O1 - FRONT ROW O						Vehicle Factors			
FAILURE TO CONTROL The street of the street	-555		Driver Prior Action Other			NOT APPLICABLE			
FAILURE TO CONTROL The street of the street	-5490,0000		Di Anti-						
Corner Name STEVEN D RANDALL (1773) 502-8393 Sequence Of Events Event	***************************************	ш							
Corner Name STEVEN D RANDALL (1773) 502-8393 Sequence Of Events Event		ᅙ							
Corner Name STEVEN D RANDALL (1773) 502-8393 Sequence Of Events Event	5	畫							
STEVEN D RANDALL (1773) 502-8393 Sequence Of Events Event Even	03000000	7							
Sequence Of Events Event	200000000						AVE		
Event	02	8							
Event	00,000								
Event Even	3434349								
Event Policy Holder Insurance Company STATE-FARM-GENERAL-INS-CO Individual Driver RITA AGNES MC GUINNESS (773) 502-8393 Address 23564 JUNCTION AVE WILTON, WI 54670 , US Part Female On Duty Crash Safety Equipment Row Of - FRONT ROW Of - Left Helmet Use Eye Protection Injury Seventy NO APPARENT INJURY NO APPARENT INJURY NO T EJECTED NOT EJECTED NOT EJECTED NOT EJECTED NOT EJECTED NOT TRANSPORTED Distracted By Distracted By Distracted By Distracted By Source NOT APPLICABLE (NOT DISTRACTED) Distracted By Distrac	20040404040	5		ORT					
Event Policy Holder Insurance Company STATE-FARM-GENERAL-INS-CO Individual Driver (773) 502-8393 Address (773) 502-8393 Address 23564 JUNCTION AVE WILTON, WI 54670 , US Safety Equipment Row 01 - FRONT ROW 01 - FRONT ROW 01 - FRONT ROW 107 - LEFT Helmet Use Eye Protection Injury Sevenity NO APPARENT INJURY NO APPARENT INJURY NO APPARENT INJURY NON DEPLOYED Ejected NOT EJECTED NOT EJECTED/NOT APPLICABLE Medical Transport NOT TRANSPORTED Distracted By Action Distracted By Action Distracted By Action Individual STEVEN RANDALL Sex FEMALE Date of Birth WHITE Priver License Number STATE: WISCONSIN COUNTRY: UNITE	000000000000000000000000000000000000000	엄	Event						
POLICY Holder Insurance Company STATE-FARM-GENERAL-INS-CO Individual Driver RITA AGNES MC GUINNESS (773) 502-8393 Address 23564 JUNCTION AVE WILTON, WI 54670 , US Safety Equipment Row 01 - FRONT ROW 01 - FRONT ROW Helmet Use Eye Protection Injury Severity NO APPARENT INJURY NO APPARENT INJURY Modical Transport NOT EJECTED/NOT APPLICABLE Medical Transport NOT TRANSPORTED Distracted By Action Distracted By Action Injury Distracted By Source Distracted By Action Injury Distracted By Action Individual STEVEN RANDALL Sex FEMALE (Clations Issued FEMALE (NOT VERTICAL SEX WHITE Address Safety Equipment			Event						
Policy Holder Insurance Company STATE-FARM-GENERAL-INS-CO Individual Driver RITA AGNES MC GUINNESS (773) 502-8393 Driver Rita Agnes MC GUINNES (773) 502-8393 Driver Rita Agnes MC GUINNESS (773) 502-8393 Sate Political Male Male Male Male Male Male Male Ma	Chicagologic		Event						
Insurance Company STATE-FARM-GENERAL-INS-CO Individual STEVEN RANDALL	9000000								
Individual Driver RITA AGNES MC GUINNESS (773) 502-8393 Address 23564 JUNCTION AVE WILTON, WI 54670 , US Priver License Number STATE: WISCONSIN COUNTRY: UNITE STATE: WISCONSIN COUNTRY: UN	╘								
Driver RITA AGNES MC GUINNESS (773) 502-8393 Address 23564 JUNCTION AVE WILTON, WI 54670, US On Duty Crash Safety Equipment Row 01 - FRONT ROW 07 - LEFT Helmet Use Eye Protection Injury Severity NON DEPLOYED Ejected NOT EJECTED NOT APPLICABLE Medical Transport NOT TRANSPORTED Distracted By Source NOT APPLICABLE (NOT DISTRACTED) Distracted By Action	5								
RITA AGNES MC GUINNESS (773) 502-8393 RITA AGNES MC GUINNESS (773) 502-8393 Date of Birth Race WHITE Address 23564 JUNCTION AVE WILTON, WI 54670 , US STATE: WISCONSIN COUNTRY: UNITE Row 01 - FRONT	Sections		CONT. OCC. CONT. C						
Address 23564 JUNCTION AVE WILTON, WI 54670 , US Safety Equipment Row 01 - FRONT ROW 01 - LEFT Helmet Use Eye Protection Injury Severity NO APPARENT INJURY Medical Transport NOT TRANSPORTED Distracted By Action	(5)		RITA AGNES MC GUINNESS (773) 502-8393						
Safety Equipment Row 01 - FRONT ROW 07 - LEFT Helmet Use Helmet Compliance Eye Protection Tint Compliance Eye Protection Airbag NON DEPLOYED Ejected Ejection Path NOT EJECTED NOT EJECTED/NOT APPLICABLE Medical Transport NOT TRANSPORTED Hospital Distracted By Source NOT APPLICABLE (NOT DISTRACTED) Distracted By Action	× 200	\$							
Safety Equipment Row 01 - FRONT ROW 07 - LEFT Helmet Use Helmet Compliance Eye Protection Tint Compliance Eye Protection Airbag NON DEPLOYED Ejected Ejection Path NOT EJECTED NOT EJECTED/NOT APPLICABLE Medical Transport NOT TRANSPORTED Hospital Distracted By Source NOT APPLICABLE (NOT DISTRACTED) Distracted By Action	Ę	8			Britant in and Number				
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Row 01 - FRONT ROW 07 - LEFT HelmetUse Helmet Compliance Eye Protection Tint Compliance Injury Injury Severity Airbag NON DEPLOYED	56545454545		On Duty Crash		Safety Equipment				
Box	35504055	Sai	fety Equipment						
Helmet Use Helmet Compliance Eye Protection Tint Compliance Injury No APPARENT INJURY Airbag NON DEPLOYED Ejected Ejection Path NOT EJECTED NOT EJECTED/NOT APPLICABLE Medical Transport NOT TRANSPORTED Hospital Distracted By Source NOT APPLICABLE (NOT DISTRACTED) Distracted By Action	49494949					SHOULDER & LAP	BELT		
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Injury Injury Airbag NON DEPLOYED	200000000000000000000000000000000000000		Eve Protection			TintCompliance			
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Medical Transport EMS Agency Identifier EMS Agen	0.0000000		Ejected	Ejection Pa	ith			Trapped/Extricated	
NOT TRANSPORTED Hospital Distracted By Source NOT APPLICABLE (NOT DISTRACTED) Distracted By Action	7095			MOLEJE	CTED/NOT APP			NOT TRAPPED EMS Run#	
Distracted By Source NOT APPLICABLE (NOT DISTRACTED) Distracted By Action	30000000		a						
Distracted By NOT APPLICABLE (NOT DISTRACTED) Distracted By Action	(2000)		Hospital			Date of Death		Time of Death	
Distracted By Action	000000000		Distracted RV	ted By Source	e (NOT DICTO	I CTED		I	
	Contraction		Distracted By Action	u FLICADL	L (NO I DISTRA	(C I ED)			
W43393	90000000		NOT DISTRACTED	4.1 15.42	I. a				
Non Motorist Location	Carpor Control		Non Motorist	Unit#	Location				

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 10/26/2021

1 #		in. As					
		Prior Action Prior Action					
		Action					
	7						
<u> </u>	3						
UNIT	INDIVIDUAL						
5	2						
	9						
8							
							I
		Action Other					To/From School
		Suspected Alcohol	Use	Suspected Drug Use			
	1	Drug & Alcohol NO		NO			
		Alcohol Test Given	Alcohol Test Type			Alcohol Test Results	
		TEST NOT GIVEN					
Į į		Drug Test Given	Drug Test Type		Drug Test Results		
		TEŠT NOT GIVEN					
	m	Drug Type			<u> </u>		
02	883	Diag type					
		Individual Condition					
		APPEARED NORMAL					