WISCONSIN MOTOR VEHICLE **CRASH REPORT**

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

mary Crash Document# ish Time ish Sp PM ish Notified ish Oo PM I Run	21-1165 Date Arriv 12/04/20 Total Unit 02 ure School Be	red 021	Investigating C DEPUTY J. C Time Arrived 06:02 PM Total Injured 00 Trailer of	Total Kille	OD
ish Type	Total Unit 02 ure School Bu	Work Zone	06:02 PM Total Injured 00 Trailer of	00	Reporting
Active School Zone	Total Unit 02 ure School Bu	work Zone	Total Injured 00	00	Reporting
Active School Zone	School Bi		☐ Trailer o		
ısh Type	NO	us Related	Tags		
ssh Type 4000 (STANDARD CRASH	l)				
			Amended	i	Secondary Crash
			P	hotos By	
Entry into Wallgreens	STOP	01			rmation
	٨	IOT TO SCALE			
	Entry into Wallgreens	Entry into Wallgreens STOP	STOP Entry into Wallgreens NOT TO SCALE fficer, agree that I have not added any CJIS data in this	O1 O	NONE NONE NONE NOT TO SCALE fficer, agree that I have not added any CJIS data in this report.

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Crash Date 12/04/2021

	cation 💳									
26	STH33 EB 5 FT W				Latitude 43.47487	72307		Longitud	de 9912482	
IN	STH136 EB THE VILLAGE OF WE SAUK COUNTY	ST BARABOO		X Coordinate 275970.65625			Y Coordinate 4817278			
114	SAUR COURT					Туре				_
Cra	ash Scene 💻									_
	stHarmfulEvent DTOR VEH IN TRANSF	PORT			First Harm ON ROA		_ocation			
	Manner of Collision 01 - ANGLE				Light Cond DARK/LI					
Ro	ad Surface Condition(s)				Roadway	Factor(s)				
DR										
	vironment Factor(s) ONE				NONE					
We	ather Condition(s)				-					
CL	EAR									
Ani	malType			Relation To Trafficway TRAFFICWAY - ON ROAD						
Crash Classification - Location PUBLIC PROPERTY						Crash Classification - Jurisdiction NO SPECIAL JURISDICTION				
Tribal Land						Access Control PARTIAL CONTROL			Special Study	
Wit	hin Interchange Area	Junction Location DRIVEWAY ACCESS		Intersection NOT AN		tion Type N INTERSECTION				_
Un	it Summary =									
Un	t Status		1	erating As C	lassification		UnitType			_
ı	TRANSIT nicle Type		D CLASS	D CLASS				AUTOMOBILE Operating As Endorsements		
	SSENGER CAR									
Tot	al Occs	Train/Bus#Recorded	Total#Cita	tions Issued	Total Trail		ilers Total Haz		:Mat Types	
Ins YE	urance? S	Direction Of Travel EASTBOUND	Pre	CrashTire Mark	Speed Lin		mit	TotalLan	es	_
Мо	st Harmful Event: Collision	With		Special Function NO SPECIAL FUNC Traffic Control NO CONTROL		l		Emergency Motor Vehicle Use NOT APPLICABLE Traffic Control Inoperative/Missing NO		_
1	OTOR VEH IN TRANSF Iffic Way	OK I								_
	O-WAY, NOT DIVIDED)								
	face Type ACKTOP (BITUMINOL	JS)	Road Curv STRAIGH				Road Grade LEVEL			
Tru	ck Bus or HazMat									_
_	Vehicle					St	LCountry of le	suance		
	License Plate Number 45139DS		1	Plate Type AUT - AUTOMOBIL		WI	Country of Issuance UNITED STATES			
2	Vehicle Identification Number 2G4WS52J621225405					Year 2002	Model CENTURY			
	Color		BUICK Body Style SD - SEI			2002	Bus Use			
	SIL - SILVER (ALUMINUM) Initial Contact Point			er414						—
	Initial Contact Point	09 - LEFT SIDE MIDDLE								

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١.	Щ	Γ		Vehicle Damage					
IN	VEHIC	Extent Of Damage MINOR DAMAGE		09 - LEFT SIDE MIDD	LE		5 4 8 2 1		
		Towed Due To Damage		Vehicle Removed By					
		NOT TOWED		OPERATOR					
		What Driver Was Doing		Vehicle Factors					
		LEFT TURN Driver Prior Action Other		NOT APPLICABLE					
 -	<u> </u>	Driver Actions NO CONTRIBUTING ACTION							
N N	VEHICLE								
٤	-	OwnerName CONNIE M MILLER		Owner Address S7559 USH 12 E4 NORTH FREEDON	M. WI 53951 . US				
				TOTAL TALLED SIN, W. 33337 , 30					
		Sequence of Events							
	5	MOTOR VEH IN TRANSPOR	RT						
	30	Event							
	63	Event							
l									
	8	Event							
_									
<u></u>		Policy Holder Insurance Company		Individual					
UNIT		Policy Holder Insurance Company 1ST-AUTO-&-CASUALTY-I	NS-CO	ondo montantimo montantimo montantimo menta					
UNIT		Policy Holder Insurance Company 1ST-AUTO-&-CASUALTY-IN		Individual CONNIE MILLER					
TIND		Policy Holder Insurance Company 1ST-AUTO-&-CASUALTY-IN Individual Driver		Individual CONNIE MILLER Citations Issued	Sex				
TIND		Policy Holder Insurance Company 1ST-AUTO-&-CASUALTY-IN Individual Driver HEATHER S NILES		Individual CONNIE MILLER Citations Issued 0	Sex FEMALE				
		Policy Holder Insurance Company 1ST-AUTO-&-CASUALTY-IN Individual Driver		Individual CONNIE MILLER Citations Issued	Sex FEMALE Race				
		Policy Holder Insurance Company 1ST-AUTO-&-CASUALTY-IN Individual Driver HEATHER S NILES (608) 963-1763		Individual CONNIE MILLER Citations Issued 0 Date of Birth	Sex FEMALE				
UNIT		Policy Holder Insurance Company 1ST-AUTO-&-CASUALTY-IN Individual Driver HEATHER S NILES		Citations Issued Date of Birth Driver License Number	Sex FEMALE Race WHITE				
		Policy Holder Insurance Company 1ST-AUTO-&-CASUALTY-IN Individual Driver HEATHER S NILES (608) 963-1763 Address		Individual CONNIE MILLER Citations Issued 0 Date of Birth	Sex FEMALE Race WHITE				
	INDIVIDUAL	Policy Holder Insurance Company 1ST-AUTO-&-CASUALTY-IN Individual Driver HEATHER S NILES (608) 963-1763 Address S7559 US HWY # E4	51 , US	Citations Issued Date of Birth Driver License Number	Sex FEMALE Race WHITE				
	INDIVIDUAL	Policy Holder Insurance Company 1ST-AUTO-&-CASUALTY-IN Individual Driver HEATHER S NILES (608) 963-1763 Address S7559 US HWY # E4 NORTH FREEDOM, Wt 5395	51 , US	Citations Issued O Date of Birth Driver License Number STATE: WISCONSIN	Sex FEMALE Race WHITE				
	INDIVIDUAL	Policy Holder Insurance Company 1ST-AUTO-&-CASUALTY-IN Individual Driver HEATHER S NILES (608) 963-1763 Address S7559 US HWY # E4 NORTH FREEDOM, WI 5395 Cety Equipment Row	51 , US Crash Seat Position	Citations Issued Citations Issued Date of Birth Driver License Number STATE: WISCONSIN	Sex FEMALE Race WHITE				
	INDIVIDUAL	Policy Holder Insurance Company 1ST-AUTO-&-CASUALTY-IN Individual Driver HEATHER S NILES (608) 963-1763 Address S7559 US HWY # E4 NORTH FREEDOM, WI 5398 Fety Equipment Row 01 - FRONT ROW	51 , US Crash Seat Position	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP	Sex FEMALE Race WHITE				
	INDIVIDUAL	Policy Holder Insurance Company 1ST-AUTO-&-CASUALTY-IN Individual Driver HEATHER S NILES (608) 963-1763 Address S7559 US HWY # E4 NORTH FREEDOM, Wt 5395 Fety Equipment Row 01 - FRONT ROW Helmet Use	51 , US Crash Seat Position 07 - LEFT	Individual CONNIE MILLER Citations Issued Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP Helmet Compliance	Sex FEMALE Race WHITE				
TNU	S INDIVIDUAL	Policy Holder Insurance Company 1ST-AUTO-&-CASUALTY-IN Individual Driver HEATHER S NILES (608) 963-1763 Address S7559 US HWY # E4 NORTH FREEDOM, Wt 5395 For Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Sev. NO APP	51 , US Crash Seat Position 07 - LEFT Perity ARENT INJURY Ejection Path	Citations Issued Citations Issued Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP II Helmet Compliance Tint Compliance Airbag NON DEPLOYED	Sex FEMALE Race WHITE	TED STATES			
TNU	S INDIVIDUAL	Policy Holder Insurance Company 1ST-AUTO-&-CASUALTY-IN Individual Driver HEATHER S NILES (608) 963-1763 Address S7559 US HWY # E4 NORTH FREEDOM, Wt 5395 Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Sev. NO APP) Ejected NOT EJECTED	51 , US Prash Seat Position 07 - LEFT	Citations Issued Connie Miller Citations Issued Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP II Heimet Compliance Tint Compliance Airbag NON DEPLOYED	Sex FEMALE Race WHITE	TED STATES Trapped/Extricated NOT TRAPPED			
TNU	S INDIVIDUAL	Policy Holder Insurance Company 1ST-AUTO-&-CASUALTY-IN Individual Driver HEATHER S NILES (608) 963-1763 Address S7559 US HWY # E4 NORTH FREEDOM, Wt 5395 Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Sev. NO APP/ Ejected NOT EJECTED Medical Transport	51 , US Crash Seat Position 07 - LEFT Perity ARENT INJURY Ejection Path	Citations Issued Citations Issued Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP II Helmet Compliance Tint Compliance Airbag NON DEPLOYED	Sex FEMALE Race WHITE	TED STATES			
TNU	S INDIVIDUAL	Policy Holder Insurance Company 1ST-AUTO-&-CASUALTY-IN Individual Driver HEATHER S NILES (608) 963-1763 Address S7559 US HWY # E4 NORTH FREEDOM, Wt 5395 Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Sev. NO APP) Ejected NOT EJECTED	51 , US Crash Seat Position 07 - LEFT Perity ARENT INJURY Ejection Path	Citations Issued Connie Miller Citations Issued Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP II Heimet Compliance Tint Compliance Airbag NON DEPLOYED	Sex FEMALE Race WHITE	TED STATES Trapped/Extricated NOT TRAPPED			

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ı											-
		Distracted By	Distracted By Source NOT APPLICABLE	:e LE (NOT DISTRA:	CTED)						
		Distracted By Action NOT DISTRACTED									
		Non Motorist	Striking Unit#	Location							
		Prior Action									
		Action									
UNIT	NDWIDUAL										
	Z	Action Other								To Trans Calcad	
		Action Other								To/From School	
	l	Drug & Alcohol	Suspected Alcohol NO		Suspected Drug Use NO						
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	;			AlcoholTes	t Results		
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test	Results				
10	B	Drug Type									
		Individual Condition								_	
		APPEARED NORM	IAL								
•	Uni	t Summary •									
		Status		V	ehicle Operating As Class	ification		Unit Type			_
		TRANSIT			D CLASS			AUTOMOBILE			
05	PAS	cle Type SSENGER CAR						Operating As Endorsements			
	Tota 1	lOccs	Train/Bus#Re	0	otal#Citations Issued	0	tal Traile		Total HazN		
E	NO	Insurance? Direction Of Travel NO WESTBOUND		ID [Pre CrashTire S Mark 2		eed Limi	Limit Total Lan			
N O	MostHarmful Event: Collision With MOTOR VEH IN TRANSPORT				Special Function NO SPECIAL FUNCTION			Emergency Motor Vehicle Use NOT APPLICABLE			
		fic Way KKING LOT OR PRIV	/ATE PROPERTY		raffic Control TOP SIGN			Traffic Cont	rol Inoperati	ive/Missing	
		ace Type	Niie)		oad Curvature			Road Grade			
		k Bus or HazMat	,03)		TRAIGHT			LEVEL			
	NO										
		Vehicle		************		Ta					
		License Plate Number 919XJA	r		Plate Type St AUT - AUTOMOBILE WI			Country of Is UNITED S1			
~		Vehicle Identification I	Number		Vake	Yea		Model			
02	8	2G1WT55K869194	1521		CHEVROLET	200		IMPALA L'	Г		
		Color TAN - TAN			Body Style 4D - 4DR			Bus Use			
		Initial Contact Point 01 - RIGHT FRONT	CORNER .								

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21-11653

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UNIT	VEHICLE	Extent Of Damage MINOR DAMAGE	Vehicle Damage 01 - RIGHT FRONT C	7 8 9 10 11 5 12 5 4 3 2 1					
		Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR					
		What Driver Was Doing LEFT TURN Driver Prior Action Other		Vehicle Factors NOT APPLICABLE					
TINO	VEHICLE	Driver Actions FAILED TO YIELD RIGHT-O	F-WAY						
05	02	Owner Name JESUS SALAZAR RIVAS (608) 477-7584		Owner Address 420 6TH AVE BARABOO, WI 53	913 , US				
		Sequence Of Events		'					
	5	Event MOTOR VEH IN TRANSPOR	T.						
	22	Event							
	8	Event							
	3	Event							
		individual							
		Driver		Citations Issued					
	7	DIANNE MARY MAYR (608) 477-9070		0	FEMALE				
╘	3			Date of Birth	Race WHITE				
TINO	INDIVIDUAL	Address 420 6TH AVE BARABOO, WI 53913 , US		Driver License Number STATE: WISCONSI		TED STATES			
	Ça:	On Duty Cr	ash	Safety Equipment					
		Row 01 - FRONT ROW	SHOULDER & LAP BELT						
		HelmetUse	•	Helmet Compliance					
		Eye Protection	TintCompliance						
05	805	Injury Seve	Airbag NON DEPLOYED						
		3 1	ection Path	NI IOABI E		Trapped/Extricated			
		NOT EJECTED N Medical Transport	OT EJECTED/NOT APP	EMS Agency Identifier		NOT TRAPPED EMS Run#			
		NOT TRANSPORTED							
		Hospital		Date of Death		Time of Death			
		Distracted By NOT APP	By Source PLICABLE (NOT DISTRA	ACTED)					

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		Distracted By Action NOT DISTRACTED					
		Non Motorist Striking Unit#	Location				
		Prior Action					
TINO	INDWIDUAL	Action					
		Action Other					To/From School
	ı	Drug & Alcohol NO	Jse	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	3	
02	005	Drug Type					
		Individual Condition APPEARED NORMAL					