WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 12/11/2021

Crash Time 01:00 PM

1	Date Arri	rived	Time Arrived			
Crash Time 01:00 PM		2021	Time Arrived 03:02 PM			
Time Notified 02:43 PM		nits	Total Injured	Total Killed 00		
d Run Lane Closure		Work Zone	Trailer or Towed		[Reporting Threshold
Antivo Cahaal Zana		Bus Related	Tags			
Crash Type DT4000 (STANDARD CRASH)			I Amandad I I			Secondary Crash
	Lane Closu	Lane Closure School NO	O1 Lane Closure Work Zone School Bus Related NO	O1 00 Lane Closure Work Zone Trailer or School Bus Related Tags NO	O1 00 00 Lane Closure Work Zone Trailer or Towed OOI Zone School Bus Related Tags	O1 00 00 Lane Closure Work Zone Trailer or Towed Ool Zone School Bus Related Tags

Diagram Reconstruction By Yum Yum Hill Rd Approx 3/5 mi. Photos By Additional Information NONE | I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report. SEE CASE NARRATIVE

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	Location —									
•	ON CTHDL SB 0.38 MI W				Latitude 43.41286	55108		Long -89.6	itude 12502414	
	OF YUMYUM HILL TRL IN THE TOWN OF MERF IN SAUK COUNTY	RIMAC			X Coordin 288486.3				/ Coordinate 1809979.5	
					Structure Type					
ı	Crash Scene				ı					
	First Harmful Event				First Harm	nful Event L	ocation			
	DITCH				ON ROADWAY					
	Manner of Collision				Light Condition					
	00 - NO COLLISION W/V	EHICLE IN TRANSPORT			DAYLIGHT					
	Road Surface Condition(s) WET, ICE	Roadway Factor(s)								
	Environment Factor(s)									
	NONE	NONE								
	Weather Condition(s)				1					
	CLEAR									
	Animal Type				Relation To Trafficway TRAFFICWAY - ON ROAD					
	Crash Classification - Location	on			Crash Cla	ssification -	Jurisdiction			
	PUBLIC PROPERTY				NO SPE	CIAL JUR	SDICTION			
	Tribal Land				Access Control Special Study NO CONTROL				Special Study	
	Within Interchange Area	Junction Location NON-JUNCTION		Intersection	ion Type I INTERSECTION					
	Unit Summary =									
	Unit Status		Vehicle Ope	erating As C	lassification	1	UnitType			
	IN TRANSIT		D CLASS		AUTOMOBILE					
5	Vehicle Type					Operating As Endorsements				
0	PASSENGER CAR	T	<u> </u>		L		ilers Total HazMat Types			
	Total Occs 3	Train/Bus#Recorded	Total#Citat	tions Issued		Total Trail		0		
⊨	Insurance?	Direction Of Travel SOUTHBOUND		CrashTire Mark	55		Total Lanes 2 Emergency Motor Vehicle Use NOT APPLICABLE Traffic Control Inoperative/Missing NO		anes	
	Most Harmful Event: Collisio DITCH	n With	Special Fun NO SPEC							
	Traffic Way TWO-WAY, NOT DIVIDE	D	Traffic Cont						erative/Missing	
	Surface Type		Road Curva	ature			Road Grade			
	BLACKTOP (BITUMINO	US)	CURVE RI	IGHT			DOWNHILL			
	Truck Bus or HazMat NO									
	Vehicle			eeeeeeeee	ecceeeee	ccccccccc	S S S S S S S S S S S S S			
	License Plate Number		Plate Type			St	Country of Is	suance		
	852RJJ	AUT - AU	JTOMOBIL	LE WI Year		UNITED STATES Model				
2	Vehicle Identification N 4S4BP61C6573613	Make SUBARU								
_						2005	LEGACY C	1 01		
	Color SIL - SILVER (ALUI	Body Style SW - STA	ATIONWA	GON		Bus Use				
	Initial Contact Point	,	Vehicle Da		-		<u> </u>			
L N	12 - FRONT Extent Of Damage DISABLING DAMAGE		15 - ALL AREAS					7 8 9 10 11 6 12		
5	Extent Of Damage		15 - ALL	AREAS					S 4 3 2 1	

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		Towed Due To Damage		l v	ehicle Removed By					
		TOWED DUE TO DISABLIN	IG DAMA	I .	RAIGS TOWING					
		What Driver Was Doing			ehicle Factors					
		NEGOTIATING CURVE		1						
				N	OT APPLICABLE					
		Driver Prior Action Other		"	O TAR EROADEE					
		Driver Actions								
	ш	SPEED TOO FAST/COND								
\vdash	VEHICLE									
N	Ŧ									
\neg	Ш									
		Owner Name			Owner Address					
		SHEILA RAE ELLIS-DONNI	ELL		S6193 YUM YUM H	HL # 2				
5	5	(608) 393-6135			MERRIMAC, WI 53	561 , US				
		l Sequence:Of/Events								
		Event								
	8	DITCH								
	8	Event								
	03	Event								
	3	Event								
	9									
		Individual								
		Driver	<u> </u>		Citations ssued Sex					
		JORDAN R SPEES			4 MALE					
	₫	(608) 393-6135			Date of Birth	Race				
⊢	INDIVIDUAL					WHITE				
ş	Ξ	Address			Driver License Number					
_	9	S6193 YUM YUM HL # 2	_		CTATE, MECCONCIN	LCOUNTRY, UNIT	TED STATES			
		MERRIMAC, WI 53561 , U	5		STATE: WISCONSIN COUNTRY: UNITED STATES					
		On Duty (Crash		Safety Equipment					
	Sai	ety Equipment								
		Row	SeatPo		SHOULDER & LAP I	BELT				
		01 - FRONT ROW	07 - LE	FT						
		Helmet Use			Heimet Compliance					
		Eve Protection		7.10						
		Eye Protection			Tint Compliance					
		Injury Se	vority		Airbag					
2	8	Injury NO APP	ARENT I	W.IIIRV	NON DEPLOYED					
		(((0)))))))(())	Ejection Pa		NON DET EOTED		Trapped/Extricated			
		l '	-	CTED/NOT APPL	ICABLE		NOT TRAPPED			
		Medical Transport		OTEDATOT ACTE	EMS Agency Identifier		NOT TRAPPED EMS Run#			
		NOT TRANSPORTED			Livio Agency identifies		Livio Main			
		Hospital			Date of Death		Time of Death			
		110-9 Prices			Date of Death		Time or Deads			
		I	d By Source	<u> </u>						
		Distracted By NOT AP	PLICABL	E (NOT DISTRAC	TED)					
		Distracted By Action								
		NOT DISTRACTED								
		Striking L	init#	Location						
		Non Motorist								
				•						

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		Prior Action												
 		Action												
	4													
⊨	NDWIDUAL													
L N	喜													
	Z													
		Action Other						To/From School						
	Suspected Alcohol Use Suspected Drug Use NO													
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results							
		TEST NOT GIVEN				I David Tarak Baranta								
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	.							
2	8	Drug Type		•		'								
		hadiolderal Candillan												
		Individual Condition APPEARED NORMAL												
		Individual Passenger ASHLEY ROSE ENDRES (608) 370-9231			Citations issued	Sex								
					0	FEMALE								
<u>_</u>	INDIVIDUAL				Date of Birth	Race WHITE								
F	Z	Address S6193 YUM YUM HILL RD #2 MERRIMAC, WI 53561 , US			Driver License Number	1								
	Z				STATE: WISCONSIN COUNTRY: UNITED STATES									
		On Duty	Crash		Safety Equipment									
	Sai	fety Equipment												
		Row 01 - FRONT ROW	Seat Po		SHOULDER & LAP	BELT								
		HelmetUse		Helmet Compliance										
		Eye Protection			Tint Compliance									
_	N	Injury Severity			Airbag									
2	8	injury no ap	PARENT II		NON DEPLOYED		I - 15 - 1 - 1							
		Ejected NOT EJECTED	Ejection Pa	iui CTED/NOT APPL	ICABLE		Trapped/Extricated NOT TRAPPED							
		MedicalTransport NOT TRANSPORTED			EMS Agency Identifier		EMS Run#							
		Hospital			Date of Death		Time of Death							
		Distract	ed By Source	-	<u> </u>		<u> </u>							
		Distracted By	,											
		Distracted By Action												
		Non Motorist	Unit#	Location										
		Prior Action		I .										

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		Action								
	INDIVIDUAL									
LIND	ŏ									
5	2									
	2									
		Action Other						To/From School		
		Drug & Alcohol NO	ected Alcoh	nol Use	Suspected Drug Use NO					
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results			
		TEST NOT GIVEN		/ doctror i cot i ypo	•		Additor i dott (dodino			
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	3			
2	8	Drug Type								
		1000								
		Individual Condition								
		APPEARED NORMAL								
		 ndividual								
		Passenger			Citations Issued	Sex				
		PARKER RAYMOND SP	EES		0	MALE				
	3				Date of Birth	Race				
LNO	Ī	Address			Driver License Number					
_	Address S6193 YUM YUM HILL RD #2 MERRIMAC, WI 53561, US				STATE: WISCONSIN COUNTRY: UNITED STATES					
		MERRAMAO, WI 5550 F	, 00		C /A L MODULO		1125 O IA 120			
		On Du	uty Crash		Safety Equipment					
	Sai	fety Equipment	,							
		Row		t Position	SHOULDER & LAP BELT					
		02 - SECOND ROW Helmet Use	07-	LEFT	Helmet Compliance					
		Treather Ode			1 seather Compilation					
		Eye Protection			Tint Compliance					
	•	niurv	Severity		Airbag					
2	8			T INJURY	NON DEPLOYED					
		Ejected	Ejection				Trapped/Extricated			
		NOT EJECTED Medical Transport	NOTE	JECTED/NOT APPL			NOT TRAPPED EMS Run#			
		NOT TRANSPORTED			EMS Agency Identifier		EWS KUN#			
		Hospital			Date of Death		Time of Death			
			-4-45-5							
		Distracted By Distra	cted By So	urce						
		Distracted By Action								
		Non Motorist	ng Unit#	Location						
		Prior Action								

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UNIT	Action						
	Action Other						To/From School
	Drug & Alcohol	Suspected Alco	phol Use	Suspected Drug Use NO			
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type		Alcohol Test Re:		
	Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
003	Drug Type		1				
	Individual Condition APPEARED NORM	1AL					
	Violations		KRKKKKKKKKKKKKKKKKKKKKKKKKKKKKKKKKKKKK		RERESERVED		
10	UTC Number BE132265	Issue To?	Statute Number 346.70(1)	Description FAILURE OF OPERA	TOR TO NOTIFY	Y POLICE OF ACCIDE	ENT
62	UTC Number BE132266	Issue To? 001	Statute Number 344.62(1)	Description OPERATE MOTOR \	EHICLE W/O IN	SURANCE	
8	UTC Number BE132267	Issue To? 001	Statute Number 343.44(1)(a)	Description OPERATING WHILE	SUSPENDED		
78	UTC Number BE132268	Issue To?	Statute Number 346.57(3)	Description DRIVING TOO FAST	FOR CONDITIO	NS	