WISCONSIN MOTOR VEHICLE CRASH REPORT

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

											(000) 000 4000
	Document Number Override	Primary Crash	Document#	Agency 22-019	Crash N 35	umber	Investigating DEPUTY H				
© ⊠	Crash Date 03/01/2022	Crash Time 04:35 PM		Date An 03/01/2			Time Arrived 04:54 PM				
3	Date Notified 03/01/2022	Time Notified 04:39 PM		Total Ur	Total Units 03			Total Injured Total Kill 02 00		d	
)BF	On Emergency Hi	t and Run	Lane Clos	ure	Wo	ork Zone	Trailer	or T	owed		Reporting Threshold
6TLOBFKDGM	Government Property	Active So	chool Zone	School NO	Bus Rela	ted	Tags			1	
9	Reportable	Crash Type DT4000 (STA	NDARD CRASI	H)			Amend	ed			Secondary Crash
	Description										
	Diagram W DE S Not To Scale	3 7				Saint		Pho DE	otos By PUTY H V	/OLZ #9	9137
		2)			N Washington Street	Saint John's School Monroe Street			0103		
			3		ANNOUNCE						
				<u>]</u>	\$10	***************************************					

UNITS 2 AND 3 WERE LEGALLY PARKED ON N WASHINGTON STREET. UNIT 1 WAS TRAVELING NB ON N WASHINGTON STREET. UNIT 1 APPROACHED THE STOP SIGN ON N WASHINGTON ST AT W MONROE ST. UNIT 1 STOPPED AT THE STOP SIGN THEN PROCEEDED NORTH, CROSSING THE CENTERLINE AND ENTERING THE ONCOMING LANE OF TRAFFIC. UNIT 1 STRUCK PARKED UNIT 2. UNIT 1 BACKED UP AND CONTINUED DRIVING NORTH IN THE ONCOMING LANE OF TRAFFIC. UNIT 1 VEERED LEFT AGAIN AND STRUCK PARKED UNIT 3. UNIT 1 DRIVER HELD THEIR FOOT ON THE GAS AND THEN LET OFF REVVING THE ENGINE MAKING THE VEHICLE PUSH FORWARD AND BACK AGAINST THE PARKED VEHICLE AND STRUCK IT THREE TO FOUR TIMES. UNIT 1 CAME TO REST

1151

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

AND THE OPERATOR LEFT ON FOOT

Location

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Crash Date 03/01/2022

	ON N WASHINGTON ST			Latitude 43.178076102		Longitude -90.069577993			
	OF W MONROE ST			X Coordinate		Y Coordinate			
	IN THE VILLAGE OF SPRI	NG GREEN		250519.734375	;	4785165.5			
				Structure Type NO STRUCTU	RE	•			
	Crash Scene			•					
	First Harmful Event			First Harmful Eve	nt Location				
	PARKED MOTOR VEHICL	E		ON ROADWAY	•				
	Manner of Collision			Light Condition	1 *				
	01 - ANGLE			DAYLIGHT					
	Road Surface Condition(s)			Roadway Factor(s)				
	DRY								
	Environment Factor(s)								
	NONE			NONE					
	Weather Condition(s)								
	CLOUDY								
	AnimalType			Relation To Traffi TRAFFICWAY	•				
	Crash Classification - Location			Crash Classificati					
	PUBLIC PROPERTY				NO SPECIAL JURISDICTION				
	TribalLand			Access Control NO CONTROL		Special Stud	iy		
	Within Interchange Area	Junction Location	Interse	ection Type					
	NO	NON-JUNCTION	NOT	AN INTERSECTION	l				
	Unit Summary -								
	Unit Status		Vehicle Operating A D CLASS	As Classification	Unit Type				
	IN TRANSIT		TRUCK						
5	Vehicle Type		Operating As Endorsements						
_	(SPORT) UTILITY VEHICL	Train/Bus#Recorded	Total#Citations lss	ued I Total	 Trailers	Total HazMat Types			
	1	Transbas // Recorded	4	0	, idiicio	0			
	Insurance?	Direction Of Travel	Pre Crash1	Fire Spee	d Limit	TotalLanes	es		
E	YES	NORTHBOUND	Mark Mark	25		2			
5						Emergency Motor Vehicle Use NOT APPLICABLE			
	Most Harmful Event: Collision V		Special Function NO SPECIAL FU	NCTION					
	PARKED MOTOR VEHICL		NO SPECIAL FU	NCTION	NOT APF	PLICABLE			
	PARKED MOTOR VEHICL Traffic Way	E		NCTION	NOT APF				
	PARKED MOTOR VEHICL	E	NO SPECIAL FU Traffic Control	NCTION	NOT APF	PLICABLE ntrol Inoperative/Missing			
	PARKED MOTOR VEHICL Traffic Way TWO-WAY, NOT DIVIDED	E	NO SPECIAL FU Traffic Control NO CONTROL	NCTION	Traffic Cor	PLICABLE ntrol Inoperative/Missing			
	PARKED MOTOR VEHICL Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS Truck Bus or HazMat	E	NO SPECIAL FU Traffic Control NO CONTROL Road Curvature	NCTION	NOT APF Traffic Cor NO Road Grad	PLICABLE ntrol Inoperative/Missing			
	PARKED MOTOR VEHICL Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS Truck Bus or HazMat NO	E	NO SPECIAL FU Traffic Control NO CONTROL Road Curvature	NCTION	NOT APF Traffic Cor NO Road Grad	PLICABLE ntrol Inoperative/Missing			
	PARKED MOTOR VEHICL Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS Truck Bus or HazMat NO Vehicle	E	NO SPECIAL FU Traffic Control NO CONTROL Road Curvature STRAIGHT		NOT APP Traffic Cor NO Road Grac LEVEL	PLICABLE Introl Inoperative/Missing			
	PARKED MOTOR VEHICL Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS Truck Bus or HazMat NO Vehicle License Plate Number	E	NO SPECIAL FU Traffic Control NO CONTROL Road Curvature STRAIGHT	St	NOT APP Traffic Cor NO Road Grad LEVEL Country of I	PLICABLE Introl Inoperative/Missing Ide Ide Issuance			
_	PARKED MOTOR VEHICL Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS Truck Bus or HazMat NO Vehicle License Plate Number NP9812	S)	NO SPECIAL FU Traffic Control NO CONTROL Road Curvature STRAIGHT	St	NOT APP Traffic Cor NO Road Grac LEVEL	PLICABLE Introl Inoperative/Missing Ide Ide Issuance			
01	PARKED MOTOR VEHICL Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS Truck Bus or HazMat NO Vehicle License Plate Number	s) mber	NO SPECIAL FU Traffic Control NO CONTROL Road Curvature STRAIGHT Plate Type AUT - AUTOMO	St BILE WI	NOT APP Traffic Coi NO Road Grac LEVEL Country of I UNITED S	PLICABLE Introl Inoperative/Missing Ide Ide Issuance			
	PARKED MOTOR VEHICL Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS Truck Bus or HazMat NO Vehicle License Plate Number NP9812 Vehicle Identification Nur 1J4GW48SX4C19862 Color	s) mber	NO SPECIAL FU Traffic Control NO CONTROL Road Curvature STRAIGHT Plate Type AUT - AUTOMO Make JEEP Body Style	St Wi Year	Traffic Con NO Road Grace LEVEL Country of I UNITED S Model GRAND C Bus Use	PLICABLE Introl Inoperative/Missing Ide			
	PARKED MOTOR VEHICL Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS Truck Bus or HazMat NO Vehicle License Plate Number NP9812 Vehicle Identification Nur 1J4GW48SX4C19862 Color GRY - GRAY	s) mber	NO SPECIAL FU Traffic Control NO CONTROL Road Curvature STRAIGHT Plate Type AUT - AUTOMO Make JEEP Body Style 4D - 4DR	St Wi Year	NOT APP Traffic Cor NO Road Grad LEVEL Country of I UNITED S Model GRAND C	PLICABLE Introl Inoperative/Missing Ide			
	PARKED MOTOR VEHICL Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS Truck Bus or HazMat NO Vehicle License Plate Number NP9812 Vehicle Identification Nur 1J4GW48SX4C19862 Color GRY - GRAY	s) mber	NO SPECIAL FU Traffic Control NO CONTROL Road Curvature STRAIGHT Plate Type AUT - AUTOMO Make JEEP Body Style 4D - 4DR Vehicle Damage	St Wi Year 2004	Country of l UNITED S Model GRAND C Bus Use NOT A BU	PLICABLE Introl Inoperative/Missing Ide	10 11		
	PARKED MOTOR VEHICL Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS Truck Bus or HazMat NO Vehicle License Plate Number NP9812 Vehicle Identification Nur 1J4GW48SX4C19862 Color GRY - GRAY	s) mber	NO SPECIAL FU Traffic Control NO CONTROL Road Curvature STRAIGHT Plate Type AUT - AUTOMO Make JEEP Body Style 4D - 4DR Vehicle Damage 01 - RIGHT FRO	St Wi Year	Country of l UNITED S Model GRAND C Bus Use NOT A BU	PLICABLE Introl Inoperative/Missing Ide Issuance STATES CHER 7 8 9	12		
UNIT 01	PARKED MOTOR VEHICL Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS Truck Bus or HazMat NO Vehicle License Plate Number NP9812 Vehicle Identification Nur 1J4GW48SX4C19862 Color GRY - GRAY Initial Contact Point 12 - FRONT	mber	NO SPECIAL FU Traffic Control NO CONTROL Road Curvature STRAIGHT Plate Type AUT - AUTOMO Make JEEP Body Style 4D - 4DR Vehicle Damage 01 - RIGHT FRO	St Wi Year 2004 DNT CORNER, 02 - FT SIDE FRONT, 1	Country of l UNITED S Model GRAND C Bus Use NOT A BU	PLICABLE Introl Inoperative/Missing Ide Issuance BTATES IHER US	12		

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Crash Date 03/01/2022

		Towed Due To Damage TOWED BUT NOT DUE TO	O DISABI ING DAMAG	Vehicle Removed By GEORGES AUTO BO	ny		
		What Driver Was Doing	o bioabeiito baillao	Vehicle Factors			
		GOING STRAIGHT		Vernois i detais			
		Driver Prior Action Other		NOT APPLICABLE			
LIND	VEHICLE					ED LANE, OPERATED MOTOR VEHICLE ARELESS OR ERRATIC MANNER	
9	ы	Owner Name JASON G ALT (608) 438-1214		Owner Address E2726 BRACE RD LONE ROCK, Wt 53556 , US			
		Sequence Of Events		L			
	5	Event CROSS CENTERLINE					
	8	Event PARKED MOTOR VEHICL	E				
	8	Event PARKED MOTOR VEHICL					
	7	Event					
_		Policy Holder					
IN		Insurance Company PROGRESSIVE-MUTUAL-		Individual			200000
		ndividual					
		Driver		Citations Issued	Sex		BHRRE
		JASON G ALT (608) 438-1214		4	MALE		
⊨		(000)400 1214		Date of Birth	Race WHITE		
TINO	INDIVIDUAL	Address E2726 BRACE RD LONE ROCK, WI 53556 , I	us	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
	Sai	On Duty Tety Equipment	Crash	Safety Equipment			
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	RESTRAINT USE U	NKNOWN		
		Helmet Use	•	Helmet Compliance			
		Eye Protection		Tint Compliance			
5	8		CTED MINOR INJURY	Airbag NON DEPLOYED			
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT API	PLICABLE		Trapped/Extricated NOT TRAPPED	
		Medical Transport	MOTEDEOTED/MOTAL	EMS Agency Identifier		EMS Run#	
		EMS GROUND		6000554			
		Hospital UPLAND HILLS HEALTH		Date of Death		Time of Death	
		Distracted By NOT A	ed By Source PPLICABLE (NOT DISTRA	ACTED)			
		Distracted By Action NOT DISTRACTED					

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Crash Date 03/01/2022

	Non Motorist	Striking Unit#	Loca	ition						
	Prior Action		'							
	Action									
4										
3										
	Action Other									To/From School
<u> </u>					Suspected Drug Use NO					
	Alcohol Test Given TEST GIVEN		I					Alcohol Tes PENDING	t Results	
	Drug Test Given TEST NOT GIVEN		Drug	TestType		Drug T	est Results	•		
5	Drug Type		<u>'</u>			•				
	Individual Condition									
UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL										
•	Violations	****	5151515151515151515			***	*****	e e e e e e e e e e e e		
5	UTC Number BG778982	Issue To? 001	Statute Nu 346.63(2	ımber 1)(a)1	Description OWI CAUSE INJURY	′ (2+)				
70	UTC Number BD758997	Issue To? 001			Description OPERATING LEFT O	OF CEN	ITER			
33	UTC Number BD758998	Issue To? 001	Statute Nu 346.89(1	amber)	Description INATTENTIVE DRIV	ING				
*	UTC Number BD758999	Issue To? 001	Statute Nu 346.57(2	amber)	Description FAILURE TO KEEP VEHICLE UNDER CONTROL					
nit	t Summary									
						ification		Unit Type AUTOMO	BILE	
		CLE						Operating A	s Endorsen	nents
			#Recorded	1	otal#Citations Issued			ers	Total HazN	/lat Types
		ı		AY E	Pre CrashTire Mark		Speed Lim	ìt	TotalLane 2	s
						N		Emergency NOT APPL	Motor Vehic LICABLE	cle Use
	•	ĒD						Traffic Cont	rol Inoperati	ve/Missing
		OUS)						Road Grade	•	
	k Bus or HazMat									
4O										
	Vehicle	SSSSSSSSSSSS			a a a a a a a a a a a a a a a a a a a					S S S S S S S S S S S S S S S S S S S
	On on its special series of the series of th	Action Other Drug & Alcohol Alcohol Test Given TEST GIVEN Drug Test Given TEST NOT GIVEN Drug Type Individual Condition UNDER THE INFLU Violations UTC Number BG778982 UTC Number BD758997 UTC Number BD758998 UTC Number BD758998 UTC Number BD758999 Inti Status EGALLY PARKED (ehicle Type SPORT) UTILITY VEHI fotal Occs Test Total Occs Test Tes	Action Other Action Suspected Alcoyes YES Alcohol Test Given TEST GIVEN Drug Test Given TEST NOT GIVEN Drug Type Individual Condition UNDER THE INFLUENCE OF Mile Violations UTC Number Issue To? BG778982 001 UTC Number Issue To? BD758997 001 UTC Number Issue To? BD758999 001 UTC Number Issue To? BD758999 001 ITC Number Issue To? BD758999 001 ITC Number Issue To? BD758999 001 TITC Number Issue To? BD758999 00	Action Other Action Other	Action Other Action Other	Action Other Action Other Drug & Alcohol YES Action Other Action Other Drug & Alcohol YES Alcohol Test Given TEST GIVEN Drug Test Given TEST NOT GIVEN Drug Test Given Test Type Individual Condition UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL Violations UTC Number Issue To? Statute Number BG778982 001 346.05(2)(a)1 OWI CAUSE INJURY OWI CAUSE IN	Action Other TEST NOT GIVEN Drug Type Borassay Other Action Other A	Action Other Drug & Alcohol Action Other	Action Other Drug & Alcohol Suspected Alcohol Use VES Action Action Action Action Action Action Action Action Alcohol Test Given TEST Given TEST NOT Given Drug Test Given Test Not Given Individual Condition UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL Violations UTC Number B0758997 D01 346.52()(a)1 OWI CAUSE INJURY (2+) UTC Number B0758990 D01 346.53(2)(a)1 Description OPERATING LEFT OF CENTER UTC Number B0758990 D01 346.57(2) UTC Number B0758990 D01 Action Vehicle Operating As Classification D01 UTITY VEHICLE Operating As Classification D1 Unit Type B0758990 D1 CLASS UTC Number B0758990 D01 Train/Bus # Recorded D1 CLASS UTC Number B0758990 D01 Train/Bus # Recorded D1 CLASS UTC Number B0758990 D01 Train/Bus # Recorded D1 CLASS UTC Number B0758990 D01 Train/Bus # Recorded D1 CLASS UTC Number B0758990 D01 Train/Bus # Recorded D1 CLASS Train/Bus # Recorded D1 Class D1 Control D1 Contr	Action Other Action Actio

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Crash Date 03/01/2022

02	02	Vehicle Identification Numl 1GNFK16387J167780	ber	Mai	(e EVROLET	Year 2007	Model SUBURBAN	13			
)	Color			ly Style	2001	Bus Use	¥			
		BLU - BLUE			- 4DR		540 000				
	Щ	Initial Contact Point		Veh	nicle Damage				**************************************		
╘	Ծ	09 - LEFT SIDE MIDDL	.E	7 8 9 10 11 - 08 - LEFT SIDE REAR, 09 - LEFT SIDE MIDDLE, 10 - 6 12							
N N	VEHICL	Extent Of Damage FUNCTIONAL DAMAG	E		LEFT SIDE FRONT						
		Towed Due To Damage		Vehicle Removed By							
		NOT TOWED		OWNER							
		What Driver Was Doing LEGALLY PARKED		Vehicle Factors							
		Driver Prior Action Other		NO	T APPLICABLE						
⊨	CLE	Driver Actions NO CONTRIBUTING A	CTION								
INO	VEHICLE										
02	0.2	Owner Name LAURA A DRUCKREY (608) 574-6835		Owner Address 630 N CINCINNATI ST SPRING GREEN, WI 53588 , US							
		 Sequence Of Even	te								
	30.00	Event	<u> </u>								
	5 PARKED MOTOR VEHICLE										
	02	MOTOR VEH IN TRAN	SPORT								
	03	Event									
	04	Event									
_		Policy Holder	Holder								
N		Insurance Company	ononononononononononononononononononon	li	ndividual	<u> </u>	<u> </u>		nerenerenerenerenerererenerenererererer		
⊃		HANOVER-INS-CO,-TH	łE	LAURA DRUCKREY							
	Uni	t Summary ===									
		Status		Vehi	cle Operating As Classification		UnitType				
		SALLY PARKED		D C	LASS		AUTOMOE	BILE			
03		cle Type ORT) UTILITY VEHICLE	:				Operating As	s Endorse	ments		
	Tota 4	lOccs	Train/Bus#Recorded	Tota 0	I# Citations Issued	Total Trail 0	ers	Total Ha:	zMat Types		
	Insu	rance?	Direction Of Travel		Pre CrashTire	Speed Lin	nit	TotalLar	es		
LINO	YES	i t Harmful Event: Collision W	NOT ON ROADWAY	Sna	Mark cial Function	25	Emergency	2 Motor\/el	nicle I lee		
5	MO	TOR VEH IN TRANSPO		NO	SPECIAL FUNCTION		NOT APPL	ICABLE			
		fic Way D-WAY, NOT DIVIDED		l	fic Control CONTROL		Traffic Contr	rol Inopera	ative/Missing		
		асе Туре		l	d Curvature		Road Grade				
		\CKTOP (BITUMINOUS) k Bus or HazMat	<u> </u>	STR	RAIGHT		LEVEL				
	NO	N DUS UI MAZIVIAT									
		Vehicle									
		License Plate Number	e menten menten minima manamana manamana manamana haka haka haka haka haka haka haka h		те Туре	St	Country of Iss		aran da arang manananan ang mananan an		
		868XFV		ΑU	T - AUTOMOBILE	WI	UNITED ST	ATES			

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Crash Date 03/01/2022

60		Vehicle Identification Number		Make	Year	Model							
03	8	1GKS2GKC6KR312622		GENERAL MOTORS C	OR 2019	YUKON XL							
		Color		Body Style	(E) NO. E	Bus Use							
		SIL - SILVER (ALUMINUM)	UT - SPORT UTILITY V	EHICLE		T						
_	Ä	Initial Contact Point 09 - LEFT SIDE MIDDLE		Vehicle Damage 7 8 9 10 11 10 - 8 9 10 11									
N	¥	Extent Of Damage											
_	VEHICLE	DISABLING DAMAGE		LEFT SIDE FRONT									
		Towed Due To Damage		Vehicle Removed By									
		TOWED DUE TO DISABLE	NG DAMAGE	GEORGES AUTO BODY									
		What Driver Was Doing		Vehicle Factors									
		LEGALLY PARKED Driver Prior Action Other		NOT APPLICABLE									
		Driver Phot Action Other		THE PART LINE									
		Driver Actions											
	Щ	NO CONTRIBUTING ACT	ON										
╘	VEHICLE												
N	Ŧ												
	5												
		OwnerName		Owner Address									
_		FRANK RUSSELL WIZNER	R	E2630 PORTER RE)								
8	8	(216) 766-0662		LONE ROCK, WI 53	3556 , US								
		Sequence Of Events											
	5	Event PARKED MOTOR VEHICL											
	9												
	8	Event MOTOR VEH IN TRANSPO	ORT										
		Event											
	8	LYGIR											
		Event											
	3												
_		Policy Holder											
N		Insurance Company		Individual		enswenswenswenswenswens							
ر		WADENA-INSURANCE-CO		FRANK WIZNER									
		Individual											
		Occupant Of Motor Vehicle Not LUCAS W WIZNER	t in Transport	Citations Issued	Sex								
	4	LUCAS W WIZNER		0	MALE								
	NDIVIDUA			Date of Birth	Race WHITE								
FNO	5	Address		Driver License Number									
\neg	₫	E2630 PORTER RD											
		LONE ROCK, WI 53556 , I	US										
	Çai	On Duty fety Equipment	Crash	Safety Equipment									
			In	SHOULDER & LAP E	EIT								
		Row 01 - FRONT ROW	Seat Position 09 - RIGHT	SHOULDER & LAF E	,,								
		HelmetUse	22	Helmet Compliance									
				·									
		Eye Protection		Tint Compliance									
03	8	Injury Se	everity PARENT INJURY	Airbag UNKNOWN									
		Ejected NO AFI	Ejection Path	CHESTOWN		Trapped/Extricated							
		UNKNOWN	UNKNOWN			UNKNOWN							

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		Medical Transport NOT TRANSPORTED			EMS Agency Identifier		EMS Run#			
		Hospital			Date of Death		Time of Death			
		Distracted By	cted By Sourc	e						
		Distracted By Action								
		Strikin Non Motorist	g Unit#	Location						
		Prior Action								
		Action								
		Action								
	INDIVIDUAL									
	9									
_	2									
		Action Other						To/From School		
		Suspe	ected Alcohol (Ise	Suspected Drug Use					
	1	Drug & Alcohol NO	ioled Alborion	230	NO					
		AlcoholTestGiven TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results			
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results				
03	002	Drug Type								
٠	9									
		Individual Condition								
		APPEARED NORMAL								
		Individual								
		Occupant Of Motor Vehicle N LUNA P WIZNER	lotin Transpo	at	Citations issued 0	Sex FEMALE				
	JUAL				Date of Birth	Race				
N	9	A d-3			Deivesties es Museber	WHITE				
5	INDINI	Address E2630 PORTER RD			Driver License Number					
		LONE ROCK, WI 53556	, us							
		On Du	ty Crash		Safety Equipment					
	Jai	ety Equipment	SeatPo	neition	CHILD RESTRAINT	SYSTEM - FORW	ARD FACING			
		02 - SECOND ROW	07 - LI			01012111				
		HelmetUse			Helmet Compliance					
		Eye Protection			TintCompliance					
03	683	 	Severity		Airbag					
0	5	Injury NO A	PPARENT I		UNKNOWN		Trapped/Extricated			
		UNKNOWN	UNKNOW				UNKNOWN			
		Medical Transport NOT TRANSPORTED			EMS Agency Identifier		EMS Run#			
	1822/871111				I		l			

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		Hospital			Date of Death		Time of Death					
		Distracted By	By Source	•								
		Distracted By Action										
		Non Motorist	nit#	Location								
		Prior Action										
		Action										
	JAL											
TNO TNO	NDIVIDUAL											
-	Î											
		Action Other						To/From School				
	ı	Drug & Alcohol NO	d Alcohol U	se	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						
03	88	Drug Type										
		Individual Condition										
		APPEARED NORMAL										
					Tour							
	4	Occupant Of Motor Vehicle Not li OT!LLA J WIZNER	n i ranspor	ī	Citations Issued 0	FEMALE						
╘	DIVIDUAL				Date of Birth	Race WHITE						
TINO.		Address E2630 PORTER RD LONE ROCK, WI 53556 , UI	e		Driver License Number							
		LONE NOON, WI 33330 , O	•									
	Sai	ety Equipment	rash		Safety Equipment							
		Row 02 - SECOND ROW	SeatPo 08 - Mi		CHILD RESTRAINT	SYSTEM - FORV	VARD FACING					
		HelmetUse	•		Helmet Compliance							
		Eye Protection			Tint Compliance							
03	7	Injury Sev		JURY	Airbag UNKNOWN							
		Ejected E	jection Pa	th			Trapped/Extricated UNKNOWN					
		Medical Transport NOT TRANSPORTED			EMS Agency Identifier		EMS Run#					
		Hospital			Date of Death		Time of Death					
l i					I		I					

Crash Date 03/01/2022
Crash Time 04:35 PM

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0000000		Distracted By	ted By Source	9							
700000000000000000000000000000000000000		Distracted By Action									
600000000000000000000000000000000000000		Non Motorist	J Unit#	Location							
900000000000000000000000000000000000000		Prior Action		l							
30		Action									
2000000	J										
╘	INDIVIDUAL										
LNO LNO											
	Z										
0.0000000000000000000000000000000000000		Action Other						To/From School			
CHECK COLUMN								TON TON OCHOO!			
200000000000000000000000000000000000000	ı	Drug & Alcohol NO	cted Alcohol U	ise	Suspected Drug Use NO						
000000000000000000000000000000000000000		AlcoholTestGiven TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results				
0.0000000000000000000000000000000000000		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Result	3				
93	8	Drug Type									
0	5										
e)eOscocke		Individual Condition									
200		APPEARED NORMAL									
0.000		Individual									
000000000000000000000000000000000000000		Occupant Of Motor Vehicle Not In Transport FIONA F WIZNER		Citations Issued 0	Sex FEMALE						
_					Date of Birth	Race WHITE					
END END	INDIVIDUAL	Address E2630 PORTER RD			Driver License Numb	per					
*200000000	Z	LONE ROCK, WI 53556	US								
000000000000000000000000000000000000000		On Dut	y Crash		Safety Equipment						
2000	Sai	ety Equipment	SeatPo	- Mar		HICLE OCCUPAN	T				
000000000000000000000000000000000000000		03 - THIRD ROW	07 - LE			THE STATE OF THE S					
555,000		Helmet Use			Helmet Compliance						
800000000000000000000000000000000000000		Eye Protection			TintCompliance						
03	98	Injury S Injury SUSP	Severity	IOD IN HIDV	Airbag UNKNOWN						
000000000000000000000000000000000000000		Ejected	Ejection Pa	th	OHIMOTH		Trapped/Extricated				
2000		UNKNOWN Medical Transport	UNKNOW	'N	EMS Agency Identifie	er	UNKNOWN EMS Run#				
7.00		NOT TRANSPORTED									
200		Hospital			Date of Death		Time of Death				
200000000000000000000000000000000000000		Distracted By Distract	ted By Source	•							

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 03/01/2022

		Distracted By Action								
		Striking Unit# Non Motorist	Location							
		Prior Action								
		Action								
	INDIVIDUAL									
NE NE	9									
_	2									
		Action Other					To/From School			
		Drug & Alcohol NO	se	Suspected Drug Use NO			•			
		AlcoholTestGiven TEST NOT GIVEN	Alcohol Test Type	e		Alcohol Test Results				
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results					
ន	900	Drug Type								
		Individual Condition								
		APPEARED NORMAL								
l	Wit	ness								
	Line of its	vidual ANDA L OLSON		Address 526 W UNION ST		D	ate of Birth			
WITN 01	(60	8) 583-2656		LONE ROCK, Wi 5355	6 ,US					
≤ <u></u>	Wit	ness								
02	Indi CH	vidual RISTY A WELLER		Address 7129 HELENA RD		D	ate of Birth			
WITN 02	(60)	8) 206-1625		ARENA, WI 53503 , U	S					
		ness								
03	MA	vidual CKENZIE ELIZABETH BEHRENS		Address S13220 SHIFFLET RD		D	ate of Birth			
WITN	(60)	8) 588-2826		SPRING GREEN, WI 5	3588 , U S					
15 "	1									