6TL0BGSFHM 22-06781

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | Document Number Override | Primary Crash Document # | , | Agency Crash Number 22-06781 | | | Investigating Officer/Deputy DEPUTY D. KROLIKOWSKI | | | |
|----------|---|--------------------------|---------------------|------------------------------------|--|-------------------------------------|---|-----------------|---------------------|--|
| SFHM | Crash Date 07/14/2022 | Crash Time 03:00 PM | Date Ar | Date Arrived | | Time | Time Arrived | | | |
| GSF | Date Notified 07/14/2022 | Time Notified 03:38 PM | | | Inits | | I Injured Total Killed 00 | | I | |
| 0B | On Emergency H | it and Run Lane | Closure | re Work Zone | | | Trailer or Towed | | Reporting Threshold | |
| etl(| Government Property | e School | | | | Tags | | | | |
| | ✓ Reportable | ANIMAL W/ N | ANIMAL W/ NO INJURY | | | Amended | | Secondary Crash | | |
| | I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report. | | | | | | | | | |
| i | Location | | | | | | | | | |
| ł | ON STH23 EB | | | | Latitude Longitude | | | le | | |
| | 386 FT S | | | | | 43.350005703 | | | -90.069100763 | |
| | OF CTHGG NB | NI. | | X Co | | X Coordinate | | Y Coordi | Y Coordinate | |
| | IN THE TOWN OF FRANKLII IN SAUK COUNTY | N | | 251260.21875 Structure Type | | | 480425 | | 9 | |
| | IN SAUK COUNTY | | | | | | I | | | |
| | | | | NO STR | | | | | | |
| | | | | | | | | | | |
| , | Crash Scene | | | | T=: | | | | | |
| | First Harmful Event | | | | First Harmful Event Location | | | | | |
| | NON DOMESTICATED ANIM Manner of Collision | IAL (ALIVE) | | | ON ROADWAY | | | | | |
| | 00 - NO COLLISION W/VEHI | CLE IN TRANSPORT | | | Light Condition | | | | | |
| | | CLE IN TRANSPORT | | | Deadway | Fastar/a) | | | | |
| | Road Surface Condition(s) | | | | Roadway | racioi(s) | | | | |
| | | | | | | | | | | |
| | Environment Factor(s) | | | | 1 | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | Weather Condition(s) | | | | | | | | | |
| | | | | | | | | | | |
| | Animal Type | | | | Relation To Trafficway | | | | | |
| | DEER | | | | TRAFFICWAY - ON ROAD | | | | | |
| | Crash Classification - Location | | | | Crash Classification - Jurisdiction | | | | | |
| | PUBLIC PROPERTY | | | | | | SDICTION | | | |
| | Tribal Land | | | Acce | | Access Control | | | Special Study | |
| | | | | | | | | | | |
| | Unit Summary | | | | <u>. </u> | | | | I. | |
| | Unit Status | | Vehicle Opera | ating As C | lassification | | Unit Type | | | |
| | IN TRANSIT D CLASS | | | | | | AUTOMOBILE | | | |
| | Vehicle Type | | | | Operating As Endorsements | | | | | |
| 01 | PASSENGER CAR | | | | | | | | | |
| | | Train/Bus # Recorded | Total # Citation | ons Issued | l | Total Traile | ers | Total Hazl | Mat Types | |
| | 2 | | 0 | | | 0 | | 0 | •• | |
| | Insurance? | Direction Of Travel | Pre C | rashTire | | Speed Lim | it | Total Lane | es | |
| ⊢ | YES | SOUTHBOUND | Mark | | | | | | | |
| UNIT | Most Harmful Event: Collision Wit | Special Func | | | | Emergency Motor Vehicle Use | | cle Use | | |
| – | NON DOMESTICATED ANIM | NO SPECIA | AL FUNC | TION | | NOT APPLICABLE | | | | |
| | Traffic Way | Traffic Contro | ol | | | Traffic Control Inoperative/Missing | | | | |
| | | | | | | | | | | |
| | Surface Type | Road Curvatu | Road Curvature | | | Road Grade | | • | | |
| | | | | | | | | | | |

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| | Truc | k Bus or HazMat | | | | | | | |
|------|------------|---|--|---------------------|-----------------------------------|--|--|--|--|
| | , | Vehicle | | | | | | | |
| | | License Plate Number 407VDC | Plate Type AUT - AUTOMOBILE | St WI | Country of Issuance UNITED STATES | | | | |
| 5 | VEHICLE 01 | Vehicle Identification Number 4T4BF1FK1DR334320 | Make TOYOTA | Year 2013 | Model CAMRY/SE/L | | | | |
| | | Color GRY - GRAY | Body Style Bus Use 4D - 4DR | | | | | | |
| LIND | | Initial Contact Point 12 - FRONT Extent Of Damage DISABLING DAMAGE | Vehicle Damage 01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT 5 4 3 2 1 | | | | | | |
| | | Towed Due To Damage TOWED DUE TO DISABLING DAMAGE | Vehicle Removed By STEVES AUTO SERVICE | | | | | | |
| | | What Driver Was Doing | Vehicle Factors | | | | | | |
| | | Driver Prior Action Other | | | | | | | |
| UNIT | VEHICLE | Driver Actions NO CONTRIBUTING ACTION | | | | | | | |
| | | Owner Name | Owner Address | | | | | | |
| 2 | 6 | | | | | | | | |
| ╘ | ı | Policy Holder | | | | | | | |
| LIND | | Insurance Company CINCINNATI-INS-CO,-THE | Individual JAMES RICHEL | | | | | | |
| | INDIVIDUAL | Individual Driver | Citations Issued | Sex | | | | | |
| | | JAMES RICHEL | Citations Issued 0 | MALE | | | | | |
| _ | | (715) 387-8036 | Date of Birth | Race WHITE | | | | | |
| LIND | | Address 512 N MAPLE AVE MARSHFIELD, WI 54449 , US | Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES | | | | | | |
| | Sai | On Duty Crash fety Equipment | Safety Equipment | | | | | | |
| | | Row Seat Position | SHOULDER & LAP BELT | | | | | | |
| | | Helmet Use | Helmet Compliance | | | | | | |
| | 100 | Eye Protection | Tint Compliance | | | | | | |
| 2 | | Injury Severity NO APPARENT INJURY | Airbag | | | | | | |
| | | Ejected Ejection Path | | | Trapped/Extricated | | | | |
| | | Medical Transport NOT TRANSPORTED | EMS Agency Identifier | | EMS Run # | | | | |
| | | Hospital | Date of Death | | Time of Death | | | | |

Crash Date **07/14/2022**Crash Time **03:00 PM**

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Crash Date 07/14/2022

Crash Time 03:00 PM

| | Distracted By | Distracted By Source | • | | | | |
|-----------------|--------------------------------|---|---|---|--|--|--|
| | Distracted By Action | | | | | | |
| • | Non Motorist | Striking Unit # | Location | | | | |
| | Prior Action | | | | | | |
| | Action | | | | | | |
| UAL | | | | | | | |
| IVID | | | | | | | |
| N N | | | | | | | |
| | Action Other | | | | | | To/From School |
| | | | | | | Ton Toni Galleer | |
| L | Orug & Alcohol | NO | | NO | | | |
| | | | | | Alcohol Test Results | | |
| | Drug Test Given TEST NOT GIVEN | | Drug Test Type | Drug Test Results | | | |
| 001 | Drug Type | | <u> </u> | | <u> </u> | | |
| | Individual Condition | | | | | | |
| APPEARED NORMAL | | | | | | | |
| | | Prior Action Action Action Other Drug & Alcohol Alcohol Test Given TEST NOT GIVEN Drug Type Individual Condition | Distracted By Distracted By Action Non Motorist Prior Action Action Action Action Drug & Alcohol Alcohol Test Given TEST NOT GIVEN Drug Type Individual Condition | Distracted By Distracted By Action Striking Unit # Location Prior Action Action Action Action Suspected Alcohol Use NO Alcohol Test Given TEST NOT GIVEN Drug Type Individual Condition | Distracted By Distracted By Action Non Motorist Prior Action Action Action Action Suspected Alcohol Use NO Alcohol Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Type Individual Condition | Distracted By Action Non Motorist Prior Action Action Action Other Drug & Alcohol Alcohol Test Given TEST NOT GIVEN Drug Type Individual Condition Drug Type Drug Type Striking Unit # Location Striking Unit # Location Suspected Drug Use NO Alcohol Test Type Drug Test Given Test NOT GIVEN Drug Type Individual Condition | Distracted By Action Prior Action Action Action Other Drug & Alcohol Alcohol Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Type Individual Condition Drug Type Drug Test Grove Individual Condition |