# 6TL0CR2KRX 22-07218

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/25/2022

Crash Time 08:55 PM

	Document Number Override Primary Crash Document# Agency Crash 1 SC22-07218						stigating Officer/Deputy PUTY Z. DRILL		
<b>X</b>	Crash Date         Crash Time           07/25/2022         08:55 PM		Date Arrived		Time	Time Arrived			
6TL0CR2KRX	Date Notified <b>07/25/2022</b>	Time Notified 08:59 PM	, 0.6.7 0, 7.6		Total		Injured Total Killed 00		
<u>고</u>	On Emergency	it and Run Lane (	Closure		rk Zone		Trailer or T	owed	Reporting  Threshold
6TL	Government Property	Active School Zone	NO NO	Bus Relat	ed 	Tags			_
	Reportable	Crash Type NON-DOMESTICATED A	NIMAL W/ N	O INJUR	Υ		Amended		Secondary  Crash
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.								
	Location <b>——</b>								
Ī	ON STH154 WB				Latitude			Longitud	
	0.50 MI N				43.415884588		-90.123		
	OF CTHG EB								
	IN THE TOWN OF WASHING	TON			X Coordin		Y Coordi <b>481173</b>		
	IN SAUK COUNTY	,,,,,			247145.4	21875			9
	IN SASK COSKII				Structure Type			-	
					Ostation i ype				
L									
•	Crash Scene								
Ī	First Harmful Event				FirstHarm	ful Event Lo	cation		
	NON DOMESTICATED ANIM	IAL (ALIVE)			ON ROA	DWAY			
ŀ	Manner of Collision	,			Light Condition				
	00 - NO COLLISION W/VEHI	CLE IN TRANSPORT							
		CLE IN TRANSFORT			5 1	<b>.</b>			
	Road Surface Condition(s)				Roadway Factor(s)				
ŀ	Environment Factor(s)				1				
	Liviloiment actor(s)								
ŀ	Weather Condition(s)								
ŀ	Animal Type DEER				Relation To Trafficway				
					TRAFFICWAY - ON ROAD				
ŀ	Crash Classification - Location			Crash Classification - Jurisdiction					
	PUBLIC PROPERTY			NO SPECIAL JURIS Access Control					
ŀ	TribalLand							Special Study	
	i indisafiu							opecial clady	
L									
	Unit Summary 💳								
				/ehicle Operating As Classification			UnitType		
	IN TRANSIT	D CLASS				AUTOMOBILE			
_	Vehicle Type			Operating As Endorsements			ments		
01	PASSENGER VAN								
ŀ	Total Occs Train/Bus#Recorded Train/Bus#Recorded Train/Bus#Recorded			Total#Citations Issued		Total Trail		Total Hazi	Mat Types
	1		0		0		0		
-				CrashTire Speed Li		_			26
	Insurance? YES		1 1	, opeed Lin		i Otal Ealles		<b></b>	
LINO									-1-11-
5 I	Most Harmful Event: Collision Wit	Special Function NO SPECIAL FUNCT		TION		Emergency Motor Vehicle Use NOT APPLICABLE			
ļ	NON DOMESTICATED ANIM			, wa					
	Traffic Way	Traffic Control				Traffic Control Inoperative/Missing			
	Surface Type	Road Curvature					Road Grade		

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	Truc	ruck Bus or HazMat						
	,	Vehicle       License Plate Number     Plate Type       St     Country of Issuance						
2	VEHICLE 01	AFW6278 Vehicle Identification Number 2V8HW34119R599648	Make VOLKSWAGEN	Year 2009	Model ROUTAN			
		Color BLU - BLUE	Body Style VN - VAN	2008	Bus Use			
TIND		Initial Contact Point  12 - FRONT  Extent Of Damage	Vehicle Damage			7 8 9 10 11 5 12		
		DISABLING DAMAGE Towed Due To Damage	Vehicle Removed By					
		TOWED DUE TO DISABLING DAMAGE What Driver Was Doing	Vehicle Factors					
		Driver Prior Action Other		verscie ractors				
		Driver Actions						
L NN	VEHICLE	NO CONTRIBUTING ACTION						
5								
		Owner Vanse	Owner Address					
2	9	The state of the s						
  ⊨		Policy Holder						
N L		Insurance Company NORTH-STAR-MUTUAL-INSURANCE-CO	Individual  AMBER MORRISON	N				
	INDIMENAL	ndividual Driver	Citations issued Sex					
		AMBER MICHELLE MORRISON	Citations Issued  0	FEMALE				
⊨		(715) 213-2529	Date of Birth	Race WHITE				
LNO		Address 376 E UNION ST # B RICHLAND CENTER, WI 53581 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sat	On Duty Crash ety Equipment	Safety Equipment					
		Row Seat Position	SHOULDER & LAP BELT					
		HelmetUse	Helmet Compliance					
	100	Eye Protection	TintCompliance					
2		Injury Severity Injury 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			

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		Distracted By Sour	ce				
		Distracted By Action					
		Non Motorist Striking Unit#	Location				
		Prior Action					
		Action					
	7						
<u>_</u>	2						
UNIT	INDIWIDUAL						
⊃	Ħ						
	Z						
	_						
		Action Other					To/From School
		Suspected Alcoho	Use	Suspected Drug Use			
	į	I Drug & Alcohol NO	NO				
		Alcohol Test Given	Alcohol Test Type	Alcohol Test Type Alcoho			
		TEST NOT GIVEN	,				
				Drug Test Results			
		Drug Test Given TEST NOT GIVEN	"				
_	_	Drug Type	l				
01	8	1 3 7					
		Individual Condition					
		48854858 20044					
		APPEARED NORMAL					