# 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 22-08892	Investigating Officer/Deputy DEPUTY I. GALVAN	· -		
Crash Date 09/05/2022	Crash Time 01:40 PM	Date Arrived 09/05/2022	Time Arrived 01:53 PM			
09/05/2022     Date Notified   09/05/2022     On Emergency   Hit   Government   Property	Time Notified 01:41 PM	Total Units 03	Total Injured Total Kille 00 00	ed		
On Emergency Hit	and Run Lane Closu		Trailer or Towed	Reporting Threshold		
Government Property	Active School Zone	School Bus Related NO	Tags			
<b>▼</b> Reportable	Crash Type DT4000 (STANDARD CRASH	)	Amended	Secondary  Crash		
Description			Ι	_		
Diagram	USH 1	2	Photos By ISAAC GAL	•		
			Additional Info	ormation		
	020					
	05 05 05 05 05 05 05 05 05 05 05 05 05 0					
	03	NOT TO S	SCALE			
i, a sworn law enforceme	nt officer, agree that I have no	ot added any CJIS data in thi	s report.			
	NG ON USH 12 BETWEEN CTH PF A JNIT 2. UNIT 1 LOOKED BUT DID NO 1 WAS TOWED BY EVERETT'S TOW	T SEE UNIT 2 SLOWING/STOPPING				

Location

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Crash Date 09/05/2022

	ON USH12 EB 0.73 MI S OF USH12 EB			Latitude 43.3041 X Coordin		-89.7 Y Coo		ide 9137714 dinate	
	IN THE TOWN OF PRAIRIE IN SAUK COUNTY	E DU SAC		276214.			47982	93.5	
				I	Structure Type NO STRUCTURE				
(	Crash Scene								
	FirstHarmfulEvent MOTOR VEH IN TRANSPO	RT		First Harn ON ROA	nful Event L <b>DWAY</b>	ocation.			
	Manner of Collision			LightCon					
	03 - FRONT TO REAR Road Surface Condition(s)			DAYLIG	Factor(s)				
	DRY			, todaile,	, 40101(0)				
	Environment Factor(s)								
	NONE			BACKUI	P DUE TO	REGULAR	CONGES	STION	
	Weather Condition(s)								
	CLEAR								
•	AnimalType			l l	To Trafficwa	icway - ON ROAD			
ľ	Crash Classification - Location PUBLIC PROPERTY			<b>I</b>	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION Access Control NO CONTROL				
	TribalLand			Access C				Special Study	
	•	Junction Location NON-JUNCTION		section Type  AN INTERSE	CTION				
	In it Comment		'						
ı	Unit Summary   🖚								
	Unit Status		Vehicle Operating	As Classification	3	Unit Type	BILE		
_			Vehicle Operating D CLASS	As Classification	3	Unit Type AUTOMOI		ements	
5	Unit Status IN TRANSIT Vehicle Type PASSENGER CAR	Train/Duatt Dagovidad	D CLASS			AUTOMOI Operating A	s Endorse		
5	Unit Status IN TRANSIT Vehicle Type	Train/Bus#Recorded	1 '		TotalTra	AUTOMOI Operating A	s Endorse	ements zMat Types	
-	Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs	Train/Bus#Recorded  Direction Of Travel  EASTBOUND	D CLASS  Total # Citations Is	sued	Total Tra	AUTOMOI Operating A	s Endorse Total Ha:	zMat Types	
	Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs 2 Insurance?	Direction Of Travel  EASTBOUND  /ith	Total # Citations Is  O  Pre Crash	sued	TotalTra	AUTOMOI Operating A	Total Haz  Total Lar  Total Lar  Motor Vel	zMat Types nes hicle Use	
	Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs 2 Insurance? YES Most Harmful Event: Collision W MOTOR VEH IN TRANSPO Traffic Way TWO-WAY, NOT DIVIDED	Direction Of Travel  EASTBOUND  /ith	Total # Citations is 0  Pre Crash Mark  Special Function	sued	TotalTra	AUTOMOI Operating A illers  mit  Emergency NOT APP  Traffic Cont	Total Ha: 0 Total Lar 2 Motor Vel LICABLE	zMat Types nes hicle Use	
	Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs 2 Insurance? YES Most Harmful Event: Collision W MOTOR VEH IN TRANSPO Traffic Way TWO-WAY, NOT DIVIDED Surface Type	Direction Of Travel  EASTBOUND  //ith	Total # Citations Is  O  Pre Crash Mark Special Function NO SPECIAL F	sued	TotalTra	AUTOMOI Operating A iilers mit Emergency NOT APPI Traffic Conf	Total Ha: 0 Total Lar 2 Motor Vel LICABLE	zMat Types nes hicle Use E	
	Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs 2 Insurance? YES Most Harmful Event: Collision W MOTOR VEH IN TRANSPO Traffic Way TWO-WAY, NOT DIVIDED	Direction Of Travel  EASTBOUND  //ith	Total # Citations is 0  Pre Crash Mark Special Function NO SPECIAL FI Traffic Control NO CONTROL Road Curvature	sued	TotalTra	AUTOMOI Operating A illers  mit  Emergency NOT APP  Traffic Cont NO Road Grade	Total Ha: 0 Total Lar 2 Motor Vel LICABLE	zMat Types nes hicle Use E	
	Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs 2 Insurance? YES Most Harmful Event: Collision W MOTOR VEH IN TRANSPO Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS Truck Bus or HazMat	Direction Of Travel  EASTBOUND  //ith	Total # Citations is 0  Pre Crash Mark Special Function NO SPECIAL FI Traffic Control NO CONTROL Road Curvature	sued	TotalTra	AUTOMOI Operating A illers  mit  Emergency NOT APP  Traffic Cont NO Road Grade	Total Ha: 0 Total Lar 2 Motor Vel LICABLE	zMat Types nes hicle Use E	
	Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs 2 Insurance? YES Most Harmful Event: Collision W MOTOR VEH IN TRANSPO Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS Truck Bus or HazMat NO Vehicle License Plate Number	Direction Of Travel  EASTBOUND  //ith	D CLASS  Total # Citations Is 0  Pre Crash Mark Special Function NO SPECIAL FI Traffic Control NO CONTROL Road Curvature STRAIGHT	Tire UNCTION	Total Tra 0 Speed Li 55	AUTOMOI Operating A illers  mit  Emergency NOT APP  Traffic Cont NO Road Grade LEVEL  Country of Is	Total Ha: 0 Total Lar 2 Motor Vel LICABLE rol Inopera	zMat Types nes hicle Use E	
	Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs 2 Insurance? YES Most Harmful Event: Collision W MOTOR VEH IN TRANSPO Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS Truck Bus or HazMat NO  Vehicle License Plate Number DG16035 Vehicle Identification Num	Direction Of Travel EASTBOUND  //ith PRT	Total # Citations Is 0  Pre Crash Mark Special Function NO SPECIAL FI Traffic Control NO CONTROL Road Curvature STRAIGHT	Tire UNCTION	Total Tra 0 Speed Li 55	AUTOMOI Operating A  illers  mit  Emergency NOT APPI Traffic Confi NO Road Grade LEVEL  Country of Is UNITED ST	Total Ha: 0 Total Lar 2 Motor Vel LICABLE rrollinopera	zMat Types nes hicle Use E	
	Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs 2 Insurance? YES Most Harmful Event: Collision W MOTOR VEH IN TRANSPO Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS Truck Bus or HazMat NO  Vehicle License Plate Number DG16035 Vehicle Identification Num JM1GJ1W54F1200516	Direction Of Travel EASTBOUND  //ith PRT	Total # Citations is 0  Pre Crash Mark  Special Function NO SPECIAL FI  Traffic Control NO CONTROL  Road Curvature STRAIGHT  Plate Type AUT - AUTOM  Make MAZDA	Tire UNCTION	Total Tra 0 Speed Li 55	AUTOMOI Operating A  illers  mit  Emergency NOT APPI Traffic Cont NO Road Grade LEVEL  Country of Is UNITED ST Model MAZADA6	Total Ha: 0 Total Lar 2 Motor Vel LICABLE rrollinopera	zMat Types nes hicle Use E	
	Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs 2 Insurance? YES Most Harmful Event: Collision W MOTOR VEH IN TRANSPO Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS Truck Bus or HazMat NO  Vehicle License Plate Number DG16035 Vehicle Identification Num	Direction Of Travel EASTBOUND  //ith PRT	Total # Citations is 0  Pre Crash Mark  Special Function NO SPECIAL FI  Traffic Control NO CONTROL  Road Curvature STRAIGHT  Plate Type AUT - AUTOM Make	Tire UNCTION	Total Tra 0 Speed Li 55	AUTOMOI Operating A  illers  mit  Emergency NOT APPI Traffic Confi NO Road Grade LEVEL  Country of Is UNITED ST	Total Ha: 0 Total Lar 2 Motor Vel LICABLE rrollinopera	zMat Types nes hicle Use E	
	Unit Status IN TRANSIT Vehicle Type PASSENGER CAR  Total Occs 2 Insurance? YES Most Harmful Event: Collision W MOTOR VEH IN TRANSPO Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS Truck Bus or HazMat NO  Vehicle License Plate Number DG16035 Vehicle Identification Num JM1GJ1W54F1200516 Color	Direction Of Travel EASTBOUND  //ith PRT	Total # Citations is 0  Pre Crash Mark  Special Function NO SPECIAL FI  Traffic Control NO CONTROL  Road Curvature STRAIGHT  Plate Type AUT - AUTOM  Make MAZDA  Body Style	ortire UNCTION OBILE	Total Tra 0 Speed Li 55	AUTOMOI Operating A illers mit  Emergency NOT APPI Traffic Cont NO Road Grade LEVEL  Country of Is UNITED ST Model MAZADA6 Bus Use	Total Ha: 0 Total Lar 2 Motor Vel LICABLE rrollinopera	zMat Types nes hicle Use E	

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22-08892

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

Crash Date 09/05/2022

		Towed Due To Damage		Vehicle Removed By			
		TOWED DUE TO DISABLI	NG DAMAGE	EVERETTS TOWING			
		What Driver Was Doing GOING STRAIGHT		Vehicle Factors			
		Driver Prior Action Other		NOT APPLICABLE			
UNIT	VEHICLE	Driver Actions FOLLOWING TOO CLOSE	, LOOKED BUT DID NOT	SEE			
9	10	Owner Name EMILY MARIE LAWRENCE (815) 520-4742	<u> </u>	Owner Address 235 SANDHURST ROCKTON, IL 610			
		Sequence Of Events					
	5	Event MOTOR VEH IN TRANSPO					
	8	Event					
	8	Event					
	2	Event					
_		Policy Holder					
INN		Insurance Company LIBERTY-MUTUAL-INS-CO		Individual SALLY LAWRENCE			
		Individual		SACET CAVINEROE			
		Driver		Citations Issued	Sex		
		EMILY MARIE LAWRENCE (815) 520-4742	Ē	0	FEMALE		
⊨	70	,		Date of Birth	Race WHITE		
TINO.	INDIVIDUAL	Address 235 SANDHURST DR ROCKTON, IL 61072, US		Driver License Number STATE: ILLINOIS COUNTRY: UNITED STATES			
		On Duty	Crash	Safety Equipment			
	Sai	fety Equipment	_	0,10,2,555,0,145	SE: T		
		Row 01 - FRONT ROW	SeatPosition 07 - LEFT	SHOULDER & LAP BELT			
		HelmetUse		Helmet Compliance			
		Eye Protection		Tint Compliance			
٤	8	CC2033C00333C00C0C0C0C0C0C0C0C0C0C0C0C0C	PARENT INJURY	Airbag DEPLOYED-FRONT			
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APF	PLICABLE		Trapped/Extricated NOT TRAPPED	
		Medical Transport		EMS Agency Identifier		EMS Run#	
		NOT TRANSPORTED Hospital		Date of Death		Time of Death	
		·					
		Distracted By EXTER	ed By Source NAL (TO VEHICLE/NON-I	MOTORIST AREA)			
		Distracted By Action OTHER ACTION (LOOKIN	G AWAY FROM TASK ET	·C)			

### WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Non Motorist  Striking t	Unit#	Location					
		Prior Action		1					
		Action							
	W								
FIND	INDIVIDUAL								
-	Š								
		Action Other						To/From School	
		Suspect	ed Alcohol L	jse	Suspected Drug Use				
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results		
		TEST NOT GIVEN		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	•		
٤	8	Drug Type							
		Individual Condition							
		APPEARED NORMAL							
		Individual			Tobelle	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>			
		Passenger MCKENZIE ELIZABETH KOCH (815) 742-6727			Citations Issued  0	Sex FEMALE			
L	INDIVIDUAL				Date of Birth	Race WHITE			
S	暑	Address 7188 BARNGATE DR			Driver License Number	1			
	Z	SOUTH BELOIT, IL 61080	, US		STATE: ILLINOIS COUNTRY: UNITED STATES				
		On Duty	Crash		Safety Equipment				
	Sa	fety Equipment							
		Row 01 - FRONT ROW	Seat Po		SHOULDER & LAP BELT				
		Helmet Use			Helmet Compliance				
		Eye Protection			Tint Compliance				
٤	8	Injury Se	verity PARENT II	NJURY	Airbag DEPLOYED-FRONT				
		Ejected	Ejection Pa		LICABLE		Trapped/Extricated NOT TRAPPED		
		Medical Transport			EMS Agency Identifier		EMS Run#		
		NOT TRANSPORTED Hospital			Date of Death		Time of Death		
		·	.= .=		2500,0000		, and or would		
		Distracted By	d By Source	•					
		Distracted By Action							
		Non Motorist	Unit#	Location					

Crash Date 09/05/2022 Crash Time 01:40 PM

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 09/05/2022

		Prior Action									
Action Other  Action Other											
					_					To/From School	
	1	Drug & Alcohol No	pected Alcohol U		Suspected Drug Use NO						
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	•			Alcohol Tes	st Results		
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Te	est Results				
7	005	Drug Type									
		Individual Condition  APPEARED NORMAL									
	Uni	Summary ===									
	Unit Status IN TRANSIT				ehicle Operating As Class CLASS	ification		UnitType AUTOMOI	BILE		
05		cle Type SENGER CAR						Operating A	s Endorsen	nents	
		IOccs	Train/Bus#Recorded		otal#Citations Issued		Total Traile	rs	Total Hazi	Mat Types	
		Insurance? Direction Of Travel			Pre CrashTire Mark		Speed Lim <b>55</b>	-		s	
LNO	Mos	:Harmful Event: Collision Wi FOR VEH IN TRANSPOR	ith	S	pecial Function IO SPECIAL FUNCTIO		Emergency		Motor Vehi	- Motor Vehicle Use	
	Traff	ic Way D-WAY, NOT DIVIDED		I '	Traffic Control NO CONTROL			Traffic Control Inoperative/Missing			
	Surfa	ace Type .CKTOP (BITUMINOUS)			load Curvature			Road Grade			
		k Bus or HazMat									
	1	Vehicle		KKKKKKKKKKKKKK		· ccccccc	SCOUCKER	SSSSSSSSSS			
		License Plate Number BN53499		<b>I</b>	Plate Type AUT - AUTOMOBILE			Country of Is			
02	02	Vehicle Identification Numb		<b>1</b>	Make SUBARU	<u> </u>	Year	Model CROSSTRI			
	)	Color BLU - BLUE	<u> </u>	1	Body Style 4H - HATCHBACK 4 DO	I		Bus Use	ER		
_	8	Initial Contact Point			Vehicle Damage					7 8 9 10 11	
L N	VEHICL	06 - REAR  Extent Of Damage  FUNCTIONAL DAMAG	 E		05 - RIGHT REAR COF REAR CORNER	RNER, 0	)6 - REAR	, 07 - LEFT	Г	6 T2 S 4 3 2 1	
		Towed Due To Damage NOT TOWED			Vehicle Removed By  OWNER				I		
		What Driver Was Doing SLOW/STOPPING									

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

				_				
					Vehicle Factors			
		Driver Prior Action Other			NOT APPLICABLE			
UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACT	ION					
05	02	Owner Name JACOB B ADILI (773) 681-4564			Owner Address 7078 N WOLCOT CHICAGO, IL 6062			
	5	Sequence Of Events Event MOTOR VEH IN TRANSP	ORT					
	_ 8	Event						
	8	Event						
	8	Event						
_		Policy Holder	000000000000000000000000000000000000000					
N N		Insurance Company ERIE-INSURANCE-EXCHANGE			Individual JACOB ADILI			
		Individual						
	_	Driver JACOB B ADILI (773) 681-4564  Address 7078 N WOLCOTT AVE APT 2 CHICAGO, IL 60626 , US			Citations Issued  0	Sex MALE		
E	20				Date of Birth	Race WHITE		
TINO	INDMIDUAL				Driver License Number  STATE: ILLINOIS COUNTRY: UNITED STATES			
	Sai	On Dut	/ Crash		Safety Equipment			
		Row 01 - FRONT ROW	SeatPo 07 - LE		SHOULDER & LAP	BELT		
		Helmet Use			Helmet Compliance			
		Eye Protection			Tint Compliance			
8	83	K99,00000000000000000000000000000000000	PARENT I		Airbag NON DEPLOYED			
		Ejected NOT EJECTED	Ejection Pa	th CTED/NOT APP	LICABLE		Trapped/Extricated NOT TRAPPED	
		Medical Transport NOT TRANSPORTED			EMS Agency Identifier		EMS Run#	
	Hospital				Date of Death		Time of Death	
		Distracted By NOT A	ed By Source PPLICABL	E (NOT DISTRA	ACTED)		1	
		Distracted By Action NOT DISTRACTED						
		Non Motorist Striking	Unit#	Location				

Orash Date 09/05/2022
Orash Time 01:40 PM

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 09/05/2022

		Prior Action										
TINO	Action Other  Action To/From School											
	,	Orug & Alcohol No										
	-	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	NO e			Alcohol Tes	t Results			
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug T	est Results					
05	003	Drug Type										
		Individual Condition  APPEARED NORMAL										
	Uni	Summary ===										
	Unit	Jnit Status N TRANSIT			/ehicle Operating As Class D CLASS	ification		Unit Type AUTOMOI	BILE			
03		cle Type		I .				Operating A	s Endors	ements		
_		SENGER CAR	Train/Bus#Re	corded T	Total#Citations Issued		Total Traile	ers	TotalHa	zMat Types		
	2	2		ď	)		0		0			
<b>=</b>	YES		Direction Of Tra	) [	Pre CrashTire Mark		Speed Lim 55	2				
LNO	MO.	:HarmfulEvent: Collision Wi FOR VEH IN TRANSPOR			Special Function NO SPECIAL FUNCTIO	N		Emergency Motor Vehicle Use NOT APPLICABLE				
		ic Way D-WAY, NOT DIVIDED			raffic Control OCONTROL			Traffic Control Inoperative/Missing NO				
		ace Type .CKTOP (BITUMINOUS)	ı		Road Curvature STRAIGHT			Road Grade				
		k Bus or HazMat						<u> </u>				
		Vehicle										
		License Plate Number			Plate Type	Ī	St	Country of Is	suance			
		CB23278			AUT - AUTOMOBILE		IL.	UNITED ST	TATES			
03	03	Vehicle Identification Numb 1G2ZG57N194120479	per		Make PONTIAC		Year 2009	Model G6				
		Color BLK - BLACK			Body Style  4D - 4DR		2000	Bus Use				
		Initial Contact Point			Vehicle Damage					7 8 9 10 11.		
UNIT	VEHICL	06 - REAR Extent Of Damage MINOR DAMAGE			06 - REAR					6 12 5 4 3 2 1		
	1	Towed Due To Damage NOT TOWED		<b>I</b>	Vehicle Removed By  OPERATOR							
		What Driver Was Doing SLOW/STOPPING										

# 6TL09XQZ4J

22-08892

### WISCONSIN MOTOR VEHICLE CRASH REPORT

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

				_				
					Vehicle Factors			
		Driver Prior Action Other			NOT APPLICABLE			
NNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACT	ION					
03	83	Owner Name PAUL J WEDIGE (815) 238-8902			Owner Address 414 SHUMWAY S LENA, IL 61048 §			
		Sequence Of Events			l			
	5	Event MOTOR VEH IN TRANSP	ORT					
	8	Event						
	8	Event						
	8	Event						
-		Policy Holder						
N N		Insurance Company STATE-FARM-GENERAL	-INS-CO		Individual TAYLOR WEDIGE			
		Individual						
		Driver TAYLOR N WEDIGE (815) 821-4902		Citations Issued	Sex			
	Z			0 Date of Birth	Race Race			
╘	₫							
IND	INDIVIDUAL	Address 1477 IL ROUTE 75 N FREEPORT, IL 61032 , US		STATE: ILLINOIS COUNTRY: UNITED STATES				
	Sai	on Duty lety Equipment	Crash		Safety Equipment			
		Row 01 - FRONT ROW	Seat Po		SHOULDER & LAP BELT			
		HelmetUse			Helmet Compliance			
		Eye Protection			Tint Compliance			
03	3	Injury S Injury NO AF	everity PARENT II	NJURY	Airbag NON DEPLOYED			
		Ejected NOT EJECTED	Ejection Pa	th CTED/NOT APP	LICABLE		Trapped/Extricated NOT TRAPPED	
				EMS Agency Identifier		EMS Run#		
		Hospital			Date of Death		Time of Death	
		Distracted By NOT A	ed By Source PPLICABL	E (NOT DISTRA	CTED)		1	
		Distracted By Action NOT DISTRACTED						
		Non Motorist	Unit#	Location				

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Crash Date 09/05/2022

		Prior Action									
		Action									
	JAL										
FNS	NDIVIDUAL										
_	2										
		Action Other						To/From School			
	1	Drug & Alcohol NO	ed Alcohol U	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	<u> </u>				
8	8	Drug Type		1		l					
		Individual Condition									
		APPEARED NORMAL									
		  ndividual									
		Passenger BRIAN M GOEBEL (608) 214-4844			Citations Issued	Sex MALE					
	INDIVIDUAL				Date of Birth	Race					
EN S		Address			Driver License Number						
_	Ξ	1477 IL ROUTE 75 N FREEPORT, IL 61032 , US	•		STATE: ILLINOIS COUNTRY: UNITED STATES						
	Sai	l <b>ety Equipment</b> On Duty (	Crash		Safety Equipment						
		Row 01 - FRONT ROW	Seat Po		SHOULDER & LAP BELT						
		Helmet Use			Helmet Compliance						
		Eye Protection			Tint Compliance						
83	900	Injury Se	verity	NJURY	Airbag NON DEPLOYED						
		Ejected	Ejection Pa	ith	L		Trapped/Extricated				
		Medical Transport	MOLENE.	CTED/NOT APPL	EMS Agency Identifier		NOT TRAPPED EMS Run#				
		NOT TRANSPORTED Hospital			Date of Death		Time of Death				
		·			Date of Death		, and or Death				
		Distracted By	d By Source	• 							
		Distracted By Action									
		Nan Motarist  Prior Action	Jnit#	Location							
I		FROI ACION									

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 09/05/2022

LIND	INDIVIDUAL	Action					
		Action Other					To/From School
	Ĺ	Drug & Alcohol NO	d Alcohol Use	Suspected Drug Use NO			
	Ĭ	Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	•		Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results			
03	900	Drug Type	·				
		Individual Condition					
		APPEARED NORMAL					