6TL0CTJN2V 22-09999

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 10/07/2022

Crash Time 10:38 PM

	Document Number Override	Primary Crash Document#		Agency Crash Number 22-09999			Investigating Officer/Deputy DEPUTY A. KULAS			
22	Crash Date 10/07/2022	Crash Time 10:38 PM			Date Arrived		Time	Time Arrived		
OCTJN2V	Date Notified 10/07/2022	Time Notified 10:40 PM			Total Units 01		Total		Injured Total Killed 00	
0	On Emergency H	it and Run	Lane Closu			rk Zone	20000000	Trailer or To	owed	Reporting Threshold
eTL	Government Property	Active Sch	ool Zone	School B NO	lus Relat	ed	Tags	\$		
	Reportable	Crash Type NON-DOMEST	ICATED ANIM	AL W/ NC	INJUR	Υ		Amended		Secondary Crash
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.									
Ī	Location 									
	ON STH23 EB					Latitude Longitude				
	541 FT W					43.533033394 X Coordinate		-89.932		
	OF WAKERLY LN									
	IN THE TOWN OF EXCELSION SAUK COUNTY				263076			Y Coordinate 4824187.5		
					Structure Type NO STRUCTURE					
(Crash Scene									
1	First Harmful Event					Eiret Harm	ful Eventile	cation		
	NON DOMESTICATED ANIM				FirstHarmfulEventLocation ROADSIDE					
		AL (ALIVE)								
	Manner of Collision	= ==				Light Condition				
	00 - NO COLLISION W/VEHI	CLE IN TRANSPO	OKI							
	Road Surface Condition(s)					Roadway	Factor(s)			
ŀ	Environment Factor(s)									
	Liviloimient actor(s)									
ŀ	Weather Condition(s)									
	• •									
Ī	Animal Type				Relation To Trafficway					
	DEER					TRAFFICWAY - ON ROAD				
İ	Crash Classification - Location PUBLIC PROPERTY Tribal Land					Crash Classification - Jurisdiction				
						NO SPECIAL JURIS Access Control				
										Special Study
L										
Į	Unit Summary 💳									
	Unit Status Vehicle Operating			ting As C	lassification		UnitType			
				D CLASS				AUTOMOBILE		
ŀ	Vehicle Type				Operating As Endorsements					
01	(SPORT) UTILITY VEHICLE							-,		
ŀ	Total Occs Train/Bus#Recorded Total#Citations Is				e leeuod	ed Total Tra		<u> </u>		Mat Tynes
	2	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0				0		0	, actify poo
ŀ	Insurance?	Direction Of Travel		Pre CrashTire		Speed		ed Limit Tota		es
	YES EASTBOUND			Mark Mark						
LIND	Most Harmful Event: Collision With			Special Function		TION		Emergency Motor Vehicle Use NOT APPLICABLE		
_ [NON DOMESTICATED ANIM	AL (ALIVE)		NO SPECIAL FUNCTION						
	Traffic Way			Traffic Control			Traf		raffic Control Inoperative/Missing	
	Surface Type			Road Curvature			Road Grade			
				Note On value				7.000		

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	Truc	ck Bus or HazMat							
	2279061790	Vehicle							
		License Plate Number		Plate Type	St	Country of Issuance			
_		ADR7176		AUT - AUTOMOBILE	wı	UNITED STATES			
		Vehicle Identification Number		Make	Year	Model			
2	5	1GNKVGED4BJ182708		CHEVROLET		TRAVERSE			
		Color		Body Style	Bus Use				
TIND		WHI - WHITE		UT - SPORT UTILITY V					
	Ш	Initial Contact Point		Vehicle Damage			7 8 9 10 11		
	VEHIC	12 - FRONT		40 55005			6 12		
	Ш	Extent Of Damage DISABLING DAMAGE		12 - FRONT			5 4 8 2 1		
		Towed Due To Damage		Vehicle Removed By		to the individual section of the control of the con			
		TOWED DUE TO DISABLIN	IG DAMAGE	Versicle iversitioned by					
		What Driver Was Doing		Vehicle Factors					
		Driver Prior Action Other		1					
		Driver Actions							
١.	VEHICLE	NO CONTRIBUTING ACTION							
	<u>O</u>								
5									
		OwnerName		Owner Address					
		CAVIDE WORKS							
2	5								
١.		Policy Holder		4					
H		Insurance Company	Individual						
⊃		PROGRESSIVE-CLASSIC-II	NS-CO	CHRISTINA ESPINO					
		individual				NA SECTION DE LA COMPANION DE			
		Driver		Citations ssued					
		CHRISTINA M ESPINOZA		Citations Issued	Sex				
	3				Sex FEMALE				
⊨	DIVIDUA	(920) 229-2371		Citations Issued	Sex FEMALE Race				
ş		(920) 229-2371		Citations Issued 0	Sex FEMALE				
-		Address		Citations Issued 0	Sex FEMALE Race				
	Sec. 2012	Address 2045 VIKING DR		Citations Issued 0 Date of Birth Driver License Number	FEMALE Race HISPANIC				
l	2	Address		O Date of Birth	FEMALE Race HISPANIC				
	Sec. 2012	Address 2045 VIKING DR REEDSBURG, WI 53959 , U	Js	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN	FEMALE Race HISPANIC				
	Z	Address 2045 VIKING DR REEDSBURG, WI 53959 , t	Js	Citations Issued 0 Date of Birth Driver License Number	FEMALE Race HISPANIC				
	Z	Address 2045 VIKING DR REEDSBURG, WI 53959 , t	JS Crash	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment	Sex FEMALE Race HISPANIC COUNTRY: U				
	Z	Address 2045 VIKING DR REEDSBURG, WI 53959 , t	Js	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN	Sex FEMALE Race HISPANIC COUNTRY: U				
	Z	Address 2045 VIKING DR REEDSBURG, WI 53959 , t	JS Crash	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP E	Sex FEMALE Race HISPANIC COUNTRY: U				
	Z	Address 2045 VIKING DR REEDSBURG, WI 53959 , t fety Equipment Row	JS Crash	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment	Sex FEMALE Race HISPANIC COUNTRY: U				
	Z	Address 2045 VIKING DR REEDSBURG, WI 53959 , t fety Equipment Row	JS Crash	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP E	Sex FEMALE Race HISPANIC COUNTRY: U				
	Z	Address 2045 VIKING DR REEDSBURG, WI 53959 , t Fety Equipment Row HelmetUse Eye Protection	US Crash Seat Position	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP E Helmet Compliance	Sex FEMALE Race HISPANIC COUNTRY: U				
10	Z	Address 2045 VIKING DR REEDSBURG, WI 53959 , t Fety Equipment Row Helmet Use Eye Protection Injury Sev	JS Crash Seat Position	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP E Helmet Compliance	Sex FEMALE Race HISPANIC COUNTRY: U				
01	Z	Address 2045 VIKING DR REEDSBURG, WI 53959 , L Fety Equipment Row HelmetUse Eye Protection Injury Sev	Seat Position Perity ARENT INJURY	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP E Helmet Compliance	Sex FEMALE Race HISPANIC COUNTRY: U	NITED STATES			
01	Z	Address 2045 VIKING DR REEDSBURG, WI 53959 , L Fety Equipment Row HelmetUse Eye Protection Injury Sev	JS Crash Seat Position	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP E Helmet Compliance	Sex FEMALE Race HISPANIC COUNTRY: U				
01	Z	Address 2045 VIKING DR REEDSBURG, WI 53959 , U Fety Equipment Row Helmet Use Eye Protection Injury Sev NO APP	Seat Position Perity ARENT INJURY	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP E Helmet Compliance Tint Compliance	Sex FEMALE Race HISPANIC COUNTRY: U	NITED STATES Trapped/Extricated			
01	Z	Address 2045 VIKING DR REEDSBURG, WI 53959 , L Fety Equipment Row HelmetUse Eye Protection Injury Sev	Seat Position Perity ARENT INJURY	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP E Helmet Compliance	Sex FEMALE Race HISPANIC COUNTRY: U	NITED STATES			
01	Z	Address 2045 VIKING DR REEDSBURG, WI 53959 , U Fety Equipment Row Helmet Use Eye Protection Injury Sev NO APP Ejected Medical Transport	Seat Position Perity ARENT INJURY	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP E Helmet Compliance Tint Compliance	Sex FEMALE Race HISPANIC COUNTRY: U	NITED STATES Trapped/Extricated			

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Crash Time 10:38 PM

		Distracted By So	urce				
		Distracted By					
		Distracted By Action					
		Non Motorist Striking Unit#	Location				
		Prior Action					
		Action					
	_						
_	INDIWIBUAL						
UNIT	MI						
_	Q.						
	_						
		Action Other					To/From School
							1 O/From School
		Drug & Alcohol NO		1			
	L		NO				
		Alcohol Test Given	Alcohol Test Type	•	AlcoholTestR		
		TEST NOT GIVEN			T		
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results		
01	001	Drug Type	'		•		
_	0						
		Individual Condition					
		APPEARED NORMAL					