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 Cras 22-11969 | sh Number | Investigating DEPUTY B. | Officer/Deputy TRAGER | |
|--|-------------------------------------|----------------------------|---------------------|--------------------------|--------------------------|------------------------|
| Crash Date 11/30/2022 | Crash Time 07:53 AM | Date Arrived 11/30/2022 | | Time Arrived 08:00 AM | | |
| Crash Date 11/30/2022 Date Notified 11/30/2022 On Emergency Hit Government Property | Time Notified 07:54 AM | Total Units 02 | | Total Injured 00 | Total Kille | ed |
| On Emergency Hit | and Run Lane Clos | | Work Zone | Trailer | or Towed | Reporting Threshold |
| Government Property | Active School Zone | School Bus i | Related | Tags | | |
| Reportable | Crash Type DT4000 (STANDARD CRAS | H) | | Amende | ed | Secondary Crash |
| Description Diagram | | | | | Reconstruction | n Bv |
| | | | | | | • |
| | | | | | <u> </u> | |
| | | | | | Photos By | |
| | Berkley Byld. | | क | | | |
| | • | | Not to Sca | | Additional Info NONE | rmation |
| | | | NO TO SEC | ne | | |
| | | | | | | |
| | | | | | | |
| | [| _ 800 0 | | | | |
| | 1 | | | | | |
| | | يا Village | of West Baraboo | , | | |
| | 17 | | | | | |
| | Hill St. | 3 | | | | |
| | 2 | J | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| I, a sworn law enforceme | nt officer, agree that I have r | not added an | y CJIS data in this | report. | | |
| ON NOVEMBER 30, 2022 AT APPRO WEST BARABOO WHEN IT ATTEMF TO PARK. UNIT 2 WAS LEGALLY PA | PTED TO PULL OVER TO PARK. U | NIT 1 CUT TOO | CLOSE TO UNIT 2 WH | ILE PULLING O | VER AND STU | CK UNIT 2 WHILE TRYING |

Location

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 11/30/2022

| • | ON HILL ST 125 FT S OF BERKLEY BLVD | | Latitude 43.476730825 X Coordinate | | | Longitu -89.76 Y Coor | 0900087 | |
|-----------|--|---|---|------------------------|---|--|---|--------------------------------|
| | IN THE VILLAGE OF WES | | 276706.4 | 2.0.000 | | | 60.5 | |
| | | | | Structure | Туре | | | |
| | Crash Scene | | | | | | | |
| | FirstHarmfulEvent PARKED MOTOR VEHICL | E | | First Harm ON ROA | nful Event L DWAY | ocation. | | |
| | Manner of Collision 01 - ANGLE | | | Light Con | | | | |
| | Road Surface Condition(s) | | | Roadway | | | | |
| | DRY | | | | | | | |
| | Environment Factor(s) | | | | | | | |
| | NONE | | | NONE | | | | |
| | Weather Condition(s) | | | | | | | |
| | CLOUDY | | | | | | | |
| | Animal Type | | | | To Trafficwa CWAY - O | • | | |
| | Crash Classification - Location PUBLIC PROPERTY | | | l l | Crash Classification - Jurisdiction NO SPECIAL JURISDICTION | | | |
| | Tribal Land | | | Access C | Access Control NO CONTROL | | | Special Study |
| | Within Interchange Area | Junction Location NON-JUNCTION | | ection Type AN INTERSE | CTION | | | |
| | | | <u> </u> | | | | | |
| | Unit Summary 🛚 💳 | | | | | | | |
| | Unit Status IN TRANSIT | | Vehicle Operating D CLASS | As Classification | 3 | UnitType AUTOMO | | |
| | Unit Status IN TRANSIT Vehicle Type | | | As Classification | 3 | 1 | | ements |
| 5 | Unit Status IN TRANSIT | Train/Bus#Recorded | | | TotalTrai | AUTOMO Operating A | \s Endors | ements zMatTypes |
| | Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs | Train/Bus#Recorded Direction Of Travel NORTHBOUND | D CLASS Total # Citations Is: | sued | TotalTrai | AUTOMO Operating A | s Endorse Total Ha | zMat Types |
| | Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs 3 Insurance? | Direction Of Travel NORTHBOUND Vith | Total#Citations Is 0 Pre Crash | sued Tire | TotalTrai 0 Speed Lii | AUTOMO Operating A | Total Ha Total Lai Total Lai Motor Ve | zMat Types nes hicle Use |
| | Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs 3 Insurance? YES Most Harmful Event: Collision V PARKED MOTOR VEHICL: Traffic Way TWO-WAY, NOT DIVIDED | Direction Of Travel NORTHBOUND Vith | Total # Citations Is 0 Pre Crash Mark Special Function | sued Tire | TotalTrai 0 Speed Lii | AUTOMO Operating A illers mit Emergency NOT APP | Total Ha 0 Total Lai 2 Motor Ve | zMat Types nes hicle Use |
| | Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs 3 Insurance? YES Most Harmful Event: Collision W PARKED MOTOR VEHICL: Traffic Way TWO-WAY, NOT DIVIDED Surface Type | Direction Of Travel NORTHBOUND With | Total # Citations Is 0 Pre Crash Mark Special Function NO SPECIAL FL Traffic Control NO CONTROL Road Curvature | sued Tire | TotalTrai 0 Speed Lii | AUTOMO Operating A illers mit Emergency NOT APP Traffic Con NO Road Grade | Total Ha 0 Total Lai 2 Motor Ve LICABLE | zMat Types nes hicle Use |
| LO INO | Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs 3 Insurance? YES Most Harmful Event: Collision V PARKED MOTOR VEHICL: Traffic Way TWO-WAY, NOT DIVIDED | Direction Of Travel NORTHBOUND With | Total # Citations Is 0 Pre Crash Mark Special Function NO SPECIAL FL Traffic Control NO CONTROL | sued Tire | TotalTrai 0 Speed Lii | AUTOMO Operating A illers mit Emergency NOT APP Traffic Con | Total Ha 0 Total Lai 2 Motor Ve LICABLE | zMat Types nes hicle Use |
| | Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs 3 Insurance? YES Most Harmful Event: Collision V PARKED MOTOR VEHICL: Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS) Truck Bus or HazMat | Direction Of Travel NORTHBOUND With | Total # Citations Is 0 Pre Crash Mark Special Function NO SPECIAL FL Traffic Control NO CONTROL Road Curvature | sued Tire | TotalTrai 0 Speed Lii | AUTOMO Operating A illers mit Emergency NOT APP Traffic Con NO Road Grade | Total Ha 0 Total Lai 2 Motor Ve LICABLE | zMat Types nes hicle Use |
| UNII 01 | Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs 3 Insurance? YES Most Harmful Event: Collision V PARKED MOTOR VEHICL: Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS Truck Bus or HazMat | Direction Of Travel NORTHBOUND With | Total # Citations Is 0 Pre Crash Mark Special Function NO SPECIAL FL Traffic Control NO CONTROL Road Curvature | sued Tire JNCTION | TotalTrai 0 Speed Lii | AUTOMO Operating A illers mit Emergency NOT APP Traffic Con NO Road Grade | Total Ha 0 Total Lai 2 Motor Ve LiCABLE trol Inoper | zMat Types nes hicle Use |
| | Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs 3 Insurance? YES Most Harmful Event: Collision V PARKED MOTOR VEHICL Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS Truck Bus or HazMat NO Vehicle License Plate Number AFR9899 Vehicle Identification Nur | Direction Of Travel NORTHBOUND With E | Total # Citations Is 0 Pre Crash Mark Special Function NO SPECIAL FU Traffic Control NO CONTROL Road Curvature STRAIGHT Plate Type AUT - AUTOMO | sued Tire JNCTION | Total Trai 0 Speed Lii 15 St WI Year | AUTOMO Operating A illers mit Emergency NOT APP Traffic Con NO Road Grade LEVEL Country of is UNITED S' Model | Total Ha 0 Total Lai 2 Motor Ve LiCABLE trol Inoper | zMat Types nes hicle Use |
| 01 ONI 01 | Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs 3 Insurance? YES Most Harmful Event: Collision V PARKED MOTOR VEHICL Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS Truck Bus or HazMat NO Vehicle License Plate Number AFR9899 | Direction Of Travel NORTHBOUND With E | Total # Citations Is 0 Pre Crash Mark Special Function NO SPECIAL FL Traffic Control NO CONTROL Road Curvature STRAIGHT Plate Type AUT - AUTOMO | sued Tire JNCTION | Total Trai 0 Speed Lii 15 | AUTOMO Operating A illers mit Emergency NOT APP Traffic Con NO Road Grade LEVEL Country of is UNITED S: | Total Ha 0 Total Lai 2 Motor Ve LiCABLE trol Inoper | zMat Types nes hicle Use |
| | Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs 3 Insurance? YES Most Harmful Event: Collision V PARKED MOTOR VEHICL: Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS Truck Bus or HazMat NO Vehicle License Plate Number AFR9899 Vehicle Identification Nur WAUBFAFL5AN0332 Color WHI - WHITE | Direction Of Travel NORTHBOUND With E | Total # Citations Is 0 Pre Crash Mark Special Function NO SPECIAL FU Traffic Control NO CONTROL Road Curvature STRAIGHT Plate Type AUT - AUTOMO Make AUDI Body Style SD - SEDAN | sued Tire JNCTION | Total Trai 0 Speed Lii 15 St WI Year | AUTOMO Operating A illers mit Emergency NOT APP Traffic Con NO Road Grade LEVEL Country of Is UNITED S' Model A4 | Total Ha 0 Total Lai 2 Motor Ve LiCABLE trol Inoper | zMat Types nes hicle Use |
| | Unit Status IN TRANSIT Vehicle Type PASSENGER CAR Total Occs 3 Insurance? YES Most Harmful Event: Collision V PARKED MOTOR VEHICL: Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS Truck Bus or HazMat NO Vehicle License Plate Number AFR9899 Vehicle Identification Nur WAUBFAFL5AN0332 Color | Direction Of Travel NORTHBOUND With E S) | Total # Citations Is 0 Pre Crash Mark Special Function NO SPECIAL FU Traffic Control NO CONTROL Road Curvature STRAIGHT Plate Type AUT - AUTOMO Make AUDI Body Style | Sued Tire JNCTION | Total Trai 0 Speed Lii 15 St WI Year | AUTOMO Operating A illers mit Emergency NOT APP Traffic Con NO Road Grade LEVEL Country of Is UNITED S' Model A4 | Total Ha 0 Total Lai 2 Motor Ve LiCABLE trol Inoper | zMat Types nes hicle Use |

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22-11969

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | | Towed Due To Damage NOT TOWED | | Vehicle Removed By | | | | |
|------|-------------------|--|---|--|----------------|---|--|--|
| | | What Driver Was Doing | | OPERATOR Vehicle Factors | | | | |
| | | PARK MANEUVER | | Versione i deters | | | | |
| | | Driver Prior Action Other | | NOT APPLICABLE | | | | |
| | | Driver Actions | | | | | | |
| | щ | OTHER CONTRIBUTING | ACTION | | | | | |
| UNIT | <u>□</u> | | | | | | | |
| 🗖 | VEHICL | | | | | | | |
| | | | | | | | | |
| | | OwnerName JONATHAN CLINTON HU | TCHENS | Owner Address 202 W MULBERI | RY ST | | | |
| 2 | 5 | | | BARABOO, WI 5 | 3913 , US | | | |
| | | | | | | | | |
| | | Sequence Of Events | | | | | | |
| | 5 | PARKED MOTOR VEHICL | E | | | | | |
| | 8 | Event | | | | | | |
| | 65 | Event | | | | | | |
| | 03 | Fuert | | | | | | |
| | 3 | Event | | | | | | |
| ⊨ | | Policy Holder | | | | | | |
| IN S | | Insurance Company STATE-FARM-GENERAL- | INS-CO | Individual JESSICA HUTCHE | -NS | | | |
| | | n disabisal | | | | | | |
| | | Driver | | Citations Issued Sex | | | | |
| | _ | JESSICA LYNN HUTCHEN (608) 434-2460 | IS | 0 FEMALE | | | | |
| _ | INDIVIDUAL | (000) 404 2400 | | Date of Birth Race WHITE | | | | |
| EN S | 2 | a | | Driver License Number | | | | |
| - | 202 W MULBERRY ST | | | Driver License Numb | | | | |
| | Z | Address 202 W MULBERRY ST BARABOO, WI 53913 , US | 8 | Driver License Number | | HTED STATES | | |
| | Z | 202 W MULBERRY ST | S | | | HTED STATES | | |
| | | 202 W MULBERRY ST BARABOO, WI 53913 , US | | | | HTED STATES | | |
| | | 202 W MULBERRY ST BARABOO, WI 53913 , US Con Duty | Crash | STATE: WISCONS Safety Equipment | IN COUNTRY: UN | HTED STATES | | |
| | | 202 W MULBERRY ST BARABOO, WI 53913 , US | | STATE: WISCONS | IN COUNTRY: UN | HTED STATES | | |
| | | 202 W MULBERRY ST BARABOO, WI 53913 , US Pety Equipment Row | Crash Seat Position | STATE: WISCONS Safety Equipment | IN COUNTRY: UN | HTED STATES | | |
| | | 202 W MULBERRY ST BARABOO, WI 53913 , US Ety Equipment Row 01 - FRONT ROW | Crash Seat Position | STATE: WISCONS Safety Equipment SHOULDER & LAF | IN COUNTRY: UN | HTED STATES | | |
| | Sal | 202 W MULBERRY ST BARABOO, WI 53913 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection | Crash Seat Position 07 - LEFT | STATE: WISCONS Safety Equipment SHOULDER & LAF Helmet Compliance Tint Compliance | IN COUNTRY: UN | HTED STATES | | |
| 01 | | 202 W MULBERRY ST BARABOO, WI 53913 , US Ety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection | Seat Position 07 - LEFT | STATE: WISCONS Safety Equipment SHOULDER & LAF Heimet Compliance | IN COUNTRY: UN | HTED STATES | | |
| 01 | Sal | 202 W MULBERRY ST BARABOO, WI 53913 , US Pety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Se Injury NO AP | Seat Position 07 - LEFT everity PARENT INJURY Ejection Path | STATE: WISCONS Safety Equipment SHOULDER & LAF Helmet Compliance Tint Compliance Airbag NON DEPLOYED | IN COUNTRY: UN | Trapped/Extricated | | |
| 01 | Sal | 202 W MULBERRY ST BARABOO, WI 53913 , US Pery Equipment Row 01 - FRONT ROW Heimet Use Eye Protection Injury Se Injury NO AP Ejected NOT EJECTED | Seat Position 07 - LEFT | STATE: WISCONS Safety Equipment SHOULDER & LAF Helmet Compliance Tint Compliance Airbag NON DEPLOYED | P BELT | Trapped/Extricated NOT TRAPPED | | |
| 01 | Sal | 202 W MULBERRY ST BARABOO, WI 53913 , US Pety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Se Injury NO AP | Seat Position 07 - LEFT everity PARENT INJURY Ejection Path | STATE: WISCONS Safety Equipment SHOULDER & LAF Helmet Compliance Tint Compliance Airbag NON DEPLOYED | P BELT | Trapped/Extricated | | |
| 01 | Sal | 202 W MULBERRY ST BARABOO, WI 53913 , US Pery Equipment Row 01 - FRONT ROW Heimet Use Eye Protection Injury Se Injury NO AP Ejected NOT EJECTED Medical Transport | Seat Position 07 - LEFT everity PARENT INJURY Ejection Path | STATE: WISCONS Safety Equipment SHOULDER & LAF Helmet Compliance Tint Compliance Airbag NON DEPLOYED | P BELT | Trapped/Extricated NOT TRAPPED | | |
| 01 | Sal | 202 W MULBERRY ST BARABOO, WI 53913 , US PETY Equipment Row 01 - FRONT ROW Heimet Use Eye Protection Injury Se Injury NO AP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital | Seat Position 07 - LEFT everity PARENT INJURY Ejection Path NOT EJECTED/NOT AF | STATE: WISCONS Safety Equipment SHOULDER & LAF Heimet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifie Date of Death | P BELT | Trapped/Extricated NOT TRAPPED EMS Run# | | |
| 01 | Sal | 202 W MULBERRY ST BARABOO, WI 53913 , US ELY Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury NO AP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital | Seat Position 07 - LEFT everity PARENT INJURY Ejection Path NOT EJECTED/NOT AF | STATE: WISCONS Safety Equipment SHOULDER & LAF Heimet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifie Date of Death | P BELT | Trapped/Extricated NOT TRAPPED EMS Run# | | |

Crash Date 11/30/2022 Crash Time 07:53 AM

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

Crash Date 11/30/2022

| | | Non Motorist | Unit# | Location | | | | | |
|------------|------------|------------------------------------|---------------|---------------------|-----------------------|-------------------|--------------------------------|----------------|--|
| | | Prior Action | | <u> </u> | | | | | |
| | | Action | | | | | | | |
| | | | | | | | | | |
| <u>ا</u> ا | INDIVIDUAL | | | | | | | | |
| UNIT | 3 | | | | | | | | |
| - | 2 | | | | | | | | |
| | | | | | | | | | |
| | | Action Other | | | | | | To/From School | |
| | | Suspec | ted Alcohol L | jse | Suspected Drug Use | | | | |
| | ı | Drug & Alcohol NO | | I ** | NO | | I Mark at Tank Banka | | |
| | | Alcohol Test Given TEST NOT GIVEN | | Alcohol Test Type | 2 | | Alcohol Test Results | | |
| | | Drug Test Given TEST NOT GIVEN | | Drug Test Type | | Drug Test Results | • | | |
| 01 | B | Drug Type | | <u> </u> | | | | | |
| | 0 | | | | | | | | |
| | | Individual Condition | | | | | | | |
| | | APPEARED NORMAL | | | | | | | |
| | | ndividual | | | | | | | |
| | | Passenger FINNEGAN M HUTCHENS | \$ | | Citations issued 0 | Sex MALE | | | |
| | INDIMIDUAL | | | | Date of Birth | Race | | | |
| N N | | Address 202 W MULBERRY ST | | | Driver License Number | | | | |
| | Z | BARABOO, WI 53913 , U | S | | | | | | |
| | | On Duty | Crach | | Cofety Favrings and | | | | |
| | Sai | ety Equipment | Cidali | | Safety Equipment | | | | |
| | | Row 02 - SECOND ROW | Seat Po | | SHOULDER & LAP E | BELT | | | |
| | | Helmet Use | | | Helmet Compliance | | | | |
| | | Eye Protection | | | TintCompliance | | | | |
| _ | 7 | | everity | | Airbag | | | | |
| ۶ | 905 | injury no ap | PARENT I | | NON DEPLOYED | | | | |
| | | Ejected NOT EJECTED | Ejection Pa | im CTED/NOT APPI | LICABLE | | Trapped/Extricated NOT TRAPPED | | |
| | | Medical Transport NOT TRANSPORTED | | | EMS Agency Identifier | | EMS Run# | | |
| | | Hospital | | | Date of Death | | Time of Death | | |
| | | Distract | ed By Source |) | | | | | |
| | | Distracted By Distracted By Action | | | | | | | |
| | | | | | | | | | |
| | | Non Motorist | Unit# | Location | | | | | |

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Crash Date 11/30/2022

| | | Prior Action | | | | | | | |
|---------|------------|---|--------------|----------------------|--------------------------|-------------------|--------------------------------|----------------|--|
| | | Action | | | | | | | |
| | 4 | | | | | | | | |
| <u></u> | NDIVIDUAL | | | | | | | | |
| L N | Z | | | | | | | | |
| | Z | | | | | | | | |
| | | | | | | | | | |
| | | Action Other | | | | | | To/From School | |
| | , | Suspect | ed Alcohol t | jse | Suspected Drug Use | | | | |
| | İ | Alcohol Test Given | | Alcohol Test Type | | | Alcohol Test Results | | |
| | | TEST NOT GIVEN | | | | | | | |
| | | Drug Test Given TEST NOT GIVEN | | Drug Test Type | | Drug Test Results | | | |
| 2 | 002 | Drug Type | | | | | | | |
| | | | | | | | | | |
| | | Individual Condition | | | | | | | |
| | | APPEARED NORMAL | | | | | | | |
| | | | | | | | | | |
| | | Passenger WILLIAM D HUTCHENS | | | Citations Issued 0 | sissued Sex MALE | | | |
| | INDIVIDUAL | | | | Date of Birth Race WHITE | | | | |
| Ę | | Address | | | Driver License Number | | | | |
| | Z | 202 W MULBERRY ST BARABOO, WI 53913 , US | 3 | | | | | | |
| | | | | | | | | | |
| | Saf | ety Equipment On Duty | Crash | | Safety Equipment | | | | |
| | | Row 02 - SECOND ROW | Seat Po | | SHOULDER & LAP | BELT | | | |
| | | HelmetUse | 00 - 14 | | Heimet Compliance | | | | |
| | | Eye Protection | | | Tint Compliance | | | | |
| | | | u o sib s | | Airbag | | | | |
| ٤ | 8 | Injury Se Injury NO API | PARENT I | NJURY | NON DEPLOYED | | | | |
| | | Ejected NOT EJECTED | Ejection Pa | ith CTED/NOT APPL | LICABLE | | Trapped/Extricated NOT TRAPPED | | |
| | | Medical Transport | | | EMS Agency Identifier | | EMS Run# | | |
| | | NOT TRANSPORTED Hospital | | | Date of Death | | Time of Death | | |
| | | | | | Date of Dates? | | , and 0, 500 at | | |
| | | Distracted By Distracte | d By Source | • | | | | | |
| | | Distracted By Action | | | | | | | |
| | | Striking (| Jnit# | Location | | | | | |
| | | Non Motorist Prior Action | | | | | | | |
| I | | 1 DELECTION | | | | | | | |

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Crash Date 11/30/2022

| TINO | INDIVIDUAL | Action | | | | | | | | |
|-------------|------------|--|-------------------------------|-------------------|------------------------------------|-----------|--------------|-----------------------|----------------|--|
| | | Action Other | | | | | | | | To/From School |
| | 1 | Drug & Alcohol NO | pected Alcohol U | se | Suspected Drug Use NO | | | | | |
| | | Alcohol Test Given TEST NOT GIVEN | | Alcohol Test Type | | | | Alcohol Tes | t Results | |
| | | Drug Test Given TEST NOT GIVEN | | Drug Test Type | | Drug Te | est Results | | | |
| 9 | 003 | Drug Type | | | | | | | | |
| | | Individual Condition APPEARED NORMAL | | | | | | | | |
| | Limi | t Summon. | | | | | | | | |
| | Unit | t Summary Status SALLY PARKED | | | ehicle Operating As Class | ification | | Unit Type | RII F | |
| 7 | | cle Type | | | | | | Operating A | | ements |
| 05 | _ | ORT) UTILITY VEHICLE | | | | | T . IT " | | 7 | 14.47 |
| | 1 | lOccs | Train/Bus#Re | 0 | | | Total Traile | | 0 | zMat Types |
| | YES | | Direction Of Tra | D D | Pre CrashTire Mark | - 1 | Speed Limi | | Total Lar 2 | |
| L N N | MO. | tHarmfulEvent: Collision Wi FOR VEH IN TRANSPOR | | | pecial Function IO SPECIAL FUNCTIO | N | | Emergency NOT APPL | ICABLE | |
| | | ic Way D-WAY, NOT DIVIDED | | | raffic Control | | | Traffic Cont | rol Inopera | ative/Missing |
| | | ace Type (CKTOP (BITUMINOUS) | ı | | oad Curvature TRAIGHT | | | Road Grade | | |
| | | k Bus or HazMat | | | | | | | | |
| | 1 | Vehicle | SINK KIKIKI KIKI KIKI KI | eseseseseseses | | cecce | .ccccccccc | SESERE | | |
| | | License Plate Number 851VUA | SHAHARARARARARARARARARARARARA | I | Plate Type AUT - AUTOMOBILE | | I | Country of Is: | | BESSELVEN MENTENEN BESSELVEN MENTENEN BESSELVEN MENTEN BESSELVEN BESSELVE |
| 02 | 02 | Vehicle Identification Number 2T3BK31V69W010779 | | V | Make TOYOTA | , | Year | Model RAV4 LTD | | |
| | | Color BLU - BLUE | | | Body Style LL - CARRYALL | | | Bus Use | | |
| E | OLE | Initial Contact Point 11 - LEFT FRONT CORNER | | \ | /ehicle Damage | | <u>'</u> | | | 7 8 9 10 11 |
| IN | VEHICL | Extent Of Damage FUNCTIONAL DAMAG | E | | 11 - LEFT FRONT COI | RNER | | | | 6 T2 S 4 3 2 1 |
| | | Towed Due To Damage NOT TOWED | | I . | /ehicle Removed By DWNER | | | | • | |
| | | What Driver Was Doing LEGALLY PARKED | | | | | | | | |

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| | | | | _ | | | | |
|-------|------------|--|-------------------------------|---------------------|---|-------------|----------------------------|--|
| | | | | | Vehicle Factors | | | |
| | | Driver Prior Action Other | | | NOT APPLICABLE | | | |
| TINO | VEHICLE | Driver Actions NO CONTRIBUTING ACT | ION | | | | | |
| 05 | 02 | OwnerName RICKY CHARLES MARKL (608) 434-5241 | .EY | | Owner Address 129 3RD ST BARABOO, WI 5 | 53913 , US | | |
| | 5 | L Sequence Of Events Event MOTOR VEH IN TRANSP | ORT | | | | | |
| | 8 | Event | | | | | | |
| | 83 | Event | | | | | | |
| | \$ | Event | | | | | | |
| | | Policy Holder | | | | | | |
| IN IN | | Insurance Company MADISON-COUNTY-MUT | UAL-AUTO | MOING MOING MOING M | Individual RICKY MARKLEY | | | |
| | | individual | | | | | | |
| | _ | Passenger RICKY CHARLES MARKL (608) 434-5241 | .EY | | Citations issued 0 | Sex MALE | | |
| TINO. | INDIVIDUAL | | | | Date of Birth | Race | | |
| 5 | 2 | Address 129 3RD ST BARABOO, WI 53913 , U | S | | Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES | | | |
| | Sai | ety Equipment On Duty | / Crash | | Safety Equipment | | | |
| | | Row 01 - FRONT ROW | SeatPo 07 - LE | | SHOULDER & LA | P BELT | | |
| | | HelmetUse | | | Helmet Compliance | | | |
| | | Eye Protection | | Tint Compliance | | | | |
| 05 | 700 | Injury S Injury NO AP | everity PARENT II Ejection Pa | | Airbag UNKNOWN | | Transpad/Syteicotor | |
| | | Ejected UNKNOWN | UNKNOW | | | | Trapped/Extricated UNKNOWN | |
| | | Medical Transport NOT TRANSPORTED | | | EMS Agency Identifie | er | EMS Run# | |
| | | Hospital | | | Date of Death | | Time of Death | |
| | | Distracted By | ed By Source | • | 1 | | · | |
| | | Distracted By Action | | | | | | |
| | | Non Motorist | Unit# | Location | | | | |

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 11/30/2022

| | | Prior Action | | | | | |
|------|-----------|--------------------------------|-------------------|-----------------------|-------------------|----------------------|----------------|
| | | Phot Action | | | | | |
| | | A () | | | | | |
| | | Action | | | | | |
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| UNIT | NDIVIDUAL | | | | | | |
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| | | | | | | | I : : |
| \$1 | | Action Other | | | | | To/From School |
| | | Commented Allerhed | 11 | I 0 | | | |
| | • | Drug & Alcohol NO | Use | Suspected Drug Use NO | | | |
| | | | T., | | | T., | |
| | | Alcohol Test Given | Alcohol Test Type | | | Alcohol Test Results | |
| | | TEST NOT GIVEN | | | T= = = . | | |
| | | Drug Test Given TEST NOT GIVEN | Drug Test Type | | Drug Test Results | 3 | |
| | | | | | | | |
| 02 | 8 | Drug Type | | | | | |
| | 9 | | | | | | |
| | | Individual Condition | | | | | |
| | | individual Containors | | | | | |
| | | APPEARED NORMAL | | | | | |
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