#### WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Overiide							
	Primary Crash [	Document#	Agency 22-123	Crash Number	Investigating Officer/Deputy DEPUTY B. TRAGER		
Drash Date 12/10/2022	Crash Time 09:48 AM		Date Ar 12/10/		Time Arrived 09:58 AM		
Date Notified 12/10/2022	Time Notified 09:49 AM		Total U	nits	Total Injured	Total Kille	ed
On Emergency Hi	t and Run	Lane Close	ure Work Zone		Trailer	or Towed	Reporting  Threshold
Government Property	Active Sc	hool Zone	School NO	Bus Related	Tags		
<b>▼</b> Reportable	Crash Type DT4000 (STA	NDARD CRASH	ł)		Amende	đ	Secondary  Crash
escription Diagram						Reconstructio	•
		N. Re	edsburg	Not to Scale	-	Photos By  Additional Info	ormation

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Crash Date 12/10/2022

Crash Time 09:48 AM

	_ocation ===									
-	ON N REEDSBURG RD				Latitude			Longit	ude	
						43.532956183			-89.807910132	
	OF ROSEY LN IN THE TOWN OF DELTON					X Coordinate			Y Coordinate	
	IN SAUK COUNTY					273115.125 4823832.5				
						Туре		•		
. L	Crash Scene									
ī	First Harmful Event				FirstHarm	nful Event Lo	ocation			
	MOTOR VEH IN TRANSF	PORT			ON ROA					
ł	Manner of Collision				Light Cone	dition				
	06 - SIDESWIPE/OPPOS	ITE DIRECTION			DAYLIGI	HT				
ŀ	Road Surface Condition(s)				Roadway	Factor(s)				
	SLUSH									
ľ	Environment Factor(s)				-					
	WEATHER CONDITIONS	3			NONE					
ľ	Weather Condition(s)				1					
	CLOUDY									
ľ	Animal Type				1	o Trafficwa				
ŀ	Crash Classification - Locatio	n				SWAY - OI				
	PUBLIC PROPERTY				NO SPECIAL JURISDICTION					
	Tribal Land				Access Control Special Study NO CONTROL					
	Within Interchange Area NO	Junction Location NON-JUNCTION		Intersection	n Type INTERSE	CTION				
i	Jnit Summary =									
$\dashv$	Unit Status		Vehicle On	erating As C	lassification	1	UnitType			
	IN TRANSIT		D CLASS							
ŀ	Vehicle Type				Operating As Endorsements			ements		
	UTILITY TRUCK/PICKUF	TRUCK						, ,		
ł	Total Occs	Train/Bus#Recorded	Total#Cita	tions Issued	ł	Total Trail	ers	TotalHa	zMat Types	
	1		0			0		0	• •	
ŀ	Insurance?	Direction Of Travel	Pre	CrashTire	<u> </u>	Speed Lin	imit Total		Lanes	
	YES	WESTBOUND		Mark	1110		2			
ţ	Most Harmful Event: Collision	n With	Special Fur				Emergency Motor Vehicle Use			
	MOTOR VEH IN TRANSF	PORT	NO SPEC	IAL FUNC	CTION		NOT APPLICABLE  Traffic Control Inoperative/Missing			
Ī	Traffic Way		Traffic Con							
ļ	TWO-WAY, NOT DIVIDE	D	NO CONT				NO Road Grade			
	Surface Type	10)	Road Curv							
ļ	BLACKTOP (BITUMINOL	US)	CURVE R	IGH I			LEVEL			
	Truck Bus or HazMat  NO									
	Vehicle	resease established and the contract	en a		and the second second	ereekkeekk				
(mpagas)	License Plate Number		Plate Type	)		St	Country of Is	suance		
XXXXX	NT3156	LTK - LIC	GHT TRUC			UNITED STATES				
Single-statement of the statement of the	Vehicle Identification N	Make			Year	Model				
Professional Professional	S   1FTFW1EF6DFC51					2013	F150			
/overlanders/	Color		Body Style	•			Bus Use			
Challe de Carlos	BLK - BLACK		PK - PIC	KUP						
Artenda.	Initial Contact Point		Vehicle Da	Vehicle Damage					7 8 9 10 11	
3							I	and a company of the property of the company of the		
	08 - LEFT SIDE REA	AR								
5	08 - LEFT SIDE REAL Extent Of Damage DISABLING DAMAGE		08 - LEF	T SIDE RE	EAR				6 12 5 4 3 2 1	

#### 6TL0DBC3FB

22-12310

#### WISCONSIN MOTOR VEHICLE CRASH REPORT

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		Towed Due To Damage		Vehicle Removed By					
		TOWED DUE TO DISABLI	NG DAMAGE	OWNER					
		What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors					
		Driver Prior Action Other		NOT APPLICABLE					
UNIT	VEHICLE	Driver Actions SPEED TOO FAST/COND							
2	5	OwnerName STEPHANIE LYNN BEARD (608) 393-1168	SLEY	Owner Address E11905 COUNTY BARABOO, WI 53					
		Sequence Of Events		1					
	5	Event MOTOR VEH IN TRANSPO	PRT						
	8	Event							
	8	Event							
	7	Event							
_		Policy Holder							
H		Insurance Company ATLANTIC-STATES-INS-C		Individual STEPHANIE BEAR					
		Individual							
		Driver		Citations Issued Sex					
	4	STEPHANIE LYNN BEARD (608) 393-1168	SLET	0 Date of Birth	FEMALE Race				
╘	3				WHITE				
ENO.	INDIVIDUAL	Address E11905 COUNTY TRUNK I BARABOO, WI 53913 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
		On Duty  Tety Equipment	Crash	Safety Equipment					
	34	Row	Seat Position	SHOULDER & LAP BELT					
		01 - FRONT ROW	07 - LEFT						
		Helmet Use			Helmet Compliance				
		Eye Protection		Tint Compliance					
2	8	((22)))(1)))(1))(1)	PARENT INJURY	Airbag DEPLOYED-COMBI	NATION				
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APF	PLICABLE		Trapped/Extricated NOT TRAPPED			
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run#			
		Hospital		Date of Death		Time of Death			
		Distracte	d By Source						
		Distracted By NOT AF Distracted By Action	'PLICABLE (NOT DISTR/	ACTED)					
	***********	NOT DISTRACTED							

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		_								
		Non Motorist	Striking Unit#	Location						
		Prior Action								
<u> </u> 		Action								
	ш									
H	INDIVIDUAL									
UNIT										
	Z									
		Action Other							To/From School	
	I	Drug & Alcohol	Suspected Alcohol U NO		Suspected Drug Use NO					
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test F	₹esults		
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Resul	ts			
2	8	Drug Type	Drug Type							
		Individual Condition								
		APPEARED NORM	AL							
		t Summary <b>=</b>								
		Status <b>'RANSIT</b>			ehicle Operating As Class  CLASS	ification	Unit Type  AUTOMOBI	LE		
02		icle Type SSENGER CAR		I			Operating As	Endorseme	ents	
		Occs	Train/Bus#Re	corded T	otal#Citations Issued	TotalTra	ilers T	Fotal HazMa	at Types	
	1	rance?	Direction Of Tra	0		0 Speed Li	mit T	) Fotal Lanes		
Е	YES		SOUTHBOU	·	Pre CrashTire Mark	35	2	2		
TINO		tHarmfulEvent: Collisio TOR VEH IN TRANS			pecial Function O SPECIAL FUNCTIO	Emergency Motor Vehicle Use NOT APPLICABLE				
		·			raffic Control O CONTROL	Traffic Control Inoperative/Missing  NO				
		aceType ACKTOP (BITUMINOUS)			oad Curvature URVE LEFT	Road Grade LEVEL				
		k Bus or HazMat								
		Vehicle		•		er er er er er er er er e		SSSSSSSSS		
		License Plate Number		I .	Plate Type AUT - AUTOMOBILE	St WI	Country of Issu			
~		AHR4315 Vehicle Identification N	Number		Make	Year	Model	UNITED STATES  Model		
05	8	2T3RWRFV4LW07	1487		гоуота	2020	RAV4			
		Color BLK - BLACK			Body Style JT - SPORT UTILITY \	/EHICLE	Bus Use			
١.	Щ	Initial Contact Point		\	/ehicle Damage				7 8 9 10 11	
UNIT	<b>WEHICL</b>	09 - LEFT SIDE MII Extent Of Damage DISABLING DAMA		I .	08 - LEFT SIDE REAR LEFT SIDE FRONT, 12		E MIDDLE, 10	-	5 4 3 2 1	
	>	Towed Due To Damag TOWED DUE TO D	je		/ehicle Removed By BILLS TOWING				The second secon	

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22-12310

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		What Driver Was Doing		V	ehicle Factors					
		NEGOTIATING CURVE								
		Driver Prior Action Other		N	OT APPLICABLE					
		Driver Actions								
	ш	NO CONTRIBUTING ACT	ION							
⊨	VEHICLE									
INI	Ĭ									
_	8									
		OwnerName ROBERT ALBERT KAISE	Ð		Owner Address N1450 TIMM RD					
05	8	(608) 432-3110	A.			N, WI 53944 , US				
_										
		ı Sequence Of Events								
		Event								
	8	MOTOR VEH IN TRANSP	ORT							
	8	Event								
	8	Event								
		Event								
	8									
_		Policy Holder								
INN		Insurance Company	200 200 200 200 200 2		Individual			seaseaseaseaseaseaseaseaseaseasease		
_		PROGRESSIVE-CLASSIC-INS-CO			ROBERT KAISER					
		Individual								
		Driver ROBERT ALBERT KAISER (608) 432-3110			Citations Issued Sex					
	7			Date of Birth	MALE Race					
_	INDIVIDUAL				Date of Billin	1,500				
FIND	3	Address			Driver License Number	 er				
ر	9	N1450 TIMM RD LYNDON STATION, WI 53	044 110		STATE: WISCONSIN COUNTRY: UNITED STATES					
		LINDON STATION, W. 55	344 , 03		TATE THOUGHT	000	TES STATES			
		On Dub	Crach		Cofety Favringsont					
	Sai	ety Equipment	Clash		Safety Equipment					
		Row	SeatPo	sition	SHOULDER & LAP BELT					
		01 - FRONT ROW								
		HelmetUse			Helmet Compliance					
		Eye Protection			Tint Compliance					
~	CN.	Injury S	everity		Airbag					
05	86	injury <sub>no ap</sub>	PARENT I	NJURY	DEPLOYED-COME	BINATION				
		Ejected	Ejection Pa				Trapped/Extricated			
		NOT EJECTED	NOT EJE	CTED/NOT APPL			NOT TRAPPED			
		Medical Transport			EMS Agency Identifie	ř	EMS Run#			
	NOT TRANSPORTED Hospital				Date of Death		Time of Death			
		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)								
			PLICABL	E (NOT DISTRAC	JIED)					
		Distracted By Action NOT DISTRACTED								
		L Strikina	Unit#	Location						
		Non Motorist								

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1 8		Truinu Antinu					
		Prior Action Prior Action					
		Action					
	4						
<u> </u>	2						
UNIT	INDIVIDUAL						
⊃ ∣	Ħ						
	Z						
		Action Other					To/From School
		Suspected Alcohol	Use	Suspected Drug Use			
	i	Drug & Alcohol NO		NO			
		Alcohol Test Given	Alcohol Test Type			Alcohol Test Results	
		TEST NOT GIVEN					
		Drug Test Given	Drug Test Type		Drug Test Results		
		TEST NOT GIVEN					
02	005	Drug Type	•		•		
0	8						
		Individual Condition					
		APPEARED NORMAL					
		AT LAKED HOKWAL					
1							