### WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| Document Number Overri   | ide Primary Crash [   | Document#                               | Agency<br>22-126  | Crash Number<br>24    |   | g Officer/Deputy<br>V. VERTEIN |                        |  |
|--------------------------|---|---|-------------------|-----------------------|---|--------------------------------|------------------------|--|
| Orash Date<br>12/17/2022 | Crash Time<br>02:38 PM  |   | Date Ar<br>12/17/ |                       | Time Arrived                              | ł                              |                        |  |
| Date Notified 2/17/2022  | Time Notified 02:41 PM  | Time Notified                           |                   | Total Units           |   | Total Kille                    | -<br>∍d                |  |
| On Emergency             | Hit and Run   | Lane Clos                               | sure              | ☐ Work Zone           | Trailer                                   | or Towed                       | Reporting  Threshold   |  |
| Government<br>Property   | Active So   | hool Zone                               | School<br>NO      | Bus Related           | Tags                                      |                                | •                      |  |
| Reportable               | Crash Type<br>DT4000 (STA   | NDARD CRAS                              | H)                |                       | Ameno                                     | led                            | Secondary Crash        |  |
| escription =             | •   |   |                   |                       | •   |                                |                        |  |
| gram                     |   |   |                   |                       |   | Reconstruction                 | on By                  |  |
|                          |   | 4                                       |                   |                       |   |                                |                        |  |
|                          |   | ×                                       |                   |                       |   | Photos By                      |                        |  |
|                          |   |   |                   |                       |   | W. VERTEII                     | N #9122                |  |
|                          |   | N                                       | lot to sca        | le                    |   |                                |                        |  |
|                          |   |   |                   |                       |   | Additional Info                | ormation               |  |
|                          |   |   |                   | ( )                   |   |                                |                        |  |
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|                          |   | (100)                                   | )                 |                       |   |                                |                        |  |
|                          |   |   |                   |                       |   |                                |                        |  |
|                          | 01  |   | 9                 | STH 33                |   |                                |                        |  |
|                          | "There is no see an are well as an are to as an are "                     |   |                   |                       |   |                                |                        |  |
|                          |   |   |                   |                       |   |                                |                        |  |
|                          |   | *************************************** |                   |                       |   |                                |                        |  |
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|                          |   |   |                   |                       |   |                                |                        |  |
|                          |   |   |                   |                       |   |                                |                        |  |
| ↓ I, a sworn law enf     | forcement officer, agr  | ee that I have n                        | not added         | l any CJIS data in tl | nis report.                               |                                |                        |  |
|                          |   |   |                   |                       |   |                                | AND UNIT 1 CROSSED THE |  |
| CENTERLINE WHERE IT E    | E, TIME, AND LOCATION (<br>ENTERED THE NORTHERN<br>) OF NECK, CHEST AND H | MOST DITCH LINI                         | E AND STE         | RUCK A TREE WHERE U   | INIT 1 CAME TO F                          | REST. THE AIR                  | BAGS DEPLOYED AND      |  |

Location

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Crash Date 12/17/2022

Crash Time 02:38 PM

|           | ON STH33 EB<br>0.35 MI E<br>OF EMERALD DR<br>IN THE TOWN OF LA VAL   | LE   |  | Latitude<br>43.56190604<br>X Coordinate                            |  | Y Coor   | 3793888<br>dinate                         |
|-----------|--|--|--|--|--|--|---|
|           | IN SAUK COUNTY   |  |  | 251749.0937<br>Structure Type                                      |  | 48278  | 08  |
|           |  |  |  | NO STRUCT  | URE  |  |   |
|           | Crash Scene 📉  |  |  |  |  |  |   |
|           | FirstHarmfulEvent TREE   |  |  | First Harmful E<br>ROADSIDE  | vent Location  |  |   |
|           | Manner of Collision 00 - NO COLLISION W/VE   | HICLE IN TRANSPORT                                 |  | Light Condition  DAYLIGHT  | 1  |  |   |
|           | Road Surface Condition(s) WET  |  |  | Roadway Fact   | tor(s)   |  |   |
|           | Environment Factor(s)  |  |  | -  |  |  |   |
|           | NONE   |  |  | NONE   |  |  |   |
|           | Weather Condition(s)   |  |  | 1  |  |  |   |
|           | CLOUDY   |  |  |  |  |  |   |
|           | Animal Type  |  |  | Relation To Tra  | afficway<br>Y - ON ROAD  |  |   |
|           | Crash Classification - Location PUBLIC PROPERTY  | 1  |  |  | cation - Jurisdictio   |  |   |
|           | Tribal Land  |  |  | Access Contro  | 1  |  | Special Study                             |
|           | Within Interchange Area  | Junction Location NON-JUNCTION                     |  | tion Type<br>N INTERSECTION  | ON   |  |   |
|           | Unit Summary =   |  | <u> </u>   |  |  |  |   |
|           |  |  | Vehicle Operating As   | Classification   | 1.1  |  |   |
|           | Unit Status IN TRANSIT   |  | D CLASS  | Classification   | Unit Typ<br>AUTO   | MOBILE   |   |
| _         | IN TRANSIT Vehicle Type  |  |  | Classification   | AUTO   |  | ements                                    |
| 01        | IN TRANSIT Vehicle Type PASSENGER CAR Total Occs   | Train/Bus#Recorded                                 | D CLASS  Total#Citations Issue   | ed Tot   | AUTO   | MOBILE  ng As Endorse  Total Ha.   | ements<br>zMat Types                      |
| _<br>E    | IN TRANSIT Vehicle Type PASSENGER CAR  | Train/Bus#Recorded  Direction Of Travel  EASTBOUND | Total#Citations Issue 0 Pre CrashTil   | ed Tot   | AUTON Operation tal Trailers   | MOBILE<br>ng As Endorse  | zMat Types                                |
| UNII 01   | IN TRANSIT  Vehicle Type  PASSENGER CAR  Total Occs 1  Insurance?  | Direction Of Travel EASTBOUND                      | D CLASS  Total#Citations Issue 0   | ed Tot<br>0<br>re Sp<br>55   | AUTON Operation tal Trailers   | MOBILE  ng As Endorse  Total Ha.  0  Total Lar   | zMatTypes<br>nes<br>hicle Use             |
|           | IN TRANSIT  Vehicle Type  PASSENGER CAR  Total Occs 1  Insurance? YES  Most Harmful Event: Collision   | Direction Of Travel <b>EASTBOUND</b> With          | Total#Citations Issue 0 Pre CrashTil Mark Special Function   | ed Tot<br>0<br>re Sp<br>55   | AUTOM Operatin tal Trailers eed Limit Emerge NOT A   | Total Ha.  Total Lar  2  ncy Motor Vei   | zMat Types<br>nes<br>hicle Use<br>E       |
|           | IN TRANSIT  Vehicle Type  PASSENGER CAR  Total Occs 1  Insurance? YES  Most Harmful Event: Collision TREE  Traffic Way TWO-WAY, NOT DIVIDED  Surface Type  | Direction Of Travel  EASTBOUND  With               | Total#Citations Issue 0  Pre CrashTil Mark  Special Function NO SPECIAL FUN  Traffic Control   | ed Tot<br>0<br>re Sp<br>55   | AUTOM Operatin tal Trailers eed Limit Emerge NOT A Traffic C   | Total Ha.  Total Lar  Total Lar | zMat Types<br>nes<br>hicle Use<br>E       |
|           | IN TRANSIT  Vehicle Type  PASSENGER CAR  Total Occs 1  Insurance? YES  Most Harmful Event: Collision TREE  Traffic Way TWO-WAY, NOT DIVIDED  | Direction Of Travel  EASTBOUND  With               | Total # Citations Issue 0  Pre CrashTil Mark  Special Function NO SPECIAL FUN  Traffic Control NO CONTROL  Road Curvature  | ed Tot<br>0<br>re Sp<br>55   | AUTOM Operatin tal Trailers eed Limit Emerge NOT A Traffic C NO Road G   | Total Ha.  Total Lar  Total Lar | zMat Types<br>nes<br>hicle Use<br>E       |
|           | IN TRANSIT  Vehicle Type  PASSENGER CAR  Total Occs 1 Insurance? YES  Most Harmful Event: Collision TREE  Traffic Way TWO-WAY, NOT DIVIDED  Surface Type BLACKTOP (BITUMINOU  Truck Bus or HazMat  | Direction Of Travel  EASTBOUND  With               | Total # Citations Issue 0  Pre CrashTil Mark  Special Function NO SPECIAL FUN  Traffic Control NO CONTROL  Road Curvature  | ed Tot<br>0<br>re Sp<br>55   | AUTOM Operatin tal Trailers eed Limit Emerge NOT A Traffic C NO Road G   | Total Ha.  Total Lar  Total Lar | zMat Types<br>nes<br>hicle Use<br>E       |
|           | IN TRANSIT  Vehicle Type  PASSENGER CAR  Total Occs 1 Insurance? YES  Most Harmful Event: Collision: TREE  Traffic Way TWO-WAY, NOT DIVIDED  Surface Type BLACKTOP (BITUMINOU  Truck Bus or HazMat NO  | Direction Of Travel  EASTBOUND  With               | Total # Citations Issue 0  Pre CrashTil Mark  Special Function NO SPECIAL FUN  Traffic Control NO CONTROL  Road Curvature  | ed Tot 0 Sp 55   | AUTOM Operation of the control of th | Total Ha.  Total Lar  Total Lar | zMat Types<br>nes<br>hicle Use<br>E       |
| ONI 01    | IN TRANSIT  Vehicle Type  PASSENGER CAR  Total Occs 1 Insurance? YES  Most Harmful Event: Collision TREE  Traffic Way TWO-WAY, NOT DIVIDED  Surface Type BLACKTOP (BITUMINOU  Truck Bus or HazMat NO  Vehicle License Plate Number 715PXV  Vehicle Identification Nu   | Direction Of Travel EASTBOUND With S)              | D CLASS  Total # Citations Issue 0  Pre CrashTil Mark  Special Function NO SPECIAL FUN  Traffic Control NO CONTROL  Road Curvature STRAIGHT  Plate Type AUT - AUTOMOB  Make  | ed Toto 0 Te Sp 55 CTION  St Wi Yee                                | AUTOM Operation tal Trailers  eed Limit  Emerge NOT A  Traffic C NO  Road Gi LEVEL  Country G UNITED  ar Model   | Total Ha.  O Total Lar 2 ncy Motor Vel PPLICABLE Control Inoperate rade  OF Issuance O STATES  | zMat Types<br>nes<br>hicle Use<br>E       |
|           | IN TRANSIT  Vehicle Type  PASSENGER CAR  Total Occs 1 Insurance? YES  Most Harmful Event: Collision TREE  Traffic Way TWO-WAY, NOT DIVIDED  Surface Type BLACKTOP (BITUMINOU  Truck Bus or HazMat NO  Vehicle  License Plate Number 715PXV   | Direction Of Travel EASTBOUND With S)              | Total # Citations Issue 0  Pre CrashTil  Mark  Special Function  NO SPECIAL FUN  Traffic Control  NO CONTROL  Road Curvature  STRAIGHT  Plate Type  AUT - AUTOMOB  | ed Tot 0 Sp. 55  | AUTON Operation tal Traillers  eed Limit  Emerge NOT A  Traffic C NO Road Gi LEVEL  Country C UNITED ar Model  | Total Ha.  O Total Lar 2 ncy Motor Vel PPLICABLE Control Inoperate rade  OF Issuance O STATES  | zMat Types<br>nes<br>hicle Use<br>E       |
| ONI 01    | IN TRANSIT  Vehicle Type  PASSENGER CAR  Total Occs 1 Insurance? YES  Most Harmful Event: Collision TREE  Traffic Way TWO-WAY, NOT DIVIDED  Surface Type BLACKTOP (BITUMINOU  Truck Bus or HazMat NO  Vehicle  License Plate Number 715PXV  Vehicle Identification Nu 1G1ND52F65M18285  Color TAN - TAN                      | Direction Of Travel EASTBOUND With S)              | Total # Citations Issue 0  Pre CrashTil Mark  Special Function NO SPECIAL FUN  Traffic Control NO CONTROL  Road Curvature STRAIGHT  Plate Type AUT - AUTOMOB  Make CHEVROLET  Body Style 4D - 4DR                  | ed Toto 0 Te Sp 55 CTION  St Wi Yee                                | AUTOM Operation tal Traillers  eed Limit  Emerge NOT A  Traffic C NO Road G LEVEL  Country C UNITED The Model OS CLASSI  | Total Ha.  O Total Lar 2 ncy Motor Vel PPLICABLE Control Inoperate rade  OF Issuance O STATES  | zMat Types<br>nes<br>hicle Use<br>E       |
| 01 UNI 01 | IN TRANSIT  Vehicle Type  PASSENGER CAR  Total Occs 1 Insurance? YES  Most Harmful Event: Collision TREE  Traffic Way TWO-WAY, NOT DIVIDED  Surface Type BLACKTOP (BITUMINOU  Truck Bus or HazMat NO  Vehicle License Plate Number 715PXV  Vehicle Identification Nu 1G1ND52F65M18288  Color TAN - TAN Initial Contact Point | Direction Of Travel EASTBOUND With S)              | Total # Citations Issue 0  Pre CrashTill Mark  Special Function NO SPECIAL FUN  Traffic Control NO CONTROL  Road Curvature STRAIGHT  Plate Type AUT - AUTOMOB  Make CHEVROLET  Body Style 4D - 4DR  Vehicle Damage | ed Tor 0 Fe Sp 55 CTION  St Wi Yes 200                             | AUTOM Operation of the control of th | Total Ha. 0 Total Lar 2 ncy Motor Vel PPLICABLE Control Inoperiorade of Issuance STATES  | zMatTypes  nes  hicle Use E ative/Missing |
| ONI 01    | IN TRANSIT  Vehicle Type  PASSENGER CAR  Total Occs 1 Insurance? YES  Most Harmful Event: Collision TREE  Traffic Way TWO-WAY, NOT DIVIDED  Surface Type BLACKTOP (BITUMINOU  Truck Bus or HazMat NO  Vehicle License Plate Number 715PXV Vehicle Identification Nu 1G1ND52F65M18285 Color TAN - TAN Initial Contact Point   | Direction Of Travel EASTBOUND  With  S)            | Total # Citations Issue 0  Pre CrashTil Mark  Special Function NO SPECIAL FUN  Traffic Control NO CONTROL  Road Curvature STRAIGHT  Plate Type AUT - AUTOMOB  Make CHEVROLET  Body Style 4D - 4DR                  | ed Tot 0 re Sp 55 CTION  St WI Yea 200 IT CORNER, 02 T SIDE FRONT, | AUTOM Operation of the Interest of the Interes | Total Ha. 0 Total Lar 2 ncy Motor Vel PPLICABLE Control Inoperated of Issuance 0 STATES  | zMatTypes  nes  hicle Use E ative/Missing |

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Crash Date 12/17/2022

Crash Time 02:38 PM

|          |            | Towed Due To Damage TOWED DUE TO DISABLII          | NG DAMAGE             | Vehicle Removed By<br>SHIELDS TOWING              |              |                    |  |
|----------|------------|--|-----------------------|---|--------------|--------------------|--|
|          |            | What Driver Was Doing                              | NO DAMAGE             | Vehicle Factors                                   |              |                    |  |
|          |            | GOING STRAIGHT                                     |                       | venicle Factors                                   |              |                    |  |
|          |            | Driver Prior Action Other                          |                       | NOT APPLICABLE                                    |              |                    |  |
|          |            | Driver Prior Action Other                          |                       |   |              |                    |  |
| UNIT     | VEHICLE    | Driver Actions FAILURE TO CONTROL, R               | RAN OFF ROADWAY, FAI  | LED TO KEEP IN DES                                | IGNATED LANE |                    |  |
| 2        | 01         | OwnerName<br>GENEVA JEAN JOHNSON<br>(608) 393-2614 |                       | Owner Address<br>404 E MAIN ST<br>LA VALLE, WI 53 | 941 , US     |                    |  |
|          |            | <br>Sequence Of Events                             |                       |   |              |                    |  |
|          | 10         | Event<br>CROSS CENTERLINE                          |                       |   |              |                    |  |
|          |            | Event  |                       |   |              |                    |  |
|          | 2          | RUN OFF ROADWAY LEF                                | Т                     |   |              |                    |  |
|          | အ          | Event<br>DITCH                                     |                       |   |              |                    |  |
|          | 75         | Event<br>TREE                                      |                       |   |              |                    |  |
| _        |            | Policy Holder                                      |                       |   |              |                    |  |
| N        |            | Insurance Company                                  |                       | Individual  |              |                    |  |
| _        |            | STATE-FARM-GENERAL-I                               | NS-CO                 | GENEVA JOHNSON                                    |              |                    |  |
|          |            | Individual   |                       |   |              |                    |  |
|          |            | Driver<br>GENEVA JEAN JOHNSON                      |                       | Citations Issued                                  | Sex          |                    |  |
|          | 4          | (608) 393-2614                                     |                       | 0   | FEMALE Race  |                    |  |
| _        | 8          |  |                       | Date of Birth                                     | WHITE        |                    |  |
| EN C     | 2          | Address  |                       | Driver License Numbe                              | er .         |                    |  |
| <b>-</b> | INDIVIDUAL | 404 E MAIN ST<br>LA VALLE, WI 53941 , US           |                       | STATE: WISCONSIN COUNTRY: UNITED STATES           |              |                    |  |
|          | Sai        | On Duty<br>Tety Equipment                          | Crash                 | Safety Equipment                                  |              |                    |  |
|          |            | Row Seat Position                                  |                       | SHOULDER & LAP BELT                               |              |                    |  |
|          |            | 01 - FRONT ROW                                     | 07 - LEFT             |   |              |                    |  |
|          |            | Helmet Use   |                       | Helmet Compliance                                 |              |                    |  |
|          |            | Eye Protection                                     |                       | Tint Compliance                                   |              |                    |  |
| 5        | 5          | Injury Severity SUSPECTED SERIOUS INJUR            |                       | Airbag  |              |                    |  |
|          | 3          |  | Ejection Path         | DEPLOYED-FRON                                     | 1            | Trapped/Extricated |  |
|          |            | 1 ′  | NOT EJECTED/NOT APP   | PLICABLE  |              | NOT TRAPPED        |  |
|          |            | Medical Transport EMS GROUND                       |                       | EMS Agency Identifier 6001024                     | •            | EMS Run#           |  |
|          |            | Hospital   |                       | Date of Death                                     |              | Time of Death      |  |
|          |            | UW HEALTH-AMERICAN (                               | CENTER<br>d By Source |   |              |                    |  |
|          |            | Distracted By                                      | a by comce            |   |              |                    |  |
|          |            | Distracted By Action UNKNOWN                       |                       |   |              |                    |  |

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|                                     |  |  |  |  |  |  |  |
| Alcohol Test Results                |  |  |  |  |  |  |  |
|                                     |  |  |  |  |  |  |  |
|                                     |  |  |  |  |  |  |  |
|                                     |  |  |  |  |  |  |  |
|                                     |  |  |  |  |  |  |  |
| CONFUSED OR DISORIENTED (NON LUCID) |  |  |  |  |  |  |  |
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| Number                              |  |  |  |  |  |  |  |
|                                     |  |  |  |  |  |  |  |
| Number                              |  |  |  |  |  |  |  |
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