23-04177

### 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 23-04	y Crash Number <b>177</b>		Investigating Officer/Deputy DEPUTY D. KROLIKOWSKI			
ğ	Crash Date 04/28/2023	Crash Time 01:54 PM		Date Arrived 04/28/2023		Time Arrived 02:11 PM				
6TL0BGSFJQ	Date Notified 04/28/2023	Time Notified 01:54 PM		Total U <b>02</b>	Inits	Total Injured 00				
ğ	On Emergency	it and Run	Lane Clos		Work Zone	Trailer or	Towed	Reporting Threshold		
6TL	Government Property	chool Zone	School NO	Bus Related	Tags					
Ū	Reportable	Crash Type DT4000 (STA	NDARD CRAS	H)		Amended		Secondary Crash		
	Description						econstructio	-		
	2145         2145         Image: state sta	ent officer, agr	/ING WITH IT'S FLA		d any CJIS data in th GHTS ON TO PREPARE	Ach NH	otos By Iditional Info DNE			

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.  $1 \quad \text{of} \quad 8$ 

Crash Date 04/28/2023 Crash Time 01:54 PM

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# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

L	.oc	ation								
	ON	CTHV SB				Latitude			Longitud	le
						43.56623	85704		-90.038	841372
		LUEDTKE RD HE TOWN OF WINFIE	חו			X Coordin			Y Coord	
		AUK COUNTY				254589.71875			482818	5
						Structure NO STR	• •			
C	ra	sh Scene								
-		Harmful Event				First Harm	iful Event L	ocation		
		TOR VEH IN TRANSPO	ORT			ON ROA		oodion		
Π	Manı	ner of Collision				Light Cond	dition			
	01 -	ANGLE				DAYLIG	нт			
	Road	d Surface Condition(s)		Roadway	Factor(s)					
	DRY									
	Envii	ronment Factor(s)								
	NOM	NE				NONE				
ſ	Wea	ther Condition(s)				1				
	CLE	AR								
	Anim	nal Type		o Trafficwa						
	Crash Classification - Location PUBLIC PROPERTY						CWAY - O			
							Crash Classification - Jurisdiction NO SPECIAL JURISDICTION			
ľ	Tribal Land					Access Control Special Study				Special Study
	A /: 41- :		lunation la cation							
	NO	in Interchange Area	Junction Location NON-JUNCTION		Intersection NOT AN	INTERSE	CTION			
ī	Init	t Summary								
		t Summary Status		Vehicle Ope	erating As C	lassification		Unit Type		
	Unit			Vehicle Ope D CLASS	-	lassification		Unit Type AUTOMO	BILE	
	Unit <b>IN T</b> Vehi	Status RANSIT cle Type		-	-	lassification				nents
	Unit IN T Vehic PAS	Status RANSIT cle Type SSENGER VAN	Tunin/Dun # Dependent	D CLASS				AUTOMO Operating A	s Endorser	
	Unit IN T Vehic PAS Total	Status RANSIT cle Type	Train/Bus # Recorded	D CLASS			Total Trai	AUTOMO Operating A	s Endorser Total Haz	nents Mat Types
	Unit IN T Vehic PAS Total 3	Status RANSIT Cle Type SSENGER VAN		D CLASS	tions Issued		Total Trai <b>0</b>	AUTOMO Operating A	s Endorser Total Hazi <b>0</b>	Mat Types
	Unit IN T Vehic PAS Total 3	Status RANSIT cle Type SENGER VAN I Occs rance?	Train/Bus # Recorded Direction Of Travel SOUTHBOUND	D CLASS			Total Trai	AUTOMO Operating A	s Endorser Total Haz	Mat Types
	Unit IN T Vehic PAS Total 3 Insur YES Most	Status RANSIT cle Type SENGER VAN I Occs rance? Harmful Event: Collision V	Direction Of Travel SOUTHBOUND	D CLASS	tions Issued CrashTire Mark	   	Total Trai <b>0</b> Speed Lir	AUTOMO Operating A lers nit Emergency	s Endorser Total Haz <b>0</b> Total Lane <b>2</b> Motor Vehi	Mat Types
	Unit IN T Vehic PAS Total 3 Insur YES Most MO	Status RANSIT cle Type SENGER VAN I Occs rance? Harmful Event: Collision V FOR VEH IN TRANSPO	Direction Of Travel SOUTHBOUND	D CLASS	tions Issued CrashTire Mark Iction IAL FUNC	   	Total Trai <b>0</b> Speed Lir	AUTOMOI Operating A lers nit Emergency NOT APPI	s Endorser Total Hazi 0 Total Lane 2 Motor Vehi LICABLE	Mat Types es cle Use
	Unit IN T Vehic PAS Total 3 Insur YES Most Most	Status RANSIT cle Type SENGER VAN I Occs rance? Harmful Event: Collision V	Direction Of Travel SOUTHBOUND With DRT	D CLASS	tions Issued CrashTire Mark Inction SIAL FUNC	   	Total Trai <b>0</b> Speed Lir	AUTOMO Operating A lers nit Emergency	s Endorser Total Hazi 0 Total Lane 2 Motor Vehi LICABLE	Mat Types es cle Use
	Unit IN T Vehid PAS Total 3 Insur YES Most Most Traff Tw(C Surfa	Status RANSIT cle Type SENGER VAN I Occs rance? Harmful Event: Collision V TOR VEH IN TRANSPO ic Way D-WAY, NOT DIVIDED ace Type	Direction Of Travel SOUTHBOUND With DRT	D CLASS	tions Issued CrashTire Mark ICTION IAL FUNC ITOI ROL ature	   	Total Trai <b>0</b> Speed Lir	AUTOMOI Operating A lers mit Emergency NOT APPI Traffic Cont NO Road Grade	s Endorser Total Hazi 0 Total Lane 2 Motor Vehi LICABLE rol Inoperat	Mat Types es cle Use
	Unit IN T Vehic PAS Total 3 Insur YES Most Traff Traff TWC Surfa BLA	Status RANSIT cle Type SENGER VAN I Occs rance? Harmful Event: Collision V TOR VEH IN TRANSP( ic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOUS	Direction Of Travel SOUTHBOUND With DRT	D CLASS	tions Issued CrashTire Mark ICTION IAL FUNC ITOI ROL ature	   	Total Trai <b>0</b> Speed Lir	AUTOMOI Operating A lers mit Emergency NOT APPI Traffic Cont NO	s Endorser Total Hazi 0 Total Lane 2 Motor Vehi LICABLE rol Inoperat	Mat Types es cle Use
	Unit IN T Vehic PAS Total 3 Insur YES Most Traff Traff TWC Surfa BLA	Status RANSIT cle Type SENGER VAN I Occs rance? Harmful Event: Collision V TOR VEH IN TRANSPO ic Way D-WAY, NOT DIVIDED ace Type	Direction Of Travel SOUTHBOUND With DRT	D CLASS	tions Issued CrashTire Mark ICTION IAL FUNC ITOI ROL ature	   	Total Trai <b>0</b> Speed Lir	AUTOMOI Operating A lers mit Emergency NOT APPI Traffic Cont NO Road Grade	s Endorser Total Hazi 0 Total Lane 2 Motor Vehi LICABLE rol Inoperat	Mat Types es cle Use
	Unit IN T Vehiu PAS Total 3 Insur YES Most MOT Traff TWC Surfa BLA Trucl NO	Status RANSIT cle Type SENGER VAN I Occs rance? Harmful Event: Collision V TOR VEH IN TRANSP( ic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOUS	Direction Of Travel SOUTHBOUND With DRT	D CLASS	tions Issued CrashTire Mark ICTION IAL FUNC ITOI ROL ature	   	Total Trai <b>0</b> Speed Lir	AUTOMOI Operating A lers mit Emergency NOT APPI Traffic Cont NO Road Grade	s Endorser Total Hazi 0 Total Lane 2 Motor Vehi LICABLE rol Inoperat	Mat Types es cle Use
	Unit IN T Vehiu PAS Total 3 Insur YES Most MOT Traff TWC Surfa BLA Trucl NO	Status RANSIT cle Type SENGER VAN Occs rance? Harmful Event: Collision V TOR VEH IN TRANSPO ic Way D-WAY, NOT DIVIDED ace Type CKTOP (BITUMINOUS k Bus or HazMat	Direction Of Travel SOUTHBOUND With DRT	D CLASS	tions Issued CrashTire Mark action FIAL FUNC rol ROL ature EFT	   	Total Trai 0 Speed Lir 55	AUTOMOI Operating A lers mit Emergency NOT APPI Traffic Cont NO Road Grade	s Endorser Total Hazi 0 Total Lanc 2 Motor Vehi LICABLE rol Inoperat	Mat Types es cle Use
	Unit IN T Vehiu PAS Total 3 Insur YES Most MOT Traff TWC Surfa BLA Trucl NO	Status RANSIT cle Type SENGER VAN Occs rance? Harmful Event: Collision W TOR VEH IN TRANSPO ic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOUS k Bus or HazMat Vehicle License Plate Number ABH4403	Direction Of Travel SOUTHBOUND With DRT S)	D CLASS	tions Issued CrashTire Mark action FIAL FUNC rol ROL ature EFT	STION	Total Trai 0 Speed Lir 55 St WI	AUTOMOI Operating A lers nit Emergency NOT APPI Traffic Cont NO Road Grade LEVEL	s Endorser Total Hazi 0 Total Lanc 2 Motor Vehi LICABLE rol Inoperat	Mat Types es cle Use
	Unit IN T Vehiu PAS Total 3 Insur YES Most MOT Traff TWC Surfa BLA Trucl NO	Status RANSIT Cle Type SENGER VAN OCCS rance? Harmful Event: Collision V TOR VEH IN TRANSPO ic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOUS k Bus or HazMat Vehicle License Plate Number ABH4403 Vehicle Identification Num	Direction Of Travel SOUTHBOUND With DRT S)	D CLASS	tions Issued CrashTire Mark action HAL FUNC rol ROL ature EFT	STION	Total Trai 0 Speed Lir 55 St WI Year	AUTOMOI Operating A Iers nit Emergency NOT APPI Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST Model	s Endorser Total Hazi 0 Total Lanc 2 Motor Vehi LICABLE rol Inoperat	Mat Types es cle Use
	Unit IN T Vehin PAS Total 3 Insur YES MOST Traff TWC Surfa Surfa BLA Trucl	Status RANSIT cle Type SENGER VAN Occs rance? Harmful Event: Collision W TOR VEH IN TRANSPO ic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOUS k Bus or HazMat Vehicle License Plate Number ABH4403	Direction Of Travel SOUTHBOUND With DRT S)	D CLASS	tions Issued CrashTire Mark iction CIAL FUNC irol iROL ature EFT JTOMOBIL	STION	Total Trai 0 Speed Lir 55 St WI	AUTOMOI Operating A lers nit Emergency NOT APPI Traffic Cont NO Road Grade LEVEL	s Endorser Total Hazi 0 Total Lanc 2 Motor Vehi LICABLE rol Inoperat	Mat Types es cle Use
	Unit IN T IN T Vehiai PAS Total 3 Insur YES Most MO Traff TWC Surfa BLA Trucc	Status RANSIT Cle Type SENGER VAN I Occs I Cocs Harmful Event: Collision V TOR VEH IN TRANSPO ic Way D-WAY, NOT DIVIDED ace Type CKTOP (BITUMINOUS k Bus or HazMat Vehicle License Plate Number ABH4403 Vehicle Identification Nun 5BZAF0AA8HN85197 Color SIL - SILVER (ALUMI	Direction Of Travel SOUTHBOUND With DRT S)	D CLASS Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva CURVE LI	tions Issued CrashTire Mark ICLION IAL FUNC Trol ROL Ature EFT	STION	Total Trai 0 Speed Lir 55 St WI Year	AUTOMOI Operating A lers nit Emergency NOT APPI Traffic Cont NO Road Grade LEVEL	s Endorser Total Hazi 0 Total Lanc 2 Motor Vehi LICABLE rol Inoperat	Mat Types es cle Use
	Unit Unit IN T Vehidi PAS Total 3 Insur YES Most Traff Truc Surfa BLA NO	Status RANSIT Cle Type SENGER VAN I Occs rance? Harmful Event: Collision V TOR VEH IN TRANSPO ic Way D-WAY, NOT DIVIDED ace Type SCKTOP (BITUMINOUS k Bus or HazMat Vehicle License Plate Number ABH4403 Vehicle Identification Nun 5BZAF0AA8HN85197 Color SIL - SILVER (ALUMI Initial Contact Point	Direction Of Travel SOUTHBOUND With DRT S) nber 73 INUM)	D CLASS Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva CURVE Li Plate Type AUT - AU Make NISSAN Body Style	tions Issued CrashTire Mark ICLION IAL FUNC Trol ROL Ature EFT	STION	Total Trai 0 Speed Lir 55 St WI Year	AUTOMOI Operating A lers nit Emergency NOT APPI Traffic Cont NO Road Grade LEVEL	s Endorser Total Hazi 0 Total Lanc 2 Motor Vehi LICABLE rol Inoperat	Mat Types es cle Use
	Unit Unit IN T Vehidi PAS Total 3 Insur YES Most Traff Truc Surfa BLA NO	Status RANSIT Cle Type SENGER VAN OCCS Fance? Harmful Event: Collision V TOR VEH IN TRANSPO ic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOUS k Bus or HazMat Vehicle Identification Nun 5BZAF0AA8HN85197 Color SIL - SILVER (ALUMI Initial Contact Point 03 - RIGHT SIDE MID	Direction Of Travel SOUTHBOUND With DRT S) nber 73 INUM)	D CLASS	tions Issued CrashTire Mark Siction SIAL FUNC Trol ROL ature EFT JTOMOBIL	E .E	Total Trai 0 Speed Lir 55 St WI Year 2017 1 - LEFT	AUTOMOI Operating A Iers nit Emergency NOT APPI Traffic Cont NO Road Grade LEVEL Country of Is UNITED S1 Model NV Bus Use	s Endorser Total Hazi 0 Total Lanc 2 Motor Vehi LICABLE rol Inoperat	Mat Types
	Unit IN T IN T Vehiai PAS Total 3 Insur YES Most MO Traff TWC Surfa BLA Trucc	Status RANSIT Cle Type SENGER VAN I Occs rance? Harmful Event: Collision V TOR VEH IN TRANSPO ic Way D-WAY, NOT DIVIDED ace Type SCKTOP (BITUMINOUS k Bus or HazMat Vehicle License Plate Number ABH4403 Vehicle Identification Nun 5BZAF0AA8HN85197 Color SIL - SILVER (ALUMI Initial Contact Point	Direction Of Travel SOUTHBOUND With DRT S)	D CLASS	tions Issued CrashTire Mark Inction FIAL FUNC Trol ROL Ature EFT JTOMOBIL	E .E	Total Trai 0 Speed Lir 55 St WI Year 2017 1 - LEFT	AUTOMOI Operating A Iers nit Emergency NOT APPI Traffic Cont NO Road Grade LEVEL Country of Is UNITED S1 Model NV Bus Use	s Endorser Total Hazi 0 Total Lanc 2 Motor Vehi LICABLE rol Inoperat	Mat Types es cle Use ive/Missing

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data. 2 of 8 
 Crash Date
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## WISCONSIN MOTOR VEHICLE CRASH REPORT

									. ,		
		Towed Due To Damage NOT TOWED			Vel	hicle Removed By					
		What Driver Was Doing			Vel	hicle Factors					
		OVERTAKE LEFT									
		Driver Prior Action Other			NC	T APPLICABLE					
		Driver Actions									
	щ	NO CONTRIBUTING A	стю	N							
UNIT	<u></u>										
5	VEHICLE										
	>										
		Owner Name				Owner Address					
5	2	KATHLEEN FAS (608) 415-7134	т			E4937 COUNTY R LA VALLE, WI 539					
•	•	(000) 415-7154				LA VALLE, WI 555	41,00				
		Sequence Of Event	e		_						
		Event		_	-						
	5	MOTOR VEH IN TRAN	SPOF	τ.							
	02	Event DITCH									
	03	Event									
		Event									
	8										
╘		Policy Holder			_						
UNIT		Insurance Company LICHTE INSURANCE A	GEN	CY		ndividual					
		Individual	(OLI)	•••	- 1.						
		Driver	_			Citations Issued	Sex				
	Ļ	KATHLEEN FAS (608) 415-7134	т		_ L	D	FEMALE				
_	NDIVIDUAI	(008) 415-7154	608) 415-7134			Date of Birth	Race WHITE				
UNIT	Σ	Address			Driver License Number						
5	P	E4937 COUNTY ROAD LA VALLE, WI 53941,									
	-	LA MELL, 11100041 ,									
		On D	Outy Ci	rash	-	Safety Equipment					
	Sat	fety Equipment									
		Row 01 - FRONT ROW		Seat Position 07 - LEFT	1	SHOULDER & LAP	BELT				
		Helmet Use			╈	Helmet Compliance					
		Eye Protection				Tint Compliance					
5	001	In terms	y Seve			Airbag					
Ŭ	•	Ejected		ARENT INJURY		NON DEPLOYED		Trapped/Extricated			
		NOT EJECTED		OT EJECTED/NOT API	PLIC	CABLE		NOT TRAPPED			
		Medical Transport			1	EMS Agency Identifier		EMS Run #			
		NOT TRANSPORTED			4			Time of Death			
		Hospital			ľ	Date of Death		Time of Death			
				By Source PLICABLE (NOT DISTR	ACT	(ED)					
		Distracted By Action		•							
		NOT DISTRACTED									
		Motor Vehicle Crash		This rep	ort d	oes not include any CJI	IS data.	Crash Date	04/28/2023		
Form	DT40	00				3 of 8		Crash Time	01:54 PM		

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### WISCONSIN MOTOR VEHICLE CRASH REPORT

									( <i>)</i>		
		Non Motorist	Striking Uni	t #	Location						
		Prior Action									
		Action									
	Ļ										
E	INDIVIDUAL										
UNIT	Ĭ										
	Ï										
		Action Other							To/From School		
	,	Drug & Alcohol	Suspected	Alcohol U	se	Suspected Drug U	lse				
	•	Alcohol Test Given			Alcohol Test Typ			Alcohol Test Results			
		TEST NOT GIVEN			Drug Test Tures						
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Result	S			
2	001	Drug Type					•				
	Ū	ladividual Caaditiaa									
		APPEARED NORMAL									
	1	Individual									
		Passenger JOVANSLY ABLAR (608) 415-7134 Address				Citations Issued 0	Sex MALE				
	INDIVIDUAL					Date of Birth	Race BLACK/AFRIC	AN AMERICAN			
IND	Į					Driver License Nu					
-	Z	E4937 COUNTY RI LAVALLE, WI 5394									
		L,									
	Sat	fety Equipment	On Duty Cra	ash		Safety Equipment					
		Row 01 - FRONT ROW		Seat Po 09 - RI		SHOULDER &	LAP BELT				
		Helmet Use		09 - KI	ы	Helmet Compliance					
		Eye Protection				Tint Compliance					
		-									
2	002		Injury Sever		NJURY	Airbag NON DEPLOYE	D				
		Ejected	-	ection Pa		•		Trapped/Extricated			
		NOT EJECTED Medical Transport	N	OT EJE	CTED/NOT APP	EMS Agency Iden	tifier	NOT TRAPPED EMS Run #			
		NOT TRANSPORTED									
		Hospital				Date of Death		Time of Death			
		Distracted By	Distracted E	By Source	9	-1					
		Distracted By Action									
			Striking Uni	t #	Location						
		Non Motorist									
	nsin M DT40	Motor Vehicle Crash 00			This repo	rt does not include ar 4 of 8	ny CJIS data.		04/28/2023 01:54 PM		

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### WISCONSIN MOTOR VEHICLE **CRASH REPORT**

		Prior Action										
UNIT	INDIVIDUAL	Action										
		Action Other							To/From School			
			Suspected	Alcohol I	60	Suspected Drug Use						
	L	Drug & Alcohol	NO	AICONOLO	150	NO						
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type	9		Alcohol Test Results				
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Results					
01	002	Drug Type			1		1					
		Individual Condition										
		APPEARED NORM	MAL									
	Ì	Individual										
		Passenger WISGGERLYNE ABLAR (608) 415-7134			Citations Issued Sex 0 FEMALE							
L	DUAL				Date of Birth	Race						
UNIT	INDIVIDUAL	Address E4937 COUNTY ROAD V LA VALLE, WI 53941 , US				Driver License Number	1					
	Saf	fety Equipment	On Duty Cr	ash		Safety Equipment						
		Row		Seat Po	sition	SHOULDER & LAP BELT						
		02 - SECOND ROV Helmet Use	N	08 - M	DDLE	Helmet Compliance						
		Eye Protection				Tint Compliance						
6	003	Injury	Injury Seve	rity RENT I	NJURY	Airbag NON DEPLOYED						
		Ejected	Eje	ection Pa	th	Trapped/Extricated						
		NOT EJECTED Medical Transport	N	OTEJE	CTED/NOT APP	EMS Agency Identifier		NOT TRAPPED EMS Run #				
		NOT TRANSPORT Hospital	ſED			Data of Death						
		Hospital				Date of Death		Time of Death				
	Distracted By Distracted By Source											
		Distracted By Action										
		Non Motorist	Striking Uni	t #	Location							
		Prior Action			-							
Wisco	onsin N	Motor Vehicle Crash			This repor	rt does not include any CJI	S data.	Crash Date	04/28/2023			

Form DT4000

This report does e any CJIS data. 5 of 8

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## WISCONSIN MOTOR VEHICLE CRASH REPORT

		Action											
	JAL												
UNIT	INDIVIDUAL												
	INDI												
		Action Other								To/From School			
	Drug & Alcohol No Suspected Alcohol Use No Suspected Drug Use No												
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	)			Alcohol Tes	t Results	3			
		Drug Test Given TEST NOT GIVEN	Drug Test Typ			Drug T	est Results	5					
0	003	Drug Type											
	-	Individual Condition											
		APPEARED NORMAL											
I	Uni	t Summary											
	Unit	Status RANSIT		Vehicle Operating As Classification D CLASS			Unit Type AUTOMOBILE						
02		cle Type SSENGER VAN						Operating A	s Endor	sements			
		al Occs Train/Bus # Recorded			Total # Citations Issued Total Trail		ilers Total HazMat Types 0						
L		rance?	Direction Of Travel		Pre CrashTire Mark		Speed Limit 55		Total Lanes 2				
UNIT	Most	t Harmful Event: Collision Wi	th	S	Special Function NO SPECIAL FUNCTION			Emergency NOT APP	Motor V				
	Traff	ic Way			Traffic Control			Traffic Control Inoperative/Missing NO					
	Surfa	D-WAY, NOT DIVIDED			Road Curvature			Road Grade					
	Truc	ACKTOP (BITUMINOUS) k Bus or HazMat			URVE LEFT			LEVEL					
	NO	Vehicle											
		License Plate Number		F	Plate Type		St	Country of Is	suance				
02	02	Vehicle Identification Numb W1XV0BEM4L3731059			Make MERCEDES BENZ		Year <b>2020</b>	Model METRIS					
	-	Color WHI - WHITE		E	Body Style VN - VAN	ļ		Bus Use					
L	Щ	Initial Contact Point			Vehicle Damage					7 8 9 10 11			
UNIT	VEHICLE	11 - LEFT FRONT COR Extent Of Damage	INER		11 - LEFT FRONT CO	RNER,	12 - FRO	NT		6 6 12 5 4 3 2 1			
	>	DISABLING DAMAGE			Vehicle Removed By								
		TOWED DUE TO DISA What Driver Was Doing	BLING DAMA	GE S	STEVES AUTO SERV	ICE							
		LEFT TURN											

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#### WISCONSIN MOTOR VEHICLE CRASH REPORT

									. ,	
					Ve	hicle Factors				
			Driver Prior Action Other			OT APPLICABLE				
	UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACT	FION						
	02	02	Owner Name US POSTAL SERVICE (800) 275-8777			Owner Address 215 NORTH WALN REEDSBURG, WI		00		
			Sequence Of Events			1				
		6	Event MOTOR VEH IN TRANSP	PORT						
		02	Event							
		03	Event							
		04	Event							
	╘	I	Policy Holder							
	LIND		Insurance Company GOVERNMENT			Government POSTAL SERVICE				
		l	Individual							
		Ļ	Driver CASEY FIKE (608) 548-5251			Citations Issued Sex 0 MALE				
		INDIVIDUAL				Date of Birth	Race WHITE			
		NDN	Address 600 W MILWAUKEE ST MAUSTON, WI 53948 , U	JS		Driver License Number				
		Saf	fety Equipment	y Crash	:	Safety Equipment				
			Row 01 - FRONT ROW	Seat Position 09 - RIGHT	1	SHOULDER & LAP BELT				
			Helmet Use			Helmet Compliance				
		_	Eye Protection	•		Tint Compliance				
	6	004	Injury S Injury NO AF	PPARENT INJURY		Airbag NON DEPLOYED				
			Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT A		CABLE		Trapped/Extricated NOT TRAPPED		
			Medical Transport			EMS Agency Identifier		EMS Run #		
			NOT TRANSPORTED Hospital			Date of Death Time of Death				
			Distracted By Distract	ted By Source	TRAC	TED)		ļ		
			Distracted By Action NOT DISTRACTED	-		-				
			Non Motorist	g Unit # Location						
		nsin M DT40	Motor Vehicle Crash 00	This	report d	loes not include any CJI 7 of 8	S data.	Crash Date Crash Time	04/28/2023 01:54 PM	

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## WISCONSIN MOTOR VEHICLE CRASH REPORT

		Prior Action					
UNIT	INDIVIDUAL	Action					
		Action Other Suspected Drug & Alcohol NO	Alcohol Use	Suspected Drug Use			To/From School
	-	Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type			Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results	3	
02	004	Drug Type			·		
		Individual Condition APPEARED NORMAL					

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This report does not include any CJIS data.  $\label{eq:cJIS} 8 \quad \text{of} \quad 8$ 

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