

6TL0B7D6WW
23-06506

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

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Document Number Override		Primary Crash Document #		Agency Crash Number 23-06506		Investigating Officer/Deputy DEPUTY S. ELLICKSON		
Crash Date 06/22/2023		Crash Time 12:59 PM		Date Arrived 06/22/2023		Time Arrived 01:06 PM		
Date Notified 06/22/2023		Time Notified 12:59 PM		Total Units 03		Total Injured 00	Total Killed 00	
<input type="checkbox"/> On Emergency	<input checked="" type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone		<input type="checkbox"/> Trailer or Towed	<input type="checkbox"/> Reporting Threshold		
<input type="checkbox"/> Government Property		<input type="checkbox"/> Active School Zone		School Bus Related NO		Tags		
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)				<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash

Description

<p>Diagram</p> <p>Not to scale</p> <p>STH 154</p>	Reconstruction By
	Photos By
	Additional Information PHOTOS

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

UNIT 1 WAS TRAVELING BEHIND UNIT 2 WESTBOUND ON STH 154. UNIT 1 PASSED UNIT 2 AT THE TOP OF THE HILL JUST EAST OF GOLF COURSE ROAD. UNIT 3 WAS TRAVELING EASTBOUND ON STH 154. UNIT 3 WAS GOING UP THE HILL ON STH 154 AT THE SAME LOCATION. UNIT 1 STRUCK UNIT 2. AT THE SAME TIME STRIKING UNIT 3. BOTH UNIT 2 AND 3 HAD TO SWERVE TO AVOID FURTHER COLLISION. UNIT 2 AND 3 STOPPED BUT UNIT 1 CONTINUED ON.

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Location

ON STH154 WB 955 FT W OF BUCKEYE RD IN THE TOWN OF REEDSBURG IN SAUK COUNTY	Latitude 43.489212497	Longitude -89.960804604
	X Coordinate 260587.359375	Y Coordinate 4819402.5
	Structure Type NO STRUCTURE	

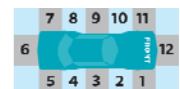
Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 07 - SIDESWIPE/SAME DIRECTION	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLEAR		
Animal Type	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION

Unit Summary

UNIT 01	Unit Status HIT AND RUN	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
	Vehicle Type (SPORT) UTILITY VEHICLE		Operating As Endorsements		
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? UNKNOWN	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL	Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT	Road Grade UPHILL	
	Truck Bus or HazMat NO				

UNIT 01 VEHICLE	Vehicle			
	License Plate Number	Plate Type	St AL	Country of Issuance UNITED STATES
	Vehicle Identification Number	Make	Year	Model
	Color	Body Style		Bus Use NOT A BUS
	Initial Contact Point 99 - UNKNOWN	Vehicle Damage		
Extent Of Damage VEHICLE NOT AT SCENE	16 - VEHICLE NOT AT SCENE			



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Form containing sections: UNIT VEHICLE (01 01), Sequence Of Events (01-04), Individual (01 001), Safety Equipment, Injury (01 001), Distracted By, and Non Motorist. Includes fields for driver actions, citations, and crash details.

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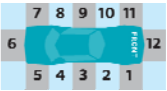
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UNIT	INDIVIDUAL	Prior Action	
		Action	
		Action Other	
		To/From School	
		Drug & Alcohol	
		Suspected Alcohol Use	
		Suspected Drug Use	
		Alcohol Test Given	
		Alcohol Test Type	
		Alcohol Test Results	
01	001	TEST NOT GIVEN	
		Drug Test Given	
		Drug Test Type	
		Drug Test Results	
		Drug Test Results	
Drug Type			
Individual Condition			
NOT OBSERVED			

Unit Summary

UNIT	02	Unit Status		Vehicle Operating As Classification		Unit Type							
		IN TRANSIT		D CLASS		AUTOMOBILE							
		Vehicle Type				Operating As Endorsements							
		(SPORT) UTILITY VEHICLE											
		Total Occs		Train/Bus # Recorded		Total # Citations Issued		Total Trailers		Total HazMat Types			
		3				0		0		0			
		Insurance?		Direction Of Travel		Pre Crash Tire Mark		Speed Limit		Total Lanes			
		YES		WESTBOUND		<input type="checkbox"/>		55		2			
		Most Harmful Event: Collision With				Special Function				Emergency Motor Vehicle Use			
		MOTOR VEH IN TRANSPORT				NO SPECIAL FUNCTION				NOT APPLICABLE			
Traffic Way				Traffic Control				Traffic Control Inoperative/Missing					
TWO-WAY, NOT DIVIDED				NO CONTROL				NO					
Surface Type				Road Curvature				Road Grade					
BLACKTOP (BITUMINOUS)				STRAIGHT				UPHILL					
Truck Bus or HazMat													
NO													

Vehicle

UNIT	VEHICLE	02	02	License Plate Number		Plate Type		St		Country of Issuance	
				ACG4263		AUT - AUTOMOBILE		WI		UNITED STATES	
				Vehicle Identification Number		Make		Year		Model	
				3GNKBKRS7KS689282		CHEVROLET		2019		BLAZER	
				Color		Body Style				Bus Use	
				GRY - GRAY		UT - SPORT UTILITY VEHICLE					
				Initial Contact Point		Vehicle Damage					
				10 - LEFT SIDE FRONT		10 - LEFT SIDE FRONT					
Extent Of Damage		Vehicle Removed By									
MINOR DAMAGE		OPERATOR									
Towed Due To Damage		What Driver Was Doing									
NOT TOWED		GOING STRAIGHT									
What Driver Was Doing											
GOING STRAIGHT											

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UNIT VEHICLE	Driver Prior Action Other		Vehicle Factors		
			NOT APPLICABLE		
	Driver Actions NO CONTRIBUTING ACTION				
	Owner Name KATIE ANNE PEPPER (608) 415-7633		Owner Address E5139 HILLCREST DR LOGANVILLE, WI 53943 , US		
UNIT 02	Sequence Of Events				
	01	Event MOTOR VEH IN TRANSPORT			
	02	Event			
	03	Event			
	04	Event			
UNIT	Policy Holder				
	Insurance Company MT-MORRIS-MUTUAL-INS-CO		Individual KATIE PEPPER		
	Individual				
UNIT INDIVIDUAL	Driver KATIE PEPPER (608) 415-7633		Citations Issued 0	Sex FEMALE	
	Address E5139 HILLCREST DR LOGANVILLE, WI 53943 , US		Date of Birth	Race WHITE	
			Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
UNIT 02	Safety Equipment		On Duty Crash		
			Safety Equipment		
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT		
	Helmet Use		Helmet Compliance		
	Eye Protection		Tint Compliance		
	Injury	Injury Severity NO APPARENT INJURY		Airbag NON DEPLOYED	
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #
	Hospital		Date of Death		Time of Death
	Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED					
Non Motorist		Striking Unit #			
		Location			

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UNIT	INDIVIDUAL	Prior Action		
		Action		
02	002	Action Other		To/From School
		Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO
02	002	Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	Alcohol Test Results
		Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results
02	002	Drug Type		
		Individual Condition APPEARED NORMAL		
UNIT	INDIVIDUAL	Individual		
		Passenger KIMBERLYN CRAHEN (608) 576-9030	Citations Issued 0	Sex FEMALE
02	003	Date of Birth	Race WHITE	
		Address S7739 W GRANDVIEW AVE MERRIMAC, WI 53561 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
02	003	Safety Equipment	On Duty Crash	Safety Equipment
		Row 01 - FRONT ROW	Seat Position 09 - RIGHT	SHOULDER & LAP BELT
02	003	Helmet Use	Helmet Compliance	
		Eye Protection	Tint Compliance	
02	003	Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
02	003	Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #
		Hospital	Date of Death	Time of Death
02	003	Distracted By	Distracted By Source	
		Distracted By Action		
02	003	Non Motorist	Striking Unit #	Location
		Prior Action		

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UNIT	INDIVIDUAL	Action			
		Action Other		To/From School	
02	003	Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO	
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results	
		Drug Type			
		Individual Condition APPEARED NORMAL			
		Individual			
		Passenger CARLEY JUDD (608) 963-2537	Citations Issued 0	Sex FEMALE	
			Date of Birth	Race WHITE	
		Address E3609 W. HILLPOINT ROAD HILLPOINT, WI , US	Driver License Number		
		02	004	Safety Equipment	On Duty Crash
Row 02 - SECOND ROW	Seat Position 07 - LEFT				
Helmet Use				Helmet Compliance	
Eye Protection				Tint Compliance	
Injury	Injury Severity NO APPARENT INJURY			Airbag NON DEPLOYED	
Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE			Trapped/Extricated NOT TRAPPED	
Medical Transport NOT TRANSPORTED	EMS Agency Identifier			EMS Run #	
Hospital	Date of Death			Time of Death	
Distracted By	Distracted By Source				
Distracted By Action					
Non Motorist	Striking Unit #	Location			
Prior Action					

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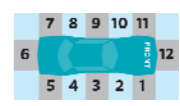
UNIT INDIVIDUAL
Action
Action Other
To/From School
Drug & Alcohol Suspected Alcohol Use Suspected Drug Use
Alcohol Test Given Alcohol Test Type Alcohol Test Results
Drug Test Given Drug Test Type Drug Test Results
Drug Type
Individual Condition
APPEARED NORMAL

Unit Summary

UNIT 03
Unit Status: IN TRANSIT
Vehicle Operating As Classification: D CLASS
Unit Type: TRUCK
Vehicle Type: UTILITY TRUCK/PICKUP TRUCK
Operating As Endorsements:
Total Occs: 5
Train/Bus # Recorded:
Total # Citations Issued: 0
Total Trailers: 0
Total HazMat Types: 0
Insurance?: YES
Direction Of Travel: EASTBOUND
Pre Crash Tire Mark:
Speed Limit: 55
Total Lanes: 2
Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT
Special Function: NO SPECIAL FUNCTION
Emergency Motor Vehicle Use: NOT APPLICABLE
Traffic Way: TWO-WAY, NOT DIVIDED
Traffic Control: NO CONTROL
Traffic Control Inoperative/Missing: NO
Surface Type: BLACKTOP (BITUMINOUS)
Road Curvature: STRAIGHT
Road Grade: UPHILL
Truck Bus or HazMat: NO

Vehicle

UNIT 03 VEHICLE
License Plate Number: RE1649
Plate Type: LTK - LIGHT TRUCK
St: WI
Country of Issuance: UNITED STATES
Vehicle Identification Number: 1FTRX08L2YKA53378
Make: FORD
Year: 2000
Model: F150
Color: BLK - BLACK
Body Style: PK - PICKUP
Bus Use:
Initial Contact Point: 10 - LEFT SIDE FRONT
Vehicle Damage: 10 - LEFT SIDE FRONT
Extent Of Damage: MINOR DAMAGE
Towed Due To Damage: NOT TOWED
Vehicle Removed By: OPERATOR
What Driver Was Doing: GOING STRAIGHT
Vehicle Factors: NOT APPLICABLE
Driver Prior Action Other:



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UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION		
		Owner Name HEIDI CLARY (608) 604-6932	Owner Address 29121 DOWNEY LN RICHLAND CENTER, WI 53581 , US	
03	03	Sequence Of Events		
	01	Event MOTOR VEH IN TRANSPORT		
	02	Event		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company WISCONSIN-MUTUAL-INS-CO	Individual HEIDI CLARY		
UNIT	Individual			
	Driver HEIDI CLARY (608) 604-6932	Citations Issued 0	Sex FEMALE	
		Date of Birth	Race WHITE	
	Address 29121 DOWNEY LN RICHLAND CENTER, WI 53581 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
03	005	Safety Equipment		
		On Duty Crash	Safety Equipment SHOULDER & LAP BELT	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT		
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED	
Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #	
Hospital		Date of Death	Time of Death	
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				
Non Motorist		Striking Unit #	Location	
Prior Action				

UNIT INDIVIDUAL	Action		
	Action Other		To/From School
	Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO
	Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	Alcohol Test Results
	Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results
	Drug Type		
	Individual Condition APPEARED NORMAL		
	Individual		
	Passenger LIBERTY CLARY (608) 604-8849	Citations Issued 0	Sex FEMALE
	Address 29121 DOWNEY LN RICHLAND CENTER, WI 53581 , US		Date of Birth Race WHITE
Driver License Number			
UNIT INDIVIDUAL	Safety Equipment	On Duty Crash	Safety Equipment SHOULDER & LAP BELT
	Row 01 - FRONT ROW	Seat Position 09 - RIGHT	
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier
	Hospital		EMS Run #
	Date of Death		Time of Death
	Distracted By	Distracted By Source	
Distracted By Action			
Non Motorist	Striking Unit #	Location	
Prior Action			

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UNIT INDIVIDUAL	Action		
	Action Other		To/From School
	Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO
	Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	Alcohol Test Results
	Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results
	Drug Type		
	Individual Condition APPEARED NORMAL		
	Individual		
	Passenger SERENITY CLARY (608) 604-9713	Citations Issued 0	Sex FEMALE
	Address 29121 DOWNEY LN RICHLAND CENTER, WI 53581 , US		Date of Birth Race WHITE
Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
UNIT INDIVIDUAL	Safety Equipment	On Duty Crash	Safety Equipment SHOULDER & LAP BELT
	Row 02 - SECOND ROW	Seat Position 09 - RIGHT	
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier
	Hospital		EMS Run #
	Date of Death		Time of Death
	Distracted By	Distracted By Source	
Distracted By Action			
Non Motorist	Striking Unit #	Location	
Prior Action			

03	UNIT	INDIVIDUAL	Action			
			Action Other		To/From School	
			Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO	
			Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type		Alcohol Test Results
			Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results	
			Drug Type			
			Individual Condition APPEARED NORMAL			
			Individual			
			Passenger EZEKIEL CLARY (608) 604-9713	Citations Issued 0	Sex MALE	
			Address 29121 DOWNEY LN RICHLAND CENTER, WI 53581 , US		Date of Birth	
Driver License Number		Race				
03	UNIT	INDIVIDUAL	Safety Equipment			
			On Duty Crash	Safety Equipment CHILD RESTRAINT SYSTEM - FORWARD FACING		
			Row 02 - SECOND ROW	Seat Position 08 - MIDDLE		
			Helmet Use		Helmet Compliance	
			Eye Protection		Tint Compliance	
			Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED	
			Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED
			Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #
			Hospital		Date of Death	Time of Death
			Distracted By		Distracted By Source	
Distracted By Action						
Non Motorist		Striking Unit #	Location			
Prior Action						

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		Action Other		To/From School	
		Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO	
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results	
		Drug Type			
		Individual Condition APPEARED NORMAL			
		Individual			
		Passenger MERCEDES CLARY (608) 604-6932	Citations Issued 0	Sex FEMALE	
		Date of Birth		Race WHITE	
Address 29121 DOWNEY LN RICHLAND CENTER, WI 53581 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
UNIT	INDIVIDUAL	Safety Equipment	On Duty Crash	Safety Equipment	
		Row 02 - SECOND ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
		Helmet Use		Helmet Compliance	
		Eye Protection		Tint Compliance	
		Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED	
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED	
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #
		Hospital		Date of Death	Time of Death
		Distracted By	Distracted By Source		
		Distracted By Action			
UNIT	INDIVIDUAL	Non Motorist	Striking Unit #	Location	
		Prior Action			

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		Action Other			To/From School		
		Drug & Alcohol	Suspected Alcohol Use NO		Suspected Drug Use NO		
			Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type		Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results		
		Drug Type					
		Individual Condition APPEARED NORMAL					
		03	009				