## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/24/2023

S PM 06/ Notified Tot. S PM 02	Work Zone	Pho	Secondary Crash  onstruction By  tos By
tun Lane Closure  ctive School Zone NO	Work Zone	Trailer or T Tags  Amended  Rec Pho	owed Reporting Threshold  Secondary Crash  onstruction By  tos By
ctive School Zone Sch	nool Bus Related	Tags  Amended  Reco	Secondary Crash  onstruction By  tos By
ctive School Zone		Amended  Reco	onstruction By  tos By
Type 00 (STANDARD CRASH)		Reco	onstruction By  tos By
		Pho	tos By itional Information
		NO	
			cer, agree that I have not added any CJIS data in this report.

#### WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/24/2023

	Loc	ation									
		CTHU EB				Latitude			Longit	ude	
	_	T W				43.53947	7782		-89.63	34210315	
		HEIN RD HE TOWN OF FAIRF	IEI D			X Coordin	ate		Y Coo	rdinate	
		BAUK COUNTY	IELD			287173.90625 4824097				97	
						Structure Type NO STRUCTURE					
	Cra	sh Scene				ı					
		Harmful Event				T === 4 1 1 = ===	-£-  [4]				
		TOR VEH IN TRANSP	PORT			ON ROA	nful Event Lo	ocation			
	_	ner of Collision	OKI		Light Condition						
		ANGLE				DAYLIGHT					
	Road	d Surface Condition(s)				Roadway Factor(s)					
	DR	<b>Y</b>		, ,							
	Envi	ronment Factor(s)									
	ЮИ	NE				NONE					
	Wea	ther Condition(s)									
	CLE	EAR									
	Anim	nal Type		o Trafficwa							
	Cros	h Classification I coation	n				CWAY - O				
	Crash Classification - Location PUBLIC PROPERTY						Crash Classification - Jurisdiction  NO SPECIAL JURISDICTION				
	Tribal Land					Access Co				Special Study	
	Within Interchange Area Junction Location Intersection					n Type				<u> </u>	
	NO		NON-JUNCTION		NOT AN	INTERSE	CTION				
	Uni	t Summary =									
		Status		Vehicle Ope	erating As C	lassification	1	Unit Type			
	IN T	IN TRANSIT D CLASS					AUTOMOBILE				
5		Vehicle Type						Operating A	s Endors	ements	
0		SSENGER CAR						L Tatel HorMan Towns			
	Tota 3	I Occs	Train/Bus # Recorded	Total # Cita	itions Issued	ed Total Trail		ilers Total HazMat Types  0		azMat Types	
		rance?	Direction Of Travel		O		Speed Lin			ines	
⊢	YES		NORTHBOUND	□ Pre	CrashTire Mark	•	55	2			
L N O	Most	t Harmful Event: Collision	With	Special Fur				Emergency			
_		TOR VEH IN TRANSP	PORT		IAL FUNC	TION		NOT APPLICABLE			
		fic Way	_	Traffic Conf					rol Inoper	rative/Missing	
		O-WAY, NOT DIVIDED  ace Type	)	NO CONT				NO Road Grade			
		ACKTOP (BITUMINOL	IS)	STRAIGH				LEVEL	•		
		k Bus or HazMat		011041011	•			LLVLL			
	NO										
	,	Vehicle									
		License Plate Number		Plate Type		St Country of Issuance					
				1 1	AUT - AUTOMOBILE			UNITED STATES			
		ASD1501			JTOMOBIL	.E	WI		TATES		
7	2	Vehicle Identification Nu		Make		.E	Year	Model	TATES		
5	10	Vehicle Identification Nu 5NPEU46F67H1790		Make <b>HYUND</b> A	AI	.E		Model SONATA	TATES		
7	10	Vehicle Identification Nu		Make	AI e	.E	Year	Model	TATES		
6	щ	Vehicle Identification Nu 5NPEU46F67H1790 Color		Make HYUNDA Body Style	AI E DAN	E	Year	Model SONATA	TATES		
IT 01	щ	Vehicle Identification Nu 5NPEU46F67H1790' Color GRY - GRAY	73	Make HYUNDA Body Style SD - SEE	AI E DAN	E	Year	Model SONATA	TATES	7 8 9 10 11	
UNIT 01		Vehicle Identification Nu 5NPEU46F67H1790' Color GRY - GRAY Initial Contact Point	CORNER	Make HYUNDA Body Style SD - SED Vehicle Da	AI E DAN		Year 2007	Model SONATA	TATES	7 8 9 10 11 6 2 2 12 5 4 3 2 1	

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

Crash Date 06/24/2023

		Towed Due To Damage		Vel	nicle Removed By							
		NOT TOWED  What Driver Was Doing		Vol	nicle Factors							
		ENTERING TRAFFIC LAN	F	vei	licie Factors							
		Driver Prior Action Other	_	NC	T APPLICABLE							
		Driver Actions										
	쁘	FAILED TO YIELD RIGHT-	OF-WAY									
LNO	2											
⊃	VEHICL											
	>											
		Owner Name			Owner Address							
_	_	KEEGAN SCHWICHTENB	ERG		496 E 7TH ST							
0	01	(608) 604-3919			RICHLAND CENTE	:R, WI 53581 , U	5					
		Sequence Of Events										
	01	MOTOR VEH IN TRANSPO	MOTOR VEH IN TRANSPORT									
	02	Event										
	0											
	03	Event										
	4	Event										
	04											
⊨	ı	Policy Holder										
LNO		Insurance Company	IDANIOE OO		ndividual	TENDEDO						
_		ACUITY,-A-MUTUAL-INSU	RANCE-CO		KEEGAN SCHWICH	IENBERG						
		ndividual			N: # 1							
		Driver KEEGAN SCHWICHTENBERG			Citations Issued	Sex MALE						
	AL	(608) 604-3919			Date of Birth	Race						
_	INDIVIDUAL				WHITE							
	Σ	Address			Oriver License Number							
		496 E 7TH ST RICHLAND CENTER, WI 5	3581 . US		STATE: WISCONSIN	COUNTRY: UNI	TED STATES					
		THORIEARD GERTER, WITC	, 00									
		On Duty	Crash		Safety Equipment							
	Saf	ety Equipment	Oldon	1	balety Equipment							
		Row	Seat Position	<b>−</b>   5	SHOULDER & LAP I	BELT						
		01 - FRONT ROW	07 - LEFT									
		Helmet Use		ŀ	Helmet Compliance							
		Eye Protection		Tint Compliance								
					int Compilarioc							
5	001	Injury Se	-	1	Airbag							
0	ŏ		PARENT INJURY	ı	NON DEPLOYED							
			Ejection Path	ם וכ	ADIE		Trapped/Extricated  NOT TRAPPED					
	NOT EJECTED NOT EJECTED/NOT APP			EMS Agency Identifier		EMS Run #						
		NOT TRANSPORTED		ľ	ino rigerioy identinei		LINO INGIL					
		Hospital		- [	Date of Death		Time of Death					
		Distracted By NOT AF	ed By Source PPLICABLE (NOT DISTRA	ACT	ED)							
		Distracted By Action	,		<u>,                                      </u>							
		NOT DISTRACTED										

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/24/2023

		<u>_</u>									
		Non Motorist	Striking Ur	nit#	Location						
		Prior Action									
LIND	INDIVIDUAL	Action									
		Action Other							To/From School		
	L	Drug & Alcohol	Suspected <b>NO</b>	Alcohol U	lse	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	5			
2	001	Drug Type									
		Individual Condition									
	APPEARED NORMAL										
	ı	Individual				Tour is	To				
	_	Passenger  DAKOTA DRAVES	;			Citations Issued  0	Sex MALE				
_	DUA	(608) 963-8282			Date of Birth	Race WHITE					
LIND	INDIVIDUAL	Address E13807 COUNTY F BARABOO, WI 539				Driver License Number		ITED STATES			
	Sat	fety Equipment	On Duty C	rash		Safety Equipment					
		Row 01 - FRONT ROW		Seat Po		SHOULDER & LAP BELT					
		Helmet Use				Helmet Compliance					
		Eye Protection				Tint Compliance					
2	005	Injury	NO APP	ARENT II		Airbag NON DEPLOYED					
		Ejected NOT EJECTED		jection Pa	<sup>th</sup> CTED/NOT APPI	LICABLE		Trapped/Extricated NOT TRAPPED			
		Medical Transport NOT TRANSPORT	ED			EMS Agency Identifier		EMS Run #			
		Hospital				Date of Death		Time of Death			
		Distracted By	Distracted	By Source	9	1		l			
		Distracted By Action									
		Non Motorist	Striking Ur	nit#	Location						

#### WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Prior Action								
		Action								
	INDIVIDUAL									
LIND	ום									
5	<u>&gt;</u>									
	Z									
		Action Other					To/From School			
	1	Drug & Alcohol NO	lse	Suspected Drug Use NO						
	_	Alcohol Test Given	Alcohol Test Type			Alcohol Test Results				
		TEST NOT GIVEN	, accitor root type	•		7 Hoorior Foot Roodilo				
		Drug Test Given	Drug Test Type		Drug Test Results					
		TEŠT NOT GIVEN								
2	002	Drug Type								
		ndividual Condition								
		APPEARED NORMAL								
		ndividual								
		Passenger	Citations Issued	Sex						
	4	ABAIGEAL TIERNEY (608) 402-5901		<b>0</b> Date of Birth	FEMALE Race					
E	INDIVIDUAL			Date of Birth	WHITE					
L N N	<u> </u>	Address S5163 ROCK HILL RD	Driver License Number							
	Z	BARABOO, WI 53913 , US		STATE: WISCONSIN	I COUNTRY: UNI	TED STATES				
	Saf	On Duty Crash		Safety Equipment						
		Row Seat Po		SHOULDER & LAP BELT						
		02 - SECOND ROW 07 - LE	FT	Helmat Compliance						
		Helmet Use		Helmet Compliance						
		Eye Protection		Tint Compliance						
	္က	Injury Severity		Airbag						
2	003	Injury NO APPARENT II	NJURY	NON DEPLOYED						
		Ejected Ejection Pa				Trapped/Extricated				
		NOT EJECTED NOT EJECTED Medical Transport	CTED/NOT APPL	LICABLE  EMS Agency Identifier		NOT TRAPPED EMS Run #				
		NOT TRANSPORTED		LIVIS Agency Identille		LIVIS IXUIT#				
		Hospital		Date of Death		Time of Death				
		Distracted By Source	•							
		Distracted By Action								
		Ctriking Unit #	Location							
		Non Motorist Striking Unit #	Location							
		Prior Action								

Crash Date 06/24/2023
Crash Time 02:28 PM

## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/24/2023

		Action								
	_									
	INDIVIDUAL									
LNO	/ID									
$\supset$										
	Z									
		Action Other								To/From School
	ı	Sus	pected Alcohol U	se	Suspected Drug Use					
	L	Drug & Alcohol No			NO					
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	9			Alcohol Test	Results	
		Drug Test Given		Drug Test Type		Drua T	est Results			
		TEST NOT GIVEN		, ,						
01	003	Drug Type				•				
	0									
		Individual Condition								
		APPEARED NORMAL								
		Status		ΙV	ehicle Operating As Classi	ification		Unit Type		
		RANSIT			CLASS			TRUCK		
02		се Туре					Operating A	s Endorsen	nents	
0		LITY TRUCK/PICKUP TO Occs	corded T	otal # Citations Issued		Total Traile	ire I	Total Haz	Mat Tynes	
	<b>2</b>	114,200, 110001202		0			0	13	0	wat Types
		ance?	Direction Of Tra	_	Pre CrashTire	Speed Lim	t	Total Lane	es	
UNIT	YES	Harmful Event: Collision W	EASTBOUND	_	Mark special Function		55	Emergency	2 Motor Vehic	
Б		TOR VEH IN TRANSPO			NO SPECIAL FUNCTION			NOT APPLICABLE		
		ic Way			Traffic Control			Traffic Control Inoperative/Missing		
		D-WAY, NOT DIVIDED ace Type			NO CONTROL			NO Road Grade		
		CKTOP (BITUMINOUS)	)		Road Curvature STRAIGHT			LEVEL		
	Truc	k Bus or HazMat	<u>′</u>	<u> </u>						
	NO									
	`	Vehicle License Plate Number			Dieta Tura	ı	St	Country of Iss	Suance.	
		JA5087			Plate Type  LTK - LIGHT TRUCK			UNITED ST		
05	7	Vehicle Identification Numb		1	Make		Year	Model		
0	02	1GTGK29U11Z173503			GENERAL MOTORS C	OR		SIERRA K2	25	
		Color SIL - SILVER (ALUMIN	IUM)		Body Style <b>PK - PICKUP</b>			Bus Use		
	щ	Initial Contact Point	-		Vehicle Damage					7 8 9 10 11
LIND		03 - RIGHT SIDE MIDD	LE		AA DIQUE OIDE MIDE	N. F. A.	4 BIGUT			6 2 2 2 12
5	VEHICLE	Extent Of Damage FUNCTIONAL DAMAG	Ε		03 - RIGHT SIDE MIDE	JLE, 04	+ - KIGHT	SIDE KEAR		5 4 3 2 1
	_	Towed Due To Damage		,	Vehicle Removed By					
		NOT TOWED								
		What Driver Was Doing GOING STRAIGHT								

## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

					Veh	icle Factors			
		Driver Prior Action Other			NO	T APPLICABLE			
		Driver Prior Action Other			''	I AI I LIOADLL			
		Driver Actions							
	ш	NO CONTRIBUTING ACTION							
_	VEHICLE								
LIND	₽								
$\supset$	亩								
	>								
		Owner Name				Owner Address			
		DOUGLAS BILLMANN				112 SHELLY DR			
02	02	(920) 912-1462				SHEBOYGAN FAL	.LS, WI 53085 , U	JS	
	9	Sequence Of Event	's						
		Event							
	2	MOTOR VEH IN TRANS	SPORT						
	<b>~</b> 1	Event							
	05								
	~	Event							
	03								
	4	Event							
	9								
_		Policy Holder							
UNIT		Insurance Company			Ir	ndividual			
$\supset$		PROGRESSIVE-ADVA	NCED-INSUR	ANCE-CO	C	OUGLAS BILLMAI	NN		
		Individual							
		Driver			Ic	itations Issued	Sex		
		DOUGLAS BILLMANN			0		MALE		
	₹	(920) 912-1462		С	ate of Birth	Race			
_	INDIVIDUAL						WHITE		
L N N	≥	Address			С	Priver License Number	•		
_	무	112 SHELLY DR SHEBOYGAN FALLS, \	MI E200E II	•		STATE: WISCONSIN	I COLINTRY: LINI	TED STATES	
	=	SHEBUTGAN FALLS, V	WI 53065 , U	3	"	TAIL. WISCONSIN	COOMINI. OM	ILD STATES	
	Sat	fety Equipment	outy Crash		S	afety Equipment			
	Ou.		1		OUR WIND STORY AND DELT				
		Row FRONT ROW	Seat Po		٥	SHOULDER & LAP	BELI		
		01 - FRONT ROW Helmet Use	07 - LI	-F1		Iolmot Compliance			
		Heimet Ose			Helmet Compliance				
		Eye Protection			+	int Compliance			
					Till Compilance				
~	4	Injury	y Severity		Α	irbag			
05	004	Injury <sub>NO</sub>	APPARENT I	NJURY	N	ION DEPLOYED			
		Ejected	Ejection Pa	ith				Trapped/Extricated	
		NOT EJECTED	NOT EJE	CTED/NOT API				NOT TRAPPED	
	Medical Transport				E	MS Agency Identifier		EMS Run #	
	NOT TRANSPORTED								
		Hospital				ate of Death		Time of Death	
		15: :	astad D. O.						
		Distracted By NOT	acted By Sourc	= .E (NOT DISTR:	ACT	ED)			
		Distracted By Action		(·····					
		NOT DISTRACTED							
		Striki	ing Unit#	Location					
		Non Motorist							

#### WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/24/2023

		Prior Action	Prior Action								
		Action									
	INDIVIDUAL										
<b>≒</b>	DO										
UNIT	$\overline{\geq}$										
	N										
		A ( O)					T = 0				
		Action Other					To/From School				
		Suspected A	Alcohol Use	Suspected Drug Use			<u> </u>				
	L	Drug & Alcohol NO		NO							
		Alcohol Test Given	Alcohol Test Type	;		Alcohol Test Results					
		TEST NOT GIVEN	Drug Test Type		I D T4 D						
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results						
70 Drug Type											
	0										
		ndividual Condition									
		APPEARED NORMAL									
		Individual									
		Passenger	Citations Issued	Sex							
	Ţ	BARBARA BILLMANN (920) 912-1462		0	FEMALE						
_	INDIVIDUAL	(020) 012 1102	Date of Birth	Race WHITE							
L N N	Σ	Address	Driver License Number								
-	Z	112 SHELLY DR SHEBOYGAN FALLS, WI 530	SHEBOYGAN FALLS, WI 53085 , US			IITED					
		,		STATES							
	Sat	On Duty Cra fety <b>Equipment</b>	ash	Safety Equipment							
		Row	Seat Position	SHOULDER & LAP BELT							
		01 - FRONT ROW	09 - RIGHT								
		Helmet Use		Helmet Compliance							
		Eye Protection		Tint Compliance							
	.	Injury Sever	ih								
05	005		RENT INJURY	Airbag NON DEPLOYED							
			ection Path	1		Trapped/Extricated					
		NOT EJECTED NO  Medical Transport	OT EJECTED/NOT APPL	LICABLE  EMS Agency Identifier		NOT TRAPPED EMS Run #					
		NOT TRANSPORTED		EWS Agency Identiller		EWS Ruff #					
		Hospital		Date of Death		Time of Death					
		Distracted B	ay Source								
		Distracted By	y Gourde								
		Distracted By Action									
		Striking Unit	# Location								
		Non Motorist Prior Action									
I		I HOI ACION									

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/24/2023

		Action						
	Ļ							
_	UA							
UNIT	VID							
_	INDIVIDUAL							
	=							
								1
		Action Other						To/From School
			Suspected Alcohol Us	se	Suspected Drug Use			
	L	Drug & Alcohol			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		Diag restripe	Drug Test Nesults			
02	900	Drug Type	<b>'</b>					
	0							
		Individual Condition						
		APPEARED NORM	/IAL					