WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/01/2023

Document Number Override	Primary Crash [Document#	Agency Crash Number 23-06899		Investigating Officer/Deputy DEPUTY S. ELLICKSON			
Crash Date 07/01/2023	Crash Time 01:05 PM		Date Ar 07/01/2		Time Arrived 01:09 PM	i		
Date Notified 07/01/2023	Time Notified 01:09 PM		Total U		Total Injured	Total Kille	ed	
On Emergency Hi	t and Run	Lane Closu	ıre	Work Zone	Trailer	or Towed	Reporting Threshold	
Government Property	Active Sc	hool Zone	School NO	Bus Related	Tags			
▼ Reportable	Crash Type DT4000 (STA	NDARD CRASH)		Amend	led	Secondary Crash	
Description	•							
Not to Scale	ı		n ,		\$	Photos By		
				USH 12		Additional Info	rmation	
I, a sworn law enforcement	ent officer, agre	ee that I have no	t added	I any CJIS data in th	is report.			
ALL UNITS WERE DRIVING WESTI UNIT 1 WAS NOT ABLE TO BREAK	BOUND ON USH 1	2 JUST SOUTH OF UNIT 1 REAR END	CTH PF.	UNIT 3 STOPPED DUE 2. WHEN UNIT 2 WAS R	TO BACKED UP T	TRAFFIC. UNIT:	2 STOPPED HOWEVER	

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	Loc	ation									
		USH12 WB				Latitude			Longit	tude	
		MIS				43.28874	19903		-89.7	58987358	
	IN T	USH12 WB THE VILLAGE OF PRA	AIRIE DU SAC			X Coordina 276170.0				ordinate 577.5	
	IN S	SAUK COUNTY			_	Structure Type					
						NO STRUCTURE					
	Cra	sh Scene									
	First	Harmful Event				First Harm	ıful Event Lo	ocation			
	MO	TOR VEH IN TRANSP	ORT			ON ROA	DWAY				
	Man	ner of Collision				Light Cond	dition				
	03 -	FRONT TO REAR				DAYLIGI	НT				
	Roa	d Surface Condition(s)				Roadway	Factor(s)				
	DR	Y									
	Envi	ironment Factor(s)									
	NOI	NE			NONE						
	Wea	ather Condition(s)									
	CLE	EAR									
	Anin	nal Type				Relation To Trafficway					
		71				TRAFFICWAY - ON ROAD					
	-	sh Classification - Location BLIC PROPERTY	1			Crash Classification - Jurisdiction NO SPECIAL JURISDICTION					
	Triba	al Land				Access Co				Special Study	
	With	nin Interchange Area	Junction Location		Intersection		IKOL				
	NO	iii interoriange / trea	NON-JUNCTION		NOT AN II		CTION				
	Uni	t Summary =									
		Status		Vehicle Op	erating As Cla	assification		Unit Type			
						* * * * * * * * * * * * * * * * * * * *					
		TRANSIT		D CLASS				AUTOMOI			
1	Vehi	icle Type						Operating A		sements	
01	Vehi	icle Type ORT) UTILITY VEHIC		D CLASS				Operating A	s Endors		
01	Vehi	icle Type	LE Train/Bus # Recorded	D CLASS			Total Trail	Operating A	s Endors	sements azMat Types	
01	Vehi (SP Tota 7	icle Type ORT) UTILITY VEHIC		Total # Cita				Operating A ers	Total H Total La	azMat Types	
	Vehi (SP Tota 7 Insu NO	icle Type ORT) UTILITY VEHIC	Train/Bus # Recorded Direction Of Travel WESTBOUND	Total # Cita 3 Pre	tions Issued CrashTire Mark		0	Operating A ers	Total H O Total La	azMat Types anes	
	Vehi (SP Tota 7 Insu NO Mos	icle Type ORT) UTILITY VEHIC Il Occs rance? It Harmful Event: Collision	Train/Bus # Recorded Direction Of Travel WESTBOUND With	Total # Cita 3 Pre Special Fur	tions Issued CrashTire Mark notion		0 Speed Lin	Operating A ers	Total H Total La Z Motor Ve	azMat Types anes ehicle Use	
	Vehi (SP Tota 7 Insu NO Mos MO	icle Type ORT) UTILITY VEHIC II Occs rance? It Harmful Event: Collision TOR VEH IN TRANSP	Train/Bus # Recorded Direction Of Travel WESTBOUND With	Total # Cita 3 Pre Special Fur NO SPEC	tions Issued CrashTire Mark nction EIAL FUNCT		0 Speed Lin	Operating A ers nit Emergency NOT APPI	Total H 0 Total La 2 Motor Ve	azMat Types anes chicle Use	
	Vehi (SP Tota 7 Insu NO Mos MO	icle Type ORT) UTILITY VEHIC II Occs rance? It Harmful Event: Collision TOR VEH IN TRANSP fic Way	Train/Bus # Recorded Direction Of Travel WESTBOUND With ORT	Total # Cita 3 Pre Special Fur NO SPEC	CrashTire Mark notion EIAL FUNCT		0 Speed Lin	Operating A ers iit Emergency NOT APPI Traffic Control	Total H 0 Total La 2 Motor Ve	azMat Types anes shicle Use	
	Vehi (SP Tota 7 Insu NO Mos MO Traff	icle Type ORT) UTILITY VEHIC II Occs rance? It Harmful Event: Collision TOR VEH IN TRANSP	Train/Bus # Recorded Direction Of Travel WESTBOUND With ORT	Total # Cita 3 Pre Special Fur NO SPEC Traffic Cont	CrashTire Mark notion HAL FUNCT		0 Speed Lin	Operating A ers nit Emergency NOT APPI	Total H 0 Total La 2 Motor Ve LICABL	azMat Types anes chicle Use	
	Vehi (SP Tota 7 Insu NO Mos MO Traff TWO	icle Type ORT) UTILITY VEHIC IN OCCS rance? It Harmful Event: Collision TOR VEH IN TRANSP fic Way O-WAY, NOT DIVIDED	Train/Bus # Recorded Direction Of Travel WESTBOUND With ORT	Total # Cita 3 Pre Special Fur NO SPEC	CrashTire Mark action BIAL FUNCT		0 Speed Lin	Operating A ers iit Emergency NOT APPI Traffic Conti	Total H 0 Total La 2 Motor Ve LICABL	azMat Types anes chicle Use	
	Vehi (SP Tota 7 Insu NO Mos MO Traff TWO Surfs BLA	icle Type ORT) UTILITY VEHIC Il Occs rance? It Harmful Event: Collision TOR VEH IN TRANSP fic Way O-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOU ck Bus or HazMat	Train/Bus # Recorded Direction Of Travel WESTBOUND With ORT	Total # Cita 3 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva	CrashTire Mark action BIAL FUNCT		0 Speed Lin	ers Emergency NOT APPI Traffic Contr	Total H 0 Total La 2 Motor Ve LICABL	azMat Types anes chicle Use	
	Vehi (SP Tota 7 Insu NO Mos MO Traff TWO Surfa BLA Truc NO	icle Type ORT) UTILITY VEHIC II Occs rance? It Harmful Event: Collision TOR VEH IN TRANSP fic Way O-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOU ek Bus or HazMat	Train/Bus # Recorded Direction Of Travel WESTBOUND With ORT	Total # Cita 3 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva	CrashTire Mark action BIAL FUNCT		0 Speed Lin	ers Emergency NOT APPI Traffic Contr	Total H 0 Total La 2 Motor Ve LICABL	azMat Types anes shicle Use	
UNIT 01	Vehi (SP Tota 7 Insu NO Mos MO Traff TWO Surfa BLA Truc NO	icle Type ORT) UTILITY VEHIC In Occs rance? It Harmful Event: Collision TOR VEH IN TRANSP fic Way O-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOU Ek Bus or HazMat	Train/Bus # Recorded Direction Of Travel WESTBOUND With ORT	Total # Cita 3 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH	CrashTire Mark Inction Italian Mark Mart Mart Mart Mart Mart Mart Mart Mart		Speed Lin 55	ers Emergency NOT APPI Traffic Conti NO Road Grade LEVEL	Total H 0 Total La 2 Motor Ve ICABL	azMat Types anes chicle Use	
	Vehi (SP Tota 7 Insu NO Mos MO Traff TWO Surfa BLA Truc NO	icle Type ORT) UTILITY VEHIC In Occs rance? It Harmful Event: Collision TOR VEH IN TRANSP fic Way O-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOU Ex Bus or HazMat Vehicle License Plate Number	Train/Bus # Recorded Direction Of Travel WESTBOUND With ORT	Total # Cita 3 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH	CrashTire Mark Inction BIAL FUNCT BY TROL BATTERING TOL BATTERING BY TROL BY T	TION	Speed Lin 55	Operating A ers it Emergency NOT APPI Traffic Conti NO Road Grade LEVEL Country of Is	Total H 0 Total La 2 Motor Ve LICABL Tol Inope	azMat Types anes chicle Use	
TINO	Vehi (SP Tota 7 Insu NO Mos MO Traff TWO Surfa BLA Truc NO	icle Type ORT) UTILITY VEHIC In Occs rance? It Harmful Event: Collision TOR VEH IN TRANSP fic Way O-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOU Ek Bus or HazMat Vehicle License Plate Number ASC8704	Train/Bus # Recorded Direction Of Travel WESTBOUND With ORT	Total # Cita 3 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH	CrashTire Mark Inction Italian Mark Mart Mart Mart Mart Mart Mart Mart Mart	TION	Speed Lin 55	ers Emergency NOT APPI Traffic Conti NO Road Grade LEVEL Country of Is. UNITED ST	Total H 0 Total La 2 Motor Ve LICABL Tol Inope	azMat Types anes shicle Use	
	Vehi (SP Tota 7 Insu NO Mos MO Traff TWO Surfa BLA Truc NO	icle Type ORT) UTILITY VEHIC In Occs rance? It Harmful Event: Collision TOR VEH IN TRANSP fic Way O-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOU Ex Bus or HazMat Vehicle License Plate Number	Train/Bus # Recorded Direction Of Travel WESTBOUND With ORT JS)	Total # Cital 3 Pre Special Fur NO SPEC Traffic Confi NO CONT Road Curva STRAIGH Plate Type AUT - AU Make HONDA	CrashTire Mark Inction CIAL FUNCT TOI TROL ature T	TION	Speed Lin 55	Operating A ers it Emergency NOT APPI Traffic Conti NO Road Grade LEVEL Country of Is	Total H 0 Total La 2 Motor Ve LICABL Tol Inope	azMat Types anes chicle Use	
TINO	Vehi (SP Tota 7 Insu NO Mos MO Traff TWO Surf: NO NO	icle Type ORT) UTILITY VEHIC I Occs rance? It Harmful Event: Collision TOR VEH IN TRANSP fic Way O-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOU Ex Bus or HazMat Vehicle License Plate Number ASC8704 Vehicle Identification Nu 2HKYF18735H57033 Color	Train/Bus # Recorded Direction Of Travel WESTBOUND With ORT JS)	Total # Cita 3 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AU Make HONDA Body Style	CrashTire Mark Detion CIAL FUNCT TOI TROL Dature T	TION	St WI Year 2005	Operating A ers Emergency NOT APPI Traffic Conti NO Road Grade LEVEL Country of Is UNITED ST Model PILOT Bus Use	Total H 0 Total La 2 Motor Ve LICABL Tol Inope	azMat Types anes chicle Use	
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UNIT UNIT	Vehit (SP Total 7 Total 7 Insu NO Mos MO Traff TWG Surfa BLA Truc NO	icle Type ORT) UTILITY VEHIC II Occs rance? It Harmful Event: Collision TOR VEH IN TRANSP fic Way O-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOU Ex Bus or HazMat Vehicle License Plate Number ASC8704 Vehicle Identification Nu 2HKYF18735H57033 Color WHI - WHITE Initial Contact Point	Train/Bus # Recorded Direction Of Travel WESTBOUND With ORT JS)	Total # Cita 3 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AU Make HONDA Body Style	CrashTire Mark Detion CIAL FUNCT TOIL TROL DETICATION DITOMOBILE DETICATION D	TION	St WI Year 2005	Operating A ers Emergency NOT APPI Traffic Conti NO Road Grade LEVEL Country of Is UNITED ST Model PILOT Bus Use	Total H 0 Total La 2 Motor Ve LICABL Tol Inope	azMat Types anes shicle Use	
TINO	Vehit (SP Tota 7 Insu NO Mos MO Traff TWO Surf. NO	icle Type ORT) UTILITY VEHIC I Occs rance? It Harmful Event: Collision TOR VEH IN TRANSP fic Way O-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOU Ex Bus or HazMat Vehicle License Plate Number ASC8704 Vehicle Identification Nu 2HKYF18735H57033 Color WHI - WHITE	Train/Bus # Recorded Direction Of Travel WESTBOUND With ORT JS)	Total # Cita 3 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AL Make HONDA Body Style UT - SPC	CrashTire Mark Inction IAL FUNCT IT I	TION	St WI Year 2005	Operating A ers Emergency NOT APPI Traffic Conti NO Road Grade LEVEL Country of Is UNITED ST Model PILOT Bus Use	Total H 0 Total La 2 Motor Ve LICABL Tol Inope	azMat Types anes chicle Use E rative/Missing	

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Crash Date 07/01/2023

		Towed Due To Damage			hicle Removed By				
		NOT TOWED		OF	PERATOR				
		What Driver Was Doing		Ve	hicle Factors				
		GOING STRAIGHT		NC	OT APPLICABLE				
		Driver Prior Action Other		, inc	JI APPLICABLE				
		Driver Actions							
	Щ	FOLLOWING TOO CLOSE							
LIND	VEHICLE								
5	ᇳ								
	>								
		Owner Name			Owner Address				
_	_	JUAN RIOS DURAN			1919 CTH J #2				
2	9	(608) 341-0172			LINDEN, WI 53553	, 05			
	3	Sequence Of Events Event							
	01	MOTOR VEH IN TRANSPO	RT						
	02	Event							
	03	Event							
		Event							
	04	Lvoin							
		Individual							
	Ī	Driver			Citations Issued	Sex			
	إ	JUAN RIOS DURAN			3	MALE			
	INDIVIDUAL	(608) 341-0172			Date of Birth	Race HISPANIC			
E I		Address			Driver License Number	THOI AND			
5		1919 CTH J #2			bliver Electise Number				
	=	LINDEN, WI 53553, US							
	Saf	On Duty	Crash		Safety Equipment				
		Row	Seat Positi	ion	SHOULDER & LAP E	BELT			
		01 - FRONT ROW	07 - LEF	Г					
		Helmet Use			Helmet Compliance				
		Eye Protection			Tint Compliance				
_	Ξ	Injury Se	verity		Airbag				
2	00	Injury NO APE	ARENT INJ	URY	NON DEPLOYED				
		=	Ejection Path	ED/NOT APPLIC	^ARI E		Trapped/Extricated NOT TRAPPED		
		Medical Transport	HOT LOLOT		EMS Agency Identifier		EMS Run #		
		NOT TRANSPORTED			3 ,				
		Hospital			Date of Death		Time of Death		
		Distracte	d By Source						
		Distracted By NOT AF Distracted By Action	PLICABLE	(NOT DISTRACT	ΓED)				
		NOT DISTRACTED							
		Non Motorist Striking L	Jnit# L	ocation					

WISCONSIN MOTOR VEHICLE CRASH REPORT

ı									
		Prior Action							
UNIT	INDIVIDUAL	Action Other						To/From School	
		Suspecte Orug & Alcohol NO	ed Alcohol I	Use	Suspected Drug Use				
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results		
		TEST NOT GIVEN		Drug Test Type		I Down Took Doonle			
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results			
10	001	Drug Type		1		ı			
		Individual Condition							
		APPEARED NORMAL							
	i	Individual							
	۱۲	Passenger ULDA ESTEBAN SANCHEZ (608) 341-0431			Citations Issued 0	Sex FEMALE			
_	DO/	(600) 611 6161			Date of Birth	Race HISPANIC			
LIND	INDIVIDUAL	Address 1919 CTH J #2 LINDEN, WI 53553 , US			Driver License Number				
	Sat	On Duty fety Equipment	Crash		Safety Equipment				
		Row 01 - FRONT ROW	Seat Po		SHOULDER & LAP	BELT			
		Helmet Use			Helmet Compliance				
		Eye Protection			Tint Compliance				
2	005	Injury Se	-		Airbag				
	0	, , , , , , , , , , , , , , , , , , ,	PARENT I		NON DEPLOYED		Trapped/Extricated		
		NOT EJECTED		CTED/NOT APPL	LICABLE		NOT TRAPPED		
		Medical Transport NOT TRANSPORTED			EMS Agency Identifier		EMS Run #		
		Hospital			Date of Death		Time of Death		
		Distracte	d By Sourc	e e					
		Distracted By Action	_ 2, 30410	-					
		·							
		Non Motorist Striking I	Jnit#	Location					
		Prior Action		1					

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	_										
		Action									
	INDIVIDUAL										
LNO	JDI										
\supset											
	Z										
		Action Other							To/From School		
		Sus	spected	Alcohol U	se	Suspected Drug Use					
	L	Drug & Alcohol NO)			NO					
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type			Alcohol Test Results			
		Drug Test Given			Drug Test Type		Drug Test Results	<u> </u>			
		TEST NOT GIVEN									
7	002	Drug Type									
	0										
		Individual Condition									
		APPEARED NORMAL									
		 ndividual									
		Passenger				Citations Issued	Sex				
	Ļ	JACOBO ESTEBAN SANCHEZ (608) 341-6617			0	MALE					
	INDIVIDUAL				Date of Birth	Race HISPANIC					
LNO	Σ	Address				Driver License Numb	er				
ے	ND	1919 COUNTY ROAD LINDEN, WI 53553, U				STATE: WISCONS	SIN COUNTRY: UN	ITED STATES			
		, , .									
	0-4	On	Duty Cr	ash		Safety Equipment					
	Sai	ety Equipment				CHOILI DED 8 I A	D DELT				
		Row 02 - SECOND ROW		Seat Pos 07 - LE		SHOULDER & LA	P BELT				
		Helmet Use		1		Helmet Compliance					
		Eye Protection				Tint Compliance					
		Eye Protection				Tint Compliance					
2	003	Injury	ry Seve	rity		Airbag					
	0	Injury NO	APPA	RENT IN	IJURY h	NON DEPLOYED		Trapped/Extricated			
		NOT EJECTED			 CTED/NOT APPL	ICABLE		NOT TRAPPED			
		Medical Transport	ı			EMS Agency Identifie	er	EMS Run #			
		NOT TRANSPORTED Hospital				Date of Death		Time of Death			
		Ποσριταί				Date of Death		Time of Death			
		Distracted By Dist	tracted f	By Source		•		-			
		Distracted By Action									
		Non Motorist	king Uni	it #	Location						
		Prior Action									

5 of 20

Crash Date 07/01/2023 Crash Time 01:05 PM

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/01/2023

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		Action								
	INDIVIDUAL									
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LNO	≥									
	$\overline{\Box}$									
	=									
		Action Other						To/From School		
	,	Orug & Alcohol NO	ected Alcoho	l Use	Suspected Drug Use					
		_			NO					
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results			
		TEST NOT GIVEN		Drug Test Type		I D T+ D				
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results				
	8	Drug Type								
0	003	Diag Typo								
		Individual Condition								
		APPEARED NORMAL								
	ı	ndividual								
		Passenger			Citations Issued	Sex				
TINO	إ	ARIANNA ESTEBAN RI	JBIO		0	FEMALE				
	INDIVIDUAL				Date of Birth	Race HISPANIC				
	9	Address			Driver License Numbe					
5		1919 CTH J #2			Driver License Numbe	1				
	Z	LINDEN, WI 53553 , US	3							
	0-4	On D	uty Crash		Safety Equipment					
	Sai	ety Equipment								
		Row		Position	CHILD RESTRAIN	T SYSTEM - FORV	VARD FACING			
		02 - SECOND ROW Helmet Use	- 80	MIDDLE	Halmad Camalian as					
		Heimet Use			Helmet Compliance					
		Eye Protection			Tint Compliance					
		•								
7	004	Injury	Severity		Airbag					
0	8	Injury _{NO}	APPARENT	INJURY	NON DEPLOYED					
		Ejected	Ejection				Trapped/Extricated			
		NOT EJECTED	NOT EJ	ECTED/NOT APPL			NOT TRAPPED			
		Medical Transport NOT TRANSPORTED			EMS Agency Identifier	•	EMS Run #			
		Hospital			Date of Death		Time of Death			
		Ποσρικαι			Date of Death		Time of Death			
		Distra	cted By Sou	rce	<u> </u>		<u> </u>			
		Distracted By	-							
		Distracted By Action								
		,		_						
		Non Motorist	ng Unit#	Location						
		Prior Action								

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

Crash Date 07/01/2023

	_							,		
		Action								
	A									
-	INDIVIDUAL									
LNO										
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	_									
		Action Other						To/From School		
		Susp	ected Alco	hol Use	Suspected Drug Use					
	L	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	<u> </u>			
		TEŠT NOT GIVEN								
_	4	Drug Type				_ I				
6	004	0 71								
		Individual Condition								
		ADDEADED MODMAI								
		APPEARED NORMAL								
		ndividual			T-11 11 11 11 11 11 11 11 11 11 11 11 11					
		Passenger ROSA MORENO SANC	HF7		Citations Issued	Sex				
LIND	7	(608) 330-1196	1122		0	FEMALE				
	INDIVIDUAL	` ,			Date of Birth	Race HISPANIC				
	\exists	Address			Driver License Numbe					
5		1919 CTH J #2			Driver License Number	: 1				
	Z	LINDEN, WI 53553 , US	S							
	l	On D	uty Crash		Safety Equipment					
	Saf	ety Equipment	aty Olaon		Calcity Equipment					
		Row	90	at Position	SHOULDER & LAP	PRFIT				
		02 - SECOND ROW		- RIGHT	0.10025214 & 274	5				
		Helmet Use			Helmet Compliance					
		Trainier des			Trominet Compilation					
		Eye Protection			Tint Compliance					
		,								
_	آن ا	Injury	Severity		Airbag					
2	900	Injury NO	APPAREI	NT INJURY	NON DEPLOYED					
		Ejected	Ejectio	n Path	ı		Trapped/Extricated			
		NOT EJECTED	NOT	EJECTED/NOT APPL	ICABLE		NOT TRAPPED			
		Medical Transport			EMS Agency Identifier	r	EMS Run #			
		NOT TRANSPORTED								
		Hospital			Date of Death		Time of Death			
		Distra	acted By S	ource	•		•			
		Distracted By								
		Distracted By Action								
		Non Motorial	ng Unit#	Location						
		Non Motorist								
		Prior Action								

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Crash Date 07/01/2023

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		Action								
	INDIVIDUAL									
⊨	JC									
LNO	7									
ر										
	Z									
									I = /5	
		Action Other							To/From School	
		Ta	Supported	Alcohol Use	Leuo	pected Drug Use				
	L	Drug & Alcohol	NO	Alcohol Ose	NO					
		Alcohol Test Given		Alcohol Test	Type			Alcohol Test Results		
		TEST NOT GIVEN		Alcohol Test	Type			Alcohol Test Results		
		Drug Test Given		Drug Test Typ	ne		Drug Test Results			
		TEST NOT GIVEN		2.49 .551.7			Drug Test Nesults			
	2	Drug Type								
6	005	3 71								
		Individual Condition								
		APPEARED NORM	AL							
		, u · _, u · _, · · · · · · · · · · · · · · · · ·								
	i	ndividual								
	Ī	Passenger			Citat	tions Issued	Sex			
	_		BLANCA RUBIO RIVERA				FEMALE			
Ę	INDIVIDUAL	(608) 341-8620			Date	of Birth	Race			
	ם						HISPANIC			
UNI	\geq	Address			Drive	er License Number				
	R	1919 CTH J #2 LINDEN, WI 53553	us							
			, 00							
			On Duty Cr	en a h	Safety Equipment					
	Saf	ety Equipment	On Duty Ci	asii	Sale	ety Equipment				
		Row		Seat Position	SHO	OULDER & LAP I	RFI T			
		06 -UNKNOWN RO	w	07 - LEFT	0					
		Helmet Use		• · · · · · · · · · · · · · · · · · ·	Heln	net Compliance				
						•				
		Eye Protection			Tint	Compliance				
5	600	I	njury Seve	-	Airba	-				
	0			RENT INJURY	NOI	N DEPLOYED				
		Ejected	-	ection Path	DDI ICAE	N =		Trapped/Extricated		
		NOT EJECTED Medical Transport	N	OT EJECTED/NOT A		Agency Identifier		NOT TRAPPED EMS Run #		
		NOT TRANSPORTE	-n		EIVIG	Agency identifier		EIVIS Kuii #		
		Hospital			Date	e of Death		Time of Death		
		Поорна			Batte	or Bodui		Time of Boats		
		[Distracted	By Source						
		Distracted By								
		Distracted By Action								
		Non Motorist	Striking Un	it # Location						
		Prior Action								

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/01/2023

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		Action									
	A										
-	INDIVIDUAL										
LNO	9										
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	۲										
	_										
		Action Other							To/From School		
		Sus	spected A	Alcohol Use		Suspected Drug Use					
	L	Orug & Alcohol No)			NO					
		Alcohol Test Given		Alcohol T	Test Type			Alcohol Test Results			
		TEST NOT GIVEN									
		Drug Test Given		Drug Tes	st Type		Drug Test Results				
		TEŠT NOT GIVEN									
_	6	Drug Type									
6	000	0 71									
		Individual Condition									
		ADDEADED MODMAN									
		APPEARED NORMAL	-								
		ndividual				Tau i					
		Passenger DIYANNA ESTEBAN I	PURIO			Citations Issued	Sex				
LIND	7	DITANNA ESTEDANT	KODIO			0	FEMALE				
	INDIVIDUAL					Date of Birth	Race HISPANIC				
	\exists	Address				Driver License Number					
5		1919 CTH J #2				Driver License Number					
	Z	LINDEN, WI 53553 , U	US								
	l	On	Duty Cra	ash		Safety Equipment					
	Saf	ety Equipment	,			Curoty Equipmont					
		Row		Seat Position		SHOULDER & LAP	BELT				
		06 -UNKNOWN ROW		08 - MIDDLE							
		Helmet Use				Helmet Compliance					
		Troilliot GGG				- romner compilarios					
		Eye Protection				Tint Compliance					
		,				l int compilation					
_	0	Inju	ıry Sevei	rity		Airbag					
2	010	Injury NO	APPA	RENT INJURY		NON DEPLOYED					
		Ejected	I Eie	ection Path				Trapped/Extricated			
		NOT EJECTED	1 -	OT EJECTED/NO	T APPL	ICABLE		NOT TRAPPED			
		Medical Transport				EMS Agency Identifier		EMS Run #			
		NOT TRANSPORTED)								
		Hospital				Date of Death		Time of Death			
		Dis	tracted E	By Source		I		I			
		Distracted By									
		Distracted By Action									
		Stri	iking Uni	t# Location							
		Non Motorist									
		Prior Action		•							

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Action										
_	INDIVIDUAL											
UNIT	VID											
_	NDI											
	=											
		Action Other										To/From School
		Action Other										10/From School
		Driver & Aleehal	Suspe	ected Alcoh	ol Use		Suspected Drug Use					1
	L	Drug & Alcohol	NO			NO			Alcohol Test Results			
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test	Туре	e			Alcohol Tes	t Results	
		Drug Test Given TEST NOT GIVEN			Drug Test Ty	ре		Drug	Test Results			
01	010	Drug Type										
	0											
		Individual Condition										
		APPEARED NORM	IAL									
	,	Violations										
	01	UTC Number BC938705	Issue 001		Statute Number 343.05(3)(a)		Description OPERATE W/O VAL	ID LIC	ENSE (1S	T VIOLATIO	ON)	
	02	UTC Number Issue To? Statute Number 8C938706 001 344.62(1)					Description OPERATE MOTOR	VEHIC	LE W/O IN	SURANCE		
	03	UTC Number BC938707	Issue		Statute Number 346.14(1m)		Description AUTOMOBILE FOLI	LOWIN	G TOO CL	.OSELY		
		t Summary										
		Status				V	ehicle Operating As Class	ification	1	Unit Type		
		RANSIT				D	CLASS		AUTOMO			
02		cle Type SSENGER CAR								Operating A	s Endorsen	nents
		Occs		Train/Bus #	Recorded	T	otal # Citations Issued		Total Traile	ers	Total Hazi	Mat Types
	3			Di# O	• TI	0			0	0		
_	YES	rance?		Direction O WESTBO			Pre CrashTire Mark		Speed Lim	п	Total Lane	es .
UNIT		Harmful Event: Collisio					pecial Function O SPECIAL FUNCTIO) NI		Emergency NOT APP		cle Use
		TOR VEH IN TRANS	SPOR	<u> </u>			raffic Control			Traffic Cont		ive/Missing
		D-WAY, NOT DIVIDE	ΕD				O CONTROL			NO	·	· ·
		ace Type) II ()				oad Curvature			Road Grade	;	
		CKTOP (BITUMING)US)			5	TRAIGHT			LEVEL		
	NO											
	'	Vehicle										
		License Plate Number	-				Plate Type			Country of Is		
		ANM5179 Vehicle Identification N	Numbe	er			AUT - AUTOMOBILE Make			UNITED ST	IAIES	
02	02	5NPD74LF5LH498		- .			HYUNDAI			ELANTRA		
		Color WHI - WHITE					Body Style BD - SEDAN			Bus Use		
		Initial Contact Point				+	D - OLDAN					
		06 - REAR										7 8 9 10 11 6 2 2 12 5 4 3 2 1

6TL0B7D6WZ

23-06899

WISCONSIN MOTOR VEHICLE CRASH REPORT

	111		П	/ehicle Damage			, <i>,</i> 1
⊨	긍			g-			
UNIT	VEHICLE	Extent Of Damage	(06 - REAR, 12 - FRON	IT		
_	New Year	DISABLING DAMAGE					
		Towed Due To Damage		/ehicle Removed By			
		TOWED DUE TO DISABLIN		CRAIGS TOWING			
		What Driver Was Doing GOING STRAIGHT	\	/ehicle Factors			
		Driver Prior Action Other		NOT APPLICABLE			
		Driver Actions					
_	Щ	NO CONTRIBUTING ACTIO	VN				
UNIT	≌						
1	VEHICL						
		Owner Name	157	Owner Address	DEET		
02	02	KARLEE ESTEBAN SANCH (608) 574-1597	1EZ	575 W CEDAR ST PLATTEVILLE, WI			
J	0	(666) 61 1 1661			, , , , ,		
		L Sequence Of Events					
		Event					
	2	MOTOR VEH IN TRANSPO	KI				
	05	Event					
		Event					
	03						
	9	Event					
		Dollar Holder					
UNIT		Policy Holder Insurance Company		Individual			
5		GEICO-GENERAL-INS-CO		KARLEE ESTEBAN	SANCHEZ		
		Individual					
		Driver		Citations Issued	Sex		
	ب	KARLEE ESTEBAN SANCH	HEZ	0	FEMALE		
	ŏ N	(608) 574-1597		Date of Birth	Race WHITE		
UNIT	DIVIDUAL	Address		Driver License Number	WHILE		
Ź		Address 575 W CEDAR STREET		Driver License Number			
	Z	PLATTEVILLE, WI 53818 ,	US	STATE: WISCONSIN	N COUNTRY: UNI	TED STATES	
	Sat	On Duty C	Crash	Safety Equipment			
	- Cu		04 D11	SHOULDER & LAP	REIT		
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP	DELI		
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
~	9	Injury Sev	erity	Airbag			
02	900	Injury NO APP	NON DEPLOYED				
			Ejection Path	ICARI E		Trapped/Extricated	
		Medical Transport	NOT EJECTED/NOT APPL	EMS Agency Identifier		NOT TRAPPED EMS Run #	
		NOT TRANSPORTED		EMS Agency Identifier EMS Run #			
		Hospital		Date of Death Time of Death			
				Time of Beauti			

WISCONSIN MOTOR VEHICLE CRASH REPORT

		_						, ,		
		Distracted By	Distracted NOT APP	By Source LICABLE (NOT DISTRA	CTED)					
		Distracted By Action NOT DISTRACTED)							
	ļ	Non Motorist	Striking Un	it # Location						
		Prior Action		1						
		Action								
	JAL									
	INDIVIDUAL									
	IND									
		Action Other						To/From School		
	L	Orug & Alcohol	NO NO	Alcohol Use	Suspected Drug Use 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	;			
07	900	Drug Type		1		•				
		Individual Condition								
		APPEARED NORM	IAL							
	Ì	ndividual								
	Ļ	Passenger JERSON ESTEBAI (608) 574-1597	N SANCH	EZ	Citations Issued 0	MALE	Sex MALE			
⊨	INDIVIDUAL	(000) 374-1397			Date of Birth	Race HISPANIC				
L N D	DIV	Address 1920 COUNTY RO	AD J		Driver License Numb	er				
	Z	LELAND, WI, US			STATE: WISCONS	SIN COUNTRY: UNI	ITED STATES			
	Sat	ety Equipment	On Duty Cr	rash	Safety Equipment					
		Row 01 - FRONT ROW		Seat Position 09 - RIGHT	SHOULDER & LA	P BELT				
		Helmet Use			Helmet Compliance					
		Eye Protection			Tint Compliance					
05	007	Injury	Injury Seve	rity ARENT INJURY	Airbag NON DEPLOYED					
		Ejected NOT EJECTED	Ej	ection Path OT EJECTED/NOT APP	LICABLE		Trapped/Extricated NOT TRAPPED			
		Medical Transport	1		EMS Agency Identifie	er	EMS Run #			
		NOT TRANSPORT Hospital	ED		Date of Death		Time of Death			
		•			Date of Death		Table of Beaut			
		Distracted By	Distracted l	By Source						

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Distracted By Action											
			N. 11 11 11										
		Non Motorist	Striking Uni	t# Location									
		Prior Action		•									
		Action											
	AL												
╘	INDIVIDUAL												
LNO	Σ												
	N												
		Action Other						To/From School					
		Action Other	TOT TOTAL SCHOOL										
	, I	Orug & Alcohol	Suspected A	Alcohol Use	Suspected Drug Use	9		<u> </u>					
	_	Alcohol Test Given		Alcohol Test Type	_		Alcohol Test Results						
		TEST NOT GIVEN		Alcohol rest Type	•		Alcohol Test Nesults						
		Drug Test Given		Drug Test Type		Drug Test Results	s						
		TEST NOT GIVEN											
02	007	Drug Type											
		Individual Condition											
		APPEARED NORMAL											
	i	ndividual											
		Passenger ISABELLA ESTEBAN SANCHEZ			Citations Issued	Sex							
	亅				0	FEMALE							
⊨	INDIVIDUAL				Date of Birth	Race HISPANIC							
	2	Address 575 W CEDAR STRE	FFT		Driver License Numl	ber							
	Z	PLATTEVILLE, WI 5	3818 , U	S									
	Saf	ioty Equipment	On Duty Cra	Safety Equipment									
	Sai	ety Equipment			OLIGINI DED & LAD DEL T								
		Row 02 - SECOND ROW		Seat Position 08 - MIDDLE	SHOULDER & LAP BELT								
		Helmet Use			Helmet Compliance								
		Eye Protection			Tint Compliance								
		l e	njury Sever	ih	Airbog								
02	800	Injury N	IIJUIY SEVEI IO APPA	RENT INJURY	Airbag NON DEPLOYED)							
		Ejected	Ej€	ection Path	1		Trapped/Extricated						
		NOT EJECTED	NO	OT EJECTED/NOT APPL			NOT TRAPPED						
		Medical Transport NOT TRANSPORTE	:D		EMS Agency Identifi	er	EMS Run #						
		Hospital			Date of Death		Time of Death						
			Distracted E	By Source									
		Distracted By Distracted By Action											
		Distracted by Action											
Nisco	nsin N	Notor Vehicle Crash		This repor	t does not include any	CJIS data.	Crash Date	07/01/2023					

Form DT4000

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/01/2023

		Non Motorist	king Unit#	Location							
		Prior Action									
		Action									
	٩F										
UNIT	INDIVIDUAL										
n	5										
	_										
		Action Other						To/F	rom School		
		Sus	pected Alcohol U	lse	Suspected Drug Use						
	L	Drug & Alcohol NO			NO						
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test	Results			
		Drug Test Given TEST NOT GIVEN	Drug Test Given Dru			Drug Test Result	S				
02	800	Drug Type									
	0										
		Individual Condition ARREANED NORMAL									
		APPEARED NORMAL									
		t Summary ===					_				
		Status RANSIT			ehicle Operating As Classi CLASS	fication	Unit Type TRUCK				
03		cle Type	PUOK			Operating As Endorsements					
)		UTILITY TRUCK/PICKUP TRUCK Total Occs Train/Bus # Recorded			Total # Citations Issued Total Trail		ilers	Total HazMat Ty	pes		
	5 Incur	rance?	Direction Of Tra	0 avel	0 11:		0 imit Total Lanes				
Ι	YES	1	WESTBOUN	D [Pre CrashTire Mark Speed Lir		2				
UNIT		: Harmful Event: Collision W FOR VEH IN TRANSPO			pecial Function O SPECIAL FUNCTIO	Emergency Motor Vehicle Use NOT APPLICABLE					
	Traff	ic Way			affic Control	Traffic Control Inoperative/Missing					
		D-WAY, NOT DIVIDED ace Type			O CONTROL pad Curvature	NO Road Grade					
		CKTOP (BITUMINOUS)		STRAIGHT LEVEL						
	Truc NO	k Bus or HazMat									
	,	Vehicle									
		License Plate Number RE3255			Plate Type TK - LIGHT TRUCK	St WI	Country of Iss				
3	~	Vehicle Identification Num	ber		Make	Year	Model	A120			
03	03	3GTU2VEJ3EG438332 Color	2		BENERAL MOTORS C Body Style	OR 2014	SIERRA Bus Use				
		BLK - BLACK		F	PK - PICKUP		Bus Osc				
_	"	Initial Contact Point 06 - REAR		V	ehicle Damage				7 8 9 10 11		
UNIT	VEHICLE	Extent Of Damage			06 - REAR			6	₹ 12		
	7	MINOR DAMAGE Towed Due To Damage		1.	ehicle Removed By				5 4 3 2 1		
	NOT TOWED				OPERATOR						

WISCONSIN MOTOR VEHICLE CRASH REPORT

		What Driver Was Doir			V	/ehicle Factors				
		SLOW/STOPPING Driver Prior Action Oth				NOT APPLICABLE				
		Dilver Filor Action Of	ilei		-					
		Driver Actions	IC ACTIO	NI.	L					
_	ίĒ	NO CONTRIBUTIN	IG ACTIC	N						
LIND	VEHICL									
	K									
		Owner Name				Owner Address				
03	03	TIMOTHY BRAND (608) 963-0907	Т			S4916 GOLF COU ROCK SPRINGS,				
0	0	(000) 303-0301				ROOK SPRINGS,	W 33301 , 03			
		Sequence Of Ev	vents							
	01	Event MOTOR VEH IN TR		RT						
	02	Event								
	03	Event								
		Event								
	04									
LNO		Policy Holder Insurance Company				I				
5		PROGRESSIVE-CASUALTY-INS-CO			Individual TIMOTHY BRANDT					
	ļ	ndividual								
		Driver TIMOTHY BRANDT				Citations Issued 0	Sex MALE			
_	INDIVIDUAL	(608) 963-0907				Date of Birth	Race	Race WHITE		
	M	Address				Driver License Number				
ر ر	N	S4916 GOLF COURSE RD ROCK SPRINGS, WI 53961 , US			STATE: WISCONSI	N COUNTRY: UN	TED STATES			
	Sat	On Duty Crash ety Equipment				Safety Equipment				
		Row		Seat Po		SHOULDER & LAP	BELT			
		01 - FRONT ROW Helmet Use		07 - LE	:F1	Helmet Compliance				
		Eye Protection				Tint Compliance				
ဗ	011	Injury	Injury Sev	erity ARENT II	I IIIRY	Airbag NON DEPLOYED				
		Ejected		Ejection Pa		NON BEI EOTEB		Trapped/Extricated		
		NOT EJECTED		NOT EJE	CTED/NOT APPL			NOT TRAPPED		
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #				
		Hospital				Date of Death		Time of Death		
		Distracted By	Distracted	By Source	E (NOT DISTRAC	CTED)		l		
		Distracted By Action NOT DISTRACTED								
			Striking U	nit#	Location					
		Non Motorist								

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/01/2023

		Prior Action									
LIND	INDIVIDUAL	Action									
		Action Other To/From School									
	L	Orug & Alcohol	Suspected / NO	Alcohol Us		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				
03	011	Drug Type		'			•				
		Individual Condition									
		APPEARED NORMA	APPEARED NORMAL								
	i	ndividual									
		Passenger HEATHER MAE OTT (920) 858-6104			Citations Issued 0	Sex FEMALE					
_	INDIVIDUAL				Date of Birth	Race WHITE					
L N N	Σ	Address				Driver License Number					
	Ä	2829 W GLENPARK DR APPLETON, WI 54914 , US			STATE: WISCONSIN	I COUNTRY: UNI	TED STATES				
	Saf	ety Equipment	On Duty Cra	ash		Safety Equipment					
		Row 01 - FRONT ROW		Seat Pos		SHOULDER & LAP BELT					
		Helmet Use				Helmet Compliance					
		Eye Protection				Tint Compliance					
03	012	I njury Ir	njury Sever	ity		Airbag					
	0	Injury N	NO APPA	RENT IN ection Pat	JURY	NON DEPLOYED		Transad/Extrinated			
		NOT EJECTED			TED/NOT APPL	ICABLE		Trapped/Extricated NOT TRAPPED			
		Medical Transport	<u> </u>			EMS Agency Identifier		EMS Run #			
		NOT TRANSPORTE	D			Date of Death		Time of Dooth			
		Hospital				Date of Death		Time of Death			
		Distracted By	Distracted E	By Source							
		Distracted By Action									
		Non Motorist	Striking Uni	t#	Location						
		Prior Action									

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	_									
		Action								
	_									
_	INDIVIDUAL									
LNO	VID									
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	_									
		Action Other							To/From School	
		Action Other							10/FIOIII SCHOOL	
	ľ	Orug & Alcohol	Suspected .	Alcohol U	se	Suspected Drug Use NO			1	
	_	Alcohol Test Given			Alcohol Test Type			Alcohol Test Results		
		TEST NOT GIVEN								
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Results	:		
03	012	Drug Type								
0	9									
		Individual Condition								
		APPEARED NORMA	APPEARED NORMAL							
		ndividual								
		ndividual Passenger			Citations Issued	Sex				
	Ļ	AUTNUM BRANDT			0	FEMALE				
_	INDIVIDUAL				Date of Birth	Race WHITE				
	Ī	Address S4916 GOLF COURSE RD ROCK SPRINGS, WI 53961, US			Driver License Number	er				
	N									
	Saf	ety Equipment	On Duty Cr	ash		Safety Equipment				
		Row		Seat Pos	sition	SHOULDER & LAP BELT				
		02 - SECOND ROW Helmet Use		07 - LE	FT	Helmet Compliance				
		Heimet Use				Heimet Compilance				
		Eye Protection				Tint Compliance				
က	013	Ir	njury Seve	rity		Airbag				
03	9	Injury N	IO APPA	RENT IN	IJURY	NON DEPLOYED		I Transad/Extrinated		
		Ejected NOT EJECTED	-		TED/NOT APPL	ICABLE		Trapped/Extricated NOT TRAPPED		
		Medical Transport				EMS Agency Identifie	r	EMS Run #		
		NOT TRANSPORTE Hospital	:D			Date of Death		Time of Death		
		,								
		Distracted By	Distracted E	By Source						
		Distracted By Action								
		Non Motorist	Striking Uni	it #	Location					
		Prior Action								
		,								

Form DT4000

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Crash Date 07/01/2023 Crash Time 01:05 PM

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/01/2023

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		Action									
	INDIVIDUAL										
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	9										
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	_										
		Action Other						To/From School			
			Suspected	Alcohol Use	Suspected Drug Use						
	L	Orug & Alcohol	NO		NO						
		Alcohol Test Given		Alcohol Test Typ	oe		Alcohol Test Results				
		TEST NOT GIVEN									
		Drug Test Given		Drug Test Type		Drug Test Results	<u> </u>				
		TEŠT NOT GIVEN				9					
_	က	Drug Type									
03	013	5 71	רי ט								
		Individual Condition									
		ADDEADED NODM									
		APPEARED NORM	IAL								
		ndividual									
		Passenger AVERY BRANDT			Citations Issued	Sex					
	7	AVENT BINARDI			0	FEMALE					
_	INDIVIDUAL				Date of Birth	Race WHITE					
L N	\exists	Address			Driver License Numbe	ar .					
5		S4916 GOLF COURSE RD ROCK SPRINGS, WI 53961, US			Driver License Number	:1					
	Z										
	l		On Duty Cı	rash	Safety Equipment						
	Saf	ety Equipment	o but, o.		Culcty Equipment						
		Row		Seat Position	SHOULDER & LAF	PRFLT					
		02 - SECOND ROW	,	08 - MIDDLE	0110025211 0 27 11	5					
		Helmet Use		Helmet Compliance							
		nemerose		Heilier Compilance							
		Eye Protection			Tint Compliance	Tint Compliance					
		,									
_	4		Injury Seve	erity	Airbag						
93	014	Injury	NO APPA	ARENT INJURY	NON DEPLOYED						
		Ejected	E	jection Path			Trapped/Extricated				
		NOT EJECTED	N	OT EJECTED/NOT APF	LICABLE		NOT TRAPPED				
		Medical Transport	I		EMS Agency Identifier	-	EMS Run #				
		NOT TRANSPORTI	ED								
		Hospital			Date of Death		Time of Death				
		D	Distracted	By Source	1		1				
		Distracted By									
		Distracted By Action									
		Non Mataria	Striking Un	it # Location							
		Non Motorist									
		Prior Action									

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/01/2023

	_							, ,	
		Action							
	INDIVIDUAL								
\vdash)								
LNO									
\supset	\leq								
	Z								
		Action Other						To/From School	
			Suspected	Alcohol Use	Suspected Drug Use				
	L	Orug & Alcohol	NO		NO				
		Alcohol Test Given		Alcohol Test Typ	pe		Alcohol Test Results		
		TEST NOT GIVEN							
		Drug Test Given		Drug Test Type		Drug Test Results	3		
		TEŠT NOT GIVEN				Ŭ			
~	4	Drug Type							
03	014	- זני פ -י-							
		Individual Condition							
		ADDEADED NODM	A.1						
		APPEARED NORM	AL						
		ndividual							
		Passenger ASHLYN BRANDT			Citations Issued	Sex			
	7	AGRETA BRANDI			0	FEMALE			
	INDIVIDUAL				Date of Birth	Race WHITE			
	9				B: 1: N 1				
5		Address S4916 GOLF COURSE RD ROCK SPRINGS, WI 53961,US			Driver License Number	er			
	Ξ								
		, , , , , , , , , , , , , , , , , , , ,							
			On Duty Cr	ra ah	0.64.5				
	Sat	On Duty Crash fety Equipment			Safety Equipment				
	-			T	SHOULDER & LAP BELT				
		Row		Seat Position	SHOULDER & LA	PBELI			
		02 - SECOND ROW		09 - RIGHT					
		Helmet Use		Helmet Compliance					
		Eye Protection			Tint Compliance				
	ا م		njury Seve	rity.	Airbag				
03	015	Iniurv	NO ADDA	RENT INJURY	NON DEPLOYED				
	o,	Finated	NU APPA	ection Path	NON DEPLOTED		Trapped/Extricated		
		NOT EJECTED	I -	OT EJECTED/NOT APF	NI ICABI E		NOT TRAPPED		
		Medical Transport	IN	OT EJECTED/NOT APP			EMS Run #		
		NOT TRANSPORTE	-n		EMS Agency Identifie	:1	EIVIS Ruff #		
		Hospital	-0		Date of Death		Time of Death		
		Поэрна			Date of Death		Time of Death		
		Ī	Distracted I	By Source					
		Distracted By	Sion acted 1	5, 500100					
		Distracted By Action							
		2.00 dottod by Auton							
			Striking Un	it # Location					
		Non Motorist		25041011					
		Prior Action							

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/01/2023

UNIT	INDIVIDUAL	Action					T-War Orbari
		Action Other					To/From School
	L	Drug & Alcohol NO	se	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	I	
03	015	Drug Type					
		Individual Condition APPEARED NORMAL					