23-07352

WISCONSIN MOTOR VEHICLE CRASH REPORT

Document Number Override Primary Crash Document # Agency Crash Number Investigating Office//Deputy Crash Date Crash Time Date Arrived Time Arrived Iter Arrived Crash Date Crash Time Date Arrived Time Arrived Iter Arrived Date Notified Time Notified Otal Killed Total Killed Otal Killed On Emergency Hit and Run Lane Closure Work Zone Trailer or Towed Reporting On Emergency Hit and Run Lane Closure Work Zone Trailer or Towed Reporting On Emergency Hit and Run Lane Closure Work Zone Trailer or Towed Reporting Government Property Active School Zone School Bus Related Tags V Reportable DTA000 (STANDARD CRASH) Amended Secondary Crash Type Dtable Crash Type Photos By Plate Struction By StiD041 Shifflet Rd I I I I I StiD041 Shifflet Rd I I I I <t< th=""><th></th><th>Document Number Override</th><th>Duine and One als</th><th>D</th><th></th><th></th><th>Investigation</th><th>Officer/Deputy</th><th></th></t<>		Document Number Override	Duine and One als	D			Investigation	Officer/Deputy	
Crash Date Crash Time Date Arrived Time Arrived Date Notified Time Notified Total Units Total Injured Total Killed Date Notified Time Notified Total Units 00 00 00 On Emergency Hit and Run Lane Closure Work Zone Trailer or Towed Reporting Government Property Active School Zone School Bus Related Tags V Reportable DT4000 (STANDARD CRASH) Amended Secondary Dataram State Trailer or Towed Photos By Photos By Description State Trailer or By Additional Information		Document Number Overnde	Primary Crash	Document #					
07/11/2023 12:00 PM 07/11/2023 12:32 PM Date Notified Time Notified Total Units Total Injured 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 02 00 00 00 00 02 00 00 00 00 Active School Zone School Bus Related Tags NO Crash Type Amended Secondary Crash Dtagram Staffatter Photos By Diagram Staffatter Photos By DepUTY GREENWOOD Additional Information PHOTOS Additional		0 1 5 1	0 I T						00
Crash Type DT4000 (STANDARD CRASH) Amended Secondary Crash Description Image: Crash	5								
Crash Type DT4000 (STANDARD CRASH) Amended Secondary Crash Description Image: Crash									
Crash Type DT4000 (STANDARD CRASH) Amended Secondary Crash Description Image: Crash	?					nits			ed
Crash Type DT4000 (STANDARD CRASH) Amended Secondary Crash Description Image: Crash	5	07/11/2023	12:00 PM	1	02		00	00	-
Crash Type DT4000 (STANDARD CRASH) Amended Secondary Crash Description Image: Crash		On Emergency	it and Run	Lane Clos				or Towed	Reporting Threshold
Crash Type DT4000 (STANDARD CRASH) Amended Secondary Crash Description Image: Crash			Active S	chool Zone		Bus Related	Tags		
Diagram Reconstruction By S18041 SHIFFLET RD Photos By DEPUTY GREENWOOD DEPUTY GREENWOOD Additional Information PHOTOS		✓ Reportable	Crash Type DT4000 (STA	ANDARD CRASH	H)		Amenc	led	
STR041 SHIFFLET RD Photos By DEPUTY GREENWOOD Additional Information PHOTOS		Description							
								Additional Info	
			Rd						
I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.		↓ I, a sworn law enforcem	ent officer, agr	ree that I have n	ot addec	any CJIS data in t	his report.		

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6

UNIT

5

UNIT

WISCONSIN MOTOR VEHICLE CRASH REPORT

Locat										
					Latitude			Longit		
	SHIFFLET RD IN THE TOWN OF SPRING GREEN					43.169649749			8030712	
IN SAUK COUNTY					X Coordinate Y Coordinate 249613.21875 4784261.5					
		Structure Type								
					NO STRU	CTURE				
Crash	n Scene									
First Ha	rmful Event				First Harmf	ul Event	Location			
	R VEH IN TRANSPO	ORT			ON ROAD					
	of Collision				Light Condi DAYLIGH					
	RONT TO REAR urface Condition(s)				Roadway F					
DRY					, ,					
	ment Factor(s)									
Environment Factor(s) NONE					NONE					
Weather Condition(s) CLEAR										
					Relation To	Trafficw	21/			
Animal Type							AY - OTHER			
Crash Classification - Location					Crash Class	sification	- Jurisdiction			
PUBLIC PROPERTY							RISDICTION			
Tribal La	and				Access Cor NO CONT				Special Study	
	nterchange Area	Junction Location		Intersectio						
NO		NON-JUNCTION		NOTAN	INTERSEC	TION				
Unit Sta	Summary 💻		Vehicle Op	orating As C	lassification		Linit Turne			
IN TRA			C CLASS		lassification		Unit Type TRUCK			
Vehicle	-		0 01,000				Operating A	s Endors	ements	
STRAI	GHT TRUCK (INSE	RT TRUCK)								
Total Oc 1	ccs	Train/Bus # Recorded	Total # Cita 0	tions Issued		Total Tra 0	ailers	Total Ha	azMat Types	
- Insurance	ce?	Direction Of Travel	Pre CrashTire			Speed L	imit	Total La	anes	
YES		NORTHBOUND		25			2			
Most Ha	armful Event: Collision	With		Special Function NO SPECIAL FUNCTION			Emergency			
							NOT APPLICABLE Traffic Control Inoperative/Missing			
)L			NO		
TWO-WAY, NOT DIVIDED NO CONTRO Surface Type Road Curvature					Road Grade			Э		
BLACKTOP (BITUMINOUS) STRAIGH										
	us or HazMat		•							
NO										
	cense Plate Number		Diata Tura			St	Country of Is	cuanco		
	H17398		Plate Type	GHT TRUC		WI				
	ehicle Identification Nur	nber	Make			Year	Model			
	BNPF4CC2JE15627	78	MERCED	ES BENZ	:	2018	SPRINTER	2		
				Body Style			Bus Use			
6 88	Color Body Style						-			
6 88 CC W	olor /HI - WHITE	-	PK - PICI	KUP						
10 88 CC W I Ini	olor /HI - WHITE itial Contact Point			KUP					7 8 9 10 11	
CCE 01	olor /HI - WHITE		PK - PICI Vehicle Da	KUP	CORNER				7 8 9 10 11 6 10 12 12 12 5 4 3 2 1	

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		Towed Due To Damage				nicle Removed By					
		NOT TOWED				ERATOR					
		What Driver Was Doing BACKING			Vel	nicle Factors					
		Driver Prior Action Other				T APPLICABLI	=				
		Driver Prior Action Other					-				
		Driver Actions									
	щ	UNSAFE BACKING									
Ę	VEHICLE										
UNIT	Ξ										
	K										
		Owner Name				Owner Address					
		MJHK INC				2165 STONEH	AVEN DR				
0	01					SUN PRAIRIE	, WI 53590 ,US				
	ļ	Sequence Of Eve	ents			I					
	01	Event MOTOR VEH IN TRA		т							
	0										
	02	Event									
	~	Event									
	03										
	04	Event									
F		Policy Holder									
UNIT	Insurance Company PROTECTIVE-INS-CO					Drganization/Com MJHK INC	bany				
			•								
		Individual Driver				Citations Issued	Sex				
		GARRETT MCGRAW)	MALE				
	IAI	(608) 206-4411			[Date of Birth	Race				
F	NDIVIDUAL						WHITE				
UNIT	N	Address N2608 COUNTY ROAD V				Driver License Number					
	IN	LODI, WI 53555 , US				STATE: WISCO	NSIN COUNTRY: UN	IITED STATES			
		Or	n Duty Cr	ash	5	Safety Equipment					
	Sat	fety Equipment									
		Row		Seat Position	ę	SHOULDER & L	AP BELT				
		01 - FRONT ROW Helmet Use		07 - LEFT		Helmet Complianc					
		neimer üse									
		Eye Protection				Tint Compliance					
2	001			rity RENT INJURY		Airbag NON DEPLOYED					
		Ejected		ection Path		VON DEFLOTE	0	Trapped/Extricated			
		NOT EJECTED	-	OT EJECTED/NO		ABLE		NOT TRAPPED			
		Medical Transport			E	EMS Agency Ident	ifier	EMS Run #			
		NOT TRANSPORTED	D								
		Hospital			[Date of Death		Time of Death			
		Di	istracted I	By Source				1			
		Distracted By N	OT APP	LICABLE (NOT	DISTRACT	ED)					
		Distracted By Action									
		NOT DISTRACTED									

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Non Motorist	itriking Unit #	Location							
		Prior Action									
İ		Action									
.	IAI										
UNIT	Ĩ										
5	INDIVIDUAL										
	Z										
		Action Other							To/From School		
			uspected Alcohol		Suspected Drug Use						
	L	Drug & Alcohol	IO	Use	NO						
1		Alcohol Test Given		Alcohol Test Type	•		Alcohol Te:	st Results			
		TEST NOT GIVEN Drug Test Given		Drug Test Type	esults						
		TEST NOT GIVEN									
2	001	Drug Type									
	0										
Ì		Individual Condition									
		APPEARED NORM	AL.								
I	Unit Summary										
	Unit Status Vehicle Operating As Classification Unit Type										
		TRANSIT			CLASS		AUTOMO				
02		icle Type ORT) UTILITY VEHICLE					Operating <i>i</i>	As Endorser	nents		
		l Occs	Train/Bus # R	-	otal # Citations Issued	Tota 0	I Trailers		Mat Types		
ł		rance?	Direction Of T	navel 0	Pre CrashTire		ed Limit	0 Total Lan	es		
E	YES	5	SOUTHBOL		Mark	25		2			
UNIT		Harmful Event: Collisior			pecial Function IO SPECIAL FUNCTIO	N	Emergency NOT APP	Motor Vehi	icle Use		
		TOR VEH IN TRANSI	VORI		raffic Control		-		tive/Missing		
		D-WAY, NOT DIVIDE	ט		O CONTROL		NO		, J		
1		асе Туре			oad Curvature		Road Grad	е			
		KCKTOP (BITUMINO) k Bus or HazMat	JS)	s	STRAIGHT LEVEL						
	NO										
	· ·	Vehicle									
					Plate Type St		-	Country of Issuance			
		ANB6477 Vehicle Identification Number			AUT - AUTOMOBILE WI Make Year			UNITED STATES			
03	02	YV1SZ59HX411472			VOLVO		Year Model 2004 XC70				
1		Color			Body Style	_	Bus Use				
		GRY - GRAY			SW - STATIONWAGON /ehicle Damage	N					
E	CLE	Initial Contact Point 10 - LEFT SIDE FRO	DNT	Ì	enior Damaye				7 8 9 10 11		
	VEHICLE	Extent Of Damage			10 - LEFT SIDE FRON	т			6 12		
	Ž	DISABLING DAMAG							5 4 3 2 1		
		Towed Due To Damage NOT TOWED	2		/ehicle Removed By OPERATOR						
I				\`							

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		What Driver Was Doing		Vehicle Factors					
		GOING STRAIGHT		NOT APPLICABLE					
		Driver Prior Action Other							
		Driver Actions							
	щ	NO CONTRIBUTING ACTIO	N						
E	VEHICLE								
UNIT	H								
	K								
		Owner Name		Owner Addre	200				
		DARLA LEMKE		1583 ENGL		D DR			
02	02	(715) 525-1715		WOODRUF	F, WI 5	4568,US			
	ę	Sequence Of Events							
	01	Event MOTOR VEH IN TRANSPOR	RT						
	02	Event							
	03	Event							
		Event							
	04								
Ŀ	ļ	Policy Holder	T						
UNIT		Insurance Company SELECTIVE-INS-CO-OF-SO	Individual DARLA LEM	KF					
		Individual							
	1	Driver	Citations Issued Sex						
	_	DARLA LEMKE	0	-	FEMALE				
	INDIVIDUAL	(715) 525-1715	Date of Birth		Race WHITE				
UNIT	N	Address	Driver License Number						
	ND	1583 ENGLEWOOD DR WOODRUFF, WI 54568 , US	STATE: WISCONSIN COUNTRY: UNITED STATES						
	-	WOODROIT, WI 54500 , O	,						
		On Duty C	rash	Safety Equipment					
	Saf	fety Equipment							
	1	Row	Seat Position	SHOULDER & LAP BELT					
		01 - FRONT ROW	07 - LEFT	Helmet Compliance					
		Helmet Use							
		Eye Protection	Tint Compliance						
N	2	Injury Sev	Airbag						
02	002	Injury NO APP	NON DEPLOYED						
			jection Path	· · · · · · · · · · · · · · · · · · ·			Trapped/Extricated		
		NOT EJECTED N Medical Transport	IOT EJECTED/NOT APP	EMS Agency lo	lentifier		NOT TRAPPED EMS Run #		
	NOT TRANSPORTED			Eine Ageney is					
		Hospital		Date of Death	Date of Death		Time of Death		
		Distracted Pu	By Source						
		Distracted By Action	LICABLE (NUT DISTRA						
		NOT DISTRACTED	<u></u>						
		Non Motorist	hit # Location						

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		Prior Action						
		Action						
	UAL							
UNIT	INDIVIDUAL							
_	IND							
		Action Other						To/From School
	L	Drug & Alcohol	Suspected Alcohol Us	se	Suspected Drug Use			1
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	I		Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	3	
02	002	Drug Type						
		Individual Condition						
			MAL					