

6TL0CX0QC7  
23-08240

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 <b>23-08240</b>	Investigating Officer/Deputy <b>DEPUTY K. MCCARTY</b>	
Crash Date <b>07/31/2023</b>		Crash Time <b>06:17 PM</b>	Date Arrived <b>07/31/2023</b>	Time Arrived <b>06:47 PM</b>	
Date Notified <b>07/31/2023</b>		Time Notified <b>06:19 PM</b>	Total Units <b>01</b>	Total Injured <b>01</b>	Total Killed <b>00</b>
<input type="checkbox"/> On Emergency	<input 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 <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

<p>Diagram</p>	Reconstruction By
	Photos By <b>MCCARTY 9130</b>
	Additional Information <b>PHOTOS</b>

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

UNIT 1 WAS TRAVELING WESTBOUND ON CTH G THEN ONTO MERCER RD. OPERATOR OF VEHICLE WAS SEEN BY PASSENGER NOT WEARING SEATBELT. IT WAS ALSO REPORTED THE SPEED OF THE TRUCK WAS APPROXIMATELY 60 MPH. THE TRUCK IS BELIEVED TO HAVE FAILED TO STOP AT STOP SIGN ON MERCER RD TRAVELING WB PAST BIG HOLLOW RD DUE TO OCCUPANTS STATING THE TRUCK WENT OVER BUMP IN ROADWAY WHICH CAUSED OCCUPANTS TO SHIFT IN SEAT DUE TO NOT WEARING SEATBELT. NO OTHER BUMP IN ROAD LOCATED FROM MERCER RD TO DYKE RD. DRIVER SUSTAINED SUSPECTED MINOR BACK INJURY AS A RESULT OF ALSO NOT WEARING A SEATBELT, NOT STOPPING AT THE STOP SIGN, AND HITTING THE BUMP AT A HIGH RATE OF SPEED CAUSING HER TO SHIFT OUT OF SEAT AND NEAR FRONT PASSENGER. VEHICLE PULLED OVER ON MERCER RD NEAR DYKE RD AND THEY NOTIFIED EMS/LE REGARDING ACCIDENT. A YELLOW TOWEL WAS FOUND IN THE ROADWAY JUST WEST OF BIG HOLLOW RD ON MERCER RD THAT WAS CONFIRMED TO COME FROM THE BED OF THE INVOLVED VEHICLE. DRIVER WAS UNCOOPERATIVE WITH LAW ENFORCEMENT ON ANSWERING QUESTIONS REGARDING INVOLVEMENT. PARENTS NOTIFIED REGARDING CITATIONS. VEHICLE REMOVED BY FAMILY FRIEND

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## Location

ON MERCER RD 77 FT W OF BIG HOLLOW RD IN THE TOWN OF SPRING GREEN IN SAUK COUNTY	Latitude <b>43.206195263</b>	Longitude <b>-90.113526533</b>
	X Coordinate <b>247063.859375</b>	Y Coordinate <b>4788420.5</b>
	Structure Type <b>NO STRUCTURE</b>	

## Crash Scene

First Harmful Event <b>OTHER NON-COLLISION</b>	First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>DRY</b>	Roadway Factor(s) <b>RUT, HOLES, BUMPS</b>	
Environment Factor(s) <b>NONE</b>		
Weather Condition(s) <b>CLEAR</b>		
Animal Type	Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land	Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>

## Unit Summary

<b>UNIT</b>	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>TRUCK</b>		
	Vehicle Type <b>UTILITY TRUCK/PICKUP TRUCK</b>	Operating As Endorsements			
	Total Occs <b>5</b>	Train/Bus # Recorded	Total # Citations Issued <b>6</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>UNKNOWN</b>	Direction Of Travel <b>WESTBOUND</b>	<input type="checkbox"/> <b>Pre Crash Tire Mark</b>	Speed Limit <b>45</b>	Total Lanes <b>2</b>
	Most Harmful Event: Collision With <b>OTHER NON-COLLISION</b>	Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>	Traffic Control <b>STOP SIGN</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>	Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>				

<b>UNIT</b>	<b>Vehicle</b>				
	<b>VEHICLE</b>	License Plate Number <b>TL3066</b>	Plate Type <b>LTK - LIGHT TRUCK</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>1GTHK23265F971773</b>	Make <b>GM</b>	Year <b>2005</b>	Model <b>SIERRA</b>
		Color <b>BLK - BLACK</b>	Body Style <b>PK - PICKUP</b>		Bus Use
		Initial Contact Point <b>00 - NON-COLLISION</b>	Vehicle Damage		
Extent Of Damage <b>NO DAMAGE</b>	<b>00 - NO DAMAGE</b>				



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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By	
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>EXCEED SPEED LIMIT, SPEED TOO FAST/COND, FAILURE TO CONTROL, DISREGARDED STOP SIGN, OPERATED MOTOR VEHICLE IN AGGRESSIVE/RECKLESS MANNER, OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER</b>			
01 01	Owner Name <b>MYA HARWOOD (608) 588-5886</b>		Owner Address <b>E4603 HORSESHOE RD SPRING GREEN, WI 53588 , US</b>	
	<b>Sequence Of Events</b>			
01 02 03 04	Event <b>OTHER NON-COLLISION</b>			
	Event			
	Event			
	Event			
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>MYA HARWOOD (608) 588-5886</b>		Citations Issued <b>2</b>	Sex <b>FEMALE</b>
	Address <b>E4603 HORSESHOE RD SPRING GREEN, WI 53588 , US</b>		Date of Birth	Race <b>WHITE</b>
	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>			
01 001	<b>Safety Equipment</b>		On Duty Crash	
	Row <b>01 - FRONT ROW</b>		Seat Position <b>07 - LEFT</b>	
	Helmet Use		Safety Equipment <b>NONE USED - VEHICLE OCCUPANT</b>	
	Eye Protection		Helmet Compliance	
01 001	<b>Injury</b>		Airbag	
	Injury Severity <b>SUSPECTED MINOR INJURY</b>		<b>NON DEPLOYED</b>	
	Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
	Medical Transport <b>EMS GROUND</b>		EMS Agency Identifier <b>6001288</b>	EMS Run # <b>23A125</b>
Hospital <b>UPLAND HILLS HEALTH</b>		Date of Death	Time of Death	
<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		
Distracted By Action <b>NOT DISTRACTED</b>				
<b>Non Motorist</b>		Striking Unit #	Location	

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UNIT	INDIVIDUAL	Prior Action				
		Action				
		Action Other			To/From School	
01	001	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>	
		Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type	Alcohol Test Results	
		Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type	Drug Test Results	
		Drug Type				
		Individual Condition <b>NOT OBSERVED</b>				
		<b>Individual</b>				
		Passenger <b>JONATHAN REICCHHOFF</b>		Citations Issued <b>1</b>	Sex <b>MALE</b>	
				Date of Birth	Race <b>WHITE</b>	
		Address <b>S13009 SHIFFLET RD #63 SPRING GREEN, WI 53588 , US</b>		Driver License Number		
		01	002	<b>Safety Equipment</b>		On Duty Crash
Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b>			<b>NONE USED - VEHICLE OCCUPANT</b>		
Helmet Use				Helmet Compliance		
Eye Protection				Tint Compliance		
<b>Injury</b>				Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>	
Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>			Trapped/Extricated <b>NOT TRAPPED</b>		
Medical Transport <b>NOT TRANSPORTED</b>				EMS Agency Identifier	EMS Run #	
Hospital				Date of Death	Time of Death	
<b>Distracted By</b>				Distracted By Source		
Distracted By Action						
01	002	<b>Non Motorist</b>		Striking Unit #	Location	
		Prior Action				

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UNIT	INDIVIDUAL	Action		
		Action Other		To/From School
01	002	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
		Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results
		Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results
		Drug Type		
		Individual Condition <b>APPEARED NORMAL</b>		
UNIT	INDIVIDUAL	<b>Individual</b>		
		Passenger <b>NEVAEH COLLINS</b>	Citations Issued <b>1</b>	Sex <b>FEMALE</b>
			Date of Birth	Race <b>WHITE</b>
		Address <b>374 OAK ST ARENA, WI 53503 , US</b>	Driver License Number	
01	003	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment <b>NONE USED - VEHICLE OCCUPANT</b>
		Row <b>02 - SECOND ROW</b>	Seat Position <b>07 - LEFT</b>	
		Helmet Use		Helmet Compliance
		Eye Protection		Tint Compliance
		<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
		Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #	
Hospital		Date of Death	Time of Death	
<b>Distracted By</b>	Distracted By Source			
Distracted By Action				
<b>Non Motorist</b>	Striking Unit #	Location		
Prior Action				

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UNIT INDIVIDUAL	Action		
	Action Other		To/From School
	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
	Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results
	Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results
	Drug Type		
	Individual Condition <b>APPEARED NORMAL</b>		
	<b>Individual</b>		
	Passenger <b>CHANCE JAKUBOWSKI</b>	Citations Issued <b>1</b>	Sex <b>MALE</b>
	Date of Birth		Race <b>WHITE</b>
Address <b>7787 HELENA RD ARENA, WI 53503 , US</b>		Driver License Number	
UNIT INDIVIDUAL	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment <b>NONE USED - VEHICLE OCCUPANT</b>
	Row <b>02 - SECOND ROW</b>	Seat Position <b>08 - MIDDLE</b>	
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
	Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier
	Hospital		EMS Run #
	Date of Death		Time of Death
	<b>Distracted By</b>	Distracted By Source	
Distracted By Action			
<b>Non Motorist</b>	Striking Unit #	Location	
Prior Action			

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UNIT INDIVIDUAL	Action		
	Action Other		To/From School
	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
	Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results
	Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results
	Drug Type		
	Individual Condition <b>APPEARED NORMAL</b>		
	<b>Individual</b>		
	Passenger <b>JAXSON JAKUBOWSKI</b>	Citations Issued <b>1</b>	Sex <b>MALE</b>
	Date of Birth		Race <b>WHITE</b>
Address <b>7787 HELENA RD ARENA, WI 53503 , US</b>		Driver License Number	
UNIT INDIVIDUAL	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment <b>NONE USED - VEHICLE OCCUPANT</b>
	Row <b>02 - SECOND ROW</b>	Seat Position <b>09 - RIGHT</b>	
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
	Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier	EMS Run #
Hospital		Date of Death	
Time of Death			
UNIT INDIVIDUAL	<b>Distracted By</b> Distracted By Source		
	Distracted By Action		
	<b>Non Motorist</b>	Striking Unit #	Location
	Prior Action		

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UNIT	INDIVIDUAL	Action				
		Action Other			To/From School	
	01	005	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
			Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type	Alcohol Test Results
			Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type	Drug Test Results
			Drug Type			
			Individual Condition <b>APPEARED NORMAL</b>			
			<b>Violations</b>			
	01	06	UTC Number <b>BG022924</b>	Issue To? <b>001</b>	Statute Number <b>346.62(2)</b>	Description <b>RECKLESS DRIVING-ENDANGER SAFETY</b>
			UTC Number <b>BG022925</b>	Issue To? <b>001</b>	Statute Number <b>347.48(2m)(b)</b>	Description <b>VEHICLE OPERATOR FAIL/WEAR SEAT BELT</b>
UTC Number <b>BG022926</b>			Issue To? <b>003</b>	Statute Number <b>347.48(2m)(d)</b>	Description <b>RIDE IN VEHICLE W/O WEARING SEAT BELT</b>	
UTC Number <b>BG022921</b>			Issue To? <b>004</b>	Statute Number <b>347.48(2m)(d)</b>	Description <b>RIDE IN VEHICLE W/O WEARING SEAT BELT</b>	
UTC Number <b>BG022922</b>			Issue To? <b>005</b>	Statute Number <b>347.48(2m)(d)</b>	Description <b>RIDE IN VEHICLE W/O WEARING SEAT BELT</b>	
UTC Number <b>BG022923</b>			Issue To? <b>002</b>	Statute Number <b>347.48(2m)(d)</b>	Description <b>RIDE IN VEHICLE W/O WEARING SEAT BELT</b>	