

6TL0D0GSLG  
23-08427

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

6TL0D0GSLG

Document Number Override		Primary Crash Document #	Agency Crash Number <b>23-08427</b>	Investigating Officer/Deputy <b>DEPUTY G. AKERS</b>	
Crash Date <b>08/04/2023</b>		Crash Time <b>10:27 PM</b>	Date Arrived <b>08/04/2023</b>	Time Arrived <b>10:27 PM</b>	
Date Notified <b>08/04/2023</b>		Time Notified <b>10:27 PM</b>	Total Units <b>02</b>	Total Injured <b>00</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

Diagram	Reconstruction By
	Photos By <b>GA</b>
	Additional Information <b>PHOTOS</b>

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

V1 WAS MAKING A LEFT HAND TURN, FAILED TO YIELD TO V2 WHO WAS TRAVELING EASTBOUND. V2 WENT INTO THE DITCH CAUSING MINOR DAMAGE TO THE UNDERCARRIAGE. NO INJURIES REPORTED. D1 WAS CITED.

6TL0D0GSLG  
23-08427

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

Location

ON USH12 WB 908 FT N OF USH12 WB IN THE TOWN OF PRAIRIE DU SAC IN SAUK COUNTY	Latitude <b>43.295546151</b>	Longitude <b>-89.758962296</b>
	X Coordinate <b>276197.0625</b>	Y Coordinate <b>4797332</b>
	Structure Type	

Crash Scene

First Harmful Event <b>DITCH</b>	First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DARK/LIGHTED</b>	
Road Surface Condition(s) <b>DRY</b>	Roadway Factor(s)  <b>NONE</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>DRIVEWAY ACCESS-RELATED</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>AUTOMOBILE</b>	
	Vehicle Type <b>PASSENGER VAN</b>	Operating As Endorsements			
	Total Occs <b>2</b>	Train/Bus # Recorded	Total # Citations Issued <b>1</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>YES</b>	Direction Of Travel <b>EASTBOUND</b>	<input type="checkbox"/> <b>Pre CrashTire Mark</b>	Speed Limit <b>55</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>DIVIDED HWY W/O TRAFFIC BARRIER</b>	Traffic Control <b>NO CONTROL</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>KJJ197</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>MN</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>2C7WDGBG6JR159777</b>	Make <b>DODGE</b>	Year <b>2018</b>	Model <b>GRAND CARA</b>
		Color <b>RED - RED</b>	Body Style <b>VN - VAN</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>				



6TL0D0GSLG

23-08427

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

UNIT	VEHICLE	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OPERATOR</b>			
		What Driver Was Doing <b>LEFT TURN</b>	Vehicle Factors			
		Driver Prior Action Other	<b>NOT APPLICABLE</b>			
		Driver Actions <b>UNKNOWN</b>				
01	01	Owner Name <b>JOYCE MOECHNIG (651) 380-2933</b>	Owner Address <b>67298 265TH AVE LAKE CITY, MN 55041 4739, US</b>			
<b>Sequence Of Events</b>						
UNIT	VEHICLE	01	Event <b>OTHER NON-COLLISION</b>			
		02	Event			
		03	Event			
		04	Event			
<b>Policy Holder</b>						
UNIT	INDIVIDUAL	Insurance Company <b>STATE-FARM-GENERAL-INS-CO</b>	Individual <b>JOYCE MOECHNIG</b>			
		Driver <b>JOYCE MOECHNIG (651) 380-2933</b>	Citations Issued <b>1</b>	Sex <b>FEMALE</b>		
		Address <b>67298 265TH AVE LAKE CITY, MN 55041 4739, US</b>	Date of Birth	Race		
UNIT	INDIVIDUAL	001	Driver License Number <b>STATE: MINNESOTA COUNTRY: UNITED STATES</b>			
		<b>Safety Equipment</b>		On Duty Crash		
		Safety Equipment <b>SHOULDER &amp; LAP BELT</b>			Row <b>01 - FRONT ROW</b>	
		Seat Position <b>07 - LEFT</b>			Helmet Use	
		Helmet Compliance			Eye Protection	
		Tint Compliance			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 <b>UNKNOWN</b>		Distracted By Action <b>UNKNOWN</b>				

WISCONSIN MOTOR VEHICLE CRASH REPORT

<b>UNIT</b>	<b>Non Motorist</b>		Striking Unit #	Location			
	Prior Action						
	Action						
	Action Other				To/From School		
<b>01</b>	<b>001</b>	<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>JOHN MOECHNIG (651) 380-2934</b>			Citations Issued <b>0</b>	Sex <b>MALE</b>	
		Address <b>67298 265TH AVE LAKE CITY, MN 55041 , US</b>			Date of Birth	Race <b>WHITE</b>	
		Driver License Number			<b>STATE: MINNESOTA COUNTRY: UNITED STATES</b>		
		<b>01</b>	<b>002</b>	<b>Safety Equipment</b>		On Duty Crash	
Safety Equipment <b>SHOULDER &amp; LAP BELT</b>							
Row <b>01 - FRONT ROW</b>	Seat Position <b>10 - UNKNOWN SE</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			

6TL0D0GSLG  
23-08427

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

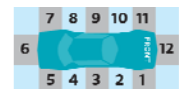
SAUK COUNTY SHERIFFS DEPARTMENT  
1300 LANGE COURT  
BARABOO, WI 53913  
(608) 356-4895

UNIT	INDIVIDUAL	Prior Action			
		Action			
01	002	Action Other			To/From School
		<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>	
01	002	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>			
01	001	<b>Violations</b>			
		UTC Number <b>BG945142</b>	Issue To? <b>001</b>	Statute Number <b>346.18(2)</b>	Description <b>FAIL/YIELD WHILE MAKING LEFT TURN</b>

**Unit Summary**

UNIT	02	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>		
		Vehicle Type <b>PASSENGER CAR</b>	Operating As Endorsements				
UNIT	02	Total Occs <b>3</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
		Insurance? <b>YES</b>	Direction Of Travel <b>EASTBOUND</b>	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</b>	
		Most Harmful Event: Collision With <b>DITCH</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
		Traffic Way <b>DIVIDED HWY W/O TRAFFIC BARRIER</b>		Traffic Control <b>NO CONTROL</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>					

UNIT	02	<b>Vehicle</b>			
		License Plate Number <b>AJY2121</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>1G1AL55FX67817359</b>	Make <b>CHEVROLET</b>	Year <b>2006</b>	Model <b>COBALT</b>
		Color <b>ONG - ORANGE</b>	Body Style <b>SD - SEDAN</b>		Bus Use
		Initial Contact Point <b>14 - UNDERCARRIAGE</b>	Vehicle Damage <b>14 - UNDERCARRIAGE</b>		
UNIT	VEHICLE	Extent Of Damage <b>MINOR DAMAGE</b>			



6TL0D0GSLG

23-08427

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>	
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
02	Owner Name <b>JACKSON STOCK (608) 770-3820</b>		Owner Address <b>802 21ST STREET PRAIRIE DU SAC, WI 53578 , US</b>	
	<b>Sequence Of Events</b>			
01 02 03 04	Event <b>MOTOR VEH IN TRANSPORT</b>			
	Event <b>DITCH</b>			
	Event			
	Event			
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>PROGRESSIVE-CASUALTY-INS-CO</b>		Individual <b>JACKSON STOCK</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>JACKSON STOCK (608) 770-3820</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
	Address <b>802 21ST ST PRAIRIE DU SAC, WI 53578 , US</b>		Date of Birth	Race <b>WHITE</b>
	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>			
02 003	<b>Safety Equipment</b>		On Duty Crash	
	Row <b>01 - FRONT ROW</b>		Seat Position <b>07 - LEFT</b>	Safety Equipment <b>SHOULDER &amp; LAP BELT</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 <b>NOT APPLICABLE (NOT DISTRACTED)</b>		
Distracted By Action <b>NOT DISTRACTED</b>				

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT	INDIVIDUAL	<b>Non Motorist</b>		Striking Unit #	Location		
		Prior Action					
		Action					
02	003	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>KELSEY BRODNICKI</b> <b>(608) 800-7112</b>			Citations Issued <b>0</b>	Sex <b>FEMALE</b>	
		Address <b>816 JEFFERSON ST</b> <b>SAUK CITY, WI 53583 , US</b>			Date of Birth	Race <b>WHITE</b>	
Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>			Safety Equipment <b>SHOULDER &amp; LAP BELT</b>				
02	004	<b>Safety Equipment</b>		On Duty Crash			
		Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b>		Helmet Compliance		
		Helmet Use			Tint Compliance		
		Eye Protection			Airbag <b>NON DEPLOYED</b>		
		<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				

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT	INDIVIDUAL	Prior Action		
		Action		
		Action Other	To/From School	
02	004	<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>GRADY BRODNICKI</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>
			Date of Birth	Race <b>WHITE</b>
		Address <b>1027 EAGLEVIEW COURT PRAIRIE DU SAC, WI 53578 , US</b>	Driver License Number	
02	005	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment <b>SHOULDER &amp; LAP BELT</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	
<b>Distracted By</b>		Distracted By Source		
Distracted By Action				
<b>Non Motorist</b>		Striking Unit #	Location	
Prior Action				



WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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>					
		02	005				