6TL0D7W16C 23-09773

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash Documer	U	Agency Crash Number 23-09773		Investigating Officer/Deputy DEPUTY K. MUELLER				
	Crash Data	Crook Time		Date Arrived				ne Arrived		
29	Crash Date		Date	Anived		Time	Anved			
7	Date Notified	Time Notified	Tota	l Units		Total	Injured	Total Killed	d	
⋝	09/06/2023	02:03 PM	01	01		00		00	1	
.0D7W16	On Emergency Hi	Emergency Hit and Run Lane Closure		□ w	ork Zone	rk Zone		owed	Reporting Threshold	
6TL	Government Active School Zone			School Bus Related Ta			ags			
9	Reportable	ED ANIMAL W	ANIMAL W/ NO INJURY			Amended		Secondary Crash		
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.									
i	Location									
Ī	ON STH60 EB				Latitude	Latitude Longitude				
	0.50 MI E				43.1979	5516	-89.9233			
	OF BADGER RD									
	IN THE TOWN OF TROY				X Coordin			Y Coordinate		
	IN SAUK COUNTY				262484.4	4375		478694	7.5	
					Structure	Туре				
					NO STR	UCTURE				
	Creek Seens									
	Crash Scene									
	First Harmful Event				First Harn	nful Event Lo	cation			
	NON DOMESTICATED ANIM	AL (ALIVE)			ON ROA	DWAY				
Ì	Manner of Collision					Light Condition				
	00 - NO COLLISION W/VEHIC	CLE IN TRANSPORT								
ŀ	Road Surface Condition(s)				Roadway	Factor(s)				
	. toda canado conamento				- todamay	. 4010.(0)				
ŀ	Environment Factor(s)									
	(-)									
ŀ	Weather Condition(s)									
ŀ	Animal Type				Relation 1	Relation To Trafficway				
	DEER					TRAFFICWAY - ON ROAD				
ŀ					Crash Classification - Jurisdiction					
	Crash Classification - Location					NO SPECIAL JURISDICTION				
Į	PUBLIC PROPERTY									
	Tribal Land					Access Control			Special Study	
	Unit Summary ————————————————————————————————————									
Ī	Unit Status		Vehicle O	perating As	Classification	1	Unit Type			
				D CLASS				AUTOMOBILE		
ŀ	Vehicle Type						Operating As Endorsements		monto	
0	•					Operating As Endorsements				
0	(SPORT) UTILITY VEHICLE									
	Total Occs Train/Bus # Recorded		Total # Cit	Total # Citations Issued				Total Haz	Mat Types	
	2		0		[(0			
İ	Insurance?	Direction Of Travel	Pre CrashTire		e Speed Lin		nit Total Lanes		es	
⊢ l	YES WESTBOUND Mark				-					
LIND	Most Harmful Event: Collision With Special Function					I	Emergency Motor Vehicle Use			
⊃	NON DOMESTICATED ANIMAL (ALIVE)			CIAL FUN	CTION	TION		NOT APPLICABLE		
ļ		AL (ALIVE)	Traffic Co					Traffic Control Inoperative/Missing		
	Traffic Way			HUOI				Trailic Control Inoperative/Missing		
Į							<u> </u>			
	Surface Type			Road Curvature				Road Grade		

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	Truc	k Bus or HazMat							
	,	Vehicle							
	VEHICLE 01	License Plate Number	Plate Type	St	Country of Issuance				
		TS1672 Vehicle Identification Number	LTK - LIGHT TRUCK	WI Year	UNITED STATES Model				
01		4JGDA2EB3EA357870	MERCEDES BENZ	2014	ML				
		Color	Body Style		Bus Use				
		BLK - BLACK Initial Contact Point	UT - SPORT UTILITY VEHICLE Vehicle Damage						
⊨		12 - FRONT	O1 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT Vehicle Removed By						
UNIT		Extent Of Damage							
		DISABLING DAMAGE							
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE							
		What Driver Was Doing	Vehicle Factors						
		Driver Prior Action Other							
		Driver Actions							
_	쁘	NO CONTRIBUTING ACTION							
L	VEHICLE								
_ر	N N								
		Owner Name	Owner Address						
2	9								
<u></u>		Policy Holder Insurance Company	Trusta i						
LNO		STATE-FARM-GENERAL-INS-CO	Individual THOMAS LA BUDD	E					
		ndividual							
	INDIVIDUAL	Driver	Citations Issued						
		THOMAS LA BUDDE (608) 574-7820	0 MALE Date of Birth Race WHITE						
_									
L N N		Address	Driver License Number						
_		S11577 PECK RD SPRING GREEN, WI 53588 , US	STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sa	On Duty Crash fety Equipment	Safety Equipment						
	Sal		SHOULDER & LAP BELT						
	001	Row Seat Position	SHOULDER & LAP BELT						
		Helmet Use	Helmet Compliance						
		Eye Protection	Tint Compliance						
		Lye i lotection	This Compilative						
01		Injury Severity NO APPARENT INJURY	Airbag						
	J	Ejected Ejection Path	Trapped/Extricated						
		Medical Transport NOT TRANSPORTED	EMS Agency Identifier		EMS Run #				
		Hospital	Date of Death		Time of Death				

Crash Time 02:03 PM

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Crash Date 09/06/2023

Crash Time 02:03 PM

		Distracted By	Distracted By Source	,				
		Distracted By Action						
		Non Motorist	Striking Unit #	Location				
		Prior Action						
		Action						
_	UAL							
UNIT	INDIVIDUAL							
	Ξ							
		Action Other						To/From School
	Ĺ	Drug & Alcohol NO			Suspected Drug Use NO			
		Alcohol Test Given Alcohol Test Type TEST NOT GIVEN			Alcohol Test Results			
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Result		,	
2	001	Drug Type						
		Individual Condition						
APPEARED NORMAL								