

WISCONSIN MOTOR VEHICLE CRASH REPORT

6TL0DQPGFM

Document Number Override, Primary Crash Document #, Agency Crash Number 23-09913, Investigating Officer/Deputy DEPUTY B. SONN, Crash Date 09/09/2023, Crash Time 08:30 PM, Date Arrived 09/09/2023, Time Arrived 08:30 PM, Date Notified 09/09/2023, Time Notified 08:30 PM, Total Units 02, Total Injured 00, Total Killed 00, On Emergency, Hit and Run, Lane Closure, Work Zone, Trailer or Towed, Reporting Threshold, Government Property, Active School Zone, School Bus Related NO, Tags, Reportable, Crash Type DT4000 (STANDARD CRASH), Amended, Secondary Crash

Description

Diagram showing intersection of County HH and County H. Includes a north arrow, a stop sign, and vehicle positions labeled 01 and 02. Arrows indicate traffic flow. Text: Reconstruction By, Photos By 9104, Additional Information PHOTOS, DASH CAMERA VIDEO, BODY CAMERA VIDEO. \*\*NOT TO SCALE\*\*

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

I, DEPUTY BRANDON SONN, OF THE SAUK COUNTY SHERIFF'S OFFICE, WAS TRAVELING EASTBOUND ON CTH H NEAR CTH HH. I OBSERVED VEHICLE 1 INDICATED A LEFT HAND TURN, VIA TURN SIGNAL, ONTO CTH HH FROM CTH H, EASTBOUND. VEHICLE 1 DID NOT COMPLETE THE TURN AND STOPPED WITH THE BACK END OF THE VEHICLE PARTIALLY IN THE ROADWAY FOR WESTBOUND TRAFFIC ON CTH H. VEHICLE 2 ATTEMPTED AN EVASIVE MANEUVER TO AVOID THE VEHICLE THAT SUDDENLY STOPPED IN THE TRAFFIC LANE. I THEN MADE AN EVASIVE MANEUVER TO AVOID UNIT 2 FROM STRIKING MY SQUAD. I PASSED BOTH UNIT 1 AND UNIT 2, AND I HEARD THE SOUND OF TWO VEHICLES COLLIDING BEHIND ME. I ACTIVATED MY EMERGENCY LIGHTS AND PULLED BEHIND UNIT 1 IN THE WESTBOUND RIGHT TURN LANE OF CTH H, IN THE INTERSECTION OF CTH H AND CTH HH. CONTACT MADE WITH ALL OCCUPANTS IN BOTH VEHICLES. ALL PARTIES WERE WEARING THEIR SHOULD/LAP SAFETY BELT. NO PARTIES CLAIMED ANY INJURIES NOR DID THEY WANT ANY RESPONSE FROM EMS. DRIVER OF UNIT 2 REPORTED THE VEHICLE WAS CONDUCTING A LEFT TURN ONTO CTH HH AND THEN SUDDENLY STOPPED IN THE MIDDLE OF THE WESTBOUND LANE. DRIVER OF UNIT 2 ATTEMPTED TO AVOID A COLLISION, BUT WAS NOT ABLE TO COMPLETELY AVOID UNIT 1. DRIVER OF UNIT 1 REPORTED AN ATTEMPT TO TURN NORTHBOUND ONTO CTH HH FROM CTH H, BUT MISSED THE TURN AND TURNED IN TOO LATE. DRIVER OF UNIT 1 CITED FOR STOPPING IN AN INTERSECTION. INSURANCE AND CONTACT INFORMATION COLLECTED AND ATTACHED TO CASE. THERE ARE PHOTOGRAPHS, DASH CAMERA VIDEO, AND BODY WORN CAMERA VIDEO AVAILABLE.

WISCONSIN MOTOR VEHICLE  
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Location

|  |                                    |                                   |
|--|------------------------------------|-----------------------------------|
| ON CTHH EB<br>74 FT E<br>OF CTHHH NB<br>IN THE TOWN OF DELLONA<br>IN SAUK COUNTY | Latitude<br><b>43.593676289</b>    | Longitude<br><b>-89.942037924</b> |
|  | X Coordinate<br><b>262515.6875</b> | Y Coordinate<br><b>4830951</b>    |
|  | Structure Type                     |                                   |

Crash Scene

|   |   |  |
|---|---|--|
| First Harmful Event<br><b>MOTOR VEH IN TRANSPORT</b>      | First Harmful Event Location<br><b>ON ROADWAY</b>                     |  |
| Manner of Collision<br><b>01 - ANGLE</b>                  | Light Condition<br><b>DARK/UNLIT</b>                                  |  |
| Road Surface Condition(s)<br><b>DRY</b>                   | Roadway Factor(s)<br><br><b>NONE</b>                                  |  |
| Environment Factor(s)<br><b>NONE</b>                      |   |  |
| Weather Condition(s)<br><b>CLEAR</b>                      |   |  |
| Animal Type   | Relation To Trafficway<br><b>TRAFFICWAY - ON ROAD</b>                 |  |
| Crash Classification - Location<br><b>PUBLIC PROPERTY</b> | Crash Classification - Jurisdiction<br><b>NO SPECIAL JURISDICTION</b> |  |
| Tribal Land   | Access Control<br><b>NO CONTROL</b>                                   | Special Study                              |
| Within Interchange Area<br><b>NO</b>                      | Junction Location<br><b>INTERSECTION</b>                              | Intersection Type<br><b>T-INTERSECTION</b> |

Unit Summary

|             |   |   |  |  |                                |
|-------------|---|---|--|--|--------------------------------|
| <b>UNIT</b> | Unit Status<br><b>IN TRANSIT</b>                                    | Vehicle Operating As Classification<br><b>D CLASS</b> | Unit Type<br><b>AUTOMOBILE</b>                     |  |                                |
|             | Vehicle Type<br><b>(SPORT) UTILITY VEHICLE</b>                      | Operating As Endorsements                             |  |  |                                |
|             | Total Occs<br><b>5</b>  | Train/Bus # Recorded                                  | Total # Citations Issued<br><b>1</b>               | Total Trailers<br><b>0</b>                           | Total HazMat Types<br><b>0</b> |
|             | Insurance?<br><b>YES</b>  | Direction Of Travel<br><b>NORTHBOUND</b>              | <input type="checkbox"/> <b>Pre CrashTire Mark</b> | Speed Limit<br><b>55</b>                             | Total Lanes<br><b>2</b>        |
|             | Most Harmful Event: Collision With<br><b>MOTOR VEH IN TRANSPORT</b> | Special Function<br><b>NO SPECIAL FUNCTION</b>        |  | Emergency Motor Vehicle Use<br><b>NOT APPLICABLE</b> |                                |
|             | Traffic Way<br><b>TWO-WAY, NOT DIVIDED</b>                          | Traffic Control<br><b>NO CONTROL</b>                  |  | Traffic Control Inoperative/Missing<br><b>NO</b>     |                                |
|             | Surface Type<br><b>CONCRETE</b>                                     | Road Curvature<br><b>CURVE RIGHT</b>                  |  | Road Grade<br><b>LEVEL</b>                           |                                |
|             | Truck Bus or HazMat<br><b>NO</b>                                    |   |  |  |                                |

|             |                |   |  |                     |   |
|-------------|----------------|---|--|---------------------|---|
| <b>UNIT</b> | <b>VEHICLE</b> | <b>Vehicle</b>  |  |                     |   |
|             |                | License Plate Number<br><b>WAS11</b>                      | Plate Type<br><b>AUT - AUTOMOBILE</b>                      | St<br><b>IL</b>     | Country of Issuance<br><b>UNITED STATES</b> |
|             |                | Vehicle Identification Number<br><b>5TDZA3EH7DS044293</b> | Make<br><b>TOYOTA</b>                                      | Year<br><b>2013</b> | Model<br><b>HIGHLANDER</b>                  |
|             |                | Color<br><b>WHI - WHITE</b>                               | Body Style<br><b>UT - SPORT UTILITY VEHICLE</b>            |                     | Bus Use                                     |
|             |                | Initial Contact Point<br><b>05 - RIGHT REAR CORNER</b>    | Vehicle Damage<br><b>05 - RIGHT REAR CORNER, 06 - REAR</b> |                     |   |
|             |                | Extent Of Damage<br><b>MINOR DAMAGE</b>                   |  |                     |   |



WISCONSIN MOTOR VEHICLE  
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|   |   |  |  |   |  |
|---|---|--|--|---|--|
| UNIT<br>VEHICLE                               | Towed Due To Damage<br><b>NOT TOWED</b>                                   |  | Vehicle Removed By<br><b>OWNER</b>                                     |   |  |
|   | What Driver Was Doing<br><b>STOP IN TRAFFIC</b>                           |  | Vehicle Factors  |   |  |
|   | Driver Prior Action Other   |  | <b>UNKNOWN</b>   |   |  |
|   | Driver Actions<br><b>IMPROPER TURN, FAILED TO KEEP IN DESIGNATED LANE</b> |  |  |   |  |
| 01  | 01  | Owner Name<br><b>ANIS SIDDIQUI<br/>(773) 412-9961</b>          |  | Owner Address<br><b>4416 W THOME AVE<br/>CHICAGO, IL 60646 , US</b> |  |
|   |   | <b>Sequence Of Events</b>                                      |  |   |  |
| UNIT<br>INDIVIDUAL                            | 01  | 01   | Event<br><b>LEFT TURN</b>  |   |  |
|   |   | 02   | Event<br><b>MOTOR VEH IN TRANSPORT</b>                                 |   |  |
|   |   | 03   | Event  |   |  |
|   |   | 04   | Event  |   |  |
| UNIT  | <b>Policy Holder</b>  |  |  |   |  |
|   | Insurance Company<br><b>STATE-FARM-MUTUAL-AUTOMOBILE-INS-CO</b>           |  | Individual<br><b>ANIS SIDDIQUI</b>                                     |   |  |
| UNIT  | <b>Individual</b>   |  |  |   |  |
|   | Driver<br><b>ANIS SIDDIQUI</b>  |  | Citations Issued<br><b>1</b>   | Sex<br><b>MALE</b>  |  |
|   | Address<br><b>4416 W THOME AVE<br/>CHICAGO, IL 60646 , US</b>             |  | Driver License Number<br><b>STATE: ILLINOIS COUNTRY: UNITED STATES</b> |   |  |
| 01  | 001   | <b>Safety Equipment</b>  |  | On Duty Crash   |  |
|   |   | Row<br><b>01 - FRONT ROW</b>                                   |  | Seat Position<br><b>07 - LEFT</b>                                   |  |
|   |   | Helmet Use   |  | Safety Equipment<br><b>SHOULDER &amp; LAP BELT</b>                  |  |
|   |   | Eye Protection   |  | Helmet Compliance   |  |
|   |   | Injury<br><b>NO APPARENT INJURY</b>                            |  | Airbag<br><b>NON DEPLOYED</b>                                       |  |
|   |   | Ejected<br><b>NOT EJECTED</b>                                  |  | Ejection Path<br><b>NOT EJECTED/NOT APPLICABLE</b>                  | Trapped/Extricated<br><b>NOT TRAPPED</b> |
| Medical Transport<br><b>NOT TRANSPORTED</b>   |   | EMS Agency Identifier  |  | EMS Run #   |  |
| Hospital                                      |   | Date of Death  |  | Time of Death   |  |
| <b>Distracted By</b>                          |   | Distracted By Source<br><b>NOT APPLICABLE (NOT DISTRACTED)</b> |  |   |  |
| Distracted By Action<br><b>NOT DISTRACTED</b> |   |  |  |   |  |

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|   |                     |   |                 |  |  |  |  |
|---|---------------------|---|-----------------|--|--|--|--|
| <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<br><b>NO</b>                 | Suspected Drug Use<br><b>NO</b>  |  |  |
|   |                     | Alcohol Test Given<br><b>TEST NOT GIVEN</b>                       |                 | Alcohol Test Type                                  |  | Alcohol Test Results                     |  |
|   |                     | Drug Test Given<br><b>TEST NOT GIVEN</b>                          |                 | Drug Test Type                                     |  | Drug Test Results                        |  |
|   |                     | Drug Type   |                 |  |  |  |  |
|   |                     | Individual Condition<br><b>APPEARED NORMAL</b>                    |                 |  |  |  |  |
|   |                     | <b>Individual</b>   |                 |  |  |  |  |
|   |                     | Passenger<br><b>HABIB SIDDIQI</b>                                 |                 |  | Citations Issued<br><b>0</b>   | Sex<br><b>MALE</b>                       |  |
|   |                     |   |                 |  | Date of Birth  | Race                                     |  |
|   |                     | Address<br><b>3818 W CHASE AVE<br/>LINCOLNWOOD, IL 60712 , US</b> |                 |  | Driver License Number<br><b>STATE: ILLINOIS COUNTRY: UNITED STATES</b> |  |  |
|   |                     | <b>01</b>   | <b>002</b>      | <b>Safety Equipment</b>                            |  | On Duty Crash                            |  |
| Row<br><b>01 - FRONT ROW</b>                |                     |   |                 | Seat Position<br><b>09 - RIGHT</b>                 |  | <b>SHOULDER &amp; LAP BELT</b>           |  |
| Helmet Use                                  |                     |   |                 | Helmet Compliance                                  |  |  |  |
| Eye Protection                              |                     |   |                 | Tint Compliance                                    |  |  |  |
| <b>Injury</b>                               |                     |   |                 | Injury Severity<br><b>NO APPARENT INJURY</b>       |  | Airbag<br><b>NON DEPLOYED</b>            |  |
| Ejected<br><b>NOT EJECTED</b>               |                     |   |                 | Ejection Path<br><b>NOT EJECTED/NOT APPLICABLE</b> |  | Trapped/Extricated<br><b>NOT TRAPPED</b> |  |
| Medical Transport<br><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   |  |  |  |

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|                      |                      |   |  |  |
|----------------------|----------------------|---|--|--|
| UNIT                 | INDIVIDUAL           | Prior Action  |  |  |
|                      |                      | Action  |  |  |
|                      |                      | Action Other  |  | To/From School                                     |
| 01                   | 002                  | <b>Drug &amp; Alcohol</b>                                     | Suspected Alcohol Use<br><b>NO</b>                                     | Suspected Drug Use<br><b>NO</b>                    |
|                      |                      | Alcohol Test Given<br><b>TEST NOT GIVEN</b>                   | Alcohol Test Type  | Alcohol Test Results                               |
|                      |                      | Drug Test Given<br><b>TEST NOT GIVEN</b>                      | Drug Test Type   | Drug Test Results                                  |
|                      |                      | Drug Type   |  |  |
|                      |                      | Individual Condition<br><b>APPEARED NORMAL</b>                |  |  |
| UNIT                 | INDIVIDUAL           | <b>Individual</b>   |  |  |
|                      |                      | Passenger<br><b>SYEDA SIDDIQUI</b>                            | Citations Issued<br><b>0</b>   | Sex<br><b>FEMALE</b>                               |
|                      |                      |   | Date of Birth  | Race   |
|                      |                      | Address<br><b>4416 W THOME AVE<br/>CHICAGO, IL 60646 , US</b> | Driver License Number<br><b>STATE: ILLINOIS COUNTRY: UNITED STATES</b> |  |
|                      |                      | <b>Safety Equipment</b>                                       | On Duty Crash  | Safety Equipment<br><b>SHOULDER &amp; LAP BELT</b> |
| 01                   | 003                  | Row<br><b>02 - SECOND ROW</b>                                 | Seat Position<br><b>09 - RIGHT</b>                                     | Helmet Use   |
|                      |                      | Helmet Use  | Helmet Compliance  | Eye Protection                                     |
|                      |                      | Eye Protection  | Tint Compliance  | <b>Injury</b>                                      |
|                      |                      | <b>NO APPARENT INJURY</b>                                     | Airbag<br><b>NON DEPLOYED</b>  | Ejected<br><b>NOT EJECTED</b>                      |
|                      |                      | Ejection Path<br><b>NOT EJECTED/NOT APPLICABLE</b>            | Trapped/Extricated<br><b>NOT TRAPPED</b>                               | Medical Transport<br><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<br>INDIVIDUAL  | Action   |  |  |
|   | Action Other                                   |  | To/From School                                     |
|   | <b>Drug &amp; Alcohol</b>                      | Suspected Alcohol Use<br><b>NO</b>                 | Suspected Drug Use<br><b>NO</b>                    |
|   | Alcohol Test Given<br><b>TEST NOT GIVEN</b>    | Alcohol Test Type                                  | Alcohol Test Results                               |
|   | Drug Test Given<br><b>TEST NOT GIVEN</b>       | Drug Test Type                                     | Drug Test Results                                  |
|   | Drug Type                                      |  |  |
|   | Individual Condition<br><b>APPEARED NORMAL</b> |  |  |
|   | <b>Individual</b>                              |  |  |
|   | Passenger<br><b>MOHAMED SIDDIQUI</b>           | Citations Issued<br><b>0</b>                       | Sex<br><b>MALE</b>                                 |
|   |  | Date of Birth                                      | Race   |
| Address<br><b>4416 W THOME AVE<br/>CHICAGO, IL 60646 , US</b> | Driver License Number                          |  |  |
| UNIT<br>INDIVIDUAL  | <b>Safety Equipment</b>                        | On Duty Crash                                      | Safety Equipment<br><b>SHOULDER &amp; LAP BELT</b> |
|   | Row<br><b>03 - THIRD ROW</b>                   | Seat Position<br><b>09 - RIGHT</b>                 |  |
|   | Helmet Use                                     |  | Helmet Compliance                                  |
|   | Eye Protection                                 |  | Tint Compliance                                    |
|   | <b>Injury</b>                                  | Injury Severity<br><b>NO APPARENT INJURY</b>       | Airbag<br><b>NON DEPLOYED</b>                      |
|   | Ejected<br><b>NOT EJECTED</b>                  | Ejection Path<br><b>NOT EJECTED/NOT APPLICABLE</b> | Trapped/Extricated<br><b>NOT TRAPPED</b>           |
|   | Medical Transport<br><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  |  |  |  |

|   |  |  |  |
|---|--|--|--|
| UNIT<br>INDIVIDUAL  | Action   |  |  |
|   | Action Other                                   |  | To/From School                                     |
|   | <b>Drug &amp; Alcohol</b>                      | Suspected Alcohol Use<br><b>NO</b>                 | Suspected Drug Use<br><b>NO</b>                    |
|   | Alcohol Test Given<br><b>TEST NOT GIVEN</b>    | Alcohol Test Type                                  | Alcohol Test Results                               |
|   | Drug Test Given<br><b>TEST NOT GIVEN</b>       | Drug Test Type                                     | Drug Test Results                                  |
|   | Drug Type                                      |  |  |
|   | Individual Condition<br><b>APPEARED NORMAL</b> |  |  |
|   | <b>Individual</b>                              |  |  |
|   | Passenger<br><b>ZARA SIDDIQUI</b>              | Citations Issued<br><b>0</b>                       | Sex<br><b>FEMALE</b>                               |
|   | Date of Birth                                  |  | Race   |
| Address<br><b>4416 W THOME AVE<br/>CHICAGO, IL 60646 , US</b> |  | Driver License Number                              |  |
| UNIT<br>INDIVIDUAL  | <b>Safety Equipment</b>                        | On Duty Crash                                      | Safety Equipment<br><b>SHOULDER &amp; LAP BELT</b> |
|   | Row<br><b>03 - THIRD ROW</b>                   | Seat Position<br><b>08 - MIDDLE</b>                |  |
|   | Helmet Use                                     |  | Helmet Compliance                                  |
|   | Eye Protection                                 |  | Tint Compliance                                    |
|   | <b>Injury</b>                                  | Injury Severity<br><b>NO APPARENT INJURY</b>       | Airbag<br><b>NON DEPLOYED</b>                      |
|   | Ejected<br><b>NOT EJECTED</b>                  | Ejection Path<br><b>NOT EJECTED/NOT APPLICABLE</b> | Trapped/Extricated<br><b>NOT TRAPPED</b>           |
|   | Medical Transport<br><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  |  |  |  |

WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT INDIVIDUAL
Action
Action Other
To/From School
Drug & Alcohol Suspected Alcohol Use Suspected Drug Use
Alcohol Test Given Alcohol Test Type Alcohol Test Results
Drug Test Given Drug Test Type Drug Test Results
Drug Type
Individual Condition
Violations
UTC Number Issue To? Statute Number Description

Unit Summary

UNIT 02
Unit Status Vehicle Operating As Classification Unit Type
Vehicle Type
Total Occs Train/Bus # Recorded Total # Citations Issued Total Trailers Total HazMat Types
Insurance? Direction Of Travel Pre CrashTire Mark Speed Limit Total Lanes
Most Harmful Event: Collision With Special Function Emergency Motor Vehicle Use
Traffic Way Traffic Control Traffic Control Inoperative/Missing
Surface Type Road Curvature Road Grade
Truck Bus or HazMat

UNIT 02 VEHICLE
Vehicle
License Plate Number Plate Type St Country of Issuance
Vehicle Identification Number Make Year Model
Color Body Style Bus Use
Initial Contact Point Vehicle Damage
Extent Of Damage
Towed Due To Damage Vehicle Removed By





WISCONSIN MOTOR VEHICLE  
CRASH REPORT

|   |   |  |  |                      |
|---|---|--|--|----------------------|
| UNIT<br>VEHICLE                               | What Driver Was Doing<br><b>NEGOTIATING CURVE</b>                       |  | Vehicle Factors  |                      |
|   | Driver Prior Action Other   |  | <b>UNKNOWN</b>   |                      |
|   | Driver Actions<br><b>NO CONTRIBUTING ACTION</b>                         |  |  |                      |
|   | Owner Name<br><b>TESSA DEITRICH<br/>(608) 963-6133</b>                  |  | Owner Address<br><b>2340 DORIS RD<br/>REEDSBURG, WI 53959 , US</b> |                      |
| UNIT<br>02                                    | <b>Sequence Of Events</b>   |  |  |                      |
|   | 01  | Event<br><b>MOTOR VEH IN TRANSPORT</b>                         |  |                      |
|   | 02  | Event  |  |                      |
|   | 03  | Event  |  |                      |
|   | 04  | Event  |  |                      |
| UNIT  | <b>Policy Holder</b>  |  |  |                      |
|   | Insurance Company<br><b>ARTISAN-AND-TRUCKERS-CASUALTY-CO</b>            |  | Individual<br><b>TESSA DEITRICH</b>                                |                      |
| UNIT<br>INDIVIDUAL                            | <b>Individual</b>   |  |  |                      |
|   | Driver<br><b>TESSA DEITRICH<br/>(608) 963-6133</b>                      |  | Citations Issued<br><b>0</b>                                       | Sex<br><b>FEMALE</b> |
|   | Address<br><b>2340 DORIS RD<br/>REEDSBURG, WI 53959 , US</b>            |  | Date of Birth  | Race<br><b>WHITE</b> |
|   | Driver License Number<br><b>STATE: WISCONSIN COUNTRY: UNITED STATES</b> |  |  |                      |
| UNIT<br>02                                    | <b>Safety Equipment</b>   |  | On Duty Crash  |                      |
|   | Row<br><b>01 - FRONT ROW</b>  |  | Seat Position<br><b>07 - LEFT</b>                                  |                      |
|   | Safety Equipment<br><b>SHOULDER &amp; LAP BELT</b>                      |  | Helmet Compliance  |                      |
|   | Helmet Use  |  | Tint Compliance  |                      |
|   | Eye Protection  |  | Airbag<br><b>NON DEPLOYED</b>                                      |                      |
|   | <b>Injury</b>   |  | Injury Severity<br><b>NO APPARENT INJURY</b>                       |                      |
|   | Ejected<br><b>NOT EJECTED</b>   |  | Ejection Path<br><b>NOT EJECTED/NOT APPLICABLE</b>                 |                      |
|   | Trapped/Extricated<br><b>NOT TRAPPED</b>                                |  | Medical Transport<br><b>NOT TRANSPORTED</b>                        |                      |
|   | EMS Agency Identifier   |  | EMS Run #  |                      |
|   | Hospital  |  | Date of Death  |                      |
| Time of Death                                 |   | Distracted By Source<br><b>NOT APPLICABLE (NOT DISTRACTED)</b> |  |                      |
| Distracted By Action<br><b>NOT DISTRACTED</b> |   |  |  |                      |
| <b>Non Motorist</b>                           |   | Striking Unit #  |  |                      |
| Location                                      |   |  |  |                      |

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

|             |  |                                    |                   |                                 |  |
|-------------|--|------------------------------------|-------------------|---------------------------------|--|
| <b>UNIT</b> | Prior Action                                   |                                    |                   |                                 |  |
|             | Action   |                                    |                   |                                 |  |
|             | Action Other                                   |                                    |                   | To/From School                  |  |
|             | <b>Drug &amp; Alcohol</b>                      | Suspected Alcohol Use<br><b>NO</b> |                   | Suspected Drug Use<br><b>NO</b> |  |
|             | Alcohol Test Given<br><b>TEST NOT GIVEN</b>    | Alcohol Test Type                  |                   | Alcohol Test Results            |  |
|             | Drug Test Given<br><b>TEST NOT GIVEN</b>       | Drug Test Type                     | Drug Test Results |                                 |  |
|             | Drug Type                                      |                                    |                   |                                 |  |
|             | Individual Condition<br><b>APPEARED NORMAL</b> |                                    |                   |                                 |  |
|             | <b>02</b>                                      | <b>006</b>                         |                   |                                 |  |
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