

6TL0F8QXVR  
23-09732

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>23-09732</b>	Investigating Officer/Deputy <b>DEPUTY J. GREENWOOD</b>	
Crash Date <b>09/05/2023</b>		Crash Time <b>01:56 PM</b>	Date Arrived <b>09/05/2023</b>	Time Arrived <b>02:07 PM</b>	
Date Notified <b>09/05/2023</b>		Time Notified <b>01:59 PM</b>	Total Units <b>02</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>DEPUTY GREENWOOD</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 STOPPED AT THE INTERSECTION AND DID NOT SEE UNIT 2. UNIT 1 PROCEEDED INTO THE INTERSECTION STRIKING UNIT 2.

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Location

Table with location details: ON STH23 EB 87 FT N OF CTHW SB IN THE TOWN OF WESTFIELD IN SAUK COUNTY. Includes Latitude (43.395832162), Longitude (-90.036489717), X Coordinate (254088.796875), Y Coordinate (4809252), and Structure Type (NO STRUCTURE).

Crash Scene

Table with crash scene details: First Harmful Event (MOTOR VEH IN TRANSPORT), Manner of Collision (01 - ANGLE), Road Surface Condition (DRY), Environment Factor (NONE), Weather Condition (CLEAR), Animal Type, Crash Classification (PUBLIC PROPERTY), Intersection Type (FOUR-WAY INTERSECTION).

Unit Summary

Table with unit summary details: Unit Status (IN TRANSIT), Vehicle Operating As Classification (D CLASS), Unit Type (AUTOMOBILE), Vehicle Type ((SPORT) UTILITY VEHICLE), Total Occs (1), Direction Of Travel (WESTBOUND), Most Harmful Event (MOTOR VEH IN TRANSPORT), Traffic Way (TWO-WAY, NOT DIVIDED), Surface Type (BLACKTOP (BITUMINOUS)).

Table with vehicle details: License Plate Number (AHU1235), Plate Type (AUT - AUTOMOBILE), St (WI), Country of Issuance (UNITED STATES), Vehicle Identification Number (KM8J3CA49KU935717), Make (HYUNDAI), Year (2019), Model (TUCSON), Color (GRY - GRAY), Body Style (UT - SPORT UTILITY VEHICLE), Initial Contact Point (12 - FRONT), Extent Of Damage (DISABLING DAMAGE). Includes a diagram of a vehicle with damage markers.

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UNIT	VEHICLE	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>STEVES AUTO SERVICE</b>		
		What Driver Was Doing <b>LEFT TURN</b>		Vehicle Factors		
		Driver Prior Action Other		<b>NOT APPLICABLE</b>		
		Driver Actions <b>FAILED TO YIELD RIGHT-OF-WAY</b>				
01	01	Owner Name <b>YAO LUC GBEDJINO (608) 504-8106</b>		Owner Address <b>77 S OAKBRIDGE CT MADISON, WI 53717 , US</b>		
<b>Sequence Of Events</b>						
	01	Event <b>MOTOR VEH IN TRANSPORT</b>				
	02	Event <b>DITCH</b>				
	03	Event				
	04	Event				
UNIT	<b>Policy Holder</b>					
	Insurance Company <b>PROGRESSIVE-CLASSIC-INS-CO</b>			Individual <b>YAO GBEDJINO</b>		
UNIT	<b>Individual</b>					
	Driver <b>YAO GBEDJINO (608) 504-8106</b>			Citations Issued <b>1</b>	Sex <b>MALE</b>	
	Address <b>77 S OAKBRIDGE CT MADISON, WI 53717 , US</b>			Date of Birth	Race <b>BLACK/AFRICAN AMERICAN</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>		
		Safety Equipment <b>SHOULDER &amp; LAP BELT</b>		Helmet Use		
		Helmet Compliance		Eye Protection		
		Tint Compliance		Injury Severity <b>NO APPARENT INJURY</b>		
		Airbag <b>DEPLOYED-FRONT</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>						

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UNIT	INDIVIDUAL	<b>Non Motorist</b>		Striking Unit #	Location	
		Prior Action				
		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>Violations</b>					
01	001	UTC Number <b>BK741304</b>	Issue To? <b>001</b>	Statute Number <b>346.18(3)</b>	Description <b>FAIL/YIELD RIGHT/WAY FROM STOP SIGN</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							
		Total Occs <b>1</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>SOUTHBOUND</b>		<input type="checkbox"/> <b>Pre Crash Tire Mark</b>		Speed Limit <b>55</b>		Total Lanes <b>2</b>			
		Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</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>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>											

02	02	<b>Vehicle</b>								
		License Plate Number <b>637YDZ</b>			Plate Type <b>AUT - AUTOMOBILE</b>		St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>		
		Vehicle Identification Number <b>WBAUN1C53AVH81830</b>			Make <b>BMW</b>		Year <b>2010</b>	Model <b>128</b>		
		Color <b>GLD - GOLD</b>			Body Style <b>CV - CONVERTIBLE</b>			Bus Use		
		Initial Contact Point <b>09 - LEFT SIDE MIDDLE</b>								



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UNIT VEHICLE	Vehicle Damage	
	Extent Of Damage <b>DISABLING DAMAGE</b>	<b>09 - LEFT SIDE MIDDLE</b>
	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>	Vehicle Removed By <b>STEVES AUTO SERVICE</b>
	What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors
UNIT VEHICLE	Driver Prior Action Other	<b>NOT APPLICABLE</b>
	Driver Actions <b>NO CONTRIBUTING ACTION</b>	
02 02	Owner Name <b>TIMOTHY JACOBSON (608) 745-2274</b>	Owner Address <b>239 COLUMBUS ST APT 305 LODI, WI 53555 , US</b>
	<b>Sequence Of Events</b>	
01 02 03 04	Event <b>MOTOR VEH IN TRANSPORT</b>	
	Event	
	Event	
	Event	
UNIT INDIVIDUAL	<b>Policy Holder</b>	
	Insurance Company <b>STATE-FARM-MUTUAL-AUTOMOBILE-INS-CO</b>	Individual <b>TIMOTHY JACOBSON</b>
02 002	<b>Individual</b>	
	Driver <b>TIMOTHY JACOBSON (608) 745-2274</b>	Citations Issued <b>0</b>
		Sex <b>MALE</b>
	Date of Birth	Race <b>WHITE</b>
	Address <b>239 COLUMBUS ST APT 305 LODI, WI 53555 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>
02 002	<b>Safety Equipment</b>	
	On Duty Crash	Safety Equipment
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>
	<b>SHOULDER &amp; LAP BELT</b>	
	Helmet Use	Helmet Compliance
Eye Protection	Tint Compliance	
02 002	<b>Injury</b>	Injury Severity <b>SUSPECTED MINOR INJURY</b>
		Airbag <b>DEPLOYED-SIDE</b>
	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>
	<b>TRAPPED/EXTRICATED</b>	
	Medical Transport <b>EMS GROUND</b>	EMS Agency Identifier <b>6001024</b>
	EMS Run #	
Hospital <b>REEDSBURG AREA MED CTR</b>	Date of Death	Time of Death

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<b>UNIT</b>	<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	
	Prior Action				
	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				
<b>02</b>	<b>002</b>	Individual Condition			
		<b>APPEARED NORMAL</b>			