WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | Document Number Override | Primary Crash | Crash Time 08:13 AM Time Notified 08:13 AM | | Crash Number | 0 0 | Investigating Officer/Deputy DEPUTY D. KROLIKOWSKI | | | |
|------------|---------------------------------|---------------------------|--|--|---------------|--|--|--|--------------------|--|
| 0 9 | Crash Date 09/12/2023 | | | | rived 2023 | Time Arrived 08:23 AM | | | | |
| Management | Date Notified 09/12/2023 | | | | nits | Total Injured 00 | , | | | |
| 0F1 | On Emergency | Hit and Run | | | Work Zone | ☐ Trailer or Towed ☐ Reporting ☐ Threshold | | | | |
| 6TL | Government Property | Active So | | | Bus Related | Tags | | | | |
| | ✓ Reportable | Crash Type DT4000 (STA | ANDARD CRASH | | | Amended | | | Secondary Crash | |

Diagram O2 Linn St W Mulbert

| reconstruction by | , | |
|-------------------|---|--|
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| | | |
| | | |
| Photos By | | |
| | | |

Additional Information **NONE**

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

UNIT 2 WAS STOPPED IN THE WEST BOUND LANE OF TRAVEL ON LINN ST, YIELDING TO ONCOMING TRAFFIC, WAITING FOR AN OPPORTUNITY TO TURN LEFT. DURING THIS TIME UNIT 1 APPROACHED UNIT 2 FROM BEHIND, AND DID NOT SEE UNIT 2 DUE TO THE OPERATOR LOOKING AT A PEDESTRIAN IN THE AREA HE THOUGHT HE RECOGNIZED. UNIT 1 THEN STRUCK THE RIGHT REAR OF UNIT 2.

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| Con Limb St7 STH33 WB Landus Landus Landus September S | Loc | ation | | | | | | | | |
|--|--------------------------------|---|----------------------|--------------|---------------------|--------------------|---------------|------------|---------------------|--|
| OF MULBERRY ST IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY STOCKED S | | | | | | | | | • | |
| IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY STORY STRUCTURE Crash Scene First Hammid Event Location ON ROADWAY Morrer of Collision Uptrocreating MOTOR VEH IN TRANSPORT Morrer of Collision Uptrocreating NONE Roadway Factor(s) NONE NONE Roadway Factor(s) Roadway Factor(s) NONE Roadway Factor(s) Roadway Factor(s) Roadway Factor(s) Roadway Factor(s) Roadway Factor(s) NONE Roadway Factor(s) NONE Roadway Factor(s) Road Garde Roa | _ | | | | | | | | | |
| Structure Type NO STRUCTURE | IN THE VILLAGE OF WEST BARABOO | | | | | | | | | |
| No STRUCTURE | IN SAUK COUNTY | | | | | | | 40172 | 02.3 | |
| First Hammid Event Creat Coation NO ROADWAY Readed Condition NO ROADWAY Readed Condition NO READWAY Readed Condition NO READWAY NO ROAD NO READWAY NO READWAY NO ROAD NO READWAY | | | | | | | | | | |
| MOTOR VEH IN TRANSPORT Manner of Collision WVEHICLE IN TRANSPORT DayLight T Road Surface Condition(s) Dry Environment Factor(s) NONE NONE NONE Relation To Trafficway TRAFFICWAY - ON ROAD | Cra | sh Scene | | | , | | | | | |
| Intersection Continue Conti | First | Harmful Event | | | First | t Harmful Event L | ocation. | | | |
| DAYLIGHT Roadway Factor(s) Roadway Factor(s) | MO | TOR VEH IN TRANSP | ORT | | ON | ROADWAY | | | | |
| Road Surface Condition(s) DRY Environment Factor(s) NONE Weather Condition(s) CLEAR Animal Type TRAFFICWAY - ON ROAD Crash Classification - Lucation Crash Classification - Lucation PROBLIC PROPERTY Tribal Land NO SPECIAL JURISDICTION NO SPECIAL JURISDICTION NO SPECIAL JURISDICTION Within Interchange Area Junction Location Intersection Type FOUR-WAY INTERSECTION Unit Status Vehicle Operating As Classification In TRANSIT Operating As Endorsements Operatin | Man | ner of Collision | | | Ligh | nt Condition | | | | |
| DRY Environment Factor(s) NONE Weather Condition(s) CLEAR Animal Type Relation To Trafficway TRAFFICWAY - ON ROAD Crash Classification - Location PUBLIC PROPERTY NO SPECIAL JURISDICTION Tribial Land Access Control PARTIAL CONTROL Within Interchange Area NO WITERSECTION INTERSECTION INTERSECTION INTERSECTION Vehicle Operating As Classification Intersection Type Operating As Classification Unit Type INTRANSIT Vehicle Operating As Classification Vehicle Operating As Classification Unit Type Operating As Endorsements Operating As Endor | 00 - | NO COLLISION W/VE | HICLE IN TRANSPORT | | DA | YLIGHT | | | | |
| Environment Factor(s) NONE Wester Condition(s) | Roa | d Surface Condition(s) | | | Roa | dway Factor(s) | | | | |
| NONE Weather Condition(s) | DR | ′ | | | | | | | | |
| Weather Condition(s) CLEAR | Envi | ronment Factor(s) | | | | | | | | |
| CLEAR Animal Type TRAFFICWAY - ON ROAD Crash Classification - Location PUBLIC PROPERTY NO SPECIAL JURISDICTION Tribal Land Access Control PARTIAL CONTROL Within Interchange Area NO INTERSECTION Webicle Operating As Classification INTERSECTION Unit Status Vehicle Operating As Classification INTERSECTION Unit Type Unit Status Vehicle Operating As Classification INTERNAIT Unit Type (SPORT) UTILITY VEHICLE Total Occs Train/Bus # Recorded 2 0 0 1 Total HazMat Types 1 Insurance? Direction Of Travel VESS WESTBOUND Mark Decrease In Train/Bus # Recorded 2 0 0 0 1 Insurance? Direction Of Travel WESTBOUND Mark NO SPECIAL FUNCTION NO SPECIAL FUNCTION NOT APPLICABLE Traffic Way Traffic Control Traffic Control Traffic Control NO | NOI | NE | | | NO | NE | | | | |
| Animal Type Crash Classification - Location PUBLIC PROPERTY Tribal Land Access Control PARTIAL CONTROL Within Interchange Area NO INTERSECTION INTERS | Wea | ther Condition(s) | | | | | | | | |
| TRAFFICWAY - ON ROAD Crash Classification - Location PUBLIC PROPERTY Tribal Land Access Control PARTIAL CONTROL Within Interchange Area NO INTERSECTION Vehicle Operating As Classification Intersection Type FOUR-WAY INTERSECTION Unit Summary Unit Status Vehicle Operating As Classification D CLASS AUT - AUTOMOBILE Total Docs Traffic Control Mark Total Traffic Control Most Harmful Event: Collision With MOTOR Veh In TRANSPORT Traffic Control NO SPECIAL JURISDICTION Special Study PARTIAL CONTROL Special Study PARTIAL CONTROL Special Study PARTIAL CONTROL Special Study PARTIAL CONTROL Special Study PARTIAL CONTROL Special Study PARTIAL CONTROL Special Study PARTIAL CONTROL Special Study PARTIAL CONTROL Unit Type AUTOMOBILE Operating As Endorsements Operating As Endorsements Operating As Endorsements Total Haz/Mat Types 1 | CLE | AR | | | | | | | | |
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| PUBLIC PROPERTY Tribal Land Access Control PARTIAL CONTROL Within Interchange Area NO INTERSECTION INTERSECTION INTERSECTION INTERSECTION INTERSECTION INTERSECTION INTERSECTION INTERSECTION Unit Summary Unit Summary Unit Summary Unit Summary Vehicle Operating As Classification INTERANSIT D CLASS AUTOMOBILE Total Occs Train/Bus # Recorded Total # Citations Issued Total Trailers Total AzaMat Types 1 2 0 0 0 0 Insurance? Direction Of Travel WESTBOUND Mark 25 WESTBOUND Mark 25 WESTBOUND MOSPECIAL FUNCTION NO SPECIAL FUNCTION NO APPLICABLE Traffic Control NO APPLICABLE Traffic Control NO APPLICABLE Traffic Control NO CONTROL NO SUrface Type Road Curvature Straight NO Vehicle Straight Vehicle Vehicle Intersection Type FOUR-WAY, NOT DIVIDED NO CONTROL NO SPECIAL FUNCTION NO SPECIAL FUNCTION Special Study PARTIAL CONTROL NO ADIA HazaMat Types Special Study | | | | | TRA | AFFICWAY - O | N ROAD | | | |
| Tribal Land Access Control PARTIAL CONTROL Within Interchange Area NO INTERSECTION Intersection Type FOUR-WAY INTERSECTION Unit Summary Unit Status IN TRANSIT Vehicle Operating As Classification Details as Endorsements Vehicle Type (SPORT) UTILITY VEHICLE Total Occs Train/Bus # Recorded Total # Citations Issued 1 | | | | | | | | | | |
| Within Interchange Area Junction Location Intersection Type FOUR-WAY INTERSECTION Intersection Type FOUR-WAY INTERSECTION | | | | | | | RISDICTION | | Long at all Ottooks | |
| NO | TIIDa | ai Lanu | | | | | OL | | Special Study | |
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| Unit Status | NO | | INTERSECTION | | FOUR-WAY I | NTERSECTIO | N | | | |
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| Vehicle Type (SPORT) UTILITY VEHICLE Total Occs 1 | | | | | erating As Classifi | ication | | | | |
| Control Cont | | | | D CLASS | | | | | monto | |
| 1 | | ** | .E | | | | Operating A | s Liluoise | sments | |
| Insurance? YES Direction Of Travel WESTBOUND Mark Direction Of Travel WESTBOUND Direction Of Travel WestBound No Special Function No SPECIAL FUNCTION No SPECIAL FUNCTION No APPLICABLE Traffic Control Inoperative/Missing No CONTROL No Surface Type Road Curvature STRAIGHT DIPHILL Truck Bus or HazMat No Vehicle License Plate Number S62YST Vehicle Identification Number 1GKFK66U73J149252 GENERAL MOTORS COR Body Style UT - SPORT UTILITY VEHICLE Vehicle Damage TI - LEFT FRONT CORNER Extent Of Damage 11 - LEFT FRONT CORNER | Tota | I Occs | Train/Bus # Recorded | Total # Cita | tions Issued | Total Trai | lers | Total Ha | zMat Types | |
| Mark Most Harmful Event: Collision With Special Function NO SPECIAL FUNCTION NOTAPPLICABLE | | | | 2 | | _ | | | | |
| Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT Traffic Way TWO-WAY, NOT DIVIDED Surface Type CONCRETE Truck Bus or HazMat NO Vehicle License Plate Number 562YST Vehicle Identification Number 1GKFK66U73J149252 GENERAL MOTORS COR BLK - BLACK UT - SPORT UTILITY VEHICLE Extent Of Damage Traffic Control NO SPECIAL FUNCTION NO Traffic Control Inoperative/Missing NO NO Road Curvature Road Grade UPHILL Truck Bus or HazMat NO Vehicle UNITED STATES WI UNITED STATES Model 1GKFK66U73J149252 GENERAL MOTORS COR Bulk - BLACK UT - SPORT UTILITY VEHICLE Truck Bus Use 11 - LEFT FRONT CORNER Extent Of Damage 11 - LEFT FRONT CORNER | | | | Pre | | | mit | | nes | |
| MOTOR VEH IN TRANSPORT Traffic Way TWO-WAY, NOT DIVIDED NO CONTROL Surface Type CONCRETE Truck Bus or HazMat NO Vehicle License Plate Number 562YST Vehicle Identification Number 1GKFK66U73J149252 Color BLK - BLACK UT - SPORT UTILITY VEHICLE Wehicle Damage NO SPECIAL FUNCTION NO Traffic Control Inoperative/Missing NO Road Grade UPHILL Truck Bus or HazMat NO Vehicle License Plate Number St Country of Issuance WI UNITED STATES Whodel 1GKFK66U73J149252 GENERAL MOTORS COR Body Style BUS Use Vehicle Damage 11 - LEFT FRONT CORNER Extent Of Damage 11 - LEFT FRONT CORNER | | | | Special Fun | | | | | | |
| TWO-WAY, NOT DIVIDED NO CONTROL Surface Type CONCRETE Truck Bus or HazMat NO Vehicle License Plate Number 562YST Vehicle Identification Number 1GKFK66U73J149252 Color BLK - BLACK UT - SPORT UTILITY VEHICLE NO NO Road Curvature STRAIGHT UPHILL St Country of Issuance UNITED STATES WI UNITED STATES Wodel YUKON XL Body Style UT - SPORT UTILITY VEHICLE Vehicle Damage 11 - LEFT FRONT CORNER Extent Of Damage 11 - LEFT FRONT CORNER | | | | | | | | | | |
| Surface Type CONCRETE Truck Bus or HazMat NO Vehicle License Plate Number 562YST Vehicle Identification Number 1GKFK66U73J149252 Color BLK - BLACK UT - SPORT UTILITY VEHICLE License Plate Number St Country of Issuance WI UNITED STATES Wodel Year Model Year Model YUKON XL Body Style UT - SPORT UTILITY VEHICLE Vehicle Damage 11 - LEFT FRONT CORNER Extent Of Damage 11 - LEFT FRONT CORNER | Traff | ic Way | | Traffic Cont | rol | | Traffic Conti | ol Inopera | ative/Missing | |
| CONCRETE Truck Bus or HazMat NO Vehicle License Plate Number 562YST AUT - AUTOMOBILE Vehicle Identification Number 1GKFK66U73J149252 Color BLK - BLACK UT - SPORT UTILITY VEHICLE Initial Contact Point 11 - LEFT FRONT CORNER Extent Of Damage St. Country of Issuance WI UNITED STATES WI UNITED STATES WHODE UNITED STATES WI UNITED STATES WI UNITED STATES Bus Use 11 - LEFT FRONT CORNER | | <u> </u> | | | | | | | | |
| Truck Bus or HazMat NO Vehicle License Plate Number 562YST AUT - AUTOMOBILE Vehicle Identification Number 1GKFK66U73J149252 Color BLK - BLACK UT - SPORT UTILITY VEHICLE Initial Contact Point 11 - LEFT FRONT CORNER Extent Of Damage Plate Type St Country of Issuance UNITED STATES Make Year Model YUKON XL Bus Use UT - SPORT UTILITY VEHICLE Vehicle Damage 11 - LEFT FRONT CORNER | | | | | | | | | | |
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| License Plate Number 562YST Vehicle Identification Number 1GKFK66U73J149252 Color BLK - BLACK Initial Contact Point 11 - LEFT FRONT CORNER Extent Of Damage Plate Type AUT - AUTOMOBILE WI UNITED STATES Windel UNITED STATES Model Year YUKON XL Bus Use Plate Type UNITED STATES Windel UNITED STATES Windel UNITED STATES Model YUKON XL Bus Use 11 - LEFT FRONT CORNER | | K DUS OF HAZIVIAL | | | | | | | | |
| License Plate Number 562YST Vehicle Identification Number 1GKFK66U73J149252 Color BLK - BLACK Initial Contact Point 11 - LEFT FRONT CORNER Extent Of Damage Plate Type AUT - AUTOMOBILE WI UNITED STATES Windel UNITED STATES Model Year YUKON XL Bus Use Plate Type UNITED STATES Windel UNITED STATES Windel UNITED STATES Model YUKON XL Bus Use 11 - LEFT FRONT CORNER | | Vehicle | | | | | | | | |
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| Color BLK - BLACK UT - SPORT UTILITY VEHICLE Wehicle Damage T 8 9 10 11 T LEFT FRONT CORNER Extent Of Damage 11 - LEFT FRONT CORNER | | Vehicle Identification Nur | mher | Make | | | | | | |
| BLK - BLACK UT - SPORT UTILITY VEHICLE Initial Contact Point Vehicle Damage | _ | | | | | | VIIVAN VI | | | |
| Initial Contact Point 11 - LEFT FRONT CORNER Extent Of Damage Vehicle Damage 7 8 9 10 11 6 12 12 | 6 | | | | | OR 2003 | | | | |
| 11 - LEFT FRONT CORNER Extent Of Damage 11 - LEFT FRONT CORNER 11 - LEFT FRONT CORNER | 2 | Color | | Body Style | | | | • | | |
| Extent Of Damage 11 - LEFT FRONT CORNER | | Color BLK - BLACK | | Body Style | RT UTILITY VI | | | | | |
| - LEUNICHONIAL LIAMACE | Щ | Color BLK - BLACK Initial Contact Point | 2 | Body Style | RT UTILITY VI | | | | | |

Wisconsin Motor Vehicle Crash Form DT4000

5

UNIT

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FIND

This report does not include any CJIS data.

2 of 6

Crash Date 09/12/2023
Crash Time 08:13 AM

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | | Towed Due To Damage NOT TOWED | - I | | Vehicle Removed By | | | | | |
|----------------------|------------|---|-------------------|-------------------------------|------------------------------|----------------------|--------------------|--|--|--|
| | | | | | | | | | | |
| | | What Driver Was Doing | | | Vehicle Factors | | | | | |
| | | GOING STRAIGHT | | | NOT APPLICABLE | | | | | |
| | | Driver Prior Action Other | | | NOT APPLICABL | | | | | |
| | | Driver Actions | | | | | | | | |
| | ш | | VEHIC | CLE IN INATTENTIVE, C | ARELESS OR ERI | RATIC MANNER | | | | |
| _ | VEHICLE | | | · | | | | | | |
| UNIT | ≅ | | | | | | | | | |
| \supset | 亩 | | | | | | | | | |
| | > | | | | | | | | | |
| | | Ourser Name | | | Owner Address | | | | | |
| | | Owner Name REBECCA WENDT | | | Owner Address 131 E ROSED | | | | | |
| 2 | 7 | (414) 241-5417 | | | | , WI 53207 , US | | | | |
| _ | | (| | | | , , | | | | |
| | | | | | | | | | | |
| | | Sequence Of Ever Event | nts | | | | | | | |
| | 10 | MOTOR VEH IN TRAI | NSPO | RT | | | | | | |
| | 05 | Event | | | | | | | | |
| | | Event | | | | | | | | |
| | 03 | | | | | | | | | |
| | 9 | Event | | | | | | | | |
| | | Policy Holder | | | | | | | | |
| N N | | Insurance Company | | | Individual | | | | | |
| 5 | | ALLSTATE-INS-CO | | | | REBECCA WENDT | | | | |
| | | | | | INEBEGOR IVE | | | | | |
| | | Individual | | | | | | | | |
| | | Driver | 14/11 | 1440 | Citations Issued 2 | Citations Issued Sex | | | | |
| | Ļ | (414) 241-5417 | TERRANCE WILLIAMS | | | MALE | | | | |
| | INDIVIDUAL | (414) 241-3417 | | | Date of Birth | Race | CAN AMERICAN | | | |
| ╘ | ₽ | | | | | | DAN AMERICAN | | | |
| Ę | \leq | Address | /E | | Driver License Nu | ımber | | | | |
| | ž | 131 E ROSEDALE AVE MILWAUKEE, WI 53207, US | | | | | | | | |
| | | IIIIETTAGITEE, TTI GGE | · , · | | | | | | | |
| | | | | | | | | | | |
| | Sat | fety Equipment | Duty C | Crash | Safety Equipment | | | | | |
| | | | | Ta | SHOULDER & LAP BELT | | | | | |
| | | Row 01 - FRONT ROW | | Seat Position 07 - LEFT | SHOULDER & | LAF DELT | | | | |
| | | Helmet Use | | 07 - LEFT | Liebest Compliance | | | | | |
| | | rieilliet Ose | | | Helmet Compliance | | | | | |
| | | Eye Protection | | | Tint Compliance | | | | | |
| | | Lyo i rotosasii | | | Int Compilance | | | | | |
| _ | _ | Inju | ury Sev | verity | Airbag | | | | | |
| 2 | 9 | I | | ARENT INJURY | NON DEPLOYED | | | | | |
| | | Ejected | E | Ejection Path | | | Trapped/Extricated | | | |
| | | NOT EJECTED | l l | NOT EJECTED/NOT AP | PLICABLE | | NOT TRAPPED | | | |
| | | Medical Transport | | | EMS Agency Iden | tifier | EMS Run# | | | |
| | | NOT TRANSPORTED |) | | | | | | | |
| | | Hospital | | | Date of Death | | Time of Death | | | |
| | | | | | | | | | | |
| Distracted By Source | | | | | | | | | | |
| | | Distracted By | stracted | By Source | ACTED' | | | | | |
| | | Distracted By NO | stracted OT AP | By Source PLICABLE (NOT DISTR | ACTED) | | | | | |

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data. $\begin{tabular}{ll} 3 & of & 6 \end{tabular}$

Crash Date 09/12/2023
Crash Time 08:13 AM

SC23-10002 Page 3 of 6

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| 1 | | | Striking Unit # | Location |) | | | | | | |
|------|------------|-------------------------|-------------------------|-----------------------------|-----------|-------------------------------------|-------------------|----------------|----------------|--------------|----------------|
| | | Non Motorist | Ü | | | | | | | | |
| | | Prior Action | | | | | | | | | |
| | | Action | | | | | | | | | |
| | | Action | | | | | | | | | |
| | 7 | | | | | | | | | | |
| l∟ ∣ | INDIVIDUAL | | | | | | | | | | |
| UNIT | ₽ | | | | | | | | | | |
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| | | | | | | | | | | | 1 |
| | | Action Other | | | | | | | | | To/From School |
| | | | Suspected Alco | hol I Ise | | Suspected Drug Use | | | | | |
| | L | Drug & Alcohol | NO | 1101 000 | | NO | | | | | |
| 1 | | Alcohol Test Given | | Alcohol | Test Type | | | | Alcohol Test | Results | |
| | | TEST NOT GIVEN | | | ,, | | | | | | |
| İ | | Drug Test Given | | Drug Te | st Type | | Drug ⁻ | Test Results | 5 | | |
| | | TEŠT NOT GIVEN | | | | | | | | | |
| 2 | 001 | Drug Type | | | | | | | | | |
| ٦ | 0 | | | | | | | | | | |
| • | | Individual Condition | | | | | | | | | |
| | | | | | | | | | | | |
| | | APPEARED NORI | MAL | | | | | | | | |
| | , | Violations | | | | | | | | | |
| | | UTC Number | Issue To? | Statute Numb | er | Description | | | | | |
| | 2 | BK260484 | 001 | 346.89(1) | | INATTENTIVE DRIVI | ING | | | | |
| | 05 | UTC Number BK260483 | Issue To? 001 | Statute Numb 343.44(1)(a | er) | Description OPERATING WHILE | SUSF | PENDED | | | |
| • | Uni | Summary • | | | | | | | | | |
| | | Status | | | Ve | Vehicle Operating As Classification | | | | | |
| | IN T | RANSIT | | | D | D CLASS | | | AUTOMOBILE | | |
| 02 | | icle Type | | | | | | | Operating As | s Endorsem | nents |
| 0 | | ASSENGER CAR | | | | Total # Oitstans Issued | | | | | |
| | Tota 1 | I Occs Train/Bus # Re | | # Recorded | 0 | otal # Citations Issued | | Total Trail 0 | ers | Total HazN | Mat Types |
| | | rance? | Direction (| Of Travel | | | | Speed Limit | | Total Lane | · S |
| ∟ | YES | | WESTBO | | | Mark | | 25 | | 4 | |
| F | Most | Harmful Event: Collisi | on With | | | Special Function | | | Emergency | | cle Use |
| Ω | MO | TOR VEH IN TRANS | SPORT | | N | O SPECIAL FUNCTIO | N | | NOT APPLICABLE | | |
| | | ic Way | | | | affic Control | | | Traffic Contr | ol Inoperati | ve/Missing |
| | | D-WAY, NOT DIVID | ED | | | O CONTROL | | | NO | | |
| | | ace Type NCRETE | | | | oad Curvature TRAIGHT | | | Road Grade | | |
| | | k Bus or HazMat | | | | IIIAIOIII | | | UPHILL | | |
| | NO | = 30 0dzma | | | | | | | | | |
| | , | Vehicle | | | | | | | | | |
| | | License Plate Numbe | r | | F | Plate Type | | St | Country of Iss | suance | |
| | | AAJ9088 | | | _ A | AUT - AUTOMOBILE | | WI | UNITED ST | ATES | |
| 05 | 02 | Vehicle Identification | | | | /lake | | Year | Model | | |
| • | 0 | JHMGD37688S023 | 3605 | | | HONDA | | 2008 | FIT | | |
| | | Color SIL - SILVER (ALU | IMINITIMA | | | Body Style HB - HATCHBACK | | | Bus Use | | |
| l | | SIL - SILVLIN (ALC | J | | 1 | ID HATCHDACK | | | | | |

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

4 of 6

Crash Date 09/12/2023
Crash Time 08:13 AM

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | щ | Initial Contact Point 05 - RIGHT REAR CORNER | | ehicle Damage | | | 7 8 9 10 11 | |
|-----------|------------|---|---|--|------------------|--------------------------|-------------|--|
| LNN | VEHICLE | | | | | | | |
| ١₹ | Ī | Extent Of Damage | | 04 - RIGHT SIDE REA | R, 05 - RIGHT RE | AR CORNER | | |
| - | Ä | FUNCTIONAL DAMAGE | | 5 4 3 2 1 | | | | |
| | | Towed Due To Damage | V | Vehicle Removed By | | | | |
| | | NOT TOWED | | | | | | |
| | | What Driver Was Doing | V | ehicle Factors | | | | |
| | | STOP IN TRAFFIC | | | | | | |
| | | Driver Prior Action Other | N | IOT APPLICABLE | | | | |
| | | | | | | | | |
| | | Driver Actions | | | | | | |
| | ш | NO CONTRIBUTING ACTION | N | | | | | |
| - | VEHICLE | | | | | | | |
| L N | ¥ | | | | | | | |
| - | 回 | | | | | | | |
| | | | | | | | | |
| | | Owner Name | | Owner Address | | | | |
| ١ | ٠. | JOYCE KOLENO | | S3056 E FOX HILL | | | | |
| 02 | 05 | (910) 538-8137 | | BARABOO, WI 53 | 913 , US | | | |
| | | | | | | | | |
| ' | | Sequence Of Events | | | | | | |
| | | Event | | | | | | |
| | 2 | MOTOR VEH IN TRANSPOR | RT | | | | | |
| | ٠. | Event | | | | | | |
| | S Event | | | | | | | |
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| | | Event | | | | | | |
| | 9 | | | | | | | |
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| ١. ا | | Policy Holder | | | | | | |
| ₽ | | Policy Holder | | Individual | | | | |
| TINO | | Insurance Company | RANCE-CO | Individual JOYCE KOLENO | | | | |
| TINO | | Insurance Company GEICO-ADVANTAGE-INSUR | RANCE-CO | Individual JOYCE KOLENO | | | | |
| TINO | | Insurance Company GEICO-ADVANTAGE-INSUR Individual | RANCE-CO | JOYCE KOLENO | Isav | | | |
| TIND | | Insurance Company GEICO-ADVANTAGE-INSUR | RANCE-CO | JOYCE KOLENO Citations Issued | Sex | | | |
| TINO | | Insurance Company GEICO-ADVANTAGE-INSUR Individual Driver | RANCE-CO | OCITATIONS ISSUED | FEMALE | | | |
| | | Insurance Company GEICO-ADVANTAGE-INSUR Individual Driver JOYCE KOLENO | RANCE-CO | JOYCE KOLENO Citations Issued | | | | |
| | | Insurance Company GEICO-ADVANTAGE-INSUR Individual Driver JOYCE KOLENO (910) 538-8137 | RANCE-CO | Citations Issued O Date of Birth | FEMALE Race | | | |
| TINU TINU | | Insurance Company GEICO-ADVANTAGE-INSUR Individual Driver JOYCE KOLENO | RANCE-CO | OCITATIONS ISSUED | FEMALE Race | | | |
| | | Insurance Company GEICO-ADVANTAGE-INSUR Individual Driver JOYCE KOLENO (910) 538-8137 Address | RANCE-CO | Citations Issued O Date of Birth | FEMALE Race | | | |
| | | Insurance Company GEICO-ADVANTAGE-INSUR Individual Driver JOYCE KOLENO (910) 538-8137 Address S3056 E FOX HILL RD | RANCE-CO | Citations Issued O Date of Birth | FEMALE Race | | | |
| | INDIMIDIAL | Insurance Company GEICO-ADVANTAGE-INSUR Individual Driver JOYCE KOLENO (910) 538-8137 Address S3056 E FOX HILL RD BARABOO, WI 53913 , US | | Citations Issued 0 Date of Birth Driver License Number | FEMALE Race | | | |
| | INDIMIDIAL | Insurance Company GEICO-ADVANTAGE-INSUR Individual Driver JOYCE KOLENO (910) 538-8137 Address S3056 E FOX HILL RD | | Citations Issued O Date of Birth | FEMALE Race | | | |
| | INDIMIDIAL | Insurance Company GEICO-ADVANTAGE-INSUR Individual Driver JOYCE KOLENO (910) 538-8137 Address S3056 E FOX HILL RD BARABOO, WI 53913 , US On Duty Cr | rash | Citations Issued 0 Date of Birth Driver License Number | Race WHITE | | | |
| | INDIMIDIAL | Insurance Company GEICO-ADVANTAGE-INSUR Individual Driver JOYCE KOLENO (910) 538-8137 Address S3056 E FOX HILL RD BARABOO, WI 53913 , US fety Equipment Row | rash Seat Position | Citations Issued 0 Date of Birth Driver License Number Safety Equipment | Race WHITE | | | |
| | INDIMIDIAL | Insurance Company GEICO-ADVANTAGE-INSUR Individual Driver JOYCE KOLENO (910) 538-8137 Address S3056 E FOX HILL RD BARABOO, WI 53913 , US On Duty Cr | rash | Citations Issued 0 Date of Birth Driver License Number Safety Equipment | Race WHITE | | | |
| | INDIMIDIAL | Insurance Company GEICO-ADVANTAGE-INSUR Individual Driver JOYCE KOLENO (910) 538-8137 Address S3056 E FOX HILL RD BARABOO, WI 53913 , US Fety Equipment Row 01 - FRONT ROW | rash Seat Position | Date of Birth Driver License Number Safety Equipment SHOULDER & LAP | Race WHITE | | | |
| | INDIMIDIAL | Insurance Company GEICO-ADVANTAGE-INSUR Individual Driver JOYCE KOLENO (910) 538-8137 Address S3056 E FOX HILL RD BARABOO, WI 53913 , US Fety Equipment Row 01 - FRONT ROW | rash Seat Position | Date of Birth Driver License Number Safety Equipment SHOULDER & LAP | Race WHITE | | | |
| | INDIMIDIAL | Insurance Company GEICO-ADVANTAGE-INSUR Individual Driver JOYCE KOLENO (910) 538-8137 Address S3056 E FOX HILL RD BARABOO, WI 53913 , US fety Equipment Row 01 - FRONT ROW Helmet Use | rash Seat Position | Citations Issued 0 Date of Birth Driver License Number Safety Equipment SHOULDER & LAP Helmet Compliance | Race WHITE | | | |
| TINO | INDIVIDUAL | Insurance Company GEICO-ADVANTAGE-INSUR Individual Driver JOYCE KOLENO (910) 538-8137 Address S3056 E FOX HILL RD BARABOO, WI 53913 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Seve | rash Seat Position 07 - LEFT | Citations Issued 0 Date of Birth Driver License Number Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance | Race WHITE | | | |
| | INDIMIDIAL | Insurance Company GEICO-ADVANTAGE-INSUR Individual Driver JOYCE KOLENO (910) 538-8137 Address S3056 E FOX HILL RD BARABOO, WI 53913 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Seve | rash Seat Position 07 - LEFT erity ARENT INJURY | Citations Issued 0 Date of Birth Driver License Number Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance | Race WHITE | | | |
| TINO | INDIVIDUAL | Insurance Company GEICO-ADVANTAGE-INSUR Individual Driver JOYCE KOLENO (910) 538-8137 Address S3056 E FOX HILL RD BARABOO, WI 53913 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Figerated Injury | Seat Position 07 - LEFT erity ARENT INJURY | Citations Issued 0 Date of Birth Driver License Number Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED | Race WHITE | Trapped/Extricated | | |
| TINO | INDIVIDUAL | Insurance Company GEICO-ADVANTAGE-INSUR Individual Driver JOYCE KOLENO (910) 538-8137 Address S3056 E FOX HILL RD BARABOO, WI 53913 , US fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Figeted NOT EJECTED Injury Injury Sever NO APPA | rash Seat Position 07 - LEFT erity ARENT INJURY | Citations Issued 0 Date of Birth Driver License Number Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED | Race WHITE | NOT TRAPPED | | |
| TINO | INDIVIDUAL | Insurance Company GEICO-ADVANTAGE-INSUR Individual Driver JOYCE KOLENO (910) 538-8137 Address S3056 E FOX HILL RD BARABOO, WI 53913 , US fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Figeted NOT EJECTED Medical Transport | Seat Position 07 - LEFT erity ARENT INJURY | Citations Issued 0 Date of Birth Driver License Number Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED | Race WHITE | | | |
| TINO | INDIVIDUAL | Insurance Company GEICO-ADVANTAGE-INSUR Individual Driver JOYCE KOLENO (910) 538-8137 Address S3056 E FOX HILL RD BARABOO, WI 53913 , US fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Figeted NOT EJECTED Medical Transport NOT TRANSPORTED | Seat Position 07 - LEFT erity ARENT INJURY | Citations Issued 0 Date of Birth Driver License Number Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED ICABLE EMS Agency Identifier | Race WHITE | NOT TRAPPED EMS Run # | | |
| TINO | INDIVIDUAL | Insurance Company GEICO-ADVANTAGE-INSUR Individual Driver JOYCE KOLENO (910) 538-8137 Address S3056 E FOX HILL RD BARABOO, WI 53913 , US fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Figeted NOT EJECTED Medical Transport | Seat Position 07 - LEFT erity ARENT INJURY | Citations Issued 0 Date of Birth Driver License Number Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED | Race WHITE | NOT TRAPPED | | |

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

5 of 6

Crash Date 09/12/2023
Crash Time 08:13 AM

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | | Distracted By | Distracted By Source NOT APPLICABL | E (NOT DISTRAC | CTED) | | | |
|-----|------------|-------------------------------------|------------------------------------|-------------------|-----------------------|-------------------|----------------------|-------------------|
| | | Distracted By Action NOT DISTRACTED | 1 | | | | | |
| | | Non Motorist | Striking Unit # | Location | | | | |
| | | Prior Action | | | | | | |
| | | Action | | | | | | |
| l. | UAL | | | | | | | |
| TNO | INDIVIDUAL | | | | | | | |
| | N N | | | | | | | |
| | | Astion Other | | | | | | To /Sauce Oak and |
| | | Action Other | | | | | | To/From School |
| | L | Drug & Alcohol | Suspected Alcohol Us NO | se | Suspected Drug Use NO | | | |
| | | Alcohol Test Given TEST NOT GIVEN | | Alcohol Test Type | | | Alcohol Test Results | |
| | | Drug Test Given TEST NOT GIVEN | | Drug Test Type | | Drug Test Results | <u> </u> | |
| 05 | 005 | Drug Type | | | | | | |
| | | Individual Condition | | | | | | |
| | | APPEARED NORM | IAL | | | | | |
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