## **6TL0C22XZL** 23-11914

## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash Document #		Agency Crash Number 23-11914				Investigating Officer/Deputy  DEPUTY A. WILCOX				
77	Crash Date 11/03/2023	Crash Time 04:10 AM		Date Arrived		Time	Time Arrived					
22X	Date Notified 11/03/2023	Time Notified 04:27 AM			Total Units 01		Total <b>00</b>		Injured Total Killed <b>00</b>			
6TL0C22XZI	On Emergency Hi	and Run Lane Clos		ure Wor		rk Zone	one Tra		owed	Reporting Threshold		
<b>ET</b>	Government Property	hool Zone	School Bus Related NO			Tags	Tags					
	<b>✓</b> Reportable	Crash Type NON-DOMESTICATED ANIMAL W/ NO INJUR			Y Amended			Secondary Crash				
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.											
ì	Location											
i	ON CTHB WB					Latitude Longitude						
	554 FT E					43.251570811 -90.18582389						
	OF STRANG RD											
	IN THE TOWN OF BEAR CREEK IN SAUK COUNTY							Y Coord 479368				
							Structure Type NO STRUCTURE					
-	Crash Scene					1						
,	First Harmful Event					Le:						
		A. (A. D.C.)					nful Event Lo	ocation				
l	NON DOMESTICATED ANIM	AL (ALIVE)				ON ROA						
	Manner of Collision					Light Condition						
	00 - NO COLLISION W/VEHIC	CLE IN TRANSF	PORT									
	Road Surface Condition(s)					Roadway	Factor(s)					
ŀ	Environment Factor(s)											
	Livilonnent i actor(s)											
ı	Weather Condition(s)											
ļ												
	Animal Type					Relation To Trafficway						
	DEER					TRAFFICWAY - ON ROAD						
	Crash Classification - Location					Crash Classification - Jurisdiction						
	PUBLIC PROPERTY				NO SPECIAL JURISDICTION							
	Tribal Land					Access Control Special Study						
L	Unit Commons											
	Unit Summary Unit Status		I Vob	iala Oparat	ting As C	lassification		T 1 1 14 T				
					/ehicle Operating As Classification			Unit Type				
	IN TRANSIT D CLASS					TRUCK Operating As Endorsements						
01	Vehicle Type							Operating i	As Endorser	nents		
_	UTILITY TRUCK/PICKUP TRUCK						Total Trailers Total HazMat Types					
	Total Occs Train/Bus # Recorded  1			Total # Citations Issued		Total Trai		illers Total Hazi		Mat Types		
ŀ		Direction Of Travel	on Of Travel				Speed Limi		Total Lane	00		
ا ہے		WESTBOUND	Pre Crash <sup>-</sup> Mark			Fire Speed		I Otal Lall		<b></b>		
LIND	Most Harmful Event: Collision With			Special Function			1		Emergency Motor Vehicle Use			
$\supset$	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCTION					NOT APPLICABLE			
}	Traffic Way			Traffic Control				Traffic Control Inoperative/Missing				
								g				
ŀ	Surface Type			Road Curvature				Road Grade				

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	Truc	k Bus or HazMat					. ,			
	,	Vehicle								
		License Plate Number PH7625		Plate Type  LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES				
6	5	Vehicle Identification Number  1FTFW1E46KFA76381		Make FORD	Year <b>2019</b>	Model F150				
		Color BLK - BLACK		Body Style PK - PICKUP Bus Use						
UNIT	VEHICLE	Initial Contact Point  12 - FRONT  Extent Of Damage  DISABLING DAMAGE		Vehicle Damage  O1 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT  5 4 3 2 1						
		Towed Due To Damage TOWED DUE TO DISABLING	G DAMAGE	Vehicle Removed By						
		What Driver Was Doing		Vehicle Factors						
		Driver Prior Action Other								
UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION								
10	10	Owner Name		Owner Address						
_		Policy Holder								
UNIT		Insurance Company STATE-FARM-GENERAL-IN:	s-co	Individual  DANIEL GRISHAM						
		Individual								
		Driver DANIEL GRISHAM		Citations Issued Sex  0 MALE						
_	DIVIDUAL	(262) 224-8604		Date of Birth	Race WHITE					
UNIT		Address 6035 COUNTY ROAD K		Driver License Number						
	Ξ	HARTFORD, WI 53027 , US		STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sai	L On Duty Cr <b>fety Equipment</b>	Safety Equipment							
		Row	Seat Position	SHOULDER & LAP	BELT					
		Helmet Use		Helmet Compliance						
	100	Eye Protection		Tint Compliance						
10		Injury Severity NO APPARENT INJURY		Airbag						
		Ejected Ejection Path				Trapped/Extricated				
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #				
		Hospital		Date of Death		Time of Death				

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								·
Distracted By Source								
		Distracted By Action						
	,	Non Motorist	Striking Unit#	Location				
		Prior Action						
		Action						
	JAL							
LNO	INDIVIDUAL							
	INDI							
		Action Other						To/From School
	Drug & Alcohol NO			se	Suspected Drug Use NO			
		Alcohol Test Given Alcohol Test Ty TEST NOT GIVEN			1		Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results			
10	001	Drug Type						
Individual Condition								
		APPEARED NORM	MAL					