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 SC23-11939 | | | Investigating Officer/Deputy DEPUTY M. PETERSON | | |
|-------------|--|---------------------------|------------------|-----------------------------------|----------------------|-------------------------|--|--------------------------|--|
| B 2 | Crash Date 11/03/2023 | Crash Time 06:35 PM | | Date Arrived 11/03/2023 | | Time Arrived 06:35 PM | | | |
| 34 2 | Date Notified 11/03/2023 | Time Notified 06:35 PM | | Total Units 01 | | Total Injured 00 | Total Kill | ed | |
| 61L0D942B | On Emergency Hit | and Run | Lane Closu | ire | ☐ Work Zone | Trailer | or Towed | Reporting Threshold | |
| 6 I L | Government Property | Active Sc | hool Zone | School NO | Bus Related | Tags | | | |
| | ✓ Reportable | Crash Type DT4000 (STA | NDARD CRASH | 1) | | Amend | ed | Secondary Crash | |
| | Description | I | | | | <u>'</u> | | | |
| | Diagram | | | | | | Reconstruction Photos By | n By | |
| | | JSH 12 | \$ |) | | | | | |
| | | | NOT TO S | SCALE | | STOP | Additional Info | ormation | |
| | | | | | | SKIHIRD | | | |
| | | | | | USH 12 | | | | |
| | | | | * | | | | | |
| | | nt officer, agre | e that I have no | ot added | d any CJIS data in t | his report. | | | |
| | UNIT 1 WAS TRAVELING SOUTH O | N USH 12 AND EN | NTERED THE TURN | N LANE, 1 | TO MAKE A U-TURN, IN | THE CROSS OVER | | | |
| | RD.UNIT 1 MISSED THE CROSS ON NO AIRBAG DEPLOYMENT, NO INJ COULD NOT SEE WHERE TO TURI RIDE FROM THE SCENE. | URIES, AND ALL | OCCUPANTS WER | E WEARI | NG SEAT BELTS. THE I | DRIVER SAID SHE | KNEW SHE WA | AS IN THE TURN LANE, BUT | |

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

1 of 5

Crash Date 11/03/2023
Crash Time 06:35 PM

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

| ı | Loc | ation | | | | | | | | |
|------------|--|--|---|--|---|--|--|--|---------------------------|--|
| Ī | | USH12 EB | | | Latitude | | | Longitud | de | |
| | | T E | | | 43.420 | 173963 | | -89.773 | 3537788 | |
| | OF USH12 EB IN THE TOWN OF SUMPTER IN SAUK COUNTY | | | | X Coord | inate | | Y Coord | linate | |
| | | | | | 275475 | 275475.0625 | | 4811213 | | |
| | | | | | | Structure Type | | | | |
| L | | | | | NO ST | RUCTURE | | | | |
| (| Cra | sh Scene | | | | | | | | |
| Ī | First | Harmful Event | | | First Ha | mful Event I | Location | | | |
| | DIT | - | | | ROADS | ROADSIDE | | | | |
| | | ner of Collision | | | Light Condition | | | | | |
| | | | HICLE IN TRANSPORT | | | DARK/UNLIT Roadway Factor(s) | | | | |
| | Road | d Surface Condition(s) Y | | | Roadwa | | | | | |
| - | Envi | ronment Factor(s) | | | | _ | | | | |
| | NOI | | | | NONE | | | | | |
| | | | | | NONE | | | | | |
| | Wea | ther Condition(s) | | | | | | | | |
| | CLE | EAR | | | | | | | | |
| - | Anim | nal Type | | | | To Trafficw | • | • | | |
| ŀ | Cras | sh Classification - Location | 1 | | | | - Jurisdiction | | | |
| | PUBLIC PROPERTY | | | | | | RISDICTION | | | |
| | Tribal Land Within Interchange Area Junction Location Inter | | | | | Access Control Special Stud NO CONTROL | | Special Study | | |
| ŀ | | | | Intersection Type | ection Type | | | | | |
| | NO | _ | CROSSOVER-RELATED | 1 | NOT AN INTERS | ECTION | | | | |
| | | | | | | | | | | |
| į | Uni | t Summary 💳 | | | | | | | | |
| į | | t Summary Status | | Vehicle Ope | erating As Classification | on | Unit Type | | | |
| Į | Unit IN T | Status RANSIT | | Vehicle Ope | erating As Classification | on | AUTOMO | | | |
| | Unit IN T Vehi | Status RANSIT icle Type | | - | erating As Classification | on | | | ments | |
| 01 | Unit IN T Vehi PAS | Status RANSIT icle Type SSENGER CAR | L Tania (Dua # Dagardad | D CLASS | | | AUTOMO Operating A | As Endorse | | |
| | Unit IN T Vehi PAS Tota | Status RANSIT icle Type | Train/Bus # Recorded | D CLASS | erating As Classification | Total Tra | AUTOMO Operating A | As Endorse | ments :Mat Types | |
| | Unit IN T Vehi PAS Tota 2 | Status FRANSIT ICIE Type SSENGER CAR II Occs | | Total # Cita | tions Issued | Total Tra | AUTOMO Operating A | Total Haz | Mat Types | |
| 01 | Unit IN T Vehi PAS Tota 2 | Status FRANSIT Icle Type SSENGER CAR II Occs rance? | Train/Bus # Recorded Direction Of Travel SOUTHBOUND | Total # Cita | | Total Tra | AUTOMO Operating A | As Endorse | Mat Types | |
| 01 | Unit IN T Vehi PAS Tota 2 Insur YES | Status FRANSIT Icle Type SSENGER CAR II Occs rance? | Direction Of Travel SOUTHBOUND | Total # Cita 0 Pre Special Fun | tions Issued CrashTire Mark | Total Tra 0 Speed Li | AUTOMO Operating A iilers imit Emergency | Total Haz 0 Total Lan 4 Motor Veh | es icle Use | |
| | Unit IN T Vehi PAS Tota 2 Insui YES Most | Status FRANSIT icle Type SSENGER CAR Il Occs rance? St t Harmful Event: Collision (CH | Direction Of Travel SOUTHBOUND | Total # Cita 0 Pre Special Fun | tions Issued CrashTire Mark | Total Tra 0 Speed Li | AUTOMO Operating A sillers imit Emergency NOT APP | Total Haz 0 Total Lan 4 Motor Veh | es icle Use | |
| 01 | Unit IN T Vehi PAS Tota 2 Insui YES Most DIT(| Status FRANSIT icle Type SSENGER CAR Il Occs rance? St t Harmful Event: Collision of CH fic Way | Direction Of Travel SOUTHBOUND With | Total # Cita 0 Pre Special Fur NO SPEC | CrashTire Mark action IIAL FUNCTION | Total Tra 0 Speed Li | AUTOMO Operating A sillers imit Emergency NOT APP Traffic Conf | Total Haz 0 Total Lan 4 Motor Veh | es icle Use | |
| 01 | Unit IN T Vehi PAS Tota 2 Insui YES Most DITO Traff | Status FRANSIT icle Type SSENGER CAR Il Occs rance? St t Harmful Event: Collision of the Character of the Ch | Direction Of Travel SOUTHBOUND With | Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont | CrashTire Mark action IIAL FUNCTION rol ROL | Total Tra 0 Speed Li | AUTOMO Operating A sillers imit Emergency NOT APP Traffic Cont | Total Haz 0 Total Lan 4 Motor Veh LICABLE | es icle Use | |
| 01 | Vehice PAS Tota 2 Insurant YES Most DITO Surface Surface PAS Traff | Status FRANSIT icle Type SSENGER CAR Il Occs rance? St t Harmful Event: Collision V CH fic Way IDED HWY W/O TRAF ace Type | Direction Of Travel SOUTHBOUND With | Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva | CrashTire Mark action IIAL FUNCTION rol ROL | Total Tra 0 Speed Li | AUTOMO Operating A sillers imit Emergency NOT APP Traffic Cont NO Road Grade | Total Haz 0 Total Lan 4 Motor Veh LICABLE | es icle Use | |
| 01 | Unit IN T Vehi PAS Tota 2 Insur YES DITC Traff DIVI Surfa BLA | Status FRANSIT icle Type SSENGER CAR Il Occs rance? St t Harmful Event: Collision of the Character of the Ch | Direction Of Travel SOUTHBOUND With | Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont | CrashTire Mark action IIAL FUNCTION rol ROL | Total Tra 0 Speed Li | AUTOMO Operating A sillers imit Emergency NOT APP Traffic Cont | Total Haz 0 Total Lan 4 Motor Veh LICABLE | es icle Use | |
| 01 | Unit IN T Vehi PAS Tota 2 Insur YES Most DITC Traff DIVI Surfa BLA Truc NO | Status FRANSIT icle Type SSENGER CAR II Occs rance? S It Harmful Event: Collision \ CH Fic Way IDED HWY W/O TRAF ace Type ACKTOP (BITUMINOU Ick Bus or HazMat | Direction Of Travel SOUTHBOUND With | Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva | CrashTire Mark action IIAL FUNCTION rol ROL | Total Tra 0 Speed Li | AUTOMO Operating A sillers imit Emergency NOT APP Traffic Cont NO Road Grade | Total Haz 0 Total Lan 4 Motor Veh LICABLE | es icle Use | |
| 01 | Unit IN T Vehi PAS Tota 2 Insur YES Most DITC Traff DIVI Surfa BLA Truc NO | Status FRANSIT icle Type SSENGER CAR Il Occs rance? St Harmful Event: Collision V CH fic Way IDED HWY W/O TRAF ace Type ACKTOP (BITUMINOU ik Bus or HazMat | Direction Of Travel SOUTHBOUND With | D CLASS Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH | tions Issued CrashTire Mark cition IIAL FUNCTION rol ROL ature T | Total Tra 0 Speed Li 55 | AUTOMO Operating A illers mit Emergency NOT APP Traffic Cont NO Road Grade LEVEL | Total Haz 0 Total Lan 4 Motor Veh LICABLE | es icle Use | |
| 01 | Unit IN T Vehi PAS Tota 2 Insur YES Most DITC Traff DIVI Surfa BLA Truc NO | Status FRANSIT icle Type SSENGER CAR Il Occs rance? St Harmful Event: Collision V CH fic Way IDED HWY W/O TRAF ace Type ACKTOP (BITUMINOU ick Bus or HazMat Vehicle License Plate Number | Direction Of Travel SOUTHBOUND With | D CLASS Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH | tions Issued CrashTire Mark lotion IAL FUNCTION rol ROL lture T | Total Tra 0 Speed Li 55 | AUTOMO Operating A illers mit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is | Total Haz 0 Total Lan 4 Motor Veh LICABLE rrol Inopera | es icle Use | |
| ONI 01 | Unit IN T Vehi PAS Tota 2 Insur YES Most DITC Traff DIVI Surfa BLA Truc NO | Status FRANSIT icle Type SSENGER CAR Il Occs rance? St Harmful Event: Collision V CH fic Way IDED HWY W/O TRAF ace Type ACKTOP (BITUMINOU ik Bus or HazMat Vehicle License Plate Number L263240 | Direction Of Travel SOUTHBOUND With FIC BARRIER S) | D CLASS Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH | tions Issued CrashTire Mark cition IIAL FUNCTION rol ROL ature T | Total Tra 0 Speed Li 55 | AUTOMO Operating A illers imit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED S' | Total Haz 0 Total Lan 4 Motor Veh LICABLE rrol Inopera | es icle Use | |
| 01 | Unit IN T Vehi PAS Tota 2 Insur YES Most DITC Traff DIVI Surfa BLA Truc NO | Status FRANSIT icle Type SSENGER CAR Il Occs rance? St Harmful Event: Collision V CH fic Way IDED HWY W/O TRAF ace Type ACKTOP (BITUMINOU ick Bus or HazMat Vehicle License Plate Number | Direction Of Travel SOUTHBOUND With FIC BARRIER S) | D CLASS Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AU | tions Issued CrashTire Mark lotion IAL FUNCTION rol ROL lture T | Total Tra 0 Speed Li 55 | AUTOMO Operating A illers mit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is | Total Haz 0 Total Lan 4 Motor Veh LICABLE rrol Inopera | es icle Use | |
| ONI 01 | Unit IN T Vehi PAS Tota 2 Insur YES Most DITC Traff BLA Truc NO | Status TRANSIT icle Type SSENGER CAR Il Occs rance? St Harmful Event: Collision V CH fic Way IDED HWY W/O TRAF ace Type ACKTOP (BITUMINOU ik Bus or HazMat Vehicle License Plate Number L263240 Vehicle Identification Nur | Direction Of Travel SOUTHBOUND With FIC BARRIER S) | D CLASS Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AU Make | CrashTire Mark ICTION ITAL FUNCTION ITAL ITAL ITOMOBILE | Total Tra 0 Speed Li 55 | AUTOMO Operating A illers imit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED S' Model | Total Haz 0 Total Lan 4 Motor Veh LICABLE rrol Inopera | es icle Use | |
| ONI 01 | Unit IN T Vehi PAS Tota 2 Insur YES Most DITC Traff BLA Truc NO | Status TRANSIT icle Type SSENGER CAR Il Occs rance? St Harmful Event: Collision of the co | Direction Of Travel SOUTHBOUND With FIC BARRIER S) | Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AU Make NISSAN Body Style 4D - 4DR | CrashTire Mark ICTION ITAL FUNCTION ITAL FUNCTION ITAL ITAL ITAL ITOMOBILE | Total Tra 0 Speed Li 55 | AUTOMO Operating A illers imit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED S' Model ALTIMA | Total Haz 0 Total Lan 4 Motor Veh LICABLE rrol Inopera | es icle Use | |
| 01 UNII 01 | Unit IN T Vehi PAS Tota 2 Insur YES Most DITT Traff DIVI Truck NO | Status TRANSIT icle Type SSENGER CAR Il Occs rance? St Harmful Event: Collision of the co | Direction Of Travel SOUTHBOUND With FIC BARRIER S) | Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AL Make NISSAN Body Style 4D - 4DR Vehicle Da | CrashTire Mark ICTION ITAL FUNCTION TOI ROL STUTE TOMOBILE | Total Tra 0 Speed Li 55 | AUTOMO Operating A iilers iiilers mit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED S' Model ALTIMA Bus Use | Total Haz 0 Total Lan 4 Motor Veh LICABLE rrol Inopera | es icle Use itive/Missing | |
| 01 UNII 01 | Unit IN T Vehi PAS Tota 2 Insur YES Most DITT Traff DIVI Truck NO | Status TRANSIT icle Type SSENGER CAR Il Occs rance? St Harmful Event: Collision of the co | Direction Of Travel SOUTHBOUND With FIC BARRIER S) | Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AL Make NISSAN Body Style 4D - 4DR Vehicle Da 01 - RIGI | CrashTire Mark ICTION ITAL FUNCTION TOI ROL INTURE T ITOMOBILE ITTOMOBILE ITTOMOBILE | Total Tra 0 Speed Li 55 St IL Year 2010 | AUTOMO Operating A illers mit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED S' Model ALTIMA Bus Use | Total Haz 0 Total Lan 4 Motor Veh LICABLE rol Inopera | es icle Use | |
| ONI 01 | Unit IN T Vehi PAS Tota 2 Insur YES Most DITO Traff DIVI Surfa BLA Truc | Status TRANSIT icle Type SSENGER CAR Il Occs rance? St Harmful Event: Collision of the co | Direction Of Travel SOUTHBOUND With FIC BARRIER S) | Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AL Make NISSAN Body Style 4D - 4DR Vehicle Da 01 - RIG FRONT, | CrashTire Mark ICTION ITAL FUNCTION TOI ROL STUTE TOMOBILE | St IL Year 2010 ER, 02 - RI RONT, 11 - | AUTOMO Operating A illers mit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED S' Model ALTIMA Bus Use GHT SIDE LEFT FRON | Total Haz 0 Total Lan 4 Motor Veh LICABLE rol Inopera | es icle Use itive/Missing | |

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

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Crash Date 11/03/2023
Crash Time 06:35 PM

SC23-11939 Page 2 of 5

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | | Towed Due To Damage | | Vehicle Removed By | | | |
|------|------------|---|--------------------------|---|----------|--------------------|--|
| | | TOWED DUE TO DISABLIN | IG DAMAGE | CRAIGS TOWING | | | |
| | | What Driver Was Doing GOING STRAIGHT | | Vehicle Factors | | | |
| | | Driver Prior Action Other | | NOT APPLICABLE | | | |
| | | Diver i nei Aeden eure | | | | | |
| ⊨ | VEHICLE | Driver Actions LOOKED BUT DID NOT SE | E | | | | |
| TIND | VEH | | | | | | |
| 2 | 2 | Owner Name EILEEN LAWING | | Owner Address 9704 COOK AVE OAK LAWN, IL 60 | 453 , US | | |
| | | Sequence Of Events | | | | | |
| | 5 | Event DITCH | | | | | |
| | 05 | Event | | | | | |
| | 03 | Event | | | | | |
| | 4 | Event | | | | | |
| | | L Policy Holder | | | | | |
| F | · ' | Insurance Company | | Individual | | | |
| 5 | | HARTFORD-INS-CO-OF-IL | LINOIS | EILEEN LAWING | | | |
| | | Individual | | | | | |
| | | Driver EILEEN LAWING | | Citations Issued Sex 0 FEMALE | | | |
| | INDIVIDUAL | LILLER LAWING | | Date of Birth Race WHITE | | | |
| FIN | ₹ | Address | | Driver License Number | | | |
| 5 | ğ | 9704 COOK AVE OAK LAWN, IL 60453, US | | Dilver License Number | | | |
| | _ | CAR EAVIN, IE 00433 , 03 | | | | | |
| | Sat | On Duty C | Crash | Safety Equipment | | | |
| | | Row 01 - FRONT ROW | Seat Position 07 - LEFT | SHOULDER & LAP | BELT | | |
| | | Helmet Use | | Helmet Compliance | | | |
| | | Eye Protection | | Tint Compliance | | | |
| 2 | 001 | Injury Severity NO APPARENT INJURY | | Airbag NON DEPLOYED | | | |
| | | | Ejection Path | NON DEI EGTED | | Trapped/Extricated | |
| | | | NOT EJECTED/NOT API | PLICABLE | | NOT TRAPPED | |
| | | Medical Transport NOT TRANSPORTED | | EMS Agency Identifier | | EMS Run # | |
| | | Hospital | | Date of Death | | Time of Death | |
| | | Distracted By Distracted NOT AP | By Source | ACTED) | | | |
| | | Distracted By Action | , | • | | | |
| | | NOT DISTRACTED | | | | | |

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data. $\begin{tabular}{ll} 3 & of & 5 \end{tabular}$

Crash Date 11/03/2023
Crash Time 06:35 PM

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | | Non Motorist | g Unit# | Location | | | | | |
|------|----------------------|-----------------------------------|----------------------|-------------------|-----------------------------|-------------------|----------------------|----------------|--|
| | | Prior Action | | <u> </u> | | | | | |
| | | | | | | | | | |
| İ | | Action | | | | | | | |
| | _ | | | | | | | | |
| ١. | INDIVIDUAL | | | | | | | | |
| ENS. | <u> </u> | | | | | | | | |
| _ | É | | | | | | | | |
| | Z | | | | | | | | |
| | | | | | | | | | |
| | | Action Other | | | | | | To/From School | |
| | | | | | | | | | |
| | L | Drug & Alcohol NO | cted Alcohol (| Jse | Suspected Drug Use NO | | | | |
| | | Alcohol Test Given | | Alcohol Test Type | <u> </u> | | Alcohol Test Results | | |
| | | TEST NOT GIVEN | | , | | | | | |
| | | Drug Test Given TEST NOT GIVEN | | Drug Test Type | | Drug Test Results | | | |
| | | Drug Type | | | | | | | |
| 2 | 00 | Drug Type | | | | | | | |
| | | | | | | | | | |
| | | Individual Condition | | | | | | | |
| | | APPEARED NORMAL | | | | | | | |
| | | L Individual | | | | | | | |
| | | Passenger | | | Citations Issued | Sex | | | |
| | _ | BERNICE ENRIGHT | | | 0 | FEMALE | | | |
| | A | | | | Date of Birth | Race | | | |
| F | INDIVIDUAL | Address 11456 S SAWYER AVE | | | Driver License Number | | | | |
| ∍ | Ē | | | | | | | | |
| | = | CHICAGO, IL 60655 , U | S | | | | | | |
| | | On Du | ty Crash | | Safety Equipment | | | | |
| | Sat | fety Equipment | ity Ordon | | Salety Equipment | | | | |
| | | Row | Seat Po | | SHOULDER & LAP | BELT | | | |
| | | 01 - FRONT ROW | 09 - R | IGHT | Helmet Compliance | | | | |
| | | Helmet Use | | | Treillet compilation | | | | |
| | | Eye Protection | | | Tint Compliance | | | | |
| | - | Injury Severity | | | Airbog | | | | |
| 2 | 002 | Injury NO A | Seventy PPARENT I | NJURY | Airbag NON DEPLOYED | | | | |
| | | Ejected | Ejection Pa | ath | | | Trapped/Extricated | | |
| | | NOT EJECTED | NOT EJE | CTED/NOT APPL | | | NOT TRAPPED | | |
| | | Medical Transport NOT TRANSPORTED | | | EMS Agency Identifier | | EMS Run# | | |
| | | Hospital | | | Date of Death Time of Death | | | | |
| | | | | | | | | | |
| | Distracted By Source | | | | | | | | |
| | | Distracted By Action | | | | | | | |
| | | Strikin | g Unit# | Location | | | | | |
| | | Non Motorist | | | | | | 44/00/0000 | |

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

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Crash Date 11/03/2023
Crash Time 06:35 PM

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | | Prior Action | | | | | |
|-----|------------|--------------------------------|-------------------|-----------------------|-------------------|----------------------|----------------|
| | | | | | | | |
| İ | | Action | | | | | |
| | | | | | | | |
| | AL | | | | | | |
| ╘ | DO | | | | | | |
| LNO | INDIVIDUAL | | | | | | |
| | P | | | | | | |
| | = | | | | | | |
| | | | | | | | |
| İ | | Action Other | | | | | To/From School |
| | | <u> </u> | | | | | |
| | L | Drug & Alcohol NO | Jse | Suspected Drug Use NO | | | |
| İ | | Alcohol Test Given | Alcohol Test Type | l . | | Alcohol Test Results | |
| | | TEST NOT GIVEN | | | | | |
| | | Drug Test Given TEST NOT GIVEN | Drug Test Type | | Drug Test Results | 5 | |
| | ~ 1 | | | | | | |
| 2 | 002 | Drug Type | | | | | |
| | | | | | | | |
| | | Individual Condition | | | | | _ |
| | | APPEARED NORMAL | | | | | |
| | | | | | | | |