

6TL0F2KRBQ  
23-13544

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

6TL0F2KRBQ

Document Number Override		Primary Crash Document #		Agency Crash Number <b>23-13544</b>		Investigating Officer/Deputy <b>DEPUTY I. GALVAN</b>	
Crash Date <b>12/20/2023</b>		Crash Time <b>11:24 AM</b>		Date Arrived <b>12/20/2023</b>		Time Arrived <b>11:36 AM</b>	
Date Notified <b>12/20/2023</b>		Time Notified <b>11:26 AM</b>		Total Units <b>02</b>		Total Injured <b>00</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"/> 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	
<input type="checkbox"/> Trailer or Towed		<input type="checkbox"/> Reporting Threshold					

Description

Diagram		Reconstruction By	
		Photos By <b>I GALVAN</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 STOP AT STOP SIGN OF THE EXIT/ENTRANCE TO HO CHUNK CASINO LOCATED AT S3214 CTH BD BARABOO, WI. UNIT 1 LOOKED BUT DID NOT SEE UNIT 2 IN CONTINUOUS LEFT TURN LANE TURNING INTO THE CASINO. UNIT 1 STRUCK UNIT 2. MINOR DAMAGE TO BOTH. NO INJURIES REPORTED. UNIT 1 OPERATOR CITED FOR FAIL TO YIELD RIGHT A WAY WHILE MAKING A LEFT TURN. BOTH UNITS REMOVED BY OWNERS.

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Location

ON CTHBD SB 975 FT N OF COOP LN IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude <b>43.527829918</b>	Longitude <b>-89.777961713</b>
	X Coordinate <b>275516.09375</b>	Y Coordinate <b>4823181.5</b>
	Structure Type <b>NO STRUCTURE</b>	

Crash Scene

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>		First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>01 - ANGLE</b>		Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>DRY</b>		Roadway Factor(s) <b>NONE</b>	
Environment Factor(s) <b>NONE</b>			
Weather Condition(s) <b>CLEAR</b>			
Animal Type		Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>		Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land		Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>	

Unit Summary

UNIT 01	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>1</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"/> Pre Crash Tire Mark	Speed Limit <b>N/A</b>	Total Lanes <b>3</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, WITH A CONTINUOUS L</b>		Traffic Control <b>STOP SIGN</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>					

Vehicle

UNIT 01 VEHICLE	License Plate Number <b>AEH1250</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
	Vehicle Identification Number <b>ZACCJBCBXJPH37267</b>		Make <b>JEEP</b>	Year <b>2018</b>	Model <b>RENEGADE</b>	
	Color <b>WHI - WHITE</b>		Body Style <b>4D - 4DR</b>		Bus Use	
	Initial Contact Point <b>11 - LEFT FRONT CORNER</b>		Vehicle Damage <b>11 - LEFT FRONT CORNER</b>			
	Extent Of Damage <b>MINOR DAMAGE</b>					



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UNIT	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OWNER</b>		
	What Driver Was Doing <b>LEFT TURN</b>		Vehicle Factors		
	Driver Prior Action Other		<b>NOT APPLICABLE</b>		
	Driver Actions <b>LOOKED BUT DID NOT SEE</b>				
01	01	Owner Name <b>JANA ANDERSON (815) 289-5024</b>		Owner Address <b>N7511 11TH AVE NEW LISBON, WI 53950 , US</b>	
		<b>Sequence Of Events</b>			
UNIT	01	Event <b>LEFT TURN</b>			
		Event <b>MOTOR VEH IN TRANSPORT</b>			
		Event			
		Event			
UNIT	01	<b>Policy Holder</b>			
		Insurance Company <b>AMERICAN-FAMILY-INS-CO</b>	Individual <b>JANA ANDERSON</b>		
UNIT	01	<b>Individual</b>			
		Driver <b>JANA ANDERSON (815) 289-5024</b>	Citations Issued <b>1</b>	Sex <b>FEMALE</b>	
		Address <b>N7511 11TH AVE NEW LISBON, WI 53950 , US</b>		Date of Birth	Race <b>WHITE</b>
		Driver License Number			
UNIT	01	<b>Safety Equipment</b>		On Duty Crash	
				Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
		Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>		
		Helmet Use		Helmet Compliance	
		Eye Protection		Tint Compliance	
		<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
UNIT	001	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>					

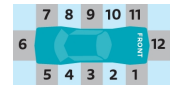
UNIT INDIVIDUAL	<b>Non Motorist</b>		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other			To/From School	
	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>	
	Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type	Alcohol Test Results	
	Drug 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>BK260928</b>	Issue To? <b>001</b>	Statute Number <b>346.18(2)</b>	Description <b>FAIL/YIELD WHILE MAKING LEFT TURN</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>2</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>3</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, WITH A CONTINUOUS L</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>					

**Vehicle**

UNIT 02	License Plate Number <b>422UBY</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
	Vehicle Identification Number <b>2GNAXUEV9K6195979</b>	Make <b>CHEVROLET</b>	Year <b>2019</b>	Model <b>EQUINOX</b>	
	Color <b>BLU - BLUE</b>	Body Style <b>4D - 4DR</b>		Bus Use	
	Initial Contact Point <b>07 - LEFT REAR CORNER</b>				



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UNIT VEHICLE	Vehicle Damage	
	Extent Of Damage	07 - LEFT REAR CORNER, 08 - LEFT SIDE REAR
	MINOR DAMAGE	
	Towed Due To Damage	Vehicle Removed By OWNER
UNIT VEHICLE	What Driver Was Doing	Vehicle Factors
	LEFT TURN	
	Driver Prior Action Other	NOT APPLICABLE
	Driver Actions	
UNIT VEHICLE	NO CONTRIBUTING ACTION	
	Owner Name RANDY CLUPPERT (920) 229-6559	Owner Address 451 W GRISWOLD ST RIPON, WI 54971 , US
<b>Sequence Of Events</b>		
UNIT VEHICLE	Event	MOTOR VEH IN TRANSPORT
	Event	
	Event	
	Event	
UNIT VEHICLE	<b>Policy Holder</b>	
	Insurance Company OWNERS-INS-CO	Individual RANDY CLUPPERT
UNIT INDIVIDUAL	<b>Individual</b>	
	Driver RANDY CLUPPERT (920) 229-6559	Citations Issued 0
		Sex MALE
		Date of Birth Race WHITE
	Address 451 W GRISWOLD ST RIPON, WI 54971 , US	Driver License Number
UNIT INDIVIDUAL	<b>Safety Equipment</b>	
	On Duty Crash	Safety Equipment
	Row 01 - FRONT ROW	Seat Position 07 - LEFT
	SHOULDER & LAP BELT	
	Helmet Use	Helmet Compliance
	Eye Protection	Tint Compliance
UNIT INDIVIDUAL	<b>Injury</b>	
	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE
	Trapped/Extricated NOT TRAPPED	
	Medical Transport NOT TRANSPORTED	EMS Agency Identifier
	Hospital	Date of Death
		EMS Run #
		Time of Death

<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>	Individual Condition <b>APPEARED NORMAL</b>	
	<b>Individual</b>	
	Passenger <b>CAROL CLUPPERT</b> (920) 229-1926	Citations Issued <b>0</b> Sex <b>FEMALE</b>
		Date of Birth Race <b>WHITE</b>
	Address <b>451 W GRISWOLD ST</b> <b>RIPON, WI 54971 , US</b>	Driver License Number
	<b>Safety Equipment</b>	On Duty Crash Safety Equipment
	Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b> <b>SHOULDER &amp; LAP BELT</b>
	Helmet Use	Helmet Compliance
	Eye Protection	Tint Compliance
	<b>02</b>	<b>Injury</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

UNIT	INDIVIDUAL	Distracted By Action				
		<b>Non Motorist</b>	Striking Unit #	Location		
			Prior Action			
	Action					
	Action Other		To/From School			
	<b>02</b>	<b>003</b>	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use	Suspected Drug Use	
				<b>NO</b>	<b>NO</b>	
			Alcohol Test Given	Alcohol Test Type	Alcohol Test Results	
			<b>TEST NOT GIVEN</b>			
			Drug Test Given	Drug Test Type	Drug Test Results	
<b>TEST NOT GIVEN</b>						
Drug Type						
Individual Condition						
<b>APPEARED NORMAL</b>						