6TL0D942B8

23-13586

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash Do	ocument #	Agency 23-13	Crash Number			icer/Deputy	
B 8	Crash Date 12/21/2023	Crash Time 07:35 PM		Date Ar 12/21/	rived	Time Arrived 07:53 PM			
.0D942B8	Date Notified 12/21/2023	Time Notified 07:38 PM		Total U 01	nits	Total Inj	jured	Total Kille	ed
_0D	On Emergency Hit	t and Run	Lane Closu		Work Zone	Tra	ailer or	Towed	Reporting Threshold
6TL	Government Property	Active Sch	ool Zone	School NO	Bus Related	Tags			
	✓ Reportable	Crash Type DT4000 (STAN	DARD CRASH)		Am	ended		Secondary Crash
	Description Diagram						Re	econstruction	n Bv
	, do								,
	NOT TO SCALE						Di	D.	
	Privet Garden		I				Pr	notos By	
	Fence		STH 60						
	01						Ac No	lditional Info ONE	rmation
		10		STOP	1	SPEED 55			
			**	10					
	(River RD				<u>_</u>	River RD			
		(
			(S1H)						

UNIT 1 WAS TRAVELING WEST ON RIVER RD AND WAS APPROACHING STH 60. UNIT 1 OPERATOR DISREGARDED THE STOP SIGN AND DROVE THROUGH THE INTERSECTION. UNIT 1 ENTERED THE NORTHWEST CORNER OF THE INTERSECTION AND WENT OFF OF THE ROADWAY STRIKING AN EMBANKMENT. UNIT 1 THEN CONTINUED WEST AND STRUCK A PRIVATELY OWNED GARDEN AND FENCE. UNIT 1 FRONT SEAT PASSENGER SUSTAINED A HEAD INJURY CAUSED BY A BOWLING BALL AND WAS WEARING A SEAT BELT. THE OPERATOR OF UNIT 1 WAS ARRESTED FOR OWI WITH A PASSENGER UNDER THE AGE OF 16, AND WAS CITED FOR FAILURE TO STOP AT A STOP SIGN. THE OPERATOR CLAIMED NO INJURIES AND WAS WEARING A SEAT BELT. THE VEHICLE SUSTAINED DISABLING DAMAGE WITH NO AIRBAG DEPLOYMENT. THE VEHICLE WAS TOWED BY EVERETTS TOWING.

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

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

Crash Date 12/21/2023

L	ocation									
-	ON STH60	WB				Latitude			Longitud	le
	15 FT N					43.263753294			-89.800	580351
	OF RIVER R				-	X Coordinate	e		Y Coord	inate
	N THE TOW	/N OF PRAIRI	IE DU SAC			272702.5			4793913.5	
Ι'	N SAUN CC	ONTI			-	Structure Ty	ре		I	
						NO STRUCTURE				
C	rash Sc	ene 💻								
Ŧ	First Harmful E	ent				First Harmfu	I Event Lo	cation		
ı	EMBANKMENT						E			
1	Manner of Collision						ion			
(DARK/UNI	LIT			
F						Roadway Fa	ctor(s)			
ŀ	DRY									
E	Environment F	actor(s)								
ı	NONE					NONE				
١	Weather Cond	lition(s)								
	CLOUDY	. •								
7	Animal Type					Relation To	Trafficway	/		
						TRAFFICM				
		cation - Location				Crash Classi				
	PUBLIC PRO	OPERTY				NO SPECI		SDICTION		Charial Ctudy
	Tribal Land					Access Control Special Study PARTIAL CONTROL				
		Vithin Interchange Area Junction Location Intersection			Intersection	••				
١,	YES		INTERCECTION							
L	IES		INTERSECTION		FOUR-WA	AY INTERS	ECTION			
L	Init Sum	mary =	INTERSECTION		FOUR-WA	AY INTERS	SECTION			
U		mary —	INTERSECTION	Vehicle Ope	FOUR-WA		SECTION	Unit Type		
U	Init Sum		INTERSECTION	Vehicle Ope	erating As Cla		ECTION		BILE	
U 	Init Sum Unit Status IN TRANSIT Vehicle Type	•	INTERSECTION		erating As Cla		ECTION	Unit Type		ments
U 	Init Sum Unit Status IN TRANSIT Vehicle Type PASSENGE	•		D CLASS	erating As Cla	assification		Unit Type AUTOMOE Operating As	s Endorsei	
U I I	Init Sum Unit Status IN TRANSIT Vehicle Type PASSENGE Fotal Occs	•	Train/Bus # Recorded	D CLASS	erating As Cla	assification	Fotal Trail	Unit Type AUTOMOE Operating As	s Endorsei	ments Mat Types
U I I I	Unit Sum Unit Status IN TRANSIT Vehicle Type PASSENGE Total Occs 2	•	Train/Bus # Recorded	D CLASS	erating As Cla	assification	Γotal Trail ∈	Unit Type AUTOMOE Operating As	Endorsei Total Haz	Mat Types
U	Init Sum Unit Status IN TRANSIT Vehicle Type PASSENGE Total Occs 2 nsurance?	•	Train/Bus # Recorded Direction Of Travel	D CLASS Total # Cita 2	erating As Cla	assification	Fotal Traile Speed Lim	Unit Type AUTOMOE Operating As	Total Haz Total Lan	Mat Types
U I 7	Unit Sum Unit Status Unit Status Un TRANSIT Vehicle Type PASSENGE Total Occs 2 Insurance? YES	R CAR	Train/Bus # Recorded Direction Of Travel WESTBOUND	Total # Cita 2	erating As Cla	assification	Γotal Trail ∈	Unit Type AUTOMOE Operating As	Total Haz Total Lan Total Lan	Mat Types es
	Init Sum Unit Status Unit Status Un TRANSIT Vehicle Type PASSENGE Total Occs 2 Insurance? YES Wost Harmful	R CAR	Train/Bus # Recorded Direction Of Travel WESTBOUND	Total # Cita 2 Pre	erating As Cla	assification	Fotal Traile Speed Lim	Unit Type AUTOMOE Operating As ers Emergency I	Total Haz 0 Total Lan 2 Motor Veh	Mat Types es
	Init Sum Unit Status Unit Status Un TRANSIT Vehicle Type PASSENGE Total Occs Insurance? YES Wost Harmful EMBANKME	R CAR	Train/Bus # Recorded Direction Of Travel WESTBOUND	Total # Cita 2 Pre Special Fun	erating As Clastitions Issued CrashTire Mark Action CIAL FUNCT	assification	Fotal Traile Speed Lim	Unit Type AUTOMOE Operating As ers sit Emergency I	Total Haz 0 Total Lan 2 Motor Veh	Mat Types es icle Use
	Init Sum Unit Status Unit Status Un TRANSIT Vehicle Type PASSENGE Total Occs 2 Insurance? YES Most Harmful EMBANKME Traffic Way	R CAR Event: Collision	Train/Bus # Recorded Direction Of Travel WESTBOUND With	Total # Cita 2 Pre Special Fun NO SPEC Traffic Cont	erating As Cla tions Issued CrashTire Mark nction CIAL FUNCT	assification	Fotal Traile Speed Lim	Unit Type AUTOMOE Operating As ers iit Emergency I NOT APPL Traffic Control	Total Haz 0 Total Lan 2 Motor Veh	Mat Types es icle Use
	Init Sum Unit Status Unit Status Un TRANSIT Vehicle Type PASSENGE Total Occs 2 Insurance? YES Most Harmful EMBANKME Traffic Way TWO-WAY, I	R CAR	Train/Bus # Recorded Direction Of Travel WESTBOUND With	Total # Cita 2 Pre Special Fun NO SPEC Traffic Cont STOP SIG	crating As Cla	assification	Fotal Traile Speed Lim	Unit Type AUTOMOE Operating As ers Emergency I NOT APPL Traffic Contr	Total Haz 0 Total Lan 2 Motor Veh ICABLE ol Inopera	Mat Types es icle Use
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	Init Sum Unit Status Unit Status Un TRANSIT Vehicle Type PASSENGE Total Occs Insurance? YES Wost Harmful EMBANKME Traffic Way TWO-WAY, I Surface Type BLACKTOP Truck Bus or I-NO	R CAR Event: Collision 1 ENT NOT DIVIDED (BITUMINOUS) HazMat	Train/Bus # Recorded Direction Of Travel WESTBOUND With	D CLASS Total # Cita 2 Pre Special Fun NO SPEC Traffic Cont STOP SIG	erating As Cla	assification	Fotal Traile Speed Lim	Unit Type AUTOMOE Operating As ers Emergency I NOT APPL Traffic Contr. NO Road Grade	Total Haz 0 Total Lan 2 Motor Veh ICABLE ol Inopera	Mat Types es icle Use
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	Init Sum Unit Status Unit Status Un TRANSIT Vehicle Type PASSENGE Total Occs 2 Insurance? YES Most Harmful EMBANKME Traffic Way TWO-WAY, I Surface Type BLACKTOP Truck Bus or F NO Vehicle License	R CAR Event: Collision 1 ENT NOT DIVIDED (BITUMINOU: HazMat	Train/Bus # Recorded Direction Of Travel WESTBOUND With	Total # Cita 2 Pre Special Fun NO SPEC Traffic Cont STOP SIG Road Curva STRAIGH	crashTire Mark nction CIAL FUNCT trol GN ature	assification	Fotal Trail(i) Speed Lim 55	Unit Type AUTOMOE Operating As ers iit Emergency I NOT APPL Traffic Contr NO Road Grade LEVEL Country of Iss	Total Haz 0 Total Lan 2 Motor Veh ICABLE ol Inopera	Mat Types es icle Use
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	Init Sum Unit Status Unit Status Un TRANSIT Vehicle Type PASSENGE Total Occs Insurance? YES Most Harmful I EMBANKME Traffic Way TWO-WAY, I Surface Type BLACKTOP Truck Bus or F NO Vehicle License 67413D Vehicle I	R CAR Event: Collision of the collision	Train/Bus # Recorded Direction Of Travel WESTBOUND With	Total # Cita 2 Pre Special Fun NO SPEC Traffic Cont STOP SIG Road Curva STRAIGH Plate Type AUT - AU Make	crashTire Mark nation SIAL FUNCT trol SIAL TUNCT TO SIAL TUNCT TO SIAL TUNCT TO SIAL TUNCT TO SIAL TUNCT T	assification TON S E V Y	Fotal Trail() Speed Lim 555	Unit Type AUTOMOE Operating As ers iit Emergency I NOT APPL Traffic Contr NO Road Grade LEVEL Country of Iss UNITED ST Model	Total Haz 0 Total Lan 2 Motor Veh ICABLE ol Inopera	Mat Types es icle Use
	Jnit Sum Jnit Status IN TRANSIT Vehicle Type PASSENGE Total Occs 2 Insurance? YES Most Harmful EMBANKME Traffic Way TWO-WAY, I Surface Type BLACKTOP Truck Bus or I- NO Vehicle License 67413D Vehicle I 2FMGK	Event: Collision VENT NOT DIVIDED (BITUMINOUS) HazMat Plate Number DS dentification Num (5D84EBD109)	Train/Bus # Recorded Direction Of Travel WESTBOUND With	Total # Cita 2 Pre Special Fun NO SPEC Traffic Cont STOP SIG Road Curva STRAIGH Plate Type AUT - AU Make FORD Body Style	crashTire Mark nation SIAL FUNCT trol SIAL TUNCT TTO SIAL TUNCT TUNCT T	TION S S S V Y 2	Fotal Traile O Speed Lim 55 VI Fear 6014	Unit Type AUTOMOE Operating As ers iit Emergency I NOT APPL Traffic Contr. NO Road Grade LEVEL Country of Iss UNITED ST Model FLEX	Total Haz 0 Total Lan 2 Motor Veh ICABLE ol Inopera	Mat Types es icle Use
	Init Sum Unit Status Unit Status IN TRANSIT Vehicle Type PASSENGE Total Occs Insurance? YES Most Harmful I EMBANKME Traffic Way TWO-WAY, I Surface Type BLACKTOP Truck Bus or F NO Vehicle License 67413D Vehicle I 2FMGK Color RED - F Initial Co	R CAR Event: Collision VENT NOT DIVIDED (BITUMINOU) HazMat Plate Number S dentification Num (5D84EBD109) RED ontact Point	Train/Bus # Recorded Direction Of Travel WESTBOUND With	Total # Cita 2 Pre Special Fun NO SPEC Traffic Cont STOP SIG Road Curva STRAIGH Plate Type AUT - AU Make FORD Body Style	crashTire Mark Inction IIAL FUNCT Itrol BN BATUTE T BUTOMOBILE BORT UTILIT	TION S S S V Y 2	Fotal Traile O Speed Lim 55 VI Fear 6014	Unit Type AUTOMOE Operating As ers iit Emergency I NOT APPL Traffic Contr. NO Road Grade LEVEL Country of Iss UNITED ST Model FLEX	Total Haz 0 Total Lan 2 Motor Veh ICABLE ol Inopera	Mat Types es icle Use tive/Missing
	Init Sum Unit Status Unit Status IN TRANSIT Vehicle Type PASSENGE Total Occs Insurance? YES Most Harmful I EMBANKME Traffic Way TWO-WAY, I Surface Type BLACKTOP Truck Bus or F NO Vehicle License 67413D Vehicle I 2FMGK Color RED - F Initial Co	R CAR Event: Collision VENT NOT DIVIDED (BITUMINOU) HazMat Plate Number S dentification Num (5D84EBD109) RED ontact Point	Train/Bus # Recorded Direction Of Travel WESTBOUND With	Total # Cita 2 Pre Special Fun NO SPEC Traffic Cont STOP SIG Road Curva STRAIGH Plate Type AUT - AU Make FORD Body Style UT - SPC Vehicle Da 01 - RIGI	crashTire Mark notion IAL FUNCT trol GN ature T JTOMOBILE DRT UTILIT	FION S S S V Y VEHICLE CORNER,	Fotal Traile Speed Lim 55 VI Gear 1014	Unit Type AUTOMOE Operating As ers ers iit Emergency I NOT APPL Traffic Contr NO Road Grade LEVEL Country of Iss UNITED ST Model FLEX Bus Use	Total Haz 0 Total Lan 2 Motor Veh ICABLE ol Inopera	Mat Types es icle Use itive/Missing
	Init Sum Unit Status Unit Stat	R CAR Event: Collision VENT NOT DIVIDED (BITUMINOU) HazMat Plate Number S dentification Num (5D84EBD109) RED ontact Point	Train/Bus # Recorded Direction Of Travel WESTBOUND With	Total # Cita 2 Pre Special Fun NO SPEC Traffic Cont STOP SIG Road Curva STRAIGH Plate Type AUT - AU Make FORD Body Style UT - SPC Vehicle Da 01 - RIGI FRONT,	crashTire Mark notion IAL FUNCT trol GN ature T JTOMOBILE DRT UTILIT	SE VYVEHICLE CORNER, SIDE FRON	Fotal Traile Compared Lim Speed Lim St VI Gear Con14 Con14 Con17 Con17	Unit Type AUTOMOE Operating As Ers Ers Operating As Ers Operating As Ers Operating As Operat	Total Haz 0 Total Lan 2 Motor Veh ICABLE ol Inopera	Mat Types es icle Use tive/Missing

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

Crash Date 12/21/2023

		Towed Due To Damage		Vehicle Removed By					
		TOWED DUE TO DISABL	ING DAMAGE	EVERETTS TOWING	3				
		What Driver Was Doing		Vehicle Factors					
		GOING STRAIGHT							
		Driver Prior Action Other		NOT APPLICABLE					
		Driver Actions							
	щ	DISREGARDED STOP SI	GN						
⊨	CL								
LNO	VEHICLE								
_	ΛE								
		Owner Name		Owner Address					
_	_	DONNALL ADAMS		453 E HOXIE ST					
2	01	(608) 408-8545		SPRING GREEN	i, Wi 53588 , US				
		Sequence Of Events							
	01	Event EMBANKMENT							
	0								
	02	Event FENCE							
		Event							
	03								
	4	Event							
	04								
_		Policy Holder							
LIND		Insurance Company		Individual					
\supset		WEST-BEND-MUTUAL-IN	NS-CO	DONNALL ADAMS	S				
	i	Individual							
		Driver		Citations Issued	Sex				
		DONNALL ADAMS		2	MALE				
	M	(608) 408-8545		Date of Birth Race					
⊨	INDIVIDUAL				BLACK/AFRICAN AMERICAN				
	\geq	Address		Driver License Number					
_		453 E HOXIE ST SPRING GREEN, WI 5358	00 110	STATE: WISCONSIN COUNTRY: UNITED STATES					
		OF KING GIVELIN, WI 5550	00,00						
	Sat	On Duty fety Equipment	y Crash	Safety Equipment					
				SHOULDER & LAP BELT					
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAI	PBELI				
		Helmet Use	07 - 221 1	Helmet Compliance					
		Ticiliet 03c		Heimet Compilance					
		Eye Protection		Tint Compliance					
_	Ξ	Injury S	Severity	Airbag					
2	90	Injury _{NO AF}	PPARENT INJURY	NON DEPLOYED					
		Ejected	Ejection Path			Trapped/Extricated			
		NOT EJECTED	NOT EJECTED/NOT A			NOT TRAPPED			
		Medical Transport		EMS Agency Identifie	er	EMS Run #			
		MOT TRAMOROSS							
		NOT TRANSPORTED		D-44D "		Ti			
		NOT TRANSPORTED Hospital		Date of Death		Time of Death			
		Hospital Distract	ted By Source			Time of Death			
		Hospital	ted By Source			Time of Death			
		Hospital Distract	ted By Source APPLICABLE (NOT DIST			Time of Death			

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

		_									
		Non Motorist	Striking Uni	t#	Location						
		Prior Action									
 		Action									
		Addon									
	AL										
LIND	IDO										
5	INDIVIDUAL										
	Z										
		Action Other							To/From School		
			Suspected	Alcohol U	se	Suspected Drug Use					
	L	Drug & Alcohol	YES			NO					
		Alcohol Test Given TEST GIVEN			Alcohol Test Type BLOOD	•		Alcohol Test Results PENDING			
		Drug Test Given			Drug Test Type		Drug Test Results				
		TEST NOT GIVEN									
2	001	Drug Type									
		Individual Condition									
APPEARED NORMAL											
	i	Individual									
		Passenger JEDIDIAH SORG (608) 408-8545				Citations Issued 0	Sex MALE				
	JAL				Date of Birth	Race					
LIND	INDIVIDUAL						BLACK/AFRICA	AN AMERICAN			
5	IDI	Address 453 E HOXIE ST			Driver License Number	er					
	=	SPRING GREEN, \	NI 53588 ,	, US							
	ļ	On Duty Crash			Safety Equipment						
	Sat	afety Equipment									
		Row Seat Posit 01 - FRONT ROW 09 - RIG			SHOULDER & LA	P BELT					
		Helmet Use	09 - RIGHT		3111	Helmet Compliance	Imet Compliance				
		Eye Protection			Tint Compliance						
01	005	Injury Severity SUSPECTED MINOR INJURY Ejected Ejection Path			Airbag						
	0				NON DEPLOYED Trapped/Extricated						
		NOT EJECTED			CTED/NOT APPL	LICABLE		NOT TRAPPED			
		Medical Transport EMS GROUND				EMS Agency Identifie 6000555	er	EMS Run #			
		Hospital				Date of Death		Time of Death			
		SAUK PRAIRIE HO									
		Distracted By	Distracted E	sy Source							
		Distracted By Action									
			Striking Uni	t #	Location						
		Non Motorist	Juliung Offi	- "	_00041011						

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Crash Date 12/21/2023

l		Prior Action							
		Action							
	₹								
LNO	⊒								
5	\geq								
	INDIVIDUAL								
	_								
		Action Other						To/From School	
		Action Other						10/From School	
			Suspected Alco	hol Use	Suspected Drug Use				
	L	Drug & Alcohol	NO		NO				
•		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results		
		TEST NOT GIVEN		Davis Took Took					
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results			
_	Ø	Drug Type							
2	005								
		Individual Condition							
		APPEARED NORM	IAL						
	,	Violations							
		UTC Number	Issue To?	Statute Number	Description OWI (1ST W/PASSE	NOED + 40 Y/20	OLD)		
	2	BG943660	001	346.63(1)(a)	OWI (1ST W/PASSE	NGER < 16 YRS	OLD)		
	02	UTC Number	Issue To? 001	Statute Number 346.46(1)	Description FAIL/STOP AT STOR	SIGN			
	0	BG943661	001	0-10.10(1 <i>)</i>	TALBOTOL ALGIO	5.514			