### WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	*		Agency Crash Number <b>24-00477</b>		Investigating Officer/Deputy  DEPUTY I. GALVAN			
<b>C1</b>	Crash Date <b>01/13/2024</b>	Gradii Tiillo		Date A 01/13/		Time Arrived 12:05 PM			
KR	Date Notified <b>01/13/2024</b>	Time Notified 11:55 AM		Total U	nits	Total Injured <b>00</b>	Total Killed	I	
.0F2	On Emergency Hit	and Run		re Work Zone		Trailer or	Γowed	Reporting Threshold	
<b>6T</b> L	Government Property	Active Sc	Active School Zone		Bus Related	Tags			
	<b>▼</b> Reportable	Crash Type DT4000 (STA	NDARD CRASH	)		Amended		Secondary Crash	

Description

Diagram

Photos By I GALVAN

Additional Information PHOTOS

Additional Information PHOTOS

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

NOT TO SCALE

UNIT 1 WAS TRAVELING NORTHBOUND ON ON RAMP ONTO USH 12 FROM STH 136. UNIT 2 WAS FOLLOWING UNIT 1. UNIT 1 ATTEMPTED TO MANEUVER A SNOW DRIFT IN THE ROADWAY WHICH CAUSED UNIT 1 TO SPIN 180 DEGREES. UNIT 2 THEN WAS STRUCK BY UNIT 1 AND CAUSED HIM TO SPIN AND STOP FACING EAST IN LANE NUMBER 1. UNIT 3 SWERVED TO MISS ACCIDENT AND WENT INTO A DITCH IN THE MEDIAN. THREE DIFFERENT TOWS WERE CALLED TO THE SCENE. BILLS REMOVED UNIT 2. PLATTS REMOVED UNIT 1. CRAIGS WAS CALLED FOR UNIT 3 BUT WAS PULLED OUT BY BILLS WITHOUT DISCUSSING IT WITH CRAIGS OR UNIT 3 OWNER. BILLS TOWING CAUSED DAMAGE TO UNIT 3 FRONT AND REAR PASSENGER SIDE RIM. NO INJURIES WERE REPORTED.

ON RAMP FROM STH 136

Crash Date 01/13/2024

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 01/13/2024

Crash Time 11:53 AM

LOC	ation										
_	STH33 WB					Latitude			Longitud	le	
33 F	-		43.48176	S2997		-89.774	643767				
_	USH12 WB					X Coordin	ate		Y Coord	inate	
	HE VILLAGE OF WES	SI BARABOO				275613.5	5		481805	6	
IN 3	AUK COUNTY					Structure <sup>1</sup>	Type				
						NO STR					
Cras	sh Scene										
_	Harmful Event					First Harmful Event Location					
	OR VEH IN TRANSP	∩RT				ON ROA		Location			
	ner of Collision	OI(1									
	SIDESWIPE/SAME DI	IDECTION				Light Condition  DAYLIGHT					
	Surface Condition(s)	INECTION									
	. ,					Roadway	racior(s)				
SNC	OW, SLUSH										
Envir	onment Factor(s)				ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH,						
WE	ATHER CONDITIONS					ROAD S	URFACE	CONDITION	(WET, IC	Y, SNOW, SLUSH,	
Wea	ther Condition(s)					<u> </u>					
CLC	UDY										
Anim	al Type					Relation To Trafficway					
					TRAFFICWAY - ON ROAD						
Cras	Crash Classification - Location					Crash Classification - Jurisdiction					
PUB	PUBLIC PROPERTY					NO SPE					
Triba	l Land					Access Control				Special Study	
						NO CON	TROL				
	n Interchange Area	Junction Location			Intersection	• •					
YES		ENTRANCE RAMP-RELA	ATED			INTERSE	CTION				
	ure Type			Reaso	ons for Closi	ure					
	E CLOSURE										
	Initial Lane/Rd Closed	Time Initial Lane/Rd Clos	sed	LAW	ENFORC	EMENT, T	OW TRU	ICK			
-	3/2024	12:06 PM									
	All Lanes Open	Time All Lanes Open		Date Scene Clear				ime Scene Clea	red		
	3/2024	12:53 PM		01/13	3/2024		1	2:53 PM			
	Summary $\blacksquare$										
Unit	Status			•	erating As C	lassification		Unit Type			
IN T	RANSIT		DC	LASS				TRUCK			
Vehic	cle Type							Operating As	s Endorser	ments	
UTIL	LITY TRUCK/PICKUP	TRUCK									
Total	Occs	Train/Bus # Recorded	Tota	I # Cita	tions Issued		Total Tra	ailers	Total Haz	Mat Types	
2			0				0		0		
	ance?	Direction Of Travel		Pre	CrashTire	1	Speed L	imit	Total Lane	es	
YES		NORTHBOUND			Mark		65		5		
	Harmful Event: Collision			cial Fun		TION		Emergency I		cle Use	
	TOR VEH IN TRANSP	ORT	NO	SPEC	IAL FUNC	TION		NOT APPL			
	ic Way			ic Cont				Traffic Contr	ol Inoperat	tive/Missing	
	RANCE/EXIT RAMP		NO	CONT	ROL			NO			
Surfa	се Туре			d Curva				Road Grade			
	CKTOP (BITUMINOU	S)	STR	RAIGH	Т			LEVEL			
Truck Bus or HazMat											
NO											
1	/ehicle										
	License Plate Number		Plat	te Type			St	Country of Iss	suance		
	PL9084		LTI	K - LIG	HT TRUC	K	WI	UNITED ST	ATES		
	Vehicle Identification Nur	mber	Mak				Year	Model			
6	5TFMA5DB0PX1137	77	то	YOTA			2023	TUNDRA			

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# WISCONSIN MOTOR VEHICLE CRASH REPORT

		Color		Body Style		Bus Use					
		GRN - GREEN		PK - PICKUP							
	ш	Initial Contact Point		Vehicle Damage			T				
_		02 - RIGHT SIDE FRONT		Vollido Balliago			7 8 9 10 11				
UNIT	≅			01 - RIGHT FRONT	CORNER, 02 - RIG	HT SIDE	6 3 12				
n	VEHICL	Extent Of Damage		FRONT, 03 - RIGHT SIDE MIDDLE							
	>	DISABLING DAMAGE		V/							
		Towed Due To Damage		Vehicle Removed By							
		TOWED DUE TO DISABLING	DAMAGE	PLATTS WRECKER							
		What Driver Was Doing		Vehicle Factors							
		ENTERING TRAFFIC LANE									
		Driver Prior Action Other		NOT APPLICABLE							
		Driver Actions									
	Щ	NO CONTRIBUTING ACTION	I								
±	VEHICLE										
UNIT	Ī										
_	Ä										
		Owner Name		Owner Address							
		TIFFANI BRENNAN		1605 DEERWOO	D TRL						
01	7	(608) 322-7208		WISCONSIN DEL	LLS, WI 53965 , U	S					
		Common Of Francis									
	•	Sequence Of Events									
	2	Event MOTOR VEH IN TRANSPOR	т								
			•								
	02	Event									
	0										
	03	Event									
	0										
	9	Event									
	0										
_	1	Policy Holder									
UNIT		Insurance Company		Individual							
n		AMERICAN-FAMILY-INS-CO		TIFFANI BRENNAI	N						
		Individual									
				Citations leaved	Sex						
		Driver TIFFANI BRENNAN		Citations Issued							
	7	(608) 322-7208		0	FEMALE						
	DUAL	(***,**		Date of Birth	Race WHITE						
<b>⊨</b>	₽										
N	$\geq$	Address		Driver License Number	er						
_	INDIN	1605 DEERWOOD TRL WISCONSIN DELLS, WI 539	85 119	STATE: WISCONS	IN COUNTRY: UN	ITED STATES					
	_	THOSONOM BEEES, W. 666	JO , JO								
	Sai	On Duty Cr fety Equipment	ash	Safety Equipment							
	Sai	iety Equipment									
		Row	Seat Position	SHOULDER & LAF	PBELT						
		01 - FRONT ROW	07 - LEFT								
		Helmet Use		Helmet Compliance							
		Eye Protection		Tint Compliance							
01	7	Injury Seve	rity	Airbag							
0	9	Injury NO APPA	RENT INJURY	NON DEPLOYED							
			ection Path			Trapped/Extricated					
		NOT EJECTED NO	OT EJECTED/NOT APP	PLICABLE		NOT TRAPPED					
		Medical Transport		EMS Agency Identifier	r	EMS Run #					
		NOT TRANSPORTED									

# WISCONSIN MOTOR VEHICLE CRASH REPORT

		Hospital				Date of Death			Time of Death	
			Distracted	Dir Carra						
		Distracted By	Distracted NOT APF	PLICABL	E (NOT DISTRAC	CTED)				
		Distracted By Action NOT DISTRACTED	)							
		Non Motorist	Striking Ur	nit#	Location					
		Prior Action								
		Action								
		Addon								
	AL									
LIND	INDIVIDUAL									
5	Σ									
	IN									
		Action Other								To/From School
	L	Drug & Alcohol	Suspected <b>NO</b>	Alcohol L	lse	Suspected Drug Use NO	;			
		Alcohol Test Given			Alcohol Test Type				Alcohol Test Results	
		TEST NOT GIVEN			D T 1T					
		Drug Test Given TEST NOT GIVEN			Drug Test Type			Drug Test Results		
7	001	Drug Type								
	0									
		Individual Condition								
		APPEARED NORM	//AL							
		lo alivi alvo al								
		Individual Passenger				Citations Issued		Sex		
	7	<b>GRADY BRENNAM</b>	N			0	MALE			
	UA	(608) 322-7208				Date of Birth		Race WHITE		
LNO	DIVIDUAL	Address				Driver License Numb		WHILE		
5		1605 DEERWOOD				Driver License Numb	)CI			
	Z	WISCONSIN DELL	_S, WI 539	965 , US						
			On Duty C	roch		Safety Equipment				
	Sat	fety Equipment	On Buty C	iasii		Salety Equipment				
		Row		Seat Po		CHILD RESTRAIN	NT S	SYSTEM - FORW	VARD FACING	
		02 - SECOND ROV Helmet Use	N	09 - RI	GHT	Helmet Compliance				
		Heimet Ose				Tiennet Compilance				
		Eye Protection				Tint Compliance				
_	7		Injury Seve	erity		Airbag				
2	005	Injury	NO APP	ARENT II	NJURY	NON DEPLOYED	ı			
		Ejected NOT EJECTED		jection Pa	th CTED/NOT APPL	ICABI F			Trapped/Extricated NOT TRAPPED	
		Medical Transport				EMS Agency Identifie	er		EMS Run #	
		NOT TRANSPORT	ED							
		Hospital				Date of Death			Time of Death	

### WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 01/13/2024

		Distracted By Distracted	acted By Source	е							
		Distracted By Action									
	ļ	Non Motorist	ing Unit#	Location							
		Prior Action		<u> </u>							
		Action									
	IAL										
UNIT	INDIVIDUAL										
	INDI										
		Action Other									To/From School
	L	Drug & Alcohol NO	pected Alcohol U	Jse	Su:	spected Drug Use )					
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Typ	е				Alcohol Test	Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type			Drug Test	Results			
01	002	Drug Type		<u> </u>		<u>l</u>					
		Individual Condition									
		APPEARED NORMAL									
		t Summary Status			Vehicle	e Operating As Classifi	ication		Unit Type		
		RANSIT			D CL		iodiion		TRUCK		
7		cle Type							Operating A	s Endorsem	ents
02	UTII	LITY TRUCK/PICKUP T	RUCK								
	Tota <b>1</b>	l Occs	Train/Bus # Re		Total # <b>0</b>	Citations Issued	<b>0</b>	tal Trailer	S	Total HazM 0	lat Types
_	Insu	rance?	Direction Of Tr			Pre CrashTire Mark	Sp 65	eed Limit		Total Lanes	S
UNIT		t Harmful Event: Collision W				al Function PECIAL FUNCTION	N		Emergency NOT APPL	Motor Vehic ICABLE	le Use
•	Traff	îc Way				Control			Traffic Contr	ol Inoperativ	ve/Missing
		RANCE/EXIT RAMP				ONTROL			NO		
		асе Туре			Road (	Curvature			Road Grade		
	DLA	CKTOD (BITHMINIOHE)			CTD A	ICUT			1 61/61		
	Truc	ACKTOP (BITUMINOUS) k Bus or HazMat	) <u> </u>		STRA	AIGHT			LEVEL		
	NO	k Bus or HazMat			STRA	MGHT			LEVEL		
	NO	k Bus or HazMat  Vehicle									
	NO	k Bus or HazMat  Vehicle License Plate Number			Plate	Туре	St		Country of Iss		
	NO	Vehicle License Plate Number 606743			Plate LTK	Type - LIGHT TRUCK	W	ı (	Country of Iss		
02	NO	k Bus or HazMat  Vehicle License Plate Number	per		Plate LTK Make	Type - LIGHT TRUCK		l l	Country of Iss	ATES	
02	NO	Vehicle License Plate Number 606743 Vehicle Identification Numb 1GCHSBE36G1178978	per		Plate LTK Make CHE	Type - LIGHT TRUCK VROLET Style	Ye	C   U   ar   M   16   C	Country of Iss JNITED ST Model	ATES	
02	NO	Vehicle License Plate Number 606743 Vehicle Identification Numb 1GCHSBE36G1178978	per		Plate LTK Make CHE	Type - LIGHT TRUCK VROLET	Ye	C   U   ar   M   16   C	Country of Iss JNITED ST Model COLORAD	ATES	

### **WISCONSIN MOTOR VEHICLE CRASH REPORT**

	Ш		V	ehicle Damage			
⊢	VEHICLE						7 8 9 10 11
UNIT	¥	Extent Of Damage		2 - RIGHT SIDE FRO	NT, 04 - RIGHT SI	DE REAR, 14 -	6 2 12
<b>1</b>	竝	DISABLING DAMAGE		JNDERCARRIAGE			5 4 3 2 1
	>		W	obialo Domovad Pv			
		Towed Due To Damage TOWED DUE TO DISABLING DAMA		ehicle Removed By			
		What Driver Was Doing		ehicle Factors			
		ENTERING TRAFFIC LANE	V	enicle Factors			
			N	OT APPLICABLE			
		Driver Prior Action Other	"	OT ALL LIOABLE			
		Driver Actions					
		NO CONTRIBUTING ACTION					
_	Щ	NO CONTRIBOTING ACTION					
들	<u>ပ</u>						
UNIT	VEHICL						
	>						
		Owner Name		Owner Address	4.4.4		
02	02	JAMES PRUE (414) 302-9521		904 MOORE ST # 4 BARABOO, WI 539			
0	0	(414) 302-9521		DARABOO, WI 533	113 , 03		
	;	Sequence Of Events					
		Event					
	2	MOTOR VEH IN TRANSPORT					
	~	Event					
	05						
	~	Event					
	03						
	_	Event					
	9						
.		Policy Holder					
UNIT		Insurance Company		Individual			
5		ALLSTATE-INS-CO		JAMES PRUE			
				OAMEOT NOE			
		Individual		[ 0; ; ; ]			
		Driver JAMES PRUE		Citations Issued	Sex		
	7	(414) 302-9521		0	MALE		
	Ž	(111, 111		Date of Birth	Race <b>WHITE</b>		
╘	IDINIDUAL				VVIIII L		
UNIT	$\leq$	Address 904 MOORE ST # 441		Driver License Number			
	Ż	BARABOO, WI 53913 , US		STATE: WISCONSIN	COUNTRY: UNIT	ED STATES	
	_	2, a. a. 12, c.					
	Sai	On Duty Crash fety Equipment		Safety Equipment			
	- Ou						
			Position	SHOULDER & LAP I	BELT		
		01 - FRONT ROW 07 - L	.EFT				
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
		Injury Coverity		Airbog			
02	003	Injury Severity NO APPARENT	IN HIDV	Airbag			
	J	Ejected Ejection P	INJUK I	NON DEPLOYED	Т	Trapped/Extricated	
			eun ECTED/NOT APPLI	ICARI E		NOT TRAPPED	
		Medical Transport	LOTED/NOT AFPL	EMS Agency Identifier		EMS Run #	
		NOT TRANSPORTED		LIVIS Agency Identifier		LIVIO RUII #	
				Date of Death		Time of Dooth	
		Hospital		Date of Death		Time of Death	

### WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 01/13/2024

		Distracted By	Distracted	By Source	(NOT DISTR	ΔСТ	·FD)						
			IIOI AI	LIVADEL	(101 1011	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
		Distracted By Action NOT DISTRACTED	,										
			Striking U	nit# II	Location								
		Non Motorist	Striking U	mit#   1	Location								
		Prior Action		·									
		Action											
	INDIVIDUAL												
╘	DU												
UNIT	Z												
	=												
		Action Other										To/From School	
	,	Orug & Alcohol	Suspected	d Alcohol Use	Э		Suspected Drug Use						
			NO				NO			T			
		Alcohol Test Given TEST NOT GIVEN		/	Alcohol Test Ty	ре				Alcohol Tes	t Results		
		Drug Test Given			Drug Test Type	v		Drug T	est Results				
		TEST NOT GIVEN			Drug Took Type			Diag i	est results	•			
02	003	Drug Type											
	•												
		Individual Condition											
		APPEARED NORM	IAL										
	llni	Summary =											
		Status =				Veh	icle Operating As Classif	fication		Unit Type			
	IN T	RANSIT					LASS			AUTOMO	BILE		
3	Vehi	cle Type								Operating A	s Endorsen	nents	
ő	(SP	ORT) UTILITY VEHIC	CLE										
	Tota	Occs	Trair	n/Bus # Reco	orded	Tota	al # Citations Issued		Total Traile	ers	Total Hazl	Mat Types	
	2					0			0		0		
		rance?		ction Of Trav			Pre CrashTire		Speed Lim	nit	Total Lane	S	
Ę	YES			RTHBOUN	D	Sno.	Mark		65	Emergency	5 Motor Vobis	olo I loo	
N O	DIT	Harmful Event: Collisio	n vvitn				cial Function SPECIAL FUNCTION	N		NOT APP		de Ose	
		ic Way					fic Control			Traffic Cont		ve/Missina	
		DED HWY W/O TRA	AFFIC BA	ARRIER			CONTROL			NO		,g	
		асе Туре					d Curvature			Road Grade	;		
	BLA	CKTOP (BITUMINO	US)			STF	RAIGHT			LEVEL			
		k Bus or HazMat								•			
	NO	/abiala											
	Ì	Vehicle License Plate Number				Dia	te Type	Т	St	Country of Is	suance		
		LKK425					IT - AUTOMOBILE		MN	UNITED ST			
		Vehicle Identification N	lumber			Ma			Year	Model			
03	03	1GNSKHKC2JR34					IEVROLET		2018	SUBURBA	N		
		Color					dy Style	1		Bus Use			
		RED - RED				4D	- 4DR						
		Initial Contact Point											
		12 - FRONT				1							

# WISCONSIN MOTOR VEHICLE CRASH REPORT

	Ш			Vehicle Damage						
⊢	VEHICLE						7 8 9 10 11			
UNIT	¥	Extent Of Damage		02 - RIGHT SIDE FRO	NT 04 - RIGHT SIE	OF REAR	6 2 2 12			
<b>1</b>	直	FUNCTIONAL DAMAGE		02 1110111 01521110	, 01 1410111 012		5 4 3 2 1			
	>	Towed Due To Damage	,	Vehicle Removed By						
		NOT TOWED		CRAIGS TOWING						
		What Driver Was Doing	ľ	Vehicle Factors						
		GOING STRAIGHT		NOT ADDI ICADI E						
		Driver Prior Action Other	'	NOT APPLICABLE						
		Driver Actions								
	щ	SWERVED OR AVOIDED	DUE TO WIND, SLIPPERY	SURFACE, MOTOR \	/EHICLE, OBJECT,	NON-MOTORIS	ST IN ROADWAY, ETC.			
±	딩									
UNIT	Ť									
_ ر	VEHICL									
		Owner Name		Owner Address						
		TYLER KING		510 7TH AVE NE						
03	03	(507) 421-6047		<b>BYRON, MN 5592</b>	0 1561, US					
	;	Sequence Of Events								
	2	Event								
	0	DITCH								
	~	Event								
	05									
		Event								
	03									
		Event								
	9	Lvent								
╘	Į.	Policy Holder								
UNIT		Insurance Company		Individual						
ر ا		STATE-FARM-GENERAL-	INS-CO	TYLER KING						
		Individual								
	•	Driver		Citations Issued	Sex					
		TYLER KING		0	MALE					
	4	(507) 421-6047		Date of Birth	Race					
	Ž			Date of Billi	WHITE					
LIND	IDINIDUAL	A 11		D: 1: N 1						
5	$\leq$	Address 510 7TH AVE NE		Driver License Number						
	Ż	BYRON, MN 55920 1561,	IIS	STATE: MINNESOT	A COUNTRY: UNIT	ED STATES				
	_	B 11(6)(, IIII( 66626 1661,								
	Car	On Duty	Crash	Safety Equipment						
	Sai	fety Equipment								
		Row	Seat Position	SHOULDER & LAP	BELT					
		01 - FRONT ROW	07 - LEFT							
		Helmet Use	- 1	Helmet Compliance						
		Eye Protection		Tint Compliance						
				· ·						
~	4	Injury S	everity	Airbag						
03	904	Injury NO AP	PARENT INJURY	NON DEPLOYED						
		Ejected	Ejection Path	1	ГТ	rapped/Extricated				
		NOT EJECTED	NOT EJECTED/NOT APPL	ICABI F		NOT TRAPPED				
		Medical Transport	TOT EULOTED/HOT AFFE	EMS Agency Identifier		MS Run #				
		NOT TRANSPORTED		LIVIS Agency Identifier	-	IVIO IXUII#				
				Data of D45		ima of D41				
		Hospital		Date of Death	1	ime of Death				
				1						

### WISCONSIN MOTOR VEHICLE CRASH REPORT

		Diatropted Di	stracted By Source							
		Distracted By N	OT APPLICABLE	(NOT DISTRAC	CTED)					
		Distracted By Action NOT DISTRACTED								
		Non Motorist St	riking Unit #	Location						
		Prior Action	•							
		Action								
	M									
LNO	INDIVIDUAL									
5	>									
	Z									
		Action Other						To/From School		
	į	Drug & Alcohol N	uspected Alcohol Us	se	Suspected Drug Use NO					
			· · · · · · · · · · · · · · · · · · ·	Alb-I T4 T	NO		Alcohol Test Results			
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results			
		Drug Test Given		Drug Test Type		Drug Test Results				
		TEST NOT GIVEN								
03	004	Drug Type								
		Individual Condition								
		APPEARED NORMA								
		AFFEARED NORWA	<b>L</b>							
	i	ndividual								
		Passenger			Citations Issued	Sex				
	AL	KAYLA KING (507) 421-6047			Date of Birth	FEMALE Race				
_	INDIVIDUAL				Date of Billin	WHITE				
L N N	⅀	Address			Driver License Number					
_	N	510 7TH AVE NE BYRON, MN 55920 1	1561. US		STATE: MINNESOTA COUNTRY: UNITED STATES					
			,							
	_	Or	n Duty Crash		Safety Equipment					
	Sat	ety Equipment								
		Row	Seat Pos		SHOULDER & LAP	BELT				
		01 - FRONT ROW Helmet Use	09 - RIC	<b>э</b> п і	Helmet Compliance					
					- '					
		Eye Protection			Tint Compliance					
03	900	Injury N	jury Severity O APPARENT IN	JURY	Airbag NON DEPLOYED					
		Ejected	Ejection Pat	1	NOIT DEL EGTED		Trapped/Extricated			
		NOT EJECTED	NOT EJEC	TED/NOT APPL			NOT TRAPPED			
		Medical Transport	`	<u></u>	EMS Agency Identifier		EMS Run #			
		NOT TRANSPORTED  Hospital	J		Date of Death		Time of Death			
		-1								
		Distracted By	stracted By Source		•		•			

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 01/13/2024

		Distracted By Action					
		Non Motorist Striking Unit #	Location				
		Prior Action					
LIND	INDIVIDUAL	Action					
		Action Other					To/From School
	1	Drug & Alcohol NO	Use	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	3	
03	002	Drug Type					
		Individual Condition  APPEARED NORMAL					