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 24-00955		g Officer/Deputy V. NEUBAUER			
X	Crash Date 01/26/2024	Crash Time 04:27 PM	Date Arrived 01/26/2024	Time Arrived 04:27 PM				
8	Date Notified	Time Notified	Total Units	Total Injured	Total Kill	ed		
ĕ	01/26/2024	04:27 PM	02	00	00	1		
6TL0FB000X	On Emergency Hi	t and Run Lane Clo		Trailer	or Towed	Reporting Threshold		
E	Government Property	Active School Zone	School Bus Related NO	Tags				
	✓ Reportable	Crash Type DT4000 (STANDARD CRAS	SH)	Amende	ed	Secondary Crash		
	Description ———							
		NOT T	O SCAL		Photos By Additional Info NONE	ormation		
	02	01	02	01				
			STH 33					
	CTYX	STOP						
	, a sworn law enforceme	ent officer, agree that I have	not added any CJIS data ir	this report.				
	UNIT 1 WAS TRAVELING W/B ON S TURNING LEFT ONTO CTY X. UNIT DAMAGE.							

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

STATES AND THE STATES AND STATES		Loc	ation									
OF CTHX WB IN THE TOWN OF GREENFIELD IN SAUK COUNTY Crash Scene First Harmful Event Location On ROADWAY Months of Harmful Event Location NOE NOE Roadway Factor(s) NONE NONE NONE NONE NONE NONE Relation to Trafficway TRAFFICWAY - ON ROAD Creath Classification - Location PUBLIC PROPERTY NO SPECIAL JURISDICTION NO CONTROL Within Interchange Area YES NO CONTROL NO							Latitude			Longitu	de	
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First Harmful Event Location												
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Environment Factor(s) NONE		Road	d Surface Condition(s)				Roadway	Factor(s)				
NONE Weather Condition(s)		WE	Г									
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Animal Type Animal Type TRAFFICWAY - ON ROAD Crash Classification - Location PUBLIC PROPERTY Tribal Land Access Control Within Interchange Area YES INTERSECTION Unit Summary Unit Status IN TRANSIT Vehicle Operating As Classification Vehicle Operating As Classification INTERSECTION Unit Type Total Access Control Unit Type T-INTERSECTION Unit Type AUTOMOBILE Operating As Endorsements Operating As Endorsements Total Access Intercent Type (SPORT) UTILITY VEHICLE Total Occs Train/Bus # Recorded 1		NON	NE				NONE					
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Within Interchange Area YES Vehicle Type		Triba	al Land								Special Study	
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Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS) Truck Bus or HazMat NO Vehicle License Plate Number 38763DS Vehicle Identification Number 38763DS Vehicle Identification Number 38763DS Vehicle Identification Number 38763DS Vehicle Identification Number 36NAXUEVOLL246721 Color BLK - BLACK UT - SPORT UTILITY VEHICLE We licitle Damage Wehicle Damage					Pre	Mark 55		116			es	
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Surface Type BLACKTOP (BITUMINOUS) Truck Bus or HazMat NO Vehicle License Plate Number 38763DS Vehicle Identification Number 3GNAXUEVOLL246721 Color BLK - BLACK Initial Contact Point Road Curvature CURVE RIGHT Road Grade LEVEL Road Grade		TWO	D-WAY, NOT DIVIDED)					·			
Truck Bus or HazMat NO Vehicle License Plate Number 38763DS Vehicle Identification Number 3GNAXUEVOLL246721 Color Body Style BLK - BLACK Initial Contact Point Vehicle Damage Vehicle St Country of Issuance WI UNITED STATES Will UNITED STATES Make Year Model EQUINOX Bus Use					Road Curva	ature			Road Grade			
Vehicle License Plate Number 38763DS Vehicle Identification Number 3GNAXUEVOLL246721 Color BLK - BLACK Initial Contact Point Vehicle Damage Plate Type St Country of Issuance WI UNITED STATES Winter Type WI UNITED STATES Make Year Model CHEVROLET 2020 EQUINOX Bus Use UT - SPORT UTILITY VEHICLE		BLA	CKTOP (BITUMINOL	JS)	CURVE R	RIGHT						
Vehicle License Plate Number 38763DS DIS - DISABLED WI UNITED STATES Vehicle Identification Number 3GNAXUEVOLL246721 Color BLK - BLACK UT - SPORT UTILITY VEHICLE Vehicle Damage Plate Type St Country of Issuance UNITED STATES Make Year Model EQUINOX Bus Use Bus Use		Truc	k Bus or HazMat	<u> </u>	L				_1			
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3GNAXUEVOLL246721 CHEVROLET 2020 EQUINOX Color Body Style UT - SPORT UTILITY VEHICLE Initial Contact Point Vehicle Damage						SABLED						
Color BLK - BLACK UT - SPORT UTILITY VEHICLE Initial Contact Point Vehicle Damage	2	7				N ET						
BLK - BLACK UT - SPORT UTILITY VEHICLE Initial Contact Point Vehicle Damage)					2020					
Initial Contact Point Vehicle Damage					, ,	* *		LE	240 000			
L S S S S S S S S S S S S S S S S S S S						Vehicle Damage			<u> </u>		2 0 6 10 11	
FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT S 4 3 2 1	⊨	CL	12 - FRONT									
DISABLING DAMAGE CURNER, 12 - FRONT	_		Extent Of Damage			FRONT, 10 - LEFT SIDE		SIDE FRONT, 11 - LEFT FRONT		_		
	5	퓼	•	_				ONT, 11 - L	LEFT FRON	1		

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Individual LEROY BRADLEY									
Date of Birth Race									
Driver License Number									
					Safety Equipment				
Helmet Compliance									
Tint Compliance									
Airbag DEPLOYED-FRONT									
d									
)									

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data. $\begin{tabular}{ll} 3 & of & 6 \end{tabular}$

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

1			Striking	g Unit #	Location							
		Non Motorist	Otrikiri	g Offic#	Location							
		Prior Action										
		Action										
	AL											
⊢	INDIVIDUAL											
L N	ΝE											
>	D											
	Z											
		Action Other										To/Erom Cohool
		Action Other	Action Other									To/From School
			Suspected Alcohol Use				Suspected Drug Use					
	L	Drug & Alcohol	NO	0.007000	000		NO					
		Alcohol Test Given			Alcohol Test T	vpe				Alcohol Test	Results	
		TEST NOT GIVEN				,,						
		Drug Test Given			Drug Test Typ	е		Drug T	est Results			
		TEŠT NOT GIVEN										
_	7	Drug Type						l				
2	001											
		In dividual Condition										
		Individual Condition										
		APPEARED NORM	MAL									
	Violations UTC Number Issue To? Statute Number						D : "					
	01	BK741888	001	10?	346.57(2)		Description FAILURE TO KEEP	VEHIC	LE UNDE	R CONTRO	L	
l												
	Unit Status Vehicle Operating As Classification Unit Type											
		RANSIT					D CLASS			AUTOMOBILE		
۱		cle Type					5 62.100			Operating As Endorsements		
05		ORT) UTILITY VEH	ICLE									
	Total Occs Train/Bus # Recorded				Total # Citations Issued Total Traile		ers	Total Hazl	Mat Types			
	1			0 0			0					
	Insurance? Direction Of Travel				Pre CrashTire		Speed Lim	it	Total Lane	S		
⊨	YES WESTBOUND					Mark		55		2		
L							Special Function NO SPECIAL FUNCTION			Emergency Motor Vehicle Use NOT APPLICABLE		
	MOTOR VEH IN TRANSPORT											
	Traffic Way					Traffic Control			Traffic Control Inoperative/Missing			
		TWO-WAY, NOT DIVIDED Surface Type					NO CONTROL			NO Road Grade		
		ACKTOP (BITUMING	ous)				ad Curvature JRVE RIGHT			LEVEL		
		k Bus or HazMat	000,			0.	DIVVE INIOITI			LLVLL		
	NO											
	,	Vehicle										
						Plate Type St			St	Country of Issuance		
l			r							UNITED STATES		
		License Plate Numbe AEX2307	r				UT - AUTOMOBILE		WI	UNITED ST	ATES	
~	6 ;	License Plate Numbe		r		Α	UT - AUTOMOBILE		WI Year	Model Model	ATES	
02	02	License Plate Numbe AEX2307	Number	r		A M					ATES	
02	02	License Plate Numbe AEX2307 Vehicle Identification JM3KE4DY7F0472 Color	Number	r		M M B	ake I AZDA ody Style		Year 2015	Model	ATES	
02	02	License Plate Numbe AEX2307 Vehicle Identification I JM3KE4DY7F0472 Color RED - RED	Number	r		M M B	ake IAZDA		Year 2015	Model CX-5	ATES	
05	02	License Plate Numbe AEX2307 Vehicle Identification JM3KE4DY7F0472 Color	Number	r		M M B	ake I AZDA ody Style		Year 2015	Model CX-5	ATES	7 8 9 10 11

Wisconsin Motor Vehicle Crash Form DT4000

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Щ		Г	Vehicle Damage						
UNIT	VEHICLE									
3	표	Extent Of Damage		06 - REAR, 07 - LEFT REAR CORNER						
	Ϋ́	FUNCTIONAL DAMAGE								
		Towed Due To Damage		/ehicle Removed By						
		NOT TOWED		OPERATOR						
		What Driver Was Doing LEFT TURN	[Vehicle Factors						
		Driver Prior Action Other		NOT APPLICABLE						
		Diver Filor Action Other								
		Driver Actions								
	щ	NO CONTRIBUTING ACTIO	N							
	C									
UNIT	VEHICLE									
	7									
		ON		10						
		Owner Name STEPHANIE KNUTES	SON HANKINS	Owner Address 204 OAK ST						
02	02			POYNETTE, WI 53	955 , US					
		Sequence Of Events								
		Event								
	0	MOTOR VEH IN TRANSPO	RT							
	02	Event								
	0									
	03	Event								
	04	Event								
		Dallan Haldan								
I≡I		Policy Holder		I						
UNIT		Insurance Company	NS-CO	Individual STEPHANIE KNUTE	SON HANKINS					
UNIT		Insurance Company STATE-FARM-GENERAL-IN	NS-CO	Individual STEPHANIE KNUTE	SON HANKINS					
UNIT		Insurance Company STATE-FARM-GENERAL-IN Individual	NS-CO	STEPHANIE KNUTE						
UNIT		Insurance Company STATE-FARM-GENERAL-IN Individual Driver	NS-CO SON HANKINS		SON HANKINS Sex FEMALE					
UNIT		Insurance Company STATE-FARM-GENERAL-IN Individual Driver		STEPHANIE KNUTE Citations Issued	Sex					
		Insurance Company STATE-FARM-GENERAL-IN Individual Driver		Citations Issued	Sex FEMALE					
		Insurance Company STATE-FARM-GENERAL-IN Individual Driver STEPHANIE KNUTES Address		Citations Issued	Sex FEMALE Race					
UNIT UNIT		Insurance Company STATE-FARM-GENERAL-IN Individual Driver STEPHANIE KNUTES Address 204 OAK ST	SON HANKINS	Citations Issued O Date of Birth	Sex FEMALE Race					
		Insurance Company STATE-FARM-GENERAL-IN Individual Driver STEPHANIE KNUTES Address	SON HANKINS	Citations Issued O Date of Birth	Sex FEMALE Race					
		Insurance Company STATE-FARM-GENERAL-IN Individual Driver STEPHANIE KNUTES Address 204 OAK ST POYNETTE, WI 53955 , US	SON HANKINS	Citations Issued 0 Date of Birth Driver License Number	Sex FEMALE Race					
	INDIVIDUAL	Insurance Company STATE-FARM-GENERAL-IN Individual Driver STEPHANIE KNUTES Address 204 OAK ST	SON HANKINS	Citations Issued O Date of Birth	Sex FEMALE Race					
	INDIVIDUAL	Insurance Company STATE-FARM-GENERAL-IN Individual Driver STEPHANIE KNUTES Address 204 OAK ST POYNETTE, WI 53955 , US fety Equipment	SON HANKINS	Citations Issued 0 Date of Birth Driver License Number	Sex FEMALE Race WHITE					
	INDIVIDUAL	Insurance Company STATE-FARM-GENERAL-IN Individual Driver STEPHANIE KNUTES Address 204 OAK ST POYNETTE, WI 53955 , US	SON HANKINS	Citations Issued 0 Date of Birth Driver License Number Safety Equipment	Sex FEMALE Race WHITE					
	INDIVIDUAL	Insurance Company STATE-FARM-GENERAL-IN Individual Driver STEPHANIE KNUTES Address 204 OAK ST POYNETTE, WI 53955 , US Fety Equipment Row	SON HANKINS Crash Seat Position	Citations Issued 0 Date of Birth Driver License Number Safety Equipment	Sex FEMALE Race WHITE					
	INDIVIDUAL	Insurance Company STATE-FARM-GENERAL-IN Individual Driver STEPHANIE KNUTES Address 204 OAK ST POYNETTE, WI 53955 , US Fety Equipment Row 01 - FRONT ROW Helmet Use	SON HANKINS Crash Seat Position	Citations Issued 0 Date of Birth Driver License Number Safety Equipment SHOULDER & LAP Helmet Compliance	Sex FEMALE Race WHITE					
	INDIVIDUAL	Insurance Company STATE-FARM-GENERAL-IN Individual Driver STEPHANIE KNUTES Address 204 OAK ST POYNETTE, WI 53955 , US Fety Equipment Row 01 - FRONT ROW	SON HANKINS Crash Seat Position	Citations Issued 0 Date of Birth Driver License Number Safety Equipment SHOULDER & LAP	Sex FEMALE Race WHITE					
TINU	INDIVIDUAL Safe	Insurance Company STATE-FARM-GENERAL-IN Individual Driver STEPHANIE KNUTES Address 204 OAK ST POYNETTE, WI 53955 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Sev	SON HANKINS Crash Seat Position 07 - LEFT	STEPHANIE KNUTE Citations Issued 0 Date of Birth Driver License Number Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance	Sex FEMALE Race WHITE					
TINU	INDIVIDUAL	Insurance Company STATE-FARM-GENERAL-IN Individual Driver STEPHANIE KNUTES Address 204 OAK ST POYNETTE, WI 53955 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Injury Sev NO APP	Crash Seat Position 07 - LEFT	STEPHANIE KNUTE Citations Issued 0 Date of Birth Driver License Number Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance	Sex FEMALE Race WHITE	Frapped/Extricated				
TINU	INDIVIDUAL Safe	Insurance Company STATE-FARM-GENERAL-IN Individual Driver STEPHANIE KNUTES Address 204 OAK ST POYNETTE, WI 53955 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Injury Ejected Injury Ferror Injury Injur	SON HANKINS Crash Seat Position 07 - LEFT erity ARENT INJURY	STEPHANIE KNUTE Citations Issued 0 Date of Birth Driver License Number Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED	Sex FEMALE Race WHITE					
TINU	INDIVIDUAL Safe	Insurance Company STATE-FARM-GENERAL-IN Individual Driver STEPHANIE KNUTES Address 204 OAK ST POYNETTE, WI 53955 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Injury Sev NO APP	SON HANKINS Crash Seat Position 07 - LEFT erity ARENT INJURY Ejection Path	STEPHANIE KNUTE Citations Issued 0 Date of Birth Driver License Number Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED	Sex FEMALE Race WHITE BELT TI					
TINU	INDIVIDUAL Safe	Insurance Company STATE-FARM-GENERAL-IN Individual Driver STEPHANIE KNUTES Address 204 OAK ST POYNETTE, WI 53955 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Injury Ejected NOT EJECTED NO APP	SON HANKINS Crash Seat Position 07 - LEFT erity ARENT INJURY Ejection Path	STEPHANIE KNUTE Citations Issued 0 Date of Birth Driver License Number Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED	Sex FEMALE Race WHITE BELT TI	NOT TRAPPED				
TINU	INDIVIDUAL Safe	Insurance Company STATE-FARM-GENERAL-IN Individual Driver STEPHANIE Address 204 OAK ST POYNETTE, WI 53955 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Injury Ejected NOT EJECTED Medical Transport	SON HANKINS Crash Seat Position 07 - LEFT erity ARENT INJURY Ejection Path	STEPHANIE KNUTE Citations Issued 0 Date of Birth Driver License Number Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED	Sex FEMALE Race WHITE BELT TI N E	NOT TRAPPED				

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

			Distracted By Source NOT APPLICABL	E (NOT DISTRAC	CTED)			
		Distracted By Action NOT DISTRACTED)					
		Non Motorist	Striking Unit #	Location				
		Prior Action						
		Action						
	UAL							
LNO	INDIVIDUAL							
	N							
		A :: 011						I = 15
		Action Other						To/From School
	L	Drug & Alcohol	Suspected Alcohol U NO	se	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	<u> </u>	
05	005	Drug Type						
		Individual Condition						
		APPEARED NORM	MAL					