WISCONSIN MOTOR VEHICLE CRASH REPORT

02/11/2024	Crash Time 07:01 PM Time Notified 07:02 PM Ind Run	School Bus Related	Time Arrived 07:20 PM Total Injured 00 Trailer or Towed Tags Amended Reconstruction	Reporting Threshold Secondary Crash
O2/11/2024 On Emergency Hit all Government Property Reportable Description Diagram	nd Run Lane Closu Active School Zone Crash Type PRIVATE PROPERTY/PARKII	O2 Ure Work Zone School Bus Related NO	00 00 Trailer or Towed Tags Amended	Reporting Threshold Secondary Crash
Government Property Reportable Description Diagram	Active School Zone Crash Type PRIVATE PROPERTY/PARKII	School Bus Related	Tags Amended	Secondary Crash
Property Reportable Page 10 Property Description Diagram	Crash Type PRIVATE PROPERTY/PARKII	NO	Amended	Crash
Reportable P Description Diagram	PRIVATE PROPERTY/PARKII	NG LOT		Crash
Diagram	W√DE		Reconstruction	
	W√DE		Reconstructio	
gas pump	First Stop Gas Station		Additional Info	ormation

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 02/11/2024

	Loc	ation								
ł		RKING LOT				Latitude			Longitud	de
		HBD LOT				43.531328975 -89.			-89.776	5522441
		THE TOWN OF DELTO SAUK COUNTY	ON .		X Coordinate Y Coordinate 4823566.5					
						Structure Type NO STRUCTURE				
	Cra	sh Scene								
1		Harmful Event				First Harm	ıful Event Lo	ocation		
		TOR VEH IN TRANSP	ORT				JNKNOW	'N		
	Man	ner of Collision		OFF ROADWAY, LOCATION UNKNOWN Light Condition						
	04 -	REAR TO REAR		DARK/LI						
	Roa	d Surface Condition(s)		Roadway	Factor(s)					
	DR	Y								
	Envi	ronment Factor(s)								
	NOI	NE				NONE				
	Wea	ther Condition(s)								
	CLE	EAR								
	Anin	nal Type				Relation To Trafficway NON TRAFFICWAY - PARKING LOT				
		sh Classification - Location	1			Crash Clas				
		VATE PROPERTY al Land				PRIVATE PROPERTY Access Control Special Study				Special Study
					1.	NO CON	TROL			
	Within Interchange Area Junction Location Inter NO NON-JUNCTION NOT						CTION			
į	Uni	t Summary								
	Unit	Status		Vehicle Ope	erating As C	lassification		Unit Type		
					CLASS			TRUCK		
01		cle Type					Operating As Endorsements			
٦		LITY TRUCK/PICKUP	Train/Bus # Recorded	T !! O'!	Total T			ailers Total HazMat Types		
	1 ota	I Occs	Train/bus # Recorded	Total # Citations Issued 0 Pre CrashTire Mark		0 Speed Lin		ers	0	iwat Types
	Insu YES	rance?	Direction Of Travel NOT ON ROADWAY					mit Total Lanes 0		es
		t Harmful Event: Collision		Special Fur	Special Function				cy Motor Vehicle Use	
>		IERSION, FULL OR PA	ARTIAL	NO SPEC	IAL FUNC	NOIT		NOT APPLICABLE		
		fic Way		Traffic Cont				Traffic Cont	ol Inopera	tive/Missing
		RKING LOT OR PRIVA	TE PROPERTY	NO CONT				NO Road Grade LEVEL		
		ace Type ACKTOP (BITUMINOU	e)	Road Curva						
		k Bus or HazMat	<u> </u>	JUNA				LLVLL		
	NO									
	,	Vehicle		In: =			C+ '	Countries		
	,	License Plate Number		Plate Type		v	St	Country of Is		
	,	License Plate Number	mher	LTK - LIC	GHT TRUC	К	WI	UNITED ST		
01	10	License Plate Number		7.	GHT TRUC	К		-	ATES	
10		License Plate Number LW7314 Vehicle Identification Nu 1GCVKREH9EZ3349 Color		Make CHEVRO Body Style	GHT TRUC DLET	К	WI Year	UNITED ST	ATES	
10	10	License Plate Number LW7314 Vehicle Identification Nu 1GCVKREH9EZ3349 Color GRN - GREEN		Make CHEVRO Body Style PK - PIC	OLET KUP	K	WI Year	Model SILVERAD	ATES	
T 01	E 01	License Plate Number LW7314 Vehicle Identification Nu 1GCVKREH9EZ3349 Color GRN - GREEN Initial Contact Point	99	Make CHEVRO Body Style	OLET KUP	К	WI Year	Model SILVERAD	ATES	7 8 9 10 11
UNIT 01	10	License Plate Number LW7314 Vehicle Identification Nu 1GCVKREH9EZ3349 Color GRN - GREEN	99	LTK - LIC Make CHEVRC Body Style PK - PIC	OLET KUP amage		WI Year 2014	Model SILVERAD	O O	7 8 9 10 11 6 2 2 12 5 4 3 2 1

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 02/11/2024

		Towed Due To Damage		Vehicle Removed By				
		NOT TOWED		OPERATOR				
		What Driver Was Doing		Vehicle Factors				
		BACKING						
		Driver Prior Action Other		NOT APPLICABLE				
		Driver Actions						
	щ	UNSAFE BACKING, LOO	KED BUT DID NOT SEE					
╘	C							
L	VEHICLE							
	VE							
		Owner Name		Owner Address				
_	_	DONALD COLEMAN		220 E TOWNLIN				
2	01			CORNELL, WI 54732 , US				
		Sequence Of Events						
	01	Event	ODT					
	0	MOTOR VEH IN TRANSP	ORI					
	02	Event						
	0	PARKED MOTOR VEHIC	LE					
	03	Event						
	0							
	04	Event						
	0							
_	ı	Policy Holder						
L		Insurance Company		Individual				
-		ROCKFORD-MUTUAL-IN	s-co	DONALD COLEM	AN			
		Individual						
		Driver		Citations Issued	Sex			
		DONALD COLEMAN		0	MALE			
	A			Date of Birth	Race			
_	\rightarrow							
	<u></u>							
Z	MD	Address		Driver License Numb	er			
L	IDIMD	220 E TOWNLINE RD N						
S	INDIVIDUAL		s		IN COUNTRY: UNITED STATES			
N D	INDIVID	220 E TOWNLINE RD N	S					
N		220 E TOWNLINE RD N CORNELL, WI 54732 , US						
N		220 E TOWNLINE RD N CORNELL, WI 54732 , US		STATE: WISCONS				
NO		220 E TOWNLINE RD N CORNELL, WI 54732 , US		STATE: WISCONS	IN COUNTRY: UNITED STATES			
N		220 E TOWNLINE RD N CORNELL, WI 54732 , Use fety Equipment	y Crash	STATE: WISCONS Safety Equipment	IN COUNTRY: UNITED STATES			
NO		220 E TOWNLINE RD N CORNELL, WI 54732 , Use Fety Equipment	y Crash Seat Position	STATE: WISCONS Safety Equipment	IN COUNTRY: UNITED STATES			
NO		220 E TOWNLINE RD N CORNELL, WI 54732 , US Fety Equipment Row 01 - FRONT ROW Helmet Use	y Crash Seat Position	STATE: WISCONS Safety Equipment SHOULDER & LA Helmet Compliance	IN COUNTRY: UNITED STATES			
NO		220 E TOWNLINE RD N CORNELL, WI 54732 , USE Fety Equipment Row 01 - FRONT ROW	y Crash Seat Position	STATE: WISCONS Safety Equipment SHOULDER & LA	IN COUNTRY: UNITED STATES			
NO		220 E TOWNLINE RD N CORNELL, WI 54732 , Use Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection	Seat Position 07 - LEFT	STATE: WISCONS Safety Equipment SHOULDER & LA Helmet Compliance Tint Compliance	IN COUNTRY: UNITED STATES			
	Sat	220 E TOWNLINE RD N CORNELL, WI 54732 , Use Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury S	Seat Position 07 - LEFT	STATE: WISCONS Safety Equipment SHOULDER & LA Helmet Compliance Tint Compliance Airbag	IN COUNTRY: UNITED STATES			
01 UNI		220 E TOWNLINE RD N CORNELL, WI 54732 , Use Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury S NO AF	Seat Position 07 - LEFT everity PARENT INJURY	STATE: WISCONS Safety Equipment SHOULDER & LA Helmet Compliance Tint Compliance	IN COUNTRY: UNITED STATES P BELT			
	Sat	220 E TOWNLINE RD N CORNELL, WI 54732 , Use Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury S NO AF Ejected	Seat Position 07 - LEFT everity PARENT INJURY Ejection Path	STATE: WISCONS Safety Equipment SHOULDER & LA Helmet Compliance Tint Compliance Airbag NON DEPLOYED	P BELT Trapped/Extricated			
	Sat	220 E TOWNLINE RD N CORNELL, WI 54732 , Use Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury S NO AF Ejected NOT EJECTED	Seat Position 07 - LEFT everity PARENT INJURY	STATE: WISCONS Safety Equipment SHOULDER & LA Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE	P BELT Trapped/Extricated NOT TRAPPED			
	Sat	220 E TOWNLINE RD N CORNELL, WI 54732 , Use Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury NO AF Ejected NOT EJECTED Medical Transport	Seat Position 07 - LEFT everity PARENT INJURY Ejection Path	STATE: WISCONS Safety Equipment SHOULDER & LA Helmet Compliance Tint Compliance Airbag NON DEPLOYED	P BELT Trapped/Extricated NOT TRAPPED			
	Sat	220 E TOWNLINE RD N CORNELL, WI 54732 , Use Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury NO AF Ejected NOT EJECTED Medical Transport NOT TRANSPORTED	Seat Position 07 - LEFT everity PARENT INJURY Ejection Path	STATE: WISCONS Safety Equipment SHOULDER & LA Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifie	Trapped/Extricated NOT TRAPPED EMS Run #			
	Sat	220 E TOWNLINE RD N CORNELL, WI 54732 , Use Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury NO AF Ejected NOT EJECTED Medical Transport	Seat Position 07 - LEFT everity PARENT INJURY Ejection Path	STATE: WISCONS Safety Equipment SHOULDER & LA Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE	P BELT Trapped/Extricated NOT TRAPPED			
	Sat	220 E TOWNLINE RD N CORNELL, WI 54732 , Use Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury NO AF Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital	Seat Position 07 - LEFT everity PPARENT INJURY Ejection Path NOT EJECTED/NOT AP	STATE: WISCONS Safety Equipment SHOULDER & LA Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifie	Trapped/Extricated NOT TRAPPED EMS Run #			
	Sat	220 E TOWNLINE RD N CORNELL, WI 54732 , Use Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury NO AF Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital	Seat Position 07 - LEFT everity PPARENT INJURY Ejection Path NOT EJECTED/NOT AP	STATE: WISCONS Safety Equipment SHOULDER & LA Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identified Date of Death	Trapped/Extricated NOT TRAPPED EMS Run #			
	Sat	220 E TOWNLINE RD N CORNELL, WI 54732 , Use Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury NO AF Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital	Seat Position 07 - LEFT everity PPARENT INJURY Ejection Path NOT EJECTED/NOT AP	STATE: WISCONS Safety Equipment SHOULDER & LA Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identified Date of Death	Trapped/Extricated NOT TRAPPED EMS Run #			

WISCONSIN MOTOR VEHICLE CRASH REPORT

		0.00		T						
		Non Motorist	Unit #	Location						
		Prior Action								
İ		Action								
	INDIVIDUAL									
╘	DΩ									
LIND	<u> </u>									
	Ē									
	=									
		Action Other						To/From School		
	,	Drug & Alcohol NO	ed Alcohol U	lse	Suspected Drug Use NO					
				T			T			
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	9		Alcohol Test Results			
		Drug Test Given		Drug Test Type		Drug Test Results				
		TEST NOT GIVEN		Brug Foot Typo		Drug Test Nesults				
_	_	Drug Type				L				
2	001									
		1 1 1 1 0 111								
		Individual Condition								
		APPEARED NORMAL								
		Individual			Town 1	To .				
		Passenger NILAH COLEMAN			Citations Issued Sex 0 FEMALE					
	AL				Date of Birth	Race				
_	INDIVIDUAL				Date of Direct	WHITE				
L	Σ	Address	Address			Driver License Number				
_	N	220 E TOWNLINE RD N			STATE: WISCONSIN COUNTRY: UNITED STATES					
		CORNELL, WI 54732 , US	•		STATE. WISSONIN SOCIALES					
		On Duta	O		0.51.5					
	Sat	On Duty fety Equipment	Crasn		Safety Equipment					
		Row	Seat Po	eition	SHOULDER & LAP	BELT				
		01 - FRONT ROW	09 - RI		0.0000000000000000000000000000000000000					
		Helmet Use			Helmet Compliance					
		Eye Protection			Tint Compliance					
	~ 1	Injury Se	verity		Airbag					
6	002		PARENT II	NJURY	NON DEPLOYED					
		Ejected	Ejection Pa		1		Trapped/Extricated			
		NOT EJECTED	NOT EJE	CTED/NOT APPI	LICABLE		NOT TRAPPED			
		Medical Transport			EMS Agency Identifier		EMS Run #			
		NOT TRANSPORTED								
		Hospital			Date of Death		Time of Death			
		Distracta	ed By Source	9						
		Distracted By	Ja Dy Goulde	•						
		Distracted By Action								
		Non Motorist Striking	Unit#	Location						
		14011 MOTOLIST								

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Prior Action										
TINO	INDIVIDUAL	Action Action Other								To/From School		
	ı	Orug & Alcohol NO	pected Alcohol U	se	Suspected Drug Use NO							
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type		Alcohol Test Resul			Results			
		Drug Test Given TEST NOT GIVEN		Drug Test Type	ype Drug Test Resul							
2	005	Drug Type										
		Individual Condition										
		APPEARED NORMAL										
		t Summary										
	_	Status			Vehicle Operating As Classi	ification		Unit Type	=			
		EGALLY PARKED cle Type			D CLASS			Operating As		ments		
02		SENGER VAN						Operating A	s Liluoise	ments		
		Occs	Train/Bus # Re	corded	Total # Citations Issued Total Traile			illers Total HazMat Types				
	2				0 0			0				
_	Insu	rance?	Direction Of Tra		Pre CrashTire Mark		Speed Limit N/A		Total Lan	ies		
L		: Harmful Event: Collision Wi			Special Function			Emergency Motor Vehicle Use				
_ ر		TOR VEH IN TRANSPO	RT		NO SPECIAL FUNCTION			NOT APPLICABLE				
		ic Way		Traffic Control			Traffic Control Inoperative/Missing					
		D-WAY, NOT DIVIDED ace Type			NO CONTROL Road Curvature			NO Road Grade				
		ACKTOP (BITUMINOUS))		STRAIGHT		LEVEL					
		k Bus or HazMat	<u> </u>									
		Vehicle										
		License Plate Number			Plate Type			Country of Iss				
		AJD5621			AUT - AUTOMOBILE			UNITED ST	ATES			
05	05	Vehicle Identification Numb 2FMZA52205BA92440			Make FORD			Model FREESTAR	Ł			
		Color SIL - SILVER (ALUMIN	IUM)		Body Style VN - VAN			Bus Use				
	щ	Initial Contact Point	<u>, </u>		Vehicle Damage					7 8 9 10 11		
LNO	걸	04 - RIGHT SIDE REAF	₹							6 7 8 9 10 11		
ź	VEHICL	Extent Of Damage MINOR DAMAGE			04 - RIGHT SIDE REA	R				5 4 3 2 1		
		Towed Due To Damage NOT TOWED			Vehicle Removed By OPERATOR				•			
•		What Driver Was Doing LEGALLY PARKED										

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 02/11/2024

						Veł	nicle Factors					
		[D: D: A // O//				NC	T APPLICABLE					
		Driver Prior Action Oth	ner			140	A A I LIOADLL					
		Driver Actions			ļ							
	Щ	NO CONTRIBUTIN	IG ACTI	ON								
LNO	VEHICLE											
5	ΈH											
	>											
		Owner Name					Owner Address					
02	02	MARIE PIETZSCH					533 WASHINGTON RIPON, WI 54971					
		Sequence Of Ev	vents									
	01	Event)PT								
	C											
	02	PARKED MOTOR	VEHICL	E								
	03	Event										
	04	Event										
		Policy Holder										
LNO		Insurance Company					ndividual					
\supset		PROGRESSIVE-CLASSIC-INS-CO				ľ	MARIE PIETZSCH					
	l	Individual										
		Driver ROBERT BRUDER					Citations Issued	Sex MALE				
	AL						Date of Birth	Race				
⊨	INDIVIDUAL							WHITE				
	Σ	Address				[Oriver License Number					
	Z	533 WASHINGTON ST RIPON, WI 54971 , US				STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sat	On Duty Crash afety Equipment					Safety Equipment					
	Ju.	Row		Seat Po	eition	SHOULDER & LAP BELT						
		01 - FRONT ROW		07 - LE		5/1002521X G D X D 221						
		Helmet Use		•		Helmet Compliance						
		Eye Protection				Tint Compliance						
		_										
05	003	Injury	Injury Se	verity PARENT I	N II IRY		Airbag NON DEPLOYED					
		Ejected	IIO AI I	Ejection Pa	th		TON DEL EGTED		Trapped/Extricated			
		NOT EJECTED		NOT EJE	CTED/NOT APP				NOT TRAPPED			
		Medical Transport NOT TRANSPORT	ΈD			E	EMS Agency Identifier		EMS Run #			
		Hospital				[Date of Death		Time of Death			
			Dietroete	d By Source								
		Distracted By	NOT AF	PPLICABL	E (NOT DISTRA	ACT	ED)					
		NOT DISTRACTED)									
		Non Motorist	Striking l	Jnit#	Location							

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Prior Action									
TIND	INDIVIDUAL	Action									
		Action Other							To/From School		
	L	Orug & Alcohol	Suspected A	Alcohol Use	9	Suspected Drug Use NO			<u> </u>		
		Alcohol Test Given TEST NOT GIVEN		,	Alcohol Test Type			Alcohol Test Results			
		Drug Test Given TEST NOT GIVEN		1	Drug Test Type		Drug Test Results				
02	003	Drug Type									
		Individual Condition									
		APPEARED NORMAL									
	į	ndividual									
	_	Passenger MARIE PIETZSCH				Citations Issued 0	Sex FEMALE				
╘	INDIVIDUAL					Date of Birth	Race WHITE				
LINO	INDIV	Address 533 WASHINGTON RIPON, WI 54971				Driver License Number STATE: WISCONSIN	I COUNTRY: UNI	TED STATES			
	Saf	ety Equipment	On Duty Cra	ash		Safety Equipment					
		Row 01 - FRONT ROW		Seat Posi		SHOULDER & LAP BELT					
		Helmet Use				Helmet Compliance					
		Eye Protection				Tint Compliance					
05	004	Injury	Injury Seven	rity RENT IN.	IURY	Airbag NON DEPLOYED					
		Ejected	Eje	ection Path				Trapped/Extricated			
		NOT EJECTED Medical Transport	N	OT EJECT	TED/NOT APPL	ICABLE EMS Agency Identifier		NOT TRAPPED EMS Run #			
		NOT TRANSPORT	ED			Livio / igorioy radinanor					
		Hospital				Date of Death		Time of Death			
		Distracted By	Distracted E	By Source		'					
		Distracted By Action									
		Non Motorist	Striking Uni	t# I	Location						
		Prior Action		<u> </u>							

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 02/11/2024

		Action						
	Ļ							
_	INDIVIDUAL							
UNIT	/ID							
)	D							
	Z							
		Action Other						To/From School
			Cuanastad Alashal I la	-	Suspected Drug Use			
	L	Orug & Alcohol			NO			
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results	
		TEST NOT GIVEN						
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
02	004	Drug Type						
	0							
		Individual Condition						
		APPEARED NORM	/IAL					