WISCONSIN MOTOR VEHICLE CRASH REPORT

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

10:46 AM 02/13/2024 10:59 AM Date Notified 10:47 AM 02 10:11s 10:41 Injured 02 10:41 Killed 02/13/2024 10:47 AM 02 10:47 AM 02 10:47 AM 10:41 Injured 02 10:47 AM 10:47 AM 10:47 AM 10:41 Injured 02 10:47 AM 10:47 AM 10:47 AM 10:41 Injured 02 Injure		de Primary Crash	Agency Crash Number 24-01568			Investigating Officer/Deputy DEPUTY A. KING				
On Emergency	Crash Date 02/13/2024									
Government Property Active School Zone No Tags Reportable DT4000 (STANDARD CRASH) Reportable DT4000 (STANDARD CRASH) Reconstruction By Reconstruction By Additional information PHOTOS								ed		
Reportable DT4000 (STANDARD CRASH) Reconstruction By Reconstruction By Reconstruction By Additional Information PHOTOS	On Emergency	Hit and Run	✓ Lane Clos	sure	Work Zone	Trailer o	r Towed	Reporting Threshold		
Reconstruction By Not to scale Not to scale Additional Information PHOTOS Additional Information PHOTOS		Active S	chool Zone		Bus Related	Tags		•		
Reconstruction By Not to scale Additional Information PHOTOS Additional Information PHOTOS	· · · · · · · · · · · · · · · · · · ·	Crash Type DT4000 (STA	ANDARD CRASI	H)		Amende	d	Secondary Crash		
Not to scale Photos By A. KING Additional Information PHOTOS Additional Information PHOTOS	escription =	L.						_		
Additional Information PHOTOS 78 78 78		Not to scale				5	Photos By A. KING			
	78		Google		78	78				

LEFT ON GOETTE RD. KAILA WAS THEN EXTRICATED FROM THE VEHICLE AND MEDFLOWN TO MADISON. I OBSERVED THE SEATBELT TO BE FASTENED, AND IN TACT, AND TAUGHT. OPERATOR OF U2 STATED HE WAS STATIONARY WAITING TO TURN ONTO GOETTE RD WITH HIS BLINKER ACTIVATED. OPERATOR STATED HE DID NOT SEE U1 APPROACHING HIM NOR HEARD TIRE SQUEALING. OPERATOR OF U2 DENIED INJURIES ON SCENE AND REFUSED TREATMENT. EVERETT'S TOWING RESPONDED TO REMOVE U1. U2 WAS REMOVED BY OPERATOR. ON 2-16-24 OPERATOR OF U2 WAS CONTACTED VIA PHONE AND STATED HE WENT TO THE ER AND WAS DIAGNOSED WITH A CONCUSSION. DUE TO MEDICAL INJURIES I SPOKE WITH KAILA OVER THE PHONE ON 2-16-24. KAILA STATED SHE WAS DRIVING HOME TO TAKE A NAP AS SHE WAS TIRED BUT STATED SHE DID NOT FALL ASLEEP BEHIND THE WHEEL. KAILA SAID SHE DID NOT SEE THE BRAKE LIGHTS ACTIVE OR BLINKER. KAILA SAID SHE THEN SAW THE VEHICLE AND HIT THE BRAKES BUT WAS TOO LATE AND STRUCK THE VEHICLE. KAILA DENIED PHONE USE OR OTHER DISTRACTIONS PRESENT. KAILA ALSO ADMITTED TO NOT WEARING HER SEAT BELT. I COMPLETED A CITATION FOR FAILURE TO CONTROL VEHICLE AND NOT WEARING HER SEAT BELT. I COMPLETED A

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Crash Date 02/13/2024

Crash Time 10:46 AM

Location Location												
INTERSECTION					Latitude			Longitude				
ON STH78 NB					43.37197	78189		-89.691	1027743			
AT GOETTE RD					X Coordin	ate		Y Coord	linate			
IN THE TOWN OF MERRI	IMAC				281981.875 4805641							
IN SAUK COUNTY					Structure	Туре		I I				
Crash Scene					I							
First Harmful Event					l e:							
	ODT				First Harn		t Location					
MOTOR VEH IN TRANSP	MOTOR VEH IN TRANSPORT						ON ROADWAY					
					Light Condition							
03 - FRONT TO REAR					DAWN	-						
Road Surface Condition(s)					Roadway	Factor(s)	1					
DRY												
Environment Factor(s)												
NONE					NONE							
Weather Condition(s)												
CLEAR												
Animal Type					Relation T	To Traffic	way					
							ON ROAD					
Crash Classification - Location	1				Crash Classification - Jurisdiction							
PUBLIC PROPERTY					NO SPECIAL JURISDICTION							
Tribal Land					Access Control Special Study PARTIAL CONTROL							
Within Interchange Area	Junction Location			Intersectio	ion Type							
NO	INTERSECTION-RELATED)		T-INTER	SECTION							
Closure Type			Reasons for Closure									
FULL CLOSURE												
Date Initial Lane/Rd Closed	Time Initial Lane/Rd Closed	d	TOW	TRUCK, F	, FIRE/EMS, MED FLIGHT							
02/13/2024	11:24 AM											
Date All Lanes Open	Time All Lanes Open		Date :	Date Scene Cleared Time Scene Cleared								
02/13/2024	11:47 AM		02/13/2024			12:14 PM						
Unit Summary												
Unit Status		Vehic	cle Ope	erating As Cl	lassification	1	Unit Type	Unit Type				
IN TRANSIT		D CI	D CLASS				AUTOM	AUTOMOBILE				
Vehicle Type		•					Operating	Operating As Endorsements				
(SPORT) UTILITY VEHIC	LE											
Total Occs	Train/Bus # Recorded		# Cita	tions Issued		Total T	railers	Total Haz	Mat Types			
1		2				0		0	0			
Insurance?	Direction Of Travel		Pre	CrashTire		Speed	Limit		Total Lanes			
YES	NORTHBOUND			Mark		55		2				
Most Harmful Event: Collision MOTOR VEH IN TRANSP			ial Fun SPEC	iction IAL FUNC	TION			y Motor Veh PLICABLE				
Traffic Way		Traffi	c Cont	rol			Traffic Co	ntrol Inopera	tive/Missing			
TWO-WAY, NOT DIVIDED)	NO	CONT	NTROL NO								
Surface Type Road Curvature							Road Gra	Road Grade				
BLACKTOP (BITUMINOU	CUR	URVE RIGHT				DOWNHILL						
Truck Bus or HazMat	Truck Bus or HazMat											
NO												
Vehicle						Lou						
License Plate Number			е Туре		_	St	Country of					
AFH2773				TOMOBIL	.E	WI	UNITED	STATES				
Vehicle Identification Nu 1GNKVGED4CJ1231		Mak				Year	Model	. -				
○ 1GNKVGED4CJ1231	LET		2012	TRAVER	SE.							

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

		Color		Body Style Bus Use								
		WHI - WHITE Initial Contact Point		UT - SPORT UTILITY VEHICLE Vehicle Damage								
_	뜻	12 - FRONT		7 8 9 10								
UNIT	VEHICLE	Extent Of Damage		12 - FRONT			6 4 12					
	7	DISABLING DAMAGE		5 4 3 2 1								
		Towed Due To Damage TOWED DUE TO DISABLING		Vehicle Removed By EVERETTS TOWING								
		What Driver Was Doing		Vehicle Factors								
		NEGOTIATING CURVE										
		Driver Prior Action Other		NOT APPLICABLE								
		Driver Actions										
	щ	FAILURE TO CONTROL										
UNIT	VEHICLE											
Ď	표											
	>											
		Owner Name		Owner Address								
01	7	KAILA KATUZNY (608) 844-9620		120 E MAIN ST MERRIMAC, WI	53561 US							
0	0	(000) 011 00=0			, , , ,							
	:	Sequence Of Events										
	2	Event) T									
	0	MOTOR VEH IN TRANSPOR	(1									
	02	Event										
	03	Event										
	04	Event										
_		Policy Holder										
UNIT		Insurance Company		Individual								
ر		PROGRESSIVE-CLASSIC-IN	IS-CO	KAILA KATUZNY								
	١	Individual		Citations Issued	Leav							
		Driver KAILA KATUZNY		Citations Issued 2	Sex FEMALE							
	DUAL	(608) 844-9620		Date of Birth	Race							
╘	<u></u>				WHITE							
N	INDIN	Address 120 E MAIN ST		Driver License Number								
	Z	MERRIMAC, WI 53561, US		STATE: WISCONSIN COUNTRY: UNITED STATES								
	Sat	On Duty Cr	rash	Safety Equipment								
		Row	Seat Position	NONE USED - VEHICLE OCCUPANT								
		01 - FRONT ROW	07 - LEFT									
		Helmet Use	•	Helmet Compliance								
		Eye Protection	Tint Compliance									
0	00	Injury Seve	rity TED SERIOUS INJUR	Airbag DEPLOYED-FRONT								
		Ejected Ej	ection Path			Trapped/Extricated						
		NOT EJECTED N Medical Transport	OT EJECTED/NOT APP	PLICABLE TRAPPED/EXTRICATED EMS Agency Identifier EMS Run #								
		EMS AIR		6001285	•	LIVIO IXUII #						

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

		Hospital UNIVERSITY OF W	VI HOSPITA	LS & (CLINICS AUT	Date of Death		Time of Death				
	,	Distracted By	Distracted By NOT APPL	Source	E (NOT DISTRAC	CTED)						
		Distracted By Action NOT DISTRACTED)									
	,	Non Motorist	Striking Unit #	#	Location							
		Prior Action										
		Action										
	١٩٢											
LIND	INDIVIDUAL											
<u>ا</u>	NDI											
	_											
		Action Other									To/From School	
			Suspected Al	cohol U	se	Suspected Drug Use						
	L	Drug & Alcohol NO				NO						
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type	e		Alcohol -		Test Results		
		Drug Test Given TEST NOT GIVEN			Drug Test Type	Drug Test Result		Test Results				
10	001	Drug Type										
	0											
		Individual Condition										
		ASLEEP OR FATIO	GUED, OTH	ER								
	١	Violations										
	01	UTC Number BK261463	Issue To? 001	347	ute Number .48(2m)(b)	Description VEHICLE OPERATOR FAIL/WEAR SEAT BELT						
	02	UTC Number				Description FAILURE TO KEEP VEHICLE UNDER CONTROL						
•	Unit	Summary •		ı		L						
		Status				ehicle Operating As Classif	ication	l	Unit Type			
		RANSIT cle Type			С	CLASS			TRUCK Operating As Endorsements			
05		LITY TRUCK/PICKU	IP TRUCK						operag			
	Total	Occs	Train/Bu	us # Red	corded To	otal # Citations Issued		Total Traile	ers	Total HazN	Mat Types	
	Insur	ance?	Directio	n Of Tra		Pre CrashTire		Speed Limi	it	Total Lanes		
L	YES		NORTI	HBOUI		Mark		55	2 Emergency Motor Vehicle Use			
5		Harmful Event: Collision		Special Function NO SPECIAL FUNCTION			NOT APPLICABLE					
	-					Traffic Control			Traffic Control Inoperative/Missing NO			
		ace Type	<u></u>			NO CONTROL Road Curvature			Road Grade			
		CKTOP (BITUMINO	DUS)		С	URVE RIGHT			DOWNHIL	.L		
	Trucl NO	k Bus or HazMat										
		Vehicle										

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		License Plate Number		Plate Type	St	Country of Issuance				
		FB45260		HTK - HEAVY TRUCK	WI	UNITED STATES				
05	02	Vehicle Identification Number		Make	Year	Model				
٥ ا	0	3C7WRNEL8JG359998		RAM	2018	5500				
		Color WHI - WHITE		Body Style PK - PICKUP		Bus Use				
		Initial Contact Point		Vehicle Damage						
H	VEHICLE	06 - REAR		verlicie Damage			7 8 9 10 11			
	우	Extent Of Damage		06 - REAR			6			
⊃	回	MINOR DAMAGE		00 - REAR						
	>	Towed Due To Damage	\	Vehicle Removed By						
		TOWED BUT NOT DUE TO DISAI		,						
		What Driver Was Doing	\	Vehicle Factors						
		LEFT TURN								
		Driver Prior Action Other		NOT APPLICABLE						
		Driver Actions NO CONTRIBUTING ACTION								
ا ــ	LE LE	NO CONTRIBUTING ACTION								
CENT CENT CENT CENT CENT CENT CENT CENT										
	>									
		Owner Name		Owner Address						
~	2	WISCONSIN POWER AND LIGHT	CO.	4902 N BILTMORE						
05	02			MADISON, WI 537	18 , US					
		Sequence Of Events								
	01	Event MOTOR VEH IN TRANSPORT								
		Event								
	02									
	03	Event								
	04	Event								
⊑l		Policy Holder								
		Insurance Company WISCONSIN-POWER-&-LIGHT-C	OMDANY	Organization/Company WISCONSIN POWE		20				
			OWFANT	WISCONSIN FOWE	AND LIGHT	50.				
		ndividual Driver		Citations Issued	Sex					
		MATTHEW JENSEN		Citations Issued 0	MALE					
	A			Date of Birth	Race					
⊢I	INDIVIDUAL				WHITE					
	⋝	Address		Driver License Number						
٦		E7822 VIRGINIA TER		CTATE, WICCONCIN COUNTRY, UNITED CTATES						
	=	REEDSBURG, WI 53959 , US		STATE: WISCONSIN COUNTRY: UNITED STATES						
	Saf	On Duty Crash Tety Equipment		Safety Equipment						
		Row Seat	t Position	SHOULDER & LAP	BELT					
			LEFT							
		Helmet Use		Helmet Compliance						
		Eye Protection		Tint Compliance						
~	2	Injury Severity		Airbag						
05	005	Injury POSSIBLE INJ	IURY	NON DEPLOYED						

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Crash Date 02/13/2024

Crash Time 10:46 AM

	Ejected	Eje	ection Path	n			Trapped/Extricated		
	NOT EJECTED	NO	OT EJEC	TED/NOT APPL			NOT TRAPPED		
					EMS Agency Identifier		EMS Run #		
		ED							
	Hospital				Date of Death		Time of Death		
		Distracted D	D. Cauraa						
	Distracted By	NOT APPI	LICABLE	(NOT DISTRAC	CTED)				
,	Non Motorist	Striking Unit	t #	Location					
	Prior Action		I						
	Action								
_									
JA									
פ									
Ξ									
_									
	Action Other							To/From School	
L	Drug & Alcohol	Suspected A NO	Alcohol Us	se	Suspected Drug Use NO				
	Alcohol Test Given			Alcohol Test Type			Alcohol Test Results		
				Drug Toet Typo		Drug Toot Dooulto			
				Diag Test Type		Drug Test Results			
002	Drug Type								
	Individual Condition								
	ADDE ADED MODA								
	APPEARED NORM	/IAL							
		NOT EJECTED Medical Transport NOT TRANSPORT Hospital Distracted By Distracted By Action NOT DISTRACTED Non Motorist Prior Action Action Action Action Alcohol Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Type Individual Condition	NOT EJECTED Medical Transport NOT TRANSPORTED Hospital Distracted By NOT APPI Distracted By Action NOT DISTRACTED Non Motorist Prior Action Action Action Action Alcohol Test Given TEST NOT GIVEN Drug Type	Mot EJECTED Medical Transport NOT TRANSPORTED Hospital Distracted By Distracted By Source NOT APPLICABLE Distracted By Action NOT DISTRACTED Non Motorist Prior Action Action Action Action Action Action Suspected Alcohol Us NO Alcohol Test Given TEST NOT GIVEN Drug Type Individual Condition	Medical Transport NOT TRANSPORTED Hospital Distracted By Action NOT DISTRACTED Non Motorist Prior Action Action Action Action Action Alcohol Test Given TEST NOT GIVEN Drug Type Individual Condition NOT TRANSPORTED Distracted By Source NOT APPLICABLE (NOT DISTRACTED) Striking Unit # Location Action Action Action Alcohol Test Type Test Type Test Type Test Type Individual Condition	NOT EJECTED Medical Transport NOT TRANSPORTED Hospital Distracted By Action NOT DISTRACTED Non Motorist Prior Action Action Action Action Action Other Drug & Alcohol Prest Given TEST NOT GIVEN Drug Type Imdividual Condition NOT EJECTED/NOT APPLICABLE EMS Agency Identifier EMS Agency Identifier EMS Agency Identifier EMS Agency Identifier Location EMS Agency Identifier Date of Death Date of Death Date of Death Action Distracted By Source NO Alcohol Test Given Test NOT GIVEN Drug Test Type Individual Condition	NOT EJECTED NOT EJECTED/NOT APPLICABLE	NOT EJECTED NOT EJECTED/NOT APPLICABLE NOT TRAPPED	