24-02354

## WISCONSIN MOTOR VEHICLE CRASH REPORT

Document Number Override	Primary Crash		Agency Crash Num 2 <b>4-02354</b>	Investigating Officer/Deputy DEPUTY B. STODDARD			
Crash Date 03/08/2024	Crash Time 08:10 AM		Date Arrived 3/08/2024		Time Arrived 08:25 AM		
Crash Date 03/08/2024 Date Notified 03/08/2024 On Emergency Government Property	Time Notified 08:10 AM		otal Units 1 <b>4</b>		Total Injured <b>02</b>	Total Kille 00	d
On Emergency	Hit and Run	Lane Closure		Zone	Trailer or	Towed	Reporting Threshold
Government Property		sheel Zene	School Bus Related NO	1	Tags		
Reportable	Crash Type DT4000 (STA	ANDARD CRASH)			Amended		Secondary Crash
Description					1	construction	
Power Line USH 12 USH 12	Not to	o Scale			Ad PH		

24-02354

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Loc	ation									
	USH12 EB					Latitude			Longitue	de
	5 MI S					43.32945	58409		-89.759	056087
	USH12 EB					X Coordin	ate		Y Coord	linate
	HE TOWN OF SUMPT	ER				276313.9	6875		480109	
IN S	AUK COUNTY					Structure <sup>-</sup>	Type			
						NO STR		RE		
Cra	sh Scene									
First	Harmful Event					First Harm	nful Ever	nt Location		
UTI						SHOULD				
-	ner of Collision					Light Cond				
		HICLE IN TRANSPORT				DAYLIG				
	d Surface Condition(s)					Roadway		.)		
						rtoudway	1 40101 (6	,		
DR	ſ									
Envi	ronment Factor(s)									
NO	NE					NONE				
Wea	Weather Condition(s)									
CLC	DUDY									
Anim	Animal Type						o Traffic			
								- ON ROAD		
	h Classification - Location							on - Jurisdiction		
_	BLIC PROPERTY							URISDICTION		
Triba	al Land					Access Control Special Study				
						NO CON	TROL			
	in Interchange Area	Junction Location			Intersectio					
NO		NON-JUNCTION			NOT AN	N INTERSECTION				
	ure Type			Reaso	ons for Closu	ıre				
FUL	L CLOSURE									
Date	Initial Lane/Rd Closed	Time Initial Lane/Rd Closed	d	отн	ER					
	8/2024	08:10 AM								
	All Lanes Open	Time All Lanes Open			Scene Clear	ed		Time Scene Cle	eared	
03/0	8/2024	12:00 PM		03/08	8/2024			12:30 PM		
	t Summary							<b></b>		
-	Status				erating As Cl	assification		Unit Type		
			DC	LASS				TRUCK	A - <b>F</b> a - J	
	cle Type							Operating	As Endorse	ments
-			1 = 1				Tatal	Freilere	Tatal Lla-	Mat Types
1 ota	I Occs	Train/Bus # Recorded	1 ota	i # Cita	tions Issued		0	Frailers	10tai Haz 0	imat Types
Insu	rance?	Direction Of Travel		Pro	CrashTire		Speed	Limit	Total Lan	es
YES	5	SOUTHBOUND		110	Mark		55		4	
Mos	t Harmful Event: Collision \	With		cial Fun				Emergend	y Motor Veh	icle Use
	LITY POLE		NO	SPEC	IAL FUNC	TION			PLICABLE	
	ic Way			ic Cont					ntrol Inopera	tive/Missing
	DED HWY W/O TRAF	FIC BARRIER		CONT				NO		
	асе Туре			d Curva				Road Grad	le	
	CKTOP (BITUMINOUS	S)	STR	RAIGH	Т			LEVEL		
Truc NO	k Bus or HazMat									
	Vehicle									
	License Plate Number		Plat	te Type			St	Country of	ssuance	
	5615BHO				HT TRUC	к	AL	UNITED S		
	Vehicle Identification Nun	nber	Mal				Year	Model	-	
0	3GCUKREC9JG2555		СН	EVRO	LET		2018	SILVERA	DO	
					include env					02/08/2024

5

UNIT

2

24-02354

# WISCONSIN MOTOR VEHICLE CRASH REPORT

		Color			Boo	dy Style		Bus Use			
		MAR - MAROON (BURGU	NDY)			- PICKUP					
	ш	Initial Contact Point	,			hicle Damage		<u> </u>			
⊢	Ц.	12 - FRONT				- RIGHT FRONT CO			7 8 9 10 11		
UNIT	¥	Extent Of Damage				RONT, 03 - RIGHT SI			6 12		
	VEHICLE	DISABLING DAMAGE				EAR, 11 - LEFT FRO			5 4 3 2 1		
	>	Towed Due To Damage				hicle Removed By	,				
		TOWED DUE TO DAMage									
ļ			INGL	AWAGE							
		What Driver Was Doing			ver	hicle Factors					
		GOING STRAIGHT			OTHER						
		Driver Prior Action Other				NEK					
		Driver Actions									
	VEHICLE	RAN OFF ROADWAY									
UNIT	Ū										
15	Ξ										
<b>_</b>	ž										
1		Owner Name				Owner Address					
	_	DONNA LEATHERBERRY	(			1295 NEW LINCOL					
5	0	(608) 393-9586				TALLADEGA, AL 3	5160 , US				
		Sequence Of Events									
		Event									
	0	UTILITY POLE									
		Event									
	02	Lyon									
		Event									
	03	2.0.0									
	_	Event									
	04										
۱.		Policy Holder									
UNIT		Insurance Company				Individual					
5		STATE-FARM-GENERAL	INS-0	00		DYLAN BLASER					
		Individual				Oitatiana laguad	0				
		Driver DYLAN BLASER				Citations Issued	Sex				
	Ļ	(256) 589-1620				1	MALE				
	DUAL	()			L	Date of Birth	Race WHITE				
<b>⊢</b>	₽						WHILE				
IN IN	N	Address			[	Driver License Number					
-	INDIVI	106 PLEASANT ST NORTH FREEDOM, WI 53	2051	119		STATE: WISCONSIN		ITED STATES			
	-		551	, 00							
	Sat	f <b>ety Equipment</b>	/ Crasł	ו	0.5	Safety Equipment					
	Sai	ety Equipment									
		Row		eat Position	\$	SHOULDER & LAP I	BELT				
		01 - FRONT ROW	0	7 - LEFT							
		Helmet Use			ł	Helmet Compliance					
		Eye Protection			٦	Tint Compliance					
2	001	Injury S	everity	1		Airbag					
	õ	Injury POSSI				NON DEPLOYED					
		Ejected		ion Path				Trapped/Extricated			
	NOT EJECTED NOT EJECTED/NOT APPLI							NOT TRAPPED			
		Medical Transport			E	EMS Agency Identifier		EMS Run #			
		NOT TRANSPORTED									
Wieco	nsin M	Motor Vehicle Crash		This re	port d	oes not include any CJI	S data.	Crash Da	ite 03/08/2024		

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## WISCONSIN MOTOR VEHICLE CRASH REPORT

		Hospital					Date of Death			Time of Dea	th		
		Distracted By	Distra	acted By Sou	urce								
		Distracted By Action											
		UNKNOWN											
		Non Motorist	Striki	ng Unit #	Location								
		Prior Action											
		Action											
	_												
L	INDIVIDUAL												
UNIT	/ID												
5	DN												
	Z												
		Action Other										To/From School	
	L	Drug & Alcohol	Susp NO	ected Alcoh	ol Use		Suspected Drug Use						
		Alcohol Test Given			Alcohol Test	Гуре	/pe Al				Alcohol Test Results		
		TEST NOT GIVEN											
		Drug Test Given TEST NOT GIVEN			Drug Test Typ	be		Drug 1	Fest Results				
0	001	Drug Type											
	•	Individual Condition											
		Individual Condition											
		APPEARED NORM	IAL										
	,	liolations											
	01	UTC Number			Statute Number <b>346.13(1)</b>		Description UNSAFE LANE DEV	ΙΔΤΙΟΙ	N				
		BG110829	001	,	540.15(1)								
		Summary					- hisls On susting As Olsesi	C					
		Status I-CONTACT					ehicle Operating As Classi CLASS	fication		Unit Type AUTOMO			
••		cle Type					OLAGO			Operating A		ents	
02		SENGER CAR											
		Occs		Train/Bus #	Recorded		otal # Citations Issued		Total Traile	ers	Total HazN	lat Types	
	1			Ding ation Of	T	0			0 On a set Line		0	-	
	Insur YES	ance?		Direction Of NORTHB			Pre CrashTire Mark		Speed Lim 55	It	Total Lanes	5	
UNIT		Harmful Event: Collisio			JUND	S	pecial Function		55	Emergency		le Use	
		UCK BY FALLING,			RGO OR ANYT		O SPECIAL FUNCTIO	N		NOT APPL			
	Traff	ic Way				Tr	raffic Control			Traffic Conti	ol Inoperativ	/e/Missing	
		DED HWY W/O TRA	FFIC	C BARRIE	R		O CONTROL			NO			
							oad Curvature			Road Grade			
BLACKTOP (BITUMINOUS) Truck Bus or HazMat						5	TRAIGHT			LEVEL			
	NO	. Eas of Hazinat											
	1	/ehicle											
	License Plate Number						Plate Type		St	Country of Is:			
		510YGK				1	AUT - AUTOMOBILE		WI	UNITED ST	ATES		
	02												

### 24-02354

## WISCONSIN MOTOR VEHICLE CRASH REPORT

02		Vehicle Identification Number KMUMADTBXPU097520		Make GNSS	Year <b>2023</b>	Model GV70				
		Color		Body Style	2023	Bus Use				
		BLK - BLACK		UT - SPORT UTILIT	Y VEHICLE	Dus Ose				
	ш	Initial Contact Point		Vehicle Damage						
E	VEHICLE	11 - LEFT FRONT CORNER		5			7 8 9 10 11			
UNIT	Ĕ	Extent Of Damage		10 - LEFT SIDE FR	ONT. 11 - LEFT F	RONT CORNER	6 ( 12			
	Ē	FUNCTIONAL DAMAGE			- ,		5 4 3 2 1			
	-	Towed Due To Damage		Vehicle Removed By						
		NOT TOWED		OPERATOR						
		What Driver Was Doing		Vehicle Factors						
		GOING STRAIGHT								
		Driver Prior Action Other		NOT APPLICABLE						
		Driver Actions								
	щ	NO CONTRIBUTING ACTION	I, UNKNOWN							
E	บ									
UNIT	VEHICLE									
-	3									
		Owner Name		Owner Address						
02	02	CHRISTINA ZENTMYER (415) 728-4270		5030 CONGRES						
0	0	(415) 728-4270		MIDDLETON, WI 53562 , US						
	;	Sequence Of Events								
	0	Event STRUCK BY FALLING, SHIF	TING CARGO OR ANY	THING SET IN MOTI	ON BY MOTOR V	'EHICLE				
	02	Event								
	03	Event								
	0									
	04	Event								
⊨	l	Policy Holder								
UNIT		Insurance Company ACUITY,-A-MUTUAL-INSURA	ANCE-CO	Individual CHRISTINA ZENTMYER						
		Individual								
		Driver		Citations Issued	Sex					
		CHRISTINA ZENTMYER		0	FEMALE					
	INDIVIDUA	(415) 728-4270		Date of Birth	Race					
E	ď				WHITE					
UNIT	Σ	Address		Driver License Numb	ber					
	Ð	5030 CONGRESSIONAL HL MIDDLETON, WI 53562, US		STATE: WISCON		NITED STATES				
	=	MIDDLETON, WI 53562, US		STATE. WISCON		NITED STATES				
	Sat	On Duty Cr. fety Equipment	ash	Safety Equipment						
			Coat Desition	RESTRAINT USE						
		Row 01 - FRONT ROW	Seat Position 07 - LEFT							
		Helmet Use		Helmet Compliance						
				i ionnot o ompilarioo						
		Eye Protection		Tint Compliance						
	N Injury Severity			Airbag						
02	8 Injury Severity NO APPARENT INJURY			NOT APPLICABLE						
			ection Path	Trapped/Extricated						
		NOT APPLICABLE N	OT EJECTED/NOT API	LICABLE		NOT APPLICABI	_E			

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## WISCONSIN MOTOR VEHICLE CRASH REPORT

									. ,		
		Medical Transport NOT TRANSPORTED			EMS Agency Iden	tifier		EMS Run #			
		Hospital			Date of Death			Time of Death			
	l	Distracted By NO <sup>-</sup>	racted By Source	E (NOT DISTR	RACTED)						
		Distracted By Action NOT DISTRACTED									
			ing Unit #	Location							
	]	Prior Action									
		Action									
UNIT	INDIVIDUAL										
		Action Other							To/From School		
	L	Drug & Alcohol	pected Alcohol U	se	Suspected Drug U	lse					
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test T	уре			Alcohol Test Results			
		Drug Test Given TEST NOT GIVEN		Drug Test Type	e Drug Test Results						
02	002	Drug Type		I							
		Individual Condition									
		NOT OBSERVED									
	IIni	t Summary									
		Status			Vehicle Operating As	Classification		Unit Type			
		N-CONTACT			D CLASS			AUTOMOBILE			
		cle Type			5 02.00			Operating As Endorse	ements		
03		SENGER CAR									
	Tota	I Occs	Train/Bus # Re	corded	Total # Citations Issue	ed	Total Traile		zMat Types		
	2				0		0	0			
F	YES		Direction Of Tra SOUTHBOUI		Pre CrashTir	re	Speed Lim 55	4			
UNIT		t Harmful Event: Collision Wi RUCK BY FALLING, SHI		O OR ANYT	Special Function NO SPECIAL FUN	CTION		Emergency Motor Vel			
		ĩc Way I <b>DED HWY W/O TRAFFI</b>	C BARRIER		Traffic Control NO CONTROL			Traffic Control Inopera	ative/Missing		
		асе Туре			Road Curvature			Road Grade			
BLACKTOP (BITUMINOUS) Truck Bus or HazMat					STRAIGHT			LEVEL			
	NO										
	١	Vehicle									
		License Plate Number			Plate Type		St	Country of Issuance			
		618WRB			AUT - AUTOMOB	ILE	wi	UNITED STATES			
03	03	Vehicle Identification Numb 5TDYK3DC7CS243101			Make TOYOTA			Model SIENNA XLE			
		-									

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## WISCONSIN MOTOR VEHICLE CRASH REPORT

		Color		Body Style		Bus Use		
		GRY - GRAY		VN - VAN				
	ш	Initial Contact Point		Vehicle Damage				
⊢	VEHICLE	02 - RIGHT SIDE FRONT		Ŭ			7 8 9 10 11	
UNIT	¥	Extent Of Damage		01 - RIGHT FRONT C			6 12	
>	Ē	FUNCTIONAL DAMAGE		FRONT, 03 - RIGHT S	SIDE MIDDLE, 13	- TOP	5 4 3 2 1	
	>	Towed Due To Damage		Vehicle Removed By				
		NOT TOWED		OPERATOR				
		What Driver Was Doing		Vehicle Factors				
		GOING STRAIGHT		NOT APPLICABLE				
		Driver Prior Action Other		NUT APPLICABLE				
		Driver Actions						
	VEHICLE	NO CONTRIBUTING ACT	ION, UNKNOWN					
UNIT	<u></u>							
5	H							
	Z							
		Owner Name		Owner Address				
8	e			S3171 LAKE VIR				
03	03	(608) 524-2751		REEDSBURG, WI	53959,05			
		Sequence Of Events						
		Event						
	01	STRUCK BY FALLING, S	HIFTING CARGO OR ANY	THING SET IN MOTIO	N BY MOTOR VE	EHICLE		
	~	Event						
	02							
	~	Event						
	03							
		Event						
<b>5</b>								
╘╴	i i	Policy Holder						
UNIT		Insurance Company		Individual				
5		USAA-CASUALTY-INS-C	0	CARL UTTERBACH	(			
		Individual						
		Driver		Citations Issued	Sex			
		CARL UTTERBACK		0	MALE			
	AL	(608) 524-2751		Date of Birth	Race			
.	IDUAL			Date of Difti	1 doo			
Ę	ž	Address		Driver License Number				
N.		S3171 LAKE VIRGINIA R	D	Driver License Number				
	INDINI	REEDSBURG, WI 53959		STATE: WISCONSI	N COUNTRY: UN	IITED STATES		
		On Dut	y Crash	Safety Equipment				
	Saf	fety Equipment	y orasin					
			On at Danition					
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	RESTRAINT USE C				
			VI - LEFT	Lielmet Compliance				
		Helmet Use		Helmet Compliance				
		Eye Protection		Tint Compliance				
	e	Injury S	Severity	Airbag				
03	003		PPARENT INJURY	NOT APPLICABLE				
		Ejected	Ejection Path			Trapped/Extricated		
		NOT APPLICABLE	NOT EJECTED/NOT AP	PLICABLE		NOT APPLICABLE		
		Medical Transport	L	EMS Agency Identifier		EMS Run #		
		NOT TRANSPORTED						
	noin M	Aotor Vehicle Crash	This rep	ort does not include any C.	IIS data	Crash Date	03/08/2024	

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## WISCONSIN MOTOR VEHICLE CRASH REPORT

		Hospital				Date of Death		Time of Death				
		Distracted By	Distracted E	By Source	E (NOT DISTRAC	CTED)						
		Distracted By Action <b>NOT DISTRACTED</b>	)									
		Non Motorist	Striking Uni	t #	Location							
		Prior Action										
Ì		Action										
	JAL											
	<b>NDIVIDUAL</b>											
_	IND											
		Action Other							To/From School			
	L	Drug & Alcohol	Suspected /	Alcohol Us	se	Suspected Drug Use						
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type			Alcohol Test Results				
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Results					
03	003	Drug Type					1					
		Individual Condition										
		NOT OBSERVED										
	l	ndividual										
	_	Passenger DIANE UTTERBAC	ск			Citations Issued 0	Sex FEMALE					
_	DIVIDUAI	(608) 524-2751				Date of Birth	Race WHITE					
UNIT		Address S3171 LAKE VIRG	INIA RD			Driver License Number						
	Z	REEDSBURG, WI	53959 , U	5		STATE: WISCONSIN	I COUNTRY: UNI	TED STATES				
	Saf	ety Equipment	On Duty Cra	ash		Safety Equipment						
		Row		Seat Pos		RESTRAINT USE U	NKNOWN					
		01 - FRONT ROW Helmet Use		09 - RIC	HI.	Helmet Compliance						
		Eye Protection				Tint Compliance						
e	4		Injury Sever	ity		Airbag						
03	B B Injury Seventy POSSIBLE INJURY Ejected Ejection Path				<b>Y</b>	NOT APPLICABLE		Trapped/Extricated				
		NOT APPLICABLE Medical Transport	N	OT EJEC	TED/NOT APPL	ICABLE EMS Agency Identifier		NOT APPLICABLE EMS Run #	LICABLE			
		NOT TRANSPORT	ED									
		Hospital				Date of Death		Time of Death	02/08/2024			

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## WISCONSIN MOTOR VEHICLE CRASH REPORT

		Distracted By	stracted By Source	2								
		Distracted By Action										
	l	Str	iking Unit #	Location								
		Non Motorist		2000.000								
		Prior Action										
		Action										
	IAL											
Ę	D											
UNIT	$\geq$											
	INDIVIDUAL											
	_											
		Action Other									To/From School	
		Action Other									TO/FIOM SCHOOL	
		Su	spected Alcohol U	se		Suspected Drug Use						
	Ľ	Drug & Alcohol										
		Alcohol Test Given		Alcohol Test T	уре				Alcohol Tes	t Results		
		TEST NOT GIVEN Drug Test Given		Drug Test Typ			Drug	Fest Results				
		TEST NOT GIVEN		Diug lest typ	C		Drug	rest Results				
ო	4	Drug Type										
03	004											
		Individual Condition										
		NOT OBSERVED										
	Unit	Summary										
		Status			Ve	nicle Operating As Classi	fication		Unit Type			
		I-CONTACT			D	CLASS			TRUCK			
<b>0</b>		cle Type							Operating A	s Endorsem	nents	
0	-	LITY TRUCK/PICKUP	TRUCK Train/Bus # Re	corded	To	al # Citations Issued		Total Traile	re	Total Haz	Mat Types	
	10tai	Occs	Train/Dus # 10	corded	0	al # Citations Issued		0	15	0	wat Types	
	-	ance?	Direction Of Tra	avel		Pre CrashTire		Speed Limi	t	Total Lane	es .	
E	YES		SOUTHBOU	ND		<b>NA</b> 1-		55		4		
UNIT		Harmful Event: Collision \				ecial Function <b>D SPECIAL FUNCTIO</b>	N		Emergency NOT APPI	Motor Vehic	cle Use	
		UCK BY FALLING, SH	IIFTING CARGO	O OR ANYT		ffic Control	IN		Traffic Cont		ive/Missing	
		DED HWY W/O TRAFI							NO		ive/ivii33illig	
		асе Туре				ad Curvature			Road Grade	)		
		CKTOP (BITUMINOUS	5)		ST	RAIGHT			LEVEL			
		k Bus or HazMat										
	NO			_				_	_	_		
Vehicle License Plate Number								St	Country of Is			
		TK4298				ate Type <b>FK - LIGHT TRUCK</b>			UNITED S			
_		Vehicle Identification Nun	nber			ake			Model			
04	04	5FPYK3F79HB00442			н	ONDA			RIDGELINI	E		
		Color				ody Style			Bus Use			
		BLU - BLUE			P	K - PICKUP						
		Initial Contact Point 13 - TOP										
		· · · ·			1							

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## WISCONSIN MOTOR VEHICLE CRASH REPORT

	щ			Vehicle Damage 7 8 9 10 11								
F	С											
UNIT	VEHICLE	Extent Of Damage		- TOP, 14 - UNDER	DDLE, 09 - LEFT SIDE MIDDL							
_	¥	FUNCTIONAL DAMAGE				5 4 3 2 1						
		Towed Due To Damage		Vehicle Removed By								
		NOT TOWED		OPERATOR								
		What Driver Was Doing		Vehicle Factors								
		GOING STRAIGHT										
		Driver Prior Action Other										
		Driver Actions		•								
	Щ	NO CONTRIBUTING ACTIO	N, UNKNOWN									
UNIT	VEHICL											
5	Ш											
	>											
		Owner Name		Owner Address								
_		MICHAEL CARPENTER		619 EFFINGER	RD							
04	04	(608) 434-3460		BARABOO, WI 53913 , US								
		Sequence Of Events										
		Event										
	6	STRUCK BY FALLING, SHI	TING CARGO OR AN	THING SET IN MOTI								
	02	Event										
	6	Event										
	03											
	04	Event										
	Policy Holder											
F		Policy Holder										
ΝI		Policy Holder Insurance Company		Individual								
UNIT			RANCE-CO	Individual MICHAEL CARPE	NTER							
UNIT		Insurance Company	RANCE-CO		NTER							
UNIT		Insurance Company GEICO-ADVANTAGE-INSUR Individual Driver	RANCE-CO		NTER							
UNIT		Insurance Company GEICO-ADVANTAGE-INSUF Individual Driver MICHAEL CARPENTER	RANCE-CO	MICHAEL CARPE								
UNIT		Insurance Company GEICO-ADVANTAGE-INSUR Individual Driver	RANCE-CO	Citations Issued	Sex MALE Race							
		Insurance Company GEICO-ADVANTAGE-INSUF Individual Driver MICHAEL CARPENTER (608) 434-3460	RANCE-CO	Citations Issued 0 Date of Birth	Sex MALE Race WHITE							
UNIT UNIT		Insurance Company GEICO-ADVANTAGE-INSUF Individual Driver MICHAEL CARPENTER (608) 434-3460 Address	RANCE-CO	Citations Issued	Sex MALE Race WHITE							
		Insurance Company GEICO-ADVANTAGE-INSUF Individual Driver MICHAEL CARPENTER (608) 434-3460 Address 619 EFFINGER RD	RANCE-CO	MICHAEL CARPE Citations Issued 0 Date of Birth Driver License Numb	Sex MALE Race WHITE	  ES						
		Insurance Company GEICO-ADVANTAGE-INSUF Individual Driver MICHAEL CARPENTER (608) 434-3460 Address	RANCE-CO	MICHAEL CARPE Citations Issued 0 Date of Birth Driver License Numb	Sex MALE Race WHITE er	  						
	INDIVIDUAL	Insurance Company GEICO-ADVANTAGE-INSUF Individual Driver MICHAEL CARPENTER (608) 434-3460 Address 619 EFFINGER RD BARABOO, WI 53913, US		MICHAEL CARPE Citations Issued 0 Date of Birth Driver License Numb	Sex MALE Race WHITE er	  ΞS						
	INDIVIDUAL	Insurance Company GEICO-ADVANTAGE-INSUF Individual Driver MICHAEL CARPENTER (608) 434-3460 Address 619 EFFINGER RD BARABOO, WI 53913, US		MICHAEL CARPE	Sex MALE Race WHITE er	=						
	INDIVIDUAL	Insurance Company GEICO-ADVANTAGE-INSUF Individual Driver MICHAEL CARPENTER (608) 434-3460 Address 619 EFFINGER RD BARABOO, WI 53913, US		MICHAEL CARPE	Sex MALE Race WHITE er SIN COUNTRY: UNITED STATE	= = ES						
	INDIVIDUAL	Insurance Company GEICO-ADVANTAGE-INSUF Individual Driver MICHAEL CARPENTER (608) 434-3460 Address 619 EFFINGER RD BARABOO, WI 53913, US fety Equipment	rash	MICHAEL CARPE	Sex MALE Race WHITE er SIN COUNTRY: UNITED STATE	 ΞS						
	INDIVIDUAL	Insurance Company GEICO-ADVANTAGE-INSUF Individual Driver MICHAEL CARPENTER (608) 434-3460 Address 619 EFFINGER RD BARABOO, WI 53913, US fety Equipment Row	rash Seat Position	MICHAEL CARPE	Sex MALE Race WHITE er SIN COUNTRY: UNITED STATE	 ΞS						
	INDIVIDUAL	Insurance Company GEICO-ADVANTAGE-INSUF Individual Driver MICHAEL CARPENTER (608) 434-3460 Address 619 EFFINGER RD BARABOO, WI 53913 , US fety Equipment Row 01 - FRONT ROW Helmet Use	rash Seat Position	MICHAEL CARPE	Sex MALE Race WHITE er SIN COUNTRY: UNITED STATE	 ΞS						
	INDIVIDUAL	Insurance Company GEICO-ADVANTAGE-INSUF Individual Driver MICHAEL CARPENTER (608) 434-3460 Address 619 EFFINGER RD BARABOO, WI 53913 , US fety Equipment Row 01 - FRONT ROW	rash Seat Position	MICHAEL CARPE	Sex MALE Race WHITE er SIN COUNTRY: UNITED STATE	 ≡S						
UNIT		Insurance Company GEICO-ADVANTAGE-INSUF Individual Driver MICHAEL CARPENTER (608) 434-3460 Address 619 EFFINGER RD BARABOO, WI 53913, US fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection	rash Seat Position <b>07 - LEFT</b>	MICHAEL CARPE	Sex MALE Race WHITE er SIN COUNTRY: UNITED STATE	=s						
	INDIVIDUAL	Insurance Company GEICO-ADVANTAGE-INSUF Individual Driver MICHAEL CARPENTER (608) 434-3460 Address 619 EFFINGER RD BARABOO, WI 53913, US fety Equipment No Duty C Row 01 - FRONT ROW Helmet Use Eye Protection Injury Seve NO APPA	rash Seat Position 07 - LEFT	MICHAEL CARPE	Sex MALE Race WHITE er SIN COUNTRY: UNITED STATE UNKNOWN							
UNIT		Insurance Company GEICO-ADVANTAGE-INSUF Individual Driver MICHAEL CARPENTER (608) 434-3460 Address 619 EFFINGER RD BARABOO, WI 53913, US fety Equipment On Duty C fety Equipment No Duty C Row 01 - FRONT ROW Helmet Use Eye Protection Injury Seve NO APPA Ejected	rash Seat Position 07 - LEFT erity ARENT INJURY jection Path	MICHAEL CARPE	Sex MALE Race WHITE er SIN COUNTRY: UNITED STATE UNKNOWN	tricated						
UNIT		Insurance Company GEICO-ADVANTAGE-INSUF Individual Driver MICHAEL CARPENTER (608) 434-3460 Address 619 EFFINGER RD BARABOO, WI 53913, US fety Equipment On Duty C fety Equipment No Duty C Row 01 - FRONT ROW Helmet Use Eye Protection Injury Seve NO APPA Ejected NOT APPLICABLE	rash Seat Position 07 - LEFT	MICHAEL CARPE	E	tricated						
UNIT		Insurance Company GEICO-ADVANTAGE-INSUF Individual Driver MICHAEL CARPENTER (608) 434-3460 Address 619 EFFINGER RD BARABOO, WI 53913, US fety Equipment Con Duty C fety Equipment No Duty C Con Duty	rash Seat Position 07 - LEFT erity ARENT INJURY jection Path	MICHAEL CARPE	E	tricated						
UNIT		Insurance Company GEICO-ADVANTAGE-INSUF Individual Driver MICHAEL CARPENTER (608) 434-3460 Address 619 EFFINGER RD BARABOO, WI 53913, US fety Equipment On Duty C fety Equipment No Duty C Row 01 - FRONT ROW Helmet Use Eye Protection Injury Seve NO APPA Ejected NOT APPLICABLE	rash Seat Position 07 - LEFT erity ARENT INJURY jection Path	MICHAEL CARPE	E	tricated LICABLE						
UNIT		Insurance Company GEICO-ADVANTAGE-INSUF Individual Driver MICHAEL CARPENTER (608) 434-3460 Address 619 EFFINGER RD BARABOO, WI 53913, US fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Seve NO APPA Ejected NOT APPLICABLE NOT TRANSPORTED	rash Seat Position 07 - LEFT erity ARENT INJURY jection Path	MICHAEL CARPE	E Sex MALE Race WHITE er UNKNOWN E E Trapped/Ex NOT APP Er EMS Run #	tricated LICABLE						

24-02354

## WISCONSIN MOTOR VEHICLE CRASH REPORT

		Distracted B	Distracted By Source	e .E (NOT DISTRA	CTED)			
		Distracted By Action						
		Non Motoris	Striking Unit #	Location				
		Prior Action						
UNIT	INDIVIDUAL	Action						
5	NDIV	Action Other						To/From School
	l	Drug & Alcoho	Suspected Alcohol L	lse	Suspected Drug Use			
		Alcohol Test Given	N	Alcohol Test Type	2		Alcohol Test Results	
		Drug Test Given TEST NOT GIVE	N	Drug Test Type		Drug Test Results		
04	005	Drug Type						
		Individual Condition						
		NOT OBSERVED	)					
	Pro	perty Owner						
PROP OWNER 01		anization/Company IANT ENERGY			Address 4902 N BILTMORE MADISON, WI 53707	1077, US		
	FIXE	d Objects Str						
	01	v	truck Object ITILITY POLE				Structure Number	Damage Tag Number