

6TL0D6N05F  
24-02354

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

6TL0D6N05F

Document Number Override		Primary Crash Document #	Agency Crash Number <b>24-02354</b>	Investigating Officer/Deputy <b>DEPUTY B. STODDARD</b>	
Crash Date <b>03/08/2024</b>		Crash Time <b>08:10 AM</b>	Date Arrived <b>03/08/2024</b>	Time Arrived <b>08:25 AM</b>	
Date Notified <b>03/08/2024</b>		Time Notified <b>08:10 AM</b>	Total Units <b>04</b>	Total Injured <b>02</b>	Total Killed <b>00</b>
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input checked="" type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone	<input type="checkbox"/> Trailer or Towed	<input type="checkbox"/> Reporting Threshold
<input type="checkbox"/> Government Property	<input type="checkbox"/> Active School Zone	School Bus Related <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

<p>Diagram</p>	Reconstruction By
	Photos By <b>B. STODDARD</b>
	Additional Information <b>PHOTOS, DASH CAMERA VIDEO, BODY CAMERA VIDEO</b>

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

UNIT 1 WAS SOUTHBOUND ON USH 12. UNIT 1 OPERATOR ABRUPTLY CHANGED LANES DUE TO AN OVERHEATING VEHICLE. UNIT 1 OPERATOR LOST CONTROL AND ENTERED THE WEST DITCH. UNIT 1 STRUCK A UTILITY POWER POLE. THE FALLING UTILITY WIRES STRUCK UNITS 2, 3, AND 4 CAUSING DAMAGES TO THOSE UNITS.

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Location

ON USH12 EB 0.75 MI S OF USH12 EB IN THE TOWN OF SUMPTER IN SAUK COUNTY	Latitude <b>43.329458409</b>	Longitude <b>-89.759056087</b>
	X Coordinate <b>276313.96875</b>	Y Coordinate <b>4801099</b>
	Structure Type <b>NO STRUCTURE</b>	

Crash Scene

First Harmful Event <b>UTILITY POLE</b>		First Harmful Event Location <b>SHOULDER RIGHT</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>		Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>DRY</b>		Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>			
Weather Condition(s) <b>CLOUDY</b>			
Animal Type		Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>		Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land		Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>	
Closure Type <b>FULL CLOSURE</b>		Reasons for Closure	
Date Initial Lane/Rd Closed <b>03/08/2024</b>	Time Initial Lane/Rd Closed <b>08:10 AM</b>	<b>OTHER</b>	
Date All Lanes Open <b>03/08/2024</b>	Time All Lanes Open <b>12:00 PM</b>		
		Date Scene Cleared <b>03/08/2024</b>	Time Scene Cleared <b>12:30 PM</b>

Unit Summary

<b>UNIT</b>	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>TRUCK</b>		
	Vehicle Type <b>UTILITY TRUCK/PICKUP TRUCK</b>			Operating As Endorsements		
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>1</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>SOUTHBOUND</b>	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit <b>55</b>	Total Lanes <b>4</b>	
	Most Harmful Event: Collision With <b>UTILITY POLE</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>DIVIDED HWY W/O TRAFFIC BARRIER</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>					
	<b>01</b>	<b>Vehicle</b>				
		License Plate Number <b>5615BHO</b>		Plate Type <b>LTK - LIGHT TRUCK</b>	St <b>AL</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>3GCUKREC9JG255505</b>		Make <b>CHEVROLET</b>	Year <b>2018</b>	Model <b>SILVERADO</b>	

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UNIT VEHICLE	Color <b>MAR - MAROON (BURGUNDY)</b>		Body Style <b>PK - PICKUP</b>	Bus Use		
	Initial Contact Point <b>12 - FRONT</b>		Vehicle Damage <b>01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 04 - RIGHT SIDE REAR, 11 - LEFT FRONT CORNER, 12 - FRONT</b>			
	Extent Of Damage <b>DISABLING DAMAGE</b>					
	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>				Vehicle Removed By <b>CRAIGS TOWING</b>	
	What Driver Was Doing <b>GOING STRAIGHT</b>				Vehicle Factors	
Driver Prior Action Other		<b>OTHER</b>				
UNIT VEHICLE	Driver Actions <b>RAN OFF ROADWAY</b>					
	Owner Name <b>DONNA LEATHERBERRY (608) 393-9586</b>		Owner Address <b>1295 NEW LINCOLN RD TALLADEGA, AL 35160 , US</b>			
UNIT 01	<b>Sequence Of Events</b>					
	01	Event <b>UTILITY POLE</b>				
	02	Event				
	03	Event				
	04	Event				
UNIT	<b>Policy Holder</b>					
	Insurance Company <b>STATE-FARM-GENERAL-INS-CO</b>		Individual <b>DYLAN BLASER</b>			
UNIT INDIVIDUAL	<b>Individual</b>					
	Driver <b>DYLAN BLASER (256) 589-1620</b>		Citations Issued <b>1</b>	Sex <b>MALE</b>		
	Address <b>106 PLEASANT ST NORTH FREEDOM, WI 53951 , US</b>		Date of Birth	Race <b>WHITE</b>		
	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>					
UNIT 01	<b>Safety Equipment</b>		On Duty Crash			
	Safety Equipment		<b>SHOULDER &amp; LAP BELT</b>			
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	Helmet Compliance			
	Helmet Use		Tint Compliance			
	Eye Protection		Airbag <b>NON DEPLOYED</b>			
	<b>Injury</b>		Injury Severity <b>POSSIBLE INJURY</b>	Ejection Path		
	Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>	
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier		EMS Run #		

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UNIT	Hospital		Date of Death		Time of Death	
	<b>Distracted By</b>		Distracted By Source			
	Distracted By Action <b>UNKNOWN</b>					
	<b>Non Motorist</b>		Striking Unit #		Location	
	Prior Action					
	Action					
	Action Other					To/From School
	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>		Suspected Drug Use <b>NO</b>	
	Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type		Alcohol Test Results	
	Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type		Drug Test Results	
	Drug Type					
	Individual Condition <b>APPEARED NORMAL</b>					
	<b>Violations</b>					
	01	001	UTC Number <b>BG110829</b>	Issue To? <b>001</b>	Statute Number <b>346.13(1)</b>	Description <b>UNSAFE LANE DEVIATION</b>

## Unit Summary

UNIT	02	Unit Status <b>NON-CONTACT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
	Vehicle Type <b>PASSENGER CAR</b>		Operating As Endorsements				
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>		Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>NORTHBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark		Speed Limit <b>55</b>	Total Lanes <b>4</b>	
	Most Harmful Event: Collision With <b>STRUCK BY FALLING, SHIFTING CARGO OR ANYT</b>			Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>DIVIDED HWY W/O TRAFFIC BARRIER</b>			Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>			Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>						
	<b>Vehicle</b>						
	License Plate Number <b>510YGK</b>			Plate Type <b>AUT - AUTOMOBILE</b>		St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>

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02	UNIT VEHICLE	Vehicle Identification Number <b>KMUMADTBXPU097520</b>	Make <b>GNSS</b>	Year <b>2023</b>	Model <b>GV70</b>	
		Color <b>BLK - BLACK</b>	Body Style <b>UT - SPORT UTILITY VEHICLE</b>	Bus Use		
		Initial Contact Point <b>11 - LEFT FRONT CORNER</b>	Vehicle Damage <b>10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER</b>			
		Extent Of Damage <b>FUNCTIONAL DAMAGE</b>				
		Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OPERATOR</b>			
		What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors <b>NOT APPLICABLE</b>			
02	UNIT VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION, UNKNOWN</b>				
		Owner Name <b>CHRISTINA ZENTMYER (415) 728-4270</b>	Owner Address <b>5030 CONGRESSIONAL HL MIDDLETON, WI 53562 , US</b>			
		<b>Sequence Of Events</b>				
01	UNIT VEHICLE	Event <b>STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY MOTOR VEHICLE</b>				
		Event				
		Event				
		Event				
02	UNIT INDIVIDUAL	<b>Policy Holder</b>				
		Insurance Company <b>ACUITY,-A-MUTUAL-INSURANCE-CO</b>	Individual <b>CHRISTINA ZENTMYER</b>			
		<b>Individual</b>				
02	UNIT INDIVIDUAL	Driver <b>CHRISTINA ZENTMYER (415) 728-4270</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>		
			Date of Birth	Race <b>WHITE</b>		
		Address <b>5030 CONGRESSIONAL HL MIDDLETON, WI 53562 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>			
02	UNIT INDIVIDUAL	<b>Safety Equipment</b>		On Duty Crash		
				Safety Equipment <b>RESTRAINT USE UNKNOWN</b>		
		Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>			
		Helmet Use		Helmet Compliance		
		Eye Protection		Tint Compliance		
002	UNIT INDIVIDUAL	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NOT APPLICABLE</b>		
		Ejected <b>NOT APPLICABLE</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT APPLICABLE</b>	

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UNIT 02 002 INDIVIDUAL
Medical Transport: NOT TRANSPORTED
EMS Agency Identifier, EMS Run #
Hospital, Date of Death, Time of Death
Distracted By: NOT APPLICABLE (NOT DISTRACTED)
Distracted By Action: NOT DISTRACTED
Non Motorist: Striking Unit #, Location
Prior Action
Action
Action Other, To/From School
Drug & Alcohol: Suspected Alcohol Use, 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
Drug Type
Individual Condition: NOT OBSERVED

Unit Summary

UNIT 03
Unit Status: NON-CONTACT, Vehicle Operating As Classification: D CLASS, Unit Type: AUTOMOBILE
Vehicle Type: PASSENGER CAR, Operating As Endorsements
Total Occs: 2, Train/Bus # Recorded, Total # Citations Issued: 0, Total Trailers: 0, Total HazMat Types: 0
Insurance?: YES, Direction Of Travel: SOUTHBOUND, Pre Crash Tire Mark, Speed Limit: 55, Total Lanes: 4
Most Harmful Event: Collision With: STRUCK BY FALLING, SHIFTING CARGO OR ANYT, Special Function: NO SPECIAL FUNCTION, Emergency Motor Vehicle Use: NOT APPLICABLE
Traffic Way: DIVIDED HWY W/O TRAFFIC BARRIER, Traffic Control: NO CONTROL, Traffic Control Inoperative/Missing: NO
Surface Type: BLACKTOP (BITUMINOUS), Road Curvature: STRAIGHT, Road Grade: LEVEL
Truck Bus or HazMat: NO


UNIT 03 03 Vehicle
License Plate Number: 618WRB, Plate Type: AUT - AUTOMOBILE, St: WI, Country of Issuance: UNITED STATES
Vehicle Identification Number: 5TDYK3DC7CS243101, Make: TOYOTA, Year: 2012, Model: SIENNA XLE

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UNIT VEHICLE	Color <b>GRY - GRAY</b>	Body Style <b>VN - VAN</b>	Bus Use
	Initial Contact Point <b>02 - RIGHT SIDE FRONT</b>	Vehicle Damage <b>01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 13 - TOP</b>	
	Extent Of Damage <b>FUNCTIONAL DAMAGE</b>		
	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OPERATOR</b>	
	What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors <b>NOT APPLICABLE</b>	
	Driver Prior Action Other		
UNIT VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION, UNKNOWN</b>		
	Owner Name <b>CARL UTTERBACK (608) 524-2751</b>	Owner Address <b>S3171 LAKE VIRGINIA RD REEDSBURG, WI 53959 , US</b>	
UNIT 03	<b>Sequence Of Events</b>		
	01	Event <b>STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY MOTOR VEHICLE</b>	
	02	Event	
	03	Event	
	04	Event	
UNIT	<b>Policy Holder</b>		
	Insurance Company <b>USAA-CASUALTY-INS-CO</b>	Individual <b>CARL UTTERBACK</b>	
UNIT INDIVIDUAL	<b>Individual</b>		
	Driver <b>CARL UTTERBACK (608) 524-2751</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>
		Date of Birth	Race
	Address <b>S3171 LAKE VIRGINIA RD REEDSBURG, WI 53959 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
UNIT 03	<b>Safety Equipment</b>		
	On Duty Crash	Safety Equipment <b>RESTRAINT USE UNKNOWN</b>	
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
UNIT 003	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NOT APPLICABLE</b>
	Ejected <b>NOT APPLICABLE</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT APPLICABLE</b>
	Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier

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UNIT INDIVIDUAL	Hospital		Date of Death		Time of Death	
	<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>			
	Distracted By Action <b>NOT DISTRACTED</b>					
	<b>Non Motorist</b>		Striking Unit #		Location	
	Prior Action					
	Action					
	Action Other					To/From School
	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use		Suspected Drug Use	
	Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type		Alcohol Test Results	
	Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type		Drug Test Results	
03 003 UNIT INDIVIDUAL	Drug Type					
	Individual Condition <b>NOT OBSERVED</b>					
	<b>Individual</b>					
	Passenger <b>DIANE UTTERBACK</b> <b>(608) 524-2751</b>			Citations Issued <b>0</b>	Sex <b>FEMALE</b>	
	Address <b>S3171 LAKE VIRGINIA RD</b> <b>REEDSBURG, WI 53959 , US</b>			Date of Birth	Race <b>WHITE</b>	
	Driver License Number			<b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
	<b>Safety Equipment</b>		On Duty Crash		Safety Equipment	
	Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b>	<b>RESTRAINT USE UNKNOWN</b>			
	Helmet Use			Helmet Compliance		
	Eye Protection			Tint Compliance		
03 004 UNIT INDIVIDUAL	<b>Injury</b>		Injury Severity <b>POSSIBLE INJURY</b>		Airbag <b>NOT APPLICABLE</b>	
	Ejected <b>NOT APPLICABLE</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT APPLICABLE</b>	
	Medical Transport <b>NOT TRANSPORTED</b>			EMS Agency Identifier		EMS Run #
	Hospital		Date of Death		Time of Death	



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UNIT INDIVIDUAL 03 004
Distracted By Source
Distracted By Action
Non Motorist Striking Unit # Location
Prior Action
Action
Action Other To/From School
Drug & Alcohol Suspected Alcohol Use 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
Drug Type
Individual Condition
NOT OBSERVED

Unit Summary

UNIT 04
Unit Status NON-CONTACT Vehicle Operating As Classification D CLASS Unit Type TRUCK
Vehicle Type UTILITY TRUCK/PICKUP TRUCK Operating As Endorsements
Total Occs 1 Train/Bus # Recorded Total # Citations Issued 0 Total Trailers 0 Total HazMat Types 0
Insurance? YES Direction Of Travel SOUTHBOUND Pre Crash Tire Mark Speed Limit 55 Total Lanes 4
Most Harmful Event: Collision With STRUCK BY FALLING, SHIFTING CARGO OR ANYT Special Function NO SPECIAL FUNCTION Emergency Motor Vehicle Use NOT APPLICABLE
Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER Traffic Control NO CONTROL Traffic Control Inoperative/Missing NO
Surface Type BLACKTOP (BITUMINOUS) Road Curvature STRAIGHT Road Grade LEVEL
Truck Bus or HazMat NO

Vehicle

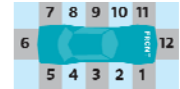
UNIT 04 04
License Plate Number TK4298 Plate Type LTK - LIGHT TRUCK St WI Country of Issuance UNITED STATES
Vehicle Identification Number 5FPYK3F79HB004426 Make HONDA Year 2017 Model RIDGELINE
Color BLU - BLUE Body Style PK - PICKUP Bus Use
Initial Contact Point 13 - TOP

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UNIT VEHICLE	Vehicle Damage		04
	Extent Of Damage <b>FUNCTIONAL DAMAGE</b>		
	Towed Due To Damage <b>NOT TOWED</b>		
	What Driver Was Doing <b>GOING STRAIGHT</b>		
UNIT VEHICLE	Vehicle Removed By <b>OPERATOR</b>		04
	Vehicle Factors		
	Driver Prior Action Other <b>UNKNOWN</b>		
	Driver Actions <b>NO CONTRIBUTING ACTION, UNKNOWN</b>		
UNIT VEHICLE	Owner Name <b>MICHAEL CARPENTER (608) 434-3460</b>		04
	Owner Address <b>619 EFFINGER RD BARABOO, WI 53913 , US</b>		
	<b>Sequence Of Events</b>		
	Event <b>STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY MOTOR VEHICLE</b>		
UNIT VEHICLE	Event		04
	Event		
	Event		
	Event		
UNIT INDIVIDUAL	<b>Policy Holder</b>		04
	Insurance Company <b>GEICO-ADVANTAGE-INSURANCE-CO</b>		
	Individual <b>MICHAEL CARPENTER</b>		
	<b>Individual</b>		
UNIT INDIVIDUAL	Driver <b>MICHAEL CARPENTER (608) 434-3460</b>		04
	Citations Issued <b>0</b>	Sex <b>MALE</b>	
	Date of Birth	Race <b>WHITE</b>	
	Address <b>619 EFFINGER RD BARABOO, WI 53913 , US</b>		
Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>			
UNIT INDIVIDUAL	<b>Safety Equipment</b>		04
	On Duty Crash		
	Safety Equipment <b>RESTRAINT USE UNKNOWN</b>		
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	
Helmet Use		Helmet Compliance	
Eye Protection		Tint Compliance	
UNIT INDIVIDUAL	<b>Injury</b>		04
	Injury Severity <b>NO APPARENT INJURY</b>		
	Airbag <b>NOT APPLICABLE</b>		
	Ejected <b>NOT APPLICABLE</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #
Hospital		Date of Death	Time of Death

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<b>UNIT</b>	<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		
	<b>Distracted By Action</b>		<b>NOT DISTRACTED</b>		
	<b>Non Motorist</b>		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other				To/From School
	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use		Suspected Drug Use
	Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type		Alcohol Test Results
	Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type		Drug Test Results
	Drug Type				
Individual Condition <b>NOT OBSERVED</b>					

<b>Property Owner</b>	
<b>PROP OWNER 01</b>	Organization/Company <b>ALLIANT ENERGY</b>  Address <b>4902 N BILTMORE MADISON, WI 53707 1077, US</b>

<b>Fixed Objects Struck</b>				
<b>01</b>	Striking Unit <b>01</b>	Struck Object <b>UTILITY POLE</b>	Structure Number	Damage Tag Number