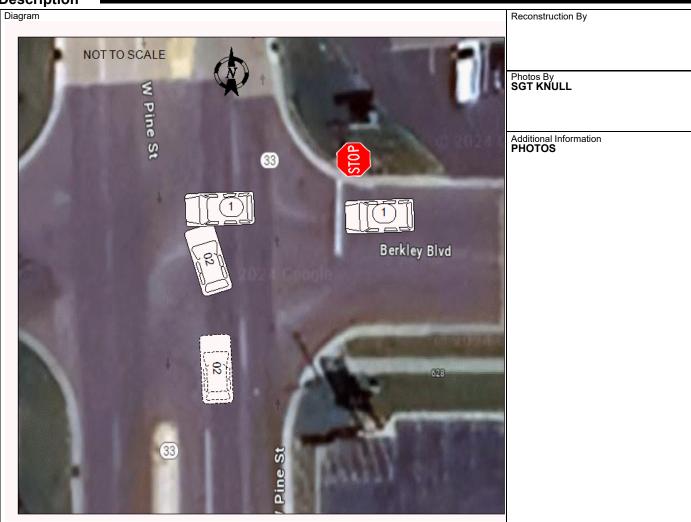
WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash I			y Crash Number 310	0 0	Investigating Officer/Deputy SERGEANT E. KNULL			
KB	Crash Date 04/04/2024	Crash Time 01:46 PM	*·		rrived /2024	Time Arrived 01:51 PM				
51TI	Date Notified 04/04/2024	Time Notified 01:46 PM			Inits	Total Injured 02	1 · · · · · · · · · · · · · · · · · · ·			
.0F	On Emergency	Hit and Run	and Run		Work Zone	Trailer or	Towed	Reporting Threshold		
6T L	Government Property	Active School Zone			Bus Related	Tags				
	Crash Type DT4000 (STANDARD CRASH))		Amended		Secondary Crash		

Description



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

UNIT 1 STOPPED AT STOP SIGN ON BERKLEY BLVD. UNIT 2 NB ON WEST PINE ST. UNIT 1 PULLED OUT IN FRONT OF UNIT 2 CAUSING UNIT 2 TO STRIKE UNIT 1 OPERATOR OF UNIT 1 SUSTAINED IINJURY AND WAS TRANSPORTED BY GROUND EMS. OPERATOR OF UNIT 2 NO INJURY. PASSENGER OF UNIT 2 SUSTAINED MINOR INJURY AND WAS TRANSPORTED BY GROUND EMS. BOTH VEHICLES SUSTAINED DISABLING DAMAGE AND WERE REMOVED BY CRAIGS TOWING. OPERATOR OF UNIT 1 ISSUED CITATION FOR FAILURE TO YIELD FROM STOP SIGN.

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Loc	ation ——										
ON BERKLEY BLVD							Latitude			le	
16 FT E						43.47708875 -89.768783598					
OF CTHBD NB IN THE VILLAGE OF WEST BARABOO							X Coordinate Y Coordinate			inate	
IN SAUK COUNTY							276070.15625 4817521.5				
							Туре		•		
		NO STR	UCTURE								
Cras	sh Scene										
_	Harmful Event					First Harn	nful Event	Location			
мот	TOR VEH IN TRANSPO	ORT				ON ROA	DWAY				
Manr	ner of Collision					Light Con	dition				
01 -	ANGLE					DAYLIG	HT				
Road	Surface Condition(s)					Roadway	Factor(s)				
DRY	•										
Envir	ronment Factor(s)										
NON	1E					NONE					
Weat	ther Condition(s)										
CLC	OUDY										
Anim	al Type					Relation	To Trafficw	ray			
						TRAFFI	CWAY - 0	ON ROAD			
	h Classification - Location					-		- Jurisdiction			
_	BLIC PROPERTY					NO SPECIAL JURISDICTION					
Triba	Il Land					Access Control Special Study NO CONTROL					
Withi	in Interchange Area	Junction Location			Intersection	n Type					
NO		INTERSECTION			T-INTER	SECTION					
Clos	ure Type			Reaso	ons for Closu	ıre					
LAN	IE CLOSURE										
Date	Initial Lane/Rd Closed	Time Initial Lane/Rd Closed	t	LAW	ENFORC	EMENT, TOW TRUCK, FIRE/EMS					
	4/2024	01:46 PM									
	All Lanes Open	Time All Lanes Open			Date Scene Cleared Time Scene Cleared 04/04/2024 02:25 PM						
	4/2024	02:25 PM		04/04	/2024	02:25 PM					
	Summary =										
_	Status				erating As C	lassificatior	1	Unit Type	1		
	RANSIT		DC	D CLASS					AUTOMOBILE Operating As Endorsements		
	cle Type	-						Operating As	s Endorser	nents	
<u> </u>	ORT) UTILITY VEHICL	Train/Bus # Recorded	T-4-	1 11 0:1-1	I		Total Tr	piloro	Total Haz	Mot Typos	
10tai	Occs	Traili/Dus # Necorded	10la	ı # Cıta	tions Issued	Total Trai		alicis	0	otal HazMat Types	
	rance?	Direction Of Travel					Speed Limit		Total Lanes		
YES		WESTBOUND		Pre	CrashTire Mark		30	4			
	Harmful Event: Collision		Spec	cial Fun			100	Emergency		icle Use	
	TOR VEH IN TRANSPO				IAL FUNC	TION		NOT APPL			
	ic Way		Traff	ic Cont	rol			Traffic Contr	ol Inoperat	tive/Missing	
DIVI	DED HWY W/O TRAF	FIC BARRIER	STC	P SIG	iN			NO	·	· ·	
Surface Type Road Curvatu					iture			Road Grade			
BLA	BLACKTOP (BITUMINOUS) STRAIG							LEVEL			
Truck Bus or HazMat											
NO											
•	Vehicle										
	License Plate Number		Plat	те Туре			St	Country of Iss			
	114UZX				TOMOBIL	.E	WI	UNITED ST	ATES		
_	Vehicle Identification Nur		Mak				Year	Model			
0	5XYZUDLB5DG0929	65	HY	UNDA	l		2013	SANTA FE S			

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Color	Body Style Bus Use									
		CPR - COPPER	LL - CARRYALL									
	ш	Initial Contact Point	Vehicle Damage									
_		10 - LEFT SIDE FRONT	7 8 9 10 11									
LIND	₩	Extent Of Damage	08 - LEFT SIDE REA	R, 09 - LEFT SIDE	MIDDLE, 10 -	6 12						
\neg	VEHICL	DISABLING DAMAGE	LEFT SIDE FRONT			5 4 3 2 1						
	>	Towed Due To Damage	Vahiala Ramayad Py									
		TOWED DUE TO DISABLING		Vehicle Removed By CRAIGS TOWING								
		What Driver Was Doing		Vehicle Factors								
		ENTERING TRAFFIC LANE		verilcie i actors								
		Driver Prior Action Other		NOT APPLICABLE								
		Driver Frior Action Other										
		Driver Actions										
		FAILED TO YIELD RIGHT-OF-WAY										
_	LE											
LIND	VEHICL											
\neg	亩											
	>											
		Owner Name		Owner Address								
		LAURENE SUMWALT		Owner Address N4130 COUNTY ROAD U								
6	01			PORTAGE, WI 53901, US								
	ļ											
		Sequence Of Events Event										
	7	MOTOR VEH IN TRANSPOR	RT									
		Event										
	02	Event										
		Event										
	03	Eveni										
		Event										
	04	LVOIR										
		Delieu Helder										
LIND		Policy Holder Insurance Company Individual										
5		AMERICAN-FAMILY-INS-CO	`	Individual LAURENE SUMWA	ΔIT							
			•	LAGRENZ GOMAN								
		ndividual										
		Driver LAURENE SUMWALT		Citations Issued	Sex							
	7	(608) 697-9200		1	FEMALE							
	DUAL	(000, 001 0=00		Date of Birth	Race WHITE							
Ļ	9											
	INDIN	Address N4130 COUNTY ROAD U		Driver License Number								
	Z	PORTAGE, WI 53901, US		STATE: WISCONSIN COUNTRY: UNITED STATES								
		, , , , , , , , , , , , , , , , , , , ,										
		On Duty O										
	Sat	On Duty Clean Conductive Clean Conductiv	rasn	Safety Equipment								
			T= .=									
		Row	Seat Position 07 - LEFT	SHOULDER & LAP BELT								
		01 - FRONT ROW Helmet Use	07 - LEF1	Holmet Compliance								
		Heimet Ose		Helmet Compliance								
		Eye Protection		Tint Compliance								
				Tint Compliance								
	Injury Severity			Airbag								
2	5 Injury Seventy SUSPECTED MINOR INJURY			NON DEPLOYED								
			ection Path			Trapped/Extricated						
		·	OT EJECTED/NOT APP	LICABLE		NOT TRAPPED						
		Medical Transport		EMS Agency Identifier	r	EMS Run #						
		EMS GROUND	6000368									

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Hospital				Date of Death			Time of Death			
		ST CLARE HOSP										
		Distracted By Source										
		Distracted By	NOT APPL	ICABL	E (NOT DISTR	RAC	CTED)					
	Distracted By Action NOT DISTRACTED											
		Non Motorist	Striking Unit	#	Location							
		Prior Action										
		A (:										
		Action										
	_											
	JA											
╘	INDIVIDUAL											
UNIT	<u> </u>											
_	D											
	Z											
		Action Other										To/From School
		Suspected Alcohol Use				Suspected Drug Use						
		Drug & Alcohol NO			NO							
		Alcohol Test Given	est Given Alcohol T		Alcohol Test Ty	/ре				Alcohol Test Results		
		TEST NOT GIVEN	IVEN									
		Drug Test Given	Drug Test Given Drug Test Typ		Drug Test Type	Drug Test Results			I.			
		TEST NOT GIVEN										
01	001	Drug Type										
0	0											
		Individual Condition										
		CONFUSED OR DISORIENTED (NON LUCID)										
	i	Violations										
		UTC Number	Issue To?	Sta	tute Number		Description					
	01	BG114607	001	346	6.18(3)		FAIL/YIELD RIGHT/V	NAY F	ROM STO	P SIGN		
	Llmi	· Cummon/										
<u>'</u>		t Summary Status				Ve	hicle Operating As Classi	fication		Unit Type		
		RANSIT					CLASS	iication	l	AUTOMOI	211 E	
		cle Type				ט	DCLASS			Operating As Endorsements		
02		SENGER CAR								Operating A	3 LIIUUI 3CIII	iciiis
		Occs	Train/F	Bus # Recorded To			tal # Citations Issued		Total Traile	ers	Total HazN	Mat Types
	2	0003	1141172			0	tai # Oltations issued		0		0	
		rance?	Direction	on Of Tra	avel	Ŭ			Speed Lim	it	Total Lane	e
.	YES			HBOU		V	Pre CrashTire		30		4	3
UNIT		Harmful Event: Collision		пьоо	ND		Mark Decial Function		30	Emergency		la Hea
5		TOR VEH IN TRANS					O SPECIAL FUNCTIO	N		NOT APPI		ie Ose
		ic Way	PORI									
		•	AEEIC DAD	DIED			Traffic Control			Traffic Control Inoperative/Missing		
	DIVIDED HWY W/O TRAFFIC BARRIER			NO CONTROL			NO					
	Surface Type					oad Curvature			Road Grade			
	,						FRAIGHT			UPHILL		
	NO	k Bus or HazMat										
		/abiala										
		Vehicle					loto Tuno		St	Country of Is	ellanco	
		License Plate Number					late Type			-		
		ARB0R1				LA	UT - AUTOMOBILE		WI	UNITED ST	WIE2	

Crash Date 04/04/2024 Crash Time 01:46 PM

6TL0F51TKB

24-03310

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

02		Vehicle Identification Number 1G6KA5EY6AU125695		Make CADIL	LAC	Year 2010	Model DTS	_		
		Color		Body Style			Bus Use			
		SIL - SILVER (ALUMINUM	1)	4D - 4DR Vehicle Damage						
—	ΊΈ	Initial Contact Point 12 - FRONT			_			7 8 9 10 11		
LIND	VEHICL	Extent Of Damage			RIGHT FRONT CO NER, 12 - FRONT	RNER, 11 - L	EFT FRONT	6 2 2 12		
_	VE	DISABLING DAMAGE		•			5 4 3 2 1			
		Towed Due To Damage TOWED DUE TO DISABL	INC DAMACE		Removed By					
		What Driver Was Doing	ING DAMAGE		Factors					
		GOING STRAIGHT		NOT APPLICABLE						
		Driver Prior Action Other								
		Driver Actions Driver Actions								
	E	NO CONTRIBUTING ACT	ION							
LIND	VEHICLE									
\supset	/EF									
		Owner Name WALTER KRUGER		Owner Address 201 FROST WOODS RD # 305						
02	02	WALTER RROGER	MONONA, WI 53716 , US							
		Sequence Of Events								
	01	Event MOTOR VEH IN TRANSP	ORT							
	02	Event								
	03	Event								
	04	Event								
_		L Policy Holder								
UNIT		Insurance Company		Indiv	<i>r</i> idual					
_		AMERICAN-FAMILY-INS-	со	WAI	LTER KRUGER					
	ı	Individual								
		Driver WALTER KRUGER		Citat 0		Sex MALE				
	IAL	(608) 444-6120				Race				
⊨	ם									
LNO	INDIVIDUA	Address 201 FROST WOODS RD #	± 305	Driver License Number						
	Z	MONONA, WI 53716 , US		STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sat	On Duty fety Equipment	/ Crash	Safety Equipment						
	Jui	Row	Seat Position	SHOULDER & LAP BELT						
		01 - FRONT ROW	07 - LEFT	0110	JOEDER & LAI D	LL 1				
		Helmet Use	L	Helm	net Compliance					
		Eye Protection		Tint Compliance						
8	2	Injury S	everity	Airbag						
05	005		PARENT INJURY	DEPLOYED-COMBINATION						
		Ejected NOT EJECTED	Report NOT EJECTED/NOT AP	Trapped/Extricated PLICABLE NOT TRAPPED						

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Medical Transport		EMS Agency Identifier	•	EMS Run #			
		NOT TRANSPORTED		5		T: (D "			
		Hospital		Date of Death		Time of Death			
		Distracted By NOT APP	By Source PLICABLE (NOT DISTRA	CTED)		1			
		Distracted By Action NOT DISTRACTED							
	,	Non Motorist Striking Un	it # Location						
		Prior Action	·						
TINO	INDIVIDUAL	Action							
		Action Other					To/From School		
		Suspected	Alcohol Use	Suspected Drug Use					
	L	Drug & Alcohol No	Alcohol Test Type	NO					
		Alcohol Test Given TEST NOT GIVEN	•		Alcohol Test Results				
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results	3			
05	002	Drug Type	1						
		Individual Condition APPEARED NORMAL							
	l l	Individual		_					
		Passenger MARCELLA KRENZ		Citations Issued 0	Sex FEMALE				
	DUAL	(608) 819-8237		Date of Birth	Race				
⊨	וםו								
Z	INDIN	Address 201 FROST WOODS RD # 3' MONONA, WI 53716, US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sof	On Duty Cr	rash	Safety Equipment					
	Sai	fety Equipment	Seat Position	SHOULDER & LAP BELT					
		01 - FRONT ROW	09 - RIGHT						
		Helmet Use	Helmet Compliance						
	Eye Protection			Tint Compliance					
05	003	Injury Seve	rity E INJURY	Airbag DEPLOYED-COME	BINATION				
		Ejected Ej	ection Path	L		Trapped/Extricated			
		NOT EJECTED No Medical Transport	OT EJECTED/NOT APPI	LICABLE EMS Agency Identifier		NOT TRAPPED EMS Run #			
	EMS GROUND			6000368		LIVIS RUII #			

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 04/04/2024

Crash Time 01:46 PM

		Hospital			Date of Death		Time of Death	
		ST CLARE HOSP						
		Distracted By	Distracted By Source)				
		Distracted By Action						
	,	Non Motorist	Striking Unit #	Location				
		Prior Action						
		Action						
	1 L							
⊨	INDIVIDUAL							
UNIT	Z							
	IND							
		Action Other						To/From School
	L	Drug & Alcohol	Suspected Alcohol U NO	se	Suspected Drug Use 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	003	Drug Type		•		•		
		Individual Condition						
		APPEARED NORM	IAL					