## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	е	Primary Crash D	Oocument #	Agency 25-060	/ Crash Number <b>056</b>	0 0	Investigating Officer/Deputy SERGEANT E. KNULL			
Г	Crash Date <b>06/16/2025</b>		Ordon mino		Date Arrived <b>06/16/2025</b>		Time Arrived 04:51 PM				
51T	Date Notified <b>06/16/2025</b>		Time Notified 04:41 PM		Total Units <b>02</b>		Total Injured <b>03</b>	l , , , , , , , , , , , , , , , , , , ,			
-0F	On Emergency Hi		and Run		ure Work Zone		Trailer or	Γowed	Reporting Threshold		
eTI	Government Active School Z			hool Zone	School <b>NO</b>	Bus Related	Tags				
	Crash Type DT4000 (STANDARD CRASH)						Amended		Secondary Crash		

# Dagram NOT TO SCALE Photos By KNULL Additional Information PHOTOS S8 UNINVOLVED VEHICLE

✓ 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 STH 58 AT STH 33. UNIT 2 NB ON STH 33. OPERATOR OF UNIT 1 STATES VEHICLE WAS TURNING ON STH 58 AND SHE DIDNT SEE UNIT 1 AND PULLED OUT TO TURN SB AND WAS STRUCK BY UNIT 1. UNIT 1 DRIVER AND INFANT PASSENGER CHECKED OUT BY EMS WITH POSSIBLE INJURIES. DRIVER OF UNIT 2 ALSO HAD POSSIBLE INJURY, BOTH VEHICLES SUSTAINED DISABLING DAMAGE AND WERE REMOVED BY SHIELDS TOWING. OPERATOR OF UNIT 1 CITED FOR FAIL TO YIELD FROM STOP SIGN.

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

Crash Date 06/16/2025

Crash Time 04:41 PM

LOC	ation										
	ERSECTION					Latitude			Longitud	le	
ON STH33 WB							43.595037003			-90.127052505	
AT STH58 NB							X Coordinate			Y Coordinate	
IN THE TOWN OF LA VALLE IN SAUK COUNTY							247586.09375 4831648				
IN S	AUR COUNTY					Structure <sup>-</sup>	Type		1		
						NO STRI		Ē			
	-1-0										
_	sh Scene										
	Harmful Event					First Harm		Location			
	TOR VEH IN TRANSP	ORT				ON ROA	DWAY				
Manr	ner of Collision					Light Cond	dition				
01 -	ANGLE					DAYLIGI	НT				
Road	d Surface Condition(s)					Roadway	Factor(s)				
DRY	•										
Envir	ronment Factor(s)										
NON	<b>IE</b>					NONE					
Weat	ther Condition(s)					-					
CLO	OUDY										
Anim	al Type					Relation T	o Trafficw	ay			
								N ROAD			
Cras	h Classification - Location					Crash Clas	ssification	- Jurisdiction			
PUB	SLIC PROPERTY					NO SPECIAL JURISDICTION					
Triba	I Land			Access C			ccess Control Special Study			Special Study	
						NO CONTROL					
	in Interchange Area	Junction Location			Intersectio						
NO		INTERSECTION				SECTION					
	ure Type			Reasons for Closure							
	IE CLOSURE										
	Initial Lane/Rd Closed	Time Initial Lane/Rd Closed	d	LAW	ENFORC	EMENT, TOW TRUCK, FIRE/EMS					
	6/2025	04:41 PM									
	All Lanes Open	Time All Lanes Open					ime Scene Clea	red			
06/1	6/2025	05:23 PM		06/16/2025			05:23 PM				
Unit	t Summary 💻										
Unit 9	Status		Vehi	cle Ope	erating As Cl	lassification		Unit Type			
IN T	RANSIT		DC	D CLASS				AUTOMOE	AUTOMOBILE		
Vehic	cle Type		-				Operati			ing As Endorsements	
PAS	SENGER CAR										
Total	Occs	Train/Bus # Recorded	Tota	Total # Citations Issued			Total Trai		Total HazMat Types		
2			1			0			0		
Insur	ance?	Direction Of Travel		Pre CrashTire		Speed Lir		imit	Total Lanes		
YES	}	SOUTHBOUND		Mark			45		3		
Most	Harmful Event: Collision	With	Spec	cial Fun	ction		l	Emergency I		cle Use	
МОТ	TOR VEH IN TRANSP	ORT	NO	SPEC	IAL FUNC	TION		NOT APPL	ICABLE		
Traffi	ic Way		Traff	ic Cont	rol			Traffic Contr	ol Inopera	tive/Missing	
TWO-WAY, NOT DIVIDED, WITH A CONTINUOUS LE					iN			NO	·		
				d Curva	iture			Road Grade			
**				STRAIGHT				LEVEL			
Truck	k Bus or HazMat	·									
NO											
1	Vehicle										
Ī	License Plate Number		Plat	te Type			St	Country of Iss	suance		
	AVM6394		AU				WI	UNITED ST			
	Vehicle Identification Nur	mber	Mal				Year	Model			
6	2G11Z5SLXF923868		СН			2015 IMPALA					

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# WISCONSIN MOTOR VEHICLE CRASH REPORT

		Color		Body Style Bus Use							
		GLD - GOLD		SD - SEDAN							
	ш	Initial Contact Point		Vehicle Damage	Γ						
_		09 - LEFT SIDE MIDDLE		Volliolo Balliago	7 8 9 10 11						
UNIT	<b>≌</b>			- 08 - LEFT SIDE REAR, 09 - LEFT SIDE MIDDLE, 10 -			6 3 12				
n	VEHICL	Extent Of Damage  DISABLING DAMAGE		LEFT SIDE FRONT			5 4 3 2 1				
	>			V							
		Towed Due To Damage	DAMAGE	Vehicle Removed By							
		TOWED DUE TO DISABLING	DAMAGE	SHIELDS TOWING							
		What Driver Was Doing		Vehicle Factors							
		LEFT TURN		NOT ARRUGARIE							
		Driver Prior Action Other		NOT APPLICABLE							
		Driver Actions									
	щ	FAILED TO YIELD RIGHT-OF-WAY									
╘	VEHICLE										
UNIT	王										
_	Ä										
		Owner Name		Owner Address			-				
		MARK BROOKS		W5404 STATE ROAD 82 E # 6 MAUSTON, WI 53948 , US							
01	2	(608) 479-2911									
	,	Sequence Of Events									
	•	Event									
	2	MOTOR VEH IN TRANSPOR	Т								
		Frant									
	02	Event									
	03	Event									
	9	Event									
_	1	olicy Holder									
UNIT		Insurance Company INDIVIDUAL									
)		PROGRESSIVE-CLASSIC-IN	S-CO	MARK BROOKS							
		Individual									
		DRIVER		Citations Issued	Sex						
		JADA BROOKS		1	FEMALE						
	₹	(608) 479-2911		Date of Birth	Race						
	DUAL			Date of Birth	WHITE						
늘	=	Address									
N	INDIN	Address W5404 STATE ROAD 82 E #	6	Driver License Number							
	Z	MAUSTON, WI 53948, US	<b>U</b>	STATE: WISCONSIN COUNTRY: UNITED STATES							
		, , , , , , , , , , , , , , , , , , , ,									
	Sat	On Duty Cr fety Equipment	asn	Safety Equipment							
	Ou,		T								
		Row	Seat Position	SHOULDER & LAP BELT							
		01 - FRONT ROW	07 - LEFT								
		Helmet Use		Helmet Compliance							
		Eye Protection		Tint Compliance							
7	90	Injury Seve	rity	Airbag							
٦	0	Injury POSSIBL		DEPLOYED-COMI	BINATION						
		l '	ection Path			Trapped/Extricated					
			OT EJECTED/NOT APP			NOT TRAPPED					
		Medical Transport		EMS Agency Identifie	r	EMS Run #					
		NOT TRANSPORTED									

### **WISCONSIN MOTOR VEHICLE CRASH REPORT**

		Hospital			Date of Death		Time of Death			
		Distracted By	Distracted E	By Source LICABLE (NOT DISTRAC	CTED)					
		Distracted By Action NOT DISTRACTED	)							
		Non Motorist	Striking Uni	t# Location						
		Prior Action		<u>.</u>						
		Action								
	AL									
LNO	INDIVIDUAL									
5	DIV									
	Z									
		A 1' O'I						T /5 0 1 1		
		Action Other						To/From School		
	ı	Drug & Alcohol	Suspected .	Alcohol Use	Suspected Drug Use NO					
		Alcohol Test Given		Alcohol Test Type	1		Alcohol Test Results			
		TEST NOT GIVEN		Drug Test Type		D T4 D				
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results				
6	001	Drug Type								
		Individual Condition								
		APPEARED NORM	IAL							
		Individual								
		PASSENGER MEREDITH GOOD	WIN		Citations Issued					
	IAL	(608) 479-2911	*****		<b>0</b> Date of Birth	FEMALE Race				
Ļ	/IDL				WHITE					
LNO	IDINIDUAL	Address W5404 STATE ROA		6	Driver License Number	er				
	<b>=</b>	MAUSTON, WI 539	48 , US							
	Sat	fety Equipment	On Duty Cr	ash	Safety Equipment					
		Row		Seat Position	CHILD RESTRAINT SYSTEM - REAR FACING					
		02 - SECOND ROW	٧	07 - LEFT						
		Helmet Use			Helmet Compliance					
		Eye Protection			Tint Compliance					
2	005	Injury	Injury Seve	rity E INJURY	Airbag  DEPLOYED-SIDE					
		Ejected	Ej	ection Path	1		Trapped/Extricated			
		NOT EJECTED  Medical Transport	N	OT EJECTED/NOT APPL	LICABLE EMS Agency Identifier	r	NOT TRAPPED EMS Run #			
		EMS GROUND			6001024	•	EIVIO RUII #			
		Hospital REEDSBURG ARE	A MED C	гр	Date of Death		Time of Death			
		WELDSBUKG AKE	A MED C	· ix						

# WISCONSIN MOTOR VEHICLE CRASH REPORT

		Distracted By	Distr	racted By S	ource								
		Distracted By Action											
		Non Motorist	Strik	king Unit#	Loca	ation							
		Prior Action			•								
		Action											
	Ι												
╘	DO												
LNO	Σ												
	INDIVIDUAL												
		Action Other											To/From School
			Susp	pected Alco	hol Use			Suspected Drug Use					
	L	Orug & Alcohol	NO					NO					
		Alcohol Test Given			Alco	hol Test Ty	ре				Alcohol Tes	t Results	
		TEST NOT GIVEN											
		Drug Test Given TEST NOT GIVEN			Drug	g Test Type	Type Drug Test Results			Fest Results			
0	002	Drug Type											
0	0												
		Individual Condition											
		APPEARED NORM	IAL										
		Violations			<u> </u>		-						
	01	UTC Number BK261952	001	ue To? <b>1</b>	Statute N <b>346.18(3</b>			Description FAIL/YIELD RIGHT/	VAY F	ROM STO	P SIGN		
	Unit	Summary •											
		Status =					Ve	hicle Operating As Classi	fication		Unit Type		
	IN T	RANSIT					D CLASS			AUTOMOBILE			
02	Vehi	/ehicle Type								Operating As Endorsements			
0		PASSENGER CAR											
	Tota <b>1</b>	Occs		Train/Bus	# Recorde	d	To:	tal # Citations Issued		Total Traile	ers	Total HazM	lat Types
		ance?		Direction (	Of Travel		U	Pre CrashTire		Speed Lim	it	Total Lane	S
<b>-</b>	YES			NORTHE				Mark		45		3	
LNO		Harmful Event: Collision						ecial Function			Emergency		le Use
_		TOR VEH IN TRANS	POI	RT				O SPECIAL FUNCTIO	N		NOT APPI		
		ic Way <b>D-WAY, NOT DIVIDE</b>	D V	NITH A CO	NTINIIO	IISTE		affic Control  CONTROL			Traffic Cont	rol Inoperati	ve/Missing
		ace Type	D, V	WITH A CC	NINOO	US LE		oad Curvature			NO Road Grade		
	BLACKTOP (BITUMINOUS)						RAIGHT			LEVEL			
		k Bus or HazMat											
	NO												
	1	Vehicle											
		License Plate Number						late Type			Country of Issuance		
		ASM2480  Vehicle Identification N	Jumb	ner				LUT lake			UNITED ST Model	AIES	
02	02	JTDBR32E242032		)GI				OYT			COROLLA		
							1						

# WISCONSIN MOTOR VEHICLE CRASH REPORT

		Color		Body Style		Bus Use			
		GRN - GREEN		SD - SEDAN					
	Ш	Initial Contact Point		Vehicle Damage			7 8 9 10 11		
UNIT	IC	12 - FRONT Extent Of Damage		01 - RIGHT FRONT CORNER, 11 - LEFT FRONT					
⊃	VEHICLE	DISABLING DAMAGE		CORNER, 12 - FROM	IT		5 4 3 2 1		
	_	Towed Due To Damage	,	Vehicle Removed By					
		TOWED DUE TO DISABLING	G DAMAGE	SHIELDS TOWING					
		What Driver Was Doing		Vehicle Factors					
		GOING STRAIGHT  Driver Prior Action Other		NOT APPLICABLE					
		Diver i noi Action Other							
		Driver Actions							
	Ш	NO CONTRIBUTING ACTION							
UNIT	VEHICLE								
<b>-</b>	戶								
	>								
		Owner Name		Owner Address					
02	02	LELAND MC KNIGHT (608) 415-3154		640 SALSBERY CIR UNIT 2 HILLSBORO, WI 54634 , US					
J	)	(444)		,,					
		L Sequence Of Events							
		Event							
	01	MOTOR VEH IN TRANSPOR	RT						
	02	Event							
	03	Event							
	04	Event							
_		Policy Holder							
UNIT		Insurance Company		INDIVIDUAL					
)		STATE-FARM-GENERAL-IN	s-co	LELAND MC KNIG	HT				
	ı	Individual							
		DRIVER LELAND MC KNIGHT		Citations Issued  0	Sex MALE	Sex			
	AL	(608) 415-3154		Date of Birth	Race				
_	DUAI			Jane or Smill	BLACK/AFRIC	AN AMERICAN			
N O	INDIN	Address		Driver License Number					
	N	640 SALSBERY CIR UNIT 2 HILLSBORO, WI 54634, US	<b>3</b>	STATE: WISCONSIN COUNTRY: UNITED STATES					
		, , , , , , , , , , , , , , , , , , , ,							
		On Duty C	rash	Safety Equipment					
	Sat	fety Equipment							
		Row FRONT ROW	Seat Position	SHOULDER & LAP BELT					
		01 - FRONT ROW Helmet Use	07 - LEFT	Helmet Compliance					
		Tiomict Ode		Treimet Gomphande					
		Eye Protection		Tint Compliance					
<u>ر</u> ،	က	Injury Seve	erity	Airbag					
02	003	Injury SUSPEC	TED MINOR INJURY	DEPLOYED-COMBINATION					
		NOT EJECTED N	OT EJECTED/NOT APP			Trapped/Extricated NOT TRAPPED			
		Medical Transport		EMS Agency Identifier EMS Run #			·		

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/16/2025

Crash Time 04:41 PM

		Hospital HILLSBORO AREA	A HOSDITAL		Date of Death		Time of Death	
			Distracted By Source					
		Distracted By	NOT APPLICABL	E (NOT DISTRAC	CTED)			
		Distracted By Action NOT DISTRACTED	)					
		Non Motorist	Striking Unit #	Location				
		Prior Action						
		Action						
	¥							
UNIT	INDIVIDUAL							
5	<u>≥</u>							
	Z							
		Action Other						To/From School
			Suspected Alcohol U	se	Suspected Drug Use			
		Drug & Alcohol	NO		NO			
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results	
		Drug Test Given		Drug Test Type		Drug Test Results		
		TEST NOT GIVEN		g,,, -		Brug Tool Nooullo		
02	003	Drug Type						
	0							
		Individual Condition						
		APPEARED NORM	//AL					
			<del></del>					