WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash	· · · · · · · · · · · · · · · · · · ·		Crash Number 314	0 0	Investigating Officer/Deputy DEPUTY A. KING		
7	Crash Date 06/22/2025	Crash Time 12:20 PM	Gradii Tiillo		rived 2025	Time Arrived 12:29 PM	1		
3SS	Date Notified 06/22/2025	Time Notified 12:21 PM			nits	Total Injured 01	,		
0 E	On Emergency	Hit and Run	and Run Lane Closu		Work Zone	Trailer or	Towed	Reporting Threshold	
E TI	Government Property Active School Zone			School Bus Related NO		Tags			
	✓ Reportable Crash Type DT4000 (STANDARD CRAST))		Amended		Secondary Crash	

Description Diagram Reconstruction By Photos By Not to scale Additional Information **NONE** 12

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

U2 WAS STATIONARY AT THE STOP LIGHTS WHEN U1 WAS STOPPED BEHIND THEM. U1 BEGAN MOVING FORWARD WHILE U2 WAS STILL STATIONARY. U1 THEN TAPPED U2, THERE WAS NO PAINT OR SCRATCH TRANSFER OR ANY DENTS ON EITHER VEHICLE. OPERATOR OF U2 STATED HE HAD GOTTEN A HEAD ACHE FROM THE COLLISION AND WAS CONCERNED ABOUT HAVING A CONCUSSION. DELLS-DELTON EMS WAS REQUESTED AND TRANSPORTED OPERATOR OF U2 TO ST. CLARE HOSPITAL. OCCUPANTS OF U1 STATED THEY DID NOT HAVE ANY INJURIES. OPERATOR OF U1 STATED HE THOUGHT IT TURNED GREEN THE VEHICLE AHEAD OF HIM WAS MOVING. OPERATOR OF U1 ESTIMATED THE SPEED TO BE ABOUT 10MPH OR LESS WHEN HE COLLIDED WITH U2. PLATT'S TOWING RESPONDED AND REMOVED U2 FROM THE SCENE AS IT WAS A ROAD HAZARD. U1 WAS REMOVED FROM THE SCENE BY THE OPERATOR.

Crash Date 06/22/2025
Crash Time 12:20 PM

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Crash Date 06/22/2025

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		HE VILLAGE OF LAKI AUK COUNTY	E DELION			275634.2	28125		482767	74
	0	AUROUNT			-	Structure ⁻	Туре		l.	
L	`	sh Scene								
_						E:				
		Harmful Event FOR VEH IN TRANSPO	ODT		First Harmful Event Location ON ROADWAY					
		ner of Collision	URI		Light Condition					
		FRONT TO REAR				DAYLIGHT				
L		Surface Condition(s)				Roadway				
	DRY	. ,			Todaway Factor(s)					
-	Envir	onment Factor(s)								
	NON	. ,			NONE					
ŀ	Weat	ther Condition(s)				_				
	CLE	` ,								
-	Anim	al Type				Relation To Trafficway				
		31				TRAFFICWAY - ON ROAD				
		h Classification - Location BLIC PROPERTY				Crash Classification - Jurisdiction NO SPECIAL JURISDICTION				
	Triba	l Land		Access Control NO CONTROL				Special Study		
L	Within Interchange Area Junction Location I									
	NO	·	INTERSECTION-RELATE	D	Intersection T-INTERS					
	NO	Summary =	INTERSECTION-RELATE	D						
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ONT 04	NO Jnit Unit S IN TI Vehic PAS Total 7 Insur: YES Most MOT Traffi DIVII Truck NO	Status RANSIT Cle Type SENGER CAR Occs ance? Harmful Event: Collision V FOR VEH IN TRANSPO C Way DED HWY W/O TRAFF ACE Type ICRETE C Bus or HazMat Vehicle License Plate Number CD21502 Vehicle Identification Nur 5FNRL38756B462047 Color SIL - SILVER (ALUMI	Train/Bus # Recorded Direction Of Travel WESTBOUND With ORT FIC BARRIER	Vehicle Ope D CLASS Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont TRAFFIC Road Curva STRAIGH Plate Type AUT Make HOND Body Style MV - MIN Vehicle Da	T-INTERS erating As Cla tions Issued CrashTire Mark notion EIAL FUNC trol SIGNAL ature T	SECTION assification	Total Tra 0 Speed Li 45 St IL Year	AUTOMO Operating A illers mit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED S: Model ODYSSEY	Total Haz 0 Total Lan 5 Motor Veh LICABLE rol Inopera	zMat Types nes nicle Use

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

		Towed Due To Damage		Vehicle Removed By				
		NOT TOWED		OPERATOR				
		What Driver Was Doing GOING STRAIGHT		Vehicle Factors				
		Driver Prior Action Other		NOT APPLICABLE				
		Billor Filor Floudin Guilor						
		Driver Actions						
	щ	FOLLOWING TOO CLOSE						
UNIT	<u> </u>							
5	VEHICLE							
	>							
		Owner Name		Owner Address				
_		SYED ALI		238 SHOREWOOI				
6	01	(630) 397-8439		GLENDALE HEIG	HTS, IL 60139 , I	JS		
	,	Sequence Of Events						
	01	Event MOTOR VEH IN TRANSPO	RT					
	02	Event						
	03	Event						
		Event						
	04							
╘	l	Policy Holder						
LIND		Insurance Company FIRST-CHICAGO-INSURAN	ICE-CO	INDIVIDUAL SYED ALI				
		ndividual						
		DRIVER		Citations Issued	Sex			
	Ļ	MURAD ALI (630) 397-8439		0	MALE			
	INDIVIDUAL	(000) 001-0400		Date of Birth	Race			
UNI	M	Address		Driver License Number				
\supset	ID	238 SHOREWOOD DR						
	=	GLENDALE HEIGHTS, IL 6	0139 , US	STATE: ILLINOIS C	OUNTRY: UNITE	D STATES		
	Sat	On Duty C ety Equipment	Crash	Safety Equipment				
		Row	Seat Position	SHOULDER & LAP	RFI T			
		01 - FRONT ROW	07 - LEFT	OHOOLDEN & LAI	DEET			
		Helmet Use		Helmet Compliance				
		Eye Protection		Tint Compliance				
5	001	Injury Sev	•	Airbag				
0	ŏ		ARENT INJURY	NON DEPLOYED				
		Ejected Ejection Path		LICARI E		Trapped/Extricated NOT TRAPPED		
		NOT EJECTED NOT EJECTED/NOT AF Medical Transport		EMS Agency Identifier		EMS Run #		
		NOT TRANSPORTED						
		Hospital	Date of Death		Time of Death			
	Distracted By Source							
		Distracted By NOT AP	PLICABLE (NOT DISTRA	CTED)				
		Distracted By Action NOT DISTRACTED						

3 of 12

Crash Date 06/22/2025 Crash Time 12:20 PM

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

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		Non Motorist	Unit#	Location								
		Prior Action										
		Action										
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		Action Other						To/From School				
		Suspect	ed Alcohol l	Jse	Suspected Drug Use							
	-	Drug & Alcohol NO			NO		T					
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type)		Alcohol Test Results					
		Drug Test Given		Drug Test Type		Drug Test Results	<u> </u>					
		TEST NOT GIVEN										
2	00	Drug Type										
		Individual Condition										
		APPEARED NORMAL										
		L Individual										
		PASSENGER			Citations Issued	Sex						
		SYED ALI			0	MALE						
	INDIVIDUAL	(630) 397-8439			Date of Birth	Race						
Ĭ N N	₽	Address			Driver License Number							
⊃	<u></u>	238 SHOREWOOD DR	•	2								
	=	GLENDALE HEIGHTS, IL	60139 , U	5								
		On Duty	Crash		Safety Equipment							
	Sat	fety Equipment			Caroty Equipmont							
		Row	Seat Po		SHOULDER & LAP	BELT						
		01 - FRONT ROW Helmet Use	09 - R	GHT	Helmet Compliance							
		Tielinet Ose			Tiennet Compilance							
		Eye Protection			Tint Compliance							
	8	Injury S	everity		Airbag							
2	002	1	PARENT I	NJURY	NON DEPLOYED							
		Ejected	Ejection Pa				Trapped/Extricated					
		NOT EJECTED Medical Transport	NOT EJE	CTED/NOT APPL	EMS Agency Identifier		NOT TRAPPED EMS Run #					
		NOT TRANSPORTED			Livio / igonoy idonamor		EWO TKIT!					
		Hospital			Date of Death		Time of Death					
		Dietract	ed By Sourc	е.								
		Distracted By	La Dy Court	_								
		Distracted By Action										
		Striking	I Init #	Location								
		Non Motorist	- 111t π	Location								
ı Wisco	nsin N	Motor Vehicle Crash		This repor	t does not include any CJI	S data.	Crash Date	06/22/2025				

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/22/2025

		Prior Action								
TINO	INDIVIDUAL	Action								
		Action Other							To/From School	
	l		Suspected /	Alcohol Use		Suspected Drug Use				
	L	Orug & Alcohol	NO			NO		T		
		Alcohol Test Given TEST NOT GIVEN		Alc	ohol Test Type			Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN		Dru	ıg Test Type		Drug Test Results			
01	002	Drug Type		1			1			
		Individual Condition								
		APPEARED NORM	IAL							
	i	ndividual								
	اب	PASSENGER SYED ALI			Citations Issued 0	Sex MALE				
_	IAU	(630) 397-8439				Date of Birth	Race			
LINO	INDIVIDUAL	Address 238 SHOREWOOD GLENDALE HEIGH	DR HTS, IL 601	139 , US		Driver License Number				
	Saf	ety Equipment	On Duty Cra	ash		Safety Equipment				
		Row 02 - SECOND ROV	v	Seat Position	n	CHILD RESTRAINT	SYSTEM - REAR	FACING		
		Helmet Use				Helmet Compliance				
		Eye Protection				Tint Compliance				
7	003	Injury	Injury Sever	rity RENT INJU	RY	Airbag NON DEPLOYED				
		Ejected	Eje	ection Path		<u> </u>		Trapped/Extricated		
	NOT EJECTED NOT EJECTED/NOT A Medical Transport					ICABLE EMS Agency Identifier		NOT TRAPPED EMS Run #		
		NOT TRANSPORT	ED			Zivio / igonoy racmanor				
	Hospital					Date of Death Time of Death				
		Distracted By	Distracted E	By Source				•		
		Distracted By Action		_	_					
		Non Motorist	Striking Uni	t# Loc	cation					
		Prior Action			·					

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

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		Action										
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_	INDIVIDUAL											
LNO	ΔV											
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		Action Other						To/From School				
	ا	Suspe	cted Alcohol I	Use	Suspected Drug Use							
	L	Orug & Alcohol No		_	NO							
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	•		Alcohol Test Results					
		Drug Test Given		Drug Test Type		Drug Test Results	<u> </u>					
		TEŠT NOT GIVEN										
5	003	Drug Type										
		Individual Condition										
		APPEARED NORMAL										
		Individual										
	Ī	PASSENGER			Citations Issued	Sex						
	٩L	SYEDA FATIMA (630) 397-8439			Date of Birth	FEMALE Race						
_	INDIVIDUAL	,			Date of Birth	Race						
LNO	Ĭ	Address			Driver License Numb	er						
	N	238 SHOREWOOD DR GLENDALE HEIGHTS, II	_60139 , U	S								
	Sat	On Du fety Equipment	ty Crash		Safety Equipment							
	Ju.	Row Equipment	Seat P	osition	SHOULDER & LA	P BELT						
		02 - SECOND ROW		IIDDLE								
		Helmet Use			Helmet Compliance							
		Eye Protection			Tint Compliance							
5	90	Injury NO A	Severity PPARFNT I	IN.IURY	Airbag NON DEPLOYED							
		Ejected	Ejection Pa	ath	1.101.22.20.22		Trapped/Extricated					
		NOT EJECTED	NOT EJE	CTED/NOT APPL			NOT TRAPPED					
		Medical Transport NOT TRANSPORTED			EMS Agency Identifie	er	EMS Run #					
		Hospital			Date of Death		Time of Death					
	Distracted By Source											
		Distracted By	ned by Sourc	.e								
		Distracted By Action										
		Non Motorist	g Unit#	Location								
		Prior Action										

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		Action										
	INDIVIDUAL											
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	_											
		Action Other						To/From School				
		Suspect	ted Alcohol Use		Suspected Drug Use							
	L	Drug & Alcohol NO			NO							
		Alcohol Test Given	Alco	hol Test Type			Alcohol Test Results					
		TEST NOT GIVEN										
		Drug Test Given	Drug	g Test Type		Drug Test Results						
		TEŠT NOT GIVEN										
_	4	Drug Type										
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		Individual Condition										
		ADDEADED MODMAI										
		APPEARED NORMAL										
		ndividual										
		PASSENGER KURSOON MURAD			Citations Issued	Sex						
	7	(630) 457-6672			0	MALE						
	INDIVIDUAL				Date of Birth	Race						
UNI	9				5							
5		Address 238 SHOREWOOD DR			Driver License Number							
	Ξ	GLENDALE HEIGHTS, IL	60139 . US									
		,	,									
		On Duty	Crook		Sofaty Equipment							
	Saf	ety Equipment	Clasii		Safety Equipment							
			lo . p		SHOULDER & LAP	DELT						
		Row 02 - SECOND ROW	Seat Position 09 - RIGHT		SHOULDER & LAP	DELI						
			09 - RIGHT		11-1							
		Helmet Use			Helmet Compliance							
		Eye Protection			Tint Consuling							
		Lye Frotection			Tint Compliance							
	ا ۱	Injury S	everity		Airbag							
2	002	Injury NO AP	PARENT INJUR	· V	NON DEPLOYED							
	Ŭ	Ejected	Ejection Path	V I	NON DEFECTED		Trapped/Extricated					
		NOT EJECTED	NOT EJECTED	NOT APPI	ICARI E		NOT TRAPPED					
		Medical Transport	NOT LOCOTED	MOI AII L	EMS Agency Identifier		EMS Run #					
		NOT TRANSPORTED			Livio rigerioy identifier		LIVIO I KUIT #					
		Hospital			Date of Death		Time of Death					
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		Distract	ed By Source		1							
		Distracted By	,									
		Distracted By Action										
		Striking	Unit # Loca	ation								
		Non Motorist										
		Prior Action	I									

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		Action									
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LNO	2										
	₽										
	=										
		Action Other						To/From School			
		S	uspected.	Alcohol Use	Suspected Drug Use			•			
	L	Drug & Alcohol N	10		NO						
		Alcohol Test Given		Alcohol Test Typ	oe .		Alcohol Test Results				
		TEST NOT GIVEN									
		Drug Test Given		Drug Test Type		Drug Test Results					
		TEST NOT GIVEN									
5	005	Drug Type									
_	0										
		Individual Condition									
		ilidividuai Coliditioli									
		APPEARED NORMA	AL								
		ndividual									
		PASSENGER			Citations Issued	Sex					
		SYEDA FATIMA									
_	7	(630) 237-6888			0	FEMALE					
	INDIVIDUAL	(000) = 0000			Date of Birth	Race					
UNI	9										
5	≥	Address			Driver License Numbe	r					
_	닐	238 SHOREWOOD D	DK DK	420 110							
	=	GLENDALE REIGHT	3, IL 60	139 , 03							
	_ '	0	n Duty Cr	ash	Safety Equipment						
	Saf	ety Equipment									
		Row		Seat Position	SHOULDER & LAP	BELT					
		03 - THIRD ROW		07 - LEFT							
		Helmet Use			Helmet Compliance						
					Trominet Compilation						
		Eye Protection			Tint Compliance						
		Lyo i rotodion			Till Compilation						
	, l	In	njury Seve	rity	Airbag						
2	900	Injury N	IO ADDA	RENT INJURY	NON DEPLOYED						
	Ŭ,	- Finated	IU APPA	ection Path	NON DEPLOTED		I Transad/Cytricated				
		Ejected	_				Trapped/Extricated				
		NOT EJECTED	N	OT EJECTED/NOT APF			NOT TRAPPED				
		Medical Transport			EMS Agency Identifier		EMS Run #				
		NOT TRANSPORTE	D								
		Hospital			Date of Death		Time of Death				
		District	istracted E	By Source							
		Distracted By									
		Distracted By Action									
		S	triking Uni	it # Location							
		Non Motorist	-								
		Prior Action		<u> </u>							

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/22/2025

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		Action									
	7										
_	INDIVIDUAL										
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LNO	2										
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	=										
		Action Other							To/From School		
		Su	spected A	Alcohol Use		spected Drug Use					
	L	Orug & Alcohol No)		NC)					
		Alcohol Test Given		Alcohol Test T	уре			Alcohol Test Results			
		TEST NOT GIVEN									
		Drug Test Given		Drug Test Typ	e		Drug Test Results				
		TEST NOT GIVEN		2.49 .551.75	•		Drug Test Nesults				
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5	900	Drug Type									
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		ndividual Condition									
		individual Condition									
		APPEARED NORMAL									
		,	_								
		ndividual									
					1 0:						
		PASSENGER SYEDA FATIMA				ations Issued	Sex				
	ᆜ	(630) 397-8439			0		FEMALE				
	INDIVIDUAL	(030) 391-0439			Dat	te of Birth	Race				
╘	⊒										
L N	≥	Address			Dri	ver License Number					
ر ر	9	238 SHOREWOOD DI	R								
	=	GLENDALE HEIGHTS	S, IL 601	139 , US							
	ı	On	Duty Cra	ash	Safety Equipment						
	Saf	ety Equipment	•			, , ,					
		Row		Seat Position	SH	OULDER & LAP E	RFIT				
		03 - THIRD ROW		09 - RIGHT	0.1	IOOLDEIX G LAI	, , , , , , , , , , , , , , , , , , , 				
		Helmet Use		09 - KIGHT	11-1						
		neimet ose			пе	Imet Compliance					
		· ·									
		Eye Protection			Tin	t Compliance					
5	007	Injury I	ury Sever	rity		bag					
_	0	nijui y _N C	O APPA	RENT INJURY	NC	ON DEPLOYED					
		Ejected	Eje	ection Path				Trapped/Extricated			
		NOT EJECTED	NO	OT EJECTED/NOT AF	PPLICA	BLE		NOT TRAPPED			
		Medical Transport			EM	IS Agency Identifier		EMS Run #			
		NOT TRANSPORTED)								
		Hospital			Dat	te of Death		Time of Death			
		,									
		Nic	stracted F	By Source							
		Distracted By		,,							
		Distracted By Action									
		וופום by Action									
			ana e e	. д. — Т. — е							
		Non Motorist	iking Uni	t# Location							
		Prior Action									

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/22/2025

		Action									
	뉘										
—	7										
L	9										
\supset	INDIVIDUAL										
	Z										
		A -4: O4b						T-/5 C-h			
		Action Other						To/From School			
	ı	Susi	pected Alcohol U	lse	Suspected Drug Use						
	L	Drug & Alcohol NO	7 (100) (10		NO						
		Alcohol Test Given		Alcohol Test Ty	pe		Alcohol Test	t Results			
		TEST NOT GIVEN			r-						
		Drug Test Given		Drug Test Type		Drug Test Resul	ts				
		TEST NOT GIVEN									
1	007	Drug Type		I.							
0	0										
		Individual Condition									
		individual Condition									
APPEARED NORMAL											
	Unit	t Summary 👅									
		Status			Vehicle Operating As Classi	ification	Unit Type				
		RANSIT			D CLASS		AUTOMOE				
02		cle Type					Operating A	s Endorsements			
J		SENGER CAR	Train/Bus # Re	aardad I	T + 1 # 0" + 1	Total Tra	iloro	Total HarMat Tymos			
	1 otal	l Occs	ITalli/bus # Re	corded	Total # Citations Issued 0	Total Tra	illers	Total HazMat Types 0			
		rance?	Direction Of Tra	avel		Speed Li	imit	Total Lanes			
_	YES		NORTHBOU		Pre CrashTire Mark	45		5			
		: Harmful Event: Collision Wi			Special Function		Emergency	Motor Vehicle Use			
\supset	МО	TOR VEH IN TRANSPO	RT		NO SPECIAL FUNCTIO	N	NOT APPLICABLE				
	Traff	ic Way			Traffic Control		Traffic Control Inoperative/Missing				
		DED HWY W/O TRAFFI	C BARRIER		NO CONTROL		NO				
		ace Type			Road Curvature		Road Grade				
		NCRETE			STRAIGHT		LEVEL				
		k Bus or HazMat									
	NO										
	'	Vehicle				1.2.	1.2				
		License Plate Number			Plate Type	St	Country of Iss				
		AHE5110 Vehicle Identification Number			AUT Make	WI Year	Model Model	AIES			
02	02	3FA6P0SU4KR104408			FORD	2019	FUSION				
		Color			Body Style	2013	Bus Use				
		SIL - SILVER (ALUMIN	IUM)		SD - SEDAN		Buo 000				
	ш	Initial Contact Point	- ,		Vehicle Damage						
╘	딩	06 - REAR						7 8 9 10 11			
LNO	VEHICL	Extent Of Damage			00 - NO DAMAGE			6 2 2 12			
_	VE	NO DAMAGE						5 4 3 2 1			
					Vehicle Removed By						
		Towed Due To Damage						AG PLATTS WRECKER			
		TOWED BUT NOT DUI	E TO DISABLI	NG DAMAG	PLATTS WRECKER						
		TOWED BUT NOT DUI What Driver Was Doing	E TO DISABLI	NG DAMAG							
		TOWED BUT NOT DUI	E TO DISABLI	NG DAMAG	PLATTS WRECKER						

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/22/2025

		Driver Actions										
	Щ	NO CONTRIBUTING	ACTION	V								
E NO	VEHICL											
Ξ	¥∣											
\supset	而											
	5											
		Owner Name			Owner Address							
		ELAINA MEIER			874 SKY RIDGE D	ND.						
α	02											
07	0	(414) 254-9559			MADISON, WI 537	19,05						
	•	Sequence Of Ever	nts									
	_	Event										
	01	MOTOR VEH IN TRAI	NSPOR	T								
	02	Event										
	0											
		Event										
	03	Lvent										
	0											
		Event										
	9											
\vdash		Policy Holder										
L N		Insurance Company			INDIVIDUAL							
5		AMERICAN-FAMILY-	ING CO	•	ELAINA MEIER							
		AWERICAN-PAWIET-	1143-00		ELAINA MEIER							
		Individual										
	Ī	DRIVER			Citations Issued	Sex						
		ELAINA MEIER										
	اب				0	FEMALE						
	⋖	(414) 254-9559			Date of Birth	Race						
_	\geq											
FIN	INDIVIDUAL	Address			Driver License Number							
5	\leq				Driver License Number							
_	岁	874 SKY RIDGE DR			STATE: WISCONSII	N COUNTRY: UNI	TED STATES					
	=	MADISON, WI 53719	, 05		STATE. WISCONSII	N COUNTRY. UNI	IED STATES					
	Į.	l On	Duty Cr	ach	Safety Equipment							
	Saf	ety Equipment	Duty Of	4311	Salety Equipment							
	- Cu	oty Equipmont										
		Row		Seat Position	SHOULDER & LAP	BELT						
		01 - FRONT ROW		07 - LEFT								
		Helmet Use		·	Halmat Camplianas							
		Heimet Ose			Helmet Compliance							
		Eye Protection			Tint Compliance							
	<u>~</u>	Ini	ury Seve	rity	Airbag							
05	800	Injury -	ury 00v0		_							
	0	Injury PC			NON DEPLOYED							
		Ejected	Ej	ection Path			Trapped/Extricated					
		NOT EJECTED	N	OT EJECTED/NOT APPL	LICABLE		NOT TRAPPED					
		Medical Transport			EMS Agency Identifier		EMS Run #					
		-					ENS Run #					
		EMS GROUND			6000123							
		Hospital			Date of Death		Time of Death					
		ST CLARE HOSP										
	Į.		strootod [By Source								
		Distracted By	Stracted t	LICABLE (NOT DISTRA	CTED)							
		Distracted by No	JI APP	LICABLE (NOT DISTRA	CIED)							
	Distracted By Action											
		NOT DISTRACTED										
			dileine III	:+ #								
		Non Motorist	riking Uni	it # Location								
		14011 WOLDITSE										
		Prior Action		•								

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/22/2025

LIND	INDIVIDUAL	Action Action Other					To/From School
		Action Other					TO/FIOIII SCHOOL
	ı	Drug & Alcohol NO		Suspected Drug Use NO			
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type			Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results	3	
05	008	Drug Type	1				
		Individual Condition					
		NOT OBSERVED					