### WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override 6TL0FKD6NV		Primary Crash D	ocument#	Agency <b>25-069</b>	Crash Number	Investigating Officer/Deputy DEPUTY B. TRAGER			
Ŋ	Crash Date		Crash Time			rived	Time Arrived			
3			04:02 PM Time Notified		07/06/2 Total Ur		04:31 PM  Total Injured Total Killed			
5	07/06/2025		04:03 PM		02		02			
o I LUDD I SQB	On Emergency	Hit	and Run	Lane Closu		Work Zone	Trailer	or Towed	Reporting Threshold	
	Government Property		Active Sch	nool Zone	School <b>NO</b>	Bus Related	Tags			
	<b>✓</b> Reportable		Crash Type DT4000 (STAN	NDARD CRASH	)		<b>✓</b> Amend	led	Secondary Crash	
	Description <b></b>									
	☑ I, a sworn law enfo	prceme	and Cty H			Not to Scal		Photos By  Additional Infor NONE		
	ON JULY 6, 2025 AT APPRICONGESTION WHEN UNIT	OXIMATE	ELY 4:02PM UNIT	2 WAS SLOWING (	ON USH 1	2 BETWEEN CTY HWY Z A	AND CTY HWY			
	THE OPERATOR OF UNIT OF WERE TRANSPORTED TO	1 WAS C	TED FOR AUTOM	OBILE FOLLOWIN	G TOO C	LOSELY. TWO OCCUPANT	S IN UNIT 2 CC			
	WRONG REGISTRATION PI	LATE US	ED.							

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Crash Date 07/06/2025

Crash Time 04:02 PM

Loc	ation									
	USH12 EB				Latitude			Longitud	le	
	MIS				43.30774	4753		-89.759	165385	
_	PRAIRIE RD 'HE TOWN OF PRAIR	IE DII SAC			X Coordinate Y Coordinate				inate	
	SAUK COUNTY	IL DO SAC			276225.375			479868	37.5	
					Structure 7					
Cra	sh Scene			1						
First	Harmful Event				First Harm	ful Event	Location			
MO	TOR VEH IN TRANSP	ORT			ON ROADWAY					
	ner of Collision				Light Condition					
	FRONT TO REAR				DAYLIGH					
Roa	d Surface Condition(s)				Roadway I	actor(s)				
DR	<b>(</b>									
Envi	ronment Factor(s)									
NOI	NE				NONE					
Wea	ther Condition(s)									
CLC	DUDY									
Anin	nal Type				Relation To Trafficway					
					TRAFFICWAY - ON ROAD  Crash Classification - Jurisdiction					
	sh Classification - Location	1								
	BLIC PROPERTY al Land				Access Co		RISDICTION		Special Study	
11100	ar Euriu				NO CON				Special Study	
With <b>NO</b>	in Interchange Area	Junction Location NON-JUNCTION		NOT AN I		CTION				
Uni	t Summary 💻									
Unit	Status		Vehicle Operating As Classification				Unit Type			
	RANSIT		D CLASS			AUTOMOBILE				
	cle Type	_					Operating As Endorsements			
•	ORT) UTILITY VEHIC		T=			T ( ) T		T = 1111	N T	
1 ota	I Occs	Train/Bus # Recorded	1 otal # Cita	tions Issued		Total Tra	allers	Total HazMat Types  0		
Insu	rance?	Direction Of Travel	Pre	CrashTire		Speed L	imit	Total Lan	es	
YES	3	SOUTHBOUND		Mark		55		2		
	t Harmful Event: Collision TOR VEH IN TRANSP		Special Fur NO SPEC	nction	TION			ency Motor Vehicle Use		
	îc Way		Traffic Cont	trol			Traffic Cor	ntrol Inoperat	tive/Missing	
TW	D-WAY, NOT DIVIDED	)	NO CONT	ROL			NO			
Surfa	асе Туре		Road Curva	ature			Road Grad	de		
BLA	ACKTOP (BITUMINOU	IS)	STRAIGH	T			LEVEL			
	k Bus or HazMat									
NO										
,	Vehicle									
License Plate Number			Plate Type	)		St	Country of			
BAA3367			AUT		WI		UNITED STATES			
5	Vehicle Identification Nu		Make		Year		Model			
0	2FMDK4KC5DBB13	923	FORD Body Style			2013	EDGE			
	Color BRO - BROWN		Body Style UT - SPORT UTILITY VEHICLE Bus Use							
	Initial Contact Point			- · · · · ·			I			
	12 - FRONT									

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25-06972

### WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Щ		V	Vehicle Damage 7 8 9 10 11							
LNO	VEHICLE	Extent Of Damage FUNCTIONAL DAMAGE		10 - LEFT SIDE FROM 12 - FRONT	NT, 11 - LEFT FRO	ONT CORNER,	6 2 3 2 1				
		Towed Due To Damage		ehicle Removed By							
		NOT TOWED  What Driver Was Doing		PERATOR Vehicle Factors							
		GOING STRAIGHT	V	renicie Factors							
		Driver Prior Action Other	N	IOT APPLICABLE							
UNIT	VEHICLE	Driver Actions FOLLOWING TOO CLOSE	:								
	VE										
_	1	Owner Name CORTNEY BUSS		Owner Address 125 NINA DR							
5	01			DARLINGTON, WI 53530 , US							
		Sequence Of Events									
	01	MOTOR VEH IN TRANSPO	ORT								
	02	Event									
	03	Event									
	04	Event									
_		Policy Holder									
		Insurance Company INDIVIDUAL									
<b>-</b>		PROGRESSIVE-CLASSIC-	INS-CO	CORTNEY BUSS							
	1	Individual									
		DRIVER MADISON WELACHA		Citations Issued Sex							
	٩L	(608) 778-3448		1 Date of Birth	FEMALE						
⊨	IDINIDUAL			Date of Birth	Race WHITE						
	<u>N</u>	Address 125 NINA DR		Driver License Number							
	N N	DARLINGTON, WI 53530	US	STATE: WISCONSIN COUNTRY: UNITED STATES							
	Sat	On Duty fety Equipment	Crash	Safety Equipment							
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP	BELT						
		Helmet Use		Helmet Compliance							
		Eye Protection		Tint Compliance							
7	001	Injury Se	verity PARENT INJURY	Airbag NON DEPLOYED							
		, , , , , , , , , , , , , , , , , , ,	Ejection Path			Trapped/Extricated					
		NOT EJECTED	NOT EJECTED/NOT APPL			NOT TRAPPED					
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #					
		Hospital		Date of Death		Time of Death					

## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/06/2025

Crash Time 04:02 PM

	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)												
		Distracted By	NO.	T APPLIC	ABL	E (NOT DISTF	RAC	TED)					
		Distracted By Action NOT DISTRACTED	)										
	•	Non Motorist	Strik	king Unit#		Location							
		Prior Action											
		Action											
LINO	INDIVIDUAL												
		Action Other											To/From School
	L	Drug & Alcohol	Susp	pected Alco	ohol U	se		Suspected Drug Use <b>NO</b>					
					Alcohol Test T	уре				Alcohol Test	Results		
		TEST NOT GIVEN											
		Drug Test Given TEST NOT GIVEN	EST NOT GIVEN			Drug Test Type	Э		Drug 1	Test Results			
0	Drug Type												
		Individual Condition											
		APPEARED NORM	/AL										
	١	/iolations											
	01	UTC Number BL507653	lsst <b>00</b> 1	ue To? <b>1</b>		ute Number .14(1m)		Description AUTOMOBILE FOLL	.OWIN	G TOO CL	OSELY		
		Summary •											
		Status					Ve	hicle Operating As Classi	ification		Unit Type		
		RANSIT					D CLASS			AUTOMOBILE			
05		cle Type					Oper				Operating A	s Endorsem	ents
		Occs		Train/Bus	# Re	corded	To	tal # Citations Issued		Total Traile	ers	Total HazM	lat Types
	4						0			0		0	,,
⊨	Insur YES	ance?		Direction SOUTHI				Pre CrashTire Mark		Speed Lim 55	it Total Lanes 2		
LNO		Harmful Event: Collision						ecial Function  O SPECIAL FUNCTIO	N		NOT APPL		le Use
		c Way						affic Control			Traffic Control Inoperative/Missing		
		O-WAY, NOT DIVIDI	ED_					O CONTROL ad Curvature			NO Road Grado		
	Surface Type BLACKTOP (BITUMINOUS)					RAIGHT			Road Grade  LEVEL				
		Bus or HazMat											
		/ehicle											
		License Plate Number	r					ate Type			Country of Is:	suance	
		ARJ8859						UT			UNITED STATES		
05	Vehicle Identification Number 1G1BE5SM1J7185877						ake <b>HEV</b>			Model CRUZE			

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25-06972

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		r				_					
		Color		Body Style		Bus Use					
		RED - RED		SD - SEDAN							
	쁘	Initial Contact Point		Vehicle Damage			7 8 9 10 11				
UNIT	≌	05 - RIGHT REAR CORNER		04 - RIGHT SIDE REA	R, 05 - RIGHT R	EAR CORNER,	6 2 12				
n	VEHICLE	Extent Of Damage FUNCTIONAL DAMAGE		06 - REAR			5 4 3 2 1				
	>	Towed Due To Damage		Vehicle Removed By							
		NOT TOWED		OPERATOR							
		What Driver Was Doing		Vehicle Factors							
		SLOW/STOPPING									
		Driver Prior Action Other		NOT APPLICABLE							
		Driver Actions	I.								
	щ	NO CONTRIBUTING ACTIO	N								
╘	VEHICLE										
UNIT	표										
	7										
		Owner Name LILIA PUENTES VERGEL		Owner Address 3625 S. WHITNAL	I A\/E						
02	02	LILIA PUENTES VERGEL		MILWAUKEE, WI							
)											
		0.5									
	,	Sequence Of Events Event									
	2	MOTOR VEH IN TRANSPOR	RT								
		Event									
	05	So Event									
	03										
		Event									
	9	Event									
_	ı	olicy Holder									
UNIT		Insurance Company		INDIVIDUAL							
)		PROGRESSIVE-CLASSIC-IN	NS-CO	PARKER EBSEN							
	I	Individual									
		DRIVER		Citations Issued Sex							
	ب	FABIO ARCINIEGAS BARRA	ANCO	0	MALE						
	DUAL	(414) 534-5009		Date of Birth	Race						
╘	₽				HISPANIC						
LINO	INDIN	Address 3625 S. WHITNALL AVE		Driver License Number							
	Ĭ	MILWAUKEE, WI 53207 , US	3	STATE: OTHER JURISDICTION COUNTRY: COLOMBIA							
		,									
		On Duty C	rash	Safety Equipment							
	Sat	fety Equipment		Calcty Equipment							
		Row	Seat Position	SHOULDER & LAP	BELT						
		01 - FRONT ROW	07 - LEFT								
		Helmet Use	ı	Helmet Compliance							
		Eye Protection		Tint Compliance							
ا . ا	2	Injury Seve	erity	Airbag							
02	002	1	ARENT INJURY	NON DEPLOYED							
			jection Path	1		Trapped/Extricated					
		NOT EJECTED N	OT EJECTED/NOT APP	LICABLE		NOT TRAPPED					
		Medical Transport		EMS Agency Identifier		EMS Run #					
		NOT TRANSPORTED									

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

		Hospital				Date of Death		Time of Death			
		Distracted By	Distracted B	By Source LICABL	E (NOT DISTRAC	CTED)					
		Distracted By Action NOT DISTRACTED	)								
		Non Motorist	Striking Uni	t #	Location						
		Prior Action			I						
		Action									
	JAL										
LNO	INDIVIDUAL										
	INDI										
		Action Other							To/From School		
	L	Orug & Alcohol	Suspected .	Alcohol U	se	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				
05	002	Drug Type									
		Individual Condition									
		APPEARED NORM	<b>IAL</b>								
	i	Individual									
	_	PASSENGER JOSE QUITIAQUE	Z MELO			Citations Issued  0	Sex MALE				
_	DIVIDUAL	(414) 373-8964				Date of Birth	Race				
LNO		Address 3625 S WHITNALL	. AVE			Driver License Number					
	Z	MILWAUKEE, WI 5		i		STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sat	ety Equipment	On Duty Cr	ash		Safety Equipment					
		Row 01 - FRONT ROW		Seat Po		SHOULDER & LAP	BELT				
		Helmet Use				Helmet Compliance					
		Eye Protection				Tint Compliance					
05	003	Injury	Injury Seve	rity	OR INJURY	Airbag NON DEPLOYED					
		Ejected	Ej	ection Pa	th	<u> </u>		Trapped/Extricated			
		NOT EJECTED  Medical Transport	Į N	OI EJE(	CTED/NOT APPL	EMS Agency Identifier		NOT TRAPPED  EMS Run #			
		EMS GROUND Hospital				6000555  Date of Death		Time of Death			
		SAUK PRAIRIE HO	OSP								

Crash Date 07/06/2025
Crash Time 04:02 PM

### WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Distracted By Distracted	By Source								
		Distracted By Action									
	l	Non Motorist Striking Ur	nit# Location								
		Prior Action									
		Action									
	Ļ										
⊨	INDIVIDUAL										
L	M										
	N										
		Action Other					To/From School				
		Suspected	Alcohol Use	Suspected Drug Use							
	L	Drug & Alcohol NO	T	NO		T					
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Typ	e		Alcohol Test Results					
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results	S					
02	33	Drug Type									
0	003										
		Individual Condition									
		APPEARED NORMAL									
	i	ndividual									
		PASSENGER LILIA PUENTES VERGEL		Citations Issued  0	Sex FEMALE						
	UAL	(414) 248-8636		Date of Birth	Race	<u> </u>					
LNO	INDIVIDUAL	Address		Driver License Number							
) >	ND	3625 S WHITNALL AVE MILWAUKEE, WI 53207, US	9	STATE: WISCONSIN COUNTRY: UNITED STATES							
	_	militacitel, Wi 30207 , Ot		STATE. WISCONSIN COUNTRY. UNITED STATES							
	Sat	On Duty C	rash	Safety Equipment							
	Ju.	Row	Seat Position	SHOULDER & LAP BELT							
		02 - SECOND ROW	09 - RIGHT								
		Helmet Use		Helmet Compliance							
		Eye Protection		Tint Compliance							
05	004	Injury Seve	· · · · · ·	Airbag							
٦	ŏ		TED MINOR INJURY jection Path	NON DEPLOYED		Trapped/Extricated					
		NOT EJECTED N	OT EJECTED/NOT APP			NOT TRAPPED					
		Medical Transport  EMS GROUND		EMS Agency Identified 6000555	r	EMS Run #					
		Hospital		Date of Death		Time of Death					
		SAUK PRAIRIE HOSP  Distracted	By Source								
		Distracted By	_,								

Crash Date 07/06/2025
Crash Time 04:02 PM

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

		Distracted By Action									
			Striking U	Jnit #	Location						
		Non Motorist			255411511						
		Prior Action									
		Action									
	INDIVIDUAL										
LNO	ום										
5	DIV										
	Z										
		Action Other							To/From School		
			Suspecte	d Alcohol U	se	se Suspected Drug Use					
	L	_	ug & Alcohol No			NO		T			
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type			Alcohol Test Results			
		Drug Test Given	g Test Given ST NOT GIVEN				Drug Test Results	<u> </u>			
	4	Drug Type									
02	004	Drug Type									
		Individual Condition									
		APPEARED NORM	<b>Λ</b> ΔΙ								
		AIT EARLE HORN									
	ļ	ndividual					1				
		PASSENGER MAGALIS VERGEL				Citations Issued  0	Sex FEMALE				
	UAI	(414) 295-1058	(414) 295-1058			Date of Birth	Race				
LNO	MD	Address				Driver License Numbe	er				
$\supset$	INDIVIDUAL	3625 S WHITNALL MILWAUKEE, WI 5		10		STATE: WISCONSIN COUNTRY: UNITED STATES					
	=	WILVVAUREE, WI 5	532U <i>1</i> , C	J3		S.M.E. MOSSIGN SSSMMM SMILE STATES					
	ا		On Duty	Crash		Safety Equipment					
	Sat	ety Equipment									
		Row  02 - SECOND ROV	v	Seat Po <b>07 - LE</b>							
		Helmet Use		<u> </u>		Helmet Compliance					
		Eye Protection				Tint Compliance					
		_				·					
02	900	Injury	Injury Se	verity PARENT II	NJURY	Airbag  NON DEPLOYED					
		Ejected	1107111	Ejection Pa	th			Trapped/Extricated			
	NOT EJECTED NOT EJECTED/NOT AF Medical Transport				CTED/NOT APPL			NOT TRAPPED EMS Run #			
		NOT TRANSPORT	ED			EMS Agency Identified		EWS Rull#			
		Hospital				Date of Death		Time of Death			
			Distracte	d By Source	)						
		Distracted By									
		Distracted By Action									

Crash Date 07/06/2025
Crash Time 04:02 PM

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Crash Time 04:02 PM

		Non Motorist	Striking Unit #	Location				
		Prior Action						
İ		Action						
	AL							
LIND	INDIVIDUAL							
5	DIV							
	Z							
								<del>,</del>
		Action Other						To/From School
		Drug & Alcohol	Suspected Alcohol U	Jse	Suspected Drug Use <b>NO</b>			
	_		140					
		Alcohol Test Given TEST NOT GIVEN	l	Alcohol Test Type			Alcohol Test Results	
		Drug Test Given		Drug Test Type		Drug Test Results		
		TEŠT NOT GIVEN						
05	005	Drug Type						
	0							
		Individual Condition						
		APPEARED NORM	MAL					