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25-07231

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| 07/12/2025 Date Notified 07/12/2025 On Emergency Government Property | Crash Time 06:40 AM Time Notified 06:40 AM and Run Lane Clos Active School Zone Crash Type DT4000 (STANDARD CRASH | School Bus Rela | ork Zone ted | Time Arrived 06:51 AM Total Injured 00 Trailer or Tags Amended Re | Total Killec 00 Towed | Reporting Threshold Secondary Crash |
|--|--|-----------------------------|-----------------|---|---|--|
| Government Property | 06:40 AM and Run Crash Type | 01 School Bus Rela NO | | 00 Trailer or Tags Amended | 00 Towed | Reporting Threshold Secondary Crash |
| Government Property | Crash Type | School Bus Rela | | Tags | | Secondary Crash |
| Reportable Description | Crash Type | NO | ted | Amended | construction | Crash |
| ✓ Reportable Description | Crash Type DT4000 (STANDARD CRASH | +) | 7 | | construction | Crash |
| | | (or | | Re | construction | Ву |
| Diagram | | 10/ | 7 | Ke | construction | Ву |
| Ave I, a sworn law enforcement | | | | Ad | otos By KROLIKOV ditional Inforr IOTOS | |

VEHICLE WAS DRIVING SOUTH ON CO ROAD H WHEN THE DRIVER BECAME DISTRACTED BY SWATTING AT MOSQUITOS THAT WERE INSIDE THE VEHICLE. DUE TO THIS THE DRIVER OVER CORRECTED WHEN ATTEMPTING TO RETURN TO HER DRIVING LANE. DURING THIS TIME THE VEHICLE LEFT THE ROAD TO IT'S RIGHT AND ENTERED THE DITCH, THEN ONTO A PRIVATE PROPERTY LAWN WHILE ROTATING TO IT'S RIGHT. WHILE THE VEHICLE DRIFTED THROUGH THE PRIVATE PROPERTY IT CAUSED RUTS. THE CAR'S LEFT FRONT FENDER ALSO STRUCK A PINE TREE ON THE PROPERTY, KNOCKING IT DOWN. THE VEHICLE CONTINUED ONTO THEN OVER DEWEY AVE WHERE IT CAME TO REST. 25-07231

6

UNIT

5

UNIT

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| _ | | | | | | | | | (000) 000-4000 | |
|---|-------------------------------------|----------------------|------------------------|--|---|----------------------------|-------------------------------------|-------------------|---------------------------|--|
| _ | ation 📃 | | | | | | | | | |
| - | CTHH SB FT N | | | Latitude 43.562769322 | | | Long | itude 72639038 | | |
| OF N DEWEY AVE | | | | | | | | | | |
| IN THE TOWN OF WINFIELD | | | | | | X Coordinate 259922.546875 | | | ordinate 7606.5 | |
| IN S | AUK COUNTY | | | Structure | | | 4021 | | | |
| | | | | | NO STRUCTURE | | | | | |
| Cra | sh Scene 📃 | | | | | | | | | |
| First Harmful Event | | | | | First Harmful Event Location | | | | | |
| DIT | СН | | | | ON ROADWAY | | | | | |
| Man | ner of Collision | | Light Condition | | | | | | | |
| | | HICLE IN TRANSPORT | | | DAWN | | | | | |
| Road | d Surface Condition(s) | | | | Roadway Factor(s) | | | | | |
| DR۱ | (| | | | | | | | | |
| Envi | ronment Factor(s) | | | | | | | | | |
| NO | NE | | | | NONE | | | | | |
| Wea | ther Condition(s) | | | | | | | | | |
| CLE | AR | | | | | | | | | |
| Anim | nal Type | | | | Relation To Trafficway | | | | | |
| Croo | h Classification - Location | | | | TRAFFICWAY - ON ROAD | | | | | |
| | BLIC PROPERTY | | | | Crash Classification - Jurisdiction NO SPECIAL JURISDICTION | | | | | |
| | al Land | | | | Access Co | | Special Study | | | |
| | | | NO CONTROL | | | | | | | |
| Within Interchange Area Junction Location | | | | | rsection Type T AN INTERSECTION | | | | | |
| NO | | NON-JUNCTION | | NUTAN | INTERSE | CTION | | | | |
| | t Summary Status | | Vehicle One | erating As C | lassification | | Unit Type | | | |
| - | RANSIT | | D CLASS | Vehicle Operating As Classification | | | AUTOMOBILE | | | |
| | cle Type | 5 02.00 | | | | Operating As Endorsements | | | | |
| PAS | SENGER CAR | | | | | | | | | |
| | Occs | Train/Bus # Recorded | | Total # Citations Issued | | | ailers | 51 | | |
| 1 | rance? | Direction Of Travel | 0 | | 0 Speed Lim | | 0 mit Total Lanes | | 2005 | |
| YES | | SOUTHBOUND | | | | | 55 2 | | anes | |
| _ | , Harmful Event: Collision | | | Special Function 55 | | | Emergency Motor Vehicle Use | | | |
| DIT | | | NO SPEC | NO SPECIAL FUNCTION | | | NOT APPLICABLE | | | |
| Traff | ic Way | | Traffic Cont | Traffic Control | | | Traffic Control Inoperative/Missing | | | |
| | D-WAY, NOT DIVIDED | | | NO CONTROL | | | NO | | | |
| | | 0 | | Road Curvature | | | | | | |
| | CKTOP (BITUMINOU k Bus or HazMat | 5) | STRAIGH | STRAIGHT | | | LEVEL | | | |
| NO | K Dus of Haziviat | | | | | | | | | |
| • | Vehicle | | | | | | | | | |
| | | | | 71 | | St | | | | |
| | BAG2653 | AUT | | | WI | UNITED STATES | | | | |
| ~ | Vehicle Identification Nu | Make | | | Year | | | | | |
| 0 | 1G4HP52K84416443 | | BUIC 2004 | | | | | | | |
| | Color TAN - TAN | | Body Style 4D - 4DR | | B | | | Bus Use | | |
| щ | Initial Contact Point | | Vehicle Da | | | | | | | |
| C | 14 - UNDERCARRIA | GE | | Ū | | | | _ | 7 8 9 10 11 | |
| VEHICL | Extent Of Damage | | | | | | 10 - LEFT SIE RRIAGE | E | 6 | |
| FUNCTIONAL DAMAGE | | | | 12 - FRONT, 14 - UNDERCARRIAGE 5 4 3 2 1 | | | | | 54321 | |

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| | | Towed Due To Damage | | Vel | nicle Removed By | | | | | |
|------|-----------|--|----------------------------------|-----------------------|---|------------------------|--------------------|--|--|--|
| | | NOT TOWED | | | | | | | | |
| | | What Driver Was Doing | | Veł | nicle Factors | | | | | |
| | | GOING STRAIGHT | | | T APPLICABLE | | | | | |
| | | Driver Prior Action Other | | | | | | | | |
| | | Driver Actions | | | | | | | | |
| | ш | OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER, OVER-CORRECTING/OVER-STEERING | | | | | | | | |
| F | СL | | | | | | | | | |
| UNIT | VEHICLE | | | | | | | | | |
| | K | | | | | | | | | |
| | | 0 N | | | | | | | | |
| | | Owner Name AVA SAEMISCH | | | Owner Address E6883 STATE ROAD 154 | | | | | |
| 2 | 01 | (608) 479-3321 | | | REEDSBURG, WI | | | | | |
| | | | | | | | | | | |
| | | Sequence Of Events | | | | | | | | |
| | 01 | Event DITCH | | | | | | | | |
| | 02 | Event | | | | | | | | |
| | 0 | TREE | | | | | | | | |
| | 03 | Event | | | | | | | | |
| | 04 | Event | | | | | | | | |
| | | Policy Holder | | | | | | | | |
| UNIT | | Insurance Company | | | NDIVIDUAL | | | | | |
| 5 | | PROGRESSIVE-CLASSIC-INS-CO | | | AVA SAEMISCH | | | | | |
| | l | ndividual | | | | | | | | |
| | | DRIVER | | Citations Issued Sex | | | | | | |
| | _ | AVA SAEMISCH (608) 479-3321 | | | 0 FEMALE | | | | | |
| | NDIVIDUAL | (608) 479-3321 | | ſ | Date of Birth | of Birth Race WHITE | | | | |
| UNIT | | Address | | Driver License Number | | | | | | |
| 5 | D | E6883 STATE ROAD 154 REEDSBURG, WI 53959 ,US | | | STATE: WISCONSIN COUNTRY: UNITED STATES | | | | | |
| | 4 | | | | | | | | | |
| | | | | | | | | | | |
| | Saf | On Duty Crash fety Equipment | | Safety Equipment | | | | | | |
| | | Row | Seat Position | SHOULDER & LAP BELT | | | | | | |
| | | 01 - FRONT ROW | 07 - LEFT | | | | | | | |
| | | Helmet Use | | Helmet Compliance | | | | | | |
| | | Eye Protection | | Tint Compliance | | | | | | |
| | | | | | | | | | | |
| 2 | 001 | Injury Sevential Injury | ARENT INJURY | | Airbag NON DEPLOYED | | | | | |
| | 1 | Ejected E | Ejection Path | | I | | Trapped/Extricated | | | |
| | | NOT EJECTED NOT EJECTED/NOT AF | | | | | NOT TRAPPED | | | |
| | | Medical Transport NOT TRANSPORTED | | E | EMS Agency Identifier | | EMS Run # | | | |
| | | Hospital | | ſ | Date of Death | | Time of Death | | | |
| | | | | | | | | | | |
| | | Distracted By NOT APP | By Source PLICABLE (NOT DISTR | RACT | ED) | | | | | |
| | | Distracted By Action | | | | | | | | |
| | | NOT DISTRACTED | | | | | | | | |

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

| | | Non Motor | Striking Unit # | Location | | | | |
|------------------|----------------|---------------------------------|-----------------------|------------------|---|---------|------------------|-------------------|
| | | Prior Action | | · | | | | |
| UNIT | INDIVIDUAL | Action | | | | | | |
| | | Action Other | | | | | | To/From School |
| a. | 1 | Drug & Alcol | | | Suspected Drug Use | | | |
| | | Alcohol Test Give | | Alcohol Test Typ | | | | |
| | | Drug Test Given TEST NOT GIV | EN | Drug Test Type | | 3 | | |
| 2 | 001 | Drug Type | | • | | | | |
| | | Individual Condition | | | | | | |
| | | perty Owne | r | | | | | |
| PROP OWNER 01 | (608) 524-6618 | | | | Address E6794 N DEWEY AVE REEDSBURG, WI 539 | 59 , US | | |
| | Fixe | ed Objects S | | | | | | |
| | 01 | Striking Unit 01 | Struck Object TREE | | | | Structure Number | Damage Tag Number |