WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash [Document #	Agency C 25-0791	Crash Number 0		Investigating Officer/Deputy DEPUTY A. WILCOX			
LULWOULD	Crash Date 07/29/2025	Crash Time 12:05 PM		Date Arriv 07/29/20		Time Arrived	I			
	Date Notified 07/29/2025	Time Notified 12:10 PM		Total Uni	ts	Total Injured	Total Injured Total Killed 00			
•	On Emergency Hi	t and Run	Lane Closu		Work Zone	Trailer	or Towed	Reporting Threshold		
	Government Property		hool Zone	School B NO	us Related	Tags				
	Reportable	Crash Type DT4000 (STA	NDARD CRASH)		Amend	led	Secondary Crash		
	Description Diagram						Reconstructio	n By		
			CTH A			\$		·		
					Not to	scale	Photos By			
			10 10							
							Additional Info	ormation		
			(7							
			00							
			02							
			70							
			5							
	I, a sworn law enforceme	ent officer, agre	ee that I have no	ot added	any CJIS data in tl	his report.				
	ON 07/29/2025, I WAS DISPATCHE UNIT 1 SLIGHTLY SIDE SWIPED U OUT. THERE WAS A SMALL SCRA	NIT 2 CAUSING LI	TTLE TO NO DAMA	AGE. I DID N	NOT OBSERVE ANY D	AMAGES TO UNIT	2 UNTIL UNIT 2	2 OPERATOR POINTED IT		
	VEHICLE, BUT WAS UNSURE WH. STOPPED, AND NOT KEPT GOING NEW DAMAGE FROM THE POSSI	AT VEHICLE SHE I B. UNIT 1 OPERAT	PASS. UNIT 1 OPEF OR STATED UNIT 1	RATOR STA WAS OLD	TED SHE DID NOT SI AND HAD PRIOR DAM	DE SWIPE ANY VE MAGE TO IT AND S	EHICLE AND IF	SHE DID SHE WOULD HAVE NOW IF THERE WERE ANY		
	OPERATOR PASSED HER AND AS									

UNIT 1 UNTIL LAW ENFORCEMENT WAS CONTACTED IN THE CITY OF WISCONSIN DELLS. UNIT 1 OPERATOR WAS ISSUED AND EXPLAINED A CITATION FOR

UNSAFE CUTTING WHEN PASSING. UNIT 1 OPERATOR HAD NO QUESTIONS.

WISCONSIN MOTOR VEHICLE CRASH REPORT

ı	Loc	ation								
ĺ		CTHA NB				Latitude			Longitud	de
	0.32	2 MI S				43.54206	34669		-89.738	3570343
		SHADY LANE RD				X Coordin	ate		Y Coord	dinate
		THE TOWN OF FAIRFII	ELD			278751.4	16875		48246	57
		ACK COOK! I				Structure Type NO STRUCTURE				
	Cra	sh Scene				l.				
,		Harmful Event				Le:				
	FIFST	Harmiui Event			ON ROA	nful Event Lo	ocation			
	Man	ner of Collision				Light Cond				
	07 -	SIDESWIPE/SAME D	IRECTION			DAYLIG				
	Road	d Surface Condition(s)				Roadway	Factor(s)			
	DRY	Y								
	Envi	ronment Factor(s)				1				
	NOI	NE				NONE				
	Wea	ather Condition(s)								
	CLE	EAR								
	Anin	nal Type				Relation T	o Trafficway	/		
						TRAFFIC	WAY - OI	N ROAD		
		sh Classification - Location BLIC PROPERTY					ssification -			
		al Land			NO SPECIAL JURISDICTION Access Control Specia			Special Study		
					_	NO CONTROL				
	With NO	in Interchange Area	Junction Location NON-JUNCTION		Intersection NOT AN		CTION			
					NOI AN	INIERSE	CHON			
	Uni	t Summary			NOT AN	INTERSE	CHON			
Į		t Summary Status	l	Vehicle Ope	erating As C			Unit Type		
	Unit			Vehicle Ope	erating As C			Unit Type AUTOMOI	BILE	
	Unit IN T Vehi	Status FRANSIT icle Type			erating As C					ments
	Unit IN T Vehi PAS	Status FRANSIT icle Type SSENGER CAR		D CLASS	erating As C	lassification		AUTOMOI Operating A	s Endorse	
01	Unit IN T Vehi PAS	Status FRANSIT icle Type	Train/Bus # Recorded	D CLASS	erating As C	lassification		AUTOMOI Operating A	s Endorse	ments zMat Types
	Unit IN T Vehi PAS Tota 1	Status FRANSIT icle Type SSENGER CAR	Train/Bus # Recorded Direction Of Travel	D CLASS Total # Cita 1	erating As C	lassification	Total Trail	AUTOMOI Operating A ers	s Endorse Total Haz	Mat Types
0.1	Unit IN T Vehi PAS Tota 1 Insur YES	Status TRANSIT icle Type SSENGER CAR Il Occs rance?	Direction Of Travel NORTHBOUND	Total # Cita 1	erating As C	lassification	Total Trail	AUTOMOI Operating A ers	s Endorse Total Haz 0 Total Lan 2	Mat Types
0.1	Unit IN T Vehi PAS Tota 1 Insui YES	Status TRANSIT Icle Type SSENGER CAR II Occs rance? S t Harmful Event: Collision	Direction Of Travel NORTHBOUND With	Total # Cita 1 Pre Special Fun	erating As C utions Issued CrashTire Mark nction	lassification	Total Trail 0 Speed Lin	AUTOMOI Operating A ers nit Emergency	Total Haz 0 Total Lan 2 Motor Veh	es icle Use
0.1	Unit IN T Vehi PAS Tota 1 Insui YES Mosi	Status TRANSIT Icle Type SSENGER CAR II Occs rance? St Harmful Event: Collision of the	Direction Of Travel NORTHBOUND With	Total # Cita 1 Pre Special Fun	erating As C utions Issued CrashTire Mark nction CIAL FUNC	lassification	Total Trail 0 Speed Lin	AUTOMOI Operating A ers iit Emergency NOT APPI	Total Haz Total Lan Total Lan Motor Veh	es icle Use
0.1	Unit IN T Vehi PAS Tota 1 Insui YES Most MO Traff	Status TRANSIT icle Type SSENGER CAR Il Occs rance? St Harmful Event: Collision of the	Direction Of Travel NORTHBOUND With ORT	Total # Cita 1 Pre Special Fun NO SPEC Traffic Cont	erating As C tions Issued CrashTire Mark nction CIAL FUNC	lassification	Total Trail 0 Speed Lin	AUTOMOI Operating A ers iit Emergency NOT APPI Traffic Cont	Total Haz Total Lan Total Lan Motor Veh	es icle Use
UI	Unit IN T Vehi PAS Tota 1 Insur YES Most MO Traff	Status TRANSIT Icle Type SSENGER CAR II Occs rance? St Harmful Event: Collision of the	Direction Of Travel NORTHBOUND With ORT	Total # Cita 1 Pre Special Fun	erating As C trions Issued CrashTire Mark CIAL FUNC trol TROL	lassification	Total Trail 0 Speed Lin	AUTOMOI Operating A ers iit Emergency NOT APPI	Total Haz 0 Total Lan 2 Motor Veh LICABLE rol Inopera	es icle Use
UI	Unit IN T Vehi PAS Tota 1 Insul YES Most MO Traff TWO Surfa	Status FRANSIT ICIDE Type SSENGER CAR II Occs rance? St Harmful Event: Collision TOR VEH IN TRANSPORT ICIDED TORY, NOT DIVIDED	Direction Of Travel NORTHBOUND With ORT	Total # Cita 1 Pre Special Fun NO SPEC Traffic Cont	erating As C crashTire Mark notion CIAL FUNC trol FROL ature	lassification	Total Trail 0 Speed Lin	AUTOMOI Operating A ers iit Emergency NOT APPI Traffic Conti	Total Haz 0 Total Lan 2 Motor Veh LICABLE rol Inopera	es icle Use
UI	Unit IN T Vehi PAS Tota 1 Insur YES Most MO Traff TW0 Surfa BLA	Status FRANSIT icle Type SSENGER CAR Il Occs rance? S It Harmful Event: Collision TOR VEH IN TRANSP fic Way O-WAY, NOT DIVIDED ace Type	Direction Of Travel NORTHBOUND With ORT	Total # Cita 1 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva	erating As C crashTire Mark notion CIAL FUNC trol FROL ature	lassification	Total Trail 0 Speed Lin	AUTOMOI Operating A ers Emergency NOT APPI Traffic Cont NO Road Grade	Total Haz 0 Total Lan 2 Motor Veh LICABLE rol Inopera	es icle Use
0.1	Unit IN T Vehi PAS Tota 1 Insur YES MOST Traff TWO Surfa BLA	Status TRANSIT Icide Type SSENGER CAR II Occs rance? St Harmful Event: Collision TOR VEH IN TRANSPORT ICIDE Way D-WAY, NOT DIVIDED ACKTOP (BITUMINOU Ek Bus or HazMat	Direction Of Travel NORTHBOUND With ORT	Total # Cita 1 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva	erating As C crashTire Mark notion CIAL FUNC trol FROL ature	lassification	Total Trail 0 Speed Lin	AUTOMOI Operating A ers Emergency NOT APPI Traffic Cont NO Road Grade	Total Haz 0 Total Lan 2 Motor Veh LICABLE rol Inopera	es icle Use
0.1	Unit IN T Vehi PAS Tota 1 Insur YES MOST Traff TWO Surfa BLA	Status TRANSIT Icle Type SSENGER CAR II Occs rance? S It Harmful Event: Collision of the	Direction Of Travel NORTHBOUND With ORT	Total # Cita 1 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH	crashTire Mark nction CIAL FUNC	lassification	Total Trail 0 Speed Lin 55	AUTOMOI Operating A ers Emergency NOT APPI Traffic Cont NO Road Grade LEVEL	Total Haz 0 Total Lan 2 Motor Veh LICABLE rol Inopera	es icle Use
0.1	Unit IN T Vehi PAS Tota 1 Insur YES MOST Traff TWO Surfa BLA	Status TRANSIT Icle Type SSENGER CAR II Occs TART CONTROL C	Direction Of Travel NORTHBOUND With ORT	Total # Cita 1 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH	crashTire Mark nction CIAL FUNC	lassification	Total Trail 0 Speed Lin 55	AUTOMOI Operating A ers Emergency NOT APPI Traffic Cont NO Road Grade LEVEL Country of Is	Total Haz 0 Total Lan 2 Motor Veh LICABLE rol Inopera	es icle Use
0.1	Unit IN T Vehi PAS Tota 1 Insur YES MOST Traff TWO Surfa BLA	Status TRANSIT Icle Type SSENGER CAR II Occs TARANSPORT TOR VEH IN TRANSPORT TOR VAY, NOT DIVIDED ACKTOP (BITUMINOU Ick Bus or HazMat Vehicle License Plate Number AWW9915	Direction Of Travel NORTHBOUND With ORT	Total # Cita 1 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH	crashTire Mark nction CIAL FUNC	lassification	Total Trail 0 Speed Lin 55	AUTOMOI Operating A ers iit Emergency NOT APPI Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST	Total Haz 0 Total Lan 2 Motor Veh LICABLE rol Inopera	es icle Use
UNIT 01	Unit IN T Vehi PAS Tota 1 Insur YES MOST Traff TWO Surfa BLA	Status TRANSIT Icle Type SSENGER CAR II Occs TART CONTROL C	Direction Of Travel NORTHBOUND With ORT S)	Total # Cita 1 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH	crashTire Mark nction CIAL FUNC	lassification	Total Trail 0 Speed Lin 55	AUTOMOI Operating A ers Emergency NOT APPI Traffic Cont NO Road Grade LEVEL Country of Is	Total Haz 0 Total Lan 2 Motor Veh LICABLE rol Inopera	es icle Use
	Unit IN T Vehi PAS Tota 1 Insur YES MOO Traff TWO Surfa BLA	Status TRANSIT icle Type SSENGER CAR Il Occs rance? St Harmful Event: Collision TOR VEH IN TRANSP fic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOU ick Bus or HazMat Vehicle License Plate Number AWW9915 Vehicle Identification Nui	Direction Of Travel NORTHBOUND With ORT S)	Total # Cita 1 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT Make	erating As C crashTire Mark notion CIAL FUNC trol FROL ature IT	lassification	Total Trail 0 Speed Lin 55 St WI Year	AUTOMOI Operating A ers Emergency NOT APPI Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST	Total Haz 0 Total Lan 2 Motor Veh LICABLE rol Inopera	es icle Use
UNIT 01	Unit IN T Vehi PAS Tota 1 Insur YES MOO Traff TWO Surfa BLA Truc NO	Status TRANSIT ICIDE Type SSENGER CAR II OCCS TANCE? STAND TO	Direction Of Travel NORTHBOUND With ORT S)	Total # Cita 1 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT Make BUIC Body Style SD - SED	erating As C crashTire Mark notion CIAL FUNC trol FROL ature	lassification	Total Trail 0 Speed Lin 55 St WI Year	AUTOMOI Operating A ers Emergency NOT APPI Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST Model LESABRE	Total Haz 0 Total Lan 2 Motor Veh LICABLE rol Inopera	es icle Use
01 UNII 01	Unit IN T Vehi PAS Tota 1 Insur YES MOS MO Traff TWO Surfa BLA Truc NO	Status TRANSIT Icide Type SSENGER CAR Il Occs Tance? Status TOR VEH IN TRANSPORT ICIDE ACKTOP (BITUMINOU of Bus or HazMat Vehicle License Plate Number AWW9915 Vehicle Identification Num 1G4HR54K33U13693 Color TAN - TAN Initial Contact Point	Direction Of Travel NORTHBOUND With ORT S)	Total # Cita 1 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT Make BUIC Body Style	erating As C crashTire Mark notion CIAL FUNC trol FROL ature	lassification	Total Trail 0 Speed Lin 55 St WI Year	AUTOMOI Operating A ers Emergency NOT APPI Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST Model LESABRE	Total Haz 0 Total Lan 2 Motor Veh LICABLE rol Inopera	es icle Use
01	Unit IN T Vehi PAS Tota 1 Insur YES MOO Traff TWO Surfa BLA Truc NO	Status TRANSIT ICIDE Type SSENGER CAR II OCCS TANCE? STAND TO	Direction Of Travel NORTHBOUND With ORT S)	Total # Cita 1 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT Make BUIC Body Style SD - SED Vehicle Da	erating As C crashTire Mark notion CIAL FUNC trol FROL ature	lassification	Total Trail 0 Speed Lin 55 St WI Year	AUTOMOI Operating A ers Emergency NOT APPI Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST Model LESABRE	Total Haz 0 Total Lan 2 Motor Veh LICABLE rol Inopera	es icle Use tive/Missing

WISCONSIN MOTOR VEHICLE CRASH REPORT

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		Vehicle Factors			
		OVERTAKE LEFT					
		Driver Prior Action Other		NOT APPLICABLE			
		Driver Actions					
	ш	NO CONTRIBUTING ACT	ION				
╘	VEHICLE						
L	Ĭ						
_	VE						
		Owner Name		Owner Address			
7	01	DION HENNESSY		W5407 HARVEY POYNETTE, WI 5			
0	0				, 55		
		0.5					
		Sequence Of Events Event					
	01	MOTOR VEH IN TRANSP	ORT				
	02	Event					
		Event					
	03						
	04	Event					
_		Policy Holder					
LNO	Ī	Insurance Company		INDIVIDUAL			
\supset		HARTFORD-FIRE-INS-CO		GABRIELLE DEMO	SS		
		ndividual					
	Ī	DRIVER		Citations Issued	Sex		
	_	GABRIELLE DEMOSS		0	FEMALE		
	Υ	(608) 402-3062		Date of Birth	Race		
╘	INDIVIDUAL				WHITE		
LNO	2	Address 1105 SILVER DR # 8		Driver License Numbe	r		
	Z	BARABOO, WI 53913 , U	S	STATE: WISCONSI	N COUNTRY: UN	ITED STATES	
	ı	On Duty	r Crash	Safety Equipment			
	Saf	ety Equipment					
		Row	Seat Position	SHOULDER & LAP	BELT		
		01 - FRONT ROW	07 - LEFT				
		Helmet Use		Helmet Compliance			
		· · ·					
		Eye Protection		Tint Compliance			
5	001	Injury S	everity	Airbag			
0	8		PARENT INJURY	NON DEPLOYED			
		Ejected	Ejection Path			Trapped/Extricated	
		NOT EJECTED	NOT EJECTED/NOT APP			NOT TRAPPED	
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #	
		Hospital		Date of Death		Time of Death	
				Date of Death		o o boati	
		Distracted By NOT A	ed By Source PPLICABLE (NOT DISTRA	ACTED)			
		Distracted By Action	,	<u> </u>			
		NOT DISTRACTED					

Crash Date 07/29/2025
Crash Time 12:05 PM

3 of 10

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Non Motorist	Strik	ing Unit#	Location							
		Prior Action										
		Action										
	INDIVIDUAL											
	ם											
LIND	Σ											
	N											
		Action Other										To/From School
			Susr	ected Alcoh	nol I Ise		Suspected Drug Use					
	L	Drug & Alcohol	NO	70000	101 030		NO					
		Alcohol Test Given			Alcohol Test	Гуре				Alcohol Test	Results	
		TEST NOT GIVEN				-						
		Drug Test Given			Drug Test Typ	ре		Drug T	est Results			
		TEST NOT GIVEN										
5	001	Drug Type										
	0											
		Individual Condition										
		APPEARED NORM	ΙΔΙ									
		AL I EARLE NOR										
	İ	Violations										
	01	UTC Number		ie To?	Statute Number 346.07(2)		Description UNSAFE CUTTING II	N WHE	N PASSIN	ıc		
		BM656552	001		040.07(2)		ONOAI E OUT TINO		IN I ACCII			
		t Summary Status				11/4	shiele Operating As Classi	fication		11.2.T		
		RANSIT					ehicle Operating As Classi CLASS	ncation		Unit Type AUTOMOE	RII E	
		cle Type				15	OLAGO			Operating As		ents
02		ORT) UTILITY VEHI	ICLE									
	Tota	I Occs		Train/Bus #	# Recorded	To	otal # Citations Issued		Total Traile	ers	Total HazN	lat Types
	5					0			0		0	
		rance?		Direction C			Pre CrashTire		Speed Lim	it	Total Lane	s
È	YES	i t Harmful Event: Collisio	\^/:	NORTHB	OUND	L	Mark Decial Function		55	Emergency	2	do Llao
5		t Harmiul Event: Collision TOR VEH IN TRANS					O SPECIAL FUNCTIO	N		NOT APPL		de Ose
		ic Way	J. O.	<u> </u>		Tr	affic Control			Traffic Contr	ol Inoperati	ve/Missing
	TWO	D-WAY, NOT DIVIDI	ED				O CONTROL			NO		
		асе Туре					oad Curvature			Road Grade		
		ACKTOP (BITUMING	OUS)			S	TRAIGHT			LEVEL		
	Truc NO	k Bus or HazMat										
		V - 1-1-2										
		Vehicle				1.5	N . T	- 1	C+	Country of los		
		License Plate Number	r				Plate Type			Country of Iss		
		License Plate Number		per		Α	UT		IL	UNITED ST		
02	02	License Plate Number	Numb			A N			IL	-		
02		License Plate Number EZ92777 Vehicle Identification I	Numb			N N	AUT Make		IL Year 2022	UNITED ST		
02		License Plate Number EZ92777 Vehicle Identification I 5N1BT3BA7NC686 Color SIL - SILVER (ALL	Numb 0259			N N	AUT Make IISS		IL Year 2022	UNITED ST Model		
02		License Plate Number EZ92777 Vehicle Identification I 5N1BT3BA7NC686 Color	Numb 0259 JMIN	UM)		N N	AUT Make IISS lody Style		IL Year 2022	UNITED ST Model		7 8 9 10 11

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/29/2025

Crash Time 12:05 PM

	Щ		V	ehicle Damage			
LIND	VEHICLE	Extent Of Damage MINOR DAMAGE		10 - LEFT SIDE FRON	т		
		Towed Due To Damage		ehicle Removed By			
		NOT TOWED What Driver Was Doing		PERATOR /ehicle Factors			
		GOING STRAIGHT Driver Prior Action Other		NOT APPLICABLE			
LINO	VEHICLE	Driver Actions NO CONTRIBUTING ACT	ON				
02	02	Owner Name JOSE RUBIO (773) 344-1463		Owner Address 14626 S SHORT S POSEN, IL 60469			
	;	Sequence Of Events					
	2	MOTOR VEH IN TRANSP	ORT				
	05	Event					
	03	Event					
	4	Event					
		Policy Holder					
UNIT		Insurance Company		INDIVIDUAL			
\supset		ALLSTATE-INS-CO		JENNIFER RUBIO			
	1	Individual					
		DRIVER		Citations Issued	Sex		
	7	JENNIFER RUBIO (773) 344-1463		0	FEMALE		
	IDINIDUAL	(***,****		Date of Birth	Race		
	₹	Address		Driver License Number			
O	IN IN	14626 S SHORT ST POSEN, IL 60469 , US		STATE: ILLINOIS CO	DUNTRY: UNITE	O STATES	
	Sat	On Duty fety Equipment	Crash	Safety Equipment			
	Jai	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP	BELT		
		Helmet Use	1	Helmet Compliance			
		Eye Protection		Tint Compliance			
05	002	Injury S	everity PARENT INJURY	Airbag NON DEPLOYED			
		Ejected	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

		_						,		
		Distracted By	NOT APPLI	Source CABLE (NOT DISTRAC	CTED)					
		Distracted By Action NOT DISTRACTED)							
	ļ	Non Motorist	Striking Unit #	Location						
		Prior Action								
		Action								
	١٩٢									
L N	INDIVIDUAL									
	INDI									
		Action Other						To/From School		
	L	Orug & Alcohol	Suspected Ale	cohol Use	Suspected Drug Use NO			l		
		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								
	0	Individual Condition								
		APPEARED NORM	//AL							
		Individual								
		PASSENGER			Citations Issued	Sex				
	۱۲	OLIVIA GONZALE (773) 344-1463	z		0	FEMALE				
╘	INDIVIDUAL				Date of Birth Race HISPANIC					
	DIV	Address 14626 S SHORT S	т		Driver License Numb COUNTRY: UNITE					
	Z	POSEN, IL 60469								
	Sat	ety Equipment	On Duty Cras		Safety Equipment					
	Jai	Row Equipment		-RESPONDER Seat Position	SHOULDER & LA	P BELT				
		01 - FRONT ROW Helmet Use	(9 - RIGHT	Helmet Compliance					
		Eye Protection			Tint Compliance					
	8	_	Injury Severity	,	Airbag					
05	003	Injury	NO APPAR	ENT INJURY	NON DEPLOYED		Trapped/Extricated			
		NOT EJECTED		tion Path Γ EJECTED/NOT APPL	LICABLE		NOT TRAPPED			
		Medical Transport			EMS Agency Identifie	er	EMS Run #			
		NOT TRANSPORT Hospital	בט		Date of Death		Time of Death			
			Distracted By	Source						
		Distracted By	Distracted by	554100						

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Distracted By Action									
		Non Motorist	Striking Un	it#	ocation						
		Prior Action		<u> </u>							
		Action									
	٩L										
—	Ú										
LNO	/ID										
\supset	INDIVIDUAL										
	Z										
		Action Other							To/From School		
		Action Other							TO/FIOITI SCHOOL		
			Suspected	Alcohol Use	2	Suspected Drug Use					
	L	Drug & Alcohol	NO			NO					
		Alcohol Test Given			Alcohol Test Type			Alcohol Test Results			
		TEST NOT GIVEN									
		Drug Test Given		1	Orug Test Type		Drug Test Resul	lts			
		TEŠT NOT GIVEN									
02	003	Drug Type									
_	0										
		Individual Condition									
		APPEARED NORM	A. I								
		APPEARED NORW	AL								
	i	Individual									
		PASSENGER				Citations Issued	Sex				
	Ļ	MOSES AGUILAR				0	MALE				
	INDIVIDUAL					Date of Birth	Race				
LNO		Address				Driver License Number	er				
5	D	3 N425 PATRICIA L				A24654065140					
	Z	ELMHURST, IL 601	26 , US			STATE: ILLINOIS COUNTRY: UNITED STATES					
	Sai	foty Equipment	On Duty Cr	rash		Safety Equipment					
	Sai	fety Equipment									
		Row 02 - SECOND ROW	,	Seat Posi 07 - LEF		SHOULDER & LAI	P BELT				
		Helmet Use		U/ - LEF		Helmet Compliance					
		Ticiliet 03c				Treimet compilaries					
		Eye Protection				Tint Compliance					
02	900	Injury	Injury Seve	erity		Airbag					
•	0	Ejected		ARENT IN		NON DEPLOYED		Trapped/Extricated			
		NOT EJECTED			TED/NOT APPL	ICARI F		NOT TRAPPED			
		Medical Transport				EMS Agency Identifie	er	EMS Run #			
		NOT TRANSPORTE	ΕD								
		Hospital				Date of Death		Time of Death			
		Distracted By	Distracted I	By Source							
		Distracted By Action									

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

		_											
		Non Motorist	Striking Ur	nit#	Location								
		Prior Action	Prior Action										
		Action											
	AL												
⊨	INDIVIDUAL												
LNO	≥												
_	Ē												
	=												
		Action Other							To/From School				
			0			I Commente d Down He							
	L	Drug & Alcohol	Suspected NO	i Alconoi U	se	Suspected Drug Us	e						
		Alcohol Test Given			Alcohol Test Type			Alcohol Test Results					
		TEST NOT GIVEN			Davis Tack Ton-								
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Results	3					
	4	Drug Type											
05	004	2.49 .) p s											
		Individual Condition											
		APPEARED NORMAL											
		ndividual											
		PASSENGER Citations Issued Sex											
		OROZCO SANTO	0			0	FEMALE						
	AL					Date of Birth	Race						
⊨	INDIVIDUAL												
	Σ	Address	A\/E			Driver License Num	ber						
	Z	16242 WOLCOTT A MARKHAM, IL 604	AVE 28,US			STATE: ILLINOI	S COUNTRY: UNITE	:D					
		·				STATES							
	_		On Duty C	rash		Safety Equipment							
	Sat	fety Equipment											
		Row		Seat Po		SHOULDER & L	AP BELT						
		02 - SECOND ROV	V	08 - MI	DDLE	Halmat Camplianas							
		Helmet Use				Helmet Compliance	•						
		Eye Protection				Tint Compliance							
		_											
05	900	Iniury	NO APP	erity	I IIIDV	Airbag	_						
	0	Ejected		jection Pa		NON DEPLOYE	, 	Trapped/Extricated					
		NOT EJECTED			 CTED/NOT APPL	ICABLE		NOT TRAPPED					
		Medical Transport	L_			EMS Agency Identi	fier	EMS Run #					
		NOT TRANSPORT	ED										
		Hospital				Date of Death		Time of Death					
		Distracted By	Distracted	By Source	;								
		Distracted By Action											
		, /											
		Non Motorist	Striking Ur	nit#	Location								
		NON WICKUISE											

Crash Date 07/29/2025

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/29/2025

Crash Time 12:05 PM

ı								
		Prior Action						
UNIT	INDIVIDUAL	Action Action Other						To/From School
	L	Suspector Suspec	ed Alcohol (Jse	Suspected Drug Use			
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	9		Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	3	
05	005	Drug Type		•				
		Individual Condition APPEARED NORMAL						
		 ndividual						
		PASSENGER			Citations Issued	Sex		
	Ļ	RANGEL ACOSTA			0	FEMALE		
_) O				Date of Birth	Race		
TINO	INDIVIDUAL	Address 14626 S SHORT ST POSEN, IL 60469 , US			Driver License Number STATE: ILLINOIS COSTATES	OUNTRY: UNITE	ED.	
	Sat	On Duty fety Equipment	Crash		Safety Equipment			
		Row 02 - SECOND ROW	Seat Po 09 - R		SHOULDER & LAP	BELT		
		Helmet Use			Helmet Compliance			
		Eye Protection			Tint Compliance			
05	900	Injury Se	verity PARENT I	NJURY	Airbag NON DEPLOYED			
		Ejected	Ejection Pa	ath			Trapped/Extricated	
		NOT EJECTED Medical Transport	NOT EJE	CTED/NOT APPL	LICABLE EMS Agency Identifier		NOT TRAPPED EMS Run #	
		NOT TRANSPORTED			Livio Agency Identifier		LIVIO I CUIT #	
		Hospital			Date of Death		Time of Death	
		Distracted By	d By Sourc	е	I		I	
		Distracted By Action						
		Non Motorist	Jnit#	Location				
		Prior Action		1				

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/29/2025

Crash Time 12:05 PM

		Action						
	AL							
UNIT	INDIVIDUAL							
5								
	Z							
		A 11 OII						I = /5
		Action Other						To/From School
	L	Orug & Alcohol	Suspected Alcohol Us NO	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		
02	900	Drug Type				•		
		1 1 10 17						
		Individual Condition						
		APPEARED NORM	MAL					