WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| Document Number Override | Primary Crash Document # Crash Time 03:25 PM | | Agency Crash Number 25-08490 | | Investigating Officer/Deputy DEPUTY W. VERTEIN | | |
|---|--|-------------------------------------|------------------------------|--|--|-----------------------------|--|
| Crash Date 08/13/2025 | | | Date Ar 08/13/2 | | Time Arrived 03:33 PM | | |
| Date Notified 08/13/2025 | Time Notified 03:26 PM | | Total Ui | nits | Total Injured 01 | Total Kille | ed |
| On Emergency Hit | and Run | Lane Closu | | Work Zone | | or Towed | Reporting Threshold |
| Government Property | Active Sci | nool Zone | NO NO | Bus Related | Tags | | |
| ✓ Reportable | Crash Type DT4000 (STAI | NDARD CRASH |) | | Amend | led | Secondary Crash |
| Description Diagram | | | | | | Reconstructio | n By |
| Diagram | | | | HIGHVIEW RO | ۸D | reconstructio | <i>D</i> y |
| | CIII | VERT | | HIGHVIEW KO | AD. | | |
| | === | | 9018 | | | Photos By W. VERTEIN | N #9122 |
| 01 01 | | 01 | -[| 01 | | | |
| | | | ليليا | | 01 | Additional Info | ormation |
| | | | | į, | | | |
| GOLF COURS | - —— F ROAD | | | | | | |
| GOLF GOOK | LINOND | | | | | | |
| | | | | _ | | | |
| NOT TO SCALE | | | | | | | |
| \$ 24 | | | | | | | |
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| | | | | | | | |
| I, a sworn law enforcemen | nt officer, agre | e that I have no | t added | any CJIS data in this | report. | | |
| ON THE DESCRIBED DATE, TIME, A UNIT 1 ENTERED THE WESTERNMO | ND LOCATION, U | JNIT 1 WAS TRAVE WHERE IT WENT (| LING SO OVER A C | UTHBOUND. WHILE SOUT ULVERT AND CRASHED I | THBOUND, THE NTO A UTILITY | OPERATOR LO POLE. NO REF | OST CONTROL OF UNIT 1. PORTED INJURIES. |

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Crash Date 08/13/2025

Crash Time 03:25 PM

| L | OC: | alion | | | | | | | | |
|---|--|--|--|---|--|---------------|-------------------------------------|---|--|------------------------------------|
| | | GOLF COURSE RD | | | | Latitude | | | Longitud | de |
| | 74 FT S | | | | | 43.46743804 | | -89.964385722 | | |
| | OF HIGH VIEW RD IN THE TOWN OF WESTFIELD IN SAUK COUNTY | | | | | | X Coordinate 260211.59375 | | Y Coord | |
| | | | | | | | | | 4816994.5 | |
| | | | | | | | Structure Type NO STRUCTURE | | | |
| C | ras | sh Scene | | | | | | | | |
| _ | | Harmful Event | | | | First Harm | ıful Event I | ocation | | |
| | CULVERT | | | | | | DE | Journal | | |
| | | | | | | Light Cond | | | | |
| - 10 | | | | | | DAYLIGI | | | | |
| Т | Road | Surface Condition(s) | | | | Roadway | Factor(s) | | | |
| ı | DRY | • | | | | | | | | |
| ī | Envir | onment Factor(s) | | | | | | | | |
| ŀ | NON | IE | | | | NONE | | | | |
| , | Weat | ther Condition(s) | | | | | | | | |
| | CLE | . , | | | | | | | | |
| - | Anim | al Type | | | Relation T | o Trafficwa | av | | | |
| | | · · | | | | | N ROAD | | | |
| | | h Classification - Location | | | Crash Classification - Jurisdiction NO SPECIAL JURISDICTION | | | | | |
| - | Triba | l Land | | Access Control NO CONTROL | | Special Study | | | | |
| ١ | | | | | Intersection Type | | | | | |
| H | | | | | T-INTER | ERSECTION | | | | |
| | | | | | | | | | | |
| Ū | Init | Summary | | | | | | | | |
| | | Status | | Vehicle Ope | erating As Cl | | | Unit Type | | |
| Ī | Unit S | | | Vehicle Ope | • | | | Unit Type AUTOMOI | BILE | |
| 1 | Unit S I N T I | Status | | | • | | | | | ments |
| | Unit S IN TI Vehic PAS | Status RANSIT cle Type SENGER CAR | | D CLASS | | lassification | | AUTOMOI Operating A | s Endorsei | |
| - - | Unit S IN TI Vehice PAS Total | Status RANSIT cle Type | Train/Bus # Recorded | D CLASS | • | lassification | Total Tra | AUTOMOI Operating A | s Endorsei Total Haz | ments Mat Types |
| | Unit S IN TI Vehic PAS Total | Status RANSIT Cle Type SENGER CAR Occs | | D CLASS Total # Cita | tions Issued | lassification | Total Tra | AUTOMOI Operating A | s Endorsei Total Haz 0 | Mat Types |
| | Unit S IN TI Vehic PAS Total | Status RANSIT Cle Type SENGER CAR Occs ance? | Train/Bus # Recorded Direction Of Travel SOUTHBOUND | D CLASS Total # Cita | | lassification | Total Tra | AUTOMOI Operating A | s Endorsei Total Haz | Mat Types |
| | Unit S IN TI Vehice PAS Total Insura YES | Status RANSIT Cle Type SENGER CAR Occs ance? | Direction Of Travel SOUTHBOUND | Total # Cita 0 Pre Special Fur | tions Issued CrashTire Mark action | lassification | Total Tra 0 Speed Li | AUTOMOI Operating A illers mit Emergency | Total Haz O Total Lan 2 Motor Veh | Mat Types es |
| | Unit S IN TI Vehice PAS Total Insura YES Most | Status RANSIT Cle Type SENGER CAR Occs ance? | Direction Of Travel SOUTHBOUND | Total # Cita 0 Pre Special Fur | tions Issued CrashTire Mark | lassification | Total Tra 0 Speed Li | AUTOMOI Operating A illers | Total Haz O Total Lan 2 Motor Veh | Mat Types es |
| | Unit S IN TI Vehice PAS Total Insura YES Most UTIL | Status RANSIT Cle Type SENGER CAR Occs ance? Harmful Event: Collision W LITY POLE c Way | Direction Of Travel SOUTHBOUND | Total # Cita 0 Pre Special Fur NO SPEC | CrashTire Mark nection | lassification | Total Tra 0 Speed Li | AUTOMOI Operating A illers mit Emergency NOT APPI Traffic Control | Total Haz O Total Lan 2 Motor Veh | Mat Types es icle Use |
| | Unit S IN TI Vehice PAS Total Insura YES Most UTIL Traffic | Status RANSIT Cle Type SENGER CAR Occs Cance? Harmful Event: Collision V LITY POLE C Way D-WAY, NOT DIVIDED | Direction Of Travel SOUTHBOUND | Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont | CrashTire Mark notion EIAL FUNC | lassification | Total Tra 0 Speed Li | AUTOMOI Operating A illers mit Emergency NOT APPI Traffic Conti | Total Haz 0 Total Lan 2 Motor Veh LICABLE ol Inopera | Mat Types es icle Use |
| | Unit S IN TI Vehic PAS Total I Insura YES UTIL Traffi TWO | Status RANSIT Cle Type SENGER CAR Occs ance? Harmful Event: Collision W LITY POLE C Way D-WAY, NOT DIVIDED ace Type | Direction Of Travel SOUTHBOUND With | D CLASS Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva | CrashTire Mark action BIAL FUNC trol PROL ature | lassification | Total Tra 0 Speed Li | AUTOMOI Operating A illers mit Emergency NOT APPI Traffic Conti | Total Haz 0 Total Lan 2 Motor Veh LICABLE ol Inopera | Mat Types es icle Use |
| | Unit S IN TI Vehice PAS Total 1 Insura YES Most UTIL Traffi TWC Surfa | Status RANSIT Cle Type SENGER CAR Occs ance? Harmful Event: Collision V LITY POLE IC Way D-WAY, NOT DIVIDED ICE Type CKTOP (BITUMINOUS) | Direction Of Travel SOUTHBOUND With | Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont | CrashTire Mark action BIAL FUNC trol PROL ature | lassification | Total Tra 0 Speed Li | AUTOMOI Operating A illers mit Emergency NOT APPI Traffic Conti | Total Haz 0 Total Lan 2 Motor Veh LICABLE ol Inopera | Mat Types es icle Use |
| | Unit S IN TI Vehice PAS Total 1 Insura YES Most UTIL Traffi TWC Surfa | Status RANSIT Cle Type SENGER CAR Occs ance? Harmful Event: Collision W LITY POLE C Way D-WAY, NOT DIVIDED ace Type | Direction Of Travel SOUTHBOUND With | D CLASS Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva | CrashTire Mark action BIAL FUNC trol PROL ature | lassification | Total Tra 0 Speed Li | AUTOMOI Operating A illers mit Emergency NOT APPI Traffic Conti | Total Haz 0 Total Lan 2 Motor Veh LICABLE ol Inopera | Mat Types es icle Use |
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| | Unit S IN TI Vehicle PAS Total 1 Innsura YES Most UTIL Traffi TWO Surfa BLA NO | Status RANSIT Cle Type SENGER CAR Occs Clear Care Clear | Direction Of Travel SOUTHBOUND With | Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH | CrashTire Mark notion EIAL FUNC trol TROL ature T | lassification | Total Tra 0 Speed Li 45 | AUTOMOI Operating A illers mit Emergency NOT APPI Traffic Conti NO Road Grade UPHILL Country of Is | Total Haz 0 Total Lan 2 Motor Veh LICABLE Tol Inopera | Mat Types es icle Use |
| | Unit S IN TI Vehicle PAS Total 1 Innsura YES Most UTIL Traffi TWO Surfa BLA NO | Status RANSIT Cle Type SENGER CAR Occs Clear Car Annual Event: Collision Walter Collision W | Direction Of Travel SOUTHBOUND With | Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH | CrashTire Mark notion EIAL FUNC trol TROL ature T | lassification | Total Tra 0 Speed Li 45 | AUTOMOI Operating A illers mit Emergency NOT APPI Traffic Conti NO Road Grade UPHILL Country of Is UNITED ST | Total Haz 0 Total Lan 2 Motor Veh LICABLE Tol Inopera | Mat Types es icle Use |
| | Unit S IN TI Vehic PAS Total 1 Insur: YES Most UTIL Traffi TWO Surfa BLA NO | Status RANSIT Cle Type SENGER CAR OCCS Cance? CHarmful Event: Collision V LITY POLE C Way D-WAY, NOT DIVIDED CACE Type CKTOP (BITUMINOUS C Bus or HazMat Vehicle License Plate Number APM2719 Vehicle Identification Num | Direction Of Travel SOUTHBOUND With | Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT Make | CrashTire Mark notion EIAL FUNC trol TROL ature T | lassification | Total Tra 0 Speed Li 45 St WI Year | AUTOMOI Operating A illers mit Emergency NOT APPI Traffic Conti NO Road Grade UPHILL Country of Is: UNITED ST | Total Haz 0 Total Lan 2 Motor Veh LICABLE Tol Inopera | Mat Types es icle Use |
| 1 | Unit S IN TI Vehice PAS Total I Insura YES Most UTIL Traffi TWO Surfa BLA NO | Status RANSIT Cle Type SENGER CAR Occs ance? Harmful Event: Collision V LITY POLE C Way D-WAY, NOT DIVIDED ACE Type CKTOP (BITUMINOUS C Bus or HazMat Vehicle License Plate Number APM2719 Vehicle Identification Nun 1FADP3K20EL16199 | Direction Of Travel SOUTHBOUND With | Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT Make FORD | CrashTire Mark action EIAL FUNC trol TROL ature T | lassification | Total Tra 0 Speed Li 45 | AUTOMOI Operating A illers mit Emergency NOT APPI Traffic Conti NO Road Grade UPHILL Country of Is UNITED ST Model FOCUS | Total Haz 0 Total Lan 2 Motor Veh LICABLE Tol Inopera | Mat Types es icle Use |
| | Unit S IN TI Vehici PAS Total 1 Insur: WHO IN INSUR: WHO INSUR: WHO INSUR: WHO INSUR: WHO INSUR: WHO INSUR: WH | Status RANSIT Cle Type SENGER CAR Occs ance? Harmful Event: Collision V LITY POLE C Way D-WAY, NOT DIVIDED ACE Type CKTOP (BITUMINOUS C Bus or HazMat Vehicle License Plate Number APM2719 Vehicle Identification Num 1FADP3K20EL16199 Color | Direction Of Travel SOUTHBOUND With S) | Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT Make FORD Body Style | CrashTire Mark Inction EIAL FUNC Trol TROL ature T | TION | Total Tra 0 Speed Li 45 St WI Year | AUTOMOI Operating A illers mit Emergency NOT APPI Traffic Conti NO Road Grade UPHILL Country of Is: UNITED ST | Total Haz 0 Total Lan 2 Motor Veh LICABLE Tol Inopera | Mat Types es icle Use |
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| | Unit S IN TI Vehici PAS Total 1 Insur: WHITE WOST WOST TOTAL Truck NO | Status RANSIT Cle Type SENGER CAR Occs ance? Harmful Event: Collision V LITY POLE C Way D-WAY, NOT DIVIDED ACE Type CKTOP (BITUMINOUS K Bus or HazMat Vehicle License Plate Number APM2719 Vehicle Identification Num 1FADP3K20EL16199 Color SIL - SILVER (ALUMI | Direction Of Travel SOUTHBOUND With S) | Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT Make FORD Body Style HB - HAT Vehicle Da | CrashTire Mark action EIAL FUNC trol TROL ature T | assification | St WI Year 2014 | AUTOMOI Operating A illers mit Emergency NOT APPI Traffic Conti NO Road Grade UPHILL Country of Is UNITED ST Model FOCUS Bus Use | Total Haz 0 Total Lan 2 Motor Veh LICABLE Tol Inopera | Mat Types es icle Use tive/Missing |
| | Unit S IN TI Vehicle V | Status RANSIT Cle Type SENGER CAR Occs ance? Harmful Event: Collision V LITY POLE C Way D-WAY, NOT DIVIDED ACE Type CKTOP (BITUMINOUS K Bus or HazMat Vehicle License Plate Number APM2719 Vehicle Identification Num 1FADP3K20EL16199 Color SIL - SILVER (ALUMI Initial Contact Point | Direction Of Travel SOUTHBOUND With S) | Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT Make FORD Body Style HB - HAT Vehicle Da 01 - RIGI FRONT, | CrashTire Mark Diction EIAL FUNC BroL BroL BroL BroL BroL BroL BroL BroL | TCORNEF | St WI Year 2014 | AUTOMOI Operating A illers mit Emergency NOT APPI Traffic Conti NO Road Grade UPHILL Country of Is UNITED ST Model FOCUS Bus Use | Total Haz 0 Total Lan 2 Motor Veh LICABLE Tol Inopera | Mat Types es icle Use tive/Missing |

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 08/13/2025

Crash Time 03:25 PM

| | | T 15 T 5 | | | 5 | | | | |
|------|---------------------------------|--|-----------------|-----------------|---|-------------|---------------|--|--|
| | | Towed Due To Damage TOWED DUE TO DISABL | ING DAMAGE | | hicle Removed By ACHREINER'S TOWI | NG | | | |
| | | What Driver Was Doing | ING DAWAGE | | hicle Factors | NG | | | |
| | | GOING STRAIGHT | | Ve | TIICIE I ACIOIS | | | | |
| | | Driver Prior Action Other | | NC | OT APPLICABLE | | | | |
| | | Briver i noi Action Guier | | | | | | | |
| | | Driver Actions | | | | | | | |
| | щ | FAILURE TO CONTROL, | RAN OFF ROADWAY | | | | | | |
| ╘ | 占 | | | | | | | | |
| UNIT | VEHICLE | | | | | | | | |
| _ | 7 | | | | | | | | |
| | | | | | | | | | |
| | | Owner Name | | | Owner Address | 242.0 | | | |
| 10 | 2 | ERIK JOHNSON (608) 588-4032 | | | S9704 COUNTY ROPLAIN, WI 53577 , | | | | |
| 0 | 0 | (000) 300-4032 | | | , LPAIN, WI GOOTT , | | | | |
| | | | | | | | | | |
| | , | Sequence Of Events | | | | | | | |
| | 6 | Event RUN OFF ROADWAY RIG | нт | | | | | | |
| | | Event | | | | | | | |
| | 05 | DITCH | | | | | | | |
| | 03 | Event | | | | | | | |
| | 0 | CULVERT | | | | | | | |
| | 9 | Event UTILITY POLE | | | | | | | |
| | | Policy Holder | | | | | | | |
| UNIT | | Insurance Company | | Т | INDIVIDUAL | | | | |
| 5 | | PROGRESSIVE-CLASSIC | :-INS-CO | | ERIK JOHNSON | | | | |
| | | Individual | | | | | | | |
| | | DRIVER | | 1 | Citations Issued | Sex | | | |
| | _ | DELANEY JOHNSON | | | 0 FEMALE | | | | |
| | ¥ | (608) 459-5905 | | Ī | Date of Birth Race | | | | |
| ╘ | NDIVIDUAL | | | | WHITE | | | | |
| UNIT | ≥ | Address | | | Driver License Number | | | | |
| | Ħ | S9704 COUNTY ROAD G PLAIN, WI 53577, US | | ; | STATE: WISCONSIN COUNTRY: UNITED STATES | | | | |
| | | 1 2 411, 111 33377 , 33 | | | | | | | |
| | | On Duty | / Crash | - | Safety Equipment | | | | |
| | Sat | fety Equipment | Olusii | | Salety Equipment | | | | |
| | | Row | Seat Position | | SHOULDER & LAP BELT | | | | |
| | | 01 - FRONT ROW | 07 - LEFT | | | | | | |
| | | Helmet Use | | | Helmet Compliance | | | | |
| | | | | | | | | | |
| | | Eye Protection | | Tint Compliance | | | | | |
| | _ | Injury S | everity | Airbag | | | | | |
| 6 | 90 | Injury SUSPECTED MINOR INJURY | | | DEPLOYED-FRONT | | | | |
| | | Ejected | Ejection Path | | Trapped/Extricated | | | | |
| | NOT EJECTED NOT EJECTED/NOT APP | | PLIC | CABLE | | NOT TRAPPED | | | |
| | | Medical Transport | L | T I | EMS Agency Identifier | | EMS Run # | | |
| | | NOT TRANSPORTED | | | | | | | |
| | | Hospital | | | Date of Death | | Time of Death | | |
| | | 15: | ad Dy Caur | | | | | | |
| | | Distracted By | ed By Source | | | | | | |
| | | Distracted By Action | | | | | | | |
| | | UNKNOWN | | | | | | | |

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 08/13/2025

Crash Time 03:25 PM

| | | Non Motor | Striking Unit # | Location | | | | | |
|-------------------|---|--|------------------------|------------------|---|-------------------|----------------------|--------------------------|--|
| | | Prior Action | | | | | | | |
| | | Action | | | | | | | |
| | JAL | | | | | | | | |
| L N | INDIVIDUAL | | | | | | | | |
| | <u>IND</u> | | | | | | | | |
| | | | | | | | | | |
| | | Action Other | | | | | | To/From School | |
| | 1 | Drug & Alcol | NO Suspected Alcohol | Use | Suspected Drug Use NO | | | | |
| | | Alcohol Test Give | | Alcohol Test Typ | e | | Alcohol Test Results | | |
| | | Drug Test Given TEST NOT GIV | /EN | Drug Test Type | | Drug Test Results | | | |
| 2 | 001 | Drug Type | | | | | | | |
| | | Individual Condition | on | | | | | | |
| | | APPEARED NO | ORMAL | | | | | | |
| ' | Pro | perty Owne | er 💻 | | | | | | |
| PROP 01 | | /ERNMENT VNSHIP OF WES 3) 727-4924 | STFIELD | | Address E5269 SANDHILL RD REEDSBURG, WI 539 | 59 , US | | | |
| | | ed Objects St | truck | | | | | | |
| | 5 | Striking Unit 01 | Struck Object DITCH | | | | Structure Number | Damage Tag Number N/A | |
| | 05 | Striking Unit 01 | Struck Object CULVERT | | | | Structure Number | Damage Tag Number N/A | |
| | | perty Owne | | | | | | | |
| 0 | ALL | SANIZATION/COMI LIANT ENERGY | PANY | | Address 4902 N BILTMORE MADISON, WI 53707 | 1077, US | | | |
| PROP OWNER | | 1011 / 0 | | | | | | | |
| | Fixe | ed Objects Statistics Striking Unit | truck Struck Object | | | | Structure Number | Damage Tag Number | |
| | 03 | 01 | UTILITY POLE | | | | Otractare Number | N/A | |
| | Witness ——————————————————————————————————— | | | | | | | | |
| WITN 01 ESS 01 | Indiv EVA (608 | ridual AN VENITSKY 3) 495-2498 | | | Address 29622 USH 14 LONE ROCK, WI 5355 | 56 , US | | Date of Birth | |
| | Wit | ness ==== | | | | | | | |
| WITN 02 ESS 02 | AND | ridual DREW SHIMNIO 3) 495-0449 | K | | Address E7533 SCHMIDT RD ROCK SPRINGS, WI S | 53961 , US | | Date of Birth | |