WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Override	Primary Crash Docum	ment # Agen	cy Crash Number	Investigating C	fficer/Deputy		
		25-0		DEPUTY A. KING			
Crash Date 08/29/2025	Crash Time 04:56 AM		Date Arrived 08/29/2025		Time Arrived 05:04 AM		
Date Notified	Time Notified	Total		Total Injured	Total Kille	2d	
08/29/2025	04:57 AM	01	5 6	01	00	illed	
On Emergency Hit	it and Run	Lane Closure	Work Zone	Trailer o	r Towed	owed Reporting Threshold	
Government Property	Active School Zone School Bus Related NO			Tags			
▼ Reportable	Crash Type DT4000 (STANDA	ARD CRASH)		Amende	d	Secondary Crash	
Description							
Diagram				F	Reconstruction	п Ву	
2777 375 277	A	NAME AND ADDRESS OF					
10000		665 B B B B	100000				
		Not to scale	BBS.	THE RESIDENCE OF THE PERSON OF	Photos By		
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Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

1 of 4

OPERATOR OF U1 STATED HE WAS HEADING HOME WHEN HE SAW A DEER IN THE ROADWAY AND SWERVED TO AVOID HITTING THE DEER. OPERATOR OF U1 STATED HE WENT TO THE DITCH. OPERATOR OF U1 STATED HE HAD MINOR INJURIES, TO INCLUDE A SMALL LACERATION TO HIS NOSE AND RIGHT KNEE. BARABOO EMS/FIRE RESPONDED. BARABOO EMS ASSESSED THE OPERATOR BUT HE DENIED TRANSPORT TO THE HOSPITAL. CRAIG'S TOWING RESPONDED AND REMOVED THE VEHICLE FROM THE SCENE AND PROVIDED THE OPERATOR A RIDE HOME.

Crash Date **08/29/2025**Crash Time **08/29/2025**

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LO	cation							
	N WATER ST/ STH113	SB		Latitude			Longitud	e
39	93 FT N				31454		-89.715	
OI	F KESSLER RD				X Coordinate		Y Coordi	nato
	I THE TOWN OF GREENFIELD I SAUK COUNTY				280324.96875		481478	
IN								7.0
		Structure Type NO STRUCTURE						
Cr	ash Scene			I				
_	rst Harmful Event			First Harm	ful Event I	ocation		
	TCH					.oodiloi1		
	anner of Collision			ROADSIDE				
		VEHICLE IN TRANSPORT		Light Condition DARK/UNLIT				
		VEHICLE IN TRANSPORT						
Ro	oad Surface Condition(s)			Roadway I	Factor(s)			
DF	RY							
En	nvironment Factor(s)			_				
	` ,	A.V		NONE				
A	NIMAL (S) IN ROADW	AT		NONE				
We	eather Condition(s)							
CI	LEAR							
An	nimal Type			Relation T	Relation To Trafficway TRAFFICWAY - ON ROAD			
DE	EER			TRAFFIC				
Cra	ash Classification - Location	on		Crash Clas	Crash Classification - Jurisdiction			
PU	JBLIC PROPERTY			NO SPE	NO SPECIAL JURISDICTION			
Tri	ibal Land			Access Co	ontrol			Special Study
			NO CON	TROL				
Wi	ithin Interchange Area	Junction Location	Intersect	Intersection Type				
N	0	NON-JUNCTION		AN INTERSECTION				
Ш	nit Summary =							
	nit Status		Vehicle Operating As	Classification	ı	Unit Type		
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Wisconsin Motor Vehicle Crash Form DT4000

is report does not include any CJIS data. 2 of 4

Crash Time 04:56 AM

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Towed Due To Damage TOWED DUE TO DISABL	ING DAMAGE	Vehicle Removed By CRAIGS TOWING				
		What Driver Was Doing		Vehicle Factors				
		GOING STRAIGHT						
		Driver Prior Action Other		NOT APPLICABLE				
TINO	VEHICLE	Driver Actions SWERVED OR AVOIDED	DUE TO WIND, SLIPPER	Y SURFACE, MOTO	R VEHICLE, OBJE	CT, NON-MOTORIST IN ROADWAY, ETC.		
10	70	Owner Name DEZMEN MORSE	:	Owner Address 501 ROOSEVE BARABOO, WI				
	;	Sequence Of Events						
	5	DITCH						
	05	Event						
	03	Event						
	4	Event						
L		Policy Holder						
FIND		Insurance Company		INDIVIDUAL				
-		PROGRESSIVE-CASUAL	TY-INS-CO	DEZMEN MORSE				
	- 1	Individual						
	_	DRIVER DEZMEN MORSE	:	Citations Issued 0	Sex MALE	1		
L	DO			Date of Birth Race BLACK/AFRICAN AMERICAN				
TINO	INDIVIDUAL	Address 501 ROOSEVELT ST BARABOO, WI 53913 , U	s	Driver License Num	ber			
	Sat	On Duty	Crash	Safety Equipment				
		Row	SHOULDER & LAP BELT					
		01 - FRONT ROW	Seat Position 07 - LEFT					
		Helmet Use		Helmet Compliance				
		Eye Protection		Tint Compliance				
2	Injury Severity POSSIBLE INJURY			Airbag DEPLOYED-COMBINATION				
		Ejected Ejection Path NOT EJECTED NOT EJECTED/NOT API Medical Transport		PLICABLE		Trapped/Extricated NOT TRAPPED		
				EMS Agency Identifier		EMS Run #		
		NOT TRANSPORTED						
		Hospital		Date of Death Time of Death				
		Distracted By NOT A	ed By Source PPLICABLE (NOT DISTR	ACTED)				
		Distracted By Action NOT DISTRACTED						

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

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Crash Date 08/29/2025
Crash Time 04:56 AM

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		Non Motorist	Striking Unit #	Location				
		Prior Action						
UNIT	INDIVIDUAL	Action Other						To/From School
•			Suspected Alcohol L	Jse	Suspected Drug Use			To/T form deficient
	L	Drug & Alcohol	NO		NO			
•		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results	
		TEST NOT GIVEN						
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
2	001	Drug Type						
		Individual Condition APPEARED NORI	MAL					

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