6TL0FV1GG8

25-09236

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | | | 25-092 | Crash Number 36 | | g Officer/Deputy N. VERTEIN | | | | |
|-----------------------------|-------------------------|----------------|---------------------|---|-----------------|---------------------------------------|---------------------|--|--|--|
| Crash Date 09/01/2025 | Crash Time 02:05 PM | | Date Arr 09/01/2 | | | Time Arrived 02:10 PM | | | | |
| Date Notified 09/01/2025 | Time Notifie 02:08 PM | d | Total Ur | its | Total Injure | d Total Kill | ed | | | |
| On Emergency | Hit and Run | Lane Clos | ure | Work Zone | ▼ Traile | r or Towed | Reporting Threshold | | | |
| Government Property | Active | School Zone | School I | Bus Related | Tags | | | | | |
| Reportable | Crash Type DT4000 (S | STANDARD CRASI | Н) | | Amen | ded | Secondary Crash | | | |
| escription = | • | | | | • | . | - | | | |
| Diagram i | | | | | | Reconstructio | on By | | | |
| | | Not to sca | ale | | | | | | | |
| ** | | | | | | Photos By | | | | |
| | | | | | | | | | | |
| | | | | | | Additional Info | ormation | | | |
| 1 | 1 | 1 | | | 2 | NONE | omation | | | |
| ldama melebert | أسمله أودور يتتديداوا | <u> </u> | <u> </u> | ىصا للـــــــــــــــــــــــــــــــــــ | | | | | | |
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| USH 12 | | | | | | | | | | |
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Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

1 of 6

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| Location | | | | | | | | | |
|--|--|----------------------|--|---|----------------------------|--|---|---|---|
| ON USH12 EB | | | | | Latitude | | | Longitud | de |
| 0.41 MI N | | | | | 43.32401 | 15762 | | -89.759 | 094654 |
| OF CTHZ | | | | | X Coordinate | | | Y Coord | linate |
| IN THE TOWN OF S | SUMPTER | | | | | | | | 04.5 |
| IN SAUK COUNTY | | | | | Structure | | | | - |
| | | | | | | UCTURE | | | |
| Crash Scene | | | | | | | | | |
| First Harmful Event | | | | | First Harm | nful Event L | ocation | | |
| MOTOR VEH IN TR | ANSPORT | | | | ON ROA | | Location | | |
| Manner of Collision | | | | | Light Cond | | | | |
| 03 - FRONT TO REA | ΔR | | | | DAYLIG | | | | |
| Road Surface Condition | | | | | Roadway | | | | |
| | 1(5) | | | | Roadway | i actor(s) | | | |
| DRY | | | | | | | | | |
| Environment Factor(s) | | | | | 1 | | | | |
| NONE | | | | | BACKII | DIJE TO | REGULAR | CONGES | STION |
| NONL | | | | | BACKOI | DOL IC | REGULAR | CONOLC | TION |
| Weather Condition(s) | | | | | | | | | |
| CLEAR | | | | | | | | | |
| <u> </u> | | | | | | | | | |
| Animal Type | | | | | | o Trafficwa | • | | |
| | | | | | | | ON ROAD | | |
| Crash Classification - L | | | | | | | - Jurisdiction | | |
| PUBLIC PROPERT | Y | | | | | | RISDICTION | | |
| Tribal Land | | | | | Access Co | | | | Special Study |
| | | | | | NO CON | ITROL | | | |
| Within Interchange Are | a Junction Location | on | | Intersection | on Type | | | | |
| | | | | | | | | | |
| NO | NON-JUNCT | ION | | NOT AN | INTERSE | CTION | | | |
| J | NON-JUNCT | ION | | NOT AN | INTERSE | CTION | | | |
| Unit Summary Unit Status | NON-JUNCT | | Vehicle Ope | | | | Unit Type | | |
| Unit Summary | NON-JUNCT | | Vehicle Ope | | | | Unit Type AUTOMOR | BILE | |
| Unit Summary Unit Status | NON-JUNCT | | | | | | | | ments |
| Unit Summary Unit Status IN TRANSIT | <u>'</u> | | | | | | AUTOMOI | | ments |
| Unit Summary Unit Status IN TRANSIT Vehicle Type | <u>'</u> | | | erating As C | Classification | | AUTOMOI Operating A | s Endorsei | ments Mat Types |
| Unit Summary Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY V | EHICLE | Recorded | D CLASS | erating As C | Classification | | AUTOMOI Operating A | s Endorsei | |
| Unit Summary Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY V Total Occs 1 | EHICLE | Recorded | D CLASS Total # Citat | erating As C | Classification | Total Tra | AUTOMOI Operating A | s Endorsei Total Haz | Mat Types |
| Unit Summary Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY V Total Occs 1 Insurance? | EHICLE Train/Bus # F Direction Of T | Recorded | Total # Citat Pre | erating As C | Classification | Total Tra 0 Speed Li | AUTOMOI Operating A | s Endorsei Total Haz 0 Total Lan | Mat Types |
| Unit Summary Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY V Total Occs 1 Insurance? YES | EHICLE Train/Bus # F Direction Of T EASTBOUI | Recorded Travel ND | Total # Citat Pre | erating As C tions Issued CrashTire Mark | Classification | Total Tra | AUTOMOI Operating A illers | Total Haz Total Lan 2 | Mat Types es |
| Unit Summary Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY V Total Occs 1 Insurance? YES Most Harmful Event: Co | EHICLE Train/Bus # F Direction Of T EASTBOUL | Recorded Travel ND | Total # Citat Pre | erating As C tions Issued CrashTire Mark ction | classification | Total Tra 0 Speed Li | AUTOMOI Operating A | Total Haz Total Lan Total Lan Motor Veh | Mat Types es icle Use |
| Unit Summary Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY V Total Occs 1 Insurance? YES Most Harmful Event: Co | EHICLE Train/Bus # F Direction Of T EASTBOUI | Recorded Travel ND | Total # Citat Pre (Special Fundamental | erating As C tions Issued CrashTire Mark ction IAL FUNC | classification | Total Tra 0 Speed Li | AUTOMOI Operating A illers mit Emergency NOT APPI | Total Haz 0 Total Lan 2 Motor Veh | Mat Types es icle Use |
| Unit Summary Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY V Total Occs 1 Insurance? YES Most Harmful Event: Commotor VEH IN TR | EHICLE Train/Bus # F Direction Of T EASTBOUI Dilision With ANSPORT | Recorded Travel ND | Total # Citat Pre (Special Fun NO SPECI | erating As C tions Issued CrashTire Mark ction IAL FUNC | classification | Total Tra 0 Speed Li | AUTOMOI Operating A illers mit Emergency NOT APPI Traffic Contr | Total Haz 0 Total Lan 2 Motor Veh | Mat Types es icle Use |
| Unit Summary Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY V Total Occs 1 Insurance? YES Most Harmful Event: Commotor VEH IN TR Traffic Way DIVIDED HWY W/O | EHICLE Train/Bus # F Direction Of T EASTBOUI | Recorded Travel ND | Total # Citat Pre (Special Fun NO SPEC Traffic Contr | erating As C tions Issued CrashTire Mark ction IAL FUNC | classification | Total Tra 0 Speed Li | AUTOMOI Operating A illers mit Emergency NOT APPI Traffic Conte | Total Haz 0 Total Lan 2 Motor Veh LICABLE rol Inopera | Mat Types es icle Use |
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| Unit Summary Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY V Total Occs 1 Insurance? YES Most Harmful Event: Co MOTOR VEH IN TR Traffic Way DIVIDED HWY W/O Surface Type BLACKTOP (BITUN Truck Bus or HazMat NO Vehicle License Plate Nu AHU9833 Vehicle Identificat 1C4PJMDB6H Color RED - RED Initial Contact Po | EHICLE Train/Bus # F Direction Of T EASTBOUI Dilision With ANSPORT TRAFFIC BARRIER IINOUS) The property of th | Recorded Travel ND | Total # Citat Pre (Special Fundament Fun | crating As C crashTire Mark ction IAL FUNC rol ROL ture T | CTION | Total Tra 0 Speed Li 55 St WI Year 2017 | AUTOMOI Operating A illers mit Emergency NOT APPI Traffic Contr NO Road Grade LEVEL Country of Is: UNITED ST Model CHEROKE | Total Haz 0 Total Lan 2 Motor Veh LICABLE rol Inopera | Mat Types es icle Use tive/Missing |
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| Unit Summary Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY V Total Occs 1 Insurance? YES Most Harmful Event: Co MOTOR VEH IN TR Traffic Way DIVIDED HWY W/O Surface Type BLACKTOP (BITUM Truck Bus or HazMat NO Vehicle License Plate Nu AHU9833 Vehicle Identificat 1C4PJMDB6H Color RED - RED Initial Contact Po 12 - FRONT | EHICLE Train/Bus # F Direction Of 1 EASTBOUI Dilision With ANSPORT TRAFFIC BARRIER IINOUS) The property of the propert | Recorded Travel ND | Total # Citat Pre (Special Funity NO SPEC) Traffic Contribution CONT Road Curva STRAIGHT Plate Type AUT Make JEEP Body Style UT - SPO Vehicle Dai 01 - RIGH FRONT, 1 | crating As C CrashTire Mark ction IAL FUNC rol ROL tture T | TY VEHICIT CORNER SIDE FRO | Total Tra 0 Speed Li 55 St WI Year 2017 LE | AUTOMOI Operating A illers mit Emergency NOT APPI Traffic Conti NO Road Grade LEVEL Country of Is: UNITED ST Model CHEROKE Bus Use | s Endorsei Total Haz 0 Total Lan 2 Motor Veh LICABLE rol Inopera | Mat Types es icle Use tive/Missing |
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Wisconsin Mot Form DT4000

2 of 6

Crash Time 02:05 PM

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| ı | | Towed Due To Damage | | Vehicle Removed By | | | | | |
|----------|------------|---|--------------------------------------|-----------------------|----------------|------------------------|--|--|--|
| | | NOT TOWED | | OPERATOR | | | | | |
| | | What Driver Was Doing | | Vehicle Factors | | | | | |
| | | GOING STRAIGHT | | Veriloie i detois | | | | | |
| | | Driver Prior Action Other | | NOT APPLICABLE | | | | | |
| | | | | | | | | | |
| l | | Driver Actions | _ | | | | | | |
| ١. | Щ | FOLLOWING TOO CLOS | E | | | | | | |
| E E | ᅙ | | | | | | | | |
| 5 | VEHICLE | | | | | | | | |
| | > | | | | | | | | |
| | | Owner Name | | Owner Address | | | | | |
| | | BETTY KING | | S4110 COUNTY | ROAD BD # 14 | | | | |
| 2 | 6 | (608) 459-0058 | | BARABOO, WI 5 | 3913 , US | | | | |
| | | | | | | | | | |
| | ; | Sequence Of Events | | | | | | | |
| | 5 | Event MOTOR VEH IN TRANSP | ORT | | | | | | |
| | | Event | | | | | | | |
| | 05 | | | | | | | | |
| | 03 | Event | | | | | | | |
| | | Event | | | | | | | |
| | 9 | Event | | | | | | | |
| | 1 | Policy Holder | | | | | | | |
| ENS. | | Insurance Company | | INDIVIDUAL | | | | | |
| - | | WISCONSIN-MUTUAL-IN | s-co | BETTY KING | | | | | |
| | - 1 | Individual | | | | | | | |
| | | DRIVER | | Citations Issued | Sex | | | | |
| | ᆛ | BETTY KING (608) 459-0058 | | 1 | FEMALE Race | | | | |
| L | INDIVIDUAL | | | Date of Birth | WHITE | | | | |
| Ę | ₹ | Address | | Driver License Number | | | | | |
| - | 9 | S4110 COUNTY ROAD B BARABOO, WI 53913, U | | | | | | | |
| | = | BARABOO, WI 53913 , 0 | | | | | | | |
| | | 0- D.t | Orași | 0.61.5 | | | | | |
| | Sat | On Duty | / Crasn | Safety Equipment | | | | | |
| | | Row | Seat Position | SHOULDER & LA | P BELT | | | | |
| | | 01 - FRONT ROW | 07 - LEFT | | | | | | |
| | | Helmet Use | l . | Helmet Compliance | | | | | |
| | | Eve Protection | | | | | | | |
| | | Eye Protection | | Tint Compliance | | | | | |
| _ | Ξ | Injury S | everity | Airbag | | | | | |
| 2 | 8 | Injury NO AF | PPARENT INJURY | NON DEPLOYED | | | | | |
| | | Ejected | Ejection Path | | | Trapped/Extricated | | | |
| | | NOT EJECTED Medical Transport | NOT EJECTED/NOT AP | | | NOT TRAPPED EMS Run # | | | |
| | | NOT TRANSPORTED | | EMS Agency Identifie | ' | ENIS Rull # | | | |
| | | 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. $\begin{tabular}{ll} 3 & of & 6 \end{tabular}$

Crash Date 09/01/2025
Crash Time 02:05 PM

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | | Non Motorist | Striking | Unit # | Location | | | | | | | |
|------|--------------------|---|-----------------------|-------------|-----------------------------------|---|-----------------------------|--------|--------------|--|------------|----------------|
| | | Prior Action | | | l | | | | | | | |
| | | Action | | | | | | | | | | |
| | ٩L | | | | | | | | | | | |
| ⊨ | INDIVIDUAL | | | | | | | | | | | |
| UNIT | JVI | | | | | | | | | | | |
| | Z | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | Action Other | | | | | | | | | | To/From School |
| | | | Suspect | ted Alcohol | Use | | Suspected Drug Use | | | | | |
| | L | Drug & Alcohol | NO | | T | | NO | | | T | | |
| | | Alcohol Test Given TEST NOT GIVEN | | | Alcohol Test T | ype | | | | Alcohol Test | t Results | |
| | | Drug Test Given TEST NOT GIVEN | | | Drug Test Typ | е | | Drug 7 | Test Results | I | | |
| _ | 1 | Drug Type | | | | | | | | | | |
| 9 | 001 | | | | | | | | | | | |
| | | Individual Condition | | | | | | | | | | |
| | | APPEARED NORM | MAL | | | | | | | | | |
| | | · · · · · · · · · · · · · · · · · · · | | | | _ | | | | | | |
| | | Violations UTC Number | I 1 7 | r-0 10 | tatuta Niverbaa | | December | | | | | |
| | 01 | BM654029 | Issue T 001 | | tatute Number 46.14(1m) | | Description AUTOMOBILE FOLI | LOWIN | G TOO CL | OSELY | | |
| ' | Uni | Summary • | | | | | l | | | | | |
| | | Status | | | | Vehicle Operating As Classification D CLASS Unit Type TRUCK | | | | | | |
| | | Cle Type | | | | D CLASS | | | | Operating As Endorsements | | |
| 05 | | LITY TRUCK/PICKL | | | | | | | | | | |
| | Total | l Occs | Tra | ain/Bus # F | Recorded | orded Total # Citations Issued Total Trail 0 1 | | | | ers | Total Hazl | Mat Types |
| | | rance? | Di | irection Of | Travel | - | Pre CrashTire | | Speed Lim | imit Total Lanes | | es |
| FIND | YES | Harmful Event: Collision | | ASTBOU | ND | Mark 55 Special Function | | | | 2 Emergency Motor Vehicle Use | | ام ا ادم |
| 5 | | TOR VEH IN TRANS | | | | | O SPECIAL FUNCTION | N | | NOT APPLICABLE | | |
| İ | | ic Way DED HWY W/O TRA | A E E I O E | | | | affic Control O CONTROL | | | Traffic Control Inoperative/Missing NO | | |
| ŀ | | ace Type | AFFIC E | DARRIER | | | oad Curvature | | | Road Grade | | |
| | BLA | CKTOP (BITUMING | OUS) | | | STRAIGHT LEVEL | | | | | | |
| | Truci NO | k Bus or HazMat | | | | | | | | | | |
| | | Vehicle | | | | | | | | | | |
| | | License Plate Number | r | | | F | Plate Type | | St | Country of Issuance | | |
| | | JE8883 | | | | | LTK WI | | | UNITED STATES | | |
| 05 | 02 | Vehicle Identification I 1FTEW1E5XJFD0 | | | | | Make FORD | | Year 2018 | Model F150 | | |
| - | (| Color | 2000 | | | | Body Style | | 2010 | Bus Use | | |
| | | GRY - GRAY | | | | | PK - PICKUP | | | · | | |
| • | | Initial Contact Point | | | | | | | | | | 7 8 9 10 11 |
| | | 06 - REAR | | | | ╛ | | | | | | 6 |

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

4 of 6

Crash Date **09/01/2025**Crash Time **02:05 PM**

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | | | | | | | | | (606) 356-4695 | | |
|------|----------|---|------------|----------------------|----------------------------------|-----------------------|-------------------|----------------------------|----------------|--|--|
| | щ | | | | Vehicle D | Damage | | | 1 | | |
| UNIT | VEHICLE | | | | | | | | | | |
| 5 | ᇁ | Extent Of Damage | | | 06 - REAR, 07 - LEFT REAR CORNER | | | | | | |
| | 5 | MINOR DAMAGE | | | | | | | | | |
| | | Towed Due To Damage | | | 1 | Removed By | | | | | |
| | | NOT TOWED | | | OPERA | | | | | | |
| | | What Driver Was Doing | | | Vehicle F | actors | | | | | |
| | | SLOW/STOPPING | | | NOT A | PPLICABLE | | | | | |
| | | Driver Prior Action Other | | | NOT AF | PLICABLE | | | | | |
| | | Driver Actions | | | | | | | | | |
| | | NO CONTRIBUTING A | CTION | | | | | | | | |
| ⊢ | 긌 | | | | | | | | | | |
| F | ¥ | | | | | | | | | | |
| - | VEHICLE | | | | | | | | | | |
| | | | | | | | | | | | |
| | | Owner Name | | | Own | er Address | | | | | |
| ~ | ~ | | NUTH | | | ROSEMARY | | | | | |
| 05 | 05 | (715) 316-3242 | | | BAI | RABOO, WI 53 | 913, US | | | | |
| | | | | | | | | | | | |
| | ; | Sequence Of Event | ts | | | | | | | | |
| | 2 | Event MOTOR VEH IN TRANS | SPORT | | | | | | | | |
| | | Event | | | | | | | | | |
| | 05 | | | | | | | | | | |
| | ~ | Event | | | | | | | | | |
| | 03 | | | | | | | | | | |
| | 4 | Event | | | | | | | | | |
| _ | 1 | Policy Holder | | | | | | | | | |
| FIND | | Insurance Company | | | INDIV | IDUAL | | | | | |
| > | | AUTO-OWNERS-INS-C | O | | RONALD KNUTH | | | | | | |
| | | Trailer/Towed | | | | | | | | | |
| 05 | | Trailer Plate # P | late Type | Make | | State | | Country of Issuance | | | |
| 0 | | | | IRWK | | | | | | | |
| l. | 2 | Unit Type | | INDIVIDUAL RONALD | KNUTH | | | Address 810 ROSEMARY LN | | | |
| L N | 빌 | UTILITY TRAILER | | (715) 316-3242 | KNUTT | • | BARABOO, WI 53913 | . US | | | |
| 5 | TRAILER/ | Vehicle Identification Numb | er | (, | | BARABOO, VI | | | , | | |
| | - | | | | | | | | | | |
| | - 1 | Individual | | | | | | | | | |
| | | DRIVER RONALD KI | NUTH | | | ns Issued | Sex | | | | |
| | 7 | (715) 316-3342 | | 0 | | MALE | | | | | |
| l. | Ž | Address 810 ROSEMARY LN BARABOO, WI 53913 | | | Date o | of Birth | WHITE | Race VHITE | | | |
| FIN | ₹ | Address | | | Driver | | | | | | |
| 5 | ≧ | 810 ROSEMARY LN | | | Dilvei | Driver License Number | | | | | |
| | Z | BARABOO, WI 53913 | , US | | | | | | | | |
| | | | | | | | | | | | |
| | _ | On D | Outy Crash | 1 | Safety | Equipment | | | | | |
| | Sat | fety Equipment | | | | | | | | | |
| | | Row | S | eat Position | SHOU | JLDER & LAP | BELT | | | | |
| | | 01 - FRONT ROW | 0 | 7 - LEFT | | | | | | | |
| | | Helmet Use | | | Helme | t Compliance | | | | | |
| | | E. B. B. L. F. | | | | - | | | | | |
| | | Eye Protection | | | Tint Co | ompliance | | | | | |
| | | | | | | | | | | | |

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data. 5 of 6

Crash Date 09/01/2025
Crash Time 02:05 PM

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| 05 | 005 | Injury Severity NO APPARENT INJURY | | | | Airbag | | | | | |
|----|------------|------------------------------------|----------|--------------------------|-------------------|-----------------------|-------------------|----------------------|------------------|--|--|
| 0 | ŏ | | NO AP | PARENT II | NJURY | NON DEPLOYED | | | | | |
| | | Ejected | | Ejection Pa | | | | Trapped/Extricated | | | |
| | | NOT EJECTED | | NOT EJE | CTED/NOT APPL | | | NOT TRAPPED | | | |
| | | Medical Transport | | | | EMS Agency Identifier | | EMS Run # | | | |
| | | NOT TRANSPORT | ΓED | | | | | | | | |
| | | Hospital | | | | Date of Death | | Time of Death | | | |
| | | Distracted By | Distract | ed By Source PPLICABL | E (NOT DISTRAC | CTED) | | <u> </u> | | | |
| | | Distracted By Action NOT DISTRACTE | | | | | | | | | |
| | | Non Motorist | Striking | Unit # | Location | | | | | | |
| | | Prior Action | | | | | | | | | |
| ĺ | | Action | | | | | | | | | |
| | | | | | | | | | | | |
| | INDIVIDUAL | | | | | | | | | | |
| ⊨ | J | | | | | | | | | | |
| L | | | | | | | | | | | |
| _ | D | | | | | | | | | | |
| | Z | | | | | | | | | | |
| | | | | | | | | | | | |
| | | Action Other | | | | | | | To/From School | | |
| | | Action Other | | | | | | | 10/1101113011001 | | |
| | | | Suspec | ted Alcohol U | se | Suspected Drug Use | | | | | |
| | L | Drug & Alcohol | NO | | | NO | | | | | |
| l | | Alcohol Test Given | | | Alcohol Test Type | | | Alcohol Test Results | | | |
| | | TEST NOT GIVEN | | | | | | | | | |
| | | Drug Test Given TEST NOT GIVEN | | | Drug Test Type | | Drug Test Results | | | | |
| 05 | 002 | Drug Type | | | I. | | I. | | | | |
| | Õ | | | | | | | | | | |
| | | Individual Condition | | | | | | | | | |
| | | | | | | | | | | | |
| | | APPEARED NORI | VIAL | | | | | | | | |
| l | | | | | | | | | | | |

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data. 6 of 6