# 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 25-094	Crash Number 164		Officer/Deputy T T. CLAUER			
Ľ۱	Crash Date <b>09/07/2025</b>	Crash Time 02:47 PM		Date Ar 09/07/2		Time Arrive 02:55 PM	d			
_	Date Notified <b>09/07/2025</b>	Time Notified 02:47 PM		Total U	nits	Total Injure	d Total P	Killed		
ב ב	On Emergency Hit	and Run	Lane Closu		Work Zone	Trailer or Towed		Reporting Threshold		
- 	Government Property		hool Zone	School Bus Related Tags						
	<b>▼</b> Reportable	Crash Type DT4000 (STA	NDARD CRASH	)		ded	ded Secondary Crash			
_	Description Diagram						Reconstruction By			
		2	2				Photos By DEPUTY	GREENWOOD  nformation		
	N Reedsburg CTH A		СТН U		_		PHOTOS			
		,	NOT TO SC	ALE						
	✓ I, a sworn law enforceme	nt officer, agre	ee that I have no	t added	l any CJIS data in th	nis report.				
ľ	UNIT ONE WAS TRAVELING SOUTI CROSS CTH A TO GO ONTO N REI TWO OPERATOR ISSUED CITATION	EDSBURG RD HC	WEVER DIDN'T SE	E UNIT 1.	UNIT 1 OPERATOR WA	AS UNABLE TO A	VOID UNIT 2			

## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 09/07/2025

L	Location										
·	ON	CTHA NB				Latitude			Longitu	ongitude	
		TN				43.53243	1625		-89.73	8855377	
		REEDSBURG RD HE TOWN OF FAIRFI	ELD			X Coordin	ate		Y Coor	rdinate	
		AUK COUNTY	ELD			278693.1875 4823588					
						Structure					
L						NO STRI	JCTURE				
(	Cra	sh Scene 🚾									
Ī	First	Harmful Event				First Harm	ful Event Lo	cation			
L		TOR VEH IN TRANSP	ORT			ON ROA	DWAY				
ſ	Manner of Collision						dition				
Į	00 - NO COLLISION W/VEHICLE IN TRANSPORT					DAYLIGI					
	Road	d Surface Condition(s)				Roadway	Factor(s)				
	DR۱	<b>(</b>									
ŀ	Envi	ronment Factor(s)									
	NOI	NE				NONE					
-		ther Condition(s)									
		. ,									
	CLE										
ſ	Anin	nal Type					-				
ļ											
		h Classification - Location	l			Crash Classification - Jurisdiction					
ŀ	PUBLIC PROPERTY Tribal Land										
	TTIDE	ar Land				NO CONTROL					
ŀ	With	in Interchange Area	Junction Location		Intersection	n Type					
	NO		INTERSECTION		FOUR-W	AY INTER	RSECTION				
i	Jni	t Summary =									
		Status		Vehicle Op	erating As C	lassification		Unit Type			
	IN T	IN TRANSIT D CLASS				AUTOMOBILE					
• 1		cle Type			Operating As Endorsements				ements		
	•	ORT) UTILITY VEHICI								=	
		l Occs	Train/Bus # Recorded	Total # Citations Issued						azMat Types	
-	04	rance?	Direction Of Travel	0		0 11:		-		nos	
	YES		SOUTHBOUND	Pre	CrashTire Mark		l '			1165	
-		t Harmful Event: Collision		Special Fur			30			hicle Use	
-		TOR VEH IN TRANSP			IAL FUNC	TION					
ŀ	Traff	ic Way		Traffic Con	trol			Traffic Contro	ol Inoper	ative/Missing	
		D-WAY, NOT DIVIDED	)	NO CONT	ROL			NO			
		асе Туре		Road Curva				Road Grade			
L		CKTOP (BITUMINOU	S)	STRAIGH	T			LEVEL			
	Truc <b>NO</b>	k Bus or HazMat									
1		Vehicle									
		License Plate Number		Plate Type	<del></del>		St	Country of Iss	uance		
		AXK3398	AUT			wı	UNITED ST	ATES			
ı	_	Vehicle Identification Nu		Make			Year	Model			
	5 YV4A22PK9G1041651			VOLV		2016		XC90			
		Color	Body Style				Bus Use				
		GRY - GRAY	4D - 4DR					-			
	쁫	Initial Contact Point	ORNER	Vehicle Da	amage					7 8 9 10 11	
	11 - LEFT FRONT CORNER   Extent Of Damage   DISABLING DAMAGE		ZINI4FIX	15 - ALL	AREAS		elation To Trafficway  RAFFICWAY - ON ROAD  rash Classification - Jurisdiction  O SPECIAL JURISDICTION  ccess Control O CONTROL  Type / INTERSECTION  Unit Type AUTOMOBILE  Operating As Endorsements  Total Trailers O 0 Speed Limit Total Lanes 55 O2  Emergency Motor Vehicle Use NOT APPLICABLE  Traffic Control Inoperative/Missing NO Road Grade LEVEL  St Country of Issuance WI UNITED STATES Year Model 2016 XC90 Bus Use				
'	回	DISABLING DAMAGE								5 4 3 2 1	

## 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							
		TOWED DUE TO DISABL	ING DAMAGE	CRAIGS TOWING							
		What Driver Was Doing		Vehicle Factors							
		GOING STRAIGHT									
		Driver Prior Action Other		NOT APPLICABLE							
		Driver Actions									
	ш	NO CONTRIBUTING ACT	ION								
$\vdash$	Ľ										
LNO	¥										
$\supset$	VEHICLE										
	>										
		Owner Name		Owner Address							
		EDWARD SCANLAN		2119 SURREY LI	N						
7	01	(608) 477-8584		BARABOO, WI 5	3913 , US						
		Secuence Of Events									
		Sequence Of Events Event									
	01	MOTOR VEH IN TRANSP	ORT								
	02	Event									
		Event									
	03										
	04	Event									
		Dallas Halas									
╘		Policy Holder									
LIND		Insurance Company	ED INCUDANCE OO	INDIVIDUAL							
_		PROGRESSIVE-ADVANC	ED-INSURANCE-CO	EDWARD SCANLA	AN						
		Individual									
		DRIVER		Citations Issued	Sex						
	ب	EDWARD SCANLAN		0	MALE						
	Π	(608) 477-8584		Date of Birth	Race						
⊨	INDIVIDUAL				WHITE						
	<u> </u>	Address 2119 SURREY LN		Driver License Number	er						
	Z	BARABOO, WI 53913, U	s	STATE: WISCONS	IN COUNTRY: UN	IITED STATES					
		<i>D7</i> ii d i D o o , 111 o o o 10 , o									
		On Dut	. O	Cofety Facility and							
	Sat	On Duty fety Equipment	y Crasn	Safety Equipment	Safety Equipment						
	Ou.		1								
		Row FRONT BOW	Seat Position	SHOULDER & LAI	PBELI						
		01 - FRONT ROW	07 - LEFT	Halmat Camaliana							
		Helmet Use		Helmet Compliance							
		Eye Protection		Tint Compliance							
		Lye Protection		Tint Compliance							
	_ '	Injury S	everity	Airbag							
2	00	I.a.:	PPARENT INJURY	DEPLOYED-FROM	IT						
		Ejected	Ejection Path			Trapped/Extricated					
		NOT EJECTED	NOT EJECTED/NOT AF	PPLICABLE		NOT TRAPPED					
		NOI EJECTED		EMS Agency Identifier		EMS Run #					
		Medical Transport		Eivio Agency identille	•						
				EMS Agency Identille							
		Medical Transport		Date of Death		Time of Death					
		Medical Transport  NOT TRANSPORTED				Time of Death					
		Medical Transport  NOT TRANSPORTED  Hospital  Distract	ed By Source	Date of Death		Time of Death					
		Medical Transport  NOT TRANSPORTED  Hospital	ed By Source	Date of Death		Time of Death					
		Medical Transport  NOT TRANSPORTED  Hospital  Distract	ed By Source	Date of Death		Time of Death					

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		_								
		Non Motorist	Striking Ur	nit#	Location					
		Prior Action								
LIND	INDIVIDUAL	Action								
	=									
		Action Other							To/From School	
	L	Drug & Alcohol	Suspected <b>NO</b>	Alcohol U	lse	Suspected Drug Use	9			
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type	е		Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Result	s		
٦	001	Drug Type								
		Individual Condition  APPEARED NORM	/IAL							
		 Individual								
		PASSENGER				Citations Issued	Sex			
		MOLLY SCANLAN			0	FEMALE				
_	DUA	(608) 477-8584				Date of Birth	Race WHITE			
LIND	INDIVIDUAL	Address 2119 SURREY LN BARABOO, WI 53913 , US				Driver License Number  STATE: WISCONSIN COUNTRY: UNITED STATES				
	Sat	fety Equipment	On Duty C	rash		Safety Equipment				
		Row 01 - FRONT ROW		Seat Po		SHOULDER & LAP BELT				
		Helmet Use				Helmet Compliance				
		Eye Protection				Tint Compliance				
5	005	Injury	Injury Seve	E INJUF		Airbag  DEPLOYED-FRO	NT			
		Ejected NOT EJECTED		jection Pa I <b>OT EJE</b> (	<sup>th</sup> CTED/NOT APP	LICABLE		Trapped/Extricated NOT TRAPPED		
	Medical Transport  NOT TRANSPORTED			EMS Agency Identifier		EMS Run #				
		Hospital				Date of Death		Time of Death		
		Distracted By	Distracted	By Source	9	1		1		
		Distracted By Action								
		Non Motorist	Striking Ur	nit#	Location					

## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 09/07/2025

		Prior Action									
LIND	INDIVIDUAL	Action									
		Action Other						To/From School			
		D 0. Al11	Suspected	Alcohol Use	Suspected Drug Use						
	L	Orug & Alcohol  Alcohol Test Given	NO	Alachal Toot To	NO		Alcohol Test Results				
		TEST NOT GIVEN		Alcohol Test Ty	ре		Alcohol Test Results				
		Drug Test Given TEST NOT GIVEN	Drug Test Given TEST NOT GIVEN			Drug Test Results					
01	002	Orug Type									
		ndividual Condition									
		APPEARED NORMAL									
	i	ndividual									
	_	PASSENGER WILLA SCANLAN			Citations Issued  0	Sex FEMALE					
⊨	INDIVIDUAL				Date of Birth	Race WHITE					
LNO	DIV	Address 2119 SURREY LN			Driver License Number						
	Z	BARABOO, WI 539			STATE: WISCONSIN	STATE: WISCONSIN COUNTRY: UNITED STATES					
	Saf	ety Equipment	On Duty Cra	ash	Safety Equipment						
		Row 02 - SECOND ROV	v	Seat Position 07 - LEFT	SHOULDER & LAP						
		Helmet Use			Helmet Compliance	net Compliance					
		Eye Protection			Tint Compliance	Tint Compliance					
7	003	Injury	Injury Sever	ity F INJURY	Airbag  DEPLOYED-FRONT	-					
		Ejected	Eje	ection Path			Trapped/Extricated				
		NOT EJECTED  Medical Transport	N	OT EJECTED/NOT AP	PLICABLE  EMS Agency Identifier		NOT TRAPPED EMS Run #				
		NOT TRANSPORT	ED		Livio rigorio i aoriano		EMO Ruit #				
		Hospital			Date of Death Time of Death						
		Distracted By	Distracted E	By Source	•						
		Distracted By Action									
		Non Motorist	Striking Uni	t# Location							
		Prior Action									

## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	_									
		Action								
	INDIVIDUAL									
LIND	םח									
5	$\leq$									
		Action Other						To/From School		
		Action Other	To/From School							
	,	Suspe	cted Alcoho	ol Use	Suspected Drug Use					
	L	Drug & Alcohol No			NO					
		Alcohol Test Given		Alcohol Test Type	•		Alcohol Test Results			
		TEST NOT GIVEN Drug Test Given		Drug Test Type		Drug Test Results				
		TEST NOT GIVEN		2.49 .661.766		Drug Test Nesults	•			
7	003	Drug Type								
0	ŏ									
		Individual Condition								
		APPEARED NORMAL								
		APPEARED NORMAL								
		Individual								
		PASSENGER			Citations Issued	Sex				
	7	MILO SCANLAN (608) 477-8584  Address 2119 SURREY LN BARABOO, WI 53913, US			0	MALE				
	INDIVIDUAL				Date of Birth	Race WHITE				
LNO	Ĭ				Driver License Number	er				
<b>–</b>	<u> </u>									
	=									
		On Du	ty Crash		Safety Equipment					
	Saf	ety Equipment	ity Ordon		Salety Equipment					
		Row	Seat	Position	SHOULDER & LAP BELT					
		02 - SECOND ROW	09 -	RIGHT						
		Helmet Use			Helmet Compliance					
		Eye Protection			Tint Compliance					
					,					
2	004		Severity		Airbag					
	0	Ejected NO A	PPAREN	T INJURY	DEPLOYED-FRON	<u> </u>	I Tranned/Extricated			
		NOT EJECTED	_	JECTED/NOT APPL	LICABLE		Trapped/Extricated  NOT TRAPPED			
		Medical Transport	L		EMS Agency Identifie	r	EMS Run #			
		NOT TRANSPORTED								
		Hospital			Date of Death		Time of Death			
		Distra	cted By Sou	ırce						
		Distracted By	J. 00 1	95						
		Distracted By Action								
		Strikin	g Unit#	Location						
		Non Motorist								
		Prior Action								

## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 09/07/2025

		Action								
	_									
<b>–</b>	INDIVIDUAL									
LNO	VID									
	ND									
	_									
		Action Other						To/From School		
	L	Orug & Alcohol NO	pected Alcohol U	se	Suspected Drug Use NO					
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Typ	е		Alcohol Test	Results		
		Drug Test Given TEST NOT GIVEN		Drug Test Type	ype Drug Test Results		ts			
01	004	Drug Type								
_	0	Individual Condition								
		APPEARED NORMAL								
	Unit	Summary								
		Status			Vehicle Operating As Classi D CLASS	ification	Unit Type	Unit Type TRUCK		
•		RANSIT cle Type			D CLASS			s Endorsements		
05		LITY TRUCK/PICKUP TI								
	Total	Total Occs Train/Bus # Recorded			Total # Citations Issued	Total Tra	illers	Total HazMat Types  0		
		ance?	Direction Of Tra		Pre CrashTire	Speed Li	mit	Total Lanes		
LNO	YES				Mark	55	I ==========	02		
5		: Harmful Event: Collision Wi FOR VEH IN TRANSPO			Special Function  NO SPECIAL FUNCTIO	N	NOT APPL	Motor Vehicle Use LICABLE		
		ic Way			Traffic Control		Traffic Control Inoperative/Missing  NO			
		D-WAY, NOT DIVIDED ace Type			STOP SIGN Road Curvature		Road Grade			
		CKTOP (BITUMINOUS)	1		STRAIGHT		LEVEL			
	Trucl <b>NO</b>	k Bus or HazMat								
	,	Vehicle								
		License Plate Number			Plate Type	St	Country of Iss			
		NY7824  Vehicle Identification Numb	oer		LTK Make	WI Year	Model Model	A1E2		
05	02	1FTFX1EVXAKB48257			FORD	2010	F150			
		Color RED - RED			Body Style PK - PICKUP		Bus Use			
	щ	Initial Contact Point			Vehicle Damage			7 8 9 10 11		
LNO	101	01 - RIGHT FRONT CO Extent Of Damage	RNER		01 - RIGHT FRONT CO FRONT, 03 - RIGHT SI			6		
<b>-</b>	VEHICL	DISABLING DAMAGE			REAR, 11 - LEFT FRO	NT CORNER, 1	2 - FRONT	5 4 3 2 1		
		Towed Due To Damage	DI INO DAMA	05	Vehicle Removed By					
		TOWED DUE TO DISA What Driver Was Doing	BLING DAMA	GE	CRAIGS TOWING Vehicle Factors					
		ENTERING TRAFFIC L			venicie Factors					
		Driver Prior Action Other	ANE		NOT APPLICABLE					

## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 09/07/2025

		D: 4 (										
	Е	Driver Actions  FAILED TO YIELD F	RIGHT-OI	F-WAY								
_	ΊΈ	.,										
LNO	VEHICL											
_	/EI											
		Owner Name			Owner Address							
02	02	SCOTT HAMILTON			N3671 OX CREEK							
0	0				MONTELLO, WI 53949 , US							
		Sequence Of Eve	ents									
	01	Event MOTOR VEH IN TRA	ANSPOR	T.								
		Event										
	02	LVOIR										
	~	Event										
	03											
	04	Event										
╘		Policy Holder										
		Insurance Company STATE-FARM-GENE	EDAL IN	s co	INDIVIDUAL							
			ENAL-III.	3-00	SCOTT HAMILTON							
		Individual DRIVER			Citations Issued	10						
		SCOTT HAMILTON			Citations Issued 01	Sex MALE						
	AL				Date of Birth	Race						
╘	INDIVIDUAL					WHITE						
L N N	Σ	Address			Driver License Number							
_	N	N3671 OX CREEK RD MONTELLO, WI 53949 , US			STATE: WISCONSIN	N COUNTRY: UNI	TED STATES					
			On Duty Cr	rash	Safety Equipment							
	Sat	ety Equipment	J., Duty 0.	40.1	Calcity Equipment							
		Row		Seat Position	SHOULDER & LAP	BELT						
		01 - FRONT ROW		07 - LEFT								
		Helmet Use			Helmet Compliance							
		E D : :			Tink Council and							
		Eye Protection			Tint Compliance							
	2	Tr	njury Seve	rity	Airbag							
05	900	Injury S	SUSPECT	TED SERIOUS INJUR	NON DEPLOYED							
		Ejected		ection Path			Trapped/Extricated					
		NOT EJECTED	N	OT EJECTED/NOT APPI			NOT TRAPPED					
		Medical Transport			EMS Agency Identifier		EMS Run #					
		EMS GROUND			6000368		Times of Death					
		Hospital ST CLARE HOSP			Date of Death		Time of Death					
		Г	Distracted F	By Source			<u> </u>					
			NOT APP	LICABLE (NOT DISTRA	CTED)							
		Distracted By Action NOT DISTRACTED										
			Striking Uni	it # Location								
		Non Motorist										
		Prior Action		L								

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 09/07/2025

TIND	INDIVIDUAL	Action								
	L	Orug & Alcohol Alcohol Test Given TEST NOT GIVEN	Suspected Alco NO	Alcohol Test Type	Suspected Drug Use NO		Alcohol Test Results	To/From School		
02	900	Drug Test Given TEST NOT GIVEN Drug Type		Drug Test Type		Drug Test Results				
		Individual Condition  APPEARED NORMAL  Violations								
	01	UTC Number <b>BL5020551</b>	Issue To? 005	Statute Number 346.18(3)	Description FAIL/YIELD RIGHT/N	VAY FROM STO	P SIGN			