

6TL0D7W180

25-10215

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

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|  |                                      |  |                                    |   |  |  |                           |
|--|--------------------------------------|--|------------------------------------|---|--|--|---------------------------|
| Document Number Override                       |                                      | Primary Crash Document #                     |                                    | Agency Crash Number<br><b>25-10215</b>    |  | Investigating Officer/Deputy<br><b>DEPUTY K. MUELLER</b> |                           |
| Crash Date<br><b>09/28/2025</b>                |                                      | Crash Time<br><b>04:48 PM</b>                |                                    | Date Arrived<br><b>09/28/2025</b>         |  | Time Arrived<br><b>04:52 PM</b>                          |                           |
| Date Notified<br><b>09/28/2025</b>             |                                      | Time Notified<br><b>04:48 PM</b>             |                                    | Total Units<br><b>01</b>                  |  | Total Injured<br><b>01</b>                               | Total Killed<br><b>00</b> |
| <input type="checkbox"/> On Emergency          | <input type="checkbox"/> Hit and Run | <input type="checkbox"/> Lane Closure        | <input type="checkbox"/> Work Zone | <input type="checkbox"/> Trailer or Towed |  | <input type="checkbox"/> Reporting Threshold             |                           |
| <input type="checkbox"/> Government Property   |                                      | <input type="checkbox"/> Active School Zone  |                                    | School Bus Related<br><b>NO</b>           |  | Tags   |                           |
| <input checked="" type="checkbox"/> Reportable |                                      | Crash Type<br><b>DT4000 (STANDARD CRASH)</b> |                                    | <input type="checkbox"/> Amended          |  | <input type="checkbox"/> Secondary Crash                 |                           |

## Description

|         |  |   |
|---------|--|---|
| Diagram |  | Reconstruction By                       |
|         |  | Photos By<br><b>KMUELLER</b>            |
|         |  | Additional Information<br><b>PHOTOS</b> |

☒ I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

UNIT 1 WAS DRIVING SOUTH ON HWY 136 AND DROVE ACROSS THE CENTER LINE THEN OFF THE ROAD. UNIT 1 DRIVER WAS NOT CONSCIOUS DURING OUR CONTACT AND WAS TRANSPORTED BY EMS, THEN TO MED-FLIGHT. THERE WERE NO MARKS LEADING TO THE CRASH THAT INDICATED THAT THE DRIVER REACTED WHEN CROSSING THE CENTER LINE AND ROAD.

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## Location

|   |                                  |                                   |
|---|----------------------------------|-----------------------------------|
| ON STH136 EB<br>698 FT S<br>OF OAK CREST DR<br>IN THE TOWN OF EXCELSIOR<br>IN SAUK COUNTY | Latitude<br><b>43.526245302</b>  | Longitude<br><b>-89.954593688</b> |
|   | X Coordinate<br><b>261235.75</b> | Y Coordinate<br><b>4823498</b>    |
|   | Structure Type                   |                                   |

## Crash Scene

|  |  |   |               |
|--|--|---|---------------|
| First Harmful Event<br><b>TREE</b>                                     |  | First Harmful Event Location<br><b>ROADSIDE</b>                       |               |
| Manner of Collision<br><b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b> |  | Light Condition<br><b>DAYLIGHT</b>                                    |               |
| Road Surface Condition(s)<br><b>DRY</b>                                |  | Roadway Factor(s)<br><br><b>NONE</b>                                  |               |
| Environment Factor(s)<br><b>NONE</b>                                   |  |   |               |
| Weather Condition(s)<br><b>CLEAR</b>                                   |  |   |               |
| Animal Type  |  | Relation To Trafficway<br><b>TRAFFICWAY - ON ROAD</b>                 |               |
| Crash Classification - Location<br><b>PUBLIC PROPERTY</b>              |  | Crash Classification - Jurisdiction<br><b>NO SPECIAL JURISDICTION</b> |               |
| Tribal Land  |  | Access Control<br><b>NO CONTROL</b>                                   | Special Study |
| Within Interchange Area<br><b>NO</b>                                   | Junction Location<br><b>NON-JUNCTION</b> | Intersection Type<br><b>NOT AN INTERSECTION</b>                       |               |

## Unit Summary

|            |   |  |   |                            |  |  |
|------------|---|--|---|----------------------------|--|--|
| UNIT<br>01 | Unit Status<br><b>IN TRANSIT</b>                  |  | Vehicle Operating As Classification<br><b>D CLASS</b> |                            | Unit Type<br><b>TRUCK</b>                            |  |
|            | Vehicle Type<br><b>UTILITY TRUCK/PICKUP TRUCK</b> |  |   |                            | Operating As Endorsements                            |  |
|            | Total Occs<br><b>1</b>                            | Train/Bus # Recorded                     | Total # Citations Issued<br><b>0</b>                  | Total Trailers<br><b>0</b> | Total HazMat Types<br><b>0</b>                       |  |
|            | Insurance?<br><b>UNKNOWN</b>                      | Direction Of Travel<br><b>SOUTHBOUND</b> | <input type="checkbox"/> Pre CrashTire Mark           | Speed Limit<br><b>55</b>   | Total Lanes<br><b>2</b>                              |  |
|            | Most Harmful Event: Collision With<br><b>TREE</b> |  | Special Function<br><b>NO SPECIAL FUNCTION</b>        |                            | Emergency Motor Vehicle Use<br><b>NOT APPLICABLE</b> |  |
|            | Traffic Way<br><b>TWO-WAY, NOT DIVIDED</b>        |  | Traffic Control<br><b>NO CONTROL</b>                  |                            | Traffic Control Inoperative/Missing<br><b>NO</b>     |  |
|            | Surface Type<br><b>BLACKTOP (BITUMINOUS)</b>      |  | Road Curvature<br><b>STRAIGHT</b>                     |                            | Road Grade<br><b>DOWNHILL</b>                        |  |
|            | Truck Bus or HazMat<br><b>NO</b>                  |  |   |                            |  |  |

|                             |   |  |                                  |                     |   |
|-----------------------------|---|--|----------------------------------|---------------------|---|
| UNIT<br>01<br>VEHICLE<br>01 | <b>Vehicle</b>  |  |                                  |                     |   |
|                             | License Plate Number<br><b>UV7708</b>                     |  | Plate Type<br><b>LTK</b>         | St<br><b>WI</b>     | Country of Issuance<br><b>UNITED STATES</b> |
|                             | Vehicle Identification Number<br><b>3B7HF13Z01G727699</b> |  | Make<br><b>DODG</b>              | Year<br><b>2001</b> | Model<br><b>RAM 1500</b>                    |
|                             | Color<br><b>BLU - BLUE</b>                                |  | Body Style<br><b>PK - PICKUP</b> |                     | Bus Use                                     |
|                             | Initial Contact Point<br><b>11 - LEFT FRONT CORNER</b>    |  | Vehicle Damage                   |                     |   |
|                             | Extent Of Damage<br><b>DISABLING DAMAGE</b>               |  | <b>15 - ALL AREAS</b>            |                     |   |



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|  |  |  |  |   |
|--|--|--|--|---|
| UNIT<br>VEHICLE                              | Towed Due To Damage<br><b>TOWED DUE TO DISABLING DAMAGE</b>            |  | Vehicle Removed By   |   |
|  | What Driver Was Doing<br><b>GOING STRAIGHT</b>                         |  | Vehicle Factors  |   |
|  | Driver Prior Action Other  |  | <b>NOT APPLICABLE</b>  |   |
|  | Driver Actions<br><b>FAILURE TO CONTROL, WRONG SIDE OR WRONG WAY</b>   |  |  |   |
| 01<br>01                                     | Owner Name<br><b>RANDALL FLOYD</b>                                     |  | Owner Address<br><b>103 E WALNUT ST # 2<br/>NORTH FREEDOM, WI 53951 , US</b> |   |
|  | <b>Sequence Of Events</b>  |  |  |   |
| 01<br>02<br>03<br>04                         | Event<br><b>DITCH</b>  |  |  |   |
|  | Event<br><b>TREE</b>   |  |  |   |
|  | Event  |  |  |   |
|  | Event  |  |  |   |
| UNIT<br>INDIVIDUAL                           | <b>Individual</b>  |  |  |   |
|  | DRIVER<br><b>RANDALL FLOYD</b>   |  | Citations Issued<br><b>0</b>   | Sex<br><b>MALE</b>                              |
|  |  |  | Date of Birth  | Race<br><b>WHITE</b>                            |
|  | Address<br><b>103 E WALNUT ST # 2<br/>NORTH FREEDOM, WI 53951 , US</b> |  | Driver License Number<br><b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>      |   |
| 01<br>001                                    | <b>Safety Equipment</b>  |  | On Duty Crash  |   |
|  |  |  | Safety Equipment   |   |
|  | Row<br><b>01 - FRONT ROW</b>   | Seat Position<br><b>07 - LEFT</b>                  | <b>NONE USED - VEHICLE OCCUPANT</b>  |   |
|  | Helmet Use   |  | Helmet Compliance  |   |
| Eye Protection                               |  | Tint Compliance                                    |  |   |
| 01<br>001                                    | <b>Injury</b>  |  | Injury Severity<br><b>SUSPECTED SERIOUS INJUR</b>                            |   |
|  |  |  | Airbag<br><b>NON DEPLOYED</b>  |   |
|  | Ejected<br><b>NOT EJECTED</b>  | Ejection Path<br><b>NOT EJECTED/NOT APPLICABLE</b> |  | Trapped/Extricated<br><b>TRAPPED/EXTRICATED</b> |
|  | Medical Transport<br><b>EMS GROUND</b>                                 |  | EMS Agency Identifier<br><b>6001024</b>                                      | EMS Run #                                       |
| Hospital<br><b>UW HEALTH-AMERICAN CENTER</b> |  | Date of Death                                      | Time of Death  |   |
| <b>Distracted By</b>                         |  | Distracted By Source<br><b>UNKNOWN</b>             |  |   |
| Distracted By Action<br><b>UNKNOWN</b>       |  |  |  |   |
| <b>Non Motorist</b>                          |  | Striking Unit #                                    | Location   |   |

|      |            |                                      |  |                             |                |                           |  |
|------|------------|--------------------------------------|--|-----------------------------|----------------|---------------------------|--|
| UNIT | INDIVIDUAL | Prior Action                         |  |                             |                |                           |  |
|      |            | Action                               |  |                             |                |                           |  |
|      |            | Action Other                         |  |                             | To/From School |                           |  |
|      |            | Drug & Alcohol                       |  | Suspected Alcohol Use<br>NO |                | Suspected Drug Use<br>YES |  |
|      |            | Alcohol Test Given<br>TEST NOT GIVEN |  | Alcohol Test Type           |                | Alcohol Test Results      |  |
|      |            | Drug Test Given<br>TEST NOT GIVEN    |  | Drug Test Type              |                | Drug Test Results         |  |
|      |            | Drug Type                            |  |                             |                |                           |  |
|      |            | Individual Condition                 |  |                             |                |                           |  |
|      |            | OTHER                                |  |                             |                |                           |  |