### 6TL0D0GSP0

SC25-11630

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash I	Primary Crash Document #		Agency Crash Number SC25-11630			Investigating Officer/Deputy DEPUTY G. AKERS			
P0											
	Crash Date 11/07/2025	04:55 PM	Crash Time 04:55 PM		Date Arrived		Time	Time Arrived			
38	Date Notified	Time Notified		Total Ur	nits			ıl Injured	Total Killed	d	
0	11/07/2025	04:57 PM	1	01		00			00		
<u>-0</u>	On Emergency	Hit and Run	Lane Closu			rk Zone		Trailer or T	owed		Reporting Threshold
<b>6TL0D0G</b>	Government Property	Active Sc	chool Zone	NO School	Bus Relat	ed	Tag	S			
	<b>✓</b> Reportable	Crash Type NON-DOMES	Crash Type NON-DOMESTICATED ANIMAL W/ NO INJUR			Amended					Secondary Crash
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
ĺ	_ocation										
- 1	ON CTHP WB					Latitude			Longitud	de	
	496 FT W				43.591101742			-89.904		4029999	
	OF SIMPSON RD IN THE TOWN OF DELLO	NA.				X Coordinate			Y Coordinate		
	IN SAUK COUNTY	14				265573.84375 4			483055	4830557	
						Structure Type					
1	O										
,	Crash Scene										
	First Harmful Event						ful Event L	ocation			
	NON DOMESTICATED AN	IMAL (ALIVE)				ON ROA					
	Manner of Collision					Light Condition					
	00 - NO COLLISION W/VE	HICLE IN TRANS	PORT								
	Road Surface Condition(s)					Roadway	Factor(s)				
	Environment Factor(s)										
ŀ	Weather Condition(s)										
	violation containon(o)										
	Animal Type				Relation To Trafficway						
	DEER				TRAFFICWAY - ON ROAD						
	Crash Classification - Location				Crash Classification - Jurisdiction						
	PUBLIC PROPERTY				NO SPECIAL JURISDICTION						
	Tribal Land			Access Contro		ontrol	ol			Special Study	
ı	Unit Summary										
i	Unit Status Vehicle Operating As C					Classification Unit Type					
	IN TRANSIT D CLASS							AUTOMOBILE			
1	Vehicle Type							As Endorsements			
9	PASSENGER VAN							1			
LINI	Total Occs	Train/Bus # Recor	rain/Bus # Recorded Total # Citations Issu			d Total Traile		lers	Total HazMat Types		3
	4		0				0			0	
	Insurance?	Direction Of Trave	el	Pre CrashTire Sp		Speed Lir			Total Lanes		
	YES	WESTBOUND		Mark							
	Most Harmful Event: Collision With			Special Function				Emergency Motor Vehicle Use			
	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNC			TION		NOT APPLICABLE		
	Traffic Way			Traffic Control				Traffic Control Inoperative/Missing			
	Surface Type			Road Curvature			Road		ad Grade		
	- Сапасо Туро			Noau Curvature				Todd Grade			
J											

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

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Crash Date 11/07/2025
Crash Time 04:55 PM

#### 6TL0D0GSP0 SC25-11630

Wisconsin Motor Vehicle Crash Form DT4000

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 11/07/2025
Crash Time 04:55 PM

	Truck Bus or HazMat								
	Vehicle								
UNIT 01		License Plate Number 9NH824	Plate Type	St MN	Country of Issuance UNITED STATES				
	VEHICLE 01	Vehicle Identification Number 5FNRL6H73JB072008	Make HOND	Year 2018	Model ODYSSEY				
		Color GRY - GRAY Initial Contact Point	Body Style VN - VAN Vehicle Damage	VN - VAN					
		10 - LEFT SIDE FRONT Extent Of Damage DISABLING DAMAGE		08 - LEFT SIDE REAR, 09 - LEFT SIDE MIDDLE, 10 - 6 12 12					
		Towed Due To Disabling Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By PLATTS WRECKER						
		What Driver Was Doing	Vehicle Factors	Vehicle Factors					
		Driver Prior Action Other  Driver Actions							
TIND	VEHICLE	NO CONTRIBUTING ACTION							
5	5	Owner Name	Owner Address						
_		Policy Holder							
FNS		Insurance Company USAA-CASUALTY-INS-CO	INDIVIDUAL JARED KIMPLING						
	INDIMDUAL	Individual							
		JARED KIMPLING	Citations Issued  0	Sex MALE					
E			Date of Birth	Race	<u> </u>				
LNO		Address 3073 121ST AVE NW COON RAPIDS, MN 55433 1768, US	Driver License Number	Driver License Number					
	Sat	On Duty Crash fety Equipment	Safety Equipment	Safety Equipment					
		Row Seat Position	SHOULDER & LAP	SHOULDER & LAP BELT					
	001	Helmet Use	Helmet Compliance						
		Eye Protection	·	Tint Compliance					
2		Injury Seventy NO APPARENT INJURY	Airbag	Airbag					
		Ejected Ejection Path			Trapped/Extricated				
		Medical Transport NOT TRANSPORTED	EMS Agency Identifier		EMS Run #				
		Hospital	Date of Death	ate of Death Time of Death					

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This report does not include any CJIS data.

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# **6TL0D0GSP0** SC25-11630

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

	Distracted By Distracted By Source							
		Distracted By Action						
		Non Motorist Striking Unit #	Location					
		Prior Action						
		Action						
١.	UAL							
LIND	INDIVIDUAL							
	N N							
							I = 15	
		Action Other					To/From School	
	L	Drug & Alcohol NO	Jse	Suspected Drug Use NO				
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type			Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results			
2	001	Drug Type						
		Individual Condition						
		APPEARED NORMAL						