6TL0DKRB34 25-11710

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 Crash Number				Investigating Officer/Deputy DEPUTY M. DUNSE			
334	Crash Date 11/10/2025	Crash Time 05:25 PM			Date Arrived		Time	Time Arrived			
ODKRB	Date Notified 11/10/2025	Time Notified 05:29 PM		Total Units 01		Total 00		Injured	njured Total Killed 00		
<u>.00</u>	On Emergency Hi	and Run Lane Closu		re Work Zone			Trailer or Towed		Reporting Threshold		
6TL	Government Property Active School Zone			School Bus Related NO			Tags	Tags			
	✓ Reportable Crash Type NON-DOMESTICATE			D ANIMAL W/ NO INJUR			Y Amended			Secondary Crash	
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
i	Location										
Í	ON USH12 EB					Latitude		Longitude		de	
	0.37 MI N					43.53803	5111	-89.787332			
	OF RAB N REEDSBURG RD					X Coordina	ate		Y Coord	inate	
	IN THE TOWN OF DELTON IN SAUK COUNTY					274796.7	274796.78125 4824340.5				
	IN SAUK COUNTT					Structure Type					
(Crash Scene										
1	First Harmful Event						ful Event Lo	cation			
	NON DOMESTICATED ANIM	AL (ALIVE)				ON ROADWAY			ļ		
	Manner of Collision					Light Condition					
	00 - NO COLLISION W/VEHICLE IN TRANSPORT										
	Road Surface Condition(s)					Roadway	Factor(s)				
	Environment Factor(s)										
	2										
	Weather Condition(s)										
	Animal Type					Relation To Trafficway					
	DEER					TRAFFICWAY - ON ROAD					
	Crash Classification - Location					Crash Classification - Jurisdiction					
	PUBLIC PROPERTY				NO SPE	CIAL JURI	SDICTION				
	Tribal Land					Access Control Special Study					
	Init Cummon										
	Unit Summary Unit Status		I Vehi	cle Onera	ting As C	laccification		Linit Typo			
	Unit Status IN TRANSIT D CLASS					iassinoation		Unit Type AUTOMOBILE			
	Vehicle Type					Operating As Endorsements					
0	(SPORT) UTILITY VEHICLE							oporaung,			
	Total Occs Train/Bus # Recorded			Total # Citations Issued		Total Trai		ilers Total Haz		Mat Types	
	1		0				0		0		
		Direction Of Travel		Pre Cr	ashTire	1	Speed Lim	it	Total Lane	es	
<u></u>	YES EASTBOUND			Mark					LE-manuel Makes VIII		
UNIT	Most Harmful Event: Collision With			Special Function NO SPECIAL FUNCT			TION		Emergency Motor Vehicle Use NOT APPLICABLE		
	NON DOMESTICATED ANIMAL (ALIVE)										
	Traffic Way			Traffic Control			Traffic Control Inoperative/Missing			uve/iviissing	
	Surface Type			Road Curvature				Road Grade			
				-							

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	Truc	k Bus or HazMat					. ,		
	,	Vehicle							
		License Plate Number		Plate Type	Type St Country of Issuance				
10		ALJ2105		AUT	WI	UNITED STATES			
	_	Vehicle Identification Number		Make	Year	Model			
	2	3C4NJDAN1PT514070		JEEP	2023	COMPASS			
İ		Color		Body Style	•	Bus Use			
		RED - RED		UT - SPORT UTILITY					
١.	Щ	Initial Contact Point		Vehicle Damage			7 8 9 10 11		
LIND	ᅙ	12 - FRONT		<u>.</u>		6 7 7 7			
	VEHICLE	Extent Of Damage		11 - LEFT FRONT CO	5 4 3 2 1				
	5	DISABLING DAMAGE							
		Towed Due To Damage TOWED DUE TO DISABLIN	0.0444.05	Vehicle Removed By					
		What Driver Was Doing	G DAMAGE	CRAIGS TOWING					
		what Driver was Doing		venicle Factors	Vehicle Factors				
		Driver Prior Action Other							
		Driver Prior Action Other							
		Driver Actions							
	ш	NO CONTRIBUTING ACTION							
l⊨	7								
L	VEHICLE								
_	Ä								
İ		Owner Name		Owner Address					
 —	_								
2	2								
╘		Policy Holder							
LNO		Insurance Company	TOMOBII E INC CO	INDIVIDUAL					
		STATE-FARM-MUTUAL-AUTOMOBILE-INS-CO PAIGE SPLINTER							
		Individual							
		DRIVER PAIGE SPLINTER		Citations Issued Sex					
	7	(608) 477-8518		0	FEMALE				
	Ž	(***,		Date of Birth	Race WHITE				
L	DIMDUAL	Addross							
5		Address 659 12TH ST BARABOO, WI 53913 , US		Driver License Number					
	Z			STATE: WISCONSIN COUNTRY: UNITED STATES					
l		On Duty C	rash	Safety Equipment					
	Sa	fety Equipment							
		Row	Seat Position	SHOULDER & LAP	BELT				
İ		Helmet Use		Helmet Compliance					
İ		Eye Protection		Tint Compliance					
01									
	00	Injury Severity NO APPARENT INJURY		Airbag					
		Ejected Ejection Path		Trapped/Extricated					
		Medical Transport		EMS Agency Identifier		EMS Run #			
		NOT TRANSPORTED							
		Hospital		Date of Death		Time of Death			

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Crash Date 11/10/2025

Crash Time 05:25 PM

Distracted By Source								
		Distracted By Action						
		Non Motorist	Striking Unit #	Location				
		Prior Action						
		Action						
	AL							
LIND	INDIVIDUAL							
5	IDIV							
	2							
		Action Other						To/From School
		Action Other						10/1101113011001
	L	Drug & Alcohol NO			Suspected Drug Use NO			
İ		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results	
		TEST NOT GIVEN						
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results			
10	001	Drug Type						
İ		Individual Condition						
		APPEARED NORM	MAL					