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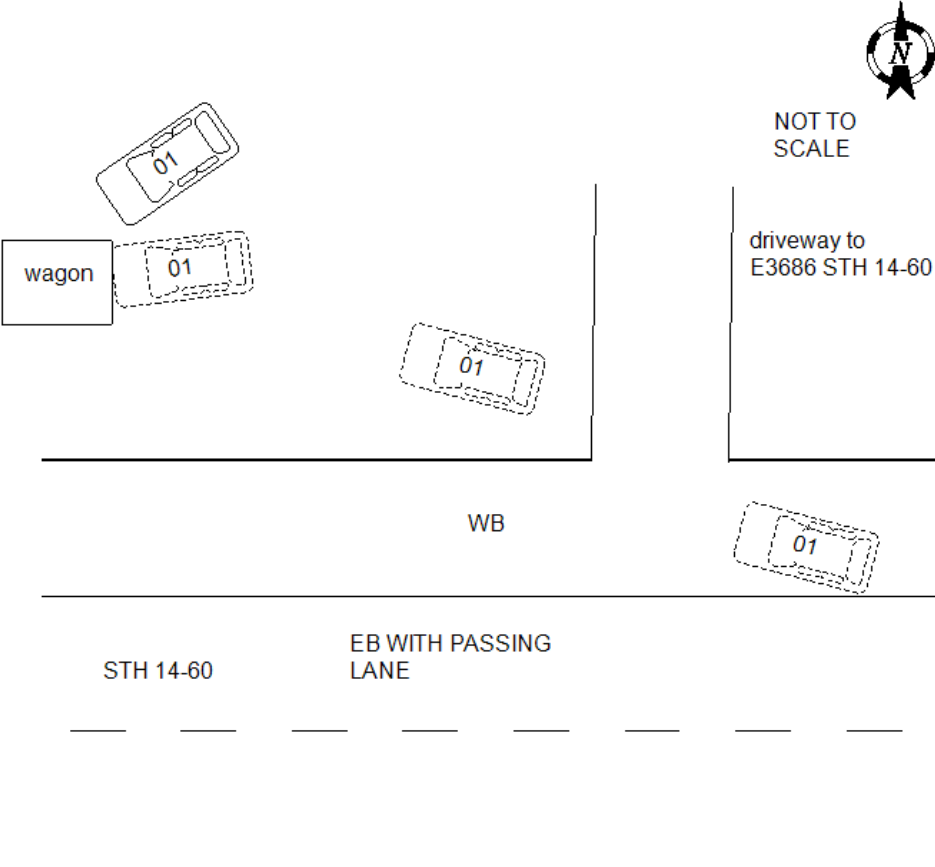
25-11999

WISCONSIN MOTOR VEHICLE
CRASH REPORTSAUK 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 25-11999		Investigating Officer/Deputy SERGEANT E. KNULL	
Crash Date 11/18/2025		Crash Time 02:32 PM		Date Arrived 11/18/2025		Time Arrived 02:56 PM	
Date Notified 11/18/2025		Time Notified 02:32 PM		Total Units 01		Total Injured 01	Total Killed 00
<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 NO		Tags		
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)			<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash

Description

Diagram 	Reconstruction By
	Photos By
	Additional Information NONE

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

UNIT 1 WB ON STH 4-60 LOST CONTROL AND LEFT THE ROAD GOING OVER DRIVEWAY INTO DITCH AND EVENTUALLY STRIKING A WAGON. DRIVER DENIED INJURY AND REFUSED TRANSPORT BY EMS. VEH SUSTAINED DISABLING DAMAGE AND WAS TOWED BYVP AUTO. DRIVER CITED OWL AND NO INSURANCE

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Location

ON USH14 WB 197 FT W OF DYKE RD IN THE TOWN OF SPRING GREEN IN SAUK COUNTY	Latitude 43.189630239	Longitude -90.134052441
	X Coordinate 245327.328125	Y Coordinate 4786643
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event DITCH		First Harmful Event Location SHOULDER RIGHT	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT		Light Condition DAYLIGHT	
Road Surface Condition(s) WET		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) CLOUDY, RAIN			
Animal Type		Relation To Trafficway TRAFFICWAY - NOT ON ROAD	
Crash Classification - Location PUBLIC PROPERTY		Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land		Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION	

Unit Summary

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

UNIT 01 VEHICLE 01	Vehicle				
	License Plate Number AYW4551		Plate Type AUT	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 2T1BR12E01C470386		Make TOYT	Year 2001	Model COROLLA
	Color GRY - GRAY		Body Style SD - SEDAN		Bus Use
	Initial Contact Point 00 - NON-COLLISION		Vehicle Damage 01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT		
Extent Of Damage DISABLING DAMAGE					



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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions SPEED TOO FAST/COND			
01	Owner Name TERESA CERVANTES MENDEZ (956) 215-3173		Owner Address 406 WARAH ST BOSCOBEL, WI 53805 , US	
	Sequence Of Events			
01 02 03 04	Event DITCH			
	Event OTHER OBJECT - NOT FIXED			
	Event			
	Event			
UNIT INDIVIDUAL	Individual			
	DRIVER TERESA CERVANTES MENDEZ (956) 215-3173		Citations Issued 2	Sex FEMALE
	Address 406 WARAH ST BOSCOBEL, WI 53805 , US		Date of Birth	Race
	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
01 001	Safety Equipment		On Duty Crash	
			Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	Injury		Injury Severity POSSIBLE INJURY	
			Airbag DEPLOYED-COMBINATION	
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	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 NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				
Non Motorist		Striking Unit #	Location	

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UNIT INDIVIDUAL	Prior Action			
	Action			
	Action Other			To/From School
	Drug & Alcohol		Suspected Alcohol Use NO	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
	Drug Type			
	Individual Condition APPEARED NORMAL			
	Violations			
	01	UTC Number BK261966	Issue To? 001	Statute Number 343.05(3)(a)
02	UTC Number BK261967	Issue To? 001	Statute Number 344.62(1)	Description OPERATE MOTOR VEHICLE W/O INSURANCE
Property Owner				
01	INDIVIDUAL BRADY SPRECHER (608) 604-8742			Address E3686 USH 14 SPRING GREEN, WI 53588 , US
Fixed Objects Struck				
01	Striking Unit 01	Struck Object OTHER OBJECT - NOT FIXED		Structure Number Damage Tag Number