

6TL0F2KRF9


25-12341

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 <b>25-12341</b>		Investigating Officer/Deputy <b>DEPUTY I. GALVAN</b>	
Crash Date <b>11/29/2025</b>		Crash Time <b>01:49 PM</b>		Date Arrived <b>11/29/2025</b>		Time Arrived <b>02:06 PM</b>	
Date Notified <b>11/29/2025</b>		Time Notified <b>01:51 PM</b>		Total Units <b>01</b>		Total Injured <b>00</b>	Total Killed <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 <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

## Description

Diagram	Reconstruction By
	Photos By <b>I GALVAN</b>
	Additional Information <b>PHOTOS</b>

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

UNIT 1 TRAVELING EASTBOUND ON SNOW COVERED VIRGINIA ST APPROXIMATELY 100 YDS WEST OF SWAN CT. UNIT 1 WAS ATTEMPTING TO NEGOTIATE CURVE BUT SLID OFF ROAD AND STRUCK A TELEPHONE CABLE BOX. NO INJURIES REPORTED. UNIT 1 WAS REMOVED BY THE OPERATOR.

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Location

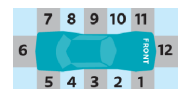
ON VIRGINIA ST 256 FT W OF SWAN CT IN THE TOWN OF EXCELSIOR IN SAUK COUNTY	Latitude <b>43.531083135</b>	Longitude <b>-89.927772877</b>
	X Coordinate <b>263422.1875</b>	Y Coordinate <b>4823958.5</b>
	Structure Type <b>NO STRUCTURE</b>	

Crash Scene

First Harmful Event <b>OTHER FIXED OBJECT</b>		First Harmful Event Location <b>ROADSIDE</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>		Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>WET, SNOW, SLUSH</b>		Roadway Factor(s)  <b>ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)</b>	
Environment Factor(s) <b>WEATHER CONDITIONS</b>			
Weather Condition(s) <b>SNOW</b>			
Animal Type		Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>		Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land		Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>	

Unit Summary

UNIT 01	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>		
	Vehicle Type <b>PASSENGER CAR</b>				Operating As Endorsements		
	Total Occs <b>5</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>		
	Insurance? <b>YES</b>	Direction Of Travel <b>EASTBOUND</b>	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit <b>25</b>	Total Lanes <b>2</b>		
	Most Harmful Event: Collision With <b>OTHER FIXED OBJECT</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>		
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>		
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>CURVE RIGHT</b>		Road Grade <b>LEVEL</b>		
	Truck Bus or HazMat <b>NO</b>						
	UNIT 01 VEHICLE	<b>Vehicle</b>					
		License Plate Number <b>AZP2098</b>		Plate Type <b>AUT</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
Vehicle Identification Number <b>2FMDK4JC0BBA64533</b>		Make <b>FORD</b>	Year <b>2011</b>	Model <b>EDGE</b>			
Color <b>WHI - WHITE</b>		Body Style <b>UT - SPORT UTILITY VEHICLE</b>		Bus Use			
Initial Contact Point <b>12 - FRONT</b>		Vehicle Damage  <b>00 - NO DAMAGE</b>					
Extent Of Damage <b>NO DAMAGE</b>							



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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>	
	What Driver Was Doing <b>NEGOTIATING CURVE</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
01	Owner Name <b>BRIAN REDNER (608) 415-3477</b>		Owner Address <b>E7781 VIRGINIA ST REEDSBURG, WI 53959 , US</b>	
	<b>Sequence Of Events</b>			
01	Event <b>OTHER FIXED OBJECT</b>			
	Event			
	Event			
	Event			
02	Event			
	Event			
03	Event			
	Event			
04	Event			
	Event			
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>RURAL-MUTUAL-INS-CO-(ATTN:-CLAIMS-DEPT)</b>		INDIVIDUAL <b>PORTER REDNER</b>	
UNIT	<b>Individual</b>			
	DRIVER <b>PORTER REDNER (608) 415-3477</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
01	Date of Birth		Race <b>WHITE</b>	
	Address <b>E7781 VIRGINIA ST REEDSBURG, WI 53959 , US</b>		Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01	<b>Safety Equipment</b>		On Duty Crash	
	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>		Row <b>01 - FRONT ROW</b>	
001	Seat Position <b>07 - LEFT</b>		Helmet Use	
	Helmet Compliance		Eye Protection	
001	Tint Compliance		Injury <b>NO APPARENT INJURY</b>	
	Airbag <b>NON DEPLOYED</b>		Ejected <b>NOT EJECTED</b>	
001	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>	
	Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	
001	EMS Run #		Hospital	
	Date of Death		Time of Death	
001	<b>Distracted By</b>			
	Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>			
001	Distracted By Action <b>NOT DISTRACTED</b>			

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UNIT	INDIVIDUAL	<b>Non Motorist</b>		Striking Unit #	Location		
		Prior Action					
		Action					
		Action Other					To/From School
01	001	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>		Suspected Drug Use <b>NO</b>	
		Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type		Alcohol Test Results	
		Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type		Drug Test Results	
		Drug Type					
		Individual Condition <b>APPEARED NORMAL</b>					
		<b>Individual</b>					
		PASSENGER <b>LUKE REDNER</b> (608) 495-7566			Citations Issued <b>0</b>	Sex <b>MALE</b>	
					Date of Birth	Race <b>WHITE</b>	
		Address <b>E7781 VIRGINIA ST</b> <b>REEDSBURG, WI 53959 , US</b>			Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
		01	002	<b>Safety Equipment</b>		On Duty Crash	
Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b>						
Helmet Use				Helmet Compliance			
Eye Protection				Tint Compliance			
<b>Injury</b>				Injury Severity <b>NO APPARENT INJURY</b>		Airbag <b>NON DEPLOYED</b>	
Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>			Trapped/Extricated <b>NOT TRAPPED</b>			
Medical Transport <b>NOT TRANSPORTED</b>				EMS Agency Identifier		EMS Run #	
Hospital				Date of Death		Time of Death	
<b>Distracted By</b>				Distracted By Source			
Distracted By Action							
UNIT	INDIVIDUAL	<b>Non Motorist</b>		Striking Unit #	Location		

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UNIT	INDIVIDUAL	Prior Action		
		Action		
01	002	Action Other		To/From School
		<b>Drug &amp; Alcohol</b> Suspected Alcohol Use <b>NO</b> Suspected Drug Use <b>NO</b>		
01	002	Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results
		Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results
01	002	Drug Type		
		Individual Condition <b>APPEARED NORMAL</b>		
UNIT	INDIVIDUAL	<b>Individual</b>		
		PASSENGER <b>MASON FRY (608) 408-9008</b> Citations Issued <b>0</b> Sex <b>MALE</b> Date of Birth      Race Address <b>2414 RUSSELL CT</b> <b>REEDSBURG, WI 53959 , US</b> Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
01	003	<b>Safety Equipment</b>		
		On Duty Crash      Safety Equipment <b>SHOULDER &amp; LAP BELT</b> Row <b>02 - SECOND ROW</b> Seat Position <b>09 - RIGHT</b> Helmet Use      Helmet Compliance Eye Protection      Tint Compliance		
01	003	<b>Injury</b>		
		Injury Severity <b>NO APPARENT INJURY</b> Airbag <b>NON DEPLOYED</b> Ejected <b>NOT EJECTED</b> Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b> Trapped/Extricated <b>NOT TRAPPED</b> Medical Transport <b>NOT TRANSPORTED</b> EMS Agency Identifier      EMS Run # Hospital      Date of Death      Time of Death		
01	003	<b>Distracted By</b>		
		Distracted By Source Distracted By Action		
01	003	<b>Non Motorist</b>		
		Striking Unit #      Location Prior Action		

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UNIT 01	INDIVIDUAL 003	Action			
		Action Other			To/From School
		<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
		Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type	Alcohol Test Results
		Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type	Drug Test Results
		Drug Type			
		Individual Condition <b>APPEARED NORMAL</b>			
		<b>Individual</b>			
		PASSENGER <b>CHLOE ROLOFF</b> <b>(608) 963-9242</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>
		Address <b>E5381 LUEDTKE RD</b> <b>LA VALLE, WI 53941 , US</b>		Date of Birth	Race <b>WHITE</b>
UNIT 01	INDIVIDUAL 004	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>			
		<b>Safety Equipment</b>			
		On Duty Crash			
		Row <b>02 - SECOND ROW</b>	Seat Position <b>08 - MIDDLE</b>	<b>SHOULDER &amp; LAP BELT</b>	
		Helmet Use		Helmet Compliance	
		Eye Protection		Tint Compliance	
		<b>Injury</b>			
		Injury Severity <b>NO APPARENT INJURY</b>		Airbag <b>NON DEPLOYED</b>	
		Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>	
		Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #
Hospital		Date of Death	Time of Death		
<b>Distracted By</b>		Distracted By Source			
Distracted By Action					
<b>Non Motorist</b>		Striking Unit #	Location		
Prior Action					

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UNIT 01	INDIVIDUAL 004	Action		
		Action Other		To/From School
		<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
		Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results
		Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results
		Drug Type		
		Individual Condition <b>APPEARED NORMAL</b>		
		<b>Individual</b>		
		PASSENGER <b>SKYLER HANKE</b> <b>(608) 415-3126</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>
		Address <b>841 N GROVE ST</b> <b>REEDSBURG, WI 53959 , US</b>		Date of Birth Race
UNIT 01	INDIVIDUAL 005	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
		<b>Safety Equipment</b>	On Duty Crash	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>
		Row <b>02 - SECOND ROW</b>	Seat Position <b>07 - LEFT</b>	
		Helmet Use	Helmet Compliance	
		Eye Protection	Tint Compliance	
		<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
		Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
		Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier	EMS Run #
		Hospital	Date of Death	Time of Death
		<b>Distracted By</b>		Distracted By Source
Distracted By Action				
<b>Non Motorist</b>	Striking Unit #	Location		
	Prior Action			

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UNIT INDIVIDUAL	Action					
	Action Other					To/From School
	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>			
	Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type		Alcohol Test Results	
	Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type		Drug Test Results	
	Drug Type					
	Individual Condition <b>APPEARED NORMAL</b>					
	<b>Property Owner</b>					
PROP OWNER 01	ORGANIZATION/COMPANY <b>FRONTIER COMMUNICATIONS</b> (608) 440-9088			Address <b>231 VINE ST</b> <b>REEDSBURG, WI 53959 , US</b>		
<b>Fixed Objects Struck</b>						
01	Striking Unit <b>01</b>	Struck Object <b>OTHER FIXED OBJECT</b>			Structure Number	Damage Tag Number <b>000</b>