

6TL0DRXHM8

26-00779

WISCONSIN MOTOR VEHICLE  
CRASH REPORTSAUK COUNTY SHERIFFS DEPARTMENT  
1300 LANGE COURT  
BARABOO, WI 53913  
(608) 356-4895

|  |                                      |  |  |  |  |
|--|--------------------------------------|--|--|--|--|
| Document Number Override                     |                                      | Primary Crash Document #                     | Agency Crash Number<br><b>26-00779</b> | Investigating Officer/Deputy<br><b>DEPUTY S. ELLICKSON</b> |  |
| Crash Date<br><b>01/22/2026</b>              |                                      | Crash Time<br><b>01:38 PM</b>                | Date Arrived<br><b>01/22/2026</b>      | Time Arrived<br><b>02:09 PM</b>                            |  |
| Date Notified<br><b>01/22/2026</b>           |                                      | Time Notified<br><b>01:38 PM</b>             | Total Units<br><b>01</b>               | Total Injured<br><b>00</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 type="checkbox"/> Reportable          |                                      | Crash Type<br><b>DT4000 (STANDARD CRASH)</b> |  | <input type="checkbox"/> Amended                           | <input type="checkbox"/> Secondary Crash     |

## Description

|  |  |                                       |
|--|--|---------------------------------------|
| Diagram  |  | Reconstruction By                     |
| <p>Not to Scale</p>  |  |                                       |
|  |  | Photos By                             |
|  |  | Additional Information<br><b>NONE</b> |
| <p><input checked="" type="checkbox"/> I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.</p> <p>UNIT 1 WAS TRAVELING NORTHBOUND ON GOLF COURSE ROAD WHEN IT CAME ACROSS DEEP SNOW ON THE ROADWAY DUE TO HIGH WINDS. UNIT 1 ENTERED THE EAST SIDE DITCH. UNIT 1 DOES NOT BELIEVE THERE WAS ANY DAMAGE TO THE VEHICLE.</p> |  |                                       |

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## Location

|  |                                      |                                   |
|--|--------------------------------------|-----------------------------------|
| INTERSECTION<br>ON GOLF COURSE RD<br>AT HIGH VIEW RD<br>IN THE TOWN OF WESTFIELD<br>IN SAUK COUNTY | Latitude<br><b>43.467577341</b>      | Longitude<br><b>-89.964389658</b> |
|  | X Coordinate<br><b>260211.828125</b> | Y Coordinate<br><b>4817010</b>    |
|  | Structure Type                       |                                   |
|  |                                      |                                   |

## Crash Scene

|  |   |
|--|---|
| First Harmful Event<br><b>DITCH</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>SNOW, SLUSH, ICE</b>                   | Roadway Factor(s)   |
| Environment Factor(s)<br><b>WEATHER CONDITIONS</b>                     | <b>NONE</b>   |
| Weather Condition(s)<br><b>SNOW, SEVERE WINDS</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>INTERSECTION</b>                              |
|  | Intersection Type<br><b>T-INTERSECTION</b>                            |

## Unit Summary

|                |  |   |  |  |
|----------------|--|---|--|--|
| 01<br><br>UNIT | Unit Status<br><b>IN TRANSIT</b>                   | Vehicle Operating As Classification<br><b>D CLASS</b> | Unit Type<br><b>AUTOMOBILE</b>               |  |
|                | Vehicle Type<br><b>(SPORT) UTILITY VEHICLE</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>                           |
|                | Insurance?<br><b>YES</b>                           | Direction Of Travel<br><b>NORTHBOUND</b>              | <input type="checkbox"/> Pre Crash Tire Mark | Speed Limit<br><b>45</b>                             |
|                | Most Harmful Event: Collision With<br><b>DITCH</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                                |   |  |  |
|                | <b>NO</b>  |   |  |  |

## Vehicle

|                   |   |   |                     |   |
|-------------------|---|---|---------------------|---|
| 01<br><br>VEHICLE | License Plate Number<br><b>47565E</b>                     | Plate Type<br><b>END</b>                        | St<br><b>WI</b>     | Country of Issuance<br><b>UNITED STATES</b>   |
|                   | Vehicle Identification Number<br><b>2HKRW2H55KH627753</b> | Make<br><b>HOND</b>                             | Year<br><b>2019</b> | Model<br><b>CR-V</b>  |
|                   | Color<br><b>RED - RED</b>                                 | Body Style<br><b>UT - SPORT UTILITY VEHICLE</b> |                     | Bus Use   |
|                   | Initial Contact Point<br><b>12 - FRONT</b>                | Vehicle Damage                                  |                     |  |
|                   | Extent Of Damage<br><b>NO DAMAGE</b>                      | <b>00 - NO DAMAGE</b>                           |                     |   |

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SAUK COUNTY SHERIFFS DEPARTMENT  
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|  |   |   |  |                    |
|--|---|---|--|--------------------|
| UNIT<br><br><b>VEHICLE</b>                                     | Towed Due To Damage<br><b>NOT TOWED</b>               |   | Vehicle Removed By<br><b>STEVES AUTO SERVICE</b>                     |                    |
|  | What Driver Was Doing<br><b>GOING STRAIGHT</b>        |   | Vehicle Factors  |                    |
|  | Driver Prior Action Other                             |   |  |                    |
|  | Driver Actions<br><b>SPEED TOO FAST/COND</b>          |   |  |                    |
|  | Owner Name<br><b>WILLIAM PIELSTICKER</b>              |   | Owner Address<br><b>E4294 MEADOW DR<br/>HILLPOINT, WI 53937 , US</b> |                    |
| <b>Sequence Of Events</b>                                      |   |   |  |                    |
| 01   | Event<br><b>DITCH</b>                                 |   |  |                    |
| 02   | Event   |   |  |                    |
| 03   | Event   |   |  |                    |
| 04   | Event   |   |  |                    |
| UNIT<br><br><b>INDIVIDUAL</b>                                  | <b>Policy Holder</b>                                  |   |  |                    |
|  | Insurance Company<br><b>STATE-FARM-CLASSIC-INS-CO</b> |   | INDIVIDUAL<br><b>WILLIAM PIELSTICKER</b>                             |                    |
|  | <b>Individual</b>                                     |   |  |                    |
|  | DRIVER<br><b>WILLIAM PIELSTICKER</b>                  |   | Citations Issued<br><b>0</b>   | Sex<br><b>MALE</b> |
|  |   |   | Date of Birth  | Race               |
| Address<br><b>E4294 MEADOW DR<br/>HILLPOINT, WI 53937 , US</b> |   | Driver License Number<br><b>STATE: WISCONSIN COUNTRY: UNITED STATES</b> |  |                    |
|  |   | <b>Safety Equipment</b>   |  |                    |
| On Duty Crash  |   | Safety Equipment<br><b>SHOULDER &amp; LAP BELT</b>                      |  |                    |
|  |   | Row<br><b>01 - FRONT ROW</b>  | Seat Position<br><b>07 - LEFT</b>                                    |                    |
| Helmet Use   |   | Helmet Compliance   |  |                    |
| Eye Protection   |   | Tint Compliance   |  |                    |
| 01   | <b>Injury</b> <b>NO APPARENT INJURY</b>               |   | Airbag<br><b>NON DEPLOYED</b>  |                    |
| 001  |   |   | Trapped/Extricated<br><b>NOT TRAPPED</b>                             |                    |
| Ejected<br><b>NOT EJECTED</b>                                  |   | Ejection Path<br><b>NOT EJECTED/NOT APPLICABLE</b>                      |  |                    |
| Medical Transport<br><b>NOT TRANSPORTED</b>                    |   | EMS Agency Identifier   |  |                    |
| Hospital   |   | EMS Run #   |  |                    |
| Date of Death  |   | Time of Death   |  |                    |
| <b>Distracted By</b> <b>NOT APPLICABLE (NOT DISTRACTED)</b>    |   | Distracted By Source  |  |                    |
|  |   | Distracted By Action<br><b>NOT DISTRACTED</b>                           |  |                    |

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|                                     |  |                                    |                                 |
|-------------------------------------|--|------------------------------------|---------------------------------|
| UNIT<br>INDIVIDUAL<br><br>01<br>001 | <b>Non Motorist</b>                                |                                    |                                 |
|                                     | Striking Unit #                                    | Location                           |                                 |
|                                     | Prior Action                                       |                                    |                                 |
|                                     | Action   |                                    |                                 |
|                                     | Action Other                                       |                                    | To/From School                  |
|                                     | <b>Drug &amp; Alcohol</b>                          | Suspected Alcohol Use<br><b>NO</b> | Suspected Drug Use<br><b>NO</b> |
|                                     | Alcohol Test Given<br><b>TEST NOT GIVEN</b>        | Alcohol Test Type                  | Alcohol Test Results            |
|                                     | Drug Test Given<br><b>TEST NOT GIVEN</b>           | Drug Test Type                     | Drug Test Results               |
|                                     | Drug Type  |                                    |                                 |
|                                     | Individual Condition<br><br><b>APPEARED NORMAL</b> |                                    |                                 |