

6TL0D0GSPF

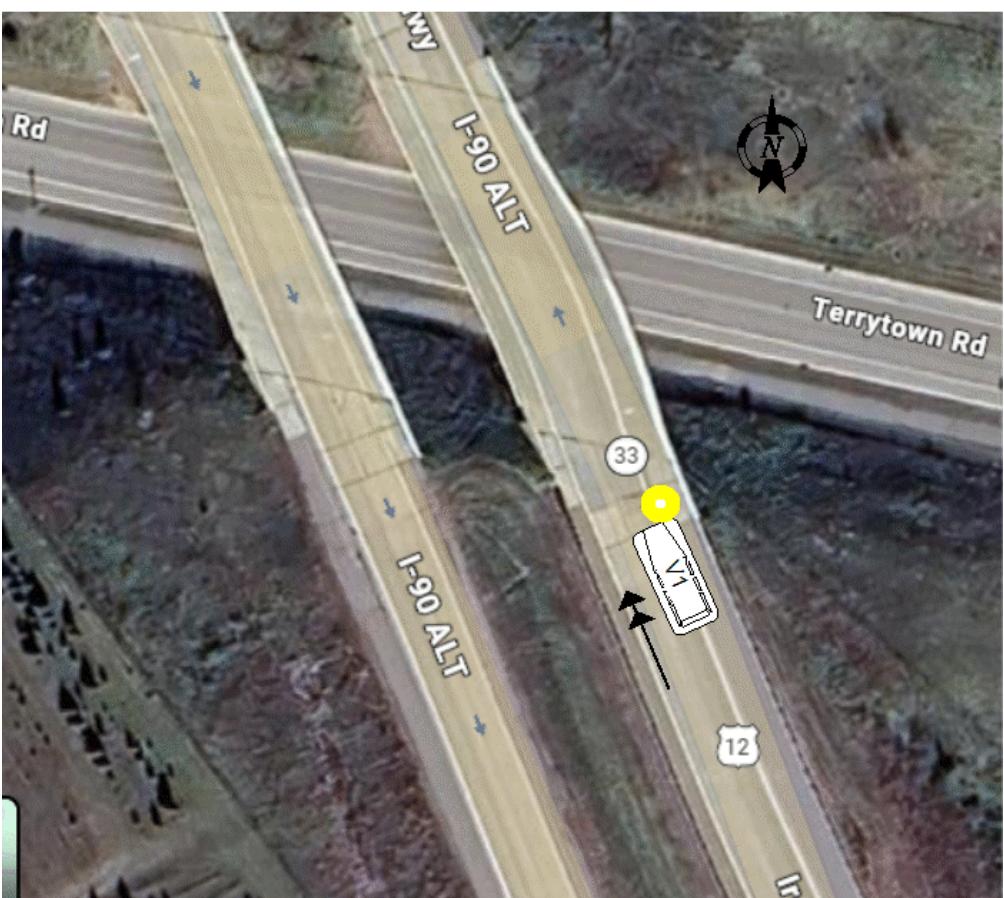
WISCONSIN MOTOR VEHICLE  
CRASH REPORT

26-00942

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

Document Number Override		Primary Crash Document #	Agency Crash Number <b>26-00942</b>	Investigating Officer/Deputy <b>DEPUTY G. AKERS</b>	
Crash Date <b>01/27/2026</b>		Crash Time <b>05:43 PM</b>	Date Arrived <b>01/27/2026</b>	Time Arrived <b>05:55 PM</b>	
Date Notified <b>01/27/2026</b>		Time Notified <b>05:45 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>GA</b>	
Additional Information <b>PHOTOS</b>	
<input checked="" type="checkbox"/> I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.	
V1 WAS TRAVELING WEST ON HWY 12 NEAR THE TERRYTOWN RD. BRIDGE WHEN IT STUCK A PIECE OF FURNITURE IN THE ROADWAY. THE FURNITURE WOULD CAUSE DAMAGE TO THE RIGHT FRONT OF V1, HOWEVER, WAS STILL DRIVABLE. D1 WAS NOT INJURED. D1 WOULD DRIVE V1 AWAY FROM THE SCENE. ALL DEBRIS FROM THE FURNITURE WERE REMOVED FROM THE ROADWAY.	

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## Location

<b>ON USH12 WB 85 FT S OF TERRYTOWN RD IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY</b>	Latitude <b>43.485241259</b>	Longitude <b>-89.7761523</b>
	X Coordinate <b>275504.40625</b>	Y Coordinate <b>4818446.5</b>
Structure Type		

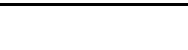
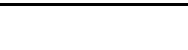
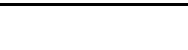
## Crash Scene

First Harmful Event <b>OTHER OBJECT - NOT FIXED</b>	First Harmful Event Location <b>ON ROADWAY</b>
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DARK/UNLIT</b>
Road Surface Condition(s) <b>DRY</b>	Roadway Factor(s)
Environment Factor(s) <b>NONE</b>	<b>NONE</b>
Weather Condition(s) <b>CLEAR</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>
Within Interchange Area <b>NO</b>	Special Study
Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>

## Unit Summary

01  <b>UNIT</b>	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>		
	Vehicle Type <b>(SPORT) UTILITY VEHICLE</b>				Operating As Endorsements		
	Total Occs <b>1</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>WESTBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>65</b>		Total Lanes <b>4</b>	
	Most Harmful Event: Collision With <b>OTHER OBJECT - NOT FIXED</b>		Special Function <b>NO SPECIAL FUNCTION</b>			Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>DIVIDED HWY W/O TRAFFIC BARRIER</b>		Traffic Control <b>NO CONTROL</b>			Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>CONCRETE</b>		Road Curvature <b>STRAIGHT</b>			Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat						
	<b>NO</b>						

## Vehicle

01	01	UNIT VEHICLE	<table border="1"> <tr> <td>License Plate Number <b>340VLS</b></td><td>Plate Type <b>AUT</b></td><td>St <b>WI</b></td><td>Country of Issuance <b>UNITED STATES</b></td></tr> <tr> <td>Vehicle Identification Number <b>JTMBD32V786086178</b></td><td>Make <b>TOYT</b></td><td>Year <b>2008</b></td><td>Model <b>RAV4 SPORT</b></td></tr> <tr> <td>Color <b>BLK - BLACK</b></td><td>Body Style <b>LL - CARRYALL</b></td><td colspan="2" rowspan="3">Bus Use</td></tr> <tr> <td>Initial Contact Point <b>01 - RIGHT FRONT CORNER</b></td><td colspan="3"> Vehicle Damage  <b>01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 12 - FRONT</b> </td></tr> <tr> <td>Extent Of Damage <b>MINOR DAMAGE</b></td><td colspan="3">  </td></tr> </table>	License Plate Number <b>340VLS</b>	Plate Type <b>AUT</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	Vehicle Identification Number <b>JTMBD32V786086178</b>	Make <b>TOYT</b>	Year <b>2008</b>	Model <b>RAV4 SPORT</b>	Color <b>BLK - BLACK</b>	Body Style <b>LL - CARRYALL</b>	Bus Use		Initial Contact Point <b>01 - RIGHT FRONT CORNER</b>	Vehicle Damage <b>01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 12 - FRONT</b>			Extent Of Damage <b>MINOR 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>GOING STRAIGHT</b>	Vehicle Factors	
	Driver Prior Action Other	<b>NOT APPLICABLE</b>	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>		
01	Owner Name <b>KONG XIONG</b>	Owner Address <b>2254 15TH ST S LA CROSSE, WI 54601 , US</b>	
<b>Sequence Of Events</b>			
01	Event <b>OTHER OBJECT - NOT FIXED</b>		
02	Event		
03	Event		
04	Event		
<b>Policy Holder</b>			
UNIT	Insurance Company <b>GEICO-GENERAL-INS-CO</b>	INDIVIDUAL <b>LAUREN XIONG</b>	
INDIVIDUAL	DRIVER <b>LAUREN XIONG</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>
		Date of Birth	Race <b>WHITE</b>
	Address <b>S563 MOCKINGBIRD CT LA VALLE, WI 53941 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
	<b>Safety Equipment</b>		Safety Equipment <b>SHOULDER &amp; LAP BELT</b>
01	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	On Duty Crash
			Helmet Use
			Eye Protection
001	<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
	Hospital		Date of Death
	<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>
	Distracted By Action <b>NOT DISTRACTED</b>		

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UNIT INDIVIDUAL  01 001	<b>Non Motorist</b>		
	Striking Unit #	Location	
	Prior Action		
	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>		