

6TL0DJJ901
25-13080

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

Location		
ON CLINGMAN RD 0.50 MI E OF NEUMAN RD IN THE TOWN OF GREENFIELD IN SAUK COUNTY	Latitude 43.449038729	Longitude -89.689581609
	X Coordinate 282375.34375	Y Coordinate 4814196
	Structure Type	

Crash Scene		
First Harmful Event DITCH	First Harmful Event Location ROADSIDE	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DARK/UNLIT	
Road Surface Condition(s) DRY	Roadway Factor(s) DEBRIS PRIOR ACC, LOOSE GRAVEL	
Environment Factor(s) NONE		
Weather Condition(s) CLOUDY		
Animal Type	Relation To Trafficway TRAFFICWAY - 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

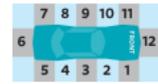
Unit Summary					
UNIT	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
	Vehicle Type PASSENGER CAR		Operating As Endorsements		
	Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 25	Total Lanes 2
	Most Harmful Event: Collision With DITCH		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 CURVE LEFT	Road Grade DOWNHILL	
	Truck Bus or HazMat NO				

01	Vehicle			
	License Plate Number AZA8281	Plate Type AUT	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1N4AL3AP9GC144721	Make NISS	Year 2016	Model ALTIMA
	Color WHI - WHITE	Body Style SD - SEDAN		Bus Use
	Initial Contact Point 00 - NON-COLLISION			

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UNIT VEHICLE	Extent Of Damage NO DAMAGE		Vehicle Damage 00 - NO DAMAGE	
	Towed Due To Damage NOT TOWED		Vehicle Removed By CRAIGS TOWING	
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
UNIT VEHICLE	Driver Actions NO CONTRIBUTING ACTION			
	Owner Name JASON RUSSELL		Owner Address 405 NYGAARD ST OREGON, WI 53575 , US	
UNIT 01	Sequence Of Events			
	01	Event DITCH		
	02	Event		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company STATE-FARM-CLASSIC-INS-CO		INDIVIDUAL ALEXANDER RUSSELL	
UNIT INDIVIDUAL	DRIVER ALEXANDER RUSSELL		Citations Issued 0	Sex MALE
	Address 405 NYGAARD ST OREGON, WI 53575 , US		Date of Birth	Race WHITE
	On Duty Crash		Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
Helmet Use		Helmet Compliance		
Eye Protection		Tint Compliance		
UNIT 001	Injury Injury Severity NO APPARENT INJURY		Airbag NON DEPLOYED	
	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

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UNIT	INDIVIDUAL	Distracted By <small>Distracted By Source</small> NOT APPLICABLE (NOT DISTRACTED)	
		<small>Distracted By Action</small> NOT DISTRACTED	
		Non Motorist	<small>Striking Unit #</small> <small>Location</small>
		<small>Prior Action</small>	
		<small>Action</small>	
		<small>Action Other</small>	
		<small>To/From School</small>	
		Drug & Alcohol <small>Suspected Alcohol Use</small> NO	
		<small>Suspected Drug Use</small> NO	
		01	001
<small>Alcohol Test Results</small>			
<small>Drug Test Given</small> TEST NOT GIVEN	<small>Drug Test Type</small>		
<small>Drug Test Results</small>			
<small>Drug Type</small>			
<small>Individual Condition</small> APPEARED NORMAL			
Individual			
<small>PASSENGER</small> GAVIN VON ALLMEN	<small>Citations Issued</small> 0		
<small>Sex</small> MALE	<small>Date of Birth</small>		
<small>Race</small> WHITE	<small>Driver License Number</small>		
01	002	<small>Address</small> 685 S MAIN ST # 1 OREGON, WI 53575 , US	<small>On Duty Crash</small>
		<small>Safety Equipment</small> SHOULDER & LAP BELT	<small>Row</small> 01 - FRONT ROW
		<small>Seat Position</small> 09 - RIGHT	<small>Helmet Use</small>
		<small>Helmet Compliance</small>	<small>Eye Protection</small>
		<small>Tint Compliance</small>	Injury <small>Injury Severity</small> NO APPARENT INJURY
		<small>Airbag</small> NON DEPLOYED	<small>Ejected</small> NOT EJECTED
		<small>Ejection Path</small> NOT EJECTED/NOT APPLICABLE	<small>Trapped/Extricated</small> NOT TRAPPED
		<small>Medical Transport</small> NOT TRANSPORTED	<small>EMS Agency Identifier</small>
		<small>EMS Run #</small>	<small>Hospital</small>
		<small>Date of Death</small>	<small>Time of Death</small>
01	002	Distracted By <small>Distracted By Source</small>	

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UNIT	Distracted By Action				
	INDIVIDUAL	Non Motorist	Striking Unit #	Location	
		Prior Action			
	Action				
	Action Other		To/From School		
	01	002	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				