

6TL0F3SSKQ
26-02072

WISCONSIN MOTOR VEHICLE
CRASH REPORT

SAUK 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 26-02072		Investigating Officer/Deputy DEPUTY A. KING		
Crash Date 02/28/2026		Crash Time 03:22 PM		Date Arrived 02/28/2026		Time Arrived 03:33 PM		
Date Notified 02/28/2026		Time Notified 03:23 PM		Total Units 02		Total Injured 00	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.

U2 WAS DRIVING WESTBOUND ON KENNEDY RD APPROACHING THE SAUK AND RICHLAND COUNTY LINE WHEN U1 WAS EASTBOUND ON KENNEDY RD AND NAVIGATING THE RIGHT HAND CURVE. WHILE U1 WAS NAVIGATING THE RIGHT HAND CURVE U1 LOST TRACTION DUE TO THE POOR WEATHER CONDITIONS AND SLID INTO THE ONCOMING LANE STRIKING U2. U1 THEN WENT INTO THE DITCH. U2 OPERATOR STATED HE TRIED TO SWERVE TO THE DITCH TO AVOID COLLISION BUT DUE TO THE POOR WEATHER CONDITIONS U1 STRUCK HIS VEHICLE. OPERATOR OF U2 STATED HE THEN WENT INTO THE DITCH. BOTH OPERATORS DENIED INJURIES. U2 OPERATOR DENIED U1 RECEIVING ANY CITATIONS FOR THE TRAFFIC OFFENSE. NACHREINER'S TOWING REMOVED BOTH VEHICLES FROM THE SCENE.

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Location

INTERSECTION ON KENNEDY RD AT COUNTY LINE RD IN THE TOWN OF SPRING GREEN IN SAUK COUNTY	Latitude 43.181107913	Longitude -90.19234844
	X Coordinate 240553.765625	Y Coordinate 4785875.5
	Structure Type	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 02 - FRONT TO FRONT	Light Condition DAYLIGHT	
Road Surface Condition(s) SNOW	Roadway Factor(s) NONE	
Environment Factor(s) WEATHER CONDITIONS		
Weather Condition(s) SNOW		
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 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 35	Total Lanes 2
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT	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 RIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO				

UNIT	VEHICLE	Vehicle			
		License Plate Number BSG7666	Plate Type AUT	St TX	Country of Issuance UNITED STATES
		Vehicle Identification Number 1G1PA5SH6D7149403	Make CHEV	Year 2013	Model CUZE
		Color WHI - WHITE	Body Style SD - SEDAN		Bus Use
		Initial Contact Point 11 - LEFT FRONT CORNER	Vehicle Damage 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER		
Extent Of Damage DISABLING DAMAGE					



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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By NACHREINER'S TOWING	
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions SPEED TOO FAST/COND			
01	Owner Name MELISSA BAXLEY (214) 202-1280		Owner Address 4413 WOODBINE ST FLOWER MOUND, TX 75028 0000, US	
	Sequence Of Events			
01	01	Event MOTOR VEH IN TRANSPORT		
	02	Event DITCH		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company PROGRESSIVE-CLASSIC-INS-CO		INDIVIDUAL MELISSA BAXLEY	
UNIT INDIVIDUAL	Individual			
	DRIVER MELISSA BAXLEY (214) 202-1280		Citations Issued 0	Sex FEMALE
	Address 4413 WOODBINE ST FLOWER MOUND, TX 75028 0000, US		Date of Birth	Race WHITE
	Driver License Number STATE: TEXAS COUNTRY: UNITED STATES			
01	Safety Equipment		On Duty Crash	
	Row 01 - FRONT ROW		Seat Position 07 - LEFT	
	Safety Equipment		SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	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
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				

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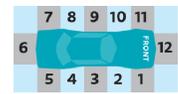
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UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location	
		Prior Action				
		Action				
	Action Other					To/From School
	Drug & Alcohol		Suspected Alcohol Use NO		Suspected Drug Use NO	
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type		Alcohol Test Results	
	Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	
	Drug Type					
	Individual Condition APPEARED NORMAL					

Unit Summary

UNIT	02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE		
		Vehicle Type (SPORT) UTILITY VEHICLE					Operating As Endorsements	
	Total Occs 1		Train/Bus # Recorded		Total # Citations Issued 0		Total Trailers 0	
	Insurance? YES		Direction Of Travel WESTBOUND		<input type="checkbox"/> Pre Crash Tire Mark		Speed Limit 35	
	Total HazMat Types 0		Total Lanes 2		Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		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 LEVEL		Truck Bus or HazMat NO	

UNIT	VEHICLE	Vehicle					
		License Plate Number AYY3926		Plate Type AUT		St WI	
		Country of Issuance UNITED STATES		Vehicle Identification Number 5GAER23708J159673		Make BUIC	
		Year 2008		Model ENCLAVE		Color SIL - SILVER (ALUMINUM)	
		Body Style UT - SPORT UTILITY VEHICLE		Bus Use		Initial Contact Point 11 - LEFT FRONT CORNER	
		Vehicle Damage 09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER		Extent Of Damage DISABLING DAMAGE		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	



WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT VEHICLE	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
	Owner Name LINDSEY ROUNDS (608) 475-4825		Owner Address 202 NEVADA ST BOSCOBEL, WI 53805 , US	
UNIT 02	Sequence Of Events			
	01	Event MOTOR VEH IN TRANSPORT		
	02	Event DITCH		
	03	Event		
UNIT 04	Event			
	Policy Holder			
	Insurance Company PROGRESSIVE-CLASSIC-INS-CO		INDIVIDUAL DANIEL BELL	
	Individual			
UNIT INDIVIDUAL	DRIVER DANIEL BELL (608) 475-4825		Citations Issued 0	Sex MALE
	Address 202 NEVADA ST BOSCOBEL, WI 53805 , US		Date of Birth	Race WHITE
	Driver License Number		STATE: WISCONSIN COUNTRY: UNITED STATES	
	Safety Equipment			
UNIT 02	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 002	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
UNIT 002	Distracted By			
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			
	Distracted By Action NOT DISTRACTED			
UNIT 002	Non Motorist			
	Striking Unit #		Location	

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UNIT	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				
	02	002			