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26-03742

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 26-03742, Investigating Officer/Deputy DEPUTY B. TRAGER, Crash Date 04/16/2026, Crash Time 05:40 AM, Date Arrived, Time Arrived, Date Notified 04/16/2026, Time Notified 05:41 AM, Total Units 01, Total Injured 00, Total Killed 00, On Emergency, Hit and Run, Lane Closure, Work Zone, Trailer or Towed, Reporting Threshold, Government Property, Active School Zone, School Bus Related NO, Tags, Reportable, Crash Type NON-DOMESTICATED ANIMAL W/ NO INJURY, Amended, Secondary Crash

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

Location

ON USH14 EB
716 FT W
OF DYKE RD
IN THE TOWN OF SPRING GREEN
IN SAUK COUNTY
Latitude 43.189640176, Longitude -90.13600695, X Coordinate 245168.53125, Y Coordinate 4786650, Structure Type NO STRUCTURE

Crash Scene

First Harmful Event NON DOMESTICATED ANIMAL (ALIVE), First Harmful Event Location ON ROADWAY, Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT, Light Condition, Road Surface Condition(s), Roadway Factor(s), Environment Factor(s), Weather Condition(s), Animal Type DEER, Relation To Trafficway TRAFFICWAY - ON ROAD, Crash Classification - Location PUBLIC PROPERTY, Crash Classification - Jurisdiction NO SPECIAL JURISDICTION, Tribal Land, Access Control, Special Study

Unit Summary

Unit Status IN TRANSIT, Vehicle Operating As Classification D CLASS, Unit Type TRUCK, Vehicle Type UTILITY TRUCK/PICKUP TRUCK, 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, Pre Crash Tire Mark, Speed Limit, Total Lanes, Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE), Special Function NO SPECIAL FUNCTION, Emergency Motor Vehicle Use NOT APPLICABLE, Traffic Way, Traffic Control, Traffic Control Inoperative/Missing, Surface Type, Road Curvature, Road Grade

NO

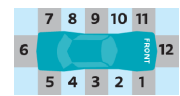
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1300 LANGE COURT  
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		Truck Bus or HazMat	
01	UNIT	<b>Vehicle</b>	
		License Plate Number <b>UJ3769</b>	Plate Type <b>LTK</b>
		Vehicle Identification Number <b>3FTTW8F98PRA37274</b>	Make <b>FORD</b>
		Color <b>WHI - WHITE</b>	Body Style <b>PK - PICKUP</b>
		Initial Contact Point <b>12 - FRONT</b>	Vehicle Damage <b>01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT</b>
		Extent Of Damage <b>DISABLING DAMAGE</b>	
		Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>	Vehicle Removed By
		What Driver Was Doing	Vehicle Factors
		Driver Prior Action Other	
		Driver Actions <b>NO CONTRIBUTING ACTION</b>	
Owner Name	Owner Address		
01	UNIT	<b>Policy Holder</b>	
		Insurance Company <b>AMERICAN-FAMILY-INS-CO</b>	INDIVIDUAL <b>CRAIG THERING</b>
		<b>Individual</b>	
01	UNIT	DRIVER <b>CRAIG THERING (608) 588-4531</b>	Citations Issued <b>0</b>
			Sex <b>MALE</b>
			Date of Birth
			Race <b>WHITE</b>
	Address <b>S12601 E DONALD RD SPRING GREEN, WI 53588 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01	UNIT	<b>Safety Equipment</b>	
		On Duty Crash	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>
		Row	Seat Position
		Helmet Use	Helmet Compliance
		Eye Protection	Tint Compliance
		<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>
			Airbag
	Ejected	Ejection Path	Trapped/Extricated
	Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier	EMS Run #
	Hospital	Date of Death	Time of Death



WISCONSIN MOTOR VEHICLE  
CRASH REPORT

<b>UNIT</b>	<b>Distracted By</b>		Distracted By Source		
	Distracted By Action				
	<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				
<b>01</b>	<b>001</b>	Individual Condition			
		<b>APPEARED NORMAL</b>			