

6TL0D942DH  
26-03917

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 <b>26-03917</b>	Investigating Officer/Deputy <b>DEPUTY M. PETERSON</b>	
Crash Date <b>04/19/2026</b>		Crash Time <b>08:17 PM</b>	Date Arrived <b>04/19/2026</b>	Time Arrived <b>08:28 PM</b>	
Date Notified <b>04/19/2026</b>		Time Notified <b>08:20 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

<p>Diagram</p>	Reconstruction By
	Photos By <b>PETERSON</b>
	Additional Information <b>PHOTOS</b>

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

ON THE ABOVE DATE AND TIME THE ABOVE VEHICLE WAS TRAVELING WESTBOUND ON STH 23. THE VEHICLE EXITED A CURVE THAT WENT FROM SOUTH TO WEST. THE VEHICLE ENTERED THE NORTH DITCH AND CRASHED INTO A WOODED AREA. THE VEHICLE STRUCK NUMEROUS TREES AND BUSHES BEFORE COMING TO REST IN THE WOODS FACING WEST. THERE WAS NO AIRBAG DEPLOYMENT AND THE VEHICLE SUSTAINED DISABLING DAMAGE THROUGHOUT. THE OPERATOR OF THE VEHICLE REPORTED NO INJURIES AND WAS WEARING A SEAT BELT. THE OPERATOR SAID THAT HE HAD PASSED OUT AND FALLEN ASLEEP. THE VEHICLE WAS RECOVERED AND TOWED FROM THE SCENE BY CRAIG'S TOWING.

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Location

ON STH23 WB 731 FT E OF LAKEVIEW RD IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude <b>43.568724996</b>	Longitude <b>-89.831655636</b>
	X Coordinate <b>271331.75</b>	Y Coordinate <b>4827870</b>
	Structure Type <b>NO STRUCTURE</b>	

Crash Scene

First Harmful Event <b>TREE</b>	First Harmful Event Location <b>ROADSIDE</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)  <b>NONE</b>	
Environment Factor(s) <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>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>

Unit Summary

<b>UNIT 01</b>	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>TRUCK</b>		
	Vehicle Type <b>UTILITY TRUCK/PICKUP TRUCK</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"/> <b>Pre Crash Tire Mark</b>	Speed Limit <b>55</b>	Total Lanes <b>2</b>
	Most Harmful Event: Collision With <b>TREE</b>	Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>	Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>	Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>				

<b>UNIT 01</b>	<b>Vehicle</b>			
	License Plate Number <b>778537</b>	Plate Type <b>LTK</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>1FTFW3LD8RFB73297</b>	Make <b>FORD</b>	Year <b>2024</b>	Model <b>F150</b>
	Color <b>BLU - BLUE</b>	Body Style <b>PK - PICKUP</b>		Bus Use
	Initial Contact Point <b>12 - FRONT</b>	Vehicle Damage		
	Extent Of Damage <b>DISABLING DAMAGE</b>	<b>15 - ALL AREAS</b>		



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UNIT VEHICLE	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>CRAIGS TOWING</b>	
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>RAN OFF ROADWAY</b>			
01 01	Owner Name <b>MATTHEW CUMMINGS</b>		Owner Address <b>501 MADISON AVE BARABOO, WI 53913 , US</b>	
	<b>Sequence Of Events</b>			
01 02 03 04	Event <b>RUN OFF ROADWAY RIGHT</b>			
	Event <b>TREE</b>			
	Event			
	Event			
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>PROGRESSIVE-CLASSIC-INS-CO</b>		INDIVIDUAL <b>MATTHEW CUMMINGS</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	DRIVER <b>MATTHEW CUMMINGS</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
			Date of Birth	Race <b>WHITE</b>
	Address <b>501 MADISON AVE BARABOO, WI 53913 , US</b>		Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01 001	<b>Safety Equipment</b>		On Duty Crash	
			Safety Equipment	
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
01 001	<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	
			EMS Run #	
Hospital		Date of Death		
		Time 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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<b>UNIT</b>	<b>INDIVIDUAL</b>	<b>Non Motorist</b>		Striking Unit #	Location	
		Prior Action				
	Action					
	Action Other				To/From School	
	<b>01</b>	<b>001</b>	<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>ASLEEP OR FATIGUED</b>			