

6TL0D0GSPT  
26-04651

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>SC26-04651</b>		Investigating Officer/Deputy <b>DEPUTY G. AKERS</b>	
Crash Date <b>05/08/2026</b>		Crash Time <b>04:18 PM</b>		Date Arrived <b>05/08/2026</b>		Time Arrived <b>04:44 PM</b>	
Date Notified <b>05/08/2026</b>		Time Notified <b>04:20 PM</b>		Total Units <b>02</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>	

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

V1 WAS TRAVELING WEST ON HWY 33 NEAR CTY RD X WHEN IT STRUCK THE REAR OF V2. D1 ADMITTED TO LOOKING DOWN AFTER TALKING ON HIS PHONE AND DID NOT SEE V2 STOPPED IN THE LANE OF TRAVEL. V2 WAS STOPPED TO MAKE A LEFT HAD TURN ON TO CTY RD X. BOTH VEHICLES WERE TOWED BY CRAIG'S TOWING. THERE WERE NO INJURIES.

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Location

ON STH33 WB 50 FT N OF CTHX WB IN THE TOWN OF GREENFIELD IN SAUK COUNTY	Latitude <b>43.481717342</b>	Longitude <b>-89.641243431</b>
	X Coordinate <b>286401.90625</b>	Y Coordinate <b>4817700</b>
	Structure Type	

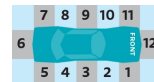
Crash Scene

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>		First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>03 - FRONT TO REAR</b>		Light Condition <b>DAYLIGHT</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>YES</b>	Junction Location <b>INTERSECTION</b>	Intersection Type <b>T-INTERSECTION</b>	

Unit Summary

<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>PASSENGER CAR</b>				Operating As Endorsements	
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>3</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>NO</b>	Direction Of Travel <b>WESTBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</b>	
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</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>CURVE RIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>					

<b>UNIT</b>	<b>VEHICLE</b>	<b>Vehicle</b>			
		License Plate Number <b>ALG4988</b>	Plate Type <b>AUT</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>3MZBN1K7XHM150889</b>	Make <b>MAZD</b>	Year <b>2017</b>	Model <b>3</b>
		Color <b>RED - RED</b>	Body Style <b>HB - HATCHBACK</b>		Bus Use
		Initial Contact Point <b>12 - FRONT</b>	Vehicle Damage <b>01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT</b>		
		Extent Of Damage <b>DISABLING DAMAGE</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 <b>NOT APPLICABLE</b>	
		Driver Prior Action Other			
		Driver Actions <b>OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER</b>			
01	01	Owner Name <b>JAMESON VALDEZ (608) 444-6499</b>		Owner Address <b>427 CHESTNUT ST BARABOO, WI 53913 , US</b>	
		<b>Sequence Of Events</b>			
UNIT	INDIVIDUAL	Event <b>MOTOR VEH IN TRANSPORT</b>			
		Event			
		Event			
		Event			
01	001	DRIVER <b>JAMESON VALDEZ (608) 444-6499</b>		Citations Issued <b>3</b>	Sex <b>MALE</b>
		Address <b>427 CHESTNUT ST BARABOO, WI 53913 , US</b>		Date of Birth	Race <b>WHITE</b>
		Driver License Number			
		<b>Safety Equipment</b>			
On Duty Crash		Safety Equipment <b>SHOULDER &amp; LAP BELT</b>			
Row <b>01 - FRONT ROW</b>		Seat Position <b>07 - LEFT</b>			
Helmet Use		Helmet Compliance			
Eye Protection		Tint Compliance			
<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>		Airbag <b>DEPLOYED-FRONT</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>HAND-HELD MOBILE PHONE</b>			
Distracted By Action <b>MANUALLY OPERATING(TEXTING,DIALING,PLAYING GAME ETC)</b>					
<b>Non Motorist</b>		Striking Unit #		Location	

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UNIT	INDIVIDUAL	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>				
	<b>Violations</b>				
	01	001	UTC Number <b>BJ677931</b>	Issue To? <b>001</b>	Statute Number <b>346.89(1)</b>
02		UTC Number <b>BJ677932</b>	Issue To? <b>001</b>	Statute Number <b>344.62(1)</b>	Description <b>OPERATE MOTOR VEHICLE W/O INSURANCE</b>
03		UTC Number <b>BJ677933</b>	Issue To? <b>001</b>	Statute Number <b>341.04(1)</b>	Description <b>NON-REGISTRATION OF AUTO, ETC</b>

**Unit Summary**

UNIT	02	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"/> <b>Pre CrashTire Mark</b>		Speed Limit <b>55</b>	Total Lanes <b>2</b>
		Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</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>CURVE RIGHT</b>			Road Grade <b>LEVEL</b>	
		Truck Bus or HazMat <b>NO</b>							

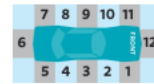
**Vehicle**

02	02	License Plate Number <b>AUP5579</b>		Plate Type <b>AUT</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
		Vehicle Identification Number <b>JF2SKAMC8PH502989</b>		Make <b>SUBA</b>	Year <b>2023</b>	Model <b>FORESTER</b>	
		Color <b>BLK - BLACK</b>		Body Style <b>UT - SPORT UTILITY VEHICLE</b>			Bus Use

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UNIT VEHICLE	Initial Contact Point <b>06 - REAR</b>	Vehicle Damage <b>05 - RIGHT REAR CORNER, 06 - REAR, 07 - LEFT REAR CORNER</b>	
	Extent Of Damage <b>DISABLING DAMAGE</b>		
	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>	Vehicle Removed By <b>CRAIGS TOWING</b>	
	What Driver Was Doing <b>STOP IN TRAFFIC</b>	Vehicle Factors <b>NOT APPLICABLE</b>	
UNIT VEHICLE	Driver Prior Action Other		
	Driver Actions <b>NO CONTRIBUTING ACTION</b>		
02 02	Owner Name <b>ANDREA PAWLAK</b>	Owner Address <b>E12769 CLINGMANS RD BARABOO, WI 53913 , US</b>	
	<b>Sequence Of Events</b>		
01 02 03 04	Event <b>MOTOR VEH IN TRANSPORT</b>		
	Event		
	Event		
	Event		
UNIT 02	<b>Policy Holder</b>		
	Insurance Company <b>STATE-FARM-GENERAL-INS-CO</b>	INDIVIDUAL <b>ANDREA PAWLAK</b>	
UNIT INDIVIDUAL	<b>Individual</b>		
	DRIVER <b>ANDREA PAWLAK</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>
		Date of Birth	Race <b>WHITE</b>
	Address <b>E12769 CLINGMANS RD BARABOO, WI 53913 , US</b>	Driver License Number	
02 002	<b>Safety Equipment</b>		On Duty Crash
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	<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

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UNIT	INDIVIDUAL	<b>Distracted By</b>		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			
		Distracted By Action NOT DISTRACTED					
		<b>Non Motorist</b>	Striking Unit #	Location			
			Prior Action				
		Action					
		Action Other					To/From School
		<b>Drug &amp; Alcohol</b>		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							