

6TL0DRXHMR  
26-05824

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>26-05824</b>		Investigating Officer/Deputy <b>DEPUTY S. ELLICKSON</b>	
Crash Date <b>06/05/2026</b>		Crash Time <b>03:08 PM</b>		Date Arrived <b>06/05/2026</b>		Time Arrived <b>03:37 PM</b>	
Date Notified <b>06/05/2026</b>		Time Notified <b>03:08 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
		Additional Information <b>PHOTOS</b>

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

UNIT 2 WAS ORIGINALLY STOPPED AT THE STOP LIGHT ON USH 12 AT I 90 GOING NORTHBOUND. WHEN THE LIGHT TURNED GREEN UNIT 2 CONTINUED THROUGH THE LIGHT IN THE MIDDLE LANE. UNIT 1 WAS GOING NORTHBOUND ON USH 12 AND SAW THE LIGHT WAS GREEN. UNIT 1 ADMITTED SHE MUST OF LOOKED DOWN TO GET SODA OR THE SORT AND WHEN LOOKED UP UNIT 2 WAS RIGHT IN FRONT OF HER. UNIT 1 ATTEMPTED TO SWERVE INTO THE FAR LEFT LANE TO AVOID HITTING UNIT 2 BUT WAS UNSUCCESSFUL.

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Location

Table with 3 columns: Location details (INTERSECTION ON USH12 WB AT IH90 EB...), Latitude (43.56594049), Longitude (-89.778312122), X Coordinate (275629.28125), Y Coordinate (4827415.5), and Structure Type.

Crash Scene

Table with 4 columns: First Harmful Event (MOTOR VEH IN TRANSPORT), First Harmful Event Location (ON ROADWAY), Manner of Collision (03 - FRONT TO REAR), Light Condition (DAYLIGHT), Road Surface Condition(s) (DRY), Roadway Factor(s) (NONE), Environment Factor(s) (NONE), Weather Condition(s) (CLEAR), Animal Type, Relation To Trafficway (TRAFFICWAY - ON ROAD), Crash Classification - Location (PUBLIC PROPERTY), Crash Classification - Jurisdiction (NO SPECIAL JURISDICTION), Tribal Land, Access Control (FULL CONTROL), Special Study, Within Interchange Area (YES), Junction Location (INTERSECTION), Intersection Type (T-INTERSECTION).

Unit Summary

Table with 5 columns: 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 (1), Total Trailers (0), Total HazMat Types (0), Insurance? (YES), Direction Of Travel (NORTHBOUND), Pre Crash Tire Mark, Speed Limit (45), Total Lanes (5), Most Harmful Event: Collision With (MOTOR VEH IN TRANSPORT), Special Function (NO SPECIAL FUNCTION), Emergency Motor Vehicle Use (NOT APPLICABLE), Traffic Way (DIVIDED HWY W/TRAFFIC BARRIER), Traffic Control (TRAFFIC SIGNAL), Traffic Control Inoperative/Missing (NO), Surface Type (BLACKTOP (BITUMINOUS)), Road Curvature (STRAIGHT), Road Grade (DOWNHILL), Truck Bus or HazMat (NO).

Table with 4 columns: License Plate Number (372XYJ), Plate Type (AUT), St (WI), Country of Issuance (UNITED STATES), Vehicle Identification Number (KMHCN3AC3AU172733), Make (HYUN), Year (2010), Model (ACCENT), Color (BLK - BLACK), Body Style (HB - HATCHBACK), Bus Use, Initial Contact Point (02 - RIGHT SIDE FRONT), Vehicle Damage (02 - RIGHT SIDE FRONT), Extent Of Damage (DISABLING DAMAGE). Includes a diagram of a car with damage indicators.

WISCONSIN MOTOR VEHICLE  
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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>OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER</b>			
01	Owner Name <b>PAMELA REICHE (608) 472-1762</b>		Owner Address <b>1870 COUNTY ROAD F # 58 FRIENDSHIP, WI 53934 , US</b>	
	<b>Sequence Of Events</b>			
01	01	Event <b>MOTOR VEH IN TRANSPORT</b>		
	02	Event		
	03	Event		
	04	Event		
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>PROGRESSIVE-CLASSIC-INS-CO</b>		INDIVIDUAL <b>PAMELA REICHE</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	DRIVER <b>PAMELA REICHE (608) 472-1762</b>		Citations Issued <b>1</b>	Sex <b>FEMALE</b>
	Address <b>1870 COUNTY ROAD F # 58 FRIENDSHIP, WI 53934 , US</b>		Date of Birth	Race <b>WHITE</b>
	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>			
01	<b>Safety Equipment</b>		On Duty Crash	
	Row <b>01 - FRONT ROW</b>		Seat Position <b>07 - LEFT</b>	
	Helmet Use		Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
	Eye Protection		Helmet Compliance	
	Tint Compliance		Airbag <b>NON DEPLOYED</b>	
	<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</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		Distracted By Source <b>PASSENGER/OTHER NON-MOTORIST</b>		
<b>Distracted By</b>				
Distracted By Action <b>OTHER ACTION (LOOKING AWAY FROM TASK ETC)</b>				

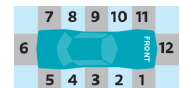
WISCONSIN MOTOR VEHICLE  
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UNIT	INDIVIDUAL	<b>Non Motorist</b>		Striking Unit #	Location	
		Prior Action				
		Action				
	Action Other				To/From School	
	01	001	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
			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>CONFUSED OR DISORIENTED (NON LUCID)</b>			
	01	<b>Violations</b>				
UTC Number <b>BJ679482</b>		Issue To? <b>001</b>	Statute Number <b>346.89(1)</b>	Description <b>INATTENTIVE DRIVING</b>		

Unit Summary

UNIT	02	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>2</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>NORTHBOUND</b>	<input type="checkbox"/> <b>Pre Crash Tire Mark</b>	Speed Limit <b>45</b>	Total Lanes <b>5</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>DIVIDED HWY W/TRAFFIC BARRIER</b>		Traffic Control <b>TRAFFIC SIGNAL</b>		Traffic Control Inoperative/Missing <b>NO</b>		
		Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>DOWNHILL</b>		
		Truck Bus or HazMat <b>NO</b>						

02	02	<b>Vehicle</b>				
		License Plate Number <b>VS5878</b>	Plate Type <b>LTK</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
		Vehicle Identification Number <b>3GCUKREC3JG492927</b>	Make <b>CHEV</b>	Year <b>2018</b>	Model <b>SILVERADO</b>	
		Color <b>GRAY - GRAY</b>	Body Style <b>PK - PICKUP</b>		Bus Use	
		Initial Contact Point <b>07 - LEFT REAR CORNER</b>				



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UNIT VEHICLE	Vehicle Damage	
	Extent Of Damage <b>FUNCTIONAL DAMAGE</b>	<b>07 - LEFT REAR CORNER</b>
	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OPERATOR</b>
	What Driver Was Doing <b>GOING STRAIGHT</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>RYAN ERDMANN (608) 225-0647</b>	Owner Address <b>413 BENTWOOD DR MARSHALL, WI 53559 , US</b>
	<b>Sequence Of Events</b>	
01 02 03 04	Event <b>MOTOR VEH IN TRANSPORT</b>	
	Event	
	Event	
	Event	
UNIT	<b>Policy Holder</b>	
	Insurance Company <b>ROCKFORD-MUTUAL-INS-CO</b>	INDIVIDUAL <b>RYAN ERDMANN</b>
UNIT INDIVIDUAL	<b>Individual</b>	
	DRIVER <b>RYAN ERDMANN (608) 225-0647</b>	Citations Issued <b>0</b>
		Sex <b>MALE</b>
		Date of Birth <b>WHITE</b>
	Address <b>413 BENTWOOD DR MARSHALL, WI 53559 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>
02 002	<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		
<b>Injury</b>		Airbag
Injury Severity <b>NO APPARENT INJURY</b>	<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 <b>NOT APPLICABLE (NOT DISTRACTED)</b>	
		Distracted By Action <b>NOT DISTRACTED</b>	
		<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	
Individual Condition <b>APPEARED NORMAL</b>			
UNIT	INDIVIDUAL	<b>Individual</b>	
		PASSENGER <b>JON STRANGSTALIEN</b> (608) 333-2989	Citations Issued <b>0</b> Sex <b>MALE</b>
			Date of Birth Race <b>WHITE</b>
		Address <b>1306 ELLEN AVE</b> <b>MADISON, WI 53716 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>
		<b>Safety Equipment</b>	On Duty Crash Safety Equipment <b>SHOULDER &amp; LAP BELT</b>
		Row <b>01 - FRONT ROW</b> Seat Position <b>09 - RIGHT</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		
UNIT	INDIVIDUAL	<b>Distracted By</b> Distracted By Source	

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UNIT	Distracted By Action				
	<b>Non Motorist</b>	Striking Unit #	Location		
		Prior Action			
	<b>INDIVIDUAL</b>	Action			
		Action Other		To/From School	
		<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use	Suspected Drug Use	
			<b>NO</b>	<b>NO</b>	
			Alcohol Test Given	Alcohol Test Type	Alcohol Test Results
	<b>TEST NOT GIVEN</b>				
	Drug Test Given	Drug Test Type	Drug Test Results		
<b>TEST NOT GIVEN</b>					
02	003	Drug Type			
		Individual Condition			
		<b>APPEARED NORMAL</b>			