

6TL0F8QZ0K  
26-06705

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>26-6705</b>		Investigating Officer/Deputy <b>DEPUTY J. GREENWOOD</b>	
Crash Date <b>06/26/2026</b>		Crash Time <b>11:05 AM</b>		Date Arrived <b>06/26/2026</b>		Time Arrived <b>11:19 AM</b>	
Date Notified <b>06/26/2026</b>		Time Notified <b>11:07 AM</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>DEPUTY GREENWOOD</b>
	Additional Information <b>PHOTOS</b>

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

UNIT 1 WAS SB ON WEST PINE ST IN THE RIGHT LANE. UNIT 2 WAS SB ON WEST PINE ST IN THE LEFT LANE. UNIT 1 CHANGED LANES WITHOUT LOOKING AND SIDE SWIPED UNIT 2.

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Location

ON STH136 EB 154 FT S OF CHESTNUT ST IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	Latitude <b>43.472491446</b>	Longitude <b>-89.768922588</b>
	X Coordinate <b>276041.9375</b>	Y Coordinate <b>4817011</b>
	Structure Type <b>NO STRUCTURE</b>	

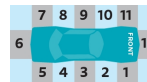
Crash Scene

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>		First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>01 - ANGLE</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>CLOUDY</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</b>	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>2</b>	Train/Bus # Recorded	Total # Citations Issued <b>1</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>SOUTHBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>30</b>	Total Lanes <b>4</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 MEDIAN W/BARRIER</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</b>	<b>VEHICLE</b>	<b>Vehicle</b>			
		License Plate Number <b>BAZ1202</b>	Plate Type <b>AUT</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>ZACCJADT1FPC20755</b>	Make <b>JEEP</b>	Year <b>2015</b>	Model <b>RENEGADE</b>
		Color <b>RED - RED</b>	Body Style <b>UT - SPORT UTILITY VEHICLE</b>		Bus Use
		Initial Contact Point <b>11 - LEFT FRONT CORNER</b>	Vehicle Damage		
		Extent Of Damage <b>MINOR DAMAGE</b>	<b>10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER</b>		



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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OWNER</b>
	What Driver Was Doing <b>CHANGING LANES</b>	Vehicle Factors <b>NOT APPLICABLE</b>
	Driver Prior Action Other	
	Driver Actions	
01	Owner Name <b>SHERRY KOEHN</b>	Owner Address <b>1958 CUMBERLAND AVE ARKDALE, WI 54613 , US</b>
<b>Sequence Of Events</b>		
01	Event <b>CROSS CENTERLINE</b>	
02	Event <b>MOTOR VEH IN TRANSPORT</b>	
03	Event	
04	Event	
UNIT	<b>Policy Holder</b>	
	Insurance Company <b>PROGRESSIVE-UNIVERSAL-INSURANCE-COMP</b>	INDIVIDUAL <b>SHERRY KOEHN</b>
UNIT INDIVIDUAL	<b>Individual</b>	
	DRIVER <b>SHERRY KOEHN</b>	Citations Issued <b>1</b>
		Sex <b>FEMALE</b>
		Date of Birth <b>WHITE</b>
	Address <b>1958 CUMBERLAND AVE ARKDALE, WI 54613 , US</b>	Driver License Number
01 001	<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>
	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
	Hospital	EMS Run #
	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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UNIT	INDIVIDUAL	<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>ROBERT KOEHN</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>		
		Date of Birth		Race <b>WHITE</b>			
		Address <b>1958 CUMBERLAND AVE ARKDALE, WI 54613 , US</b>		Driver License Number			
		<b>Safety Equipment</b>		On Duty Crash		Safety Equipment	
		Row <b>01 - FRONT ROW</b>		Seat Position <b>09 - RIGHT</b>		<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			
<b>Distracted By</b>		Distracted By Source					
Distracted By Action							
<b>Non Motorist</b>		Striking Unit #		Location			

Wisconsin Motor Vehicle Crash  
Form DT4000

This report does not include any CJIS data.  
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Crash Date **06/26/2026**  
Crash Time **11:05 AM**

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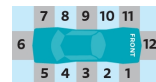
UNIT	INDIVIDUAL	Prior Action			
		Action			
		Action Other			To/From School
	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>	
	Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type		Alcohol Test Results
	Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type		Drug Test Results
	Drug Type				
	Individual Condition <b>APPEARED NORMAL</b>				
	<b>Violations</b>				
	01	002	UTC Number <b>BK741617</b>	Issue To? <b>001</b>	Statute Number <b>346.13(1)</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>SOUTHBOUND</b>		<input type="checkbox"/> Pre Crash Tire Mark		Speed Limit <b>30</b>		Total Lanes <b>4</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 MEDIAN W/BARRIER</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>								

**Vehicle**

UNIT	VEHICLE	02	License Plate Number <b>AJR5972</b>						Plate Type <b>AUT</b>		St <b>WI</b>		Country of Issuance <b>UNITED STATES</b>	
			Vehicle Identification Number <b>5GAET13P642214322</b>						Make <b>BUIC</b>		Year <b>2004</b>		Model <b>RAINIER</b>	
			Color <b>SIL - SILVER (ALUMINUM)</b>						Body Style <b>UT - SPORT UTILITY VEHICLE</b>				Bus Use	
			Initial Contact Point <b>02 - RIGHT SIDE FRONT</b>						Vehicle Damage <b>02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 04 - RIGHT SIDE REAR, 05 - RIGHT REAR CORNER</b>					
			Extent Of Damage <b>MINOR DAMAGE</b>											



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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OWNER</b>	
	What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors	
	Driver Prior Action Other	<b>NOT APPLICABLE</b>	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>		
02	Owner Name <b>DAWN FISKE-THOMAS</b>	Owner Address <b>227 1ST AVE # 412 BARABOO, WI 53913 , US</b>	
	<b>Sequence Of Events</b>		
01	Event <b>MOTOR VEH IN TRANSPORT</b>		
	Event		
	Event		
	Event		
UNIT	<b>Policy Holder</b>		
	Insurance Company <b>ERIE-INS-CO</b>	INDIVIDUAL <b>DAWN FISKE-THOMAS</b>	
UNIT INDIVIDUAL	<b>Individual</b>		
	DRIVER <b>DAWN FISKE-THOMAS</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>
		Date of Birth	Race <b>WHITE</b>
	Address <b>227 1ST AVE # 412 BARABOO, WI 53913 , US</b>	Driver License Number	
02 003	<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	
Hospital		EMS Run #	
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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UNIT	INDIVIDUAL	<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>				