

6TL0D7W18V

26-06889

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 26-06889		Investigating Officer/Deputy DEPUTY K. MUELLER	
Crash Date 06/30/2026		Crash Time 03:50 PM		Date Arrived 06/30/2026		Time Arrived 04:11 PM	
Date Notified 06/30/2026		Time Notified 03:57 PM		Total Units 02		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 DT4000 (STANDARD CRASH)		☐ Amended		☐ Secondary Crash	

Description

Diagram	Reconstruction By
	Photos By
	Additional Information NONE

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

UNIT 1 WAS FOLLOWING UNIT 2 IN TO THE ROUNDABOUT. UNIT 2 WAS IN THE INSIDE LEFT LANE AND UNIT 1 WENT TO PASS ON THE RIGHT. UNIT 2 WENT IN TO UNIT 1'S LANE IN THE ROUNDABOUT. THE DRIVER OF UNIT 2 SAID HE DID NOT SEE UNIT 1. UNIT 2 COLLIDED WITH UNIT 1. THE DRIVER OF UNIT 1 DID NOT KNOW A COLLISION HAD OCCURRED AT THIS POINT AND SAID HE WAS CUT OFF IN THE ROUNDABOUT. THE DRIVER OF UNIT 1 WENT TO PASS UNIT 2 ON THE LEFT AFTER UNIT 1 CHANGED LANES. THE DRIVER OF 1 SAID WHEN HE PASSED, THE DRIVER OF UNIT 2 DROVE IN TO HIS LANE. THE VEHICLES SIDE SWIPED EACH OTHER CAUSING DAMAGE TO UNIT 1 PASSENGER SIDE MIRROR AND UNIT 2 DRIVERS SIDE MIRROR. BOTH CALLED AFTER THE ACCIDENT HAD OCCURRED AND WERE NO LONGER ON SCENE. THE DRIVER OF UNIT 2 SAID THE SPEED OF UNIT 1 WAS A FACTOR.

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Location

ON STH33 EB 49 FT W OF STH33 EB IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	Latitude 43.474523603	Longitude -89.775953851
	X Coordinate 275480.71875	Y Coordinate 4817255.5
	Structure Type NO STRUCTURE	

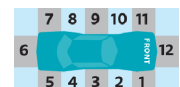
Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT		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 NO CONTROL	Special Study
Within Interchange Area YES	Junction Location INTERSECTION-RELATED	Intersection Type ROUNDBOUT	

Unit Summary

UNIT 01	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type (SPORT) UTILITY VEHICLE				Operating As Endorsements	
	Total Occs 3	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel EASTBOUND	☐ Pre CrashTire Mark	Speed Limit 35	Total Lanes 4	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way ENTRANCE/EXIT RAMP		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature CURVE LEFT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

UNIT 01 VEHICLE 01	Vehicle				
	License Plate Number ANY2997		Plate Type AUT	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1C4RDJDGXE357698		Make DODG	Year 2014	Model DURANGO
	Color GRY - GRAY		Body Style UT - SPORT UTILITY VEHICLE		Bus Use
	Initial Contact Point 03 - RIGHT SIDE MIDDLE		Vehicle Damage 03 - RIGHT SIDE MIDDLE		
	Extent Of Damage MINOR DAMAGE				



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UNIT	VEHICLE	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR		
		What Driver Was Doing OVERTAKE LEFT	Vehicle Factors		
		Driver Prior Action Other	NOT APPLICABLE		
		Driver Actions UNKNOWN			
01	01	Owner Name JEREMY SCHMIDT (608) 548-3806	Owner Address N5799 ZINDORF RD NEW LISBON, WI 53950 , US		
		Sequence Of Events			
01	01	Event MOTOR VEH IN TRANSPORT			
	02	Event			
	03	Event			
	04	Event			
UNIT	INDIVIDUAL	Policy Holder			
		Insurance Company LIBERTY-MUTUAL-INS-CO	INDIVIDUAL JEREMY SCHMIDT		
01	001	Individual			
		DRIVER JEREMY SCHMIDT (608) 548-3806	Citations Issued 0	Sex MALE	
			Date of Birth	Race WHITE	
		Address N5799 ZINDORF RD NEW LISBON, WI 53950 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
01	001	Safety Equipment			
		On Duty Crash	Safety Equipment		
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
		Helmet Use	Helmet Compliance		
01	001	Eye Protection	Tint Compliance		
		Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED	
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED	
		Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #	
01	001	Hospital	Date of Death	Time of Death	
		Distracted By	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED					

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UNIT INDIVIDUAL	01	001	Non Motorist	Striking Unit #	Location			
			Prior Action					
			Action					
	Action Other					To/From School		
	Drug & Alcohol	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							
	UNIT INDIVIDUAL	01	002	Individual				
PASSENGER HENISEY SCHMIDT (608) 548-3806				Citations Issued 0	Sex FEMALE			
				Date of Birth	Race WHITE			
Address N5799 ZINDORF RD NEW LISBON, WI 53950 , US				Driver License Number				
Safety Equipment				On Duty Crash		Safety Equipment		
Row 02 - SECOND ROW				Seat Position 07 - LEFT	CHILD RESTRAINT - TYPE UNKNOWN			
Helmet Use				Helmet Compliance				
Eye Protection				Tint Compliance				
Injury				Injury Severity NO APPARENT INJURY		Airbag NON DEPLOYED		
Ejected NOT EJECTED				Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED		
Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #				
Hospital		Date of Death		Time of Death				
Distracted By	Distracted By Source							
Distracted By Action								
Non Motorist	Striking Unit #	Location						

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26-06889

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UNIT	INDIVIDUAL	Prior Action				
		Action				
		Action Other			To/From School	
01	002	Drug & Alcohol		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				
		Individual				
		PASSENGER HATTIE SCHMIDT (608) 548-3806		Citations Issued 0	Sex FEMALE	
				Date of Birth	Race WHITE	
		Address N5799 ZINDORF RD NEW LISBON, WI 53950 , US		Driver License Number		
		01	003	Safety Equipment		On Duty Crash
Row 02 - SECOND ROW	Seat Position 09 - RIGHT					
Helmet Use				Helmet Compliance		
Eye Protection				Tint Compliance		
Injury				Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED	
Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE			Trapped/Extricated NOT TRAPPED		
Medical Transport NOT TRANSPORTED				EMS Agency Identifier	EMS Run #	
Hospital				Date of Death	Time of Death	
Distracted By						
Distracted By Source						
Distracted By Action						
01	003	Non Motorist		Striking Unit #	Location	
		Prior Action				

6TL0D7W18V

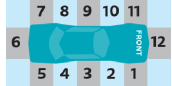
26-06889

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UNIT 01	INDIVIDUAL 003	Action			
		Action Other			
		Suspected Alcohol Use NO		Suspected Drug Use NO	
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	
		Drug Test Given TEST NOT GIVEN		Drug Test Type	
		Drug Type		Alcohol Test Results	
Individual Condition APPEARED NORMAL		Drug Test Results		To/From School	

Unit Summary

UNIT 02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type (SPORT) UTILITY VEHICLE				Operating As Endorsements	
	Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel EASTBOUND	☐ Pre CrashTire Mark	Speed Limit 35	Total Lanes 4	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way UNKNOWN		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					
	Vehicle					
	UNIT 02	VEHICLE 02	License Plate Number JUDYSRT		Plate Type AUT	St WI
Vehicle Identification Number 2FMDK3JC4DBA31516			Make FORD	Year 2013	Model EDGE	
Color BRZ - BRONZE			Body Style UT - SPORT UTILITY VEHICLE		Bus Use	
Initial Contact Point 01 - RIGHT FRONT CORNER			Vehicle Damage			
Extent Of Damage MINOR DAMAGE			01 - RIGHT FRONT CORNER, 09 - LEFT SIDE MIDDLE			
Towed Due To Damage NOT TOWED			Vehicle Removed By 952			
What Driver Was Doing CHANGING LANES						

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UNIT VEHICLE	Driver Prior Action Other		Vehicle Factors NOT APPLICABLE	
	Driver Actions FAILED TO KEEP IN DESIGNATED LANE			
	Owner Name PAUL WASHAM (608) 434-7420		Owner Address S5773 CROWN CT BARABOO, WI 53913 , US	
	Sequence Of Events			
UNIT 01	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
	Event			
UNIT 02	Policy Holder			
	Insurance Company AMERICAN-FAMILY-INS-CO		INDIVIDUAL PAUL WASHAM	
	Individual			
	DRIVER PAUL WASHAM (608) 434-7420		Citations Issued 0	Sex MALE
UNIT INDIVIDUAL	Date of Birth		Race	
	Address S5773 CROWN CT BARABOO, WI 53913 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
	Safety Equipment		On Duty Crash	
	Row 01 - FRONT ROW		Seat Position 07 - LEFT	
UNIT 004	Helmet Use		Safety Equipment SHOULDER & LAP BELT	
	Eye Protection		Helmet Compliance	
	Tint Compliance		Airbag NON DEPLOYED	
	Injury		Injury Severity NO APPARENT INJURY	
UNIT 004	Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE	
	Trapped/Extricated NOT TRAPPED		Medical Transport NOT TRANSPORTED	
	EMS Agency Identifier		EMS Run #	
	Hospital		Date of Death	
UNIT 004	Time of Death		Distracted By	
	Distracted By Source UNKNOWN		Distracted By Action UNKNOWN	
	Non Motorist		Striking Unit #	
	Location			

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UNIT	INDIVIDUAL	Prior Action		
		Action		
		Action Other		To/From School
		Drug & Alcohol Suspected Alcohol Use NO Suspected Drug Use NO		
02	004	Alcohol Test Given	Alcohol Test Type	Alcohol Test Results
		TEST NOT GIVEN		
		Drug Test Given	Drug Test Type	Drug Test Results
		TEST NOT GIVEN		
		Drug Type		
		Individual Condition		
		APPEARED NORMAL		
UNIT	INDIVIDUAL	Individual		
		PASSENGER JUDITH WASHAM	Citations Issued 0	Sex FEMALE
			Date of Birth	Race
		Address S5773 CROWN CT BARABOO, WI 53913 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
02	005	Safety Equipment		On Duty Crash
				Safety Equipment
		Row 01 - FRONT ROW	Seat Position 09 - RIGHT	SHOULDER & LAP BELT
		Helmet Use	Helmet Compliance	
		Eye Protection	Tint Compliance	
		Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
		Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #
		Hospital	Date of Death	Time of Death
		Distracted By		
		Distracted By Source		
		Distracted By Action		
		Non Motorist		
		Striking Unit #	Location	
		Prior Action		

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UNIT INDIVIDUAL 02 005				
	Action			
	Action Other			To/From School
	Drug & Alcohol			
	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			