

6TL0F3SSLB

26-07519

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 26-07519		Investigating Officer/Deputy DEPUTY A. KING	
Crash Date 07/13/2026		Crash Time 02:24 PM		Date Arrived 07/13/2026		Time Arrived 02:30 PM	
Date Notified 07/13/2026		Time Notified 02:25 PM		Total Units 02		Total Injured 03	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



Not to scale

Reconstruction By

Photos By
KINGAdditional Information
PHOTOS

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

U1 WAS TRAVELING SOUTHBOUND ON HY78 WHEN THE OPERATOR CROSSED THE CENTER LINE RESULTING IN U1 STRIKING U2, WHICH WAS NORTHBOUND ON HY78. U1 THEN SPUN AROUND ON THE ROADWAY AND CAME TO A REST PERPENDICULAR IN THE SOUTHBOUND LANE. U2 ALSO SPUN AROUND AND CAME TO A REST FACING SOUTH IN THE SOUTHBOUND LANE. U1 OPERATOR AND PASSENGER WERE TRAPPED IN THE VEHICLE AND HAD TO BE EXTRICATED. U1 OPERATOR STATED SHE COULD NOT RECALL ANY PART OF THE CRASH AND WAS UNSURE HOW IT HAPPENED. U1 OPERATOR WAS TRANSPORTED TO SAUK HOSPITAL AND THEN MED FLOWN TO UW-HOSPITAL MADISON. U1 PASSENGER WAS TRANSPORTED BY SAUK EMS TO UW-HOSPITAL MADISON. U2 OPERATOR STATED HE COULD NOT RECALL ANY PORTION OF THE CRASH AND WAS UNSURE HOW IT HAPPENED. U2 OPERATOR WAS MED FLOWN TO UW-HOSPITAL MADISON. UPON LOOKING AT THE ROADWAY, THE IMPACT SITE BELIEVED TO BE IN THE NORTHBOUND LANE, RESULTING IN U1 OPERATING LEFT OF CENTER. CRAIG'S TOWING RECOVERED BOTH VEHICLES AND WERE TAKING TO IMPOUND.

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Location

ON STH78 SB 677 FT S OF LONGWOOD DR IN THE TOWN OF PRAIRIE DU SAC IN SAUK COUNTY	Latitude 43.315817679	Longitude -89.734668263
	X Coordinate 278241.625	Y Coordinate 4799518.5
	Structure Type	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 02 - FRONT TO FRONT		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 NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION	
Closure Type FULL CLOSURE		Reasons for Closure	
Date Initial Lane/Rd Closed 07/13/2026	Time Initial Lane/Rd Closed 02:30 PM	LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS, MED FLIGHT	
Date All Lanes Open 07/13/2026	Time All Lanes Open 04:37 PM		
Date Scene Cleared 07/13/2026		Time Scene Cleared 04:37 PM	

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 2	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel SOUTHBOUND	☐ Pre CrashTire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED		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					
	01	License Plate Number APM6340		Plate Type AUT	St WI	Country of Issuance UNITED STATES
Vehicle Identification Number JTMDFREV6D5029052		Make TOYT	Year 2013	Model RAV4		

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UNIT	VEHICLE	Color WHI - WHITE	Body Style UT - SPORT UTILITY VEHICLE	Bus Use
		Initial Contact Point 11 - LEFT FRONT CORNER	Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER	
		Extent Of Damage DISABLING DAMAGE		
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By CRAIGS TOWING	
		What Driver Was Doing GOING STRAIGHT	Vehicle Factors NOT APPLICABLE	
		Driver Prior Action Other		
UNIT	VEHICLE	Driver Actions FAILED TO KEEP IN DESIGNATED LANE		
01	01	Owner Name RANDI SCHWARTZ	Owner Address E11521 STATE ROAD 136 BARABOO, WI 53913 , US	
Sequence Of Events				
	01	Event MOTOR VEH IN TRANSPORT		
	02	Event		
	03	Event		
	04	Event		
UNIT	INDIVIDUAL	Policy Holder		
		Insurance Company INTEGRITY-INS-CO	INDIVIDUAL RANDI SCHWARTZ	
		Individual		
		DRIVER RANDI SCHWARTZ	Citations Issued 0	Sex FEMALE
			Date of Birth	Race WHITE
		Address E11521 STATE ROAD 136 BARABOO, WI 53913 , 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
		Eye Protection		Tint Compliance
		Injury	Injury Severity SUSPECTED MINOR INJURY	Airbag DEPLOYED-COMBINATION
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated TRAPPED/EXTRICATED
		Medical Transport EMS AIR	EMS Agency Identifier 6001285	EMS Run #

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UNIT INDIVIDUAL	Hospital UW HEALTH-AMERICAN CENTER		Date of Death		Time of Death	
	Distracted By		Distracted By Source UNKNOWN			
	Distracted By Action UNKNOWN					
	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	
UNIT INDIVIDUAL	Drug Type					
	Individual Condition CONFUSED OR DISORIENTED (NON LUCID)					
	Individual					
	PASSENGER ROWYN DUCHARME		Citations Issued 0		Sex FEMALE	
			Date of Birth		Race WHITE	
	Address E11521 STATE ROAD 136 BARABOO, WI 53913 , US		Driver License Number			
	Safety Equipment		On Duty Crash		Safety Equipment CHILD RESTRAINT SYSTEM - REAR FACING	
	Row 02 - SECOND ROW		Seat Position 07 - LEFT			
	Helmet Use		Helmet Compliance			
	Eye Protection		Tint Compliance			
UNIT INDIVIDUAL	Injury		Injury Severity POSSIBLE INJURY		Airbag DEPLOYED-COMBINATION	
	Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated TRAPPED/EXTRICATED	
	Medical Transport EMS GROUND		EMS Agency Identifier 6000555		EMS Run #	
	Hospital UW HEALTH-AMERICAN CENTER		Date of Death		Time of Death	

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UNIT INDIVIDUAL 01 002	Distracted By		Distracted By Source	
	Distracted By Action			
	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 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 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel NORTHBOUND	☐ Pre CrashTire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED		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

02 02	License Plate Number AUW8982		Plate Type AUT	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1C4NJRBB6HD163780		Make JEEP	Year 2017	Model PATRIOT
	Color BLU - BLUE		Body Style UT - SPORT UTILITY VEHICLE		Bus Use
	Initial Contact Point 11 - LEFT FRONT CORNER				

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UNIT	VEHICLE	Vehicle Damage			
		Extent Of Damage DISABLING DAMAGE	09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT		
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By CRAIGS TOWING		
		What Driver Was Doing GOING STRAIGHT	Vehicle Factors NOT APPLICABLE		
UNIT	VEHICLE	Driver Prior Action Other			
		Driver Actions NO CONTRIBUTING ACTION			
02	02	Owner Name PAUL WARREN TOMBERLIN (608) 370-7773	Owner Address S7615 WALLEYE LN MERRIMAC, WI 53561 , US		
		Sequence Of Events			
UNIT	01	Event MOTOR VEH IN TRANSPORT			
		Event			
		Event			
		Event			
UNIT	04	Policy Holder			
		Insurance Company AUTO-OWNERS-INS-CO	INDIVIDUAL PAUL TOMBERLIN		
UNIT	INDIVIDUAL	Individual			
		DRIVER PAUL TOMBERLIN	Citations Issued 0	Sex MALE	
			Date of Birth	Race WHITE	
		Address S7615 WALLEYE LN MERRIMAC, WI 53561 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
02	003	Safety Equipment			
		On Duty Crash	Safety Equipment SHOULDER & LAP BELT		
		Row 01 - FRONT ROW	Seat Position 07 - LEFT		
		Helmet Use	Helmet Compliance		
02	003	Eye Protection	Tint Compliance		
		Injury SUSPECTED SERIOUS INJUR	Airbag NON DEPLOYED		
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated TRAPPED/EXTRICATED	
		Medical Transport EMS AIR	EMS Agency Identifier 6001285	EMS Run #	
02	003	Hospital UW HEALTH-AMERICAN CENTER	Date of Death	Time of Death	

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UNIT INDIVIDUAL 02 003	<i>Distracted By</i>		Distracted By Source UNKNOWN	
	Distracted By Action UNKNOWN			
	<i>Non Motorist</i>		Striking Unit #	Location
	Prior Action			
	Action			
	Action Other			
	To/From School			
	<i>Drug & Alcohol</i>		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 Test Results
Drug Type				
Individual Condition CONFUSED OR DISORIENTED (NON LUCID)				