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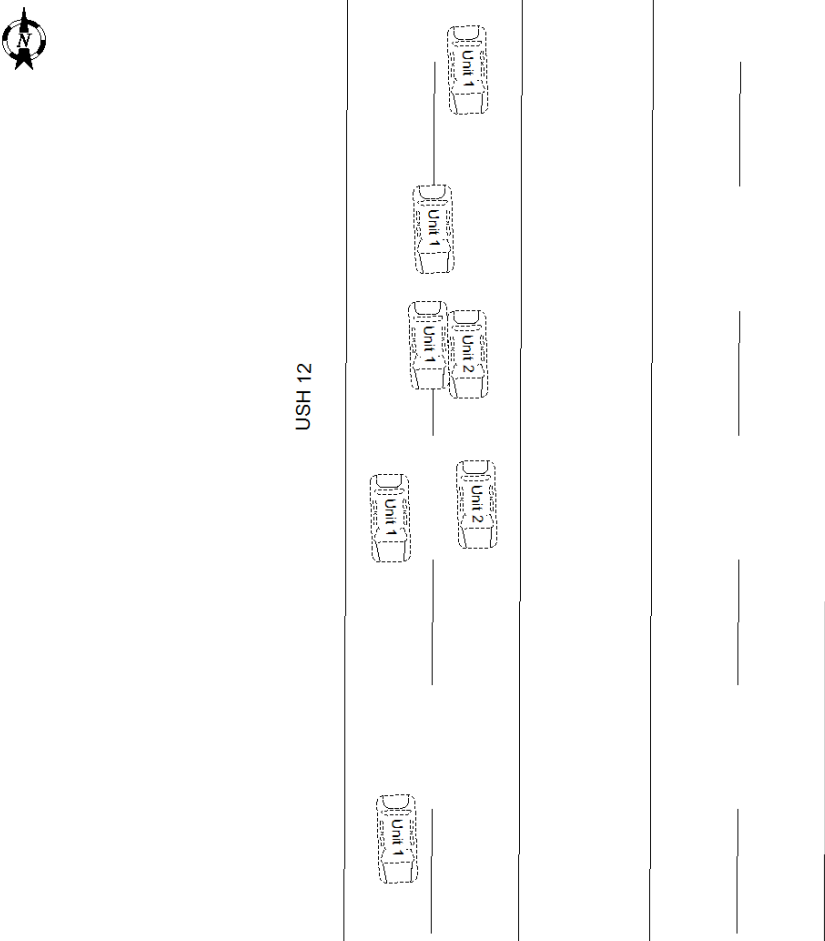
26-08446

WISCONSIN MOTOR VEHICLE
CRASH REPORTSAUK 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 26-08446		Investigating Officer/Deputy DEPUTY J. MACASKILL	
Crash Date 08/05/2026		Crash Time 02:30 PM		Date Arrived 08/05/2026		Time Arrived 02:54 PM	
Date Notified 08/05/2026		Time Notified 02:37 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.

ON 8/5/26 AT APPROXIMATELY 1430, UNIT 2 WAS DRIVING SOUTHBOUND ON USH 12 NEAR STH 33 IN THE LEFT LANE, WHEN UNIT 1 WAS BEHIND THEM. UNIT 1 MOVED TO THE RIGHT LANE TO PASS UNIT 2. AS UNIT 1 PASSED UNIT 2, UNIT 1 SIDE SWIPED UNIT 2. UNIT 1 DID NOT STOP TO SPEAK WITH UNIT 2. OPERATOR OF UNIT 2 ONLY KNEW THAT UNIT 1 WAS A WHITE HUMMER. NO OTHER IDENTIFYING INFORMATION WAS OBTAINED.

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Location

ON USH12 EB 0.39 MI N OF STH33 WB IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.520235028	Longitude -89.786516448
	X Coordinate 274796.46875	Y Coordinate 4822361
	Structure Type	

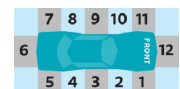
Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 07 - SIDESWIPE/SAME DIRECTION		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	

Unit Summary

UNIT 01	Unit Status HIT AND RUN		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? UNKNOWN	Direction Of Travel UNKNOWN	☐ Pre CrashTire Mark	Speed Limit 65	Total Lanes 2	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function UNKNOWN		Emergency Motor Vehicle Use UNKNOWN	
	Traffic Way UNKNOWN		Traffic Control UNKNOWN		Traffic Control Inoperative/Missing UNKNOWN	
	Surface Type UNKNOWN		Road Curvature UNKNOWN		Road Grade UNKNOWN	
	Truck Bus or HazMat NO					

UNIT 01 VEHICLE 01	Vehicle				
	License Plate Number		Plate Type	St	Country of Issuance
	Vehicle Identification Number		Make	Year	Model
	Color		Body Style		Bus Use
	Initial Contact Point 99 - UNKNOWN		Vehicle Damage		
	Extent Of Damage VEHICLE NOT AT SCENE		16 - VEHICLE NOT AT SCENE		



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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing OVERTAKE RIGHT		Vehicle Factors	
	Driver Prior Action Other		UNKNOWN	
	Driver Actions UNKNOWN			
01	Owner Name		Owner Address , ,	
Sequence Of Events				
01 02 03 04	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
	Event			
UNIT INDIVIDUAL	DRIVER UNKNOWN UNKNOWN		Citations Issued 0	Sex
			Date of Birth	Race
	Address UNKNOWN UNKNOWN, ,		Driver License Number	
01 001	Safety Equipment		On Duty Crash	
			Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	RESTRAINT USE UNKNOWN	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	Injury		Injury Severity NO APPARENT INJURY	Airbag NOT APPLICABLE
	Ejected NOT APPLICABLE	Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT APPLICABLE
	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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UNIT 01	INDIVIDUAL	Prior Action			
		Action			
		Action Other			To/From School
	001	Drug & Alcohol		Suspected Alcohol Use	Suspected Drug Use
		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 NOT OBSERVED			

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 SOUTHBOUND	☐ Pre Crash Tire Mark	Speed Limit 65	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 DIVIDED HWY W/O TRAFFIC BARRIER		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO
	Surface Type CONCRETE		Road Curvature STRAIGHT		Road Grade LEVEL
	Truck Bus or HazMat NO				

UNIT 02	VEHICLE	Vehicle			
		License Plate Number FZ76826	Plate Type AUT	St IL	Country of Issuance UNITED STATES
		Vehicle Identification Number 2CNALDEW4A6412572	Make CHEV	Year 2010	Model CHEVROLET
		Color BLK - BLACK	Body Style 4D - 4DR		Bus Use
		Initial Contact Point 04 - RIGHT SIDE REAR	Vehicle Damage 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 04 - RIGHT SIDE REAR		
		Extent Of Damage MINOR DAMAGE			
		Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR		
		What Driver Was Doing GOING STRAIGHT			

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UNIT VEHICLE	Driver Prior Action Other		Vehicle Factors NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
	Owner Name CASSANDRA M DUARTE (224) 431-5803		Owner Address 1168 PRESTON AVE ELGIN, IL 60120 , US	
	Sequence Of Events			
UNIT 01	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
	Event			
UNIT 02	Policy Holder			
	Insurance Company OXFORD AUTO INSURANCE		INDIVIDUAL CASSANDRA DUARTE	
	Individual			
	DRIVER CASSANDRA DUARTE (224) 431-5803		Citations Issued 0	Sex FEMALE
UNIT INDIVIDUAL	Date of Birth		Race	
	Address 1168 PRESTON AVE ELGIN, IL 60120 , US		Driver License Number STATE: ILLINOIS COUNTRY: UNITED STATES	
	On Duty Crash		Safety Equipment	
	Row 01 - FRONT ROW		Seat Position 07 - LEFT	
UNIT 02	Helmet Use		SHOULDER & LAP BELT	
	Eye Protection		Helmet Compliance	
	Tint Compliance		Airbag NON DEPLOYED	
	Injury		Injury Severity NO APPARENT INJURY	
UNIT 002	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 002	Time of Death		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)	
	Distracted By Action NOT DISTRACTED			
	Striking Unit #		Location	
	Non Motorist			

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UNIT INDIVIDUAL 02 002	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			