WISCONSIN MOTOR VEHICLE CRASH REPORT

Document Number Override	Primary Crash Document #	Agency Crash Number 18-03308	Investigating Officer/Deput DEPUTY T. SUTHERL	•	
Crash Date 04/01/2018	Crash Time 02:16 PM	Date Arrived 04/01/2018	Time Arrived 02:25 PM		
Date Notified	Time Notified	Total Units	Total Injured Total Ki	lled	
04/01/2018	02:18 PM	01	01 00	Reporting	
On Emergency Hit	and Run Lane Clos		Trailer or Towed	Threshold	
Date Notified 04/01/2018 On Emergency Hit Government Property	Active School Zone	School Bus Related NO	Tags		
✓ Reportable	Crash Type DT4000 (STANDARD CRASH	Н)	Amended	Secondary Crash	
Description					
Diagram E3493 USH 14		E3483 USH 14 	Photos By	on By	
USH 14 Not To Scale			Additional In NONE	formation	
, a sworn law enforceme	nt officer, agree that I have no	ot added any CJIS data in thi	s report.		
	HICLE WAS EASTBOUND ON USH			NOT SURE WHAT	
HAPPENED. HE DRIFTED INTO T SHOULDER AREA ALONG THE R SUBJECT IN VEHICLE WERE ALL	THE GRAVEL ON THE SOUTH SID COADWAY. VEHICLE HIT THE DRI	E OF THE ROAD AND WAS PULL VEWAY AT E3483 USH 14 AND C EEN AMBULANCE. PER WIFE MA:	ED INTO THE DITCH BECAU AME TO REST NEXT TO FIR	SE OF THE SOFT E NUMBER E3493 USH 14.	

Location

WISCONSIN MOTOR VEHICLE CRASH REPORT

ON E3483 USH14 EB					Latitude			Longitude		
	_	FT E DONALD RD			43.1899	91639		-90.143855069		
	_	E E3483)			X Coordin			Y Coordinate 4786713		
	<u> </u>				244532.			4/00/13		
		HE TOWN OF SPRING	GREEN		Structure FIRE	туре				
	Cra	sh Scene								
	_	Harmful Event			First Horn	nful Event	Location			
	DIT					DER RIG				
		ner of Collision			Light Con		•••			
	NO	COLLISION W/VEHICL	E IN TRANSPORT		DAYLIG					
	Road	d Surface Condition(s)			Roadway	Factor(s)				
	DRY	1								
	Fnvii	ronment Factor(s)								
	NON	. ,			NONE					
		ther Condition(s)								
	CLE	AR								
	Anim	nal Type				To Trafficw	•	_		
	_	1.01 " " "			TRAFFICWAY - NO					
		h Classification - Location			Crash Classification - NO SPECIAL JUR					
		al Land			Access C			Special Study		
					NO CON	NO CONTROL				
		•	Junction Location		tion Type					
	NO		NON-JUNCTION	NOT A	N INTERSE	ECTION				
		· ^								
		t Summary 💳								
	Unit	Status		Vehicle Operating As	Classification	า	Unit Type	DII E		
	Unit IN T	Status RANSIT		Vehicle Operating As D CLASS	Classification	า	AUTOMO			
5	Unit IN T Vehi	Status			Classification	n	AUTOMO	BILE as Endorsements		
	Unit IN T Vehic (SP	Status 'RANSIT cle Type	Train/Bus # Injured			n Total Tra	AUTOMO Operating A			
	Unit IN T Vehic (SP	Status RANSIT cle Type ORT) UTILITY VEHICLE	Train/Bus # Injured	D CLASS		Total Tra	AUTOMO Operating A	Total HazMat Types 0		
	Unit IN T Vehic (SPC Total 4	Status RANSIT cle Type ORT) UTILITY VEHICLE Cocs rance?	Train/Bus # Injured Direction Of Travel	Total # Citations Issu 0 Pre CrashTi	ed	Total Tra 0 Speed L	AUTOMO Operating A	Total HazMat Types O Total Lanes		
	Unit IN T Vehic (SPC Total 4 Insur YES	Status RANSIT cle Type ORT) UTILITY VEHICLE I Occs rance?	Train/Bus # Injured Direction Of Travel EASTBOUND	Total # Citations Issu 0 Pre CrashTi Mark	ed	Total Tra	AUTOMO Operating A ailers	Total HazMat Types O Total Lanes		
	Unit IN T Vehic (SPC Total 4 Insur YES	Status RANSIT cle Type ORT) UTILITY VEHICLE I Occs rance? 6 Harmful Event: Collision W	Train/Bus # Injured Direction Of Travel EASTBOUND	Total # Citations Issu 0 Pre CrashTi	ed i re	Total Tra 0 Speed L	AUTOMO Operating A ailers	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use		
	Unit IN T Vehic (SP) Total 4 Insur YES Most DIT(Status RANSIT cle Type ORT) UTILITY VEHICLE I Occs rance? 6 Harmful Event: Collision W	Train/Bus # Injured Direction Of Travel EASTBOUND	Total # Citations Issu 0 Pre CrashTi Mark Special Function	ed i re	Total Tra 0 Speed L	AUTOMO Operating A ailers imit Emergency NOT APP	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use		
	Unit IN T Vehic (SPC Total 4 Insur YES Most DITC Traff	Status RANSIT cle Type ORT) UTILITY VEHICLE I Occs rance? S Harmful Event: Collision W CH ic Way D-WAY, NOT DIVIDED	Train/Bus # Injured Direction Of Travel EASTBOUND	Total # Citations Issu 0 Pre CrashTi Mark Special Function NO SPECIAL FUN	ed i re	Total Tra 0 Speed L	AUTOMO Operating A ailers imit Emergency NOT APP Traffic Cont	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use LICABLE rol Inoperative/Missing		
	Unit IN T Vehic (SPC Total 4 Insur YES Most DITC Traff TWC	Status RANSIT cle Type ORT) UTILITY VEHICLE I Occs rance? I Harmful Event: Collision W CH ic Way D-WAY, NOT DIVIDED ace Type	Train/Bus # Injured Direction Of Travel EASTBOUND	Total # Citations Issu 0 Pre CrashTi Mark Special Function NO SPECIAL FUN Traffic Control NO CONTROL Road Curvature	ed i re	Total Tra 0 Speed L	AUTOMO Operating A ailers imit Emergency NOT APP Traffic Cont NO Road Grade	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use LICABLE rol Inoperative/Missing		
	Unit IN T Vehic (SPC Total 4 Insur YES Most DITC Traff TWC Surfa BLA	Status FRANSIT Cle Type ORT) UTILITY VEHICLE France? France? France? France: F	Train/Bus # Injured Direction Of Travel EASTBOUND	Total # Citations Issu 0 Pre CrashTi Mark Special Function NO SPECIAL FUN Traffic Control NO CONTROL	ed i re	Total Tra 0 Speed L	AUTOMO Operating A ailers imit Emergency NOT APP Traffic Cont	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use LICABLE rol Inoperative/Missing		
	Unit IN T Vehic (SPC Total 4 Insur YES Most DITC Traff TWC Surfa BLA	Status RANSIT cle Type ORT) UTILITY VEHICLE I Occs rance? I Harmful Event: Collision W CH ic Way D-WAY, NOT DIVIDED ace Type	Train/Bus # Injured Direction Of Travel EASTBOUND	Total # Citations Issu 0 Pre CrashTi Mark Special Function NO SPECIAL FUN Traffic Control NO CONTROL Road Curvature	ed i re	Total Tra 0 Speed L	AUTOMO Operating A ailers imit Emergency NOT APP Traffic Cont NO Road Grade	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use LICABLE rol Inoperative/Missing		
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	Unit IN T Vehia (SPC Total 4 Insur YES DITC Traff TWC Surfa BLA Truck NO	Status RANSIT cle Type ORT) UTILITY VEHICLE I Occs rance? Status Harmful Event: Collision W CH ic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOUS Ik Bus or HazMat Vehicle License Plate Number MITCHY Vehicle Identification Numl 1FMJU2A57CEF64097	Train/Bus # Injured Direction Of Travel EASTBOUND Vith	Total # Citations Issu 0 Pre CrashTi Mark Special Function NO SPECIAL FUN Traffic Control NO CONTROL Road Curvature STRAIGHT Plate Type HAR - HARLEY I Make FORD	ed ire	Total Tra 0 Speed L 55	AUTOMO Operating A ailers imit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED S' Model EXPEDITIO	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use LICABLE rol Inoperative/Missing		
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	Unit IN T Vehic (SPC Total 4 Insur YES DITC Traff TWC Surfa BLA Truck NO	Status RANSIT cle Type ORT) UTILITY VEHICLE I Occs rance? Status Harmful Event: Collision W CH ic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOUS Ik Bus or HazMat Vehicle License Plate Number MITCHY Vehicle Identification Numl 1FMJU2A57CEF64097	Train/Bus # Injured Direction Of Travel EASTBOUND Vith	Total # Citations Issu 0 Pre CrashTi Mark Special Function NO SPECIAL FUN Traffic Control NO CONTROL Road Curvature STRAIGHT Plate Type HAR - HARLEY I Make FORD	ed ire NCTION DAVIDSO	St WI Year 2012	AUTOMO Operating A ailers imit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED S' Model EXPEDITIO Bus Use	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use LICABLE rol Inoperative/Missing		
	Unit IN T Vehic (SPC Total 4 Insur YES DITC Traff TWC Surfa BLA Truck NO	Status RANSIT cle Type ORT) UTILITY VEHICLE I Occs rance? 6 Harmful Event: Collision W CH ic Way O-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOUS IK Bus or HazMat Vehicle License Plate Number MITCHY Vehicle Identification Numl 1FMJU2A57CEF64097 Color BLK - BLACK Initial Contact Point 12FRONT	Train/Bus # Injured Direction Of Travel EASTBOUND Vith	Total # Citations Issu 0 Pre CrashTi Mark Special Function NO SPECIAL FUN Traffic Control NO CONTROL Road Curvature STRAIGHT Plate Type HAR - HARLEY I Make FORD Body Style UT - SPORT UTII Vehicle Damage	ed ire NCTION DAVIDSO	St WI Year 2012	AUTOMO Operating A ailers imit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED S' Model EXPEDITIO Bus Use	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use LICABLE rol Inoperative/Missing		
	Unit IN T Vehin (SPA Total 4 Insur YES DITC Traff T TWC Surfa BLA Truck NO	Status RANSIT cle Type ORT) UTILITY VEHICLE I Occs rance? Brance? Chrance Harmful Event: Collision W CH ic Way CHAY, NOT DIVIDED ace Type ACKTOP (BITUMINOUS IK Bus or HazMat Vehicle License Plate Number MITCHY Vehicle Identification Numl 1FMJU2A57CEF64097 Color BLK - BLACK Initial Contact Point	Train/Bus # Injured Direction Of Travel EASTBOUND Vith	Total # Citations Issu 0 Pre CrashTi Mark Special Function NO SPECIAL FUN Traffic Control NO CONTROL Road Curvature STRAIGHT Plate Type HAR - HARLEY I Make FORD Body Style UT - SPORT UTII	ed ire NCTION DAVIDSO	St WI Year 2012	AUTOMO Operating A ailers imit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED S' Model EXPEDITIO Bus Use	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use LICABLE rol Inoperative/Missing		

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Towed Due To Dama			cle Removed By				
			DISABLING DAMAGE		DRGES AUTO BODY				
		What Driver Was Doi		Vehic	cle Factors				
		Driver Prior Action Ot		тои	T APPLICABLE				
		Driver Filor Action Of							
		Driver Actions							
	щ	FAILURE TO CONTROL, RAN OFF ROADWAY							
LNO	VEHICL								
5	표								
	7								
		Driver Distractions							
		NOT DISTRACTE	D						
_	1								
5	01								
		Owner Name			Owner Address				
		MASON TAYLER			270 HILLSIDE DR				
		(262) 649-6328			OCONOMOWOC, WI 53066, US				
		Sequence Of E	vents						
	01	Event DITCH							
		Event							
	02								
	03	Event							
	0								
	04	Event							
		Daliay Haldar							
LIND		Policy Holder Insurance Company		In	dividual				
5		GERMANTOWN-N	MUTUAL-INS-CO		ASON TAYLER				
		Individual							
		Driver		Ci	tations Issued	Sex			
	1	MASON TAYLER		0		MALE			
		(262) 649-6328		Da	ate of Birth	Race			
╘	INDIVIDUA					WHITE			
		Address 270 HILLSIDE DR OCONOMOWOC, WI 53066 , US			Driver License Number				
	Z				STATE: WISCONSIN COUNTRY: UNITED STATES				
		F	On Duty Crash	Sa	afety Equipment				
		Equipment							
			Seat Position		HOULDER & LAP BELT				
			LEFT SIDE (DRIVER/MOTORCY	L .	almet Compliance				
		Helmet Use		П	elmet Compliance				
		Eye Protection		Tint Compliance					
5	001	Injury	Injury Severity		rbag				
٦	0	Ejected	POSSIBLE INJURY		ON DEPLOYED ection Path	Trapped/Extricated			
		NOT EJECTED			OT EJECTED/NOT APPLICABL	NOT TRAPPED			

WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT **BARABOO, WI 53913** (608) 356-4895

		Medical Transport			EMS Agency Identi	ifier	EMS Run #	S Run #	
		EMS GROUND			531				
		Hospital			Date of Death		Time of Death		
		UW HEALTH-AMERICAN CENTER							
		Striking Unit # Prior Action				Location		To/From School	
		Non Motorist	Striking Offit #	FIIOI ACIIOII		Location		TO/TTOTTI SCHOOL	
		A -4:		l					
		Action							
	INDIVIDUAL								
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	불								
	=								
		Action Other							
		Action Other							
			I O	1	I Owen a start Down He				
	Г	Orug & Alcohol	Suspected Alcohol U	se	Suspected Drug Us	se			
		and a Alcohol	NO						
		Alcohol Test Given			Alcohol Test Type		Alcohol Test Results	<u> </u>	
		TEST NOT GIVEN	l						
		Drug Test Given			Drug Test Type		Drug Test Results		
		TEŠT NOT GIVEN							
	_	Drug Type							
2	90	Drug Type							
	_								
		Individual Condition							
		APPEARED NORI	MAL						
		Individual							
		Passenger			Citations Issued		Sex		
		MICHELLE TAYL	.ER		0		FEMALE		
	¥	(262) 490-5844			Date of Birth Race				
.	INDIVIDUAL				Date of Billin	WHITE			
	₽								
5	\leq	Address 270 HILLSIDE DR			Driver License Number				
_	Ħ				STATE: WISCONSIN COUNTRY: UNITED STATES				
	_	OCONOMOWOC, WI 53066 , US			OTATE: WIGGOROW GOOKTIKT: GIVITED GTATES				
			On Duty Crash		Safety Equipment				
		Equipment							
		Seat Position			SHOULDER & LAP BELT				
		3FRONT SEAT-F	RIGHT SIDE (TRAI	N ENGINEER	Helmet Compliance				
		Helmet Use							
		Tielinet Ose			Tiennet Compilance	5			
		Eve Destantian			T: . 0 !!				
		Eye Protection			Tint Compliance				
2	005	Injury	Injury Severity		Airbag				
٦	0		NO APPARENT II	NJURY	NON DEPLOYED				
		Ejected			Ejection Path		Trapped/Extricated		
		NOT EJECTED			NOT EJECTED/	NOT APPLICABL	NOT TRAPPED		
		Medical Transport			EMS Agency Identi	ifier	EMS Run#		
		NOT TRANSPORT	TED						
		Hospital			Date of Death		Time of Death		
			Ctriking Unit #	Drior Action		Location		To/From Cohoo!	
		Non Motorist	Striking Unit #	Prior Action		Location		To/From School	

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WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913 (608) 356-4895

Crash Date 04/01/2018

Crash Time 02:16 PM

LINO	INDIVIDUAL	Action								
		Action Other								
	L	Orug & Alcohol	Suspected Alcohol NO	Use	Suspected Drug U NO	se				
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type		Alcohol Test Results			
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Results			
6	005	Drug Type					•			
		Individual Condition APPEARED NORI	MAL							
	ı	ndividual								
	٩٢	Passenger JOHANNAH TAYLER (262) 649-6328			Citations Issued 0 Date of Birth		Sex FEMALE Race			
LIND	INDIVIDUAL	Address 270 HILLSIDE DR OCONOMOWOC, WI 53066 , US		Driver License Number						
		Equipment	On Duty Crash		Safety Equipment					
		Seat Position 4SECOND SEAT-LEFT SIDE(MOTORCYCLE/BI		CHILD RESTRAINT SYSTEM - FORWARD FACING						
		Helmet Use			Helmet Compliance					
		Eye Protection			Tint Compliance					
5	003	Injury	jected		Airbag NON DEPLOYED					
		Ejected NOT EJECTED			Ejection Path Trapped/Extricated NOT EJECTED/NOT APPLICABL NOT TRAPPED					
		Medical Transport NOT TRANSPORTED			EMS Agency Ident	ifier	EMS Run #			
		Hospital			Date of Death		Time of Death			
		Non Motorist	Striking Unit #	Prior Action		Location	l	To/From School		

WISCONSIN MOTOR VEHICLE CRASH REPORT

TINO	INDIVIDUAL	Action							
		Action Other							
	E	Orug & Alcohol	Suspected Alcohol UNO	Jse	Suspected Drug Us	se			
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type		Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Results		
0	003	Drug Type							
		Individual Condition							
		APPEARED NORMAL							
	I	Individual							
		Passenger TEAGAN TAYLEI	9		Citations Issued Sex				
	AL	(262) 649-6328	`		0 Date of Birth		FEMALE Race		
⊨	IDN'	(402) 6.16 6026			WHITE				
LINO	INDIVIDUA	Address 270 HILLSIDE DR OCONOMOWOC, WI 53066 , US			Driver License Number				
		Equipment	On Duty Crash		Safety Equipment				
		Seat Position 6SECOND SEAT-RIGHT SIDE			CHILD RESTRAINT SYSTEM - REAR FACING				
		Helmet Use			Helmet Compliance				
		Eye Protection			Tint Compliance				
7	004	Injury	Injury Severity NO APPARENT INJURY		Airbag NON DEPLOYED				
		Ejected NOT EJECTED			Ejection Path	NOT APPLICABL	Trapped/Extricated		
		Medical Transport			EMS Agency Identi		NOT TRAPPED EMS Run #		
		NOT TRANSPORT	ΓED			·· ·· ·	LIVIO RUII #		
		Hospital			Date of Death		Time of Death		
		Non Motorist	Striking Unit #	Prior Action		Location	1	To/From School	

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SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913 (608) 356-4895

Crash Date 04/01/2018

Crash Time 02:16 PM

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		Action			
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	4				
╘	a				
UNIT	>				
_	INDIVIDUAL				
	Z				
		Action Other			
		Suspected Alcohol Use	Suspected Drug Use		
	E	Orug & Alcohol NO	NO		
		Alcohol Test Given	Alcohol Test Type	Alcohol Test Results	
		TEST NOT GIVEN			
		Drug Test Given	Drug Test Type	Drug Test Results	
		TEST NOT GIVEN			
_	4	Drug Type	!	<u> </u>	
01	004				
		Individual Condition			
		APPEARED NORMAL			