18-05891

WISCONSIN MOTOR VEHICLE CRASH REPORT

Document Number Overrio	le Primary Cra	Primary Crash Document #		cy Crash Number 5891		Investigating Officer/Deputy DEPUTY S. PARKHURST			
Crash Date 06/06/2018	Crash Time 05:02 PM			Arrived 6/2018	Time Arrived 05:23 PM	<u> </u>			
Date Notified 06/06/2018	Time Notifie 05:04 PM	ed	Total 03	Units	Total Injured 01	Total Kille	ed		
On Emergency	Hit and Run	Lane	Closure	Work Zone		or Towed	Reporting Threshold		
Government Property		School Zone	School NO	ol Bus Related	Tags				
✓ Reportable	Crash Type DT4000 (\$	STANDARD C	RASH)		Amend	led	Secondary Crash		
Diagram	-				-				
Exit ramp from 190	104 HOU 40		•	 USH 12		Photos By Additional Info	rmation		
				#17 #3 #3 #3 #3 #3 #3 #3 #					
					Not to Scale				
I, a sworn law enformation UNITS 2 AND 3 WERE SI APPROACHED UNITS 2 A	OWED AND STOPP	ED FOR A RED	LIGHT ON US	SH 12. UNIT 1 WAS	A TOW TRUCK AND				

6TL0B3P3D7 18-05891

Location

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		USH12 EB FT S			Latitude 43.568228145			Longitud	le 356915
	IN T	IH90 EB HE TOWN OF DELTON AUK COUNTY	I		X Coordin 275634.			Y Coordi 482766	
		AON GOOKI I			Structure NO STR	Type LUCTURE		•	
(Cras	sh Scene							
T	First	Harmful Event			First Harr	nful Event	Location		
	MO	TOR VEH IN TRANSPO	RT		ON ROA	ADWAY			
		ner of Collision			Light Con				
	02	FRONT TO REAR			DAYLIG	HT			
	Road	d Surface Condition(s)			Roadway	Factor(s)			
	DRY	(
_	Envir	ronment Factor(s)							
	NON	NE			NONE				
F	Weat	ther Condition(s)							
	CLE	CLEAR							
	Anim	nal Type				Relation To Trafficway TRAFFICWAY - ON ROAD			
F	Cras	h Classification - Location			Crash Cla	ssification	- Jurisdiction		
	PUB	BLIC PROPERTY			NO SPE	CIAL JU	RISDICTION		
Ī	Triba	al Land				Access Control			Special Study
						L CONT	ROL		
	Withi YES	J	Junction Location NTERSECTION	Intersect	ion Type RSECTION	ı			
L						-			
		t Summary Status		Vehicle Operating As	Classification	n	Unit Type		
	Unit :	Status		Vehicle Operating As	Classification	า	Unit Type		
	Unit :	Status RANSIT		Vehicle Operating As A CLASS	Classification	1	TRUCK	As Endorser	nents
•	Unit : IN T Vehic	Status	T TRUCK)		Classification	n	TRUCK	As Endorser	nents
;	Unit : IN T Vehic STR	Status 'RANSIT cle Type	T TRUCK)			Total Tra	TRUCK Operating A		nents Mat Types
;	Unit : IN T Vehic STR	Status RANSIT cle Type AIGHT TRUCK (INSER	•	A CLASS			TRUCK Operating A		
5	Unit SIN TO Vehice STR Total 2	Status RANSIT cle Type RAIGHT TRUCK (INSER LOccs	Train/Bus # Injured Direction Of Travel	A CLASS Total # Citations Issue	d	Total Tra 1 Speed L	TRUCK Operating A	Total Hazi 0 Total Lane	Mat Types
•	Unit S IN T Vehice STR Total 2 Insur YES	Status RANSIT cle Type RAIGHT TRUCK (INSER I Occs rance?	Train/Bus # Injured Direction Of Travel NORTHBOUND	Total # Citations Issue 0 Pre CrashTir Mark	d	Total Tra	TRUCK Operating A	Total Hazi 0 Total Lane 3	Mat Types
	Unit S IN T Vehic STR Total 2 Insur YES Most	Status RANSIT cle Type AIGHT TRUCK (INSER LOccs rance? E Harmful Event: Collision W	Train/Bus # Injured Direction Of Travel NORTHBOUND	Total # Citations Issue O Pre CrashTir	e	Total Tra 1 Speed L	TRUCK Operating A	Total Hazl 0 Total Lane 3	Mat Types
	Unit S IN T Vehice STR Total 2 Insur YES MOST	Status RANSIT cle Type RAIGHT TRUCK (INSER I Occs rance?	Train/Bus # Injured Direction Of Travel NORTHBOUND	Total # Citations Issue 0 Pre CrashTir Mark Special Function NO SPECIAL FUN	e	Total Tra 1 Speed L	TRUCK Operating A ailers imit	Total Hazi 0 Total Lane 3 Motor Vehi LICABLE	Mat Types es cle Use
	Unit : IN T Vehice STR Total 2 Insur YES Most MO1 Traffi	Status RANSIT Cle Type RAIGHT TRUCK (INSER I Occs rance? B. Harmful Event: Collision W TOR VEH IN TRANSPO	Train/Bus # Injured Direction Of Travel NORTHBOUND ith	Total # Citations Issue 0 Pre CrashTir Mark Special Function	e	Total Tra 1 Speed L	TRUCK Operating A ailers imit Emergency NOT APP	Total Hazi 0 Total Lane 3 Motor Vehi LICABLE	Mat Types es cle Use
	Unit : IN T Vehice STR Total 2 Insur YES Most MOT Traffi	Status RANSIT cle Type RAIGHT TRUCK (INSER I Occs rance? B. Harmful Event: Collision W TOR VEH IN TRANSPO ic Way	Train/Bus # Injured Direction Of Travel NORTHBOUND ith	Total # Citations Issue 0 Pre CrashTir Mark Special Function NO SPECIAL FUN Traffic Control	e	Total Tra 1 Speed L	TRUCK Operating A ailers imit Emergency NOT APP Traffic Con	Total Hazi 0 Total Lane 3 Motor Vehi LICABLE	Mat Types es cle Use
	Unit s IN T Vehic STR Total 2 Insur YES Most MOT Traffi DIVI	Status RANSIT cle Type LAIGHT TRUCK (INSER COCS rance? HARMIN Event: Collision W TOR VEH IN TRANSPO ic Way DED HWY W/O TRAFFI	Train/Bus # Injured Direction Of Travel NORTHBOUND ith	Total # Citations Issue O Pre CrashTir Mark Special Function NO SPECIAL FUN Traffic Control TRAFFIC SIGNAL	e	Total Tra 1 Speed L	TRUCK Operating A ailers imit Emergency NOT APP Traffic Con NO	Total Hazi 0 Total Lane 3 Motor Vehi LICABLE	Mat Types es cle Use
-	Unit : IN T Vehice STR Total 2 Insur YES Most MOT Traffi DIVI Surfa CON	Status RANSIT cle Type RAIGHT TRUCK (INSER COCS RAIGHT TRUCK (INSER COC	Train/Bus # Injured Direction Of Travel NORTHBOUND ith RT IC BARRIER	Total # Citations Issue 0 Pre CrashTir Mark Special Function NO SPECIAL FUN Traffic Control TRAFFIC SIGNAL Road Curvature STRAIGHT	e	Total Tra 1 Speed L	TRUCK Operating A ailers imit Emergency NOT APP Traffic Con NO Road Grad	Total Hazi 0 Total Lane 3 Motor Vehi LICABLE	Mat Types es cle Use
-	Unit: IN T Vehic STR Total 2 Insur YES Most MOT Traffi DIVI Surfa CON Truck	Status RANSIT cle Type RAIGHT TRUCK (INSER COCS RAIGHT TRUCK (INSER COC	Train/Bus # Injured Direction Of Travel NORTHBOUND ith	Total # Citations Issue 0 Pre CrashTir Mark Special Function NO SPECIAL FUN Traffic Control TRAFFIC SIGNAL Road Curvature STRAIGHT	e	Total Tra 1 Speed L	TRUCK Operating A ailers imit Emergency NOT APP Traffic Con NO Road Grad	Total Hazi 0 Total Lane 3 Motor Vehi LICABLE	Mat Types es cle Use
	Unit: IN T Vehic STR Total 2 Insur YES Most MOT Traffi DIVI Surfa CON Truck	Status RANSIT Cle Type RAIGHT TRUCK (INSER I Occs France? Cle Harmful Event: Collision W TOR VEH IN TRANSPO COMBON TRAFFORM COMBON TRUCK COMBON C	Train/Bus # Injured Direction Of Travel NORTHBOUND ith RT IC BARRIER	Total # Citations Issue 0 Pre CrashTir Mark Special Function NO SPECIAL FUN Traffic Control TRAFFIC SIGNAL Road Curvature STRAIGHT	e	Total Tra 1 Speed L 55	TRUCK Operating A ailers imit Emergency NOT APP Traffic Con NO Road Grad LEVEL Country of Is	Total Hazi 0 Total Lane 3 Motor Vehi LICABLE trol Inoperat	Mat Types es cle Use
-	Unit: IN T Vehic STR Total 2 Insur YES Most MOT Traffi DIVI Surfa CON Truck	Status RANSIT cle Type RAIGHT TRUCK (INSER I Occs rance? B. Harmful Event: Collision W FOR VEH IN TRANSPO ic Way DED HWY W/O TRAFFI ace Type NCRETE k Bus or HazMat JCK OR TRUCK COMBI Vehicle License Plate Number 63700X	Train/Bus # Injured Direction Of Travel NORTHBOUND ith RT IC BARRIER INATION > 10,000LBS C	Total # Citations Issue 0 Pre CrashTir Mark Special Function NO SPECIAL FUN Traffic Control TRAFFIC SIGNAL Road Curvature STRAIGHT GVWR/GCWR Plate Type SPX - SPECIAL X	e CTION	Total Tra 1 Speed L 55	TRUCK Operating A ailers imit Emergency NOT APP Traffic Con NO Road Grad LEVEL Country of Is UNITED S	Total Hazi 0 Total Lane 3 Motor Vehi LICABLE trol Inoperat	Mat Types es cle Use
	Unit : IN T Vehic STR Total 2 Insur YES Most MO01 Traffi DIVI Surfa CON Truck	Status RANSIT cle Type RAIGHT TRUCK (INSER I Occs rance? B. Harmful Event: Collision W FOR VEH IN TRANSPO ic Way DED HWY W/O TRAFFI ace Type NCRETE k Bus or HazMat JCK OR TRUCK COMBI Vehicle License Plate Number 63700X Vehicle Identification Number	Train/Bus # Injured Direction Of Travel NORTHBOUND ith RT IC BARRIER INATION > 10,000LBS C	Total # Citations Issue 0 Pre CrashTir Mark Special Function NO SPECIAL FUN Traffic Control TRAFFIC SIGNAL Road Curvature STRAIGHT SVWR/GCWR Plate Type SPX - SPECIAL X Make	re CTION	Total Tra 1 Speed L 55 St WI Year	TRUCK Operating A ailers imit Emergency NOT APP Traffic Con NO Road Grad LEVEL Country of Is UNITED S Model	Total Hazi 0 Total Lane 3 Motor Vehi LICABLE trol Inoperat	Mat Types es cle Use
	Unit: IN T Vehic STR Total 2 Insur YES Most MOT Traffi DIVI Surfa CON Truck	Status RANSIT cle Type RAIGHT TRUCK (INSER COCS Fance? Status RAIGHT TRUCK (INSER RAIGHT TRUCK COMBINATION RAIGHT RAIG	Train/Bus # Injured Direction Of Travel NORTHBOUND ith RT IC BARRIER INATION > 10,000LBS C	Total # Citations Issue 0 Pre CrashTir Mark Special Function NO SPECIAL FUN Traffic Control TRAFFIC SIGNAL Road Curvature STRAIGHT GVWR/GCWR Plate Type SPX - SPECIAL X Make PETERBILT MOTO	re CTION	Total Tra 1 Speed L 55	TRUCK Operating A ailers imit Emergency NOT APP Traffic Con NO Road Grad LEVEL Country of Is UNITED S Model TOW TRU	Total Hazi 0 Total Lane 3 Motor Vehi LICABLE trol Inoperat	Mat Types es cle Use
	Unit : IN T Vehic STR Total 2 Insur YES Most MO01 Traffi DIVI Surfa CON Truck	Status RANSIT cle Type RAIGHT TRUCK (INSER I Occs rance? B. Harmful Event: Collision W FOR VEH IN TRANSPO ic Way DED HWY W/O TRAFFI ace Type NCRETE k Bus or HazMat JCK OR TRUCK COMBI Vehicle License Plate Number 63700X Vehicle Identification Number	Train/Bus # Injured Direction Of Travel NORTHBOUND ith RT IC BARRIER INATION > 10,000LBS C	Total # Citations Issue 0 Pre CrashTir Mark Special Function NO SPECIAL FUN Traffic Control TRAFFIC SIGNAL Road Curvature STRAIGHT SVWR/GCWR Plate Type SPX - SPECIAL X Make	ction CTION ORS CO	Total Tra 1 Speed L 55 St WI Year	TRUCK Operating A ailers imit Emergency NOT APP Traffic Con NO Road Grad LEVEL Country of Is UNITED S Model	Total Hazi 0 Total Lane 3 Motor Vehi LICABLE trol Inoperat e	Mat Types es cle Use
	Unit : IN T Vehick STR Total 2 InsurryES MOST MOST Traffi DIVI Surfa CON TRU	Status RANSIT Cle Type RAIGHT TRUCK (INSER COCS Fance? Status RAIGHT TRUCK (INSER RAIGHT TRUCK RAIGHT RAI	Train/Bus # Injured Direction Of Travel NORTHBOUND ith RT IC BARRIER INATION > 10,000LBS C	Total # Citations Issue 0 Pre CrashTir Mark Special Function NO SPECIAL FUN Traffic Control TRAFFIC SIGNAL Road Curvature STRAIGHT GVWR/GCWR Plate Type SPX - SPECIAL X Make PETERBILT MOTO Body Style	ction CTION ORS CO	Total Tra 1 Speed L 55 St WI Year	TRUCK Operating A ailers imit Emergency NOT APP Traffic Con NO Road Grad LEVEL Country of Is UNITED S Model TOW TRU Bus Use	Total Hazi 0 Total Lane 3 Motor Vehi LICABLE trol Inoperat e	Mat Types es cle Use
	Unit : IN T Vehick STR Total 2 InsurryES MOST MOST Traffi DIVI Surfa CON TRU	Status RANSIT Cle Type RAIGHT TRUCK (INSER COCS Fance? Status Fance? Fance? Status Fance? Fa	Train/Bus # Injured Direction Of Travel NORTHBOUND ith RT IC BARRIER INATION > 10,000LBS C	Total # Citations Issue 0 Pre CrashTir Mark Special Function NO SPECIAL FUN Traffic Control TRAFFIC SIGNAL Road Curvature STRAIGHT GVWR/GCWR Plate Type SPX - SPECIAL X Make PETERBILT MOTO Body Style TW - TOW TRUCK Vehicle Damage	ction CTION ORS CO	Total Tra 1 Speed L 55 St WI Year	TRUCK Operating A ailers imit Emergency NOT APP Traffic Con NO Road Grad LEVEL Country of Is UNITED S Model TOW TRU Bus Use	Total Hazi 0 Total Lane 3 Motor Vehi LICABLE trol Inoperat e	Mat Types es cle Use
	Unit : IN T Vehic STR Total 2 Insur YES Most MO01 Traffi DIVI Surfa CON Truck	Status RANSIT cle Type RAIGHT TRUCK (INSER COCS rance? Status RAIGHT TRUCK (INSER COCS rance? Status RAIGHT TRUCK (INSER COCS rance? Status RAIGHT TRUCK (INSER RAIGHT TRUCK (INSER RAIGHT TRUCK (INSER RAIGHT TRUCK COMBINATION RAIGHT RAIGH	Train/Bus # Injured Direction Of Travel NORTHBOUND ith RT IC BARRIER INATION > 10,000LBS C	Total # Citations Issue 0 Pre CrashTir Mark Special Function NO SPECIAL FUN Traffic Control TRAFFIC SIGNAL Road Curvature STRAIGHT GVWR/GCWR Plate Type SPX - SPECIAL X Make PETERBILT MOTE Body Style TW - TOW TRUCK	ction CTION ORS CO	Total Tra 1 Speed L 55 St WI Year	TRUCK Operating A ailers imit Emergency NOT APP Traffic Con NO Road Grad LEVEL Country of Is UNITED S Model TOW TRU Bus Use	Total Hazi 0 Total Lane 3 Motor Vehi LICABLE trol Inoperat e	Mat Types es cle Use

18-05891

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/06/2018

	Towed Due To Damage				V	Vehicle Removed By				
		NOT TOWED			C	PERATO	R			
		What Driver Was Doing			V	ehicle Facto	ors			
		SLOW/STOPPING				RAKES				
		Driver Prior Action Other				MARLO				
		Driver Actions								
	щ	FAILURE TO CONTRO	OL							
╘	VEHICL									
UNIT	표									
	>									
		Debuga Diatas atia as								
		Driver Distractions NOT DISTRACTED								
_	_									
7	2									
		Owner Name				Owner A	ddress			
		CRAIG REDENBAUG	H			1506 IS	LAND ST			
		(608) 356-7400				LA CRO	OSSE, WI 546	603 , US		
	,	Sequence Of Ever	nts							
	5	MOTOR VEH IN TRANSPORT								
	02	Event								
	03	Event								
	0	-								
	04	Event								
╘	ا	Policy Holder								
UNIT		Insurance Company				Individual				
		ACUITY,-A-MUTUAL-	INSURAN	ICE-C	30	CRAIG R	EDENBAUG	H		
		Trailer/Towed								
7			Plate Type SPX - SP		Make KW		State OH		try of Issuance ED STATES	
		Unit Type	31 X - 31		nization/Company		OII	Addre		
╘	TRAILER/ TOWED	TRUCK		DAY	TON FEIGHT LIN	IES INC		6450	POE AVE SUITE 311	
LINO	⋛⋛	Vehicle Identification Num	ber	(800) 860-5102			VANI	DALIA, OH 45414 , US	
	F F	1XKBDJ9X9EJ387513	3							
	ı	Individual								
		Driver				Citations Is	ssued		Sex	
	7	CRAIG REDENBAUG (608) 356-7400	iH			0			MALE	
	INDIVIDUAL	(666) 666 1 166				Date of Bir	th		Race WHITE	
	=	Address				Driver Lice	nse Number			
⋾	₫	1506 ISLAND ST								
	Z LA CROSSE, WI 54603, US			STATE: \	WISCONSIN (COUNTRY: UN	ITED STATES			
	Equipment On Duty Crash				Safety Equipment					
	Seat Position				SHOULDER & LAP BELT					
			T SIDE (D	RIVE	R/MOTORCY	SHOULDER & LAP BELT Y				
		FRONT SEAT-LEFT SIDE (DRIVER/MOTORC								

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Helmet Use				Helmet Compliance					
		Eye Protection			Tint Compliance						
_	_		Injury Severity		Airbag						
5	90	Injury	NO APPARENT	INJURY	NON DEPLOYE	D					
		Ejected			Ejection Path Trapped/Extricated						
		NOT EJECTED			NOT EJECTED/	NOT APPLICABL	NOT TRAPPED				
		Medical Transport			EMS Agency Identifier EMS Run #						
		NOT TRANSPORT	TED								
		Hospital			Date of Death		Time of Death				
		Non Motorist	Striking Unit #	Prior Action		Location	1	To/From School			
		Action									
LIND	INDIVIDUAL										
		Action Other									
	L	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	Test Type Drug Test Results					
5	90	Drug Type									
		Individual Condition									
		APPEARED NORI	MAL								
		la Partitoral									
		Individual			Citations Issued		10				
		Passenger JOHN WINKER			Citations Issued 0		Sex MALE				
	¥	(800) 860-8102			Date of Birth		Race				
_	5				Date of Birtin		WHITE				
LIND	₹	Address			Driver License Nur	nber					
>	INDIVIDUA	W5404 CTY RD G MAUSTON, WI 53	948 , US		STATE: WISCO	NSIN COUNTRY: UI	NITED STATES				
			On Duty Crash		Safety Equipment						
		Equipment									
		Seat Position 3FRONT SEAT-F	RIGHT SIDE (TR	AIN ENGINEER	SHOULDER & L	AP BELT					
	Helmet Use			Helmet Compliance	9						
Eye Protection			Tint Compliance								
5	Injury Severity NO APPARENT INJURY			Airbag NON DEPLOYED							

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Ejected				1 -	n Path			Trapped/Extr		
		NOT EJECTED				NOT	EJECTED/N	OT APPL	ICABL.	NOT TRAP	PED	
		Medical Transport				EMS A	gency Identific	er		EMS Run #		
		NOT TRANSPORT	TED									
		Hospital				Date o	f Death			Time of Deat	า	
			Striking L	Init #	Prior Action		Ti	Location		l .		To/From School
		Non Motorist		,, iii	1 1101 7 1011011			Location				10/1 Tolli Colloci
		Action										
		Action										
	INDIVIDUAL											
\vdash	\geq											
LIND	Ħ											
\supset	\leq											
	Z											
		Action Other										
			Suspecte	d Alcohol L	lse	Suspected Drug Use						
	E	Drug & Alcohol	NO	a / 11001101 C	,00	NO	otou Drug Ooo					
						A1	1 T 4 T			T A1	D t -	
		Alcohol Test Given				Alcono	ol Test Type			Alcohol Test	Results	
		TEST NOT GIVEN	l									
		Drug Test Given TEST NOT GIVEN				Drug T	est Type			Drug Test Re	sults	
2	005	Drug Type				•						
0	8											
		Individual Condition										
		APPEARED NOR	МАІ									
		AFFEARED NOR	IVIAL									
		0										
	•	Carrier										
		ا معال	/ahicla O	wner San	ne as Carrier		Source					
		Use \	veriicie O	Wilei Sai	ile as Carrier		DRIVER					
2	_	Name					Address					
0	6	CRAIG REDE	NBAUG	SH .			1506 ISLA					
		USDOT# 7706	39				LA CROSS	SE, WI 54	603 , US			
	ဟ	GVWR		Vehicle C	onfiguration		1		Carg	o Body Type		
_	\supset	MORE THAN 26,0	00 LB		•	10.000 LB				THER		
	ш	US DOT #		Carrier Ty		,	-, -, -, -, -, -, -, -, -, -, -, -, -, -			nitted Load		
5	¥	770639		-	OPERATION/	NOT SDE	CIEIED			APPLICABI	F	
	TRUCK	770039	WI Permit		1							
	<u>R</u>	☐ OS/OW Load	wi Peiiiii	number		rmitted V		Es		cle Required		scort Vehicle Present
	-					Permitted			ву Р	ermit		
		Measured Height		Measu	red Length		Measured W	iath		Measured We	ignt	
	Uni	t Summary I										
		Status				Vehicle O	perating As Cla	assification		Unit Type		
	IN T	RANSIT				D CLAS				AUTOMOB	ILE	
		cle Type								Operating As		nents
02		SENGER VAN								operating / to		
			Troi	n/Rue # Inii	urod	Total # Cit	ations leaved		Total Trail	ore	Total Hazl	Mat Types
		I Occs	irai	n/Bus # Inji	uieu		ations Issued				Total HazN	viai i ypes
	4					0			0		0	
		rance?		ection Of Tra		Pre	CrashTire		Speed Lim		Total Lane	es .
╘	YES			RTHBOU	ND		Mark		55	6		
		Harmful Event: Collisi				Special Fu		TION:		Emergency N		cle Use
_	MO	TOR VEH IN TRANSPORT			NO SPECIAL FUNCTION				NOT APPLICABLE			

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WISCONSIN MOTOR VEHICLE CRASH REPORT

	Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER		Traffic Contr			Traffic Control Inoperative/Missing				
			TRAFFIC			NO Road Grade				
		ace Type ACKTOP (BITUMINOUS)	Road Curvat			LEVEL				
		k Bus or HazMat	STRAIGHT			LEVEL				
	NO	N Dus of Flaziviat								
	,	Vehicle								
		License Plate Number	Plate Type		St	Country of Issuance				
		4AC997		TOMOBILE	MN	UNITED STATES				
2	~	Vehicle Identification Number	Make Year		Year	Model				
05	02	2A8HR54P68R738103	CHEVRO	LET	2008	TOWN & COU				
		Color	Body Style Bus Use							
		BLU - BLUE	VN - VAN NOT A BUS							
	Ë	Initial Contact Point 5RIGHT REAR CORNER	Vehicle Dar	nage						
LIND	1	Extent Of Damage	5RIGHT	REAR CORNER						
-	VEHICLE	MINOR DAMAGE		NEXIX COMMEN						
		Towed Due To Damage	Vehicle Rer	moved By						
		NOT TOWED	OPERATO	OR						
		What Driver Was Doing	Vehicle Fac	etors						
		STOP IN TRAFFIC	NOT ARR	LICABLE						
		Driver Prior Action Other	NOT APP	LICABLE						
		Driver Actions								
	Ш	NO CONTRIBUTING ACTION								
╘	VEHICL									
LNO	Ī									
	VE									
		Driver Distractions								
		Driver Distractions NOT DISTRACTED								
	~									
05	02									
		Owner Name	Owner	Address						
		CYNTHIA DRURY	122 W	VAN DUSEN ST						
		(507) 217-7566	SPRI	NGFIELD, MN 5608	37 , US					
	,	Sequence Of Events								
	01	Event MOTOR VEH IN TRANSPORT								
)									
	02	Event								
		Event								
	03									
	4	Event								
	04									
Policy Holder										
LNO		Insurance Company	Individua							
ا د		AMERICAN-FAMILY-MUTUAL-INS-CO	CYNTH	IA DRURY						
		Individual								
						Sex				
			0			FEMALE				

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WISCONSIN MOTOR VEHICLE CRASH REPORT

	_	CYNTHIA DRURY	Y							
_	INDINIDUAL	(507) 217-7566			Date of Birth		Race WHITE			
LNO	Ξ	Address			Driver License Nun	nber				
ا ر	Β	122 W VAN DUSE SPRINGFIELD, M			STATE: MINNES	SOTA COUNTRY: U	INITED STATES			
	_	SPRINGFIELD, IVI	N 30007 , US		OTATE: MINUTES	JOIA GOOMINI. C	MILDOTATEO			
		Equipment	On Duty Crash		Safety Equipment					
		Seat Position			SHOULDER & L	AP BELT				
		1FRONT SEAT-L	LEFT SIDE (DRIVE	R/MOTORCY	Helmet Compliance					
		Eye Protection			Tint Compliance					
05	003	Injury	Injury Severity NO APPARENT I	N.IIIRY	Airbag NON DEPLOYE	n				
		Ejected	1.10 / 11 / 1.12 1.11 1		Ejection Path		Trapped/Extricated			
		NOT EJECTED			NOT EJECTED/	NOT APPLICABL	NOT TRAPPED			
		Medical Transport NOT TRANSPORT	TED		EMS Agency Identi	fier	EMS Run #			
		Hospital			Date of Death		Time of Death			
		Non Motorist	Striking Unit #	Prior Action		Location		To/From School		
		Action								
		7.646.1								
	AL									
╘│	INDIVIDUAL									
L N N	Σ									
		Action Other								
			I Coord and Alach all	I	I Commented David III					
	D	Drug & Alcohol	Suspected Alcohol L NO	Jse	Suspected Drug Us	se				
		Alcohol Test Given TEST NOT GIVEN	1		Alcohol Test Type		Alcohol Test Results			
		Drug Test Given TEST NOT GIVEN	l		Drug Test Type		Drug Test Results			
05	003	Drug Type								
	0									
		Individual Condition								
		APPEARED NOR	MAL							
	ı	Individual			Citations Issued		Low			
	ر ر	Passenger RHEA GRUNDL			Citations Issued 0		Sex FEMALE			
	IDUAL	(507) 217-7566			Date of Birth		Race WHITE			
느 [집					1		7711112			

18-05891

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/06/2018

N	<u>></u>	Address	N CT		Driver License Number				
	INDIV	122 W VAN DUSE SPRINGFIELD, MI			STATE: MINNE	SOTA COUNTRY: I	JNITED STATES		
			On Duty Crash		Safety Equipment				
		Equipment	-						
		Seat Position			SHOULDER & L	AP BELT			
		4SECOND SEAT Helmet Use	-LEFT SIDE(MO	TORCYCLE/BI	Helmet Compliance	•			
		Heimet Use			Heimet Compliance	е			
		Eye Protection			Tint Compliance				
02	004	Injury	Injury Severity NO APPARENT	IN II IDV	Airbag NON DEPLOYED				
	_	Ejected	NO AFFARENT	INJUNI	Ejection Path		Trapped/Extricated		
		NOT EJECTED			·	NOT APPLICABL	NOT TRAPPED		
		Medical Transport			EMS Agency Ident	ifier	EMS Run #		
		NOT TRANSPORT	TED		D . (D .)		T. (D.)		
		Hospital	spital		Date of Death		Time of Death		
		Non Motorist	Striking Unit #	Prior Action		Location		To/From School	
		Action							
		Action							
	4								
⊨	Š								
UNIT	₹								
_	INDIVIDUAL								
	=								
		Action Other							
			Suspected Alcohol	Use	Suspected Drug U	se			
	L	Orug & Alcohol	NO		NO				
		Alcohol Test Given TEST NOT GIVEN	1		Alcohol Test Type		Alcohol Test Results		
		Drug Test Given			Drug Test Type		Drug Test Results		
		TEST NOT GIVEN			2.09 .00)po		Drug Test Results		
02	90	Drug Type			·		•		
_	0								
		Individual Condition							
		APPEARED NORI	MAL						
	ı	Individual							
		Passenger	- · ·		Citations Issued		Sex		
	ļ	HAYWARD DRUF (507) 217-7566	RΥ		0		MALE		
_	INDIVIDUAL	,			Date of Birth		Race WHITE		
UNIT	₹	Address			Driver License Nur	mber			
ر	S	122 W VAN DUSE SPRINGFIELD, MI			STATE: MINNE	SOTA COUNTRY-1	JNITED STATES		
		OI KINGI IELD, IVII			STATE: MINNESOTA COUNTRY: UNITED STATES				
		Equipment	On Duty Crash						
		_quipinent							

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WISCONSIN MOTOR VEHICLE CRASH REPORT

					Safety Equipment						
		Seat Position			SHOULDER & L	AP BELT					
		6SECOND SEAT	T-RIGHT SIDE								
		Helmet Use			Helmet Compliance						
		Eye Protection			Tint Compliance						
02	900	Injury	Injury Severity		Airbag						
0	0	Injury	NO APPARENT I	INJURY	NON DEPLOYE	D	T				
		Ejected NOT EJECTED			Ejection Path	NOT APPLICABL	Trapped/Extricated NOT TRAPPED				
		Medical Transport			EMS Agency Ident		EMS Run #				
		NOT TRANSPOR	TED		Livio Agency Ident		EWO IXIII #				
		Hospital			Date of Death		Time of Death				
		Non Motorist Striking Unit # Prior Action				Location		To/From School			
		Action									
	1										
_	3										
UNIT	₽										
\supset	INDIVIDUAL										
	Z										
		Action Other									
		Action Other									
	_		Suspected Alcohol U	Jse	Suspected Drug U	se					
	L	Orug & Alcohol	NO		NO						
		Alcohol Test Given	_		Alcohol Test Type		Alcohol Test Results				
		TEST NOT GIVEN	l .		D T .T		Drug Test Desults				
		Drug Test Given TEST NOT GIVEN	ı		Drug Test Type		Drug Test Results				
٥.	2	Drug Type									
07	002	1 - 1 - 2 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3									
		Individual Condition									
		APPEARED NOR	MAL								
		Individual			Citations Issued		10				
		Passenger VICTORIA GRUN	IDL		Citations Issued 0		Sex FEMALE				
	¥	(507) 217-0742			Date of Birth		Race				
—	INDIVIDUAL						WHITE				
LNO	≥	Address			Driver License Nur	nber					
_	2	122 W VAN DUSE SPRINGFIELD, M			STATE: MINNE	SOTA COUNTRY: U	INITED STATES				
	_	SPRINGFIELD, IVI	IN 30007 , US		OTATE: MINUTE	SOTA GOOMINT.	ONITED OTATEO				
			On Duty Crash		Safety Equipment						
		Equipment	2 20., 514611		Jaioty Equipment						
		Seat Position			SHOULDER & LAP BELT						
		3FRONT SEAT-	RIGHT SIDE (TRA	IN ENGINEER							
		Helmet Use			Helmet Compliance						
					·						

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WISCONSIN MOTOR VEHICLE CRASH REPORT

	Eye Protection				Tint Compliance					
02	900	Injury	Injury Severity NO APPARENT	INJURY	Airbag NON DEPLOYEI)				
		Ejected			Ejection Path			Trapped/Ext	tricated	
		NOT EJECTED			NOT EJECTED/I	NOT EJECTED/NOT APPLICABL			NOT TRAPPED	
		Medical Transport			EMS Agency Identi	fier		EMS Run #		
		NOT TRANSPOR	TED							
		Hospital			Date of Death	Date of Death			th	
		Non Motorist	Striking Unit #	Prior Action		Location			To/From School	
		Action	•	-1					•	
TINO	INDIVIDUAL									
		Action Other								
	E	rug & Alcohol	Suspected Alcohol NO	Suspected Drug Us	NO					
		Alcohol Test Given TEST NOT GIVEN	I		Alcohol Test Type			Alcohol Tes	t Results	
		Drug Test Given TEST NOT GIVEN	I		Drug Test Type			Drug Test R	esults	
05	900	Drug Type								
		Individual Condition APPEARED NOR	MAL							
	Uni	Summary								
		Status		I V	/ehicle Operating As C	Classification		Unit Type		
	IN T	RANSIT			CLASS			AUTOMOBILE		
3	Vehi	cle Type						Operating A	s Endorsements	
03	(SP	ORT) UTILITY VEH	IICLE							
	Tota 2	Occs	Train/Bus # In	•	Total # Citations Issued	i	Total Traile	ers	Total HazMat Types 0	
_	Insu	rance?	Direction Of T	-	Pre CrashTire	9	Speed Lim	it	Total Lanes 6	
UNIT		Harmful Event: Collis			Special Function NO SPECIAL FUNC	CTION	L	Emergency NOT APPI	Motor Vehicle Use LICABLE	
	Traff	ic Way		Т	Traffic Control			Traffic Conti	rol Inoperative/Missing	
	DIVI	DED HWY W/O TR	AFFIC BARRIER	ı	NO CONTROL			NO		
	Surfa	асе Туре		F	Road Curvature			Road Grade		
	CO	NCRETE		8	STRAIGHT			LEVEL		
Truck Bus or HazMat								•		
	'	Vehicle								
				Plate Type	_	St	Country of Is			
		185XLS	Numbor		AUT - AUTOMOBI Make	LC	WI Year	UNITED STATES		
03	Vehicle Identification Number 1FMZU73K44ZB24674			FORD		2004	Model EXPLORER			

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WISCONSIN MOTOR VEHICLE CRASH REPORT

			Body Style 4H - HATCHBACK 4 DOOR	Bus Use NOT A BUS			
	Е		Vehicle Damage				
╘	CL	11LEFT FRONT CORNER	•				
UNIT	VEHICL	9	11LEFT FRONT CORNER				
	VE	MINOR DAMAGE	V.I				
		_	Vehicle Removed By OPERATOR				
			Vehicle Factors				
		STOP IN TRAFFIC					
		Driver Prior Action Other	NOT APPLICABLE				
		Driver Actions					
	Щ	NO CONTRIBUTING ACTION					
UNIT	VEHICL						
5	EH						
	>						
		Driver Distractions					
		NOT DISTRACTED					
03	03						
		Owner Name CARRIE COLE	Owner Address E11305A MOON RD				
		(608) 963-6650	BARABOO, WI 53913 , US				
		Sequence Of Events Event					
	01	MOTOR VEH IN TRANSPORT					
	02	Event					
		Event					
	03						
	04	Event					
_		Policy Holder					
LINO		Insurance Company	Individual				
ر		AMERICAN-FAMILY-MUTUAL-INS-CO	CARRIE COLE				
	I	ndividual					
		Driver CARRIE COLE	Citations Issued 0	Sex FEMALE			
	IAL	(608) 963-6650	Date of Birth	Race			
⊨	INDIVIDUAL			WHITE			
)IV	Address E11305A MOON RD	Driver License Number				
	Z	BARABOO, WI 53913, US	STATE: WISCONSIN COUNTRY: UN	NITED STATES			
		On Duty Crash	Safety Equipment				
		Equipment Seat Position	SHOULDER & LAR RELT				
		Seat Position 1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY	SHOULDER & LAP BELT TORCY				
		Helmet Use	Helmet Compliance				

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WISCONSIN MOTOR VEHICLE CRASH REPORT

	Eye Protection			Tint Compliance						
83	000	Injury	Injury Severity POSSIBLE INJUI	RY	Airbag NON DEPLOYEI)				
		Ejected			Ejection Path		Trapped/Extricated			
		NOT EJECTED			NOT EJECTED/NOT APPLICABL NOT TRAP					
		Medical Transport NOT TRANSPORT	TED		EMS Agency Identi	tier	EMS Run #			
		Hospital	160		Date of Death		Time of Death			
		Troopita.			Julio di Jouin					
		Non Motorist	Striking Unit #	Prior Action	Location To/From Sch					
		Action								
₋│	INDIVIDUAL									
	IVID									
	ND									
=										
		Action Other								
	_	Drug & Alashal	Suspected Alcohol L	Jse	Suspected Drug Us	e				
	L	Orug & Alcohol	NO		NO		T			
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type		Alcohol Test Results			
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Results			
03	007	Drug Type								
		Individual Condition								
		APPEARED NOR	MAL							
	ļ	Individual								
		Passenger BRYCE ALBREC	нт		Citations Issued 0		Sex MALE			
	AL				Date of Birth		Race			
∟ا	INDINIDUAL						WHITE			
	N	Address			Driver License Num	ber	•			
_	IN	506 BOWMAN RD WISCONSIN DELI		5						
		Equipment	On Duty Crash		Safety Equipment					
	ĺ	Seat Position			CHILD RESTRA	INT SYSTEM - FORW	VARD FACING			
		6SECOND SEAT	-RIGHT SIDE		OTHER RESTRA		TARD I AOING			
		Helmet Use			Helmet Compliance					
	Eye Protection				Tint Compliance					
03	800	 Injury	Injury Severity	W. W.B.V	Airbag					
	0	Ejected	NO APPARENT I	INJUKY	NON DEPLOYED Figetion Both Trappod/Evtricated					
		NOT EJECTED			Ejection Path Trapped/Extricate NOT EJECTED/NOT APPLICABL NOT TRAPPEI					
					NOT ESECTED/NOT ATT LICADE NOT TRAFFED					

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/06/2018

		Medical Transport NOT TRANSPORTED			EMS Agency Identifier		EMS Run #	
		Hospital			Date of Death		Time of Death	
		Non Motorist	Striking Unit #	Prior Action		Location		To/From School
LIND	INDIVIDUAL	Action Action Other						
	L	Drug & Alcohol Suspected Alcohol Use			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	
03	800	Drug Type						
		Individual Condition APPEARED NORMAL						