

6TL0B4X4HQ  
18-06287

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

6TL0B4X4HQ

|  |                                      |   |                                    |   |  |  |                           |
|--|--------------------------------------|---|------------------------------------|---|--|--|---------------------------|
| Document Number Override                       |                                      | Primary Crash Document #                          |                                    | Agency Crash Number<br><b>18-06287</b>    |  | Investigating Officer/Deputy<br><b>DEPUTY E. KNULL</b> |                           |
| Crash Date<br><b>06/15/2018</b>                |                                      | Crash Time<br><b>01:52 PM</b>                     |                                    | Date Arrived<br><b>06/15/2018</b>         |  | Time Arrived<br><b>02:01 PM</b>                        |                           |
| Date Notified<br><b>06/15/2018</b>             |                                      | Time Notified<br><b>01:52 PM</b>                  |                                    | Total Units<br><b>02</b>                  |  | Total Injured<br><b>00</b>                             | Total Killed<br><b>00</b> |
| <input type="checkbox"/> On Emergency          | <input type="checkbox"/> Hit and Run | <input type="checkbox"/> Lane Closure             | <input type="checkbox"/> Work Zone | <input type="checkbox"/> Trailer or Towed |  | <input type="checkbox"/> Reporting Threshold           |                           |
| <input type="checkbox"/> Government Property   |                                      | <input type="checkbox"/> Active School Zone       |                                    | School Bus Related<br><b>NO</b>           |  | Tags   |                           |
| <input checked="" type="checkbox"/> Reportable |                                      | Crash Type<br><b>PRIVATE PROPERTY/PARKING LOT</b> |                                    | <input type="checkbox"/> Amended          |  | <input type="checkbox"/> Secondary Crash               |                           |

Description

|   |                                       |
|---|---------------------------------------|
| <p>Diagram</p> <p style="text-align: center;">not to scale</p> <p style="text-align: center;">summit credit union parking lot</p> | Reconstruction By                     |
|   | Photos By                             |
|   | Additional Information<br><b>NONE</b> |

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

UNIT 1 WAS BACKING OUT OF STALL AND STRUCK THE FRONT OF UNOCCUPIED UNIT 2. MINOR DAMAGE TO UNIT 2 AND NO DAMAGE TO UNIT 1. NO INJURIES REPORTED. BOTH VEHICLES DRIVEN FROM THE SCENE BY EACH RESPECTIVE OPERATOR. NOTHING FURTHER.

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Location

|   |   |                                  |
|---|---|----------------------------------|
| ON 871 COMMERCE AVE<br>151 FT E<br>OF COMMERCE CT<br>(HOUSE/BUILDING 871)<br><br>IN THE CITY OF BARABOO<br>IN SAUK COUNTY | Latitude<br><b>43.460991449</b>         | Longitude<br><b>-89.77289275</b> |
|   | X Coordinate<br><b>275678.25</b>        | Y Coordinate<br><b>4815744.5</b> |
|   | Structure Type<br><b>HOUSE/BUILDING</b> |                                  |

Crash Scene

|   |   |   |
|---|---|---|
| First Harmful Event<br><b>PARKED MOTOR VEHICLE</b>        | First Harmful Event Location<br><b>IN PARKING LANE OR ZONE</b>        |   |
| Manner of Collision<br><b>02--FRONT TO REAR</b>           | Light Condition<br><b>DAYLIGHT</b>                                    |   |
| Road Surface Condition(s)<br><b>DRY</b>                   | Roadway Factor(s)<br><br><b>NONE</b>                                  |   |
| Environment Factor(s)<br><b>NONE</b>                      |   |   |
| Weather Condition(s)<br><b>CLEAR</b>                      |   |   |
| Animal Type   | Relation To Trafficway<br><b>NON TRAFFICWAY - PARKING LOT</b>         |   |
| Crash Classification - Location<br><b>PUBLIC PROPERTY</b> | Crash Classification - Jurisdiction<br><b>NO SPECIAL JURISDICTION</b> |   |
| Tribal Land   | Access Control<br><b>NO CONTROL</b>                                   | Special Study                                   |
| Within Interchange Area<br><b>NO</b>                      | Junction Location<br><b>NON-JUNCTION</b>                              | Intersection Type<br><b>NOT AN INTERSECTION</b> |

Unit Summary

|            |   |   |  |  |                                |
|------------|---|---|--|--|--------------------------------|
| UNIT<br>01 | Unit Status<br><b>IN TRANSIT</b>                                  | Vehicle Operating As Classification<br><b>D CLASS</b> | Unit Type<br><b>TRUCK</b>                      |  |                                |
|            | Vehicle Type<br><b>UTILITY TRUCK/PICKUP TRUCK</b>                 |   |  | Operating As Endorsements                            |                                |
|            | Total Occs<br><b>1</b>  | Train/Bus # Injured                                   | Total # Citations Issued<br><b>0</b>           | Total Trailers<br><b>0</b>                           | Total HazMat Types<br><b>0</b> |
|            | Insurance?<br><b>YES</b>  | Direction Of Travel<br><b>NOT ON ROADWAY</b>          | <input type="checkbox"/> Pre Crash Tire Mark   | Speed Limit  | Total Lanes                    |
|            | Most Harmful Event: Collision With<br><b>PARKED MOTOR VEHICLE</b> |   | Special Function<br><b>NO SPECIAL FUNCTION</b> | Emergency Motor Vehicle Use<br><b>NOT APPLICABLE</b> |                                |
|            | Traffic Way<br><b>PARKING LOT OR PRIVATE PROPERTY</b>             |   | Traffic Control<br><b>NO CONTROL</b>           | Traffic Control Inoperative/Missing<br><b>NO</b>     |                                |
|            | Surface Type<br><b>BLACKTOP (BITUMINOUS)</b>                      |   | Road Curvature<br><b>STRAIGHT</b>              | Road Grade<br><b>LEVEL</b>                           |                                |
|            | Truck Bus or HazMat<br><b>NO</b>                                  |   |  |  |                                |

|                                      |   |  |                     |   |
|--------------------------------------|---|--|---------------------|---|
| UNIT<br>01<br>VEHICLE<br>01          | <b>Vehicle</b>  |  |                     |   |
|                                      | License Plate Number<br><b>751096</b>                     | Plate Type<br><b>LTK - LIGHT TRUCK</b> | St<br><b>WI</b>     | Country of Issuance<br><b>UNITED STATES</b> |
|                                      | Vehicle Identification Number<br><b>1GCVKREC5FZ406433</b> | Make<br><b>CHEVROLET</b>               | Year<br><b>2015</b> | Model<br><b>NO DATA FO</b>                  |
|                                      | Color<br><b>WHI - WHITE</b>                               | Body Style<br><b>PK - PICKUP</b>       |                     | Bus Use<br><b>NOT A BUS</b>                 |
|                                      | Initial Contact Point<br><b>6--REAR</b>                   | Vehicle Damage<br><br><b>NO DAMAGE</b> |                     |   |
| Extent Of Damage<br><b>NO DAMAGE</b> |   |  |                     |   |

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|             |   |  |   |  |
|-------------|---|--|---|--|
| <b>UNIT</b> | Towed Due To Damage<br><b>NOT TOWED</b>                         |  | Vehicle Removed By<br><b>OPERATOR</b>   |  |
|             | What Driver Was Doing<br><b>BACKING</b>                         |  | Vehicle Factors   |  |
|             | Driver Prior Action Other                                       |  | <b>NOT APPLICABLE</b>   |  |
|             | Driver Actions<br><b>NO CONTRIBUTING ACTION</b>                 |  |   |  |
|             | Driver Distractions<br><b>NOT DISTRACTED</b>                    |  |   |  |
| <b>01</b>   | <b>01</b>   | Owner Name<br><b>LESLIE W DEFIEL JR<br/>(608) 963-8880</b> |   | Owner Address<br><b>208 LOCUST ST<br/>BARABOO, WI 53913 , US</b> |
|             |   | <b>Sequence Of Events</b>                                  |   |  |
| <b>UNIT</b> | <b>01</b>   | Event<br><b>PARKED MOTOR VEHICLE</b>                       |   |  |
|             |   | Event  |   |  |
|             |   | Event  |   |  |
|             |   | Event  |   |  |
| <b>UNIT</b> | <b>04</b>   | <b>Policy Holder</b>                                       |   |  |
|             |   | Insurance Company<br><b>WEST-BEND-MUTUAL-INS-CO</b>        | Individual<br><b>LESLIE DEFIEL</b>  |  |
| <b>UNIT</b> | <b>01</b>   | <b>Individual</b>  |   |  |
|             |   | Driver<br><b>LESLIE W DEFIEL JR<br/>(608) 963-8880</b>     | Citations Issued<br><b>0</b>  | Sex<br><b>MALE</b>   |
|             |   |  | Date of Birth<br>[REDACTED]   | Race<br><b>INDIAN</b>  |
|             |   | Address<br><b>208 LOCUST ST<br/>BARABOO, WI 53913 , US</b> | Driver License Number<br>[REDACTED]<br><b>STATE: WISCONSIN COUNTRY: UNITED STATES</b> |  |
|             |   | <b>Equipment</b>   | On Duty Crash   | Safety Equipment<br><b>SHOULDER &amp; LAP BELT</b>               |
|             | Seat Position<br><b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b> | Helmet Compliance  |   |  |
|             | Helmet Use  | Tint Compliance  |   |  |
|             | Eye Protection  |  |   |  |
| <b>01</b>   | <b>001</b>  | <b>Injury</b>  | Injury Severity<br><b>NO APPARENT INJURY</b>  | Airbag<br><b>NON DEPLOYED</b>                                    |
|             |   | Ejected<br><b>NOT EJECTED</b>                              | Ejection Path<br><b>NOT EJECTED/NOT APPLICABL</b>                                     | Trapped/Extricated<br><b>NOT TRAPPED</b>                         |

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|---|--|------------------------------------|---------------------------------|----------|----------------|
| UNIT<br><br><br><br><br><br><br><br><br><br><br>01<br><br><br><br><br><br><br><br><br><br><br>001 | Medical Transport<br><b>NOT TRANSPORTED</b>    | EMS Agency Identifier              | EMS Run #                       |          |                |
|   | Hospital                                       | Date of Death                      | Time of Death                   |          |                |
|   | <b>Non Motorist</b>                            | Striking Unit #                    | Prior Action                    | Location | To/From School |
|   | Action   |                                    |                                 |          |                |
|   | Action Other                                   |                                    |                                 |          |                |
|   | <b>Drug &amp; Alcohol</b>                      | Suspected Alcohol Use<br><b>NO</b> | Suspected Drug Use<br><b>NO</b> |          |                |
|   | Alcohol Test Given<br><b>TEST NOT GIVEN</b>    | Alcohol Test Type                  | Alcohol Test Results            |          |                |
|   | Drug Test Given<br><b>TEST NOT GIVEN</b>       | Drug Test Type                     | Drug Test Results               |          |                |
|   | Drug Type                                      |                                    |                                 |          |                |
|   | Individual Condition<br><b>APPEARED NORMAL</b> |                                    |                                 |          |                |

Unit Summary

|  |   |   |  |  |                                |  |
|--|---|---|--|--|--------------------------------|--|
| UNIT<br><br><br><br><br><br><br><br><br><br><br>02 | Unit Status<br><b>LEGALLY PARKED</b>                                | Vehicle Operating As Classification<br><b>D CLASS</b> | Unit Type<br><b>AUTOMOBILE</b>                 |  |                                |  |
|  | Vehicle Type<br><b>PASSENGER CAR</b>                                | Operating As Endorsements                             |  |  |                                |  |
|  | Total Occs<br><b>0</b>  | Train/Bus # Injured                                   | Total # Citations Issued<br><b>0</b>           | Total Trailers<br><b>0</b>                           | Total HazMat Types<br><b>0</b> |  |
|  | Insurance?<br><b>YES</b>  | Direction Of Travel<br><b>NOT ON ROADWAY</b>          | <input type="checkbox"/> Pre Crash Tire Mark   | Speed Limit  | Total Lanes                    |  |
|  | Most Harmful Event: Collision With<br><b>MOTOR VEH IN TRANSPORT</b> |   | Special Function<br><b>NO SPECIAL FUNCTION</b> | Emergency Motor Vehicle Use<br><b>NOT APPLICABLE</b> |                                |  |
|  | Traffic Way<br><b>PARKING LOT OR PRIVATE PROPERTY</b>               |   | Traffic Control<br><b>NO CONTROL</b>           | Traffic Control Inoperative/Missing<br><b>NO</b>     |                                |  |
|  | Surface Type<br><b>BLACKTOP (BITUMINOUS)</b>                        |   | Road Curvature<br><b>STRAIGHT</b>              | Road Grade<br><b>LEVEL</b>                           |                                |  |
|  | Truck Bus or HazMat<br><b>NO</b>                                    |   |  |  |                                |  |

|  |   |                                       |                     |   |  |
|--|---|---------------------------------------|---------------------|---|--|
| UNIT<br><br><br><br><br><br><br><br><br><br><br>02 | <b>Vehicle</b>  |                                       |                     |   |  |
|  | License Plate Number<br><b>416GHH</b>                     | Plate Type<br><b>AUT - AUTOMOBILE</b> | St<br><b>WI</b>     | Country of Issuance<br><b>UNITED STATES</b> |  |
|  | Vehicle Identification Number<br><b>2C3HD36J41H672573</b> | Make<br><b>CHRYSLER</b>               | Year<br><b>2001</b> | Model<br><b>CONCORDE L</b>                  |  |
|  | Color<br><b>BLU - BLUE</b>                                | Body Style<br><b>4D - 4DR</b>         |                     | Bus Use<br><b>NOT A BUS</b>                 |  |
|  | Initial Contact Point<br><b>12--FRONT</b>                 | Vehicle Damage                        |                     |   |  |
|  | Extent Of Damage<br><b>MINOR DAMAGE</b>                   | <b>12--FRONT</b>                      |                     |   |  |

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|------|---------|--|--|
| UNIT | VEHICLE | Towed Due To Damage<br><b>NOT TOWED</b>                    | Vehicle Removed By<br><b>OPERATOR</b>                              |
|      |         | What Driver Was Doing<br><b>LEGALLY PARKED</b>             | Vehicle Factors  |
|      |         | Driver Prior Action Other                                  | <b>NOT APPLICABLE</b>  |
|      |         | Driver Actions<br><b>NO CONTRIBUTING ACTION</b>            |  |
|      |         | Driver Distractions<br><b>NOT DISTRACTED</b>               |  |
| 02   | 02      | Owner Name<br><b>REBECCA L SCHEELER<br/>(608) 963-8358</b> | Owner Address<br><b>634 2ND ST #1<br/>REEDSBURG, WI 53959 , US</b> |
|      |         | <b>Sequence Of Events</b>                                  |  |
| UNIT | 01      | Event<br><b>MOTOR VEH IN TRANSPORT</b>                     |  |
|      |         | Event  |  |
|      |         | Event  |  |
|      |         | Event  |  |
| 04   | 04      | <b>Policy Holder</b>                                       |  |
|      |         | Insurance Company<br><b>AMERICAN-FAMILY-INS-CO</b>         | Individual<br><b>REBECCA SCHEELER</b>                              |