

6TL09426RL
18-10217

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

Location

ON LINN ST/ STH33 WB 221 FT E OF USH12 WB IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	Latitude 43.474786663	Longitude -89.767930283
	X Coordinate 276130.6875	Y Coordinate 4817263.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 02--FRONT TO REAR	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

01 UNIT	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 # Injured	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 25	Total Lanes 4	
	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					

01 UNIT	Vehicle				
	License Plate Number 490ZDF	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number 1C4NJDEB1ED600207	Make JEEP	Year 2014	Model COMPASS LA	
	Color BLK - BLACK	Body Style UT - SPORT UTILITY VEHICLE		Bus Use NOT A BUS	
	Initial Contact Point 6--REAR	Vehicle Damage 6--REAR			
Extent Of Damage MINOR DAMAGE					

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UNIT	VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER			
		What Driver Was Doing SLOW/STOPPING		Vehicle Factors			
		Driver Prior Action Other		NOT APPLICABLE			
		Driver Actions NO CONTRIBUTING ACTION					
01	01	Driver Distractions NOT DISTRACTED					
		Owner Name HALEY MARIE HOFFMAN (608) 393-6206		Owner Address 429 LAKE ST # 2 BARABOO, WI 53913 , US			
Sequence Of Events							
UNIT	INDIVIDUAL	01	Event MOTOR VEH IN TRANSPORT				
		02	Event				
		03	Event				
		04	Event				
Policy Holder							
UNIT	INDIVIDUAL	Insurance Company AMERICAN-FAMILY-INS-CO		Individual HALEY HOFFMAN			
		Driver HALEY MARIE HOFFMAN (608) 393-6206		Citations Issued 0	Sex FEMALE		
UNIT	INDIVIDUAL	Date of Birth [REDACTED]		Race WHITE			
		Address 429 LAKE ST # 2 BARABOO, WI 53913 , US		Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES			
01	001	Equipment		On Duty Crash			
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		Safety Equipment SHOULDER & LAP BELT			
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
		Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED		
		Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABL		Trapped/Extricated NOT TRAPPED	

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UNIT	INDIVIDUAL	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
		Action					
		Action Other					
		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	INDIVIDUAL	Individual					
		Passenger DAVID JACOB THOMPSON (608) 963-3139		Citations Issued 0	Sex MALE		
		Address 429 LAKE ST # 2 BARABOO, WI 53913 , US		Date of Birth [REDACTED]	Race WHITE		
				Driver License Number [REDACTED]	STATE: WISCONSIN COUNTRY: UNITED STATES		
		Equipment		On Duty Crash	Safety Equipment		
		Seat Position 3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER		SHOULDER & LAP BELT			
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
		Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED		
		Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT TRAPPED		
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		

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UNIT	INDIVIDUAL	Action			
		Action Other			
	01	002	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 PASSENGER CAR	Operating As Endorsements			
		Total Occs 5	Train/Bus # Injured	Total # Citations Issued 1	Total Trailers 0	Total HazMat Types 0
		Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 25	Total Lanes 4
		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				

UNIT	02	Vehicle			
		License Plate Number 125YRC	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 3FAHP011X7R162014	Make FORD	Year 2007	Model FUSION
		Color RED - RED	Body Style SD - SEDAN		Bus Use NOT A BUS
		Initial Contact Point 12--FRONT	Vehicle Damage		
		Extent Of Damage DISABLING DAMAGE	12--FRONT		
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By OWNER		
		What Driver Was Doing GOING STRAIGHT	Vehicle Factors		
		Driver Prior Action Other	NOT APPLICABLE		

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UNIT 02	VEHICLE 02	Driver Actions NO CONTRIBUTING ACTION		
		Driver Distractions DISTRACTION/INATTENTION		
		Owner Name RANDALL R NEUMAN (608) 477-0179	Owner Address E12589 NEUMAN RD BARABOO, WI 53913 , US	
Sequence Of Events				
UNIT 01	02	Event MOTOR VEH IN TRANSPORT		
		Event		
		Event		
		Event		
UNIT 04	INDIVIDUAL 003	Policy Holder		
		Insurance Company RURAL-MUTUAL-INS-CO-(ATTN:-CLAIMS-DEPT)	Individual RANDALL NEUMAN	
		Individual		
UNIT 02	INDIVIDUAL 003	Driver GRACE NICOLE NEUMAN (608) 477-0179	Citations Issued 1	Sex FEMALE
			Date of Birth [REDACTED]	Race WHITE
		Address E12589 NEUMAN RD BARABOO, WI 53913 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
		Equipment	On Duty Crash	Safety Equipment SHOULDER & LAP BELT
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		
		Helmet Use	Helmet Compliance	
		Eye Protection	Tint Compliance	
		Injury	Injury Severity NO APPARENT INJURY	Airbag DEPLOYED-FRONT
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT TRAPPED
		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

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UNIT	INDIVIDUAL	Action					
		Action Other					
		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	INDIVIDUAL	Individual			
				Passenger JILLIAN KATHLEEN SHANKS (608) 393-4317	Citations Issued 0	Sex FEMALE	
					Date of Birth [REDACTED]	Race WHITE	
Address E9903 STATE ROAD 136 BARABOO, WI 53913 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES						
Equipment	On Duty Crash			Safety Equipment			
	Seat Position 5--SECOND SEAT-MIDDLE			SHOULDER & LAP BELT			
Helmet Use	Helmet Compliance						
Eye Protection	Tint Compliance						
Injury	Injury Severity NO APPARENT INJURY			Airbag NON DEPLOYED			
	Ejected NOT EJECTED			Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT TRAPPED		
	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		

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UNIT 02	INDIVIDUAL 004	Action				
		Action Other				
		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				
		Individual				
		Passenger KAPRIECE L TOLLAISEN (608) 963-7990	Citations Issued 0	Sex FEMALE		
		Address 500 14TH AVE BARABOO, WI 53913 , US	Date of Birth [REDACTED]	Race WHITE		
	Driver License Number [REDACTED]	STATE: WISCONSIN COUNTRY: UNITED STATES				
UNIT 02	INDIVIDUAL 005	Equipment	On Duty Crash	Safety Equipment		
		Seat Position 6--SECOND SEAT-RIGHT SIDE	SHOULDER & LAP BELT			
		Helmet Use	Helmet Compliance			
		Eye Protection	Tint Compliance			
		Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED		
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT TRAPPED		
		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

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UNIT	INDIVIDUAL	Action					
		Action Other					
		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	INDIVIDUAL	Individual			
				Passenger ELIZABETH JEAN SHOWERS (608) 963-9494	Citations Issued 0	Sex FEMALE	
					Date of Birth [REDACTED]	Race WHITE	
Address E12766 CLINGMANS RD BARABOO, WI 53913 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES						
Equipment	On Duty Crash			Safety Equipment			
	Seat Position 4--SECOND SEAT-LEFT SIDE(MOTORCYCLE/BI			SHOULDER & LAP BELT			
Helmet Use	Helmet Compliance						
Eye Protection	Tint Compliance						
Injury	Injury Severity NO APPARENT INJURY			Airbag NON DEPLOYED			
	Ejected NOT EJECTED			Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT TRAPPED		
	Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #				
	Hospital	Date of Death	Time of Death				
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UNIT	INDIVIDUAL	Action				
		Action Other				
		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				
		Individual				
		UNIT	INDIVIDUAL	Passenger ASHLEY LYNN RACHUJ (608) 393-3265	Citations Issued 0	Sex FEMALE
					Date of Birth [REDACTED]	Race WHITE
Address E10146 BUCK BAY E REEDSBURG, WI 53959 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES					
Equipment	On Duty Crash			Safety Equipment		
Seat Position 3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER	SHOULDER & LAP BELT					
Helmet Use	Helmet Compliance					
Eye Protection	Tint Compliance					
Injury	Injury Severity NO APPARENT INJURY			Airbag DEPLOYED-FRONT		
Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABL			Trapped/Extricated NOT TRAPPED		
Medical Transport NOT TRANSPORTED	EMS Agency Identifier			EMS Run #		
Hospital	Date of Death	Time of Death				
02	006	Non Motorist				
		Striking Unit #	Prior Action	Location	To/From School	

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		Action Other					
	02	007	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				
	01	Violations					
		UTC Number AE142387	Issue To? 003	Statute Number 346.89(1)	Seq Num 001	Description INATTENTIVE DRIVING	