

6TLOBNZLXG
18-10507

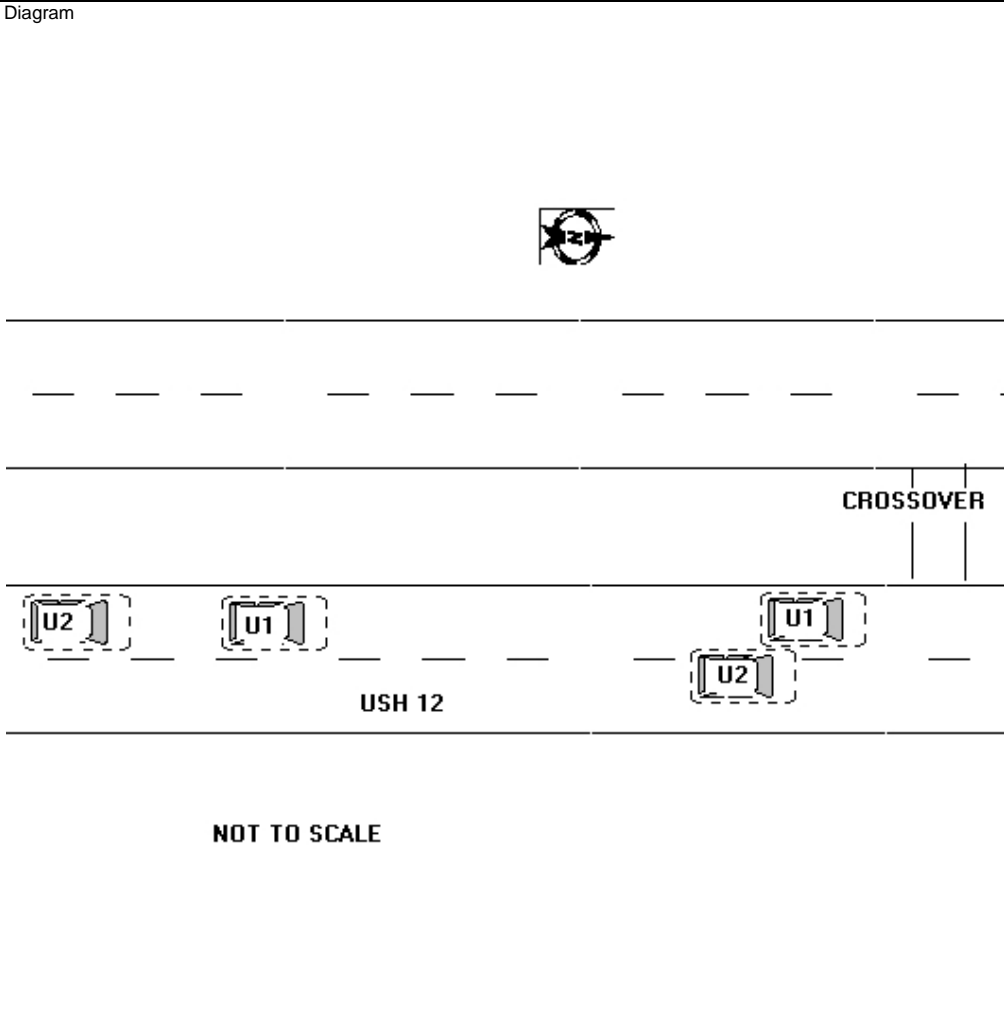
WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK 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 18-10507	Investigating Officer/Deputy DEPUTY A. BREUNIG	
Crash Date 09/21/2018		Crash Time 04:26 PM	Date Arrived 09/21/2018	Time Arrived 04:34 PM	
Date Notified 09/21/2018		Time Notified 04:29 PM	Total Units 02	Total Injured 00	Total Killed 00
<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 NO		Tags	
<input checked="" type="checkbox"/> Reportable	Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended	<input type="checkbox"/> 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.

UNIT 1 WAS TRAVELING NORTHBOUND ON USH 12. UNIT 2 WAS TRAVELING NORTHBOUND ON USH 12 BEHIND UNIT 1. UNIT 1 WAS FOLLOWING ANOTHER TRUCK. UNIT 1 BEGAN SLOWING AS THE TRUCK WAS MAKING A LEFT TURN INTO THE CROSSOVER. UNIT 2 FAILED TO SLOW FOR UNIT 1. UNIT 2 ATTEMPTED TO SWERVE RIGHT TO AVOID UNIT 1. UNIT 2 STRUCK UNIT 1. THE OPERATOR OF UNIT 2 SAID A TRUCK WAS TURNING INTO THE CROSSOVER. THE OPERATOR ADVISED THAT HE DID NOT SEE UNIT 1 SLOWING.

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Location

ON USH12 WB 0.88 MI S OF OLD BLUFF TRL IN THE TOWN OF SUMPTER IN SAUK COUNTY	Latitude 43.332946789	Longitude -89.758793461
	X Coordinate 276348.09375	Y Coordinate 4801485.5
	Structure Type	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 05--SIDESWIPE/SAME DIRECTION	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLOUDY		
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 PASSENGER VAN	Operating As Endorsements			
	Total Occs 4	Train/Bus # Injured	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	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 DIVIDED HWY W/O TRAFFIC BARRIER		Traffic Control NO CONTROL	Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT	Road Grade UPHILL	
	Truck Bus or HazMat NO				

01 UNIT VEHICLE	Vehicle			
	License Plate Number 952ESG	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 2C4RC1BG6CR401514	Make CHRYSLER	Year 2012	Model TOWN & AMP
	Color TAN - TAN	Body Style VN - VAN		Bus Use NOT A BUS
	Initial Contact Point 5--RIGHT REAR CORNER	Vehicle Damage 4--RIGHT SIDE REAR, 5--RIGHT REAR CORNER		
Extent Of Damage FUNCTIONAL DAMAGE				

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UNIT	VEHICLE	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR	
		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 CHAD F ALFORD (608) 393-1231	Owner Address 407 RED HAWK CT BLACK EARTH, WI 53515 , US	
Sequence Of Events				
UNIT	INDIVIDUAL	01	Event MOTOR VEH IN TRANSPORT	
		02	Event	
		03	Event	
		04	Event	
Policy Holder				
UNIT	INDIVIDUAL	Insurance Company STATE-FARM-GENERAL-INS-CO	Individual CHAD ALFORD	
		Driver CHAD F ALFORD (608) 393-1231	Citations Issued 0	Sex MALE
			Date of Birth [REDACTED]	Race WHITE
		Address 407 RED HAWK CT BLACK EARTH, WI 53515 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
Equipment		On Duty Crash	Safety Equipment	
Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		SHOULDER & LAP BELT		
Helmet Use		Helmet Compliance		
Eye Protection		Tint Compliance		
01	001	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 ASHLEY A ALFORD		Citations Issued 0	Sex FEMALE		
				Date of Birth [REDACTED]	Race WHITE		
		Address 407 RED HAWK CT BLACK EARTH, WI 53515 , 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 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 01	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 01	INDIVIDUAL	Individual			
				Passenger ADDISON A ALFORD (608) 393-1231	Citations Issued 0	Sex FEMALE	
					Date of Birth [REDACTED]	Race WHITE	
Address 407 RED HAWK CT BLACK EARTH, WI 53515 , US				Driver License Number			
Equipment	On Duty Crash			Safety Equipment CHILD RESTRAINT SYSTEM - FORWARD FACING			
	Seat Position 4--SECOND SEAT-LEFT SIDE(MOTORCYCLE/BI						
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 01	INDIVIDUAL 003	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 KENNEDY M ALFORD (608) 393-1231	Citations Issued 0	Sex FEMALE		
		Address 407 RED HAWK CT BLACK EARTH, WI 53515 , US	Date of Birth [REDACTED]	Race WHITE		
	Driver License Number					
UNIT 01	INDIVIDUAL 004	Equipment	On Duty Crash	Safety Equipment		
		Seat Position 6--SECOND SEAT-RIGHT SIDE	CHILD RESTRAINT SYSTEM - REAR FACING			
		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 01	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			

Unit Summary

UNIT 02	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS			Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER VAN	Operating As Endorsements				
	Total Occs 7	Train/Bus # Injured	Total # Citations Issued 1	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	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 DIVIDED HWY W/O TRAFFIC BARRIER		Traffic Control NO CONTROL	Traffic Control Inoperative/Missing NO		
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT	Road Grade UPHILL		
	Truck Bus or HazMat NO					

UNIT 02	VEHICLE 02	Vehicle				
		License Plate Number 12888	Plate Type SOV - STATE OWNED VE	St WI	Country of Issuance UNITED STATES	
		Vehicle Identification Number 2C4RDGBG3GR136900	Make DODGE	Year 2016	Model GRAND CARA	
		Color BLK - BLACK	Body Style VN - VAN		Bus Use NOT A BUS	
		Initial Contact Point 11--LEFT FRONT CORNER	Vehicle Damage			
		Extent Of Damage FUNCTIONAL DAMAGE	9--LEFT SIDE MIDDLE, 10--LEFT SIDE FRONT, 11--LEFT FRONT CORNER			
		Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR			
		What Driver Was Doing GOING STRAIGHT	Vehicle Factors			
Driver Prior Action Other	NOT APPLICABLE					

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UNIT 02	VEHICLE 02	Driver Actions FOLLOWING TOO CLOSE, FAILURE TO CONTROL			
		Driver Distractions UNKNOWN IF DISTRACTED			
		Owner Name WISCONSIN DEPARTMENT OF ADMINISTRATION (608) 266-8757		Owner Address 1704 S PARK ST MADISON, WI 53713 1212, US	
Sequence Of Events					
UNIT 04	INDIVIDUAL 01	Event MOTOR VEH IN TRANSPORT			01
		Event			
		Event			
		Event			
Policy Holder					
UNIT 02	INDIVIDUAL 005	Insurance Company STATE OF WISCONSIN SELF-FUNDED		Government WISCONSIN DEPARTMENT OF ADMINISTRATION	
		Individual			
UNIT 02	INDIVIDUAL 005	Driver ZACHARY HARRISON CHILDS (562) 394-7406		Citations Issued 1	Sex MALE
		Address 113 S ORCHARD ST MADISON, WI 53715 , US		Date of Birth [REDACTED]	Race WHITE
UNIT 02	INDIVIDUAL 005	Driver License Number STATE: TEXAS COUNTRY: UNITED STATES		Safety Equipment SHOULDER & LAP BELT	
		Equipment	On Duty Crash	Helmet Compliance	
UNIT 02	INDIVIDUAL 005	Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		Tint Compliance	
		Helmet Use		Airbag NON DEPLOYED	
UNIT 02	INDIVIDUAL 005	Eye Protection		Injury Severity NO APPARENT INJURY	
		Injury		Airbag NON DEPLOYED	
UNIT 02	INDIVIDUAL 005	Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT TRAPPED
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #
UNIT 02	INDIVIDUAL 005	Hospital		Date of Death	Time of Death
		Non Motorist		Striking Unit #	Prior Action

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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 PATRICK DWIGHT STILES (920) 397-2191	Citations Issued 0	Sex MALE
					Date of Birth [REDACTED]	Race WHITE
Address 138 LAKE SHORE DR LAKE MILLS, WI 53551 , 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 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				
02	005	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				
	Individual				
	Passenger THOMAS MCCALLUM KELLY (716) 485-3655	Citations Issued 0	Sex MALE		
	Address 116 W TERRACE AVE LAKEWOOD, NY 14750 , US	Date of Birth [REDACTED]	Race WHITE		
	Driver License Number [REDACTED]	STATE: NEW YORK COUNTRY: UNITED STATES			
UNIT INDIVIDUAL	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 NOT APPLICABLE		
	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				
	Individual				
	Passenger RICHARD ERIK SUNDBERG (952) 290-8529	Citations Issued 0	Sex MALE		
	Address 15709 HOLDRIDGE RD E WAYZATA, MN 55391 , US	Date of Birth [REDACTED]	Race WHITE		
Driver License Number [REDACTED]	STATE: MINNESOTA COUNTRY: UNITED STATES				
UNIT INDIVIDUAL	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 NOT APPLICABLE		
	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 JONATHAN RICHARD BAILEY (262) 337-3931		Citations Issued 0	Sex MALE
						Date of Birth [REDACTED]	Race WHITE
Address W307N6952 CLUB CIR E HARTLAND, WI 53029 , US				Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES			
Equipment	On Duty Crash			Safety Equipment			
	Seat Position 7--THIRD SEAT-LEFT SIDE (SIDECAR: MOTORC			SHOULDER & LAP BELT			
Helmet Use				Helmet Compliance			
Eye Protection				Tint Compliance			
Injury	Injury Severity NO APPARENT INJURY			Airbag NOT APPLICABLE			
	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 SAMUEL REED BARTEL (952) 250-8378		Citations Issued 0	Sex MALE
				Address 4885 DEER RIDGE TRL MAPLE PLAIN, MN 55359 , US		Date of Birth [REDACTED]	Race WHITE
				Driver License Number [REDACTED] STATE: MINNESOTA COUNTRY: UNITED STATES			
Equipment	On Duty Crash			Safety Equipment			
	Seat Position 8--THIRD SEAT-MIDDLE			SHOULDER & LAP BELT			
Helmet Use				Helmet Compliance			
Eye Protection				Tint Compliance			
UNIT	INDIVIDUAL			Injury	Injury Severity NO APPARENT INJURY		Airbag NOT APPLICABLE
					Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABL
		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	
		02	010	Drug Type			
				Individual Condition APPEARED NORMAL			
				Individual			
		UNIT	INDIVIDUAL	Passenger DOUGLAS LLOYD WAKE (920) 400-9404		Citations Issued 0	Sex MALE
				Address N6326 KAPUR DR SHEBOYGAN FALLS, WI 53085 , US		Date of Birth [REDACTED]	Race WHITE
				Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES			
Equipment	On Duty Crash			Safety Equipment			
	Seat Position 9--THIRD SEAT-RIGHT SIDE			SHOULDER & LAP BELT			
	Helmet Use			Helmet Compliance			
	Eye Protection			Tint Compliance			
02	011			Injury	Injury Severity NO APPARENT INJURY		Airbag NOT APPLICABLE
					Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABL
				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				
	02	011	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 AE753113	Issue To? 005	Statute Number 346.14(1M)	Seq Num 001	Description AUTOMOBILE FOLLOWING TOO CLOSELY