6TL09N3P63 19-00827

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| ocument Number Override | Primary Crash Document # | 19-00 | | Investigating (| | / |
|---------------------------|---------------------------------|-----------------|-------------|-----------------------|-----------------|---------------------|
| rash Date 1/20/2019 | Crash Time 08:00 AM | Date A 01/20 | | Time Arrived 10:06 AM | | |
| ate Notified 1/20/2019 | Time Notified 09:40 AM | Total U | | Total Injured | Total Kill | ed |
| On Emergency Hi | t and Run Lane CI | osure | ☐ Work Zone | Trailer o | r Towed | Reporting Threshold |
| Government Property | Active School Zone | Schoo NO | Bus Related | Tags | | |
| Reportable | Crash Type DT4000 (STANDARD CRA | ASH) | | Amende | d | Secondary Crash |
| escription ===== | 1 | | | | | |
| iagram | | | | | Reconstruction | on By |
| 1 | | | | | | |
| | | | | | Photos By | |
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| | • | | - | | | |
| \ | | | | | Additional Info | ormation |
| 골 | T | | | | NONE | |
| River Rd | 1 1 3 1 | | | | | |
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6TL09N3P63 19-00827

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 01/20/2019

Crash Time 08:00 AM

| 8 8 | OCATION ON E10484 RIVER RD B9 FT E | | | Latitude 43.263714005 | | Longitude -89.800265301 | | | |
|---------------------------------------|--|---|--|--|-------------------------|--|--|-----------------------------|--|
| ll ll | OF STH60 EB N THE TOWN OF PRAI | | | oordinate 727.9375 | | Y Coord 479390 | | | |
| " | IN SAUK COUNTY | | | | Structure Type | | | | |
| С | rash Scene | | | | | | | | |
| F | First Harmful Event | | | First | Harmful Event | Location | | | |
| | DITCH | | | ON | ROADWAY | | | | |
| N | Manner of Collision | | | | t Condition | | | | |
| | NO COLLISION W/VEH | ICLE IN TRANSPORT | | | DAYLIGHT | | | | |
| R | Road Surface Condition(s) | | | Road | dway Factor(s) | | | | |
| s | SNOW, SLUSH | | | | | | | | |
| E | Environment Factor(s) | | | | | | | | |
| N | NONE | | | ETC | | CONDITION | I (WET, IC | CY, SNOW, SLUSH, | |
| ٧ | Veather Condition(s) | | | | | | | | |
| c | CLEAR | | | | | | | | |
| А | Animal Type | | Relation To Trafficwa | | ay | | | | |
| | | | | TRAFFICWAY | | | ON ROAD | | |
| | Crash Classification - Locati | on | | | h Classification | | | | |
| | PUBLIC PROPERTY | | | _ | NO SPECIAL JURISDICTION | | | | |
| T | ribal Land | | | Access Control Special Study NO CONTROL | | Special Study | | | |
| V | Vithin Interchange Area | Junction Location | | Intersection Type | | | | | |
| | | | | | | ion Type WAY INTERSECTION | | | |
| | | | | | | | | | |
| Ū | nit Summary | | | | | | | | |
| | nit Summary Jnit Status | | Vehicle Ope | erating As Classific | cation | Unit Type | | | |
| II | Jnit Status N TRANSIT | | Vehicle Ope | • | cation | AUTOMO | | | |
| | Jnit Status N TRANSIT /ehicle Type | | | • | cation | | | ments | |
| 10 P | Jnit Status N TRANSIT /ehicle Type PASSENGER CAR | | D CLASS | | | AUTOMO Operating A | s Endorser | | |
| 0.1 V P | Jnit Status N TRANSIT /ehicle Type PASSENGER CAR Total Occs | Train/Bus # Recorded | D CLASS | • | Total Tra | AUTOMO Operating A | s Endorser | ments Mat Types | |
| U II ∨ P T 1 | Jnit Status N TRANSIT /ehicle Type PASSENGER CAR otal Occs | | D CLASS Total # Cita 0 | tions Issued | Total Tra | AUTOMO Operating A | s Endorser Total Haz 0 | Mat Types | |
| U | Jnit Status N TRANSIT //ehicle Type PASSENGER CAR otal Occs nsurance? | Direction Of Travel | Total # Cita 0 Pre | tions Issued CrashTire | Total Tra 0 Speed L | AUTOMO Operating A | Total Haz O Total Lan | Mat Types | |
| U | Jnit Status N TRANSIT /ehicle Type PASSENGER CAR otal Occs | Direction Of Travel EASTBOUND | D CLASS Total # Cita 0 | tions Issued CrashTire Mark | Total Tra | AUTOMO Operating A | Total Haz Total Land | Mat Types es | |
| U | Jnit Status N TRANSIT /ehicle Type PASSENGER CAR fotal Occs Insurance? /ES | Direction Of Travel EASTBOUND | Total # Cita 0 Pre Special Fun | tions Issued CrashTire Mark | Total Tra 0 Speed L 45 | AUTOMO Operating A | Total Haz 0 Total Land 2 Motor Vehi | Mat Types es | |
| | Jnit Status N TRANSIT /ehicle Type PASSENGER CAR otal Occs Insurance? //ES //ost Harmful Event: Collision | Direction Of Travel EASTBOUND | Total # Cita 0 Pre Special Fun | tions Issued CrashTire Mark notion EIAL FUNCTION | Total Tra 0 Speed L 45 | AUTOMO Operating A sillers imit Emergency | Total Haz 0 Total Land 2 Motor Vehi | Mat Types es icle Use | |
| | Jnit Status N TRANSIT /ehicle Type PASSENGER CAR Total Occs Insurance? /ES //Ost Harmful Event: Collision DITCH Traffic Way TWO-WAY, NOT DIVIDE | Direction Of Travel EASTBOUND on With | Total # Cita 0 Pre Special Fun NO SPEC | crashTire Mark Cidal FUNCTION | Total Tra 0 Speed L 45 | AUTOMO Operating A sillers imit Emergency NOT APP Traffic Cont NO | Total Haz 0 Total Land 2 Motor Vehi LICABLE | Mat Types es icle Use | |
| U | Jnit Status N TRANSIT /ehicle Type PASSENGER CAR Total Occs Insurance? /ES //Ost Harmful Event: Collision DITCH Traffic Way TWO-WAY, NOT DIVIDE Surface Type | Direction Of Travel EASTBOUND on With | Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva | crashTire Mark Inction EIAL FUNCTION ETOI | Total Tra 0 Speed L 45 | AUTOMO Operating A sillers imit Emergency NOT APP Traffic Cont NO Road Grade | Total Haz 0 Total Land 2 Motor Vehi LICABLE | Mat Types es icle Use | |
| 10 | Jnit Status N TRANSIT //ehicle Type PASSENGER CAR Total Occs Insurance? //ES //Ost Harmful Event: Collision DITCH Traffic Way WO-WAY, NOT DIVIDE Surface Type BLACKTOP (BITUMING | Direction Of Travel EASTBOUND on With | Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont | crashTire Mark Inction EIAL FUNCTION ETOI | Total Tra 0 Speed L 45 | AUTOMO Operating A sillers imit Emergency NOT APP Traffic Cont NO | Total Haz 0 Total Land 2 Motor Vehi LICABLE | Mat Types es icle Use | |
| II | Jnit Status N TRANSIT /ehicle Type PASSENGER CAR Total Occs Insurance? /ES //Ost Harmful Event: Collision DITCH Traffic Way TWO-WAY, NOT DIVIDE Surface Type | Direction Of Travel EASTBOUND on With | Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva | crashTire Mark Inction EIAL FUNCTION ETOI | Total Tra 0 Speed L 45 | AUTOMO Operating A sillers imit Emergency NOT APP Traffic Cont NO Road Grade | Total Haz 0 Total Land 2 Motor Vehi LICABLE | Mat Types es icle Use | |
| II | Jnit Status N TRANSIT //ehicle Type PASSENGER CAR Total Occs Insurance? //ES //ost Harmful Event: Collision DITCH Traffic Way TWO-WAY, NOT DIVIDE Surface Type BLACKTOP (BITUMING Truck Bus or HazMat | Direction Of Travel EASTBOUND on With | Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva | crashTire Mark Inction EIAL FUNCTION ETOI | Total Tra 0 Speed L 45 | AUTOMO Operating A sillers imit Emergency NOT APP Traffic Cont NO Road Grade | Total Haz 0 Total Land 2 Motor Vehi LICABLE | Mat Types es icle Use | |
| U | Jnit Status N TRANSIT Vehicle Type PASSENGER CAR Total Occs Insurance? VES Most Harmful Event: Collision DITCH Traffic Way TWO-WAY, NOT DIVIDE Surface Type BLACKTOP (BITUMING Truck Bus or HazMat | Direction Of Travel EASTBOUND on With ED | Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva | CrashTire Mark notion EIAL FUNCTION trol FROL ature | Total Tra 0 Speed L 45 | AUTOMO Operating A sillers imit Emergency NOT APP Traffic Cont NO Road Grade | Total Haz Total Land Total Land Motor Vehi LICABLE rol Inoperation | Mat Types es icle Use | |
| U | Jnit Status N TRANSIT /ehicle Type PASSENGER CAR Total Occs Insurance? //ES //OST Harmful Event: Collision DITCH Traffic Way TWO-WAY, NOT DIVIDE BLACKTOP (BITUMINO) Truck Bus or HazMat NO Vehicle License Plate Number 918VWE | Direction Of Travel EASTBOUND on With ED DUS) | Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH | CrashTire Mark notion EIAL FUNCTION trol FROL ature | Total Tra 0 Speed L 45 | AUTOMO Operating A sillers imit Emergency NOT APP Traffic Cont NO Road Grade LEVEL | Total Haz Total Land Total Land Motor Vehi LICABLE rol Inoperati | Mat Types es icle Use | |
| T N N N N N N N N N | Jnit Status N TRANSIT //ehicle Type PASSENGER CAR Total Occs Insurance? //ES //fost Harmful Event: Collision DITCH Traffic Way TWO-WAY, NOT DIVIDE Surface Type BLACKTOP (BITUMING Truck Bus or HazMat NO Vehicle License Plate Number 918VWE Vehicle Identification N | Direction Of Travel EASTBOUND On With ED DUS) | Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AU Make | tions Issued CrashTire Mark action CIAL FUNCTION arol TROL ature T | Total Tra 0 Speed L 45 | AUTOMO Operating A sillers simit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED S' Model | Total Haz Total Land Total Land Motor Vehi LICABLE rol Inoperati | Mat Types es icle Use | |
| T N N N N N N N N N | Jnit Status N TRANSIT //ehicle Type PASSENGER CAR Total Occs Insurance? //ES //OST Harmful Event: Collision DITCH Traffic Way TWO-WAY, NOT DIVIDE Surface Type BLACKTOP (BITUMING Truck Bus or HazMat NO Vehicle License Plate Number 918VWE Vehicle Identification N 1G2ZH5589641258 | Direction Of Travel EASTBOUND on With ED DUS) | Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AU Make PONTIAC | CrashTire Mark Inction CIAL FUNCTION ITOI TROL ature T | Total Tra 0 Speed L 45 | AUTOMO Operating A illers imit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST Model G6 | Total Haz Total Land Total Land Motor Vehi LICABLE rol Inoperati | Mat Types es icle Use | |
| T N N N N N N N N N | Julit Status N TRANSIT //ehicle Type PASSENGER CAR Total Occs Insurance? //ES //ost Harmful Event: Collision DITCH Traffic Way FWO-WAY, NOT DIVIDE Surface Type BLACKTOP (BITUMING Truck Bus or HazMat NO Vehicle License Plate Number 918VWE Vehicle Identification N 1G2ZH5589641258 Color | Direction Of Travel EASTBOUND on With ED DUS) | Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AU Make PONTIAC Body Style | CrashTire Mark Inction CIAL FUNCTION ITOI TROL ature T | Total Tra 0 Speed L 45 | AUTOMO Operating A sillers imit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST Model G6 Bus Use | Total Haz Total Land Total Land Motor Vehi LICABLE rol Inoperati | Mat Types es icle Use | |
| | Julit Status N TRANSIT //ehicle Type PASSENGER CAR Total Occs Insurance? //ES //ost Harmful Event: Collision DITCH Traffic Way WO-WAY, NOT DIVIDE Surface Type BLACKTOP (BITUMING Truck Bus or HazMat NO Vehicle License Plate Number 918VWE Vehicle Identification N 1G2ZH5589641258 Color ONG - ORANGE | Direction Of Travel EASTBOUND on With ED DUS) | Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AU Make PONTIAC Body Style 4D - 4DR | CrashTire Mark Diction CIAL FUNCTION DITOR | Total Tra 0 Speed L 45 | AUTOMO Operating A illers imit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST Model G6 | Total Haz Total Land Total Land Motor Vehi LICABLE rol Inoperati | Mat Types es icle Use | |
| | Julit Status N TRANSIT //ehicle Type PASSENGER CAR Total Occs Insurance? //ES //ost Harmful Event: Collision DITCH Traffic Way FWO-WAY, NOT DIVIDE Surface Type BLACKTOP (BITUMING Truck Bus or HazMat NO Vehicle License Plate Number 918VWE Vehicle Identification N 1G2ZH5589641258 Color | Direction Of Travel EASTBOUND on With ED DUS) | Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AU Make PONTIAC Body Style | CrashTire Mark Diction CIAL FUNCTION DITOR | Total Tra 0 Speed L 45 | AUTOMO Operating A sillers imit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST Model G6 Bus Use | Total Haz Total Land Total Land Motor Vehi LICABLE rol Inoperati | Mat Types es icle Use | |

6TL09N3P63

19-00827

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | | Towed Due To Damage | | Vehicle Removed By | | | | | |
|------|------------|---|---|--|---|--|--|--|--|
| | | NOT TOWED | | Verlicie Removed By | | | | | |
| | | What Driver Was Doing | | | | | | | |
| | | | | Vehicle Factors | | | | | |
| | | RIGHT TURN | | NOT ADDITION E | | | | | |
| | | Driver Prior Action Other | | NOT APPLICABLE | | | | | |
| | | | | | | | | | |
| | | Driver Actions | | | | | | | |
| | Щ | SPEED TOO FAST/COND, FAILURE TO CONTROL | | | | | | | |
| ╘ | VEHICL | | | | | | | | |
| UNIT | Ξ | | | | | | | | |
| _ | /E | | | | | | | | |
| | | | | | | | | | |
| | | Owner Name | | Owner Address | | | | | |
| | | CHERYLL DAWN LEPIE | N | S11002 BADGER RD | | | | | |
| 5 | 01 | (608) 544-2070 | | SPRING GREEN, WI 53588, US | | | | | |
| | | | | | | | | | |
| | | 0.00 | | | | | | | |
| | • | Sequence Of Events | | | | | | | |
| | 01 | Event RIGHT TURN | | | | | | | |
| |) | | | | | | | | |
| | 02 | Event DITCH | | | | | | | |
| | 0 | ысп | | | | | | | |
| | 03 | Event | | | | | | | |
| | 0 | | | | | | | | |
| | 04 | Event | | | | | | | |
| | 0 | | | | | | | | |
| _ | | Policy Holder | | | | | | | |
| UNIT | | Insurance Company | | Individual | | | | | |
| 5 | | AMERICAN-FAMILY-INS | S-CO | Individual | | | | | |
| | | | | CHERYLL LEPIEN | | | | | |
| | | | | CHERTLE LEPIEN | | | | | |
| | ļ | Individual | | | | | | | |
| | I | Individual Driver | | Citations Issued | Sex | | | | |
| | | Individual Driver CHERYLL DAWN LEPIE | | | Sex FEMALE | | | | |
| | | Individual Driver | | Citations Issued | FEMALE Race | | | | |
| | | Individual Driver CHERYLL DAWN LEPIE | | Citations Issued 0 | FEMALE | | | | |
| | | Driver CHERYLL DAWN LEPIE (608) 544-2070 Address | | Citations Issued 0 | FEMALE Race | | | | |
| LIND | | Individual Driver CHERYLL DAWN LEPIE (608) 544-2070 Address S11002 BADGER RD | N | Citations Issued 0 Date of Birth Driver License Number | Race WHITE | | | | |
| | INDIVIDUAL | Driver CHERYLL DAWN LEPIE (608) 544-2070 Address | N | Citations Issued O Date of Birth | Race WHITE | | | | |
| | | Individual Driver CHERYLL DAWN LEPIE (608) 544-2070 Address S11002 BADGER RD | N | Citations Issued 0 Date of Birth Driver License Number | Race WHITE | | | | |
| | INDIVIDUAL | Individual Driver CHERYLL DAWN LEPIE (608) 544-2070 Address S11002 BADGER RD SPRING GREEN, WI 535 | N | Citations Issued 0 Date of Birth Driver License Number | Race WHITE | | | | |
| | INDIVIDUAL | Driver CHERYLL DAWN LEPIE (608) 544-2070 Address S11002 BADGER RD SPRING GREEN, WI 535 | N 888 , US | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COU | Race WHITE | | | | |
| | INDIVIDUAL | Individual Driver CHERYLL DAWN LEPIE (608) 544-2070 Address S11002 BADGER RD SPRING GREEN, WI 535 | N 888 , US | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COU | Race WHITE | | | | |
| | INDIVIDUAL | Individual Driver CHERYLL DAWN LEPIE (608) 544-2070 Address S11002 BADGER RD SPRING GREEN, WI 535 | N 888 , US | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COU | Race WHITE | | | | |
| | INDIVIDUAL | Individual Driver CHERYLL DAWN LEPIE (608) 544-2070 Address S11002 BADGER RD SPRING GREEN, WI 535 | N 588 , US ty Crash | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COU | Race WHITE | | | | |
| | INDIVIDUAL | Individual Driver CHERYLL DAWN LEPIE (608) 544-2070 Address S11002 BADGER RD SPRING GREEN, WI 535 fety Equipment Seat Position 1FRONT SEAT-LEFT S | N 588 , US ty Crash | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COU Safety Equipment SHOULDER & LAP BELT | Race WHITE | | | | |
| | INDIVIDUAL | Individual Driver CHERYLL DAWN LEPIE (608) 544-2070 Address S11002 BADGER RD SPRING GREEN, WI 535 fety Equipment Seat Position 1FRONT SEAT-LEFT S | N 588 , US ty Crash | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COU Safety Equipment SHOULDER & LAP BELT | Race WHITE | | | | |
| | INDIVIDUAL | Individual Driver CHERYLL DAWN LEPIE (608) 544-2070 Address S11002 BADGER RD SPRING GREEN, WI 535 fety Equipment Seat Position 1FRONT SEAT-LEFT S Helmet Use | N 588 , US ty Crash | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COU Safety Equipment SHOULDER & LAP BELT Helmet Compliance | Race WHITE | | | | |
| TINO | INDIVIDUAL | Individual Driver CHERYLL DAWN LEPIE (608) 544-2070 Address S11002 BADGER RD SPRING GREEN, WI 535 Fety Equipment Seat Position 1FRONT SEAT-LEFT S Helmet Use Eye Protection | N 588 , US ty Crash | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COU Safety Equipment SHOULDER & LAP BELT Helmet Compliance | Race WHITE | | | | |
| | INDIVIDUAL | Address S11002 BADGER RD SPRING GREEN, WI 535 Fety Equipment Seat Position 1FRONT SEAT-LEFT S Helmet Use | N 888 , US ty Crash SIDE (DRIVER/MOTORCY | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COU Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance | Race WHITE | | | | |
| TINO | INDIVIDUAL | Address S11002 BADGER RD SPRING GREEN, WI 535 Fety Equipment Seat Position 1FRONT SEAT-LEFT S Helmet Use | N 888 , US ty Crash SIDE (DRIVER/MOTORCY | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COU Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance | Race WHITE | | | | |
| TINO | INDIVIDUAL | Individual Driver CHERYLL DAWN LEPIE (608) 544-2070 Address S11002 BADGER RD SPRING GREEN, WI 535 Fety Equipment Seat Position 1FRONT SEAT-LEFT S Helmet Use Eye Protection Injury NO A | N 888 , US ty Crash SIDE (DRIVER/MOTORCY Severity PPARENT INJURY | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COU Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED | Race WHITE NTRY: UNITED STATES | | | | |
| TINO | INDIVIDUAL | Individual Driver CHERYLL DAWN LEPIE (608) 544-2070 Address S11002 BADGER RD SPRING GREEN, WI 535 Fety Equipment Seat Position 1FRONT SEAT-LEFT S Helmet Use Eye Protection Injury NO A Ejected | N 888 , US ty Crash SIDE (DRIVER/MOTORCY Severity PPARENT INJURY Ejection Path | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COU Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED | Race WHITE NTRY: UNITED STATES Trapped/Extricated | | | | |
| TINO | INDIVIDUAL | Individual Driver CHERYLL DAWN LEPIE (608) 544-2070 Address S11002 BADGER RD SPRING GREEN, WI 535 Fety Equipment Seat Position 1FRONT SEAT-LEFT S Helmet Use Eye Protection Injury NO A Ejected NOT EJECTED | N 888 , US ty Crash SIDE (DRIVER/MOTORCY Severity PPARENT INJURY Ejection Path | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COU Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED | FEMALE Race WHITE NTRY: UNITED STATES Trapped/Extricated NOT TRAPPED | | | | |
| TINO | INDIVIDUAL | Individual Driver CHERYLL DAWN LEPIE (608) 544-2070 Address S11002 BADGER RD SPRING GREEN, WI 535 Fety Equipment Seat Position 1FRONT SEAT-LEFT S Helmet Use Eye Protection Injury NO A Ejected NOT EJECTED Medical Transport | N 888 , US ty Crash SIDE (DRIVER/MOTORCY Severity PPARENT INJURY Ejection Path | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COU Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED | FEMALE Race WHITE NTRY: UNITED STATES Trapped/Extricated NOT TRAPPED | | | | |
| TINO | INDIVIDUAL | Individual Driver CHERYLL DAWN LEPIE (608) 544-2070 Address S11002 BADGER RD SPRING GREEN, WI 535 Fety Equipment Seat Position 1FRONT SEAT-LEFT S Helmet Use Eye Protection Injury NO A Ejected NOT EJECTED Medical Transport NOT TRANSPORTED | N 888 , US ty Crash SIDE (DRIVER/MOTORCY Severity PPARENT INJURY Ejection Path | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COU Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier | FEMALE Race WHITE NTRY: UNITED STATES Trapped/Extricated NOT TRAPPED EMS Run # | | | | |
| TINO | INDIVIDUAL | Individual Driver CHERYLL DAWN LEPIE (608) 544-2070 Address S11002 BADGER RD SPRING GREEN, WI 535 Fety Equipment Seat Position 1FRONT SEAT-LEFT S Helmet Use Eye Protection Injury Injury NO A Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital | N 888 , US ty Crash SIDE (DRIVER/MOTORCY Severity PPARENT INJURY Ejection Path | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COU Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier | FEMALE Race WHITE NTRY: UNITED STATES Trapped/Extricated NOT TRAPPED EMS Run # | | | | |
| TINO | INDIVIDUAL | Individual Driver CHERYLL DAWN LEPIE (608) 544-2070 Address S11002 BADGER RD SPRING GREEN, WI 535 fety Equipment Seat Position 1FRONT SEAT-LEFT S Helmet Use Eye Protection Injury NO A Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital | N 888 , US ty Crash SIDE (DRIVER/MOTORCY Severity PPARENT INJURY Ejection Path NOT EJECTED/NOT API | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COU Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier | FEMALE Race WHITE NTRY: UNITED STATES Trapped/Extricated NOT TRAPPED EMS Run # | | | | |
| TINO | INDIVIDUAL | Individual Driver CHERYLL DAWN LEPIE (608) 544-2070 Address S11002 BADGER RD SPRING GREEN, WI 535 Fety Equipment Seat Position 1FRONT SEAT-LEFT S Helmet Use Eye Protection Injury Injury NO A Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital | N 888 , US ty Crash SIDE (DRIVER/MOTORCY Severity PPARENT INJURY Ejection Path NOT EJECTED/NOT API | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COU Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier | FEMALE Race WHITE NTRY: UNITED STATES Trapped/Extricated NOT TRAPPED EMS Run # | | | | |

Crash Date 01/20/2019
Crash Time 08:00 AM

6TL09N3P63 19-00827

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | | Non Motorist Striking Unit # | Location | | | | |
|------|------------|-----------------------------------|-------------------|-----------------------|-------------------|----------------------|----------------|
| | | Prior Action | | | | | |
| TIND | INDIVIDUAL | Action | | | | | |
| | | Action Other | | | | | To/From School |
| | ı | Drug & Alcohol NO | ol Use | Suspected Drug Use NO | | | |
| | | Alcohol Test Given TEST NOT GIVEN | Alcohol Test Type | е | | Alcohol Test Results | |
| | | Drug Test Given TEST NOT GIVEN | Drug Test Type | | Drug Test Results | 3 | |
| 10 | 001 | Drug Type | • | | | | |
| | | Individual Condition | | | | | |
| | | APPEARED NORMAL | | | | | |