WISCONSIN MOTOR VEHICLE CRASH REPORT

	Document Number Override	Primary Crash Document # Crash Time 11:10 AM		rigerie, ereieri rieriaer		,	Investigating Officer/Deputy DEPUTY T. SUTHERLAND Time Arrived 11:26 AM			
٥ >	Crash Date 04/14/2019									
O I LUSFZKWO	Date Notified 04/14/2019	Time Notified 11:15 AM		Total U 02	nits	Total Injured 04	Total Injured Total Killed 00		d	
200	On Emergency Hi	t and Run	Lane Closu		☐ Work Zone	Trailer	or To	wed	Reporting Threshold	
 	Government Property		hool Zone	School NO	Bus Related	Tags				
	✓ Reportable	Crash Type DT4000 (STA	NDARD CRASH	1)		Amend	ded		Secondary Crash	
	Description									
	Diagram	CTH JJ	02 11fi	lity note			Photo 9195	os By	ву	
	Peck Road		Peck F	Road			Additi PHO	ional Infori TOS	mation	
	— — — — — — — — — — — — — — — — — — —	01								
	Not To Scale ✓ I, a sworn law enforceme									
	ON 04-14-19 UNIT 2 WAS EASTE INTERSECTION OF PECK ROAD REST IN THE SOUTH DITCH LIN SHE WAS ON THE WAY HOME F	AND CTH JJ INT E JUST EAST OF	O THE PATH OF UPPECK ROAD, INJ	JNIT 2. L URIES R	INIT 2 THEN HIT THE EPORTED BY ALL FO	PASSENGER SID UR SUBJECTS IN	E OF L	JNIT 1. BC	OTH VEHICLES CAME TO	

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 04/14/2019

Crash Time 11:10 AM

	Location									
·	INTERSECTION					Latitude			Longitude	
	ON CTHJJ EB					43.21351	2755		-90.162715198	
	AT PECK RD					X Coordina	ate		Y Coordinate	
	IN THE TOWN OF	_	G GREEN			243098.3			4789383	
	IN SAUK COUNT	Y				Structure Type				
							UCTURE			
L	0					NO OTIK	OOTORE			
(Crash Scene									
	First Harmful Event						Iful Event Lo	ocation		
	MOTOR VEH IN T	ransp	ORT			ON ROA				
	Manner of Collision					Light Cond				
	08FRONT TO SI	IDE				DAYLIGI	HT			
Ī	Road Surface Condit	tion(s)				Roadway	Factor(s)			
	DRY									
-	Environment Factor(s	s)								
	NONE					NONE				
ŀ	Weather Condition(s)								
	CLOUDY									
}	Animal Type					Relation T	o Trafficway	/		
						TRAFFIC	CWAY - OI	N ROAD		
	Crash Classification	 Location 				Crash Clas	ssification -	Jurisdiction		
	PUBLIC PROPER	RTY						ISDICTION		
	Tribal Land					Access Control Special Study PARTIAL CONTROL				у
-	1400				11		CONTRO	DL		
	Within Interchange A	rea	Junction Location INTERSECTION		Intersectio	on Type RSECTION				
L			INTERCEOTION		1	02011011				
_	Unit Summar Unit Status	у —		Wahiala One	erating As Cl	localfication		Harita Trans		
						Classification Unit Type AUTOMOBILE				
-	IN TRANSIT D CLASS			Operating As Endorsements						
5	Vehicle Type							Operating A	s Endorsements	
_		n								
	PASSENGER CA	R	Train/Dua # Dagardad	T . I !! O'!	e 1 1		Total Trail	0.00	Total HarMat Turses	
	Total Occs	R	Train/Bus # Recorded		tions Issued		Total Trail	ers	Total HazMat Types	
-	Total Occs	R		3			0		0	
	Total Occs 3 Insurance?	R	Direction Of Travel	3	CrashTire		0 Speed Lim		O Total Lanes	
	Total Occs 3 Insurance? NO		Direction Of Travel SOUTHBOUND	3 Pre	CrashTire Mark		0	nit	O Total Lanes	
	Total Occs 3 Insurance? NO Most Harmful Event:	Collision	Direction Of Travel SOUTHBOUND With	3 Pre Special Fun	CrashTire Mark		0 Speed Lim	it Emergency	Total Lanes 2 Motor Vehicle Use	
	Total Occs 3 Insurance? NO Most Harmful Event: MOTOR VEH IN T	Collision	Direction Of Travel SOUTHBOUND With	3 Pre Special Fun NO SPEC	CrashTire Mark action CIAL FUNC		0 Speed Lim	Emergency NOT APP	Total Lanes 2 Motor Vehicle Use	
5	Total Occs 3 Insurance? NO Most Harmful Event: MOTOR VEH IN T Traffic Way	Collision TRANSP	Direction Of Travel SOUTHBOUND With ORT	Special Fun NO SPEC Traffic Cont	CrashTire Mark action CIAL FUNC		0 Speed Lim	Emergency NOT APP	Total Lanes 2 Motor Vehicle Use	
	Total Occs 3 Insurance? NO Most Harmful Event: MOTOR VEH IN T Traffic Way TWO-WAY, NOT I	Collision TRANSP	Direction Of Travel SOUTHBOUND With ORT	Pre Special Fun NO SPEC Traffic Cont STOP SIG	CrashTire Mark nction CIAL FUNC		0 Speed Lim	Emergency NOT APP Traffic Cont	Total Lanes 2 Motor Vehicle Use LICABLE rol Inoperative/Missing	
;	Total Occs 3 Insurance? NO Most Harmful Event: MOTOR VEH IN T Traffic Way TWO-WAY, NOT I Surface Type	Collision FRANSP DIVIDED	Direction Of Travel SOUTHBOUND With ORT	Pre Special Fun NO SPEC Traffic Cont STOP SIG	CrashTire Mark action EIAL FUNC arrol GN		0 Speed Lim	Emergency NOT APP Traffic Cont NO Road Grade	Total Lanes 2 Motor Vehicle Use LICABLE rol Inoperative/Missing	
•	Total Occs 3 Insurance? NO Most Harmful Event: MOTOR VEH IN T Traffic Way TWO-WAY, NOT I Surface Type BLACKTOP (BITU	Collision FRANSP DIVIDED UMINOU	Direction Of Travel SOUTHBOUND With ORT	Pre Special Fun NO SPEC Traffic Cont STOP SIG	CrashTire Mark action EIAL FUNC arrol GN		0 Speed Lim	Emergency NOT APP Traffic Cont	Total Lanes 2 Motor Vehicle Use LICABLE rol Inoperative/Missing	
;	Total Occs 3 Insurance? NO Most Harmful Event: MOTOR VEH IN T Traffic Way TWO-WAY, NOT I Surface Type	Collision FRANSP DIVIDED UMINOU	Direction Of Travel SOUTHBOUND With ORT	Pre Special Fun NO SPEC Traffic Cont STOP SIG	CrashTire Mark action EIAL FUNC arrol GN		0 Speed Lim	Emergency NOT APP Traffic Cont NO Road Grade	Total Lanes 2 Motor Vehicle Use LICABLE rol Inoperative/Missing	
	Total Occs 3 Insurance? NO Most Harmful Event: MOTOR VEH IN T Traffic Way TWO-WAY, NOT I Surface Type BLACKTOP (BITU Truck Bus or HazMar	Collision FRANSP DIVIDED UMINOU	Direction Of Travel SOUTHBOUND With ORT	Pre Special Fun NO SPEC Traffic Cont STOP SIG	CrashTire Mark action EIAL FUNC arrol GN		0 Speed Lim	Emergency NOT APP Traffic Cont NO Road Grade	Total Lanes 2 Motor Vehicle Use LICABLE rol Inoperative/Missing	
	Total Occs 3 Insurance? NO Most Harmful Event: MOTOR VEH IN T Traffic Way TWO-WAY, NOT I Surface Type BLACKTOP (BITU Truck Bus or HazMat NO	Collision FRANSP DIVIDED UMINOU t	Direction Of Travel SOUTHBOUND With ORT	Pre Special Fun NO SPEC Traffic Cont STOP SIG	CrashTire Mark Inction CIAL FUNC Irol BN Atture T		0 Speed Lim	Emergency NOT APP Traffic Cont NO Road Grade	Total Lanes 2 Motor Vehicle Use LICABLE rol Inoperative/Missing	
	Total Occs 3 Insurance? NO Most Harmful Event: MOTOR VEH IN T Traffic Way TWO-WAY, NOT I Surface Type BLACKTOP (BITU Truck Bus or HazMat NO Vehicle	Collision FRANSP DIVIDED UMINOU t	Direction Of Travel SOUTHBOUND With ORT	Special Fun NO SPEC Traffic Cont STOP SIG Road Curva STRAIGH	CrashTire Mark Inction CIAL FUNC Irol BN Atture T	TION	Speed Lim 55	Emergency NOT APP Traffic Cont NO Road Grade LEVEL	Total Lanes 2 Motor Vehicle Use LICABLE rol Inoperative/Missing	
	Total Occs 3 Insurance? NO Most Harmful Event: MOTOR VEH IN T Traffic Way TWO-WAY, NOT I Surface Type BLACKTOP (BITU Truck Bus or HazMat NO Vehicle License Plate N 984SRE Vehicle Identific	Collision TRANSP DIVIDED UMINOU t	Direction Of Travel SOUTHBOUND With ORT	Special Fun NO SPEC Traffic Cont STOP SIG Road Curva STRAIGH	CrashTire Mark Inction CIAL FUNC Irol BN Bature T	TION	Speed Lim 55	Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is	Total Lanes 2 Motor Vehicle Use LICABLE rol Inoperative/Missing	
	Total Occs 3 Insurance? NO Most Harmful Event: MOTOR VEH IN T Traffic Way TWO-WAY, NOT I Surface Type BLACKTOP (BITU Truck Bus or HazMar NO Vehicle License Plate N 984SRE	Collision TRANSP DIVIDED UMINOU t	Direction Of Travel SOUTHBOUND With ORT S)	Pre Special Fun NO SPEC Traffic Cont STOP SIG Road Curva STRAIGH Plate Type AUT - AU	CrashTire Mark Inction CIAL FUNC Irol BN Bature T	TION	Speed Lim 55 St WI	Emergency NOT APPI Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST	Total Lanes 2 Motor Vehicle Use LICABLE rol Inoperative/Missing suance TATES	
-	Total Occs 3 Insurance? NO Most Harmful Event: MOTOR VEH IN T Traffic Way TWO-WAY, NOT I Surface Type BLACKTOP (BITU Truck Bus or HazMat NO Vehicle License Plate N 984SRE Vehicle Identific	Collision TRANSP DIVIDED UMINOU t	Direction Of Travel SOUTHBOUND With ORT S)	Pre Special Fun NO SPEC Traffic Cont STOP SIG Road Curva STRAIGH Plate Type AUT - AU Make	CrashTire Mark Mark CIAL FUNC Grol BN ature T	TION	Speed Lim 55 St WI Year	Emergency NOT APPI Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST Model FUSION SI Bus Use	Total Lanes 2 Motor Vehicle Use LICABLE rol Inoperative/Missing suance FATES	
-	Total Occs 3 Insurance? NO Most Harmful Event: MOTOR VEH IN T Traffic Way TWO-WAY, NOT I Surface Type BLACKTOP (BITU Truck Bus or HazMar NO Vehicle License Plate N 984SRE Vehicle Identific 3FAHPOHA4	Collision FRANSP DIVIDED UMINOU t Number cation Num AR1184	Direction Of Travel SOUTHBOUND With ORT S)	Pre Special Fun NO SPEC Traffic Cont STOP SIG Road Curva STRAIGH Plate Type AUT - AU Make FORD Body Style 4D - 4DR	CrashTire Mark Mark CIAL FUNC Grol BN ature T	TION	Speed Lim 55 St WI Year	Emergency NOT APPI Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST Model FUSION SI	Total Lanes 2 Motor Vehicle Use LICABLE rol Inoperative/Missing suance FATES	
	Total Occs 3 Insurance? NO Most Harmful Event: MOTOR VEH IN T Traffic Way TWO-WAY, NOT I Surface Type BLACKTOP (BITU Truck Bus or HazMan NO Vehicle License Plate N 984SRE Vehicle Identific 3FAHP0HA4 Color GRY - GRAY Initial Contact F	Collision FRANSP DIVIDED UMINOU t Number cation Num AR1184	Direction Of Travel SOUTHBOUND With ORT S)	Pre Special Fun NO SPEC Traffic Cont STOP SIG Road Curva STRAIGH Plate Type AUT - AU Make FORD Body Style	CrashTire Mark Mark CIAL FUNC Grol BN ature T	TION	Speed Lim 55 St WI Year	Emergency NOT APPI Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST Model FUSION SI Bus Use	Total Lanes 2 Motor Vehicle Use LICABLE rol Inoperative/Missing suance FATES	
ō	Total Occs 3 Insurance? NO Most Harmful Event: MOTOR VEH IN T Traffic Way TWO-WAY, NOT I Surface Type BLACKTOP (BITU Truck Bus or HazMan NO Vehicle License Plate N 984SRE Vehicle Identific 3FAHP0HA4 Color GRY - GRAY Initial Contact F	Collision FRANSP DIVIDED UMINOU t Number cation Num AR1184	Direction Of Travel SOUTHBOUND With ORT S)	Pre Special Fun NO SPEC Traffic Cont STOP SIG Road Curva STRAIGH Plate Type AUT - AU Make FORD Body Style 4D - 4DR Vehicle Da	CrashTire Mark Action EIAL FUNC EIGN ature T	TION .E	St WI Year 2010	Emergency NOT APPI Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST Model FUSION SI Bus Use NOT A BUS	Total Lanes 2 Motor Vehicle Use LICABLE rol Inoperative/Missing suance FATES	
	Total Occs 3 Insurance? NO Most Harmful Event: MOTOR VEH IN T Traffic Way TWO-WAY, NOT I Surface Type BLACKTOP (BITU Truck Bus or HazMan NO Vehicle License Plate N 984SRE Vehicle Identific 3FAHP0HA4 Color GRY - GRAY Initial Contact F	Collision FRANSP DIVIDED UMINOU t Vumber cation Num AR1184 Point DE MIDD age	Direction Of Travel SOUTHBOUND With ORT S) S)	Pre Special Fun NO SPEC Traffic Cont STOP SIG Road Curva STRAIGH Plate Type AUT - AU Make FORD Body Style 4D - 4DR Vehicle Da	CrashTire Mark Action EIAL FUNC EIGN ature T JTOMOBIL EIGH EIGH EIGH EIGH EIGH EIGH EIGH EIGH	TION .E	St WI Year 2010	Emergency NOT APPI Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST Model FUSION SI Bus Use NOT A BUS	Total Lanes 2 Motor Vehicle Use LICABLE rol Inoperative/Missing suance FATES	

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Towed Due To Damage	Vehic	cle Removed By				
		TOWED DUE TO DISABLING DAMAGE	GEO	ORGES AUTO BODY				
		What Driver Was Doing	Vehic	cle Factors				
		GOING STRAIGHT						
		Driver Prior Action Other	ПОИ	T APPLICABLE				
		Driver Actions	•					
_	Щ	FAILED TO YIELD RIGHT-OF-WAY						
L NO	\overline{c}							
5	VEHICL							
	>							
		0						
		Owner Name ASHER DANN SHREERAN		Owner Address 407 S ASH ST				
5	01	(224) 239-9195		LONE ROCK, WI 53556, US				
	ļ	Sequence Of Events						
		Event						
	01	MOTOR VEH IN TRANSPORT						
	02	Event						
	03	Event						
		Event						
	04	Event						
		ndividual						
		Driver	LCi	itations Issued	Sex			
		ASHER DANN SHREERAN	3		FEMALE			
	ΑI	(224) 239-9195		ate of Birth	Race			
_	INDIVIDUAL				WHITE			
L N N	≥	Address	Dr	river License Number				
ر ر	$\frac{1}{2}$	407 S ASH ST	6-	TATE: WISCONSIN COUNTRY: UNI	TED STATES			
	=	LONE ROCK, WI 53556 , US	3	STATE: WISCONSIN COUNTRY: UNITED STATES				
	Saf	On Duty Crash ety Equipment	Sa	afety Equipment				
		Seat Position		HOULDER & LAP BELT				
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY	_	SHOOLDER & LAF BELT				
		Helmet Use		elmet Compliance				
				·				
		Eye Protection	Tir	nt Compliance				
				.,				
5	90	Injury Severity POSSIBLE INJURY		irbag EPLOYED-CURTAIN				
	Ŭ,	Ejected Ejection Path		EPLOTED-CORTAIN	Trapped/Extricated			
		NOT EJECTED NOT EJECTED/NOT A	APPLICA	ABLE	NOT TRAPPED			
		Medical Transport		MS Agency Identifier	EMS Run #			
		EMS GROUND		32				
		Hospital	Da	ate of Death	Time of Death			
		UNIVERSITY OF WI HOSPITALS & CLINICS AUT	ΙΤ					
	Distracted By Source Distracted By NOT APPLICABLE (NOT DISTRACTED)							
		Distracted By Action NOT DISTRACTED						
		Striking Unit # Location						
		Non Motorist						

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 04/14/2019

Crash Time 11:10 AM

		Prior Action								
		Action								
	_									
_	NDIVIDUAL									
LINO	۵									
ر	5									
	_									
		Action Other						To/From School		
		Action Other						TO/FIGHT SCHOOL		
	,	Orug & Alcohol NC	spected Alcohol U	se	Suspected Drug Use			l		
	_ [Alcohol Test Given	,	Alcohol Test Type			Alcohol Test Results			
		TEST NOT GIVEN		Allocator root typo			7 HOOTION FOOT PROGUITO			
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results				
7	001	Drug Type								
		1 1 10 10								
		Individual Condition								
		APPEARED NORMAL								
	į	ndividual								
	_	Passenger EVAN J ROSENOW (224) 239-9195			Citations Issued 0		Sex MALE			
	JAL				Date of Birth		Race			
LINO	10				D: I: N		WHITE			
5	INDIVIDUAL	Address 407 S ASH ST LONE ROCK, WI 53556 , US			Driver License Number					
	_									
		On	Duty Crash		Safety Equipment					
	Saf	ety Equipment	•							
		Seat Position 3FRONT SEAT-RIGH	HT SIDE (TRAIN	N ENGINEER	BOOSTER SEAT					
		Helmet Use	III OIDE (IIIAII	LIVOINEER	Helmet Compliance					
		Eye Protection			Tint Compliance					
		Lyo i rotootion			Till Compilance					
01	002	Inju Iniurv su	iry Severity ISPECTED SER	NOUS IN ILID	Airbag DEPLOYED-CURTA	INI				
		Ejected	Ejection Pat	h	DEFECTED-CORTA	1114	Trapped/Extricated			
		TOTALLY EJECTED	THROUGH	H SIDE WINDOW			NOT TRAPPED			
		Medical Transport EMS AIR			EMS Agency Identifier 531		EMS Run #			
		Hospital	LIOCDITAL C 8	CLINICS ALIT	Date of Death		Time of Death			
	Į	UNIVERSITY OF WI	tracted By Source							
		Distracted By Distracted By Action								
		Non Motorist	iking Unit #	Location						

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Prior Action								
TINO	INDIVIDUAL	Action								
		Action Other						To/From School		
			Oversented Alexand II	1	I Commented Describes					
	L	Drug & Alcohol	Suspected Alcohol U NO	ise	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	;			
01	002	Drug Type								
0	0									
		Individual Condition								
		NOT OBSERVED								
	ı	Individual								
	7	Passenger PRESTON O KOENIG (224) 239-9195 Address 407 S ASH ST			Citations Issued 0		Sex MALE			
_	INDIVIDUAL				Date of Birth		Race WHITE			
	IMI				Driver License Number					
	Z	LONE ROCK, WI 5	3556 , US							
	Sat	fety Equipment	On Duty Crash		Safety Equipment					
	Ju.	Seat Position			SHOULDER & LAP BELT					
		6SECOND SEAT	-RIGHT SIDE							
		Helmet Use			Helmet Compliance					
		Eye Protection			Tint Compliance					
7	003	Injury	Injury Severity SUSPECTED MIN	IOR INJURY	Airbag DEPLOYED-CURTA	IN				
		Ejected NOT EJECTED	Ejection Pa	th CTED/NOT APPL	l		Trapped/Extricated NOT TRAPPED			
		Medical Transport	NOT EJE	CIED/NOT APPL	EMS Agency Identifier		EMS Run #			
		EMS GROUND Hospital			532 Date of Death		Time of Death			
		UNIVERSITY OF W								
		Distracted By	Distracted By Source	•						
		Distracted By Action								
		Non Motorist	Striking Unit #	Location						
		Prior Action		<u>I</u>						

WISCONSIN MOTOR VEHICLE CRASH REPORT

											` ,
		Action									
	INDIVIDUAL										
ı											
L											
⊃	\leq										
	Z										
		Action Other									To/From School
	_		Suspected Alco	ohol Use	Sus	spected Drug Use					l
	L	Drug & Alcohol	Prug & Alcohol No)					
		Alcohol Test Given	Alcohol Test		уре				Alcohol Tes	t Results	
		TEST NOT GIVEN	1								
		Drug Test Given		Drug Test Type	9		Drug T	est Results			
		TEŠT NOT GIVEN									
_	3	Drug Type					l .				
2	003	- City 1780									
		Individual Condition									
		APPEARED NORM	441								
		APPEARED NORM	IAL								
	l	Violations									
	Ì	UTC Number Issue To? Statute Number		Ctatuta Numbar	Description .						
	5			344.62(1)	OF	scription PERATE MOTOR \	/EHICL	LE W/O IN	ISURANCE		
				01 1 1 N 1							
	02	UTC Number BB336974	Issue To? 001	Statute Number 346.18(3)	FA	scription IIL/YIELD RIGHT/\	WAY FI	ROM STO	P SIGN		
				` '							
	03	UTC Number BB336975	Issue To? 001	Statute Number 341.03(1)		scription PERATE AFTER R	EV/SU	SP OF RE	GISTRATIO	ON	
			001								
		Summary •									
	Unit :	Status				Operating As Classi	ification		Unit Type		
		RANSIT			D CLA	ASS			AUTOMO	BILE	
05		cle Type			0				Operating As Endorsements		
0	PAS	SENGER CAR									
	Total	Occs	Train/Bus	# Recorded	Total # Citations Issued Total Tr			Total Traile	Trailers Total Hazl		Mat Types
	1				0	0			0		
	Insur	ance?	Direction	Of Travel		Pre CrashTire Speed Lin			nit	Total Lane	S
⊨	YES	;	EASTB	DUND		Mark		55		2	
	Most	Harmful Event: Collision	on With			l Function			Emergency Motor Vehicle Use		
_ ر	MO	FOR VEH IN TRANS	SPORT		NO SPECIAL FUNCTION			NOT APPLICABLE			
İ	Traffi	ic Way			Traffic Control Tra			Traffic Cont	Traffic Control Inoperative/Missing		
	TWC	D-WAY, NOT DIVIDE	ED		NO C	ONTROL			NO		
	Surfa	асе Туре			Road C	Curvature			Road Grade)	
	BLA	CKTOP (BITUMING	DUS)		STRA	IGHT			LEVEL		
	Truck	k Bus or HazMat									
	NO										
	1	Vehicle									
	Ì	License Plate Number	,		Plate	Type		St	Country of Is	suance	
		ACX3958	ı			- AUTOMOBILE		WI	UNITED S		
		Vehicle Identification N	Number		Make			Year	Model		
05	02	1FAHP58S43A275			FORI			2003	TAURUS S	F	
								2003		<u>, </u>	
		00101	Color			Body Style Bus Use					
		GLD - GOLD				•	N.		NOT A BU	S	
						STATIONWAGON	N		NOT A BU	S	
l		GLD - GOLD Initial Contact Point 12FRONT				•	N		NOT A BU	S	

WISCONSIN MOTOR VEHICLE CRASH REPORT

	Щ		7	/ehicle Damage				
╘	占							
LINO	VEHICLE	Extent Of Damage	1	12FRONT				
ر ر	Ē	DISABLING DAMAGE						
		Towed Due To Damage	1	/ehicle Removed By				
		TOWED DUE TO DISABL		SEORGES AUTO BODY				
		What Driver Was Doing		/ehicle Factors				
		GOING STRAIGHT		55.5				
		Driver Prior Action Other		NOT APPLICABLE				
		Billor Filor Action Caron						
		Driver Actions						
	ш	NO CONTRIBUTING ACT	TION					
⊢								
E N	¥							
ر ر	VEHICL							
		Owner Name		Owner Address				
	٠.	HANNAH MAY BROWN		311 OAK STREET				
07	02	(608) 459-5192		LONE ROCK, WI 53556, US				
	9	Sequence Of Events						
		Event						
	5	MOTOR VEH IN TRANSP	PORT					
	~	Event						
	05							
	~	Event						
	03							
	4	Event						
	0							
-	I	Policy Holder						
LIND		Insurance Company		Individual				
_ ر		PROGRESSIVE-ADVANC	CED-INSURANCE-CO	HANNAH BROWN				
	ı	Individual						
		Driver		Citations Issued	Sex			
	ب	HANNAH MAY BROWN		0	FEMALE			
	4	(608) 459-5192		Date of Birth	Race			
╘	IDIVIDUA				WHITE			
	≥	Address						
_	\Box			Driver License Number				
		311 OAK STREET			UITED STATES			
		311 OAK STREET LONE ROCK, WI 53556,	us	Driver License Number STATE: WISCONSIN COUNTRY: UN	NITED STATES			
		LONE ROCK, WI 53556,			NITED STATES			
	=	LONE ROCK, WI 53556 ,			NITED STATES			
	=	LONE ROCK, WI 53556 , On Duty		STATE: WISCONSIN COUNTRY: UN Safety Equipment	NITED STATES			
	=	fety Equipment Seat Position On Duty	y Crash	STATE: WISCONSIN COUNTRY: UN	NITED STATES			
	=	fety Equipment Seat Position 1FRONT SEAT-LEFT SI	y Crash	STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT	NITED STATES			
	=	fety Equipment Seat Position On Duty	y Crash	STATE: WISCONSIN COUNTRY: UN Safety Equipment	NITED STATES			
	=	fety Equipment Seat Position 1FRONT SEAT-LEFT SI Helmet Use	y Crash	STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance	NITED STATES			
	=	fety Equipment Seat Position 1FRONT SEAT-LEFT SI	y Crash	STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT	NITED STATES			
2	Sat	Seat Position 1FRONT SEAT-LEFT SI Helmet Use Eye Protection	y Crash IDE (DRIVER/MOTORCY Severity	STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance	NITED STATES			
02	=	Seat Position 1FRONT SEAT-LEFT SI Helmet Use Eye Protection	y Crash IDE (DRIVER/MOTORCY Severity	STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance	NITED STATES			
02	Sat	Seat Position 1FRONT SEAT-LEFT SI Helmet Use Eye Protection	y Crash IDE (DRIVER/MOTORCY Severity ECTED MINOR INJURY Ejection Path	STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag DEPLOYED-COMBINATION	NITED STATES Trapped/Extricated			
02	Sat	LONE ROCK, WI 53556 , fety Equipment Seat Position 1FRONT SEAT-LEFT SI Helmet Use Eye Protection Injury S SUSPI Ejected NOT EJECTED	y Crash DE (DRIVER/MOTORCY Severity ECTED MINOR INJURY	STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag DEPLOYED-COMBINATION	Trapped/Extricated NOT TRAPPED			
02	Sat	Fety Equipment Seat Position 1FRONT SEAT-LEFT SI Helmet Use Eye Protection Injury Suspi Ejected NOT EJECTED Medical Transport	y Crash IDE (DRIVER/MOTORCY Severity ECTED MINOR INJURY Ejection Path	STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag DEPLOYED-COMBINATION ICABLE EMS Agency Identifier	Trapped/Extricated			
02	Sat	Seat Position 1FRONT SEAT-LEFT SI Helmet Use Eye Protection Injury Injury SUSPI Ejected NOT EJECTED Medical Transport EMS GROUND	y Crash IDE (DRIVER/MOTORCY Severity ECTED MINOR INJURY Ejection Path	STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag DEPLOYED-COMBINATION LICABLE EMS Agency Identifier 532	Trapped/Extricated NOT TRAPPED EMS Run #			
02	Sat	Fety Equipment Seat Position 1FRONT SEAT-LEFT SI Helmet Use Eye Protection Injury Suspi Ejected NOT EJECTED Medical Transport	y Crash IDE (DRIVER/MOTORCY Severity ECTED MINOR INJURY Ejection Path NOT EJECTED/NOT APPL	STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag DEPLOYED-COMBINATION ICABLE EMS Agency Identifier	Trapped/Extricated NOT TRAPPED			

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 04/14/2019

Crash Time 11:10 AM

			Distracted By Source NOT APPLICABL	E (NOT DISTRAC	CTED)			
		Distracted By Action NOT DISTRACTED						
		Non Motorist	Striking Unit #	Location				
		Prior Action						
		Action						
	JAL							
LINO	INDIVIDUAL							
ر	N							
	_							
		Action Other						To/From School
	ı	Drug & Alcohol	Suspected Alcohol U NO	lse	Suspected Drug Use NO			!
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	I		Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	<u> </u>	
05	004	Drug Type				l		
		Individual Condition						
		APPEARED NORM	MAL					