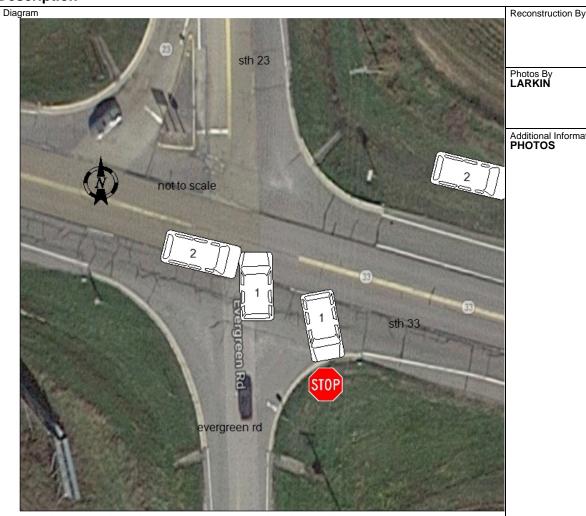
WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	е	Primary Crash D	ocument #	Agency 19-044	Crash Number 475	Investigating Offi DEPUTY E. KI	. ,		
9	Crash Date 04/19/2019		Crash Time 12:48 PM		Date Arrived 04/19/2019		Time Arrived 12:56 PM			
4X4	Date Notified 04/19/2019		Time Notified 12:48 PM		Total U 02	nits	Total Injured 03	Total Killed	i	
è O	On Emergency	Hit	and Run	∠ Lane Closu	ire	☐ Work Zone	Trailer or	Γowed		Reporting Threshold
E T	Government Property		Active Sc	hool Zone	School NO	Bus Related	Tags			
	▼ Reportable		Crash Type DT4000 (STA	NDARD CRASH)		Amended			Secondary Crash
	Description						•			

Description



Photos By LARKIN

Additional Information **PHOTOS**

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

UNIT 1 WAS AT STOP SIGN ON EVERGREEN RD AND FAILED TO YIELD TO UNIT 2. UNIT 2 WAS UNABLE TO AVOID COLLISION. DRIVER OF UNIT 1 REPORTED NO INJURY. FRONT SEAT PASSENGER OF UNIT 1 WAS TRANSPORTED FROM SCENE BY REEDSBURG AMBULANCE. BACK SEAT PASSENGER OF UNIT 1 REPORTED NO INJURY HOWEVER WAS TRANSPORTED BY PRIVATE VEHICLE TO REEDSBURG HOSPITAL FOR CHEST PAIN. OPERATOR OF UNIT 2 WAS TRANSPORTED TO REEDSBURG HOSPITAL BY REEDSBURG AMBULANCE FOR CHEST PAIN AND LEG PAIN. BOTH UNITS SUSTAINED DISABLING DAMAGE AND UNIT 1 REMOVED BY STEVES TOWING AND UNIT 2 REMOVED BY REEDSBURG SALVAGE. OPERATOR OF UNIT 1 WAS CITED FOR FAILURE TO YIELD RIGHT AWAY CAUSING BODILY HARM.

WISCONSIN MOTOR VEHICLE CRASH REPORT

	ON 27 F OF OIN TIN S. First MOT	STH33 EB T E COUNTY LAND FILL I HE TOWN OF EXCEL AUK COUNTY Sh Scene Harmful Event TOR VEH IN TRANSPORT FRONT TO SIDE	SIOR					Type UCTURE Inful Event Lo	ocation	Longitud -89.891 Y Coord 482398	644701 inate
-	Road DRY Envir	Surface Condition(s) conment Factor(s) IE ther Condition(s)					Roadway				
	Anim Crasl PUB	al Type Classification - Location LIC PROPERTY Land					TRAFFIO	CIAL JUR	•		Special Study
-	Closu LAN Date 04/1	n Interchange Area Ire Type E CLOSURE Initial Lane/Rd Closed 9/2019 All Lanes Open 9/2019	Junction Location INTERSECTION Time Initial Lane/Rd Closed 12:56 PM Time All Lanes Open 01:41 PM	d	LAW	ons for Closi	MAY INTER	Tin	CK, FIRE/ENne Scene Clear:46 PM		
	Unit S IN TI Vehice	Summary Status RANSIT Lle Type DRT) UTILITY VEHICL			cle Ope	erating As C	lassification		Unit Type AUTOMOI Operating A	s Endorser	
	Insur YES Most	Occs ance? Harmful Event: Collision V		1 Spec	Pre dial Fun	CrashTire Mark ction		Total Trail 0 Speed Lin N/A			es
	Traffi TWC Surfa	c Way P-WAY, NOT DIVIDED ce Type CKTOP (BITUMINOU: Bus or HazMat	-	Road	ic Contr OP SIG d Curva	ture			Traffic Contr NO Road Grade LEVEL	•	ive/Missing
5	_	Vehicle License Plate Number KR9147 Vehicle Identification Nur 1GKFK16R1WJ7316		LTI Mal	ке	HT TRUC		St WI Year 1998	Country of Is: UNITED ST Model K1500 SUE	TATES	

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Color	Body Style	Bus Use		
		BGE - BEIGE	UT - SPORT UTILITY VEHICLE	NOT A BUS		
	Щ	Initial Contact Point	Vehicle Damage			
E N	<u> </u>	11LEFT FRONT CORNER				
5	VEHICL	Extent Of Damage	11LEFT FRONT CORNER, 12FRO	DNT		
	>	DISABLING DAMAGE	l VIII D			
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By STEVES AUTO SERVICE			
		What Driver Was Doing	Vehicle Factors			
		ENTERING TRAFFIC LANE	Volucio i delete			
		Driver Prior Action Other	NOT APPLICABLE			
		Driver Actions				
	믜	FAILED TO YIELD RIGHT-OF-WAY				
L NO	VEHICL					
5	표					
	>					
		Owner Name	Owner Address			
_		CHRISTINE A SULLIVAN	N710 STATE ROAD 113			
5	01	(608) 573-0859	LODI, WI 53555 , US			
		Sequence Of Events				
	01	Event MOTOR VEH IN TRANSPORT				
	02	Event				
	03	Event				
		Event				
	04	LVent				
		Policy Holder				
L		Insurance Company	Individual			
-		GEICO-GENERAL-INS-CO	CHRISTINE SULLIVAN			
		ndividual				
		Driver	Citations Issued	Sex		
	ب	JAIYAH ALEXANDRIA MUEHLENBRUCH	1	FEMALE		
	DUAL	(608) 573-2060	Date of Birth	Race BLACK		
ţ	/ID		B: I: N I	BLACK		
	INDIVI	Address N710 STATE ROAD 113	Driver License Number			
	Z	LODI, WI 53555 , US	STATE: WISCONSIN COUNTRY: UNITED STATES			
	On Duty Crash		Safety Equipment			
	Sat	On Duty Crash The state of the	Safety Equipment			
	Sat	Seat Position	SHOULDER & LAP BELT			
	Sat	Seat Position 1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY	SHOULDER & LAP BELT			
	Sat	Seat Position				
	Sat	Seat Position 1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY Helmet Use	SHOULDER & LAP BELT Helmet Compliance			
	Sat	Seat Position 1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY	SHOULDER & LAP BELT			
_		Seat Position 1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY Helmet Use Eye Protection Injury Severity	SHOULDER & LAP BELT Helmet Compliance			
01	Sat	Seat Position 1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY) Helmet Use Eye Protection Injury NO APPARENT INJURY	SHOULDER & LAP BELT Helmet Compliance Tint Compliance			
10		Seat Position 1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY) Helmet Use Eye Protection Injury Injury NO APPARENT INJURY Ejected Ejection Path	SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag DEPLOYED-COMBINATION	Trapped/Extricated		
01		Seat Position 1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY) Helmet Use Eye Protection Injury Injury NO APPARENT INJURY	SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag DEPLOYED-COMBINATION	Trapped/Extricated NOT TRAPPED EMS Run #		
	Sat	Seat Position 1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY Helmet Use	SHOULDER & LAP BELT Helmet Compliance			

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Hospital			Date of Death		Time of Death		
		Distracted By N	stracted By Source OT APPLICABL	E (NOT DISTRA	CTED)				
		Distracted By Action NOT DISTRACTED							
		Non Motorist	riking Unit #	Location					
		Prior Action							
		Action							
	JAL								
LNO	NDIVIDUAL								
_	INDI								
		Action Other						To/From School	
	Ĺ	Drug & Alcohol N	uspected Alcohol Us O	se	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			
7	001	Drug Type							
	0								
		Individual Condition APPEARED NORMA							
			-						
		Individual					_		
		Passenger	NEC		Citations Issued		Sex		
	7	ISAAC ZACKERY JONES (608) 432-6190			0 MALE				
⊨	DIVIDUAL	(000) 432-0130			Date of Birth		Race BLACK		
	≥	Address			Driver License Number				
_	N N	1109 E HIAWATHA E WISCONSIN DELLS,			STATE: WISCONSIN COUNTRY: UNITED STATES				
		On Duty Crash			Safety Equipment				
	Sat	fety Equipment	T Duty Clasii						
		Seat Position 3FRONT SEAT-RIG	HT SIDE (TRAIN	I ENGINEER	SHOULDER & LAP BELT				
		Helmet Use			Helmet Compliance				
		Eye Protection			Tint Compliance				
5	005	Injury P	jury Severity OSSIBLE INJUR	y	Airbag DEPLOYED-COMBII	NATION			
		Ejected	Ejection Pat		22. 23 125-00MBII		Trapped/Extricated		
		NOT EJECTED Medical Transport		TED/NOT APPL	ICABLE EMS Agency Identifier		NOT TRAPPED		
		EMS GROUND			6001024		EMS Run #		
		Hospital REEDSBURG AREA	MED CTR		Date of Death		Time of Death		

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Distracted By	Distracted By Source)					
		Distracted By Action							
	·	Non Motorist	Striking Unit #	Location					
		Prior Action							
		Action							
	ᆜ								
╘	NDIVIDUAL								
LIND									
	Ξ								
		Action Other						To/From School	
	L	Drug & Alcohol	Suspected Alcohol U	se	Suspected Drug Use				
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results		
		TEST NOT GIVEN Drug Test Given		Drug Test Type		Drug Test Results			
		TEST NOT GIVEN							
6	005	Drug Type							
		Individual Condition							
		APPEARED NORM	IAL						
	į	ndividual							
	_	Passenger JORDAN M HARTING (608) 432-1673			Citations Issued 0		Sex MALE		
_	INDIVIDUAL				Date of Birth Race WHITE				
		Address S1085 CLARA AVE	= #29		Driver License Number				
	Z	WISCONSIN DELL							
			On Duty Crash		Safety Equipment				
	Sat	Seat Position			SHOULDER & LAP BELT				
		6SECOND SEAT-	RIGHT SIDE						
		Helmet Use			Helmet Compliance				
		Eye Protection			Tint Compliance				
7	003	Injury	Injury Severity POSSIBLE INJUR	RY	Airbag NON DEPLOYED				
		Ejected	Ejection Par	th	Trapped/Extric				
		NOT EJECTED Medical Transport	NOTESE	CIED/NOT APPL	PLICABLE NOT TRAP EMS Agency Identifier EMS Run #				
		NOT TRANSPORT Hospital	ED		Date of Death		Time of Death		
		Distracted By	Distracted By Source	9					

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Distracted By Action								
		Non Motorist	riking Unit #	Location						
		Prior Action								
		Action								
	4									
-	INDIVIDUAL									
UNIT	=									
_	\leq									
	Z									
		Action Other				To/From School				
	,	Drug & Alcohol	uspected Alcoh	ol Use	Suspected Drug Use NO					
	_		<u> </u>	T			T			
		Alcohol Test Given		Alcohol Test Typ	е		Alcohol Tes	t Results		
		TEST NOT GIVEN		D T 1T						
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Result	ts			
	•									
7	003	Drug Type								
	J									
		Individual Condition								
		I								
		APPEARED NORMA	L							
	,	Violations								
			ssue To?	Statute Number	Description					
	2		01	346.18(3)	FAIL/YIELD RIGHT	WAY FROM ST	OP SIGN (RE	ESULTING BODILY HARM)		
'	Uni	Jnit Summary								
		Status		\	ehicle Operating As Class	sification	Unit Type	1		
		RANSIT		I	D CLASS			AUTOMOBILE		
02		cle Type						s Endorsements		
0	PAS	SSENGER VAN								
	_	I Occs	Train/Bus #		Total # Citations Issued	Total Tra	ilers	Total HazMat Types		
	1	_	1			0		0		
		nsurance? Direction Of Travel			i ie orasii iie					
	YES					Speed Li	mit	Total Lanes		
			EASTBO	JND	Mark	Speed Li 55		4		
UNIT		t Harmful Event: Collision	EASTBOU	JND S		55		4 Motor Vehicle Use		
5	MO.	t Harmful Event: Collision	EASTBOU	JND S	Mark Special Function NO SPECIAL FUNCTION	55	Emergency NOT APP	4 Motor Vehicle Use LICABLE		
N N	MO ⁻ Traff	t Harmful Event: Collision TOR VEH IN TRANSP ic Way	EASTBOU With ORT	JND S	Mark Special Function NO SPECIAL FUNCTION Fraffic Control	55	Emergency NOT APP	4 Motor Vehicle Use		
UN	Traff	t Harmful Event: Collision	EASTBOU With ORT	JND S	Mark Special Function NO SPECIAL FUNCTION	55	Emergency NOT APP Traffic Cont	4 Motor Vehicle Use LICABLE rol Inoperative/Missing		
N	Traff TWC	t Harmful Event: Collision TOR VEH IN TRANSF ic Way D-WAY, NOT DIVIDED ace Type	EASTBOU With ORT	JND S	Mark Special Function NO SPECIAL FUNCTION Fraffic Control NO CONTROL	55	Emergency NOT APP Traffic Cont	4 Motor Vehicle Use LICABLE rol Inoperative/Missing		
U	Traff TWC	t Harmful Event: Collision TOR VEH IN TRANSP ic Way D-WAY, NOT DIVIDED	EASTBOU With ORT	JND S	Mark Special Function NO SPECIAL FUNCTION Fraffic Control NO CONTROL Road Curvature	55	Emergency NOT APP Traffic Cont NO Road Grade	4 Motor Vehicle Use LICABLE rol Inoperative/Missing		
UN	Traff TWC	t Harmful Event: Collision TOR VEH IN TRANSF ic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOL	EASTBOU With ORT	JND S	Mark Special Function NO SPECIAL FUNCTION Fraffic Control NO CONTROL Road Curvature	55	Emergency NOT APP Traffic Cont NO Road Grade	4 Motor Vehicle Use LICABLE rol Inoperative/Missing		
NO .	Traff TWC Surfa BLA Truc NO	t Harmful Event: Collision TOR VEH IN TRANSP ic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOU k Bus or HazMat	EASTBOU With ORT	JND S	Mark Special Function NO SPECIAL FUNCTION Fraffic Control NO CONTROL Road Curvature	55	Emergency NOT APP Traffic Cont NO Road Grade	4 Motor Vehicle Use LICABLE rol Inoperative/Missing		
NO NO	Traff TWC Surfa BLA Truc NO	t Harmful Event: Collision TOR VEH IN TRANSF ic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOL	EASTBOU With ORT	JND S	Mark Special Function NO SPECIAL FUNCTION Fraffic Control NO CONTROL Road Curvature	55	Emergency NOT APP Traffic Cont NO Road Grade	4 Motor Vehicle Use LICABLE rol Inoperative/Missing		
NN .	Traff TWC Surfa BLA Truc NO	t Harmful Event: Collision TOR VEH IN TRANSP ic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOU k Bus or HazMat	EASTBOU With ORT	JND S	Mark Special Function NO SPECIAL FUNCTION Fraffic Control NO CONTROL Road Curvature STRAIGHT	55 ON	Emergency NOT APP Traffic Cont NO Road Grade LEVEL	4 Motor Vehicle Use LICABLE rol Inoperative/Missing		
	Traff TWC Surfa BLA Truc NO	t Harmful Event: Collision TOR VEH IN TRANSP ic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOU k Bus or HazMat Vehicle License Plate Number	EASTBOU With ORT	JND S	Mark Special Function NO SPECIAL FUNCTION Fraffic Control NO CONTROL Road Curvature STRAIGHT	55 ON	Emergency NOT APP Traffic Cont NO Road Grade LEVEL	4 Motor Vehicle Use LICABLE rol Inoperative/Missing		
02 UN	Traff TWC Surfa BLA Truc NO	t Harmful Event: Collision TOR VEH IN TRANSP ic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOU k Bus or HazMat Vehicle License Plate Number 471ZZX	EASTBOU With ORT	JND S	Mark Special Function NO SPECIAL FUNCTION Fraffic Control NO CONTROL Road Curvature STRAIGHT Plate Type AUT - AUTOMOBILE	St WI	Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST	4 Motor Vehicle Use LICABLE rol Inoperative/Missing		
	Traff TWC Surfa BLA Truc NO	t Harmful Event: Collision TOR VEH IN TRANSP iic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOUM) k Bus or HazMat Vehicle License Plate Number 471ZZX Vehicle Identification Number	EASTBOU With ORT	JND S	Mark Special Function NO SPECIAL FUNCTION Fraffic Control NO CONTROL Road Curvature STRAIGHT Plate Type AUT - AUTOMOBILE Make	St WI Year	Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST	Motor Vehicle Use LICABLE rol Inoperative/Missing suance TATES		

WISCONSIN MOTOR VEHICLE CRASH REPORT

		13010 1 10 1	11/	lahiala Damaga		
_	LE	Initial Contact Point	ľ	ehicle Damage		
F	VEHICL	12FRONT				
LNO				12FRONT		
	VE					
		Towed Due To Damage	V	ehicle Removed By		
		TOWED DUE TO DISABLIN	G DAMAGE R	REEDSBURG SALVAGE		
		What Driver Was Doing	V	ehicle Factors		
		GOING STRAIGHT				
		Driver Prior Action Other	N	IOT APPLICABLE		
		2				
		Driver Actions				
	Е	NO CONTRIBUTING ACTIO	N			
_	Ë					
LNO	2					
5	VEHICL					
	VE					
		Owner Name		Owner Address		
~	~	EAN HOLDINGS		14002 E 21ST ST #1500		
05	02	(918) 401-6000		TULSA, OK 74134 , US		
		Sequence Of Events				
		Event				
	01	MOTOR VEH IN TRANSPOR	RT			
	02	Event				
	0					
	3	Event				
	03					
	_	Event				
	04					
		Delieu Helder				
╘		Policy Holder				
TINC		Insurance Company	U.TV.O.	Organization/Company		
LINO			ALTY-CO	Organization/Company EAN HOLDINGS		
LIND	l	Insurance Company	ALTY-CO			
LIND	l	Insurance Company EMC-PROPERTY-&-CASUA	ALTY-CO		Sex	
LIND	l	Insurance Company EMC-PROPERTY-&-CASUA ndividual	ALTY-CO	EAN HOLDINGS		
LIND		Insurance Company EMC-PROPERTY-&-CASUA ndividual Driver	ALTY-CO	Citations Issued 0	MALE	
		Insurance Company EMC-PROPERTY-&-CASUA ndividual Driver STEVEN W NEW	ALTY-CO	EAN HOLDINGS Citations Issued		
		Insurance Company EMC-PROPERTY-&-CASUA ndividual Driver STEVEN W NEW (608) 782-7555	ALTY-CO	Citations Issued O Date of Birth	MALE Race	
UNIT		Insurance Company EMC-PROPERTY-&-CASUA Individual Driver STEVEN W NEW (608) 782-7555 Address	ALTY-CO	Citations Issued 0	MALE Race	
	ADIVIDUAL	Insurance Company EMC-PROPERTY-&-CASUA ndividual Driver STEVEN W NEW (608) 782-7555 Address 2002 STATE ST		Citations Issued O Date of Birth Driver License Number	MALE Race WHITE	
		Insurance Company EMC-PROPERTY-&-CASUA Individual Driver STEVEN W NEW (608) 782-7555 Address		Citations Issued O Date of Birth	MALE Race WHITE	
	ADIVIDUAL	Insurance Company EMC-PROPERTY-&-CASUA Individual Driver STEVEN W NEW (608) 782-7555 Address 2002 STATE ST LA CROSSE, WI 54601, US	S	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN	MALE Race WHITE	
	INDIVIDUAL	Insurance Company EMC-PROPERTY-&-CASUA Individual Driver STEVEN W NEW (608) 782-7555 Address 2002 STATE ST LA CROSSE, WI 54601 , US	S	Citations Issued O Date of Birth Driver License Number	MALE Race WHITE	
	INDIVIDUAL	Insurance Company EMC-PROPERTY-&-CASUA Individual Driver STEVEN W NEW (608) 782-7555 Address 2002 STATE ST LA CROSSE, WI 54601 , US Fety Equipment	S	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN	MALE Race WHITE	
	INDIVIDUAL	Insurance Company EMC-PROPERTY-&-CASUA Individual Driver STEVEN W NEW (608) 782-7555 Address 2002 STATE ST LA CROSSE, WI 54601 , US	S	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN	MALE Race WHITE	
	INDIVIDUAL	Insurance Company EMC-PROPERTY-&-CASUA Individual Driver STEVEN W NEW (608) 782-7555 Address 2002 STATE ST LA CROSSE, WI 54601 , US Fety Equipment	S Crash	EAN HOLDINGS Citations Issued Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment	MALE Race WHITE	
	INDIVIDUAL	Insurance Company EMC-PROPERTY-&-CASUA Individual Driver STEVEN W NEW (608) 782-7555 Address 2002 STATE ST LA CROSSE, WI 54601 , US Fety Equipment Seat Position	S Crash	EAN HOLDINGS Citations Issued Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment	MALE Race WHITE	
	INDIVIDUAL	Insurance Company EMC-PROPERTY-&-CASUA Individual Driver STEVEN W NEW (608) 782-7555 Address 2002 STATE ST LA CROSSE, WI 54601 , US Fety Equipment Seat Position 1FRONT SEAT-LEFT SIDE	S Crash	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT	MALE Race WHITE	
	INDIVIDUAL	Insurance Company EMC-PROPERTY-&-CASUA Individual Driver STEVEN W NEW (608) 782-7555 Address 2002 STATE ST LA CROSSE, WI 54601 , US Fety Equipment Seat Position 1FRONT SEAT-LEFT SIDE	S Crash	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance	MALE Race WHITE	
	INDIVIDUAL	Insurance Company EMC-PROPERTY-&-CASUA Individual Driver STEVEN W NEW (608) 782-7555 Address 2002 STATE ST LA CROSSE, WI 54601 , US Fety Equipment Seat Position 1FRONT SEAT-LEFT SIDE Helmet Use	S Crash	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT	MALE Race WHITE	
TIND	INDIVIDUAL Sat	Insurance Company EMC-PROPERTY-&-CASUA Individual Driver STEVEN W NEW (608) 782-7555 Address 2002 STATE ST LA CROSSE, WI 54601 , US Fety Equipment Seat Position 1FRONT SEAT-LEFT SIDE Helmet Use	S Frash E (DRIVER/MOTORCY	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance	MALE Race WHITE	
	INDIVIDUAL Sat	Insurance Company EMC-PROPERTY-&-CASUA Individual Driver STEVEN W NEW (608) 782-7555 Address 2002 STATE ST LA CROSSE, WI 54601 , US Fety Equipment Seat Position 1FRONT SEAT-LEFT SIDE Helmet Use Eye Protection	S Crash E (DRIVER/MOTORCY	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance	MALE Race WHITE	
TIND	INDIVIDUAL	Insurance Company EMC-PROPERTY-&-CASUA Individual Driver STEVEN W NEW (608) 782-7555 Address 2002 STATE ST LA CROSSE, WI 54601 , US Fety Equipment Seat Position 1FRONT SEAT-LEFT SIDE Helmet Use Injury Injury Severe Possible Injury	Scrash E (DRIVER/MOTORCY erity LE INJURY	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance	MALE Race WHITE IITED STATES	
TIND	INDIVIDUAL Sat	Insurance Company EMC-PROPERTY-&-CASUA Individual Driver STEVEN W NEW (608) 782-7555 Address 2002 STATE ST LA CROSSE, WI 54601 , US Fety Equipment Seat Position 1FRONT SEAT-LEFT SIDE Helmet Use Eye Protection Injury Injury Several Possibility Injury Injury Several Possibility Injury Injury Several Injury	Scrash E (DRIVER/MOTORCY erity LE INJURY Ejection Path	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag DEPLOYED-COMBINATION	MALE Race WHITE IITED STATES Trapped/Extricated	
TIND	INDIVIDUAL Sat	Insurance Company EMC-PROPERTY-&-CASUA Individual Driver STEVEN W NEW (608) 782-7555 Address 2002 STATE ST LA CROSSE, WI 54601 , US Fety Equipment Seat Position 1FRONT SEAT-LEFT SIDE Helmet Use Eye Protection Injury POSSIBI Ejected NOT EJECTED Injury Injury Several Injury	Scrash E (DRIVER/MOTORCY erity LE INJURY	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag DEPLOYED-COMBINATION ICABLE	MALE Race WHITE IITED STATES Trapped/Extricated NOT TRAPPED	
TIND	INDIVIDUAL Sat	Insurance Company EMC-PROPERTY-&-CASUA Individual Driver STEVEN W NEW (608) 782-7555 Address 2002 STATE ST LA CROSSE, WI 54601 , US Fety Equipment Seat Position 1FRONT SEAT-LEFT SIDE Helmet Use Eye Protection Injury POSSIBI Ejected NOT EJECTED Medical Transport	Scrash E (DRIVER/MOTORCY erity LE INJURY Ejection Path	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag DEPLOYED-COMBINATION ICABLE EMS Agency Identifier	MALE Race WHITE IITED STATES Trapped/Extricated	
TINO	INDIVIDUAL Sat	Insurance Company EMC-PROPERTY-&-CASUA Individual Driver STEVEN W NEW (608) 782-7555 Address 2002 STATE ST LA CROSSE, WI 54601 , US Fety Equipment Seat Position 1FRONT SEAT-LEFT SIDE Helmet Use Eye Protection Injury Injury Several Possible Ejected NOT EJECTED Medical Transport EMS GROUND	Scrash E (DRIVER/MOTORCY erity LE INJURY Ejection Path	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag DEPLOYED-COMBINATION ICABLE EMS Agency Identifier 6001024	MALE Race WHITE IITED STATES Trapped/Extricated NOT TRAPPED EMS Run #	
TIND	INDIVIDUAL Sat	Insurance Company EMC-PROPERTY-&-CASUA Individual Driver STEVEN W NEW (608) 782-7555 Address 2002 STATE ST LA CROSSE, WI 54601 , US Fety Equipment Seat Position 1FRONT SEAT-LEFT SIDE Helmet Use Eye Protection Injury POSSIBI Ejected NOT EJECTED Medical Transport	S Erash E (DRIVER/MOTORCY erity LE INJURY Ejection Path NOT EJECTED/NOT APPL	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag DEPLOYED-COMBINATION ICABLE EMS Agency Identifier	MALE Race WHITE IITED STATES Trapped/Extricated NOT TRAPPED	

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 04/19/2019

Crash Time 12:48 PM

To/From Cohool
To/From School
ults
Date of Birth
Date of Birth