19-13031

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override		Primary Crash Document #		Agency Crash Number 19-13031		0 0	Investigating Officer/Deputy DEPUTY A. SUKOWATEY		
RR	Crash Date 10/19/2019		Crash Time 06:52 PM		Date Arrived 10/19/2019		Time Arrived 07:07 PM	1		
7D6	Date Notified 10/19/2019		Time Notified 06:53 PM		Total Units 02		Total Injured 02	Total Killed 00		
0B7	On Emergency Hit		and Run		ıre Work Zone		Trailer or	Γowed		Reporting Threshold
6TL	Government Property		Active School Zone		School Bus Related NO		Tags			
•	✓ Reportable		Crash Type DT4000 (STANDARD CRASH))		Amended			Secondary Crash

Description

Dagram
Photos By

UNIT ONE

Additional Information NONE

UNIT TWO

UNIT ONE WAS TRAVELING NORTHBOUND ON HWY 78 TURNING LEFT ONTO HWY Z WITH THEIR BRAKE LIGHTS AND TURN SIGNAL ACTIVATED WHEN UNIT ONE WAS STRUCK BY UNIT TWO FROM BEHIND. THE OPERATOR OF UNIT TWO WAS ALSO TRAVELING NORTHBOUND ON HWY 78 AND CLAIMED TO NOT HAVE SEEN THE VEHICLE UNTIL IT WAS TOO LATE. THE OCCUPANTS OF UNIT TWO WERE CLAIMING HEAD AND NECK PAIN AND WERE TRANSPORTED TO SAUK PRAIRIE HOSPITOL. THE OCCUPANTS OF UNIT ONE CLAIMED NO INJURIES AND DID NOT BELIEVE THE CHILDREN IN THE VEHICLE WERE INJURED AS THEY WERE PROPERLY SECURED IN CHILD SEATS. A WARNING WAS ISSUED TO THE OPERATOR OF UNIT TWO FOR FAILING TO CONTROL HER VEHICLE.

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Loc	ation									
	STH78 NB					Latitude			Longitud	de
28 I	T N					43.31351	4554		_	5037898
_	CTHZ EB				F	X Coordina	ate		Y Coord	linate
	HE TOWN OF PRAIRIE	DU SAC				278203.2			479926	
IN S	SAUK COUNTY				F	Structure 7	Type			
						Ott dotalo	.) 0			
Cra	sh Scene									
First	Harmful Event					First Harm	ful Event L	ocation		
	TOR VEH IN TRANSPO	RT				ON ROA	DWAY			
Man	ner of Collision					Light Cond	dition			
02	FRONT TO REAR					DARK/UI	NLIT			
Roa	d Surface Condition(s)					Roadway I	Factor(s)			
WE	Т									
Envi	ronment Factor(s)									
WE	ATHER CONDITIONS					NONE				
Wea	ther Condition(s)									
CLC	OUDY, RAIN									
Anin	nal Type			Relation T		•				
						TRAFFICWAY - ON ROAD				
	sh Classification - Location				Crash Classification - Jurisdiction					
	BLIC PROPERTY				NO SPECIAL JURISDICTION					
Tribal Land					Access Control NO CONTROL				Special Study	
Within Interchange Area Junction Location				[1	Intersection					<u> </u>
NO	ŭ	INTERSECTION				RSECTION				
Clos	ure Type			Reasons	s for Closur	re				
CLC	SURE-ONE DIRECTIO	N								
Date	Initial Lane/Rd Closed	Time Initial Lane/Rd Close	:d	LAW E	NFORCE	MENT, T	OW TRU	CK, FIRE/EM	IS	
	19/2019	06:52 PM								
	e All Lanes Open	Time All Lanes Open 07:45 PM	Date Scene Clear 10/19/2019					me Scene Cleared 7:45 PM		
	19/2019	07.43 T WI		10/19/2	2019		07	.43 i W		
	t Summary Status		Veh	cle Opera	ating As Cla	assification		Unit Type		
	RANSIT			LASS	ag / 10 010			AUTOMOE	RII F	
	cle Type		1-0					Operating As		ments
	ORT) UTILITY VEHICLE	Ē								
•	l Occs	Train/Bus # Recorded	Tota	l # Citatio	ons Issued		Total Trai	lers	Total Haz	:Mat Types
4			0				0		0	
	rance?	Direction Of Travel		Pre C	rashTire		Speed Lir		Total Lan	es
YES		NORTHBOUND			/lark		55		2	
	t Harmful Event: Collision W			cial Functi	tion AL FUNCT	TION .		NOT APPL		
	TOR VEH IN TRANSPO	PRT				IION				
	fic Way O-WAY, NOT DIVIDED			fic Control CONTR				Traffic Contr	oi inopera	tive/Missing
	ace Type			d Curvatu				NO Road Grade		
	ACKTOP (BITUMINOUS	3)		RAIGHT	116			Road Grade LEVEL		
	k Bus or HazMat	'/	10	.,						
NO										
	Vehicle									
	License Plate Number			te Type			St	Country of Iss		
	ADV7936				OMOBILE	E	WI	UNITED ST	ATES	
Ξ	Vehicle Identification Num		Ma		MOTOR		Year	Model		
0	2GKFLUE37G6311698			NERAL dy Style	MOTORS	S COR	2016	TERRAIN Bus Use		
	Color WHI - WHITE				T UTILITY	Y VEHICI	_E	NOT A BUS	3	
				J. J .						

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

Crash Date 10/19/2019

	щ	Initial Contact Point	V	ehicle Damage			
L N	VEHICL	6REAR	4	RIGHT SIDE REAR, 5RIGHT REAR	CORNER 6REAR 7LEET REAR		
5	표	Extent Of Damage		ORNER, 8LEFT SIDE REAR	OOMEN, O-MEAN, I-LEI I MEAN		
	7	DISABLING DAMAGE					
		Towed Due To Damage		ehicle Removed By			
		TOWED DUE TO DISABLING		ILLS TOWING			
		What Driver Was Doing	V	ehicle Factors			
		LEFT TURN		IOT ADDI ICADI E			
		Driver Prior Action Other	IN IN	IOT APPLICABLE			
		Driver Actions					
	ш	Driver Actions NO CONTRIBUTING ACTION	ı				
-	Ä		•				
E N	VEHICL						
·⊃	亩						
	>						
		Owner Name		Owner Address			
		HAILEY KATHRYN STATZ		1320 SILVER DR			
9	5	(608) 963-1436		BARABOO, WI 53913 , US			
	,	Sequence Of Events					
		Event					
	2	LEFT TURN					
	02	Event MOTOR VEH IN TRANSPOR	т				
	0		1				
	33	Event					
		-					
	8	Event					
		Dallay Halden					
LIND		Policy Holder Insurance Company		Land Calabara			
5		PROGRESSIVE-UNIVERSAL	-INSURANCE-COMP	Individual HAILEY STATZ			
		ndividual					
		Driver		Citations Issued	Sex		
		HAILEY KATHRYN STATZ		0	FEMALE		
	₹	(608) 963-1436		Date of Birth	Race		
-	DIVIDUAL				WHITE		
L N	⅀	Address		Driver License Number			
ر ا		1320 SILVER DR BARABOO, WI 53913, US		STATE: WISCONSIN COUNTRY: UNITED STATES			
	_	BARABOO, WI 33913 , 03		OTATE: WIGOONGIN GOONTKT: ON	TIED GIATEG		
		[0.5:0					
	Sat	On Duty Cra ety Equipment	asn	Safety Equipment			
		Seat Position		SHOULDER & LAP BELT			
		1FRONT SEAT-LEFT SIDE	(DRIVER/MOTORCY	ONOCEDEN WEAR BEET			
		Helmet Use	(Helmet Compliance			
				·			
		Eye Protection		Tint Compliance			

2	90	Injury Sever	DENT IN HIDV	Airbag NON DEPLOYED			
			ection Path		Trapped/Extricated		
			OT EJECTED/NOT APPL	ICABLE	NOT TRAPPED		
		Medical Transport		EMS Agency Identifier	EMS Run #		
		NOT TRANSPORTED					
		Hospital		Date of Death	Time of Death		
		Distracted By NOT APP	By Source LICABLE (NOT DISTRAC	CTED)			
		J. KOT ALL		,			

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

Crash Date 10/19/2019

		Distracted By Action NOT DISTRACTED						
	L	Striking	Unit #	Location				
		Non Motorist						
		Prior Action						
		Action						
	JAL							
L N	₫							
5	INDIVIDUAL							
	Z							
		Action Other						To/From School
		Suspected Alcohol Use			Suspected Drug Use			
	L	Drug & Alcohol NO	100711001101		NO			
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results	
		TEST NOT GIVEN Drug Test Given		Drug Test Type		Drug Test Results		
		TEST NOT GIVEN		Diag root type		Drug Test Nesults		
7	001	Drug Type		•		•		
	0							
		Individual Condition						
		APPEARED NORMAL						
	ا							
	ı	ndividual						
		Passenger			Citations Issued		Sex	
		Passenger WILLIAM JAMES HART			Citations Issued 0		Sex MALE	
							MALE Race	
F		WILLIAM JAMES HART (608) 963-1436			Date of Birth		MALE	
LINO		WILLIAM JAMES HART (608) 963-1436 Address 1320 SILVER DR	ıe.		Date of Birth Driver License Number	I COLINTRY: LIN	MALE Race WHITE	
LINO	INDIVIDUAL	WILLIAM JAMES HART (608) 963-1436	JS		Date of Birth	N COUNTRY: UN	MALE Race WHITE	
LIND	INDIVIDUAL	WILLIAM JAMES HART (608) 963-1436 Address 1320 SILVER DR BARABOO, WI 53913 , U			Date of Birth Driver License Number	N COUNTRY: UN	MALE Race WHITE	
TINO	INDIVIDUAL	Address 1320 SILVER DR BARABOO, WI 53913, U			Date of Birth Driver License Number STATE: WISCONSIN		MALE Race WHITE	
LIND	INDIVIDUAL	Address 1320 SILVER DR BARABOO, WI 53913 , U Tety Equipment Seat Position NILLIAM JAMES HART On Duty	y Crash	N ENCINEED	Date of Birth Driver License Number STATE: WISCONSIN		MALE Race WHITE	
LIND	INDIVIDUAL	Address 1320 SILVER DR BARABOO, WI 53913, U	y Crash	N ENGINEER	Date of Birth Driver License Number STATE: WISCONSIN		MALE Race WHITE	
LIND	Saf	Address 1320 SILVER DR BARABOO, WI 53913 , U Tety Equipment Seat Position 3-FRONT SEAT-RIGHT S Helmet Use	y Crash	N ENGINEER	O Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP Helmet Compliance		MALE Race WHITE	
TIND	Saf	Address 1320 SILVER DR BARABOO, WI 53913 , U Fety Equipment Seat Position 3FRONT SEAT-RIGHT S	y Crash	N ENGINEER	Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP		MALE Race WHITE	
	NDIVIDUAL Safe	Address 1320 SILVER DR BARABOO, WI 53913 , U Tety Equipment Seat Position 3FRONT SEAT-RIGHT S Helmet Use	y Crash	N ENGINEER	O Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP Helmet Compliance		MALE Race WHITE	
UNIT UNIT	Saf	Address 1320 SILVER DR BARABOO, WI 53913 , U Seat Position 3FRONT SEAT-RIGHT S Helmet Use Eye Protection Injury NO AP	y Crash SIDE (TRAI	NJURY	O Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance		MALE Race WHITE ITED STATES	
	NDIVIDUAL Safe	Address 1320 SILVER DR BARABOO, WI 53913 , U Seat Position 3FRONT SEAT-RIGHT S Helmet Use Eye Protection Injury Figure 1	y Crash SIDE (TRAI	NJURY th	O Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED		MALE Race WHITE ITED STATES Trapped/Extricated	
	O02 Sat	Address 1320 SILVER DR BARABOO, WI 53913 , U Seat Position 3FRONT SEAT-RIGHT S Helmet Use Eye Protection Injury NO AP	y Crash SIDE (TRAI	NJURY	O Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED		MALE Race WHITE ITED STATES	
	O02 Saf	Address 1320 SILVER DR BARABOO, WI 53913 , U Fety Equipment Seat Position 3FRONT SEAT-RIGHT S Helmet Use Eye Protection Injury NO AP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED	y Crash SIDE (TRAI	NJURY th	O Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED LICABLE EMS Agency Identifier		MALE Race WHITE ITED STATES Trapped/Extricated NOT TRAPPED EMS Run #	
	O02 Saf	Address 1320 SILVER DR BARABOO, WI 53913 , U Seat Position 3-FRONT SEAT-RIGHT S Helmet Use Eye Protection Injury S NO AP Ejected NOT EJECTED Medical Transport	y Crash SIDE (TRAI	NJURY th	O Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED		MALE Race WHITE ITED STATES Trapped/Extricated NOT TRAPPED	
	O02 Saf	Address 1320 SILVER DR BARABOO, WI 53913 , U Seat Position 3-FRONT SEAT-RIGHT S Helmet Use Eye Protection Injury Injury NO AP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital	y Crash SIDE (TRAI	NJURY th CTED/NOT APPL	O Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED LICABLE EMS Agency Identifier		MALE Race WHITE ITED STATES Trapped/Extricated NOT TRAPPED EMS Run #	
	O02 Saf	Address 1320 SILVER DR BARABOO, WI 53913 , U Fety Equipment Seat Position 3FRONT SEAT-RIGHT S Helmet Use Eye Protection Injury S NO AP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital Distracted By Distracted By	y Crash SIDE (TRAI Everity PPARENT II Ejection Pa NOT EJE	NJURY th CTED/NOT APPL	O Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED LICABLE EMS Agency Identifier		MALE Race WHITE ITED STATES Trapped/Extricated NOT TRAPPED EMS Run #	
	O02 Saf	Address 1320 SILVER DR BARABOO, WI 53913 , U Seat Position 3-FRONT SEAT-RIGHT S Helmet Use Eye Protection Injury Injury NO AP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital	y Crash SIDE (TRAI Everity PPARENT II Ejection Pa NOT EJE	NJURY th CTED/NOT APPL	O Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED LICABLE EMS Agency Identifier		MALE Race WHITE ITED STATES Trapped/Extricated NOT TRAPPED EMS Run #	
	O02 Saf	Address 1320 SILVER DR BARABOO, WI 53913 , U Fety Equipment Seat Position 3FRONT SEAT-RIGHT S Helmet Use Eye Protection Injury S NO AP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital Distracted By Distracted By	everity PPARENT II Ejection Pa NOT EJE	NJURY th CTED/NOT APPL	O Date of Birth Driver License Number STATE: WISCONSIN Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED LICABLE EMS Agency Identifier		MALE Race WHITE ITED STATES Trapped/Extricated NOT TRAPPED EMS Run #	

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Crash Date 10/19/2019

		Prior Action									
		Action									
	AL										
╘	INDIVIDUAL										
UNIT	≥										
	N N										
	=										
		Action Other						To/From School			
		Susn	ected Alcohol U	S A	Suspected Drug Use						
	L	Drug & Alcohol NO	ected Alcohol o	36	NO						
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results				
		TEST NOT GIVEN									
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results					
01	002	Drug Type									
		Individual Condition	ndividual Condition								
		APPEARED NORMAL									
	ļ	ndividual									
		Passenger PARKER W HART			Citations Issued 0		Sex MALE				
	AL	.,			Date of Birth		Race				
_	DO						WHITE				
UNIT	INDIVIDUAL	Address 1320 SILVER DR BARABOO, WI 53913 , US			Driver License Number						
		, , , , , ,									
	_	On D	uty Crash		Safety Equipment						
	Saf	ety Equipment									
		Seat Position			CHILD RESTRAINT SYSTEM - FORWARD FACING						
		4SECOND SEAT-LEF	T SIDE(MOTO	DRCYCLE/BI							
		Helmet Use			Helmet Compliance						
		Eye Protection			Tint Compliance						
01	003	Injury NO	Severity	N IIIDV	Airbag NON DEPLOYED						
	Ŭ	Ejected	Ejection Pat		NON DEI EOTED		Trapped/Extricated				
		NOT EJECTED	NOT EJE	CTED/NOT APPL	ICABLE		NOT TRAPPED				
		Medical Transport			EMS Agency Identifier		EMS Run #				
		NOT TRANSPORTED			Data of Davids		Time of Dooth				
		Hospital			Date of Death		Time of Death				
		Distra	acted By Source	•							
		Distracted By									
		Distracted By Action									
		Strikii	ng Unit #	Location							
		Non Motorist	-								
		Prior Action		=							

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Crash Date 10/19/2019

		Action							
	INDIVIDUAL								
I≡	ח								
L	Σ								
	5								
	=								
İ		Action Other						To/From School	
	,	Orug & Alcohol	Suspected Alcohol U	Jse	Suspected Drug Use NO				
l	_		140		_		T.,		
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results		
l		Drug Test Given		Drug Test Type		Drug Test Results			
		TEST NOT GIVEN		Drug Test Type		Drug Test Nesults			
l	3	Drug Type							
6	003	3 71							
		Individual Condition							
		APPEARED NORM	IAL						
	ı	Individual							
		Passenger	_		Citations Issued		Sex		
	Ļ	VIOLETTE M HAR	Т		0				
	INDIVIDUAL				Date of Birth		Race WHITE		
FIND		Address			Driver License Number		W		
5		1320 SILVER DR			Driver License Number				
	Z	BARABOO, WI 539	913 , US						
			On Duty Crash		Safety Equipment				
	Sat	ety Equipment							
		Seat Position			CHILD RESTRAINT SYSTEM - REAR FACING				
		6SECOND SEAT	-RIGHT SIDE						
		Helmet Use			Helmet Compliance				
ļ		Eye Protection			Tint Committee				
		Eye Protection			Tint Compliance				
l _	4		Injury Severity		Airbag				
2	004	Injury	NO APPARENT I	NJURY	NON DEPLOYED				
		Ejected	Ejection Pa	ith	<u> </u>		Trapped/Extricated		
		NOT EJECTED	NOT EJE	CTED/NOT APPL	ICABLE		NOT TRAPPED		
		Medical Transport	-		EMS Agency Identifier		EMS Run #		
		NOT TRANSPORT	ED						
		Hospital			Date of Death		Time of Death		
l			Distracted By Source	•					
		Distracted By	Distracted by Source	U					
		Distracted By Action							
			Striking Unit #	Location					
		Non Motorist							
		Prior Action							

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

LIND	INDIVIDUAL	Action Action Other							Γο/From School	
									Of Tom School	
	L	Orug & Alcohol NO	pected Alcohol U	se	Suspected Drug Use NO					
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	e	Alcohol Te	st Results			
		Drug Test Given TEST NOT GIVEN	Drug Test Typ			Drug Test R	esults			
01	004	Drug Type		<u> </u>						
		ndividual Condition								
		APPEARED NORMAL								
	Uni	t Summary								
		Status RANSIT			/ehicle Operating As Class O CLASS	Unit Type	Unit Type AUTOMOBILE			
02		cle Type					Operating .	As Endorseme	nts	
		ORT) UTILITY VEHICLE	corded	Total # Citations Issued	Tota	l Trailers	Total HazMa	t Types		
	2)	0		0		
⊥	Insui YES	rance?	Direction Of Tra		Pre CrashTire Speed Lim Mark 55			Total Lanes 2		
UNIT		Harmful Event: Collision Wi			Special Function NO SPECIAL FUNCTION		Motor Vehicle PLICABLE	Use		
		ic Way D-WAY, NOT DIVIDED			raffic Control OCONTROL		Traffic Control Inoperative/Missing NO			
	Surfa	асе Туре			Road Curvature	Road Grad	Road Grade			
		ACKTOP (BITUMINOUS) k Bus or HazMat			STRAIGHT	LEVEL	LEVEL			
	NO	N DUS UI I IAZIVIAL								
	'	Vehicle								
		License Plate Number AGK2629			Plate Type AUT - AUTOMOBILE	St WI	Country of I UNITED S			
7	~	Vehicle Identification Numb	per		Make	Year				
02	05	4M2YU56156KJ06780			MERCURY	2006				
		Color BLK - BLACK			Body Style UT - SPORT UTILITY \	/EHICLE	Bus Use NOT A BU	IS		
	쁘	Initial Contact Point			Vehicle Damage		_			
UNIT	EHICL	12FRONT Extent Of Damage DISABLING DAMAGE			1RIGHT FRONT COR	RNER, 11L	EFT FRONT CO)RNER, 12F	RONT	
	>	Towed Due To Damage			Vehicle Removed By					
		TOWED DUE TO DISA	BLING DAMA	GE	EVERETTS TOWING					
		What Driver Was Doing GOING STRAIGHT Driver Prior Action Other			Vehicle Factors NOT APPLICABLE					
		2.1101 Fiol Floridi Guiel								

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Crash Date 10/19/2019

LINO	VEHICLE	Driver Actions SPEED TOO FAST/0	COND	, FAILURE TO CONTROL						
05	02	Owner Name JODI M DESROCHE (608) 957-6416	ES		Owner Address 2003 MUSTANG DR PRAIRIE DU SAC, WI 53578 , US					
		Sequence Of Eve	ents							
	01	Event MOTOR VEH IN TRA		ORT						
	02	Event								
	03	Event								
	04	Event								
_	i	Policy Holder								
L		Insurance Company PROGRESSIVE-UNI	IVERS	AL-INSURANCE-COMP	Individual ADDISON DESROCHES					
		Individual								
		Driver			Citations Issued	Sex				
	Ļ	ADDISON MARIE DI (608) 217-6583	ESRO	CHES	0	FEMALE				
⊨	IDUA	(000) 217-0303			Date of Birth	Race WHITE				
LINO	INDIVIDUAL	Address 2003 MUSTANG DR PRAIRIE DU SAC, W		78 , US	Driver License Number STATE: WISCONSIN COUNTRY	STATE: WISCONSIN COUNTRY: UNITED STATES				
	Sat	fety Equipment	On Duty	Crash	Safety Equipment					
		Seat Position			SHOULDER & LAP BELT					
		1FRONT SEAT-LE	FT SI	DE (DRIVER/MOTORCY						
		Helmet Use			Helmet Compliance					
		Eye Protection			Tint Compliance					
05	900	In it was	njury Se	everity	Airbag					
٥	Ō		SUSPE	CTED MINOR INJURY	DEPLOYED-FRONT	17 1/5				
		Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APF	DI ICARI E	Trapped/Extricated NOT TRAPPED				
		Medical Transport		NOT ESECTED/NOT ATT	EMS Agency Identifier	EMS Run #				
		EMS GROUND			6000555					
		Hospital SAUK PRAIRIE HOS	SP		Date of Death	Time of Death				
	,	Distracted By	Distracte JNKNO	ed By Source DWN	•					
		Distracted By Action OTHER ACTION (LC	OOKIN	G AWAY FROM TASK ET	гс)					
		Non Motorist	Striking	Unit # Location						
		Prior Action		<u>.</u>						

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Crash Date 10/19/2019

TIND	INDIVIDUAL	Action							
		Action Other						To/From School	
		Drugg & Alaska	Suspect	ed Alcohol Use	Suspected Drug Use				
	L	Drug & Alcohol Alcohol Test Given	NO	Alachal Toot Tun	NO		Alcohol Test Results		
		TEST NOT GIVEN		Alcohol Test Typ	e		Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results			
05	005	Drug Type							
		Individual Condition							
		APPEARED NORMAL							
	ı	Individual							
		Passenger ISALYN ROSE GALLE			Citations Issued 0		Sex FEMALE		
	JAL	(608) 381-7403	(608) 381-7403				Race		
≒	<u> </u>						WHITE		
LIND	INDIVIDUAL	Address S8170 KASSNER ROAD PRAIRIE DU SAC, WI 53578 , US			Driver License Number STATE: WISCONSII	N COUNTRY: UN	IITED STATES		
	Sat	ety Equipment	On Duty	r Crash	Safety Equipment				
		Seat Position			SHOULDER & LAP BELT				
		3FRONT SEAT-R Helmet Use	IGHT S	SIDE (TRAIN ENGINEER	Helmet Compliance				
		Eye Protection			Tint Compliance				
05	900	Injury	Injury S	everity	Airbag				
	0	Ejected	SUSPE	ECTED MINOR INJURY Ejection Path	DEPLOYED-FRONT		Trapped/Extricated		
		NOT EJECTED		NOT EJECTED/NOT APP			NOT TRAPPED		
		Medical Transport EMS GROUND			EMS Agency Identifier 6000555		EMS Run #		
		Hospital SAUK PRAIRIE HO	SP		Date of Death		Time of Death		
				ed By Source			<u> </u>		
		Distracted By Action							
		Non Motorist	Striking	Unit # Location					
		Prior Action							

19-13031

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 10/19/2019

TINO	INDIVIDUAL	Action					
		Action Other Suspected Alcohol L NO	Jse	Suspected Drug Use			To/From School
•		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type			Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results		
05	900	Drug Type			•		
		Individual Condition					
		APPEARED NORMAL					