

6TL09H5JQR
19-13061

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 19-13061	Investigating Officer/Deputy DEPUTY S. MESSNER	
Crash Date 10/20/2019		Crash Time 03:30 PM	Date Arrived 10/20/2019	Time Arrived 04:20 PM	
Date Notified 10/20/2019		Time Notified 03:35 PM	Total Units 01	Total Injured 02	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	<p>Not to scale</p> <p>Sth 23 south of Herritz Rd</p>	Reconstruction By
		Photos By DEP. S. MESSNER
		Additional Information NONE, PHOTOS

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

ON SUNDAY, OCTOBER 20, 2019, AT APPROXIMATELY 3:30 PM, A SEDAN, BEARING WISCONSIN REGISTRATION PLATE #728WXL, AND BEING OPERATED BY THE OWNER, CAMILLE M. KULKA, WITH PASSENGERS OF WENDY V. PAULSEN AND JUDITH E. ERICKSON, WAS NORTHBOUND ON STH 23. A DEER CAME OFF OF THE ROADWAY IN FRONT OF UNIT 1 CAUSING UNIT 1 TO STRIKE THE DEER. UNIT 1 WAS ABLE TO CONTINUE OFF OF THE ROADWAY ONTO THE SHOULDER. UNIT 1 SUSTAINED DISBALING DAMAGE. BOTH FRONT AIRBAGS WERE DEPLOYED CAUSING BRUISING TO THE HANDS OF THE DRIVER AND THE PASSENGER, WENDY. THE DEER CAME TO REST IN THE EAST DITCH OF STH 23. ALL OCCUPANTS DENIED NEEDING MEDICAL ATTENTION. THE DRIVER COORDINATED STEVE'S TOWING WITH ROADSIDE SERVICE THROUGH HER INSURANCE COMPANY, MERICAN FAMILY INSURANCE, TO REMOVE THE VEHICLE. A RESCUE PARTY WAS COORDINATED AND CAME TO PICK UP THE VEHICLE OCCUPANTS. STEVE'S AUTO REMOVED THE VEHICLE.

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Location

ON STH23 EB 867 FT S OF HERRITZ RD IN THE TOWN OF REEDSBURG IN SAUK COUNTY	Latitude 43.481432597	Longitude -90.013893747
	X Coordinate 256263.015625	Y Coordinate 4818692.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event NON DOMESTICATED ANIMAL (ALIVE)		First Harmful Event Location ON ROADWAY	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT		Light Condition DAYLIGHT	
Road Surface Condition(s) DRY		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) CLEAR			
Animal Type DEER		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

UNIT	01	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE			
		Vehicle Type PASSENGER CAR					Operating As Endorsements		
		Total Occs 3	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0			
		Insurance? YES	Direction Of Travel NORTHBOUND	<input checked="" type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2			
		Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE)		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE			
		Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO			
		Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade UPHILL			
		Truck Bus or HazMat NO							
		VEHICLE	01	Vehicle					
				License Plate Number 728WXL	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES		
Vehicle Identification Number 5J6RM4H7XEL090519	Make HONDA			Year 2014	Model CR-V EX-L				
Color BLU - BLUE	Body Style UT - SPORT UTILITY VEHICLE			Bus Use NOT A BUS					
Initial Contact Point 12--FRONT	Vehicle Damage								
Extent Of Damage DISABLING DAMAGE	1--RIGHT FRONT CORNER, 11--LEFT FRONT CORNER, 12--FRONT								
Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By STEVES AUTO SERVICE								

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UNIT VEHICLE	What Driver Was Doing GOING STRAIGHT	Vehicle Factors	
	Driver Prior Action Other	NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION		
01 01	Owner Name CAMILLE MARY KULKA (651) 472-2518	Owner Address 282 ARBOR HILLS DR HOULTON, WI 54082 , US	
	Sequence Of Events		
01 02 03 04	Event NON DOMESTICATED ANIMAL (ALIVE)		
	Event		
	Event		
	Event		
UNIT	Policy Holder		
	Insurance Company AMERICAN-FAMILY-INS-CO	Individual CAMILLE KULKA	
UNIT INDIVIDUAL	Individual		
	Driver CAMILLE MARY KULKA (651) 472-2518	Citations Issued 0	Sex FEMALE
		Date of Birth	Race WHITE
	Address 282 ARBOR HILLS DR HOULTON, WI 54082 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
01 001	Safety 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 POSSIBLE INJURY	Airbag DEPLOYED-FRONT
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #
	Hospital	Date of Death	Time of Death
	Distracted By	Distracted By Source	
	Distracted By Action		
	Non Motorist	Striking Unit #	Location
Prior Action			

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UNIT INDIVIDUAL	Action		
	Action Other		To/From School
	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 JUDITH E ERICKSON (512) 484-4396	Citations Issued 0	Sex FEMALE
	Address 805 WILDWOOD RD APT 209 MAHTOMEDI, MN 55115 , US		Date of Birth Race WHITE
Driver License Number STATE: MINNESOTA COUNTRY: UNITED STATES			
UNIT INDIVIDUAL	Safety Equipment	On Duty Crash	Safety Equipment SHOULDER & LAP BELT
	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 APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #
	Hospital	Date of Death	Time of Death
	Distracted By	Distracted By Source	
	Distracted By Action		
UNIT INDIVIDUAL	Non Motorist	Striking Unit #	Location
	Prior Action		

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UNIT INDIVIDUAL	Action		
	Action Other		To/From School
	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 WENDY V PAULSEN (651) 332-6180	Citations Issued 0	Sex FEMALE
	Address 14070 SAINT CROIX TRL N STILLWATER, MN 55082 , US		Date of Birth Race WHITE
Driver License Number STATE: MINNESOTA COUNTRY: UNITED STATES			
UNIT INDIVIDUAL	Safety Equipment	On Duty Crash	Safety Equipment SHOULDER & LAP BELT
	Seat Position 3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER		
	Helmet Use	Helmet Compliance	
	Eye Protection	Tint Compliance	
	Injury	Injury Severity POSSIBLE INJURY	Airbag DEPLOYED-FRONT
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #
	Hospital	Date of Death	Time of Death
	Distracted By	Distracted By Source	
	Distracted By Action		
UNIT INDIVIDUAL	Non Motorist	Striking Unit #	Location
	Prior Action		

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UNIT	INDIVIDUAL	Action				
		Action Other		To/From School		
	01	003	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			