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	Oocument #	Agency 19-134	Crash Number 158	0 0	Investigating Officer/Deputy DEPUTY E. KNULL		
MO	Crash Date 10/29/2019		Crash Time 03:56 PM		Date Arrived Time Arrived 10/29/2019 04:08 PM					
0B4X4M	Date Notified 10/29/2019		Time Notified 03:56 PM		Total U 02	nits	Total Injured 02	, I		
.0 B	On Emergency Hi		and Run	Lane Closu	re	Work Zone	Trailer or	Trailer or Towed Reporting Threshold		
6TL	Government Property		Active Sc	hool Zone	School NO	Bus Related	Tags	S		
	✓ Reportable		Crash Type DT4000 (STA	NDARD CRASH)		Amended			Secondary Crash

Description
Diagram

County Rd W

not to scale

Reconstruction By

Photos By

Additional Information **NONE**

UNIT 1 WB ON CTH STOPPED AT STOP SIGN AND PROCEEDED WB AND DID NOT SEE UNIT 2 AND WAS STRUCK IN THE FRONT PASSENGER SIDE. UNIT 2 SB ON STH 23 AND STATED UNIT 1 STOPPED AT STOP SIGN AND PULLED OUT IN FRONT OF HER. SHE STATED SHE COULD NOT AVOID COLLISION. OPERATOR OF UNIT 2 SUSTAINED INJURY AND WAS TRANSPORTED BY REEDSBURG EMS. PASSENGER OF UNIT 1 COMPLAINED OF HEAD PAIN AND REFUSED EMS TRANSPORT. NO OTHER INJURIES REPORTED. UNIT WAS SUSTAINED DISABLING DAMAGE AND WAS TOWED BY STEVES AND UNIT 2 SUSTAINED DISABLING DAMAGE AND WAS TOWED BY GEORGES. OPERATOR OF UNIT 1 CITED FOR FAILURE TO YIELD FROM STOP SIGN.

1 of 9

WISCONSIN MOTOR VEHICLE CRASH REPORT

L	.oc	ation							
_		CTHW SB			Latitude			Longitud	е
2	27 F	TE			43.395577	7039		-90.036	
		FRIENDSHIP RD			X Coordinat	ito		Y Coordi	inate
		HE TOWN OF WESTFIE	≣LD		254096.09375 4809223				
1	IN S	AUK COUNTY			Structure Ty				
					NO STRU				
C	ra	sh Scene			•				
П	First	Harmful Event			First Harmfu	ul Event Lo	cation		
H	MO	TOR VEH IN TRANSPO	RT		ON ROAD				
	_	ner of Collision			Light Condi				
П	08	FRONT TO SIDE			DAYLIGH				
Ь	Road	d Surface Condition(s)			Roadway F	actor(s)			
	DRY					()			
Ľ	ואט								
1	Envi	ronment Factor(s)							
H	NON	NE			NONE				
_	Mea.	ther Condition(s)							
		` ,							
- 1	CLE	AR							
1	Anim	nal Type		Relation To Trafficway			1		
					TRAFFICWAY - ON ROAD				
(Cras	h Classification - Location			Crash Class	Crash Classification - Jurisdiction			
ļ	PUE	BLIC PROPERTY			NO SPECIAL JURISDICTION				
Ī	Triba	l Land			Access Cor	cess Control Special Study			Special Study
					NO CONT	ΓROL			
١	Withi	in Interchange Area J	Junction Location	Intersecti	on Type				
ļ.	NO	Į I	NTERSECTION	FOUR-V	VAY INTERS	SECTION			
	1 !			•					
U	JNII	Summary ===							
		t Summary Status		Vehicle Operating As 0	Classification		Unit Type		
U	Unit			Vehicle Operating As 0	Classification		Unit Type AUTOMOE	BILE	
I	Unit i	Status			Classification				nents
 - 	Unit IN T Vehic	Status RANSIT	:		Classification		AUTOMOE		nents
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19-13458

WISCONSIN MOTOR VEHICLE CRASH REPORT

		What Driver Was Doing GOING STRAIGHT	Vehicle Factors			
		Driver Prior Action Other	NOT APPLICABLE			
		Driver Actions				
_	LE	FAILED TO YIELD RIGHT-OF-WAY				
LNO	VEHICL					
	VE					
		Owner Name	L Courses Address			
		Owner Name KALEN THOMAS DULEY	Owner Address E2727 SMYTHE HOLLOW RD			
5	01	(608) 434-6723	HILLPOINT, WI 53937 , US			
		Sequence Of Events Event				
	01	MOTOR VEH IN TRANSPORT				
	02	Event				
		Event				
	03					
	04	Event				
		Policy Holder				
١		Insurance Company	Treer r			
L		PROGRESSIVE-DIRECT-INSURANCE-CO	Individual KALEN DULEY			
		ndividual				
	Ī	Driver	Citations Issued	Sex		
	7	KALEN THOMAS DULEY	1	MALE		
	INDIVIDUAL	(608) 434-6723	Date of Birth	Race WHITE		
EN O	VID	Address	Driver License Number			
>	N	E2727 SMYTHE HOLLOW RD	STATE: WISCONSIN COUNTRY: UN	HTED STATES		
	_	HILLPOINT, WI 53937 , US	CTATE. WIGGOROW GOOWINT. ONLIED GTATES			
		On Duty Crash	Safety Equipment			
	Sat	ety Equipment	SHOULDER & LAP BELT Helmet Compliance			
		Seat Position 1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY				
		Helmet Use				
		Eye Protection	Tint Compliance			
5	001	Injury Severity	Airbag			
0	ŏ	Injury NO APPARENT INJURY Ejected Ejection Path	DEPLOYED-COMBINATION	Trapped/Extricated		
		NOT EJECTED NOT EJECTED/NOT APP	PLICABLE	NOT TRAPPED		
		Medical Transport	EMS Agency Identifier	EMS Run #		
		NOT TRANSPORTED	Data of Dooth	Time of Death		
		Hospital	Date of Death	Time of Death		
	ļ	Distracted By Source NOT APPLICABLE (NOT DISTRA	ACTED)			
		Distracted By Action	ACIED)			
		NOT DISTRACTED				
		Non Motorist Striking Unit # Location				
		Prior Action				

WISCONSIN MOTOR VEHICLE CRASH REPORT

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		Action									
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	INDIVIDUAL										
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UNIT											
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	Z										
		Action Other						To/From School			
		Action Other						10/1101113011001			
		Sus	pected Alcohol Use	9	Suspected Drug Use						
		Drug & Alcohol No			NO						
		Alashal Taat Oissan		Al			Alaskal Task Dassiles				
		Alcohol Test Given	1	Alcohol Test Type			Alcohol Test Results				
		TEST NOT GIVEN									
		Drug Test Given		Drug Test Type		Drug Test Results					
		TEŠT NOT GIVEN									
7	001	Drug Type									
0	ō										
		Individual Condition									
		APPEARED NORMAL									
	ı	ndividual									
		Passenger			Citations Issued		Sex				
		JENNIFER M STABNO	OW .		0		FEMALE				
	7	(608) 434-6723									
	^				Date of Birth		Race				
⊢	◘						WHITE				
	INDIVIDUAL	Address			Driver License Number						
\supset		E2727 SMYTHE HOLL	.OW RD								
	Z	HILLPOINT, WI 53937			STATE: WISCONSIN COUNTRY: UNITED STATES						
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		On I	Duty Crash		Safety Equipment						
	Saf	ety Equipment									
		Seat Position			SHOULDER & LAP BELT						
					Helmet Compliance						
		3FRONT SEAT-RIGH	IT SIDE (TRAIN	ENGINEER							
		Helmet Use									
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		Eye Protection			T: . O . I:						
		Eye Protection			Tint Compliance						
_	005	Injur	ry Severity		Airbag						
6	8	Injury _{PO:}	SSIBLE INJURY	,	DEPLOYED-COMBII	NATION					
		Ejected	Ejection Path				Trapped/Extricated				
		-									
		NOT EJECTED	NOT EJEC	TED/NOT APPL			NOT TRAPPED				
		Medical Transport			EMS Agency Identifier		EMS Run #				
		NOT TRANSPORTED									
		Hospital			Date of Death		Time of Death				
		Поѕрна			Date of Death		Time of Death				
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		Distracted By Source									
		Distracted By									
		Distracted By Action									
		Distraction by Action									
		Strik	king Unit #	Location							
		Non Motorist									
		Prior Action									

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 10/29/2019

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		Action						
	INDIVIDUAL							
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	Z							
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		Action Other						To/From School
		Is	uspected Ale	cohol Use	Suspected Drug Use			L
		Drug & Alcohol N	10		NO			
	_	_			_			
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results	
		TEST NOT GIVEN						
				Drug Toot Type		D T (D)		
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
		TEST NOT GIVEN						
	7	Drug Type						
7	002	9 -)						
	0							
		Individual Condition						
		APPEARED NORMA	AL .					
		ndividual						
		Passenger			Citations Issued		Sex	
		LIAM R DULEY			0		MALE	
	INDIVIDUAL	(608) 434-6723			Date of Birth		Race	
	J				Date of Biltin		WHITE	
UNIT	₽∣						*******	
Z	≥	Address						
\supset	₽	E2727 SMYTHE HOL	LLOW RD					
	Z	HILLPOINT, WI 5393	37 , US					
		0	n Duty Cras	h	Safety Equipment			
	Saf	ety Equipment						
		Seat Position			OLIU D DEGEDANIE	OVOTEM FORM	VADD FACING	
					CHILD RESTRAINT	STSTEM - FORV	VARD FACING	
		4SECOND SEAT-L	EFT SIDE	(MOTORCYCLE/BI				
		Helmet Use			Helmet Compliance			
					Tomot compilation			
		E D : :						
		Eye Protection			Tint Compliance			
	ຕ່	In	jury Severity	/	Airbag			
0	003	Iniury N		ENT INJURY	NON DEPLOYED			
		3 - 3 N	IO AFFAR	ENTINGORI	NON DEFECTED			
		Ejected	Ejec	tion Path			Trapped/Extricated	
		NOT EJECTED	NO.	ΓEJECTED/NOT APPL	ICABLE		NOT TRAPPED	
		Medical Transport	I .		EMS Agency Identifier		EMS Run #	
		NOT TRANSPORTE	D		Livio rigorioy idonumor		LINIO ITAII II	
			ט		ļ			
		Hospital			Date of Death		Time of Death	
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		_ In	istracted By	Source	1		<u> </u>	
		Distracted By	.c.racica Dy					
		Distracted By Action						
		- 0	triking Unit #	Location				
		Non Motorist	unking Unit #	Location				
		Prior Action						

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Crash Date 10/29/2019

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		Action Other					To/From School				
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		Drug & Alcohol NO	ed Alcohol Ose	NO							
	_			140							
		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 rest type		Drug Test Nesults						
0	003	Drug Type									
0	ŏ										
		Individual Condition									
		APPEARED NORMAL									
		u i build namme									
		ndividual									
	. !										
		Passenger		Citations Issued		Sex					
	_	PAIGHTON M DULEY		0		FEMALE					
	INDIVIDUAL	(608) 434-6723		Date of Birth		Race					
	\supset			Date of Differ		WHITE					
UNIT											
5	\leq	Address		Driver License Number							
_	닐	E2727 SMYTHE HOLLOW	RD								
	=	HILLPOINT, WI 53937 , US	5								
	ļ	On Duty	Crash	Safety Equipment							
	Saf	ety Equipment	Ciadii	Jaiety Equipment							
	-										
		Seat Position		CHILD RESTRAINT SYSTEM - FORWARD FACING							
		6SECOND SEAT-RIGHT	SIDE	Helmet Compliance							
		Helmet Use									
		Eye Protection		Tint Compliance							
				Tint Compilance							
	_	Hairma Co	v o situ	A irla a a							
6	004	Injury Se	eventy	Airbag							
_	0	NO API	PARENT INJURY	NON DEPLOYED							
		Ejected	Ejection Path			Trapped/Extricated					
		NOT EJECTED	NOT EJECTED/NOT APPL	ICABLE		NOT TRAPPED					
		Medical Transport		EMS Agency Identifier		EMS Run #					
		NOT TRANSPORTED		Livio Agency Identifier		LIVIO IXUII #					
		Hospital		Date of Death		Time of Death					
		Distracted By Source									
		Distracted By									
		Distracted By Action									
		10:3:	I lois # II:								
		Non Motorist Striking l	Unit # Location								
		Prior Action									
	-										

WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT	INDIVIDUAL	Action Other To/From School										
		Action Other										To/From School
	I	Drug & Alcohol Suspected Alcohol Use NO Alcohol Test Given Alcohol		Alcohol Test T	ype	Suspected Drug Use NO			Alcohol Tes	t Results		
		TEST NOT GIVEN										
		Drug Test Given TEST NOT GIVEN			Drug Test Type	pe Drug Test Results						
01	004	Drug Type	Drug Type									
		Individual Condition										
		APPEARED NORMAL										
	,	Violations										
	5	UTC Number BB955229	Issu 00 1		Statute Number 346.18(3)		Description FAIL/YIELD RIGHT/V	VAY F	ROM STO	P SIGN		
	Unit	Summary •										
	Unit Status					Ve	hicle Operating As Classi	fication	1	Unit Type		
		RANSIT				D	CLASS			AUTOMOBILE		
02	Vehicle Type								Operating A	s Endorsen	nents	
0		SENGER CAR		Train/Bus #	Pacardad	Ιτο	Total # Citations Issued Total Traile			lers Total HazMat Types		
	1	rance?		Direction Of		0			0 Speed Lim	0		
UNIT	YES		n Wi	SOUTHBO		Sn	Pre CrashTire Mark Decial Function		55	2 Emergency Motor Vehicle Use		
D	MO	TOR VEH IN TRANS				N	NO SPECIAL FUNCTION			NOT APPLICABLE Traffic Control Inoperative/Missing		
		D-WAY, NOT DIVIDE	ΕD				NO CONTROL NO				ioi iiiopeiaii	ve/iviissii ig
		асе Туре				_	Road Curvature			Road Grade		
		CKTOP (BITUMING	OP (BITUMINOUS)			STRAIGHT UPHILL						
	Truc NO	k Bus or HazMat										
	1	Vehicle										
		License Plate Number					late Type		St	Country of Is		
		598UTG Vehicle Identification N	Jumh	ner .			AUT - AUTOMOBILE Take		WI Year	Model	IAIES	
02	02	1G6KD57Y88U126					ADILLAC		2008	DTS		
		Color RED - RED					ody Style D - 4DR			Bus Use NOT A BU	s	
	Щ	Initial Contact Point				٧	ehicle Damage		•			
UNIT	EHICL	12FRONT Extent Of Damage				1:	2FRONT					
	Z	DISABLING DAMA				ļ.,						
		Towed Due To Damag	-	BLING DA	MAGE		ehicle Removed By SEORGES AUTO BOD	Υ				
		What Driver Was Doin		O DAI			ehicle Factors	•				
		GOING STRAIGHT	•									
		Driver Prior Action Oth	ner] N	OT APPLICABLE					

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 10/29/2019

LINO	VEHICLE	Driver Actions NO CONTRIBUTING AC	TION							
05	02	Owner Name MARGARET E SPRECHI (608) 604-1951	ER		Owner Address E3686 US HIGHWAY 14 AND 60 SPRING GREEN, WI 53588 , US					
		Sequence Of Events								
	01	Event MOTOR VEH IN TRANSF								
	02	Event								
	03	Event								
	04	Event								
_	i	Policy Holder								
LNO		Insurance Company			Individual					
١		AMERICAN-FAMILY-INS-CO			MARGARET SPRECH	HER				
		Individual								
		Driver MARGARET E SPRECHI	ED		Citations Issued		Sex			
	AL	(608) 604-1951	EK		0 Date of Birth		FEMALE Race			
_	DO,				Date of Billi		WHITE			
	Ξ	Address			Driver License Number					
٠	INDIVIDUAL	E3686 US HIGHWAY 14 AND 60 SPRING GREEN, WI 53588 , US			STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sat	On Dui	ty Crash		Safety Equipment					
	Ju.	Seat Position			SHOULDER & LAP BELT					
		1FRONT SEAT-LEFT S	IDE (DRIVE	R/MOTORCY	ONOCESER & EAR BEET					
		Helmet Use	•		Helmet Compliance					
		Eye Protection			Tint Compliance					
	2	Injury S	Severity		Airbag					
05	002	Injury POSS	BIBLE INJU	RY	DEPLOYED-FRONT					
		Ejected	Ejection Pa	ath	1		Trapped/Extricated			
		NOT EJECTED	NOT EJE	CTED/NOT APP			NOT TRAPPED			
		Medical Transport EMS GROUND			EMS Agency Identifier 6001024		EMS Run #			
		Hospital			Date of Death		Time of Death			
		REEDSBURG AREA ME	D CTR							
	,	Distracted By NOT	ted By Sourc	e LE (NOT DISTRA	CTED)					
		Distracted By Action NOT DISTRACTED								
		Non Motorist Striking	g Unit #	Location						
		Prior Action		•						

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 10/29/2019

		Action					
		Action					
	4						
_)						
ş	Ω						
LIND	5						
_	INDIVIDUAL						
	Z						
		Action Other					To/From School
		7.646.7 64.76					10,110 0000.
		Commented Alexandria	1	Conservated David Har			
	,	Drug & Alcohol NO	Jse	Suspected Drug Use NO			
	L	orug & Alconol No		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	9		Drug Tool Roodilo		
02	005	Drug Type					
0	ŏ						
		Individual Condition					
		APPEARED NORMAL					