#### 6TL09426TB

19-14533

### **WISCONSIN MOTOR VEHICLE CRASH REPORT**

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

|                   | Document Number Override  | Primary Crash I        | Primary Crash Document # Agency 19-145 |              |                                     |   |                | restigating Officer/Deputy EPUTY A. KULAS |                         |                 |  |
|-------------------|---|------------------------|--|--------------|-------------------------------------|---|----------------|---|-------------------------|-----------------|--|
| ы                 | Crash Date<br>11/23/2019  | Crash Time<br>11:50 PM |  |              | Date Arrived                        |   | Time           | Time Arrived                              |                         |                 |  |
| <b>6TL09426TB</b> | Date Notified   | Time Notified          |  | Total Ur     | nits                                |   |                | l Injured                                 | Total Killed            |                 |  |
| 942               | 11/23/2019  | 11:51 PM               |  | 01           |                                     |   | 00             |   | 00                      | Reporting       |  |
| F0                | On Emergency  | Hit and Run            | Lane Closu                             |              |                                     | rk Zone   |                | Trailer or T                              | owed                    | Threshold       |  |
| <b>6T</b>         | Government Property   | chool Zone             | School Bus Related NO                  |              |                                     | Tags  | Tags           |   |                         |                 |  |
|                   | Crash Type NON-DOMESTICATED ANIMAL W/ NO IN   |                        |  |              | IO INJUR                            | RY  |                | Amended                                   |                         | Secondary Crash |  |
|                   | I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report. |                        |  |              |                                     |   |                |   |                         |                 |  |
| ĺ                 | Location  |                        |  |              |                                     |   |                |   |                         |                 |  |
|                   | ON CTHBD SB<br>1085 FT N  |                        |  |              |                                     | Latitude<br>43.488118868                              |                |   | Longitude -89.775282001 |                 |  |
|                   | OF TERRYTOWN RD IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY                                 |                        |  |              | X Coordinate<br>275585.4375         |   |                |   | Y Coordinate 4818764    |                 |  |
|                   |   |                        |  |              |                                     | Structure Type NO STRUCTURE                           |                |   |                         |                 |  |
| (                 | Crash Scene   |                        |  |              |                                     |   |                |   |                         |                 |  |
|                   | First Harmful Event   |                        |  |              |                                     | First Harm  | ful Event Lo   | ocation                                   |                         |                 |  |
|                   | NON DOMESTICATED A  | NIMAL (ALIVE)          |  |              |                                     | ON ROADWAY  |                |   |                         |                 |  |
|                   | Manner of Collision   | a-                     | _                                      |              |                                     | Light Condition                                       |                |   |                         |                 |  |
|                   | NO COLLISION W/VEHI   | CLE IN TRANSPOR        | T                                      |              |                                     |   |                |   |                         |                 |  |
|                   | Road Surface Condition(s)   |                        |  |              |                                     | Roadway Factor(s)                                     |                |   |                         |                 |  |
|                   | Environment Factor(s)   |                        |  |              |                                     |   |                |   |                         |                 |  |
|                   | . ,   |                        |  |              |                                     |   |                |   |                         |                 |  |
|                   | Weather Condition(s)  |                        |  |              |                                     |   |                |   |                         |                 |  |
|                   | weather Condition(s)  |                        |  |              |                                     |   |                |   |                         |                 |  |
|                   | Animal Type   |                        |  |              |                                     | Relation To Trafficway                                |                |   |                         |                 |  |
|                   | DEER  |                        |  |              |                                     | TRAFFICWAY - ON ROAD                                  |                |   |                         |                 |  |
|                   | Crash Classification - Location   |                        |  |              | Crash Classification - Jurisdiction |   |                |   |                         |                 |  |
|                   | PUBLIC PROPERTY Tribal Land   |                        |  |              |                                     | NO SPECIAL JURISDICTION  Access Control Special Study |                |   |                         |                 |  |
|                   | Tilbai Laifu  |                        |  |              |                                     | Access Control  |                |   |                         |                 |  |
| i                 | Jnit Summary  |                        |  |              |                                     |   |                |   |                         |                 |  |
|                   |   |                        |  | icle Opera   | ating As C                          | lassification   |                | Unit Type                                 |                         |                 |  |
|                   | IN TRANSIT  |                        |  | D CLASS      |                                     |   | AUTOMOBILE     |   |                         |                 |  |
| 01                | Vehicle Type  |                        |  |              | Operating As Endorsements           |   |                |   | nents                   |                 |  |
| 0                 | (SPORT) UTILITY VEHICLE  Total Occs   |                        |  |              |                                     |   | Total Trail    |   | Total Harl              | Mat Types       |  |
|                   | Total Occs 1  | Traill/Bus # Necol     | 0                                      | ai # Citatio | ns issued                           |   | 0              | CIS                                       | 0                       | iviat Types     |  |
|                   | Insurance?  | Direction Of Trave     |  | Pre C        |                                     |   | _              |   |                         | Total Lanes     |  |
| ⊢                 | YES   | SOUTHBOUND             |  |              | lark                                |   |                |   |                         |                 |  |
| UNIT              | Most Harmful Event: Collision With Special Function   |                        |  |              | Emergency Motor Vehicle Use         |   |                | cle Use                                   |                         |                 |  |
|                   | NON DOMESTICATED ANIMAL (ALIVE)  NO SPECIAL FUNC  |                        |  |              | , I ION                             |   | NOT APPLICABLE |   |                         |                 |  |
|                   | Traffic Way Traffic Control   |                        |  |              | ol .                                |   |                | Traffic Control Inoperative/Missing       |                         |                 |  |
|                   | Surface Type Road Curvature   |                        |  |              | Road Grade                          |   |                |   |                         |                 |  |
|                   | Truck Bus or HazMat   |                        |  |              |                                     |   | 1              |   |                         |                 |  |
|                   | NO  |                        |  |              |                                     |   |                |   |                         |                 |  |
|                   | Vehicle   |                        |  |              |                                     |   |                |   |                         |                 |  |

1 of 3

Crash Time 11:50 PM

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

|      |               | License Plate Number   |                  | Plate Type   | St            | Country of Issuance                                     |  |  |
|------|---------------|--|------------------|--|---------------|---|--|--|
| 10   |               | AGF6960  | AUT - AUTOMOBILE | WI   | UNITED STATES |   |  |  |
|      | _             | Vehicle Identification Number  | Make             | Year   | Model         |   |  |  |
|      | 01            | 1FMCU0D74AKC62310  |                  | FORD   | 2010          | ESCAPE XLT  |  |  |
|      |               | Color  |                  | Body Style Bus Use   |               |   |  |  |
|      |               | BLK - BLACK  |                  | UT - SPORT UTILITY VEHICLE NOT A BUS   |               |   |  |  |
|      | VEHICLE       | Initial Contact Point  |                  | Vehicle Damage   |               |   |  |  |
| L    |               | 12FRONT  |                  | 12FRONT  |               |   |  |  |
| 5    |               | Extent Of Damage   |                  |  |               |   |  |  |
|      |               | DISABLING DAMAGE   |                  |  |               |   |  |  |
|      |               | Towed Due To Damage  |                  | Vehicle Removed By   |               |   |  |  |
|      |               | TOWED DUE TO DISABLING DAMAG   |                  | BILLS TOWING   |               |   |  |  |
|      |               | What Driver Was Doing  |                  | Vehicle Factors  |               |   |  |  |
|      |               |  |                  |  |               |   |  |  |
|      |               | Driver Prior Action Other  |                  |  |               |   |  |  |
|      |               |  |                  |  |               |   |  |  |
|      |               | Driver Actions   |                  |  |               |   |  |  |
| _    | VEHICLE       | NO CONTRIBUTING ACTION   |                  |  |               |   |  |  |
| LNO  | IC            |  |                  |  |               |   |  |  |
| 5    | ᇤ             |  |                  |  |               |   |  |  |
|      | >             |  |                  |  |               |   |  |  |
|      |               |  |                  |  |               |   |  |  |
|      |               | Owner Name   |                  | Owner Address  |               |   |  |  |
| 5    | 01            |  |                  |  |               |   |  |  |
|      | )             |  |                  |  |               |   |  |  |
|      |               |  |                  |  |               |   |  |  |
| ╘    | Policy Holder |  |                  |  |               |   |  |  |
| UNIT |               | Insurance Company  | Individual       |  |               |   |  |  |
| ا د  |               | AMERICAN-FAMILY-INS-CO   |                  | ERIKA KIPPER   |               |   |  |  |
|      | ı             | ndividual  |                  |  |               |   |  |  |
|      |               | Driver   | Driver           |  |               | Sex   |  |  |
|      | _             |  |                  | 0 FEMALE   |               |   |  |  |
|      | _             | ERIKA C KIPPER   |                  | 0  |               | FEMALE  |  |  |
|      | JAL           | ERIKA C KIPPER<br>(920) 728-0117   |                  | <b>0</b> Date of Birth   |               | Race  |  |  |
| ⊨    | IDUAL         |  |                  |  |               |   |  |  |
| TINC | IVIDUAL       | (920) 728-0117  Address  |                  |  |               | Race  |  |  |
| LINO | NDIVIDUAL     | (920) 728-0117  Address 324 7TH ST   |                  | Date of Birth  Driver License Number   | INTRY: II     | Race WHITE  |  |  |
| TINO | INDIVIDUAL    | (920) 728-0117  Address  |                  | Date of Birth  | JNTRY: U      | Race WHITE  |  |  |
| TINO | INDIVIDUAL    | (920) 728-0117  Address 324 7TH ST PRAIRIE DU SAC, WI 53578, US  |                  | Date of Birth  Driver License Number  STATE: WISCONSIN COL   | JNTRY: U      | Race WHITE  |  |  |
| LIND |               | (920) 728-0117  Address 324 7TH ST PRAIRIE DU SAC, WI 53578 , US   |                  | Date of Birth  Driver License Number   | JNTRY: U      | Race WHITE  |  |  |
| TINO |               | Address 324 7TH ST PRAIRIE DU SAC, WI 53578, US  Fety Equipment On Duty Crash  |                  | Date of Birth  Driver License Number  STATE: WISCONSIN COL  Safety Equipment   |               | Race WHITE  |  |  |
| LIND |               | (920) 728-0117  Address 324 7TH ST PRAIRIE DU SAC, WI 53578 , US   |                  | Date of Birth  Driver License Number  STATE: WISCONSIN COL   |               | Race WHITE  |  |  |
| LIND |               | Address 324 7TH ST PRAIRIE DU SAC, WI 53578 , US  fety Equipment Seat Position  On Duty Crash  |                  | Date of Birth  Driver License Number  STATE: WISCONSIN COU  Safety Equipment  SHOULDER & LAP BELT  |               | Race WHITE  |  |  |
| TIND |               | Address 324 7TH ST PRAIRIE DU SAC, WI 53578, US  Fety Equipment On Duty Crash  |                  | Date of Birth  Driver License Number  STATE: WISCONSIN COL  Safety Equipment   |               | Race WHITE  |  |  |
| LIND |               | Address 324 7TH ST PRAIRIE DU SAC, WI 53578 , US  Fety Equipment  Seat Position  Helmet Use  |                  | Date of Birth  Driver License Number  STATE: WISCONSIN COL  Safety Equipment  SHOULDER & LAP BELT  Helmet Compliance   |               | Race WHITE  |  |  |
| TINO |               | Address 324 7TH ST PRAIRIE DU SAC, WI 53578 , US  fety Equipment Seat Position  On Duty Crash  |                  | Date of Birth  Driver License Number  STATE: WISCONSIN COU  Safety Equipment  SHOULDER & LAP BELT  |               | Race WHITE  |  |  |
|      | Sat           | Address 324 7TH ST PRAIRIE DU SAC, WI 53578 , US  Fety Equipment Seat Position  Helmet Use  Eye Protection   |                  | Date of Birth  Driver License Number  STATE: WISCONSIN COL  Safety Equipment  SHOULDER & LAP BELT  Helmet Compliance   |               | Race WHITE  |  |  |
|      | Sat           | Address 324 7TH ST PRAIRIE DU SAC, WI 53578 , US  Fety Equipment Seat Position  Helmet Use  Eye Protection  Injury Severity  | TIIIBA           | Date of Birth  Driver License Number  STATE: WISCONSIN COL  Safety Equipment  SHOULDER & LAP BELT  Helmet Compliance   |               | Race WHITE  |  |  |
|      |               | Address 324 7TH ST PRAIRIE DU SAC, WI 53578 , US  Fety Equipment Seat Position  Helmet Use  Eye Protection  Injury Injury NO APPARENT IN   |                  | Date of Birth  Driver License Number  STATE: WISCONSIN COL  Safety Equipment  SHOULDER & LAP BELT  Helmet Compliance   |               | Race WHITE  NITED STATES                                |  |  |
|      | Sat           | Address 324 7TH ST PRAIRIE DU SAC, WI 53578 , US  Fety Equipment Seat Position  Helmet Use  Eye Protection  Injury Severity  |                  | Date of Birth  Driver License Number  STATE: WISCONSIN COL  Safety Equipment  SHOULDER & LAP BELT  Helmet Compliance   |               | Race WHITE  |  |  |
|      | Sat           | Address 324 7TH ST PRAIRIE DU SAC, WI 53578 , US  Fety Equipment Seat Position  Helmet Use  Eye Protection  Injury Injury NO APPARENT IN   |                  | Date of Birth  Driver License Number  STATE: WISCONSIN COU  Safety Equipment  SHOULDER & LAP BELT  Helmet Compliance  Tint Compliance  Airbag                        |               | Race WHITE  NITED STATES  Trapped/Extricated            |  |  |
|      | Sat           | Address 324 7TH ST PRAIRIE DU SAC, WI 53578 , US  Fety Equipment Seat Position  Helmet Use  Eye Protection  Injury Injury NO APPARENT IN Ejected  Ejection Patl  |                  | Date of Birth  Driver License Number  STATE: WISCONSIN COL  Safety Equipment  SHOULDER & LAP BELT  Helmet Compliance   |               | Race WHITE  NITED STATES                                |  |  |
|      | Sat           | Address 324 7TH ST PRAIRIE DU SAC, WI 53578 , US  Fety Equipment Seat Position  Helmet Use  Eye Protection  Injury Injury Severity NO APPARENT IN Ejected  Ejection Pati   |                  | Date of Birth  Driver License Number  STATE: WISCONSIN COU  Safety Equipment  SHOULDER & LAP BELT  Helmet Compliance  Tint Compliance  Airbag                        |               | Race WHITE  NITED STATES  Trapped/Extricated            |  |  |
|      | Sat           | Address 324 7TH ST PRAIRIE DU SAC, WI 53578 , US  Fety Equipment Seat Position  Helmet Use  Eye Protection  Injury Injury NO APPARENT IN Ejected  Ejection Patl  |                  | Date of Birth  Driver License Number  STATE: WISCONSIN COU  Safety Equipment  SHOULDER & LAP BELT  Helmet Compliance  Tint Compliance  Airbag  EMS Agency Identifier |               | Race WHITE  NITED STATES  Trapped/Extricated  EMS Run # |  |  |
|      | Sat           | Address 324 7TH ST PRAIRIE DU SAC, WI 53578 , US  Fety Equipment Seat Position  Helmet Use Eye Protection  Injury Injury Injury Injury NO APPARENT IN Ejected Ejection Patt Medical Transport NOT TRANSPORTED Hospital   | h                | Date of Birth  Driver License Number  STATE: WISCONSIN COU  Safety Equipment  SHOULDER & LAP BELT  Helmet Compliance  Tint Compliance  Airbag  EMS Agency Identifier |               | Race WHITE  NITED STATES  Trapped/Extricated  EMS Run # |  |  |
|      | Sat           | Address 324 7TH ST PRAIRIE DU SAC, WI 53578 , US  Fety Equipment Seat Position  The Injury Injury Severity NO APPARENT IN Ejected Ejection Patt  Medical Transport NOT TRANSPORTED  Hospital   | h                | Date of Birth  Driver License Number  STATE: WISCONSIN COU  Safety Equipment  SHOULDER & LAP BELT  Helmet Compliance  Tint Compliance  Airbag  EMS Agency Identifier |               | Race WHITE  NITED STATES  Trapped/Extricated  EMS Run # |  |  |
|      | Sat           | Address 324 7TH ST PRAIRIE DU SAC, WI 53578 , US  Fety Equipment Seat Position  Helmet Use Eye Protection  Injury Injury Injury Injury NO APPARENT IN Ejected Ejection Patt Medical Transport NOT TRANSPORTED Hospital   | h                | Date of Birth  Driver License Number  STATE: WISCONSIN COU  Safety Equipment  SHOULDER & LAP BELT  Helmet Compliance  Tint Compliance  Airbag  EMS Agency Identifier |               | Race WHITE  NITED STATES  Trapped/Extricated  EMS Run # |  |  |
|      | Sat           | Address 324 7TH ST PRAIRIE DU SAC, WI 53578 , US  Fety Equipment Seat Position  Helmet Use  Eye Protection  Injury Injury NO APPARENT IN Ejected  Ejection Pati Medical Transport NOT TRANSPORTED  Hospital  Distracted By  Distracted By Source                 | h                | Date of Birth  Driver License Number  STATE: WISCONSIN COU  Safety Equipment  SHOULDER & LAP BELT  Helmet Compliance  Tint Compliance  Airbag  EMS Agency Identifier |               | Race WHITE  NITED STATES  Trapped/Extricated  EMS Run # |  |  |
|      | Sat           | Address 324 7TH ST PRAIRIE DU SAC, WI 53578 , US  Fety Equipment Seat Position  Helmet Use  Eye Protection  Injury Injury NO APPARENT IN Ejected  Ejection Pati Medical Transport NOT TRANSPORTED  Hospital  Distracted By Distracted By Source  Striking Unit # | h                | Date of Birth  Driver License Number  STATE: WISCONSIN COU  Safety Equipment  SHOULDER & LAP BELT  Helmet Compliance  Tint Compliance  Airbag  EMS Agency Identifier |               | Race WHITE  NITED STATES  Trapped/Extricated  EMS Run # |  |  |
|      | Sat           | Address 324 7TH ST PRAIRIE DU SAC, WI 53578 , US  Fety Equipment Seat Position  Helmet Use  Eye Protection  Injury Injury NO APPARENT IN Ejected  Ejection Pati Medical Transport NOT TRANSPORTED  Hospital  Distracted By Distracted By Source                  | h                | Date of Birth  Driver License Number  STATE: WISCONSIN COU  Safety Equipment  SHOULDER & LAP BELT  Helmet Compliance  Tint Compliance  Airbag  EMS Agency Identifier |               | Race WHITE  NITED STATES  Trapped/Extricated  EMS Run # |  |  |

# **6TL09426TB** 19-14533

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 11/23/2019

Crash Time 11:50 PM

|          |   | Prior Action         |                   |                       |  |                      |  |
|----------|---|----------------------|-------------------|-----------------------|--|----------------------|--|
|          |   | Action               |                   |                       |  |                      |  |
|          |   | 7. Calon             |                   |                       |  |                      |  |
|          | 7   |                      |                   |                       |  |                      |  |
| <b>-</b> | Ď   |                      |                   |                       |  |                      |  |
| FNO      | INDIVIDUAL                                    |                      |                   |                       |  |                      |  |
| _        | ቯ   |                      |                   |                       |  |                      |  |
|          | =   |                      |                   |                       |  |                      |  |
|          |   |                      |                   |                       |  |                      |  |
|          |   | Action Other         | To/From School    |                       |  |                      |  |
|          |   |                      |                   |                       |  |                      |  |
|          | L   | Orug & Alcohol NO    | Use               | Suspected Drug Use NO |  |                      |  |
| İ        |   | Alcohol Test Given   | Alcohol Test Type | •                     |  | Alcohol Test Results |  |
|          |   | TEST NOT GIVEN       |                   |                       |  |                      |  |
|          | Drug Test Given TEST NOT GIVEN Drug Test Type |                      | Drug Test Type    | Drug Test Result      |  |                      |  |
| 2        | 001   | Drug Type            | •                 |                       |  |                      |  |
|          | 0   |                      |                   |                       |  |                      |  |
|          |   | Individual Condition |                   |                       |  |                      |  |
|          |   | APPEARED NORMAL      |                   |                       |  |                      |  |
|          |   | AFFEARED NORMAL      |                   |                       |  |                      |  |