CFBatch-Cover-w10

Type of Report: AUTO ACCIDENT

PayorID: WI00000069 Entity: Wisc. Div. Motor Vehicles

State: WI

DATE OF LOSS: 11/19/21

LOSS STREET : UNKNOWN

LOSS CITY : WAUKESHA

POLICE DEPT.: WAUKESHA PD

REPORT NUM. : 3WLOWFFP5B

Image Name: WI00000069_3331085264_211215_2182529.tif



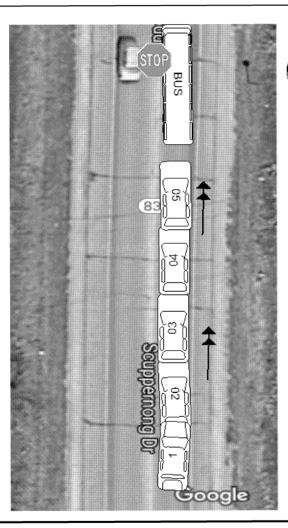
WISCONSIN MOTOR VEHICLE CRASH REPORT

WAUKESHA COUNTY SHERIFFS DEPT 515 WEST MORELAND BOULEVARD **WAUKESHA, WI 53187** (262) 548-7117

	Document Number Overrid	le	Primary Crash [Document #	Agency	Crash Number	Investigating Office DEPUTY P MA			
5B	Crash Date 11/19/2021		Crash Time 02:51 PM		Date Ar 11/19/2		Time Arrived 03:28 PM			
FFP	Date Notified 11/19/2021		Time Notified 02:52 PM		Total Ui	nits	Total Injured 00	Total Killed	1	
<u></u>	On Emergency	Hit	and Run	Lane Closu	ıre	Work Zone	Trailer or	Towed	(Reporting Threshold
3WL	Government Property		Active Sc	hool Zone		Bus Related SCHOOL BUS INDIRE	Tags			
ന	Reportable		Crash Type DT4000 (STA	NDARD CRASH	I)		Amended			Secondary Crash
	Description =									

Diagram

DIAGRAM NOT **DRAWN TO SCALE**



Reconstruction By
Photos By

Additional Information **NONE**

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

UNITS 1,2,3,4,5 WERE TRAVELING NORTHBOUND ON HWY 83, AT TWIN OAKS DR IN THE TOWN OF DELAFIELD. ALL UNITS INVOLVED REPORTED THAT THERE WAS A BUS STOPPED/STOPPING AT THE INTERSECTION, CAUSING A RAPID STOP OF ALL THE VEHICLES INVOLVING, RESULTING IN A CHAIN REACTION REAR ENDED CRASH.. LAW ENFORCEMENT WAS UNABLE TO DETERMINE WHO BRAKED/STOPPED FIRST OR ABRUPTLY CAUSING THE CRASH.

WISCONSIN MOTOR VEHICLE CRASH REPORT

WAUKESHA COUNTY SHERIFFS DEPT 515 WEST MORELAND BOULEVARD WAUKESHA, WI 53187 (262) 548-7117

Crash Date 11/19/2021

	_ocation								
·	ON STH83	NB			Latitude			Longitu	ide
	608 FT S				43.0356	20332		-88.37	4109139
	OF TWIN O				X Coordii	nate		Y Coor	dinate
		/N OF DELAF HA COUNTY			388062.	59375		47656	86.5
	IN WAUKES	HA COUNTY			Structure	Type		_	
						RUCTURE			
	Crash Sc	ene 💻			<u> </u>				
ī	First Harmful E				First Harr	mful Event	Location		
		HIN TRANSP	PORT		ON RO		Location		
ŀ	Manner of Col				Light Cor				
	03 - FRONT				DAYLIG				
- }	Road Surface					Factor(s)			
		Outlation(3)			Tioadway	r actor(3)			
	DRY								
ı	Environment F	actor(s)							
	NONE				BACKU	P DUE T	O REGULAR	CONGE	STION
ŀ	Weather Cond	lition(s)							
	CLEAR	. /							
	Animal Type					To Trafficw	ay ON ROAD		
ŀ	Crash Classific	cation - Location	า				- Jurisdiction		
	PUBLIC PRO		'				RISDICTION		
ŀ	Tribal Land				Access C				Special Study
					NO COI	NO CONTROL			
Ī	Within Intercha	ange Area	Junction Location		Intersection Type				•
Į	NO		NON-JUNCTION		NOT AN INTERSI	ECTION			
Į	Jnit Sum	mary 💳			•				
 	Jnit Sum Unit Status	mary =		Vehicle Ope	erating As Classificatio	n	Unit Type		
1	Unit Status IN TRANSIT			Vehicle Ope	erating As Classificatio	n	AUTOMO		
	Unit Status IN TRANSIT Vehicle Type			1	erating As Classificatio	n	1		ements
01	Unit Status IN TRANSIT Vehicle Type			1	erating As Classificatio		AUTOMOI Operating A	s Endorse	
	Unit Status IN TRANSIT Vehicle Type (SPORT) UT Total Occs		LE Train/Bus # Recorded	D CLASS Total # Cita	erating As Classificatio	Total Tra	AUTOMOI Operating A	s Endorse Total Ha	ements zMat Types
	Unit Status IN TRANSIT Vehicle Type (SPORT) UT		Train/Bus # Recorded	D CLASS		Total Tra	AUTOMOI Operating A	s Endorse Total Ha	zMat Types
	Unit Status IN TRANSIT Vehicle Type (SPORT) UT Total Occs 1 Insurance?		Train/Bus # Recorded Direction Of Travel	D CLASS Total # Cita 0		Total Tra 0 Speed L	AUTOMOI Operating A	s Endorse Total Ha. 0 Total Lar	zMat Types
01	Unit Status IN TRANSIT Vehicle Type (SPORT) UT Total Occs 1 Insurance? YES	ILITY VEHIC	Train/Bus # Recorded Direction Of Travel NORTHBOUND	Total # Cita 0	tions Issued CrashTire Mark	Total Tra	AUTOMOI Operating A ailers	Total Ha: 0 Total Lar 2	zMat Types nes
01	Unit Status IN TRANSIT Vehicle Type (SPORT) UT Total Occs 1 Insurance? YES Most Harmful	TILITY VEHIC	Train/Bus # Recorded Direction Of Travel NORTHBOUND With	Total # Cita 0 Pre Special Fun	tions Issued CrashTire Mark loction	Total Tra 0 Speed L	AUTOMOI Operating A ailers imit	Total Ha: 0 Total Lar 2 Motor Vel	zMat Types nes
	Unit Status IN TRANSIT Vehicle Type (SPORT) UT Total Occs 1 Insurance? YES Most Harmful I MOTOR VEI	ILITY VEHIC	Train/Bus # Recorded Direction Of Travel NORTHBOUND With	Total # Cita 0 Pre Special Fun NO SPEC	CrashTire Mark loction	Total Tra 0 Speed L	AUTOMOI Operating A ailers imit Emergency NOT APPI	Total Had 0 Total Lar 2 Motor Vel	zMat Types nes nicle Use
01	Unit Status IN TRANSIT Vehicle Type (SPORT) UT Total Occs 1 Insurance? YES Most Harmful I MOTOR VEI Traffic Way	Event: Collision	Train/Bus # Recorded Direction Of Travel NORTHBOUND With PORT	Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont	CrashTire Mark Inction ILAL FUNCTION	Total Tra 0 Speed L	AUTOMOI Operating A ailers imit Emergency NOT APPI Traffic Cont	Total Had 0 Total Lar 2 Motor Vel	zMat Types nes
01	Unit Status IN TRANSIT Vehicle Type (SPORT) UT Total Occs 1 Insurance? YES Most Harmful MOTOR VEI Traffic Way TWO-WAY,	TILITY VEHIC	Train/Bus # Recorded Direction Of Travel NORTHBOUND With PORT	Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT	CrashTire Mark Iction IIAL FUNCTION TOI	Total Tra 0 Speed L	AUTOMOI Operating A ailers imit Emergency NOT APPI Traffic Conti	Total Ha: 0 Total Lar 2 Motor Vel LICABLE	zMat Types nes nicle Use
01	Unit Status IN TRANSIT Vehicle Type (SPORT) UT Total Occs 1 Insurance? YES Most Harmful I MOTOR VEI Traffic Way TWO-WAY, Surface Type	Event: Collision H IN TRANSP	Train/Bus # Recorded Direction Of Travel NORTHBOUND With PORT	Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva	CrashTire Mark Interior IAL FUNCTION IROL STROL	Total Tra 0 Speed L	AUTOMOI Operating A ailers imit Emergency NOT APPI Traffic Cont NO Road Grade	Total Ha: 0 Total Lar 2 Motor Vel LICABLE	zMat Types nes nicle Use
01	Unit Status IN TRANSIT Vehicle Type (SPORT) UT Total Occs Insurance? YES Most Harmful MOTOR VEI Traffic Way TWO-WAY, Surface Type BLACKTOP	Event: Collision H IN TRANSP NOT DIVIDED (BITUMINOL	Train/Bus # Recorded Direction Of Travel NORTHBOUND With PORT	Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT	CrashTire Mark Interior IAL FUNCTION IROL STROL	Total Tra 0 Speed L	AUTOMOI Operating A ailers imit Emergency NOT APPI Traffic Conti	Total Ha: 0 Total Lar 2 Motor Vel LICABLE	zMat Types nes nicle Use
01	Unit Status IN TRANSIT Vehicle Type (SPORT) UT Total Occs Insurance? YES Most Harmful I MOTOR VEI Traffic Way TWO-WAY, I Surface Type BLACKTOP Truck Bus or I-	Event: Collision H IN TRANSP NOT DIVIDED (BITUMINOL	Train/Bus # Recorded Direction Of Travel NORTHBOUND With PORT	Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva	CrashTire Mark Interior IAL FUNCTION IROL STROL	Total Tra 0 Speed L	AUTOMOI Operating A ailers imit Emergency NOT APPI Traffic Cont NO Road Grade	Total Ha: 0 Total Lar 2 Motor Vel LICABLE	zMat Types nes nicle Use
01	Unit Status IN TRANSIT Vehicle Type (SPORT) UT Total Occs 1 Insurance? YES Most Harmful I MOTOR VEI Traffic Way TWO-WAY, Surface Type BLACKTOP Truck Bus or F	Event: Collision H IN TRANSP NOT DIVIDED (BITUMINOL	Train/Bus # Recorded Direction Of Travel NORTHBOUND With PORT	Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva	CrashTire Mark Interior IAL FUNCTION IROL STROL	Total Tra 0 Speed L	AUTOMOI Operating A ailers imit Emergency NOT APPI Traffic Cont NO Road Grade	Total Ha: 0 Total Lar 2 Motor Vel LICABLE	zMat Types nes nicle Use
01	Unit Status IN TRANSIT Vehicle Type (SPORT) UT Total Occs 1 Insurance? YES Most Harmful I MOTOR VEI Traffic Way TWO-WAY, I Surface Type BLACKTOP Truck Bus or F NO Vehicle	Event: Collision H IN TRANSP NOT DIVIDED (BITUMINOL	Train/Bus # Recorded Direction Of Travel NORTHBOUND With PORT	Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH	CrashTire Mark letion PlAL FUNCTION Prol PROL Stature T	Total Tra 0 Speed L 45	AUTOMOI Operating A ailers imit Emergency NOT APPI Traffic Conti NO Road Grade UPHILL	s Endorses Total Ha: 0 Total Lar 2 Motor Vel LICABLE rol Inopera	zMat Types nes nicle Use
01	Unit Status IN TRANSIT Vehicle Type (SPORT) UT Total Occs 1 Insurance? YES Most Harmful I MOTOR VEI Traffic Way TWO-WAY, I Surface Type BLACKTOP Truck Bus or F NO Vehicle License	Event: Collision H IN TRANSP NOT DIVIDED (BITUMINOL HazMat Plate Number	Train/Bus # Recorded Direction Of Travel NORTHBOUND With PORT	Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH	CrashTire Mark letion PlAL FUNCTION Prol ROL Stature T	Total Tra 0 Speed L 45	AUTOMOI Operating A ailers imit Emergency NOT APPI Traffic Conti NO Road Grade UPHILL Country of Is	s Endorses Total Ha: 0 Total Lar 2 Motor Ver LICABLE rol Inopera	zMat Types nes nicle Use
UNIT 01	Unit Status IN TRANSIT Vehicle Type (SPORT) UT Total Occs 1 Insurance? YES Most Harmful MOTOR VEI Traffic Way TWO-WAY, Surface Type BLACKTOP Truck Bus or F NO Vehicle License ALY95:	Event: Collision H IN TRANSP NOT DIVIDED (BITUMINOL HazMat Plate Number	Train/Bus # Recorded Direction Of Travel NORTHBOUND With PORT JS)	Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH	CrashTire Mark letion PlAL FUNCTION Prol PROL Stature T	Total Tra 0 Speed L 45	AUTOMOI Operating A ailers imit Emergency NOT APPI Traffic Conti NO Road Grade UPHILL	s Endorses Total Ha: 0 Total Lar 2 Motor Ver LICABLE rol Inopera	zMat Types nes nicle Use
01	Unit Status IN TRANSIT Vehicle Type (SPORT) UT Total Occs 1 Insurance? YES Most Harmful MOTOR VEI Traffic Way TWO-WAY, Surface Type BLACKTOP Truck Bus or F NO Vehicle License ALY95 Vehicle I	Event: Collision H IN TRANSP NOT DIVIDED (BITUMINOL HazMat Plate Number 11	Train/Bus # Recorded Direction Of Travel NORTHBOUND With PORT JS)	Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH	CrashTire Mark letion PlAL FUNCTION Prol ROL Stature T	Total Tra 0 Speed L 45	AUTOMOI Operating A ailers imit Emergency NOT APPI Traffic Conti NO Road Grade UPHILL Country of Is UNITED ST	s Endorses Total Ha: 0 Total Lar 2 Motor Ver LICABLE rol Inopera	zMat Types nes nicle Use
UNIT 01	Unit Status IN TRANSIT Vehicle Type (SPORT) UT Total Occs 1 Insurance? YES Most Harmful MOTOR VEI Traffic Way TWO-WAY, Surface Type BLACKTOP Truck Bus or F NO Vehicle License ALY95 Vehicle I	Event: Collision H IN TRANSP NOT DIVIDED (BITUMINOL HazMat Plate Number 11 dentification Nu	Train/Bus # Recorded Direction Of Travel NORTHBOUND With PORT JS)	Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AU Make	tions Issued CrashTire Mark Detion FIAL FUNCTION FROL Sture T JTOMOBILE	Total Tra 0 Speed L 45 St WI Year	AUTOMOI Operating A ailers imit Emergency NOT APPI Traffic Conti NO Road Grade UPHILL Country of Is UNITED ST	s Endorses Total Ha: 0 Total Lar 2 Motor Ver LICABLE rol Inopera	zMat Types nes nicle Use
UNIT 01	Unit Status IN TRANSIT Vehicle Type (SPORT) UT Total Occs 1 Insurance? YES Most Harmful I MOTOR VEI Traffic Way TWO-WAY, Surface Type BLACKTOP Truck Bus or F NO Vehicle License ALY95 Vehicle I 3CZRE	Event: Collision H IN TRANSP NOT DIVIDED (BITUMINOL) HazMat Plate Number 11 dentification Nu 48519G70645	Train/Bus # Recorded Direction Of Travel NORTHBOUND With PORT JS)	Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AL Make HONDA Body Style	tions Issued CrashTire Mark Detion FIAL FUNCTION FROL Sture T JTOMOBILE	St WI Year 2009	AUTOMOI Operating A ailers imit Emergency NOT APPI Traffic Conti NO Road Grade UPHILL Country of Is UNITED ST Model CR-V	s Endorses Total Ha: 0 Total Lar 2 Motor Ver LICABLE rol Inopera	zMat Types nes nicle Use
01 UNIT 01	Unit Status IN TRANSIT Vehicle Type (SPORT) UT Total Occs 1 Insurance? YES Most Harmful MOTOR VEI Traffic Way TWO-WAY, Surface Type BLACKTOP Truck Bus or F NO Vehicle License ALY95: Vehicle I 3CZRE Color BLU - E Initial Co	Event: Collision H IN TRANSP NOT DIVIDED (BITUMINOL HazMat Plate Number 11 dentification Nu 48519G70645 BLUE Intact Point	Train/Bus # Recorded Direction Of Travel NORTHBOUND With PORT JS)	Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AL Make HONDA Body Style	tions Issued CrashTire Mark Indition ITAL FUNCTION TOI ROL INTUITION ITAL ITOMOBILE DRT UTILITY VEHIC	St WI Year 2009	AUTOMOI Operating A ailers imit Emergency NOT APPI Traffic Conti NO Road Grade UPHILL Country of Is UNITED ST Model CR-V	s Endorses Total Ha: 0 Total Lar 2 Motor Ver LICABLE rol Inopera	zMat Types nes nicle Use E ative/Missing
01 UNIT 01	Unit Status IN TRANSIT Vehicle Type (SPORT) UT Total Occs 1 Insurance? YES Most Harmful MOTOR VEI Traffic Way TWO-WAY, Surface Type BLACKTOP Truck Bus or F NO Vehicle License ALY95: Vehicle I 3CZRE Color BLU - E Initial Co	Event: Collision H IN TRANSP NOT DIVIDED (BITUMINOL HazMat Plate Number 11 dentification Nu 48519G70645 BLUE Intact Point ONT	Train/Bus # Recorded Direction Of Travel NORTHBOUND With PORT JS)	Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AU Make HONDA Body Style UT - SPO Vehicle Da	CrashTire Mark Intion ITAL FUNCTION ITAL ITAL ITAL ITAL ITAL ITAL ITAL ITAL	St WI Year 2009	AUTOMOI Operating A ailers imit Emergency NOT APPI Traffic Contino Road Grade UPHILL Country of Is UNITED ST Model CR-V Bus Use	s Endorses Total Ha: 0 Total Lar 2 Motor Ver LICABLE rol Inopera	zMat Types nes nicle Use E ative/Missing
IND 01	Unit Status IN TRANSIT Vehicle Type (SPORT) UT Total Occs 1 Insurance? YES Most Harmful I MOTOR VEI Traffic Way TWO-WAY, Surface Type BLACKTOP Truck Bus or F NO Vehicle License ALY95: Vehicle I 3CZRE Color BLU - E Initial Co 12 - FR Extent C	Event: Collision H IN TRANSP NOT DIVIDED (BITUMINOL HazMat Plate Number 11 dentification Nu 48519G70645 BLUE Intact Point	Train/Bus # Recorded Direction Of Travel NORTHBOUND With PORT D US)	Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AL Make HONDA Body Style UT - SPO Vehicle Da 01 - RIGI	tions Issued CrashTire Mark Indition ITAL FUNCTION TOI ROL INTUITION ITAL ITOMOBILE DRT UTILITY VEHIC	St WI Year 2009	AUTOMOI Operating A ailers imit Emergency NOT APPI Traffic Contino Road Grade UPHILL Country of Is UNITED ST Model CR-V Bus Use	s Endorses Total Ha: 0 Total Lar 2 Motor Ver LICABLE rol Inopera	zMat Types nes nicle Use E ative/Missing

WISCONSIN MOTOR VEHICLE CRASH REPORT

WAUKESHA COUNTY SHERIFFS DEPT 515 WEST MORELAND BOULEVARD WAUKESHA, WI 53187 (262) 548-7117

		Towed Due To Damage	NO DAMAGE	Vehicle Removed By	
		TOWED DUE TO DISABLI	NG DAMAGE	WILKES TOWING	
		What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
		Driver Prior Action Other		NOT APPLICABLE	
		Driver Prior Action Other		NOT ATTEICABLE	
		Driver Actions			
	Щ	NO CONTRIBUTING ACTI	ON		
╘	귱				
UNIT	Ĭ				
_	VEHICL				
	-				
		Owner Name		Owner Address	
5	5	JAMES CRAIG WILLGRUI (262) 527-0745	BS	W318N1045 HUCKLEBI	
0	0	(202) 327-0743		DELAFIELD, WI 53018	, 05
		Sequence Of Events			
	5	Event MOTOR VEH IN TRANSPO	ORT		
	_				
	02	Event			
		Event			
	03	2.01.1			
		Event			
	04				
		Policy Holder			
UNIT		Insurance Company		Individual	
5		AMERICAN-FAMILY-INS-C	co	JAMES WILLGRUBS	
		Individual			
		Driver		Citations Issued	Sex
		MAZIE L WILLGRUBS		0	FEMALE
	Ν	(262) 527-0745		Date of Birth	Race
_	7			08/22/2005	WHITE
LIND	INDIVIDUAL	Address		Driver License Number	
_	2	W318N1045 HUCKLEBER	-	W4265520580202	INTRY, LIMITED STATES
	_	DELAFIELD, WI 53018 , U	3	STATE: WISCONSIN COL	DIVINT: UNITED STATES
	Sat	On Duty fety Equipment	Crash	Safety Equipment	
			T	CHOIL DED & LAB DELT	
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
		Helmet Use	07-1271	Helmet Compliance	
		Tielinet 636		rieimet Compliance	
		Eye Protection		Tint Compliance	
				·	
5	100	Injury Se	•	Airbag	
0	ŏ		PARENT INJURY	DEPLOYED-COMBINATION	
		•	Ejection Path		Trapped/Extricated
			NOT EJECTED/NOT APF		NOT TRAPPED
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #
		Hospital		Date of Death	Time of Death
		Ποοριία		Date of Death	Time of Death
		Distracted	d By Source		
		Distracted By NOT AP	PLICABLE (NOT DISTRA	ACTED)	
		Distracted By Action	 		
		NOT DISTRACTED			

WISCONSIN MOTOR VEHICLE CRASH REPORT

WAUKESHA COUNTY SHERIFFS DEPT 515 WEST MORELAND BOULEVARD **WAUKESHA, WI 53187** (262) 548-7117

		Non Motorist	king Unit #	Location						
		Prior Action								
TINO	INDIVIDUAL	Action Action Other								
									To/From School	
		Drug & Alcohol NO	pected Alcohol l	Jse	Suspected Drug Use NO				-	
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Ty	pe		Alcohol Te	est Results		
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Re	esults			
6	100	Drug Type								
		Individual Condition								
		APPEARED NORMAL								
		t Summary 💳								
		Status RANSIT			Vehicle Operating As Class D CLASS	ification	Unit Type AUTOM	OBILE		
05		cle Type SSENGER CAR						As Endorse	ments	
	Tota	tal Occs Train/Bus # Re			Total # Citations Issued		Trailers		Mat Types	
		ance?	Direction Of Tr	avel	Pre CrashTire		d Limit	Total Lan	es	
LINO	YES		NORTHBOU		Mark	45		2		
5	MO.	Harmful Event: Collision W FOR VEH IN TRANSPO			Special Function NO SPECIAL FUNCTION	NOT AP	Emergency Motor Vehicle Use NOT APPLICABLE			
	TWO	ic Way D-WAY, NOT DIVIDED			Traffic Control NO CONTROL		Traffic Co	Traffic Control Inoperative/Missing NO		
		ace Type			Road Curvature		Road Grad	de		
		CKTOP (BITUMINOUS) K Bus or HazMat)		STRAIGHT		UPHILL			
	NO									
		/ehicle								
		License Plate Number AKS5536			Plate Type AUT - AUTOMOBILE	St WI	Country of UNITED S			
α	4.	Vehicle Identification Numb	per		Make	Year	Model	TAILS		
05	02	JF2SJAAC9EH439969			SUBARU	2014		R		
		Color BLU - BLUE			Body Style UT - SPORT UTILITY \	/EHICLE	Bus Use			
_	щ	Initial Contact Point			Vehicle Damage		<u>L</u>			
UNIT	VEHICL	06 - REAR Extent Of Damage			06 - REAR				7 8 9 10 11 6 12	
_	VEF	DISABLING DAMAGE			OU-FILAR				5 4 3 2 1	
		Towed Due To Damage	DI INC DARIA	CE	Vehicle Removed By					
		TOWED DUE TO DISA	DLING DAMA	IGE	WILKES TOWING					

WISCONSIN MOTOR VEHICLE CRASH REPORT

WAUKESHA COUNTY SHERIFFS DEPT 515 WEST MORELAND BOULEVARD WAUKESHA, WI 53187 (262) 548-7117

				_				
		What Driver Was Doing		Ve	ehicle Factors			
		STOP IN TRAFFIC						
		Driver Prior Action Other		N	OT APPLICABLE			
LIND	VEHICLE	Driver Actions NO CONTRIBUTING ACTION	ON					
05	02	Owner Name JENNIFER LYNN HELLMA (262) 787-8409	NN		Owner Address 1332 MILL RD DELAFIELD, WI 53018 , U	JS		
		Sequence Of Events						
	10	Event MOTOR VEH IN TRANSPO	ORT					
	02	Event						
	03	Event						
		Event						
	94							
UNIT		Policy Holder Insurance Company			Individual			
_		STATE-FARM-GENERAL-	INS-CO		JENNIFER HELLMANN			
		ndividual Driver ANNA G HELLMANN (262) 787-8409			Citations Issued	Sex		
	7				0	FEMALE		
⊢	'na	(202) 707 0400			Date of Birth 07/28/2005	Race WHITE		
LIND	INDIVIDUAL	Address 1332 MILL RD DELAFIELD, WI 53018, US			Driver License Number H4550470576805 STATE: WISCONSIN COUNTRY: UNITED STATES			
	Sa	fety Equipment	Crash		Safety Equipment			
		Row 01 - FRONT ROW	Seat Posi		SHOULDER & LAP BELT			
		Helmet Use			Helmet Compliance			
		Eye Protection			Tint Compliance			
05	005		PARENT IN		Airbag DEPLOYED-COMBINATION			
		'	Ejection Path NOT EJEC	TED/NOT APPL	ICABLE	Trapped/Extricated NOT TRAPPED		
		Medical Transport NOT TRANSPORTED			EMS Agency Identifier	EMS Run #		
		Hospital			Date of Death	Time of Death		
		Distracted P. Distracte	d By Source					
		Distracted By NOT AI Distracted By Action	PPLICABLE	: (NOT DISTRAC	CIED)			
		NOT DISTRACTED	Init #	Location				
		Non Motorist Striking I	DI III #	Location				

WISCONSIN MOTOR VEHICLE CRASH REPORT

WAUKESHA COUNTY SHERIFFS DEPT 515 WEST MORELAND BOULEVARD WAUKESHA, WI 53187 (262) 548-7117

Crash Date 11/19/2021

		Prior Action						
		Action						
	7							
⊨	INDIVIDUAL							
UNIT	\geq							
	¥							
		Action Other						To/From School
		Suspecte	ed Alcohol Use	;	Suspected Drug Use			
	1	Drug & Alcohol NO Alcohol Test Given	17	Alcohol Test Type	NO		Alcohol Test Results	
		TEST NOT GIVEN			•			
		Drug Test Given TEST NOT GIVEN	1	Orug Test Type		Drug Test Results		
02	002	Drug Type						
0	Ō							
		Individual Condition						
		APPEARED NORMAL						
		Individual						
		Passenger JONATHAN G DREIST			Citations Issued 0		Sex MALE	
	INDIVIDUAL				Date of Birth		Race	
UNIT	ΔIN	Address			11/10/2005 Driver License Number		WHITE	
)	豆	1106 N BREENS BAY RD OCONOMOWOC, WI 5306	6 US		D6234270541007 STATE: WISCONSIN		TED STATES	
	_	,	,					
	Sai	On Duty	Crash		Safety Equipment			
		Row	Seat Posit		SHOULDER & LAP	BELT		
		01 - FRONT ROW Helmet Use	09 - RIG	<u>пі</u>	Helmet Compliance			
		Eye Protection			Tint Compliance			
02	003	Injury Se NO API	everity PARENT IN.	IURY	Airbag NON DEPLOYED			
		Ejected	Ejection Path	TED/NOT APPI	LICARIE		Trapped/Extricated	
		NOT EJECTED Medical Transport	NOT EJECT	IED/NOT APPI	EMS Agency Identifier		NOT TRAPPED EMS Run #	
		NOT TRANSPORTED			Date of Death		Time of Death	
		Hospital			Date of Death		Time of Death	
		Distracted By Distracte	d By Source					
		Distracted By Action						
		Striking U	Jnit # L	_ocation				
		Non Motorist						
		Prior Action						

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WAUKESHA COUNTY SHERIFFS DEPT 515 WEST MORELAND BOULEVARD WAUKESHA, WI 53187 (262) 548-7117

Crash Date 11/19/2021

										(202) 0 10 7 11
UNIT	INDIVIDUAL	Action								
		Action Other								To/From School
		Drug & Alcohol NO	pected Alcohol C	Jse	Suspected Drug Use					
		Alcohol Test Given		Alcohol Test T			Т	Alcohol Test	Results	
		TEST NOT GIVEN Drug Test Given		Drug Test Typ	ne	Drug Test R	Results			
		TEŠT NOT GIVEN								
05	003	Drug Type								
		Individual Condition								
		APPEARED NORMAL								
		t Summary ===								
		Status TRANSIT			Vehicle Operating As Clase D CLASS	sification		Unit Type AUTOMOE) E	
03	Veh	cle Type			T STAGE			Operating As		ements
O		SSENGER CAR	Train/Bus # Re	corded	Total # Citations Issued	Tota	l Trailer	s T	Total Haz	zMat Types
	1	rance?	Direction Of Tra	avol	0	0	1 1 : 14		0	
⊨	YES	S	NORTHBOU		Pre CrashTire Mark	45	ed Limit		Total Lar 2	
LNO		t Harmful Event: Collision Wi TOR VEH IN TRANSPO			Special Function NO SPECIAL FUNCTI	ON		Emergency NOT APPL	Motor Veh	nicle Use
	ı	ic Way D-WAY, NOT DIVIDED	 		Traffic Control NO CONTROL			Traffic Contro	ol Inopera	ative/Missing
	Surf	асе Туре			Road Curvature		- 	Road Grade		
		ACKTOP (BITUMINOUS) k Bus or HazMat)		STRAIGHT			UPHILL		
	NO									
		Vehicle License Plate Number			Plate Type	St	10	Country of Iss	uance	
		ANM3074 Vehicle Identification Numb			AUT - AUTOMOBILE Make			JNITED ST	ATES	
03	03	4T3ZF13C32U466571	Jer		TOYOTA	Year 2002		Model SIENNA		
		Color BGE - BEIGE			Body Style VN - VAN		E	Bus Use		
_	Щ	Initial Contact Point 06 - REAR			Vehicle Damage				\Box	7 8 9 10 11
UNIT	VEHICL	Extent Of Damage DISABLING DAMAGE			06 - REAR, 12 - FRO	NT				6 12 5 4 3 2 1
		Towed Due To Damage TOWED DUE TO DISA	BLING DAMA	GE	Vehicle Removed By WILKES TOWING					
		What Driver Was Doing STOP IN TRAFFIC								

WISCONSIN MOTOR VEHICLE CRASH REPORT

WAUKESHA COUNTY SHERIFFS DEPT 515 WEST MORELAND BOULEVARD WAUKESHA, WI 53187 (262) 548-7117

					(202) 340-7117
				Vehicle Factors	
		Driver Prior Action Other		NOT APPLICABLE	
LINIT	VEHICLE	Driver Actions OTHER CONTRIBUTING	ACTION		
03	03	Owner Name ANDREA LYNN CHENEY (262) 422-8794	(Owner Address 763 THACKERAY TRL OCONOMOWOC, WI 53	3066 , US
	10	Sequence Of Events Event MOTOR VEH IN TRANSF			
	03 02	Event			
	04 0	Event			
LINIT		Policy Holder Insurance Company		Individual	
		ACUITY,-A-MUTUAL-INS Individual Driver	SURANCE-CO	ANDREA CHENEY Citations Issued	
_	DUAL	JOSHUA F MICHELS (262) 422-8794		0 Date of Birth 11/06/2003	Sex MALE Race WHITE
INO	INDIVIDUAL	Address 763 THACKERAY TRL OCONOMOWOC, WI 530	966 , US	Driver License Number M2424260340601 STATE: WISCONSIN COU	JNTRY: UNITED STATES
	Sa	fety Equipment On Dut	y Crash	Safety Equipment	
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
		Helmet Use Eye Protection		Helmet Compliance Tint Compliance	
03	004	Injury S	Severity	Airbag	
	0	Ejected NOT EJECTED	PPARENT INJURY Ejection Path NOT EJECTED/NOT AP	NON DEPLOYED PLICABLE	Trapped/Extricated NOT TRAPPED
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #
		Hospital	tod By Course	Date of Death	Time of Death
		Distracted By NOT A	ted By Source APPLICABLE (NOT DISTR	ACTED)	
		NOT DISTRACTED	(Hoit # Theastern		
		Non Motorist	Unit # Location		

Crash Date 11/19/2021
Crash Time 02:51 PM

WISCONSIN MOTOR VEHICLE CRASH REPORT

WAUKESHA COUNTY SHERIFFS DEPT 515 WEST MORELAND BOULEVARD WAUKESHA, WI 53187 (262) 548-7117

Orash Date 11/19/2021

										(, , , , , , , , , , , , , , , , , , ,	
		Prior Action									
TINO	INDIVIDUAL	Action Action Other								To/From School	
		Sus	pected Alcohol Us	se	Suspected Drug Use						
		Drug & Alcohol NO	_		NO						
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Ty	rpe			Alcohol Test	Results		
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test I	Results	<u> </u>			
03	004	Drug Type									
		Individual Condition							_		
		APPEARED NORMAL									
	l Ini	t Summary ===									
	Unit	Status			Vehicle Operating As Clas	ssification		Unit Type			=
		RANSIT			D CLASS			AUTOMOE			
9		cle Type SSENGER CAR						Operating As	s Endorsem	nents	
		I Occs	Train/Bus # Rec	corded	Total # Citations Issued	Tota	al Traile	ers T	Total Hazl	Mat Types	
	1		: - O(T		0	0			0		
⊨	YES	rance?	Direction Of Tra		Pre CrashTire Mark	45	ed Lim		Total Lane 2	S	
LINO		: Harmful Event: Collision Wi			Special Function NO SPECIAL FUNCTI	ION		Emergency I		cle Use	
		ic Way			Traffic Control			Traffic Contr	ol Inoperati	ve/Missing	
		D-WAY, NOT DIVIDED ace Type			NO CONTROL			NO Road Grade			
		CKTOP (BITUMINOUS))		Road Curvature STRAIGHT			UPHILL			
	Truc NO	k Bus or HazMat									
		Vehicle									
		License Plate Number AKY6200			Plate Type AUT - AUTOMOBILE	St WI		Country of Iss UNITED ST			
40	04	Vehicle Identification Numb	er		Make	Year	r	Model			_
0	0	JTMBK31V376011130 Color			TOYOTA Body Style	200		RAV4 Bus Use			
		BLK - BLACK			UT - SPORT UTILITY	VEHICLE		bus Ose			
_	ILE.	Initial Contact Point 06 - REAR			Vehicle Damage					7 8 9 10 11	
LINO	VEHICL	Extent Of Damage			06 - REAR, 12 - FRO	NT				6 12 5 4 3 2 1	
	>	Towed Due To Damage	E		Vehicle Removed By					7 2 6 1	_
		NOT TOWED			OPERATOR			_			
		What Driver Was Doing STOP IN TRAFFIC									

WISCONSIN MOTOR VEHICLE CRASH REPORT

WAUKESHA COUNTY SHERIFFS DEPT 515 WEST MORELAND BOULEVARD WAUKESHA, WI 53187 (262) 548-7117

				_	(202) 340-7117
				Vehicle Factors	
		Driver Prior Action Other		NOT APPLICABLE	
LIND	VEHICLE	Driver Actions NO CONTRIBUTING AC	TION		
04	04	Owner Name BETHANY K GRADY (920) 723-0868		Owner Address W305S4185 BROOKHILL RD WAUKESHA, WI 53189 , US	
	10	Sequence Of Events Event MOTOR VEH IN TRANSI			
	03 02	Event			
	04	Event			
LINO		Policy Holder Insurance Company GEICO-ADVANTAGE-IN:	SURANCE-CO	Individual BETHANY GRADY	
		Individual			
	JAL	Driver BETHANY K GRADY (920) 723-0868		Citations Issued 0 Date of Birth	Sex FEMALE Race
⊑	Ę			04/24/1998	WHITE
LINO	INDIVIDUAL	W305S4185 BROOKHILI WAUKESHA, WI 53189		Driver License Number G6300719864400 STATE: WISCONSIN COUNTR	Y: UNITED STATES
	Sai	On Dut On Dut On Dut	ty Crash	Safety Equipment	
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
		Helmet Use		Helmet Compliance	
		Eye Protection		Tint Compliance	
04	005		PPARENT INJURY	Airbag NON DEPLOYED	
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT AP	PLICABLE	Trapped/Extricated NOT TRAPPED
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #
		Hospital		Date of Death	Time of Death
		Distracted By NOT A	ted By Source APPLICABLE (NOT DISTR	ACTED)	<u> </u>
		Distracted By Action NOT DISTRACTED			
		Non Motorist Striking	Unit # Location		

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WISCONSIN MOTOR VEHICLE CRASH REPORT

WAUKESHA COUNTY SHERIFFS DEPT 515 WEST MORELAND BOULEVARD WAUKESHA, WI 53187 (262) 548-7117

								(202) 010 7117		
		Prior Action								
ĺ		Action								
	4									
 -	INDIVIDUAL									
L	1									
	2									
		Action Other						To/From School		
		I Cuo	pected Alcohol U	loo .	Cuspected Dwg Hea					
		Drug & Alcohol NO	pected Alcohol C	ise	Suspected Drug Use NO					
		Alcohol Test Given		Alcohol Test Ty	ре		Alcohol Test Re	sults		
		TEST NOT GIVEN Drug Test Given		Drug Test Type		Drug Test Result				
		TEŠT NOT GIVEN				Drag Foot Hooding				
8	005	Drug Type								
		Individual Condition								
		APPEARED NORMAL								
		t Summary ===								
		Status TRANSIT			Vehicle Operating As Class D CLASS	sification	Unit Type AUTOMOBILE			
05	Vehi	cle Type					Operating As En			
0		ASSENGER CAR otal Occs Train/Bus # Recorded			Total # Citations Issued	Total Trai	lara TTet	tol HonMat Turne		
	101a	i Occs	Trailin Bus # Flet	corded	Total # Citations Issued 0	0	0	tal HazMat Types		
	Insu	rance?	Direction Of Tra		Pre CrashTire	Speed Lir		tal Lanes		
UNT		Harmful Event: Collision W		ND ON	Mark Special Function	45	Emergency Moto	or Vehicle Use		
_		TOR VEH IN TRANSPO	RT		NO SPECIAL FUNCTION	ON	NOT APPLICA			
		ic Way D-WAY, NOT DIVIDED			Traffic Control NO CONTROL		Traffic Control In	noperative/Missing		
	Surfa	асе Туре			Road Curvature		Road Grade			
		ACKTOP (BITUMINOUS) k Bus or HazMat)		STRAIGHT		UPHILL			
	NO									
	1	Vehicle								
		License Plate Number 607JRL			Plate Type AUT - AUTOMOBILE	St WI	Country of Issuan UNITED STATI			
02	05	Vehicle Identification Numb			Make	Year	Model			
0	0	3GNAXVEX8KL208174	ļ ————		CHEVROLET Body Style	2019	EQUINOX Bus Use			
		BLU - BLUE			UT - SPORT UTILITY	VEHICLE	bus ose			
—	1	Initial Contact Point 06 - REAR			Vehicle Damage			7 8 9 10 11		
LNO	VEHICL	Extent Of Damage			06 - REAR			6 12		
_	VE.	MINOR DAMAGE Towed Due To Damage			Vahiala Barrania 15			5 4 3 2 1		
		NOT TOWED			Vehicle Removed By OPERATOR					
		What Driver Was Doing								
		SLOW/STOPPING								

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WISCONSIN MOTOR VEHICLE CRASH REPORT

WAUKESHA COUNTY SHERIFFS DEPT 515 WEST MORELAND BOULEVARD **WAUKESHA, WI 53187** (262) 548-7117

Crash Date 11/19/2021

				_	(202) 340-7117			
				Vehicle Factors				
		Driver Prior Action Other		NOT APPLICABLE				
UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION						
02	90	Owner Name REBEKAH JEAN HENKE (414) 803-9783	EN	Owner Address S77W29882 HIGH CROS MUKWONAGO, WI 53149				
	10	Sequence Of Events Event MOTOR VEH IN TRANSPORT Event						
	1 03 02	Event Event						
UNIT	04	Policy Holder Insurance Company FARMERS-INS-CO-INC		Individual REBEKAH HENKEN				
LIND		Individual Driver REBEKAH J HENKEN (414) 803-9783		Citations Issued 0 Date of Birth 10/14/1983	Sex FEMALE Race			
	INDIVIDUAL	Address S77W29882 HIGH CROSS DR MUKWONAGO, WI 53149 , US		Driver License Number H5257308387400 STATE: WISCONSIN COUNTRY: UNITED STATES				
	Sai	fety Equipment Row Seat Position 01 - FRONT ROW On Duty Crash Seat Position 07 - LEFT		Safety Equipment SHOULDER & LAP BELT				
		Helmet Use Eye Protection		Helmet Compliance Tint Compliance				
02	900	Injury Severity		Airbag				
	0	Injury NO APPARENT INJURY Ejected Ejection Path NOT EJECTED NOT APP		NON DEPLOYED Trapped/Extricated LICABLE NOT TRAPPED				
		NOT TRANSPORTED		EMS Agency Identifier Date of Death	EMS Run #			
		Dietrac	ted By Source		Time of Death			
	Distracted By Action Distracted By Action							
		NOT DISTRACTED						
		Non Motorist Striking	g Unit # Location					

WISCONSIN MOTOR VEHICLE CRASH REPORT

WAUKESHA COUNTY SHERIFFS DEPT 515 WEST MORELAND BOULEVARD WAUKESHA, WI 53187 (262) 548-7117

Crash Date 11/19/2021

		Prior Action					
		Action					
	INDIVIDUAL						
TIND	亘						
5	\geq						
	Ξ						
		Action Other		To/From School			
	1	Drug & Alcohol NO	ected Alcohol Use	Suspected Drug Use NO			
		Alcohol Test Given	Alcohol Test Type	•		Alcohol Test Results	
		TEST NOT GIVEN			I =		
		Drug Test Given TEST NOT GIVEN Drug Test Tyl		Drug Test Res			
05	900	Drug Type	'		•		
	0						
		Individual Condition					
		APPEARED NORMAL					