

CFBatch-Cover-w10

*Type of Report:* AUTO ACCIDENT

PayorID: WI00000104 Entity: Menomonee Falls

State: WI

DATE OF LOSS: 11/18/21

LOSS STREET : HWY 145

LOSS CITY : MENOMONEE FALLS

POLICE DEPT.: MENOMONEE FALLS PD

REPORT NUM. : 21-033717

Image Name: WI00000104\_3331084670\_211215\_2184794.tif



3331084670

1PL0PGFB35

21-033717

# WISCONSIN MOTOR VEHICLE CRASH REPORT

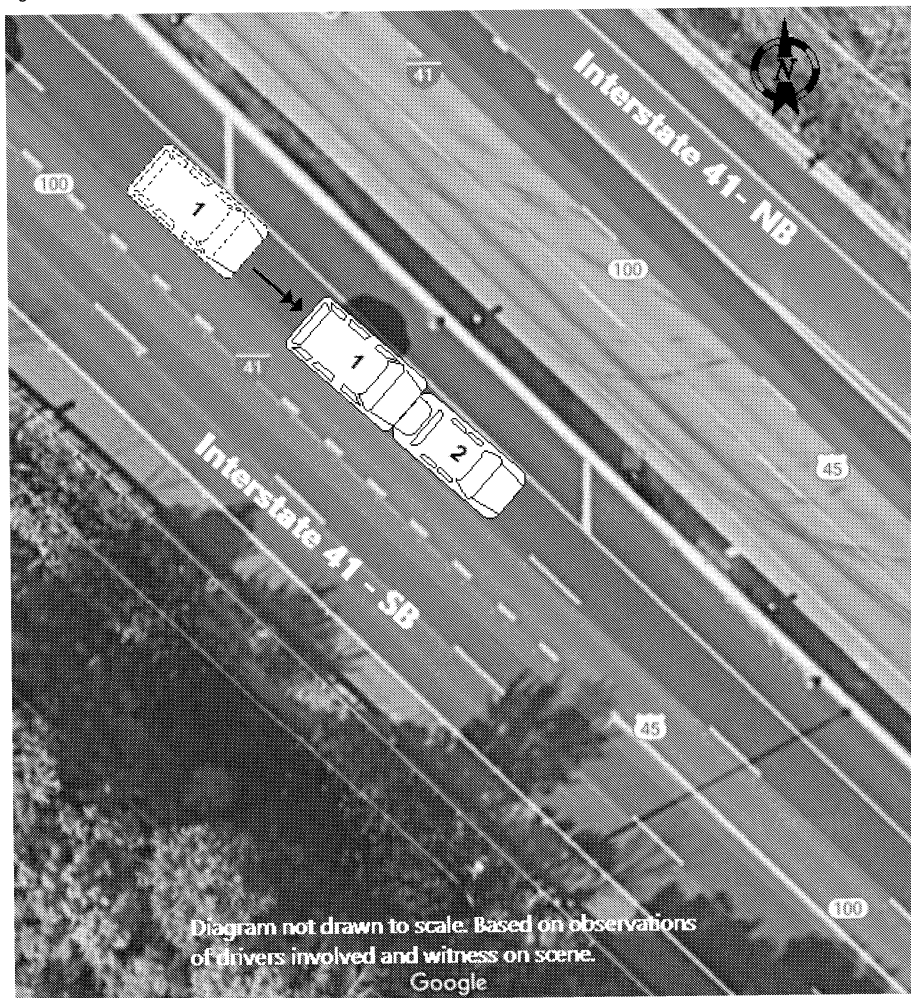
MENOMONEE FALLS POLICE DEPARTM  
W156 N8480 PILGRIM RD  
MENOMONEE FALLS, WI 53051  
(262) 532-8700

1PL0PGFB35

|                                                |                                      |                                                  |  |                                         |  |                                                         |                                              |
|------------------------------------------------|--------------------------------------|--------------------------------------------------|--|-----------------------------------------|--|---------------------------------------------------------|----------------------------------------------|
| Document Number Override                       |                                      | Primary Crash Document #                         |  | Agency Crash Number<br><b>21-033717</b> |  | Investigating Officer/Deputy<br><b>OFFICER J. ROWEN</b> |                                              |
| Crash Date<br><b>11/18/2021</b>                |                                      | Crash Time<br><b>07:08 AM</b>                    |  | Date Arrived<br><b>11/18/2021</b>       |  | Time Arrived<br><b>07:18 AM</b>                         |                                              |
| Date Notified<br><b>11/18/2021</b>             |                                      | Time Notified<br><b>07:10 AM</b>                 |  | Total Units<br><b>02</b>                |  | Total Injured<br><b>01</b>                              | Total Killed<br><b>00</b>                    |
| <input type="checkbox"/> On Emergency          | <input type="checkbox"/> Hit and Run | <input checked="" 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<br><b>NO</b>         |  | Tags                                                    |                                              |
| <input checked="" type="checkbox"/> Reportable |                                      | Crash Type<br><b>DT4000 (STANDARD CRASH)</b>     |  |                                         |  | <input type="checkbox"/> Amended                        | <input type="checkbox"/> Secondary Crash     |

## Description

Diagram



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 AND 2 WERE TRAVELING SOUTHBOUND ON I-41. UNIT TWO SLOWED DUE TO TRAFFIC CONGESTION. UNIT 1 DID NOT SLOW, AND STRUCK UNIT 2 FRONT TO REAR.

1PL0PGFB35

21-033717

# WISCONSIN MOTOR VEHICLE CRASH REPORT

MENOMONEE FALLS POLICE DEPARTM  
W156 N8480 PILGRIM RD  
MENOMONEE FALLS, WI 53051  
(262) 532-8700

## Location

|                                                                                                                                 |                                    |                                   |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------|
| ON 12600 RAMP IH41 SB<br>211 FT E<br>OF IH41 SB<br>(OTHER 12600)<br><br>IN THE VILLAGE OF MENOMONEE FALLS<br>IN WAUKESHA COUNTY | Latitude<br><b>43.163511639</b>    | Longitude<br><b>-88.068565736</b> |
|                                                                                                                                 | X Coordinate<br><b>413133.9375</b> | Y Coordinate<br><b>4779527</b>    |
|                                                                                                                                 | Structure Type<br><b>OTHER</b>     |                                   |

## Crash Scene

|                                                           |                                                |                                                                       |                                       |
|-----------------------------------------------------------|------------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| First Harmful Event<br><b>MOTOR VEH IN TRANSPORT</b>      |                                                | First Harmful Event Location<br><b>ON ROADWAY</b>                     |                                       |
| Manner of Collision<br><b>03 - FRONT TO REAR</b>          |                                                | Light Condition<br><b>DAYLIGHT</b>                                    |                                       |
| Road Surface Condition(s)<br><b>DRY</b>                   |                                                | Roadway Factor(s)<br><br><b>BACKUP DUE TO REGULAR CONGESTION</b>      |                                       |
| Environment Factor(s)<br><b>GLARE</b>                     |                                                |                                                                       |                                       |
| Weather Condition(s)<br><b>CLEAR</b>                      |                                                |                                                                       |                                       |
| Animal Type                                               |                                                | Relation To Trafficway<br><b>TRAFFICWAY - ON ROAD</b>                 |                                       |
| Crash Classification - Location<br><b>PUBLIC PROPERTY</b> |                                                | Crash Classification - Jurisdiction<br><b>NO SPECIAL JURISDICTION</b> |                                       |
| Tribal Land                                               |                                                | Access Control<br><b>FULL CONTROL</b>                                 | Special Study                         |
| Within Interchange Area<br><b>NO</b>                      | Junction Location<br><b>NON-JUNCTION</b>       | Intersection Type<br><b>NOT AN INTERSECTION</b>                       |                                       |
| Closure Type<br><b>LANE CLOSURE</b>                       |                                                | Reasons for Closure                                                   |                                       |
| Date Initial Lane/Rd Closed<br><b>11/18/2021</b>          | Time Initial Lane/Rd Closed<br><b>07:18 AM</b> | <b>LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS</b>                           |                                       |
| Date All Lanes Open<br><b>11/18/2021</b>                  | Time All Lanes Open<br><b>08:00 AM</b>         | Date Scene Cleared<br><b>11/18/2021</b>                               | Time Scene Cleared<br><b>08:00 AM</b> |

## Unit Summary

|            |                                                                     |                                          |                                                       |                            |                                                      |  |
|------------|---------------------------------------------------------------------|------------------------------------------|-------------------------------------------------------|----------------------------|------------------------------------------------------|--|
| UNIT<br>01 | Unit Status<br><b>IN TRANSIT</b>                                    |                                          | Vehicle Operating As Classification<br><b>D CLASS</b> |                            | Unit Type<br><b>AUTOMOBILE</b>                       |  |
|            | Vehicle Type<br><b>(SPORT) UTILITY VEHICLE</b>                      |                                          |                                                       |                            | Operating As Endorsements                            |  |
|            | Total Occs<br><b>1</b>                                              | Train/Bus # Recorded                     | Total # Citations Issued<br><b>1</b>                  | Total Trailers<br><b>0</b> | Total HazMat Types<br><b>0</b>                       |  |
|            | Insurance?<br><b>YES</b>                                            | Direction Of Travel<br><b>SOUTHBOUND</b> | <input type="checkbox"/> Pre CrashTire Mark           | Speed Limit<br><b>70</b>   | Total Lanes<br><b>4</b>                              |  |
|            | Most Harmful Event: Collision With<br><b>MOTOR VEH IN TRANSPORT</b> |                                          | Special Function<br><b>NO SPECIAL FUNCTION</b>        |                            | Emergency Motor Vehicle Use<br><b>NOT APPLICABLE</b> |  |
|            | Traffic Way<br><b>DIVIDED HWY W/TRAFFIC BARRIER</b>                 |                                          | Traffic Control<br><b>NO CONTROL</b>                  |                            | Traffic Control Inoperative/Missing<br><b>NO</b>     |  |
|            | Surface Type<br><b>CONCRETE</b>                                     |                                          | Road Curvature<br><b>STRAIGHT</b>                     |                            | Road Grade<br><b>LEVEL</b>                           |  |
|            | Truck Bus or HazMat<br><b>NO</b>                                    |                                          |                                                       |                            |                                                      |  |

## Vehicle

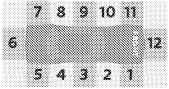
|    |                                                           |                                       |                     |                                             |
|----|-----------------------------------------------------------|---------------------------------------|---------------------|---------------------------------------------|
| 01 | License Plate Number<br><b>AEK4623</b>                    | Plate Type<br><b>AUT - AUTOMOBILE</b> | St<br><b>WI</b>     | Country of Issuance<br><b>UNITED STATES</b> |
|    | Vehicle Identification Number<br><b>1FMCU9J95JUD30516</b> | Make<br><b>FORD</b>                   | Year<br><b>2018</b> | Model<br><b>ESCAPE</b>                      |

1PL0PGFB35

21-033717

# WISCONSIN MOTOR VEHICLE CRASH REPORT

MENOMONEE FALLS POLICE DEPARTM  
W156 N8480 PILGRIM RD  
MENOMONEE FALLS, WI 53051  
(262) 532-8700

|                                        |                                                                            |                                                                                                                                                        |                                          |
|----------------------------------------|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|
| UNIT<br>VEHICLE                        | Color<br><b>BLK - BLACK</b>                                                | Body Style<br><b>UT - SPORT UTILITY VEHICLE</b>                                                                                                        | Bus Use                                  |
|                                        | Initial Contact Point<br><b>12 - FRONT</b>                                 | Vehicle Damage                                                                                                                                         |                                          |
|                                        | Extent Of Damage<br><b>DISABLING DAMAGE</b>                                | <b>01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT</b>  |                                          |
|                                        | Towed Due To Damage<br><b>TOWED DUE TO DISABLING DAMAGE</b>                | Vehicle Removed By<br><b>ROSKOPF'S TOWING</b>                                                                                                          |                                          |
|                                        | What Driver Was Doing<br><b>GOING STRAIGHT</b>                             | Vehicle Factors                                                                                                                                        |                                          |
| Driver Prior Action Other              | <b>NOT APPLICABLE</b>                                                      |                                                                                                                                                        |                                          |
| UNIT<br>VEHICLE                        | Driver Actions<br><b>FOLLOWING TOO CLOSE</b>                               |                                                                                                                                                        |                                          |
|                                        |                                                                            |                                                                                                                                                        |                                          |
| 01                                     | Owner Name<br><b>KRISTINE D WEBER<br/>(248) 804-7032</b>                   | Owner Address<br><b>W178N9728 RIVERSBEND CIR W<br/>GERMANTOWN, WI 53022 , US</b>                                                                       |                                          |
| <b>Sequence Of Events</b>              |                                                                            |                                                                                                                                                        |                                          |
| 01                                     | Event<br><b>MOTOR VEH IN TRANSPORT</b>                                     |                                                                                                                                                        |                                          |
| 02                                     | Event                                                                      |                                                                                                                                                        |                                          |
| 03                                     | Event                                                                      |                                                                                                                                                        |                                          |
| 04                                     | Event                                                                      |                                                                                                                                                        |                                          |
| UNIT                                   | <b>Policy Holder</b>                                                       |                                                                                                                                                        |                                          |
|                                        | Insurance Company<br><b>MEEMIC-INSURANCE-CO</b>                            | Individual<br><b>KRISTINE WEBER</b>                                                                                                                    |                                          |
| UNIT<br>INDIVIDUAL                     | <b>Individual</b>                                                          |                                                                                                                                                        |                                          |
|                                        | Driver<br><b>KRISTINE D WEBER<br/>(248) 804-7032</b>                       | Citations Issued<br><b>1</b>                                                                                                                           | Sex<br><b>FEMALE</b>                     |
|                                        |                                                                            | Date of Birth<br><b>03/23/1992</b>                                                                                                                     | Race<br><b>WHITE</b>                     |
|                                        | Address<br><b>W178N9728 RIVERSBEND CIR W<br/>GERMANTOWN, WI 53022 , US</b> | Driver License Number<br><b>W1605049260302</b><br><b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>                                                       |                                          |
| 01                                     | <b>Safety Equipment</b>                                                    |                                                                                                                                                        |                                          |
|                                        | On Duty Crash                                                              |                                                                                                                                                        | Safety Equipment                         |
|                                        | Row<br><b>01 - FRONT ROW</b>                                               | Seat Position<br><b>07 - LEFT</b>                                                                                                                      | <b>SHOULDER &amp; LAP BELT</b>           |
|                                        | Helmet Use                                                                 |                                                                                                                                                        | Helmet Compliance                        |
|                                        | Eye Protection                                                             |                                                                                                                                                        | Tint Compliance                          |
|                                        | <b>Injury</b><br><b>POSSIBLE INJURY</b>                                    |                                                                                                                                                        | Airbag<br><b>NON DEPLOYED</b>            |
| Ejected<br><b>NOT EJECTED</b>          |                                                                            | Ejection Path<br><b>NOT EJECTED/NOT APPLICABLE</b>                                                                                                     | Trapped/Extricated<br><b>NOT TRAPPED</b> |
| Medical Transport<br><b>EMS GROUND</b> |                                                                            | EMS Agency Identifier<br><b>6000480</b>                                                                                                                | EMS Run #<br><b>272104461</b>            |

1PL0PGFB35

21-033717

# WISCONSIN MOTOR VEHICLE CRASH REPORT

MENOMONEE FALLS POLICE DEPARTM  
W156 N8480 PILGRIM RD  
MENOMONEE FALLS, WI 53051  
(262) 532-8700

|                                                |                                                             |                         |                                     |                                                        |                                 |                |
|------------------------------------------------|-------------------------------------------------------------|-------------------------|-------------------------------------|--------------------------------------------------------|---------------------------------|----------------|
| UNIT<br>INDIVIDUAL<br>01<br>001                | Hospital<br><b>FROEDTERT COMMUNITY MEMORIAL HOSPITA</b>     |                         | Date of Death                       |                                                        | Time of Death                   |                |
|                                                | <b>Distracted By</b> Distracted By Source<br><b>UNKNOWN</b> |                         |                                     |                                                        |                                 |                |
|                                                | Distracted By Action<br><b>UNKNOWN</b>                      |                         |                                     |                                                        |                                 |                |
|                                                | <b>Non Motorist</b>                                         |                         | Striking Unit #                     |                                                        | Location                        |                |
|                                                | Prior Action                                                |                         |                                     |                                                        |                                 |                |
|                                                | Action                                                      |                         |                                     |                                                        |                                 |                |
|                                                | Action Other                                                |                         |                                     |                                                        |                                 | To/From School |
|                                                | <b>Drug &amp; Alcohol</b>                                   |                         | Suspected Alcohol Use<br><b>NO</b>  |                                                        | Suspected Drug Use<br><b>NO</b> |                |
|                                                | Alcohol Test Given<br><b>TEST NOT GIVEN</b>                 |                         | Alcohol Test Type                   |                                                        | Alcohol Test Results            |                |
|                                                | Drug Test Given<br><b>TEST NOT GIVEN</b>                    |                         | Drug Test Type                      |                                                        | Drug Test Results               |                |
| Drug Type                                      |                                                             |                         |                                     |                                                        |                                 |                |
| Individual Condition<br><b>APPEARED NORMAL</b> |                                                             |                         |                                     |                                                        |                                 |                |
| <b>Violations</b>                              |                                                             |                         |                                     |                                                        |                                 |                |
| UTC Number<br><b>BH0167753</b>                 |                                                             | Issue To?<br><b>001</b> | Statute Number<br><b>346.14(1m)</b> | Description<br><b>AUTOMOBILE FOLLOWING TOO CLOSELY</b> |                                 |                |

## Unit Summary

|            |                                                                     |                                          |                                                       |                            |                                                      |  |
|------------|---------------------------------------------------------------------|------------------------------------------|-------------------------------------------------------|----------------------------|------------------------------------------------------|--|
| UNIT<br>02 | Unit Status<br><b>IN TRANSIT</b>                                    |                                          | Vehicle Operating As Classification<br><b>D CLASS</b> |                            | Unit Type<br><b>AUTOMOBILE</b>                       |  |
|            | Vehicle Type<br><b>PASSENGER CAR</b>                                |                                          |                                                       |                            | Operating As Endorsements                            |  |
|            | Total Occs<br><b>1</b>                                              | Train/Bus # Recorded                     | Total # Citations Issued<br><b>0</b>                  | Total Trailers<br><b>0</b> | Total HazMat Types<br><b>0</b>                       |  |
|            | Insurance?<br><b>YES</b>                                            | Direction Of Travel<br><b>SOUTHBOUND</b> | <input type="checkbox"/> <b>Pre CrashTire Mark</b>    | Speed Limit<br><b>70</b>   | Total Lanes<br><b>4</b>                              |  |
|            | Most Harmful Event: Collision With<br><b>MOTOR VEH IN TRANSPORT</b> |                                          | Special Function<br><b>NO SPECIAL FUNCTION</b>        |                            | Emergency Motor Vehicle Use<br><b>NOT APPLICABLE</b> |  |
|            | Traffic Way<br><b>DIVIDED HWY W/TRAFFIC BARRIER</b>                 |                                          | Traffic Control<br><b>NO CONTROL</b>                  |                            | Traffic Control Inoperative/Missing<br><b>NO</b>     |  |
|            | Surface Type<br><b>CONCRETE</b>                                     |                                          | Road Curvature<br><b>STRAIGHT</b>                     |                            | Road Grade<br><b>LEVEL</b>                           |  |
|            | Truck Bus or HazMat<br><b>NO</b>                                    |                                          |                                                       |                            |                                                      |  |

## Vehicle

|                                       |  |                                       |                 |                                             |
|---------------------------------------|--|---------------------------------------|-----------------|---------------------------------------------|
| License Plate Number<br><b>874VXY</b> |  | Plate Type<br><b>AUT - AUTOMOBILE</b> | St<br><b>WI</b> | Country of Issuance<br><b>UNITED STATES</b> |
|---------------------------------------|--|---------------------------------------|-----------------|---------------------------------------------|

02

1PL0PGFB35

21-033717

# WISCONSIN MOTOR VEHICLE CRASH REPORT

MENOMONEE FALLS POLICE DEPARTM  
W156 N8480 PILGRIM RD  
MENOMONEE FALLS, WI 53051  
(262) 532-8700

|                    |                               |                                                              |                                                                                           |                                              |                         |
|--------------------|-------------------------------|--------------------------------------------------------------|-------------------------------------------------------------------------------------------|----------------------------------------------|-------------------------|
| UNIT<br>VEHICLE    | 02                            | Vehicle Identification Number<br><b>4S4BSACC3J3337451</b>    | Make<br><b>SUBARU</b>                                                                     | Year<br><b>2018</b>                          | Model<br><b>OUTBACK</b> |
|                    |                               | Color<br><b>GRY - GRAY</b>                                   | Body Style<br><b>UT - SPORT UTILITY VEHICLE</b>                                           | Bus Use                                      |                         |
|                    |                               | Initial Contact Point<br><b>06 - REAR</b>                    | Vehicle Damage<br><b>05 - RIGHT REAR CORNER, 06 - REAR, 07 - LEFT REAR CORNER</b>         |                                              |                         |
|                    |                               | Extent Of Damage<br><b>DISABLING DAMAGE</b>                  |                                                                                           |                                              |                         |
|                    |                               | Towed Due To Damage<br><b>TOWED DUE TO DISABLING DAMAGE</b>  | Vehicle Removed By<br><b>ROSKOPF'S TOWING</b>                                             |                                              |                         |
|                    |                               | What Driver Was Doing<br><b>GOING STRAIGHT</b>               | Vehicle Factors                                                                           |                                              |                         |
|                    |                               | Driver Prior Action Other                                    | <b>NOT APPLICABLE</b>                                                                     |                                              |                         |
| UNIT<br>VEHICLE    | 02                            | Driver Actions<br><b>NO CONTRIBUTING ACTION</b>              |                                                                                           |                                              |                         |
|                    | 02                            | Owner Name<br><b>MELISSA L NETTESHEIM<br/>(262) 349-5356</b> | Owner Address<br><b>486 RITGER CIR<br/>ALLENTON, WI 53002 , US</b>                        |                                              |                         |
| UNIT               |                               | <b>Sequence Of Events</b>                                    |                                                                                           |                                              |                         |
|                    | 01                            | Event<br><b>MOTOR VEH IN TRANSPORT</b>                       |                                                                                           |                                              |                         |
|                    | 02                            | Event                                                        |                                                                                           |                                              |                         |
|                    | 03                            | Event                                                        |                                                                                           |                                              |                         |
|                    | 04                            | Event                                                        |                                                                                           |                                              |                         |
| UNIT               |                               | <b>Policy Holder</b>                                         |                                                                                           |                                              |                         |
|                    |                               | Insurance Company<br><b>WEST-BEND-MUTUAL-INS-CO</b>          | Individual<br><b>MELISSA NETTESHEIM</b>                                                   |                                              |                         |
|                    |                               | <b>Individual</b>                                            |                                                                                           |                                              |                         |
| UNIT<br>INDIVIDUAL |                               | Driver<br><b>MELISSA L NETTESHEIM<br/>(262) 349-5356</b>     | Citations Issued<br><b>0</b>                                                              | Sex<br><b>FEMALE</b>                         |                         |
|                    |                               |                                                              | Date of Birth<br><b>10/08/1984</b>                                                        | Race<br><b>WHITE</b>                         |                         |
|                    |                               | Address<br><b>486 RITGER CIR<br/>ALLENTON, WI 53002 , US</b> | Driver License Number<br><b>N3255528486802</b><br>STATE: WISCONSIN COUNTRY: UNITED STATES |                                              |                         |
|                    |                               |                                                              |                                                                                           |                                              |                         |
| 02                 |                               | <b>Safety Equipment</b>                                      |                                                                                           | On Duty Crash                                |                         |
|                    |                               | Safety Equipment                                             |                                                                                           |                                              |                         |
|                    |                               | Row<br><b>01 - FRONT ROW</b>                                 | Seat Position<br><b>07 - LEFT</b>                                                         | <b>SHOULDER &amp; LAP BELT</b>               |                         |
|                    |                               | Helmet Use                                                   |                                                                                           | Helmet Compliance                            |                         |
|                    |                               | Eye Protection                                               |                                                                                           | Tint Compliance                              |                         |
|                    |                               | <b>Injury</b>                                                |                                                                                           | Injury Severity<br><b>NO APPARENT INJURY</b> |                         |
|                    | Airbag<br><b>NON DEPLOYED</b> |                                                              |                                                                                           |                                              |                         |
|                    | Ejected<br><b>NOT EJECTED</b> | Ejection Path<br><b>NOT EJECTED/NOT APPLICABLE</b>           |                                                                                           | Trapped/Extricated<br><b>NOT TRAPPED</b>     |                         |

1PL0PGFB35

21-033717

# WISCONSIN MOTOR VEHICLE CRASH REPORT

MENOMONEE FALLS POLICE DEPARTM  
W156 N8480 PILGRIM RD  
MENOMONEE FALLS, WI 53051  
(262) 532-8700

|                                                |                                                            |                |                                                                        |                   |                                 |                                    |
|------------------------------------------------|------------------------------------------------------------|----------------|------------------------------------------------------------------------|-------------------|---------------------------------|------------------------------------|
| UNIT<br>INDIVIDUAL<br>02<br>002                | Medical Transport<br><b>NOT TRANSPORTED</b>                |                | EMS Agency Identifier                                                  |                   | EMS Run #                       |                                    |
|                                                | Hospital                                                   |                | Date of Death                                                          |                   | Time of Death                   |                                    |
|                                                | <b>Distracted By</b>                                       |                | Distracted By Source<br><b>NOT APPLICABLE (NOT DISTRACTED)</b>         |                   |                                 |                                    |
|                                                | Distracted By Action<br><b>NOT DISTRACTED</b>              |                |                                                                        |                   |                                 |                                    |
|                                                | <b>Non Motorist</b>                                        |                | Striking Unit #                                                        |                   | Location                        |                                    |
|                                                | Prior Action                                               |                |                                                                        |                   |                                 |                                    |
|                                                | Action                                                     |                |                                                                        |                   |                                 |                                    |
|                                                | Action Other                                               |                |                                                                        |                   |                                 | To/From School                     |
|                                                | <b>Drug &amp; Alcohol</b>                                  |                | Suspected Alcohol Use<br><b>NO</b>                                     |                   | Suspected Drug Use<br><b>NO</b> |                                    |
|                                                | Alcohol Test Given<br><b>TEST NOT GIVEN</b>                |                | Alcohol Test Type                                                      |                   | Alcohol Test Results            |                                    |
| Drug Test Given<br><b>TEST NOT GIVEN</b>       |                                                            | Drug Test Type |                                                                        | Drug Test Results |                                 |                                    |
| Drug Type                                      |                                                            |                |                                                                        |                   |                                 |                                    |
| Individual Condition<br><b>APPEARED NORMAL</b> |                                                            |                |                                                                        |                   |                                 |                                    |
| <b>Witness</b>                                 |                                                            |                |                                                                        |                   |                                 |                                    |
| WITN 01<br>ESS                                 | Individual<br><b>STEPHANIE A SHEEHAN</b><br>(262) 357-1721 |                | Address<br><b>814 PARK MANOR CT</b><br><b>CEDARBURG, WI 53012 , US</b> |                   |                                 | Date of Birth<br><b>07/07/1991</b> |