CFBatch-Cover-w10

Type of Report: AUTO ACCIDENT

PayorID: WI00000252 Entity: Pleasant Prairie

State: WI

DATE OF LOSS: 11/12/21

LOSS STREET: UNKN AND UNKN

LOSS CITY : KENOSHA

POLICE DEPT.: PLEASANT PRAIRE PD

REPORT NUM. : 21-16032

Image Name: WI00000252_3331070449_211215_2183843.tif



3331070449

7LL190C3GG

21-16032

WISCONSIN MOTOR VEHICLE CRASH REPORT

	Document Number Override	Primary Crash D	Oocument #] [] []			Investigating Officer/Deputy OFFICER B. ARZIKOVIC Time Arrived 12:17 PM			
GG	Crash Date 11/12/2021	Crash Time 12:07 PM		1		l l				
7LL190C3GG	Date Notified 11/12/2021	Time Notified 12:09 PM		Total U	nits	Total Injured	Total Injured Total Kille		ÞÉ	
.190	On Emergency Hit	and Run	☑ Lane Closu	ure	Work Zone	Trailer	or To	owed	Reporting Threshold	
7LL	Government Property	Active Sc	hool Zone	School NO	Bus Related	Tags				
	Reportable	Crash Type DT4000 (STA	NDARD CRASH	H)		Amend	ed		Secondary Crash	
	Description Diagram					-	Page	nstruction	D.	
	NOT DRAWN	TO SCAL	E				Keco	mstraction	ру	
	**	inc	_				Photo B, A	os By RZIKOVI	C #190	
				7	76TH ST		Additi PHO	ional Inforn	nation DY CAMERA VIDEO	
	UNIT	UNIT 1	UNIT 1							
		สักอิ								
	UNIT 2	9								
		94TH AVE								
		M								
	I, a sworn law enforceme									
{	UNIT 1 AND 2 WERE STOPPED AT W/B AND MADE CONTACT WITH U	THEIR RESPECTI NIT 2'S PASSENG	VE STOP SIGNS, L ER SIDE.	JNIT 2 MC	OVED INTO THE INTERS	ECTION N/B. UNIT	1 EN	TERED INT	O THE INTERSECTION	

WISCONSIN MOTOR VEHICLE **CRASH REPORT**

Location											
ON 94TH AVE						Latitude			Longitu		
21 FT S OF 76TH ST IN THE VILLAGE OF PLEASANT PRAIRIE IN KENOSHA COUNTY					42.5654		-87.921493147				
					1	X Coordinate					
					Structure NO STR	Type UCTURE					
Crash Scene											
First Harmful Event						First Harn	nful Event	Location			
MOTOR VEH IN TRA	NSPOR	т				ON ROA	DWAY				
Manner of Collision						Light Con	dition		-		
01 - ANGLE						DAYLIG	НТ				
Road Surface Condition(5)					Roadway	Factor(s)				
WET						-					
Environment Factor(s)						1					
NONE						NONE					
Weather Condition(s)						7					
RAIN											
Animal Type						Relation T	o Trafficw	ay			
								ON ROAD			
Crash Classification - Loc PUBLIC PROPERTY	cation					1	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION				
Tribal Land						Access C				Special Study	
Mishin Internal and Adam	1.6.	nction Location			Interced	NO CON	ITROL				
Within Interchange Area NO	1	TERSECTION			1	ion Type WAY INTEI	RSECTIO	N			
Closure Type				Reas	ons for Clo	sure					
LANE CLOSURE						·					
Date Initial Lane/Rd Clos 11/12/2021	ed .	Time Initial Lane/Rd Close 12:17 PM	:d	LAW	ENFOR	CEMENT, 1	row TRL	ICK, FIRE/E	MS		
Date All Lanes Open		Time All Lanes Open		Date:	Scene Cle	ared	Ť	ime Scene Cle	ared		
11/12/2021		12:59 PM		11/12	2/2021		1	2:59 PM			
Unit Summary							:_				
Unit Status					_	Classification	1	Unit Type	NOU E		
IN TRANSIT			100	LASS					As Endorse	emente	
Vehicle Type (SPORT) UTILITY VE	HICL E							Operating	AS Elidorse	menta	
Total Occs		Train/Bus # Recorded	Tota	l # Cita	tions Issue	ed	Total Tra	nilers	Total Ha	zMat Types	
3			1				0		0		
Insurance?		Direction Of Travel	\dashv	Pre	CrashTir	re	Speed L	imit	Total Lar	nes	
YES		WESTBOUND			Mark	. –	35		2		
Most Harmful Event: Coll				cial Fur	iction	CTION			y Motor Vel		
MOTOR VEH IN TRA	NSPOR	.I ————————————————————————————————————		fic Cont						ative/Missing	
TWO-WAY, NOT DIV	DED		1	OP SIG				NO NO	inoi mopere	ALLY COMMODING	
Surface Type	<u> </u>		Roa	d Curva	ature			Road Grad	le		
BLACKTOP (BITUMI	NOUS)		STF	RAIGH	Τ_			LEVEL			
Truck Bus or HazMat							-				
NO Vehicle	-4		* 4	· · ·	********	* 9*7.4	185		(x)	remarka in social and the second	
License Plate Num		Section of the sectio		te Type	4. **	(%°, '	St	Country of I			
	D-01				; JTOMOB	ILE	wi	UNITED S			
989LUT Vehicle Identification 4S4BRCSC7D3	n Numbe	er	Mai			 -	Year	Model			
S 4S4BRCSC7D3			su	BARU	J		2013				

7LL190C3GG

21-16032

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Color	j	Body Style Bus Use							
		BLK - BLACK		UT - SPORT UTILITY VEHICLE							
	ш	Initial Contact Point		Vehicle Damage							
느	7	12 - FRONT		01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 10 - LEFT SIDE FRONT,							
UNIT	VEHICLE	Extent Of Damage		01 - RIGHT FRONT CORNER, 02 - RIG	HT SIDE FRONT, 10 - LEFT SIDE FRONT,						
ן ר	Œ	MINOR DAMAGE		11 - LEFT FRONT CORNER, 12 - FROI	N I						
		Towed Due To Damage		Vehicle Removed By							
		NOT TOWED		OPERATOR							
	1	What Driver Was Doing		Vehicle Factors	<u> </u>						
		GOING STRAIGHT		Veriliae i actors							
		Driver Prior Action Other		NOT APPLICABLE							
	ì	Driver Prior Action Other		NOT ALL LIONDEL							
		Driver Actions									
		FAILED TO YIELD RIGHT-0)F-WAY								
_	VEHICLE	TAILED TO TILLD RIGHT-C	71°-4474.1								
UNIT	2										
5	出										
	×5										
	Į.	Owner Name		Owner Address							
_	-	PAULUS F VAN HEIJNINGE	:N	3621 75TH ST							
01	0.	(262) 697-7554		KENOSHA, WI 53142 , US							
	1	Sequence Of Events			· · · · · · · · · · · · · · · · · · ·						
	1 -	Event									
	01	MOTOR VEH IN TRANSPO	RT								
		Event	·		······································						
	02										
		Event									
	Event										
		Event									
	04	LYGIK									
	€.										
-		Dallate Halland		gripe in the state of the state							
=			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								
N N		Insurance Company		Individual							
UNIT		Insurance Company AMERICAN AUTO ASSOC									
IND		Insurance Company		Individual							
INO		Insurance Company AMERICAN AUTO ASSOC Individual Driver		Individual PAULUS VAN HEIJNINGEN							
IND	And the second s	Insurance Company AMERICAN AUTO ASSOC Individual Driver ZOE JOHANNA VANHEIJN		Individual PAULUS VAN HEIJNINGEN							
INN	And the second s	Insurance Company AMERICAN AUTO ASSOC Individual Driver		Individual PAULUS VAN HEIJNINGEN Citations Issued	Sex						
	And the second s	Insurance Company AMERICAN AUTO ASSOC Individual Driver ZOE JOHANNA VANHEIJN		Individual PAULUS VAN HEIJNINGEN Citations Issued 1	Sex FEMALE						
	And the second s	Insurance Company AMERICAN AUTO ASSOC Individual Driver ZOE JOHANNA VANHEIJN (262) 697-7554		Individual PAULUS VAN HEIJNINGEN Citations Issued 1 Date of Birth 08/22/2004	Sex FEMALE Race						
UNIT LINU	And the second s	Insurance Company AMERICAN AUTO ASSOC Individual Driver ZOE JOHANNA VANHEIJN		Individual PAULUS VAN HEIJNINGEN Citations Issued 1 Date of Birth 08/22/2004 Driver License Number V5259900480209	Sex FEMALE Race WHITE						
		Insurance Company AMERICAN AUTO ASSOC Individual Driver ZOE JOHANNA VANHEIJN (262) 697-7554 Address		Individual PAULUS VAN HEIJNINGEN Citations Issued 1 Date of Birth 08/22/2004 Driver License Number	Sex FEMALE Race WHITE						
	INDINIDUAL	Insurance Company AMERICAN AUTO ASSOC Individual Driver ZOE JOHANNA VANHEIJN (262) 697-7554 Address 3621 75TH ST		Individual PAULUS VAN HEIJNINGEN Citations Issued 1 Date of Birth 08/22/2004 Driver License Number V5259900480209	Sex FEMALE Race WHITE						
	INDIVIDUAL	Insurance Company AMERICAN AUTO ASSOC Individual Driver ZOE JOHANNA VANHEIJN (262) 697-7554 Address 3621 75TH ST KENOSHA, WI 53142 , US	INGEN	Individual PAULUS VAN HEIJNINGEN Citations Issued 1 Date of Birth 08/22/2004 Driver License Number V5259900480209 STATE: WISCONSIN COUNTRY: UN	Sex FEMALE Race WHITE						
	INDIVIDUAL	Insurance Company AMERICAN AUTO ASSOC Individual Driver ZOE JOHANNA VANHEIJN (262) 697-7554 Address 3621 75TH ST KENOSHA, WI 53142 , US	INGEN	Individual PAULUS VAN HEIJNINGEN Citations Issued 1 Date of Birth 08/22/2004 Driver License Number V5259900480209	Sex FEMALE Race WHITE						
	INDIVIDUAL	Insurance Company AMERICAN AUTO ASSOC Individual Driver ZOE JOHANNA VANHEIJN (262) 697-7554 Address 3621 75TH ST KENOSHA, WI 53142 , US	INGEN	Individual PAULUS VAN HEIJNINGEN Citations Issued 1 Date of Birth 08/22/2004 Driver License Number V5259900480209 STATE: WISCONSIN COUNTRY: UN	Sex FEMALE Race WHITE						
	INDIVIDUAL	Insurance Company AMERICAN AUTO ASSOC Individual Driver ZOE JOHANNA VANHEIJN (262) 697-7554 Address 3621 75TH ST KENOSHA, WI 53142 , US fety Equipment Row	INGEN Frash Seat Position	Individual PAULUS VAN HEIJNINGEN Citations Issued 1 Date of Birth 08/22/2004 Driver License Number V5259900480209 STATE: WISCONSIN COUNTRY: UN	Sex FEMALE Race WHITE						
	INDIVIDUAL	Insurance Company AMERICAN AUTO ASSOC Individual Driver ZOE JOHANNA VANHEIJN (262) 697-7554 Address 3621 75TH ST KENOSHA, WI 53142 , US Fety Equipment Row 01 - FRONT ROW	INGEN	Individual PAULUS VAN HEIJNINGEN Citations Issued 1 Date of Birth 08/22/2004 Driver License Number V5259900480209 STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT	Sex FEMALE Race WHITE						
	INDIVIDUAL	Insurance Company AMERICAN AUTO ASSOC Individual Driver ZOE JOHANNA VANHEIJN (262) 697-7554 Address 3621 75TH ST KENOSHA, WI 53142 , US fety Equipment Row	INGEN Frash Seat Position	Individual PAULUS VAN HEIJNINGEN Citations Issued 1 Date of Birth 08/22/2004 Driver License Number V5259900480209 STATE: WISCONSIN COUNTRY: UN	Sex FEMALE Race WHITE						
	INDIVIDUAL	Insurance Company AMERICAN AUTO ASSOC Individual Driver ZOE JOHANNA VANHEIJN (262) 697-7554 Address 3621 75TH ST KENOSHA, WI 53142 , US Fety Equipment Row 01 - FRONT ROW Helmet Use	INGEN Frash Seat Position	Individual PAULUS VAN HEIJNINGEN Citations Issued 1 Date of Birth 08/22/2004 Driver License Number V5259900480209 STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance	Sex FEMALE Race WHITE						
	INDIVIDUAL	Insurance Company AMERICAN AUTO ASSOC Individual Driver ZOE JOHANNA VANHEIJN (262) 697-7554 Address 3621 75TH ST KENOSHA, WI 53142 , US Fety Equipment Row 01 - FRONT ROW	INGEN Frash Seat Position	Individual PAULUS VAN HEIJNINGEN Citations Issued 1 Date of Birth 08/22/2004 Driver License Number V5259900480209 STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT	Sex FEMALE Race WHITE						
TINO	INDIVIDUAL 8	Insurance Company AMERICAN AUTO ASSOC Individual Driver ZOE JOHANNA VANHEIJN (262) 697-7554 Address 3621 75TH ST KENOSHA, WI 53142 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection	Crash Seat Position 07 - LEFT	Individual PAULUS VAN HEIJNINGEN Citations Issued 1 Date of Birth 08/22/2004 Driver License Number V5259900480209 STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance	Sex FEMALE Race WHITE						
	INDIVIDUAL 8	Insurance Company AMERICAN AUTO ASSOC Individual Driver ZOE JOHANNA VANHEIJN (262) 697-7554 Address 3621 75TH ST KENOSHA, WI 53142 , US fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection	Frash Seat Position 07 - LEFT	Individual PAULUS VAN HEIJNINGEN Citations Issued 1 Date of Birth 08/22/2004 Driver License Number V5259900480209 STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance	Sex FEMALE Race WHITE						
TINO	INDIVIDUAL	Insurance Company AMERICAN AUTO ASSOC Individual Driver ZOE JOHANNA VANHEIJN (262) 697-7554 Address 3621 75TH ST KENOSHA, WI 53142 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Injury Sev NO APP	Prash Seat Position 07 - LEFT erity ARENT INJURY	Individual PAULUS VAN HEIJNINGEN Citations Issued 1 Date of Birth 08/22/2004 Driver License Number V5259900480209 STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance	Sex FEMALE Race WHITE						
TINO	INDIVIDUAL 8	Insurance Company AMERICAN AUTO ASSOC Individual Driver ZOE JOHANNA VANHEIJN (262) 697-7554 Address 3621 75TH ST KENOSHA, WI 53142 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Ejected Injury Injury Sev NO APP	Prash Seat Position 07 - LEFT erity ARENT INJURY Ejection Path	Individual PAULUS VAN HEIJNINGEN Citations Issued 1 Date of Birth 08/22/2004 Driver License Number V5259900480209 STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED	Sex FEMALE Race WHITE IITED STATES						
TINO	INDIVIDUAL 8	Insurance Company AMERICAN AUTO ASSOC Individual Driver ZOE JOHANNA VANHEIJN (262) 697-7554 Address 3621 75TH ST KENOSHA, WI 53142 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Ejected NOT EJECTED Injury	Prash Seat Position 07 - LEFT erity ARENT INJURY	Individual PAULUS VAN HEIJNINGEN Citations Issued 1 Date of Birth 08/22/2004 Driver License Number V5259900480209 STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED	Sex FEMALE Race WHITE SITED STATES Trapped/Extricated NOT TRAPPED						
TINU	INDIVIDUAL 8	Insurance Company AMERICAN AUTO ASSOC Individual Driver ZOE JOHANNA VANHEIJN (262) 697-7554 Address 3621 75TH ST KENOSHA, WI 53142 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Ejected Injury Injury Sev NO APP	Prash Seat Position 07 - LEFT erity ARENT INJURY Ejection Path	Individual PAULUS VAN HEIJNINGEN Citations Issued 1 Date of Birth 08/22/2004 Driver License Number V5259900480209 STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED	Sex FEMALE Race WHITE IITED STATES						

WISCONSIN MOTOR VEHICLE PLEASANT PRAIRIE POLICE DEPT **CRASH REPORT**

8600 GREEN BAY ROAD **PLEASANT PRAIRIE, WI 53158** (262) 694-7105

	<u></u>	Hospital			Date of Death		Time of Death	· · · - ·				
	· .	Distra	cted By Source	ce								
	1	Distracted By UNKNOWN										
	!	Distracted By Action UNKNOWN										
		Non Motorist Strikin	g Unit#	Location								
		Prior Action										
		Action										
		Action										
	INDIVIDUAL											
UNIT	巨											
	2											
	2											
		Action Other						To/From School				
		Suspe	cted Alcohol	Use	Suspected Drug Use							
		Drug & Alcohol NO Alcohol Test Given		Alachal Toot Time	NO		Alachal Toot Baguita					
		TEST NOT GIVEN		Alcohol Test Type	3		Alcohol Test Results					
	· · · · · · · · · · · · · · · · · · ·	Drug Test Given Drug Test Typ TEST NOT GIVEN		Drug Test Type		Drug Test Results	3	-				
7	997	Drug Type										
_	0											
		Individual Condition			•							
	The family is	APPEARED NORMAL										
		ndividual										
		Passenger PAIGE NICOLE NORTON (262) 914-8129			Citations Issued		Sex					
	7				0		FEMALE					
_	Ž				Date of Birth 05/09/2005		Race WHITE					
EN S	INDIVIDUA	Address 7515 37TH AVE KENOSHA, WI 53142 , US			Driver License Number	r						
_					N6356740566905 STATE: WISCONSIN COUNTRY: UNITED STATES							
		,	, , , , , , , , , , , , , , , , , , , ,									
	Sa	fety Equipment	ity Crash		Safety Equipment							
	-	Row	Seat P	osition	SHOULDER & LAP	BELT						
		02 - SECOND ROW	07 - L									
		Helmet Use			Helmet Compliance							
	,	Eye Protection			Tint Compliance							
	-	·										
7	002		Injury Severity Injury NO APPARENT INJURY			Airbag NON DEPLOYED						
		Ejected	Ejection Pa		· · · · · · · · · · · · · · · · · · ·		Trapped/Extricated					
	ì	NOT EJECTED Medical Transport	NOT EJE	CTED/NOT APPI	LICABLE EMS Agency Identifier		NOT TRAPPED EMS Run #					
		NOT TRANSPORTED			and rigolog Identifier		EIVIS KUN #					
		Hospital	-		Date of Death		Time of Death					
	L							44/40/0004				

WISCONSIN MOTOR VEHICLE **CRASH REPORT**

1		Die	stracted By Source							
).	Distracted By	suacied by Source	,						
		Distracted By Action								
		Non Motorist Str	riking Unit#	Location						
		Prior Action								
		Action					_			
	A									
UNIT	INDIVIDUAL									
5	2									
	Z									
	-	Action Other	<u> </u>					Ta (Faran Cabas)		
	;	Action Other						To/From School		
	1	Drug & Alcohol NO	spected Alcohol U	se	Suspected Drug Use					
		Alcohol Test Given		Alcohol Test Type		<u>. </u>	Alcohol Test Results			
	1	TEST NOT GIVEN Drug Test Given	····	Drug Test Type		Drug Test Results				
	1	TEST NOT GIVEN				Drug Toot Trocuito				
2	002	Drug Type								
	1	Individual Condition								
		APPEARED NORMAL								
	اي م د د	Individual Passenger ALLISON R MEYER			Citations Issued		Sex	10 a 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	A.				0 FEMALE Date of Birth Race					
E	INDIVIDUAL				Date of Birth Race WHITE					
UNIT	2	Address 7834 6TH AVE			Driver License Number					
	Z	KENOSHA, WI 53143 , US								
	j.	On Duty Crash			Safety Equipment					
	Sat	fety Equipment	·							
		Row 01 - FRONT ROW	Seat Po 09 - RI		SHOULDER & LAP I					
		Helmet Use			Helmet Compliance					
		Eye Protection			Tint Compliance		• •			
_	(r)	lnju	ury Severity	······································	Airbag					
0	003	Injury NO	D APPARENT II	NJURY	NON DEPLOYED		L.T.,			
	1 1.1	NOT EJECTED	I -	III CTED/NOT APPL	ICABLE		Trapped/Extricated NOT TRAPPED			
		Medical Transport NOT TRANSPORTED)		EMS Agency Identifier		EMS Run #			
		Hospital			Date of Death Time of Death					
		Dis	tracted By Source	,		. .				
	 	Distracted By		·				4440/0004		
Wisco	nsin N	Motor Vehicle Crash		This report	t does not include any CJI	S data.	Crash Date	11/12/2021		

21-16032

7LL190C3GG WISCONSIN MOTOR VEHICLE PLEASANT PRAIRIE POLICE DEPT 8600 GREEN RAY ROAD **CRASH REPORT**

8600 GREEN BAY ROAD PLEASANT PRAIRIE, WI 53158 (262) 694-7105

	printer in consequent									
		Distracted By Action								
		Non Motorist Strik	king Unit#	Location			 			
		Prior Action				-				
	mental co	Action								
_	M									
INO	₽ P									
_	NDIVIDUAL									
	; -									
		Action Other						To/From School		
			pected Alcoho							
		Drug & Alcohol NO	peciea Alcono	i Use	Suspected Drug Use NO					
		Alcohol Test Given		Alcohol Test Ty	уре	_	Alcohol Te	est Results		
	Water - 1	TEST NOT GIVEN Drug Test Given Drug Test Ty)	Drug Test F	Results			
	TEST NOT GIVEN									
01	003	Drug Type								
		Individual Condition								
		APPEARED NORMAL								
		∐ Violations	200 F. C.				11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	waga kangga kanggan		
	_			statute Number 46.18(3)	Description FAIL/YIELD RIGHT/	<u> </u>	·* • · · · · · · · · · · · · · · · · · ·	<u>* 1 </u>		
1	O Lini	t Summary			7742712257401177					
		Status			Vehicle Operating As Classi	fication	Unit Type			
		RANSIT cle Type			D CLASS		AUTOM	OBILE As Endorsements		
05		ORT) UTILITY VEHICLE				Operating	As chaoisements			
	Tota 1	l Occs	Train/Bus # I	Recorded	Total # Citations Issued		al Trailers	Total HazMat Types 0		
		rance?	Direction Of	Travel	0 0 Speed L		ed Limit	Total Lanes		
Ę	YES	t Harmful Event: Collision W	NORTHBO	UND	Mark 25		LEmorgan	2		
5		TOR VEH IN TRANSPO			NO SPECIAL FUNCTIO	N		Emergency Motor Vehicle Use NOT APPLICABLE		
	ı	ic Way			Traffic Control STOP SIGN		Traffic Co	ntrol Inoperative/Missing		
	TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS)				Road Curvature		Road Gra	de		
					STRAIGHT		LEVEL	LEVEL		
	NO	k Bus or HazMat								
	, "		स व क्षा है । स व क्षा के क्षा		and the second s	Long All	A Complete to			
		License Plate Number ALJ3186			Plate Type AUT - AUTOMOBILE	St GA	Country of UNITED			
05	2	Vehicle Identification Numb		······································	Make	Year	Model			
0	02	KNDETCA24M7160362			KIA MOTORS CORPO	RA 202	1 SEL	SEL		
		Color			Body Style		Bus Use			

WISCONSIN MOTOR VEHICLE **CRASH REPORT**

	Ш	Initial Contact Point		Vehicle Damage							
UNIT	VEHICLI	04 - RIGHT SIDE REAR Extent Of Damage		03 - RIGHT SIDE MIDDLE, 04 -	RIGHT SIDE REAR, 05 - RIGHT REAR CORNER						
¬	Ŋ.	FUNCTIONAL DAMAGE			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
	47,00	Towed Due To Damage		Vehicle Removed By							
		TOWED DUE TO DISABL What Driver Was Doing	ING DAMAGE	PRO TOWING Vehicle Factors							
		GOING STRAIGHT		Venicle Factors							
		Driver Prior Action Other		NOT APPLICABLE							
TINO	VEHICLE	Driver Actions NO CONTRIBUTING ACT	ION								
02	.05	Owner Name MICHELLE LYNNE SHIMI (623) 693-9421	KUS	Owner Address 6039 10TH ST # 103 KENOSHA, WI 53144 , US							
		 Sequence Of Events									
	10	Event MOTOR VEH IN TRANSP			e de la composition de la participa de la composition de la deficie de la composition de la composition de la designation de la composition della compositio						
	02	Event									
		Event Control									
	04	Event									
<u>-</u>		Policy Holder									
UNIT		Insurance Company USAA-CASUALTY-INS-C	0	Individual MICHELLE SHIMKUS							
		Individual									
		Driver		Citations Issued	Sex						
		MICHELLE LYNNE SHIMI	KUS	o .	FEMALE						
-	DUA	(623) 693-9421		Date of Birth 04/28/1973	Race WHITE						
TNO TNO	INDIWIDUAL	Address 6039 10TH ST # 103 KENOSHA, WI 53144 , U	s	Driver License Number \$5225527364800 STATE: WISCONSIN COUNTRY: UNITED STATES							
	Sai	On Duty	Crash	Safety Equipment	Safety Equipment						
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT							
		Helmet Use		Helmet Compliance							
		Eye Protection		Tint Compliance							
05	004	Injury S	everity PPARENT INJURY	Airbag NON DEPLOYED							
		Ejected	Ejection Path		Trapped/Extricated						
		NOT EJECTED	NOT EJECTED/NOT A		NOT TRAPPED						
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #						
1		Hospital	· <u> </u>	Date of Death	Time of Death						
	1.00	· · · · ·		Bate of Beat.	1,1110 57 55411.						

WISCONSIN MOTOR VEHICLE CRASH REPORT

								, ,				
i			Distracted By Source	e								
1	-	Distracted By	NOT APPLICABL	.E (NOT DISTRA	CTED)							
		Distracted By Action	'									
ľ	1	NOT DISTRACTED										
ł	100											
ŀ	360	Non Motorist	Striking Unit#	Location								
	3.	NON MOTORISE										
	44	Prior Action	<u> </u>									
	1											
}		Action										
		Action										
	i ar											
	7											
l <u>⊢</u>	3											
>	9											
IND	INDINIDUAL											
-	₽											
	违											
	1 2											
		Action Other						To/From School				
	" s #"											
	1	· · · · · · · · · · · · · · · · · · ·	Suspected Alcohol L	lse	Suspected Drug Use			1				
	1	Drug & Alcohol	NO		NO							
	8,4			,								
		Alcohol Test Given		Alcohol Test Type	•		Alcohol Test Results					
	1	TEST NOT GIVEN										
	1,14	Drug Test Given		Drug Test Type	Drug Test Resu							
	10	TEST NOT GIVEN				}						
1	-	Drug Type		1		1		 				
05	004	Drug Type										
	1											
		Individual Condition										
		individual Condition										
	1	APPEARED NORM	ΜΔΙ									
	4	7 7 = 7 1 = 7										
Ι,			-									
		ness										
	Indiv	ridual	INUDT		Address			Date of Birth				
2		ELSEA LEANN SCH	TIVILU I		7908 33RD AVE	ше		02/07/1996				
	(262	2) 818-2042			KENOSHA, WI 53142	, 05						
WITN												
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