

5JL2BDBC8C

2022-407329

WISCONSIN MOTOR VEHICLE CRASH REPORT

TOWN OF MADISON POLICE DEPT
2120 FISH HATCHERY ROAD
MADISON, WI 53713
(608) 210-7262

5JL2BDBC8C

Document Number Override		Primary Crash Document #		Agency Crash Number		Investigating Officer/Deputy OFFICER T. DART	
Crash Date 10/05/2022		Crash Time 09:23 AM		Date Arrived 10/05/2022		Time Arrived 09:25 AM	
Date Notified 10/05/2022		Time Notified 09:24 AM		Total Units 06		Total Injured 02	Total Killed 00
<input type="checkbox"/> On Emergency	<input checked="" type="checkbox"/> Hit and Run	<input 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 NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

<p>Diagram</p>	<p>Reconstruction By</p> <p>Photos By</p> <p>Additional Information NONE</p>
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☒ I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

UNIT 1, UNIT 2 AND UNIT 3 WERE TRAVELING WEST BOUND WEST OF TODD DR. TOWN OF MADISON, DANE COUNTY, WI. UNIT 1 ALLEGEDLY CHANGED LANES QUICKLY IN FRONT OF UNIT 2. UNIT 2 TRIED TO STOP BUT STRUCK UNIT 1. UNIT 2 WAS THEN STRUCK FROM BEHIND BY UNIT 3. UNIT 1 AND UNIT 3 LEFT THE SCENE PRIOR TO POLICE ARRIVAL. UNIT 4 SLOWED QUICKLY AND ATTEMPTED TO CHANGE LANES TO AVOID THE ACCIDENT. UNIT 5 SLOWED QUICKLY AND ATTEMPTED TO CHANGE LANES BUT STRUCK UNIT 4. UNIT 5 WAS THEN STRUCK BY UNIT 6 FROM BEHIND. OPERATOR OF UNIT 2 STATED HE COULD NOT RECALL EITHER UNIT 1 OR UNIT 3 THAT WAS INVOLVED IN THE ACCIDENT. OPERATOR OF UNIT 4 STATED HE OBSERVED THE ACCIDENT AHEAD OF HIM AND SERVED TO AVOID OTHER VEHICLES STOPPING AND WAS STRUCK BY UNIT 5. OPERATOR OF UNIT 4 STATED HE DID NOT RECALL ANY INFORMATION ABOUT UNIT 1 OR UNIT 3. OPERATOR OF UNIT 5 STATED SHE TRIED TO SLOW AND MOVE PAST UNIT 4 BUT UNIT 4 ALSO CHANGED LANES AND THEY COLLIDED. OPERATOR OF UNIT 5 STATED SHE WAS THEN STRUCK FROM BEHIND BY UNIT 6. OPERATOR OF UNIT 6 STATED SHE BELIEVED SHE WAS TRAVELING 70 MPH IN THE FLEX LANE AND STRUCK A WHITE VEHICLE AFTER TRAFFIC STOPPED QUICKLY. WI DOT CAMERAS DID NOT HAVE CAMERAS VIEWING THE AREA OF THE ACCIDENT. OPERATOR OF UNIT 5 WAS POSITIVE SHE WAS STRUCK BY UNIT 6. TIRE MARKS SHOW UNIT 6 AT THE POINT OF IMPACT WAS IN A MIDDLE LANE NOT THE FLEX LANE.

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Location

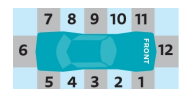
ON USH12 WB 540 FT W OF TODD DR IN THE TOWN OF MADISON IN DANE COUNTY	Latitude 43.035453414	Longitude -89.424678622
	X Coordinate 302477.96875	Y Coordinate 4767605
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 03 - FRONT TO REAR		Light Condition DAYLIGHT	
Road Surface Condition(s) DRY		BACKUP DUE TO PRIOR NON-RECURRING INCIDENT	
Environment Factor(s) NONE			
Weather Condition(s) CLEAR			
Animal Type		Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY		Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land		Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION	

Unit Summary

UNIT 01	Unit Status HIT AND RUN		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? UNKNOWN	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 4	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way DIVIDED HWY MEDIAN W/BARRIER		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade DOWNHILL	
	Truck Bus or HazMat NO					
	Vehicle					
	UNIT 01 VEHICLE 01	License Plate Number		Plate Type	St	Country of Issuance
Vehicle Identification Number		Make	Year	Model		
Color		Body Style		Bus Use		
Initial Contact Point 06 - REAR		Vehicle Damage				
Extent Of Damage VEHICLE NOT AT SCENE		16 - VEHICLE NOT AT SCENE				



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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing UNKNOWN		Vehicle Factors UNKNOWN	
	Driver Prior Action Other			
	Driver Actions UNKNOWN			
01	Owner Name		Owner Address , ,	
Sequence Of Events				
01 02 03 04	Event OTHER NON-COLLISION			
	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
Individual				
UNIT INDIVIDUAL	Driver		Citations Issued 0	Sex
			Date of Birth	Race
	Address , ,		Driver License Number	
01 006	Safety Equipment		On Duty Crash	
			Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	RESTRAINT USE UNKNOWN	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	Injury		Injury Severity NO APPARENT INJURY	Airbag NOT APPLICABLE
	Ejected NOT APPLICABLE	Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT APPLICABLE
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #
Hospital		Date of Death	Time of Death	
Distracted By		Distracted By Source		
Distracted By Action				
Non Motorist		Striking Unit #	Location	

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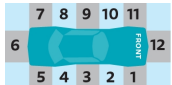
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UNIT 01	INDIVIDUAL	Prior Action			
		Action			
		Action Other			To/From School
	006	Drug & Alcohol		Suspected Alcohol Use	Suspected Drug Use
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	Alcohol Test Results
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results
		Drug Type			
		Individual Condition NOT OBSERVED			

Unit Summary

UNIT 02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type (SPORT) UTILITY VEHICLE				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 4	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way DIVIDED HWY MEDIAN W/BARRIER		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade DOWNHILL	
	Truck Bus or HazMat NO					

UNIT 02	VEHICLE	Vehicle					
		License Plate Number FUND0		Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES	
		Vehicle Identification Number 2LMDJ8JK8DBL40725		Make LINCOLN	Year 2013	Model MX	
		Color SIL - SILVER (ALUMINUM)		Body Style UT - SPORT UTILITY VEHICLE		Bus Use	
		Initial Contact Point 06 - REAR		Vehicle Damage			
		Extent Of Damage DISABLING DAMAGE		06 - REAR, 12 - FRONT			
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By SCHMIDT'S TOW			
		What Driver Was Doing OTHER					

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UNIT VEHICLE	Driver Prior Action Other SLOWING QUICKLY AND CHANGING LANES		Vehicle Factors NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
	Owner Name NATHAN DAVID FUNDERBURG (920) 883-7313		Owner Address 1942 GOLDEN BELL DR SUAMICO, WI 54313 , US	
	Sequence Of Events			
UNIT 02	01	Event MOTOR VEH IN TRANSPORT		
	02	Event MOTOR VEH IN TRANSPORT		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company HASTINGS-MUTUAL-INS-CO		Individual NATHAN FUNDERBURG	
UNIT INDIVIDUAL	Individual			
	Driver NATHAN DAVID FUNDERBURG (920) 883-7313		Citations Issued 0	Sex MALE
			Date of Birth 08/31/1979	Race
	Address 1942 GOLDEN BELL DR SUAMICO, WI 54313 , US		Driver License Number F5366247931105 STATE: WISCONSIN COUNTRY: UNITED STATES	
UNIT 02	Safety Equipment		On Duty Crash	
			Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	Injury		Injury Severity POSSIBLE INJURY	Airbag DEPLOYED-FRONT
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #
	Hospital		Date of Death	Time of Death
	Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)	
Distracted By Action NOT DISTRACTED				
Non Motorist		Striking Unit #	Location	

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UNIT 02	INDIVIDUAL	Prior Action			
		Action			
		Action Other			To/From School
	001	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	Alcohol Test Results
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results
		Drug Type			
		Individual Condition APPEARED NORMAL			

Unit Summary

UNIT 03	Unit Status HIT AND RUN		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? UNKNOWN	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 4	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way DIVIDED HWY MEDIAN W/BARRIER		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade DOWNHILL	
	Truck Bus or HazMat NO					

UNIT 03	VEHICLE	Vehicle				
		License Plate Number		Plate Type	St	Country of Issuance
		Vehicle Identification Number		Make	Year	Model
		Color		Body Style		Bus Use
		Initial Contact Point 99 - UNKNOWN		Vehicle Damage		
		Extent Of Damage VEHICLE NOT AT SCENE		16 - VEHICLE NOT AT SCENE		
		Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR		
		What Driver Was Doing UNKNOWN				

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UNIT VEHICLE	Driver Prior Action Other		Vehicle Factors UNKNOWN	
	Driver Actions UNKNOWN			
	Owner Name		Owner Address , ,	
	Sequence Of Events			
03 03 01 02 03 04	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
	Event			
UNIT INDIVIDUAL	Individual			
	Driver		Citations Issued 0	Sex
			Date of Birth	Race
	Address , ,		Driver License Number	
	Safety Equipment		On Duty Crash	
			Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	RESTRAINT USE UNKNOWN	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	03 007	Injury		Injury Severity NO APPARENT INJURY
Ejected NOT APPLICABLE		Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT APPLICABLE
Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #	
Hospital		Date of Death	Time of Death	
Distracted By		Distracted By Source		
Distracted By Action				
Non Motorist		Striking Unit #	Location	
Prior Action				

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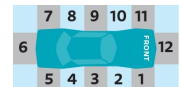
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UNIT 03 007	INDIVIDUAL	Action			
		Action Other			
		To/From School			
		Suspected Alcohol Use		Suspected Drug Use	
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	
		Alcohol Test Results			
		Drug Test Given TEST NOT GIVEN		Drug Test Type	
Drug Test Results					
Drug Type					
Individual Condition					
NOT OBSERVED					

Unit Summary

UNIT 04	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER VAN				Operating As Endorsements	
	Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 4	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way DIVIDED HWY MEDIAN W/BARRIER		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade DOWNHILL	
	Truck Bus or HazMat NO					

UNIT 04 VEHICLE	Vehicle			
	License Plate Number AGM3295		Plate Type AUT - AUTOMOBILE	St WI
	Vehicle Identification Number 2C4RDGCG6JR266997		Make DODGE	Year 2018
	Color BLK - BLACK		Body Style VN - VAN	Country of Issuance UNITED STATES
	Initial Contact Point 07 - LEFT REAR CORNER		Model GRAND CARA	
	Extent Of Damage FUNCTIONAL DAMAGE		Bus Use	
	Towed Due To Damage NOT TOWED		Vehicle Damage 06 - REAR, 07 - LEFT REAR CORNER, 08 - LEFT SIDE REAR	
	What Driver Was Doing OTHER		Vehicle Removed By OPERATOR	
Driver Prior Action Other SLOWING QUICKLY AND CHANGING LANES T		Vehicle Factors NOT APPLICABLE		



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UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION	
		Owner Name MGI LEASING INC	Owner Address 119 STATE ROAD 11 SHULLSBURG, WI 53586 , US
UNIT	04	Sequence Of Events	
		01	Event OTHER NON-COLLISION
		02	Event MOTOR VEH IN TRANSPORT
		03	Event
UNIT	04	Policy Holder	
		Insurance Company EMPLOYERS-MUTUAL-CASUALTY-CO	Organization/Company MGI LEASING INC
UNIT	INDIVIDUAL	Individual	
		Driver KURT ROBERT PHILLIPS (920) 819-3124	Citations Issued 0
		Date of Birth 09/10/1967	Sex MALE
		Address 3125 SEAFARER WAY SUAMICO, WI 54173 , US	Driver License Number P4125166733002 STATE: WISCONSIN COUNTRY: UNITED STATES
UNIT	04	Safety Equipment	
		On Duty Crash	Safety Equipment SHOULDER & LAP BELT
		Row 01 - FRONT ROW	Seat Position 07 - LEFT
		Helmet Use	Helmet Compliance
		Eye Protection	Tint Compliance
		Injury	
		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE
		Trapped/Extricated NOT TRAPPED	
		Medical Transport NOT TRANSPORTED	EMS Agency Identifier
Hospital	Date of Death		
Distraction			
Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			
Distracted By Action NOT DISTRACTED			
Non Motorist			
Striking Unit #	Location		
Prior Action			

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UNIT 04	INDIVIDUAL 002	Action			
		Action Other			To/From School
		Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	Alcohol Test Results
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results
		Drug Type			
		Individual Condition APPEARED NORMAL			
		Individual			
		Passenger KEITH EDWARD HUTCHINS (908) 878-2554		Citations Issued 0	Sex MALE
		Address 334 ROBBINS ST SEYMOUR, WI 54165 , US		Date of Birth 12/30/1964	
		Race WHITE			
Driver License Number H3255056447006		STATE: WISCONSIN COUNTRY: UNITED STATES			
UNIT 04	INDIVIDUAL 003	Safety Equipment		On Duty Crash	Safety Equipment
		Row 01 - FRONT ROW	Seat Position 09 - RIGHT	SHOULDER & LAP BELT	
		Helmet Use		Helmet Compliance	
		Eye Protection		Tint Compliance	
		Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED	
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #
		Hospital		Date of Death	Time of Death
		Distracted By		Distracted By Source	
		Distracted By Action			
Non Motorist	Striking Unit #		Location		
	Prior Action				

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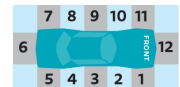
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UNIT 04 003	INDIVIDUAL	Action			
		Action Other			
		Suspected Alcohol Use NO		Suspected Drug Use NO	
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	
		Alcohol Test Results			
		Drug Test Given TEST NOT GIVEN		Drug Test Type	
		Drug Test Results			
		Drug Type			
Individual Condition APPEARED NORMAL					

Unit Summary

UNIT 05	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type (SPORT) UTILITY VEHICLE			Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 4
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE
	Traffic Way DIVIDED HWY MEDIAN W/BARRIER		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade DOWNHILL
	Truck Bus or HazMat NO				

UNIT 05 VEHICLE	Vehicle			
	License Plate Number G62MAU		Plate Type AUT - AUTOMOBILE	St NJ
	Vehicle Identification Number JF1GPAS64G8308338		Make SUBARU	Year 2016
	Color BLK - BLACK		Body Style UT - SPORT UTILITY VEHICLE	Model IMPREZA
	Initial Contact Point 01 - RIGHT FRONT CORNER		Vehicle Damage	
	Extent Of Damage DISABLING DAMAGE		01 - RIGHT FRONT CORNER, 06 - REAR	
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By SCHMIDT'S TOW	
	What Driver Was Doing OTHER		Vehicle Factors	
Driver Prior Action Other SLOWING QUICKLY AND CHANGING LANES		NOT APPLICABLE		



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UNIT 05	VEHICLE	Driver Actions NO CONTRIBUTING ACTION				
		Owner Name ELLIE ROSE GEORGE (732) 675-2678		Owner Address 117 S HAMILTON AVE APT 412 MADISON, WI 53713 , US		
		Sequence Of Events				
		01	Event OTHER NON-COLLISION			
UNIT 05	INDIVIDUAL	02	Event MOTOR VEH IN TRANSPORT			
		03	Event MOTOR VEH IN TRANSPORT			
		04	Event			
		Policy Holder				
UNIT 05	INDIVIDUAL	Insurance Company PROGRESSIVE-CLASSIC-INS-CO		Individual ELLIE GEORGE		
		Individual				
		Driver ELLIE ROSE GEORGE (732) 675-2678		Citations Issued 0	Sex FEMALE	
		Date of Birth 11/25/1999		Race WHITE		
		Address 117 S HAMILTON AVE APT 412 MADISON, WI 53713 , US		Driver License Number G26152147961994 STATE: NEW JERSEY COUNTRY: UNITED STATES		
		Safety Equipment		On Duty Crash		
		Row 01 - FRONT ROW		Seat Position 07 - LEFT	SHOULDER & LAP BELT	
		Helmet Use		Helmet Compliance		
		Eye Protection		Tint Compliance		
		UNIT 05	004	Injury		Injury Severity NO APPARENT INJURY
Ejected NOT EJECTED				Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED	
Medical Transport NOT TRANSPORTED				EMS Agency Identifier	EMS Run #	
Hospital				Date of Death	Time of Death	
Distracted By				Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED						
Non Motorist				Striking Unit #	Location	
Prior Action						

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UNIT 05	INDIVIDUAL 004	Action			
		Action Other			To/From School
		Suspected Alcohol Use NO		Suspected Drug Use NO	
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type Drug Test Results	
		Drug Type			
		Individual Condition APPEARED NORMAL			

Unit Summary

UNIT 06	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 4	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way DIVIDED HWY MEDIAN W/BARRIER		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade DOWNHILL	
	Truck Bus or HazMat NO					

UNIT 06	VEHICLE 06	Vehicle				
		License Plate Number AML2153		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number JHMZE2H71ES001982		Make HONDA	Year 2014	Model INSIGHT
		Color SIL - SILVER (ALUMINUM)		Body Style HB - HATCHBACK		Bus Use
		Initial Contact Point 12 - FRONT		Vehicle Damage		
		Extent Of Damage DISABLING DAMAGE		12 - FRONT		
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By SCHMIDT'S TOW		
		What Driver Was Doing GOING STRAIGHT		Vehicle Factors		
Driver Prior Action Other		NOT APPLICABLE				

5JL2BDBC8C

2022-407329

WISCONSIN MOTOR VEHICLE CRASH REPORT

TOWN OF MADISON POLICE DEPT
2120 FISH HATCHERY ROAD
MADISON, WI 53713
(608) 210-7262

UNIT	VEHICLE	Driver Actions OTHER CONTRIBUTING ACTION		
06	06	Owner Name ALEXANDRA OPAL BORDONA (559) 681-2534		Owner Address 2640 S STOUGHTON RD MADISON, WI 53716 , US
Sequence Of Events				
UNIT	01	Event MOTOR VEH IN TRANSPORT		
		Event		
		Event		
		Event		
UNIT	02	Event		
UNIT	03	Event		
UNIT	04	Event		
Policy Holder				
		Insurance Company GEICO-GENERAL-INS-CO	Individual ALEXANDRA BORDONA	
Individual				
UNIT	INDIVIDUAL	Driver ALEXANDRA OPAL BORDONA (559) 681-2534		Citations Issued 0
				Sex FEMALE
		Date of Birth 11/30/1996		Race WHITE
		Address 2640 S STOUGHTON RD MADISON, WI 53716 , US		Driver License Number B6350149693003 STATE: WISCONSIN COUNTRY: UNITED STATES
Safety Equipment				
		On Duty Crash	Safety Equipment	
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT
		Helmet Use	Helmet Compliance	
		Eye Protection	Tint Compliance	
06	005	Injury		Airbag
		Injury Severity SUSPECTED SERIOUS INJUR	DEPLOYED-FRONT	
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
		Medical Transport EMS GROUND	EMS Agency Identifier 6	EMS Run # 407340
		Hospital ST MARYS HOSP	Date of Death	Time of Death
		Distracted By		
		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
		Distracted By Action NOT DISTRACTED		
		Striking Unit #	Location	
		Non Motorist		
		Prior Action		

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CRASH REPORTTOWN OF MADISON POLICE DEPT
2120 FISH HATCHERY ROAD
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UNIT INDIVIDUAL	Action			
	Action Other			To/From School
	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	Alcohol Test Results
	Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results
	Drug Type			
	Individual Condition APPEARED NORMAL			

06 005