

SURVIVAL FACTORS ATTACHMENT

WDOT Traffic Crash Report Statements

Arlington, WI

HWY20FH006

(19 pages)

TRAFFIC CRASH REPORT – Statement Wisconsin Department of Transportation SP4426 7/2012	Crash Number
Name (First, Middle, Last)	Birth Date (m/d/yyyy)
John I william	
Address	Home (Area Code) Telephone Number
	Business (Area Code) Telephone Number
Cary 10 60013	
Were you the	In what direction were you heading or facing?
🗓 Driver 🗌 Passenger 🔲 Witness	North
On what highway were you traveling?	In what lane were you?
1-90 N BNd	True la 101
NARRATIVE: In your own words, explain what happened:	
sitting at about the	120 and Hote
accident ON 1-90 Because	se of traffic 4 ways on
and wmy Mirror , saw	a truck coming up
and then nit me hard	1 pullaforward to get out
NARRATIVE: In your own words, explain what happened: SITTING at about the accident on 1-90 Because and way Mirror 15aw and then hit me hard of the way on the SI	oulde)

You may draw a picture to help you explain what happened.

X	
(Signature)	(Date)

Condition at the Time	of the Crash - Circle one for	each category	Place an X where you were	
LIGHT CONDITION	WEATHER CONDITION	ROAD CONDITION	seated in this vehicle.	Unit 1
1. Daylight	1. Clear	1. Dry		2 3 1
2. Dark	2. Cloudy	2. Snow or Ice		
Dark with Street Light	ts 3. Rain	3. Wet	-	4 5 6 2
Dawn or Dusk	Snow or Ice	4. Gravel	Ì	
	5. Fog or Mist	5. Slush		7 Other Cycle
	6. Sleet	6. Muddy 7. Oily		or or
		8. Other		Bicycle
Crash Date			Approximate Time of Crash	
111119	1020		07:11	
Where were you comin	og from prior to the crash?		101.16	
		00 .	•	
Where were you going	1. ON 15 -	90 at	the MM 12	\mathcal{O}
	to?			
Portace 1	ICI			
On this trip, how long h	ave you been driving/riding	prior to this crash?		
	,	prince to this oracle.		
\$ 06-00:45	Abia bi-la O			
How often do you drive	this vehicle?			
Other				
Does your vehicle have	airbags?		Qid any airbags deploy?	
□ NO X YES			NO ☐ YES	
As far as you know wa	s there anything wrong with	this rehists and a feet		
NO TYES.	if YES explain what:	uns venicle prior to the	e crash?	
_,				
Who else was with you	at the time of the crash? For	each passenger, give	name, address, birth date and se-	at position. Use additional pages, if needed.
				, , , , , , , , , , , , , , , , , , , ,
ı				
NOONE				
700				
Were you wearing your	seat beit?		Were passengers wearing their	r seat belts?
☐ NO 🌠 YES			☐ NO ☐ YES	
What were you doing p	ior to the crash?			
5442	N traffic	waiting	$\mathcal{C}_{\mathcal{A}}$	10 - 1. 1
Did anything interfere w	rith your view at the time of the	Maria I	101 aug	the V readent
	if YES explain what:	ie crasn?	1	
	· •		J	
	ehicles nearby at the time of	the crash?		
☐ NO \\(\overline{\overli				
Did any of these vehicle	s contribute to the crash?	,		
	if YES explain how:			
How fast were you trave				
<u>o mph</u>	avoid this crash, i.e., braking			
Did you do anything to a	woid this crash, i.e., braking	turning, etc.?	, , , , , , , , , , , , , , , , , , ,	
, ,				
		~`\		
NOTION	1 conte a	0		
NOTION	1 conte a	0		
NOTION	1 conte a	Jen I		44
NOTION	1 conte a	vera mi	or Payors	attention
NOTION	1 conte a	veru m	or Payors	attention
In your opinion why did DETWIS be	this crash occur?	veru ni	or Payors	attention
In your opinion, why did Prives be Have any of the vehicles	this crash occur? hrwd rne v	veru M	-1	
In your opinion, why did Prives be Have any of the vehicles	this crash occur? hrwd rne v	veru M	-1	
In your opinion, why did Do I was be Have any of the vehicles	this crash occur? Thrwd rne v s been moved since the crash Oved the dication of alcohol within the	veru M	-1	attention april
In your opinion, why did Do Tures be Have any of the vehicles Have you taken any men NO YES,	this crash occur? The word year was been moved since the crash occur? So been moved since the crash occurs and the crash occurs.	veru M	-1	
In your opinion, why did Do Luce Leave any of the vehicles Have any of the vehicles Have you taken any mee NO YES, Do you have insurance?	this crash occur? This crash occur? See been moved since the crase occurs Oved the dication of alcohol within the if YES explain what:	h? + ruck 6 hours prior to the cr	-1	
In your opinion, why did Do The State of the vehicles Have any of the vehicles Have you taken any mee NO YES, Do you have insurance?	this crash occur? This crash occur? See been moved since the crase occurs Oved the dication of alcohol within the if YES explain what:	h? + ruck 6 hours prior to the cr	-1	
In your opinion, why did In your opinion, w	this crash occur?	h? + r wk 6 hours prior to the cr	-1	
In your opinion, why did Privals be Have any of the vehicles Have you taken any med NO YES, in Do you have insurance?	this crash occur?	h? + r wk 6 hours prior to the cr	-1	
In your opinion, why did Privals be Have any of the vehicles Have you taken any med NO YES, in Do you have insurance?	this crash occur? This crash occur. This crash occur. This crash occur. This crash oc	h? Hrwk 6 hours prior to the cr	-1	
In your opinion, why did Privals be Have any of the vehicles Have you taken any med NO YES, in Do you have insurance?	this crash occur?	h? Hrwk 6 hours prior to the cr	-1	
In your opinion, why did Privals be Have any of the vehicles Have you taken any med NO YES, in Do you have insurance?	this crash occur? This crash occur. This crash occur. This crash occur. This crash oc	h? Hrwk 6 hours prior to the cr	-1	ad onto aprin
In your opinion, why did Privals be Have any of the vehicles Have you taken any men NO YES, i Please complete reve	this crash occur? This crash occur. This crash occur. This crash occur. This crash oc	h? Fruck 6 hours prior to the cr	-1	Statement Date
In your opinion, why did In your opinion, w	this crash occur? This crash oc	h? Fruck 6 hours prior to the cr	-1	ad onto aprin

TRAFFIC CRASH REPORT – Statement		Crash No	ımber			
Wisconsin Department of Transportation SP4426 7/2012		1				
Name (First, Middle, Last)		Birth Dat	e (m/d/yyy	y)		
Tosi Daniel Perez-Ken	Les"as					
Address		Home (A	rea Code)	Telephone Num	ber	
City, State, ZIP Code		Business	(Area Co	de) Telephone N	umber	
Janesville, WI S3545						
Were you the:				ing or facing?		
☑ Driver ☐ Passenger ☐ Witness		ork	hb	6mg	190_	fowar.
On what highway were you traveling?	In what lane	were you?)			Payre
190	Jan 1	- they	~ v-	cant	lone	
NARRATIVE: In your own words, explain what happened:				"Sex		
	1	2	., 0	8-		,
From Fur access	4)	~ ¹	rie_	losti	Acting	n tem
(started seen	•			/		8×17
Every 3 topping						
V						
When Suddenly						
I saw a send and						
5 Con Cen cons go						
The ten cars go						
with into the						
ditch and tres	-					
· · · · · · · · · · · · · · · · · · ·						
Sterted on	. •					
fire,						
					•.	
	-					
•						
M						
we was		v				
₹	1					
You may draw a picture to help you explain what happened.	w. O					
You may draw a picture to help you explain what happened.	-					
\sim \sim \sim						
101						
+7		is my				
W. S. C. V.		. `				
133 en		ere.				
Maria James						
Horn DE Mr						
M						
Please complete reverse side, where applicable.	×					
riouse estiplicio reteles eles misto applicable.		/Signs			(Dat	

			151		<u>/</u>
	f the Crash - Circle one for	= =	Place an X where you were seated in this vehicle.	Unit 1	7
LIGHT CONDITION	WEATHER CONDITION	ROAD CONDITION	seated in this vehicle.	1 2 3	
1. Daylight 2. Dark	1. Clear 2. Cloudy	2. Snow or loe			
Dark with Street Lights	•	3. Wet		4 5 6 2	
4. Dawn or Dusk	4. Snow or Ice	4. Gravel			
	5. Fog or Mist	5. Slush		7 Other Cycle	
	6. Sleet	6. Muddy 7. Oily		l or	
:		8. Other	÷	Bicycle	
Crash Date			Approximate Time of Crash		
	19.20		\$ 6 V	· *	
Mhoro woro you coming	from prior to the court?		96 0 1) c~~	
Where were you consing	from prior to the crash?			,,,	
The sea	the con of	reading	to Paris	He (Madisia)	
Where were you going t	ō?		1 77		
(0)-10	P	(a)			
On this trip, how long ha	eve you been driving/riding	nrior-to this crash?	***************************************		
0		prior to this crash:			
How often do you drive	<u>```</u>				
How offen do you drive	this vehicle?	~			
Poweru	day to	(i) and	•		
Does your vehicle have			Did any airbags deploy?		
□ NO XYES	-		NO ☐ YES		
— —,	4b	distance in the second			
	there anything wrong with	unis venicle prior to the	e crash?		
_	if YES explain what:				
Who else was with you a	at the time of the crash? Fo	r each passenger, give	name, address, birth date and se	at position. Use additional pages, if needed	
Myself				,	
1					
	* ************************************			•	
Were you wearing your	seat belt?		Were passengers wearing their	r seat belts?	
☐ NO XYES			NO ☐ YES		
What were you doing pri	ior to the crash?				_
1	1 1	()			
Did southing interest	40 0	y de	ne p (l wa	cident. Toy my Be	<u>s</u> t
	th your view at the time of	ine-crash?	0.0	cident Tou my Be	~ t-
YES, I	if YES explain what:		• •	. (, , , , , , , , , , , , , , , , , ,	
Were there any other ve	hicles nearby at the time of	the crash?			The
NO ☐ YES					, –
Did any of these vehicle	s contribute to the crash?				_
	f YES explain how:				
	•				
How fast were you trave	ling?				_
$\neg \land \bigcirc$					
Did you do anything to a	void this crash, i.e., braking	1 turning etc.?			-
, , , , , , , , , , , , , , , , , , ,		,, tanning, ato			
. No					
in your opinion, why did	this crash occur?		en las brus	in a land	,
It almo.	st seem l	THE STEELS		1 40 246 6 1	τ-
con to	s lare t	> 2 to 6	30 17 4006	all te cars wit	ilma,
10-		4.00	. `		
Have any of the vehicles	D 7 & T W	- Cresk	aread).		
riave any or the vehicles	been moved since the cra	811 (ing to stop di	
NIONE		•			
	lication or alcohol within the	e 6 hours prior to the c	rash?		
	f YES explain what:				
Do you have insurance?					
	f YES list name of insur	2200 2022222	Λ		
	THE DISTRIBUTE OF INSUF	ance company:	American t	Tanily I rowane	~
Diana complete	ena nidat ti d	-1-			
riease complete reve	rse side, where applical	oie.			
	Statement Made To (Person I	lame)		Statement Date	\neg
04-4-5-4		· · · · · · · · · · · · ·		Continuent Date	
State Patrol					
Use Only	Statement Made At (Location)			Statement Time AM	A
					1
	L			<u>L_`"</u>	

TRAFFIC CRASH REPORT – Statement Wisconsin Department of Transportation	Crash Number
SP4426 7/2012	KRL114K18M
Name (First, Middle, Last)	Birth Date (m/d/yyyy)
Address	Home (Area Code) Telephone Number
Address	
BUENA PARK (A90621	Business (Area Code) Telephone Number
Were you the:	In what direction were you heading or facing?
Driver Passenger Witness	In what lane were you?
On what highway were you traveling?	III What raise word your
I Don't See my	Lig.

Condition at the Time of	the Crash - Circle one for each category	Place an X where you were	
LIGHT CONDITION	WEATHER CONDITION ROAD CONDITION	seated in this vehicle.	Unit 1
1. Daylight	1. Clear A. Dry		1 2 3 1 1
2. Dark	2. Cloudy 2. Snow or ice	ļ	
Dark with Street Lights	3. Rain 3. Wet	ĺ	4 5 6 2
Dawn or Dusk	4. Snow or Ice 4. Gravel		
	5. Fog or Mist 5. Slush 6. Muddy		7 Other Cycle
	6. Sleet 7. Oily		or
	8. Other		Bicycle
Crash Date		Approximate Time of Crash	
6-	12-2010	6:3	1 1
Where were you coming		0.3	> b
, , , , , , , , , , , , , , , , , , ,	CA		
140			
Where were you going to	- ^ .		
	Dever bad Eva	Clairle W.I	
On this trip, how long ha	ve you been driving/riding prior to this crash?	3/1/2 34	
	MA		
How often do you drive t			
now offer do you drive t	riis vericle?		
Does your vehicle have	airbags?	Did any airbags deploy?	
☐ NO ☐ YES		□-NO □ YES	
As far as you know, was	there anything wrong with this vehicle prior to the	ne crash?	
	f YES explain what:	ic orașir;	
vvno eise was with you a	t the time of the crash? For each passenger, give	e name, address, birth date and seat	position. Use additional pages, if needed.
dia O. T			
1 DOWN to	Sec Crash		
Were you wearing your s		Word passangers washing their	
☐ NO ☐ YES	out bon:	Were passengers wearing their	seat deits?
		☐ NO ☐ YES	
What were you doing pri-	or to the crash?		
Did anything interfere wit	h your view at the time of the crash?		
	YES explain what:		
	nicles nearby at the time of the crash?		
NO TYES	ilides healby at the time of the crash?		
Did any of these vehicles			
☐ NO ☐ YES, if	YES explain how:		
How fast were you traveli	ing?		
-	,		
nia you do anything to av	old this crash, i.e., braking, turning, etc.?		
· ·			
In your opinion, why did t	his crash occur?		
	NA		
	· · · · · · · · · · · · · · · · · · ·		
Have any of the vehicles	been moved since the crash?		
Have you taken any medi	cation or alcohol within the 6 hours prior to the c	rash?	
	YES explain what:		
Do you have insurance?			
	VEC list many of income		
☐ NO ☐ YES, if	YES list name of insurance company:		
Diagon served t			
riease complete rever	se side, where applicable.		
I.	Statement Made To (Person Name)		Statement Deta
	- + D + 11-01	70	Statement Date
State Patrol	tusp. J. (00) #06	/1	6/12/2020
Use Only	Statement Made At (Location)	~ 1	Statement Time
	27/70/94 MIP 121	5,5	8:30 DPM
	· · · · · · · · · · · · · · · · · · ·		

TRAFFIC CRASH REPORT – Statement Wisconsin Department of Transportation SP4426 7/2012	Crash Number KRL 114 K 18 M
Name (First, Middle, Last) Sustin N Grale	Birth Date (m/d/yyyy)
Address	Home (Area Code) Telephone Number
City, State, ZIP Code	Business (Area Code) Teléphone Number
Dane W1 , 53529 Were you the:	In what direction were you heading or facing?
☐ Driver ☐ Passenger ☐ Witness	west
On what highway were you traveling?	In what lane were you?
NARRATIVE: In your own words, explain what happened:	
NARRATIVE: In your own words, explain what happened: I was crossing the interstate of Saw a white semi driving at Cull	n county K heading west and
Saw a white semi driving at full	speal to the scene, driver of
il com nover slowed down, h	14 N.G DECT OTALES, OF THEEL
1 ded not see the second before	e impact close to trees.

You may draw a picture to help you explain what happened.



Condition at the Time of the Crash - Circle o	ne for each category	Place an X where you were	Unit 1
LIGHT CONDITION WEATHER CONDI		seated in this vehicle.	1 2 3
17 Daylight 1. Clear	2. Snow or Ice		
Z. Cloudy A. Dark with Street Lights	3. Wet	ļ	4 5 6 2
4. Dawn or Dusk 4. Snow or Ice	4. Gravel		
5. Fog or Mist	5. Slush 6. Muddy		7 Other Cycle
6. Sleet	7. Oily		or Bicycle
	8. Other		- Bioycie
Crash Date 2020		Approximate Time of Crash	
Where were you coming from prior to the cra			
Where were you going to?	Department		
Home			
On this trip, how long have you been driving/	riding prior to this crash?		
2.7	7		
How often do you drive this vehicle?			
Onl	VI SUMME		
Does your vehicle have airbags?	4 Summer	Did any airbags deploy?	1 .
□ NO □ YES //	'A	□ NO □ YES /	VA
As far as you know, was there anything wron NO YES, if YES explain wha		crash?	, , , , , , , , , , , , , , , , , , , ,
Who else was with you at the time of the cras		name, address, birth date and se	at nosition. Use additional pages, if needed
•		issing addition, bitti adic and sci	at position. Ose additional pages, a needed.
	A) d a c		
10/	None		
Were you wearing your seat belt? NO X YES		Were passengers wearing thei	r seat belts?
		NO YES	NA
What were you doing prior to the crash?	NA		
Did anything interfere with your view at the tire. NO YES, if YES explain what			
Were there any other vehicles nearby at the t			
☐ NO ☐ YES	Λ	1 A	
Did any of these vehicles contribute to the cra	ash?		
NO YES, if YES explain how		V A	
How fast were you traveling?		- ,	
	56	neh	
Did you do anything to avoid this crash, i.e., b	oraking, turning, etc.?	***	
	11	A - Not	envolved
In your opinion, why did this crash occur?		71 2001 e	211001023
Sem! Ariver wag Have any of the vehicles been moved since the	not Nevian	affection to	the read
Have any of the vehicles been moved since the	ne crash?	acjaration to	1000
and the second s	Not 11 1.	· · · · · · · · · · · · · · · · · · ·	
Have you taken any medication or alcohol wit	hin the 6 hours prior to the or	MICH OT	
NO YES, if YES explain what	•	dollf	
Do you have insurance?			
NO YES, if YES list name of	insurance company:	NA	
Please complete reverse side, where ap	plicable.		
Statement Made To (Pe	erson Name)		Statement Date
State Patrol IIISn T	2 + 420.74		C/12/20
Use Only Statement Made At (Lo	cation)		Statement Time
T 79/0/5	194 MP 120,5		Q. 20 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
L 1/1/90/	1/1 11 160/7		8 30 PM

VOLUNTARY STATEMENT

SP4590 5/2003

Name TILLET MACHINS	Case Number	
Address (Birth Date	Sex Occupation
City	Telephone Number - Home	Telephone Number - Business
Hartland		,

I, the undersigned, am not under arrest for, nor am I being detained for, any criminal offenses concerning the events I am about to make known. Without being accused of or questioned about any criminal offenses regarding the facts I am about to state, I volunteer the following information of my own free will, for whatever purposes it may serve.

STATEMENT

My family and I were troubling west on 94, and came upon this crash just after it happened. I ran up to the fire between 2 cars (one pictup) and one servi. We puried the kid and father out while the cars were on fire. I went up to grat a fire extinguisher from another semi, temporarily put out the fire. Brown the father and son up onto the road to gratic a street from a truck and Put a temporary terriquit on medics arrived and I continued to assist ass needed.

I have read each page of this statement, each page of which bears my signature, and corrections, if any, bear my initials, and I certify that the facts contained are true and correct.

Statement Made To	Made At	7:42 an	Date
Q. 4	6/12/20		
(Witness Signature)	(Date)	(Signature of Person Submitting Statement)	(Date)

TRAFFIC CRASH REPORT – Statement Wisconsin Department of Transportation SP4426 7/2012	Grash Number
Name (First, Middle, Last)	Birth Date (m/d/www)
Exel Moeson HEFT	
Address	Home (Ame Coriet Telephone Number
Clly, State, ZIP Code	Business (Area Code) Telephone Number
LONE ROCK WJ	
Were you the:	In what direction were you heading or facing?
Driver Passenger W Witness	NORTY
On what highway were you traveling?	In what lane were you?
x39. ~	CENTER
NARRATIVE: In your own words, explain what happened:	Witness Bir Tillsh
T WAS STRAIN LOAD SILVE dOWN	WEI 22320 DIT 144.0
	TOUR WAS AN FIRS
NARRATIVE: In your own words, explain what happened: I WAS STEPPED COAD SUIT down slow INTO Dupn p & Car-Kuck	- 100
SELL PLAPTE IN SIDE SOT BO HEARD SCRAMIN, FROM OTHER CA	TAND SON CALL
How scrain's from of UEX KA	R could NOT HELP.
+t-423	

You may draw a picture to help you explain what happened,



VOLUNTARY STATEMENT

SP4590 5/2003

Name Baley Venmer	Case Number	
Address	Birth Data	Sex Occupation W Witness/below
City Lindenhusse	Telephone Number - Home. A	Telephone Number - Business

I, the undersigned, am not under arrest for, nor am I being detained for, any criminal offenses concerning the events I am about to make known. Without being accused of or questioned about any criminal offenses regarding the facts I am about to state, I volunteer the following information of my own free will, for whatever purposes it may serve.

I Saw the flames and got out of thewar and pulled the boy out of the car. The boy is and pulled the boy out of the Shorlder of the Highway. From there, I was falking to Jacob With Erika and was going in and out of the ambulance to help the medical patessivals.

I have read each page of this statement, each page of which bears my signature, and corrections, if any, bear my initials, and I certify that the facts contained are true and correct.

Statement Made To	Made At	Time	Date
			6/12/20
(Witness Signature)	(Date)	(Signature of Person Submitting Statement)	(Date)

TRAFFIC CRASH REPORT – Statement	Crash Number
Wisconsin Department of Transportation	VP1 114 K 10 M
SP4426 7/2012	INCLILINION
Name (First, Middle, Last)	Birth Date (m/d/yyyy)
DAWN DENIOE MARSHALL	
Address	Home (Area Code) Telephone Number
City, State, ZIP Code	Business (Area Code) Telephone Number
CLEVETAND, OH 44120	
Were you the:	In what direction were you heading or facing?
☐ Driver ☐ Passenger ☑ Witness	I-39 N/I-90 W
On what highway were you traveling?	In what lane were you?
I-90 W/I-39 N	CENTER

NARRATIVE: In your own words, explain what happened:

You may draw a picture to help you explain what happened.

X (Signature)

Ob /12 /2020

Condition at the Time of	the Crash - Circle one for	each category	Place an X where you were	Unit 1
LIGHT CONDITION	WEATHER CONDITION	ROAD CONDITION	seated in this vehicle.	1 2 3
1. Daylight	1. Clear	1. Dry 2. Snow or Ice		
Dark Bark with Street Lights	2. Cloudy 3. Rain	3. Wet		4 5 6 2
4. Dawn or Dusk	4. Snow or Ice	4. Gravel		
	5. Fog or Mist	5. Slush 6. Muddy		7 Other Cycle
	6. Sleet	7. Oily		or Bicycle
		8. Other		1 210300
Crash Date	1		Approximate Time of Crash	
06-1	12-2020		6:58	
Where were you coming	from prior to the crash?		< 3150 G	RANT St., GARY, IN
Holiday Where were you going to	City, OHC	departure la	ecation) Love's	RANT St., GARY, IN
BEKERHE,	MI			7
On this trip, how long ha	ve you been driving/riding	prior to this crash?		
		prior to this order:		
How often do you drive to	OUKO			
now offer do you drive t	ans venicle?	•		
EVERY di	ny		I many	
Does your vehicle have	air,bags?		Did any airbags deploy?	
NO YES			NO ☐ YES	
	there anything wrong wit	n this vehicle prior to the	crash?	
_	f YES explain what:			
Who else was with you a	it the time of the crash? F	or each passenger, give r	name, address, birth date and	seat position. Use additional pages, if needed.
NO ONE	 د			
	,			
Were you wearing your	seat belt?		Were passengers wearing to	heir seat belts?
☐ NO 🔀 YES			☑ NO ☐ YES	
What were you doing pri	or to the crash?		· · · · · · · · · · · · · · · · · · ·	
5. Hing	1N Stoppe th your view at the time of	d tralls	1-90W	
Did anything interfere wi	th your view at the time of	the crash?)	
NO ☐ YES,	if YES explain what:			
· · · · · · · · · · · · · · · · · · ·	hicles nearby at the time	of the crash?		
□ NO ☑ YES	motor mounty at the time .	or the order.		
<u> </u>	s contribute to the crash?			
	if YES explain how:			
	*			
How fast were you trave		Po		
	Still 14 tra	ithe		
	void this crash, i.e., braki	ng, turning, etc.?		
In your opinion, why did	L could do this crash occur?			,
		fast unt	Ke on all	ention to the stopped
W. Jewick	COING TOO	ILO. POL	WE NAMING HILE	MIND TO THE STOPPED
treatic 11	s freat of	them.	- -	
Have any of the vehicles	s been moved since the cr	ash?		
avo any or the verticles	, 2301) moved alloc (HC C	uort:		
Have you taken any man	dication or alcohol within t	ha 6 hours prior to the	noh?	
` `		ne o nouis phoi to the cr	asnr	
<u> </u>	f YES explain what:			
Do you have insurance? ☐ NO ※ YES, i	if YES list name of insu	rance company:		
Please complete reve	rse side, where applica	able.	B.# 11	
	Statement Mode To (Dareas	- Namo\		Statement Date
	Statement Made To (Persor	D LLacoll	≱	Statement Date
State Patrol	1	バヘエイル スロノギ		6/12/2020
	Insp. J.	100 4 00		
Use Only	Statement Made At (Location 139/90/94	MP 120.5		Statement Time X AM

TRAFFIC CRASH REPORT – Statement	Crash Number
Wisconsin Department of Transportation	KRL114K18M
SP4426 7/2012 Name (First, Middle, Last)	Birth Date (m/d/yyyy)
michael John Houses	
Address	Home (Area Code) Telephone Number
Concord WH	Business (Area Code) Telephone Number
CONCORD OF	and a way a very heading or feeing?
	ection were you heading or facing?
	ne were you?
90 - West Bound	Right
NARRATIVE: In your own words, explain what happened:	111111
_	·
	_ 1
location of the second	with a company Dash
/ My behicle is equipped	with the tompath y issued
in local circles Lieux	truck 27411
CAM GMH Tras partation	a law alling many
My behicle is equipped cam GMH tras portation ask for Richard	ex surety office C sy
	= mph
The state of the s	m 1-90 Owing 10
I was headed west borner	
I was headed nest bound	
in the Right Lane, I N	esticed a traffic Slow down
In the Might course	7
in front of me and began ?	in brake the white
IN THOUT OF ME OND Began	10 BILLICE
truck in front of me Never	hospital hit a white Sul
The total of the poeter	States, III de louire jou
then a dump truck then drove	and a sedan that
wall a cold of Dellad Latter wal	000
1005 totalonas Polita to The signit	000 to tatic, att
impact dump true was torced into	trans-x truck before Rolling
them a dump truck then drove the right impact dump truc was forced into Backwords. trans-x truck hit truck	ot to thook mi.
	口信
You may draw a picture to help you explain what happened.	CATIO CAN
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3 789	183
() (% T 3 d) _	Tat
	(13) Tamp
2 1 1 1 2	
Dumple Filt	
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Thomas 1	ET S
	The
Please complete reverse side, where applicable.	6/12/2020
i lease complete reverse side, where applicable.	(Signature) (Date)
	V

Condition at the Time of the Crash - Circle one for each category	Place an X where you were Unit 1
LIGHT CONDITION WEATHER CONDITION ROAD CONDITION	seated in this vehicle.
1. Daylight Olear 1 Dry 2 Dark 2 Cloudy 2. Snow or Ice	
2. Dark 2. Cloudy 2. Snow or Ice 3. Dark with Street Lights 3. Rain 3. Wet	4 5 6 2
4 Dawn or Dusk 4 Snow or Ice 4. Gravel	
5. Slush	7 Other Cycle
6. Muddy 6. Sleet 7. Oily	or Bicycle
8. Other	Bicycle
Crash Date	Approximate Time of Crash
06/13/9090	0610
Where were you coming from prior to the crash?	
exit (as truck stop	
Where were you going to?	
Ferndale Washingto	\mathcal{N}
On this trip, how long have you been driving/riding prior to this crash?	
30 minutes	
How often do you drive this vehicle?	
every Day	
Does your vehicle have airbags?	Did any airbags deploy?
□ NO ☑ YES	NO DYES NOT in accident
As far as you know, was there anything wrong with this vehicle prior to the	o graph?
, , , ,	10/vel in crasi
vino else was with you at the time of the crash? For each passenger, give	e name, address, birth date and seat position. Use additional pages, if needed.
Were you wearing your seat belt?	Were passengers wearing their seat belts?
□ NO ☑ YES	□ NO □ YES N/A
What were you doing prior to the crash?	
	nd vehicle that caused crasm
Did anything interfere with your view at the time of the crash?	nd vehicle that caused crasm
	nd vehicle that cause chast
Did anything interfere with your view at the time of the crash?	nd vehicle that caused thas "
Did anything interfere with your view at the time of the crash? NO YES, if YES explain what:	nd vehicle that caused thas "
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