

CITY OF MILWAUKEE
RECEIVED

19

'02 FEB -5 PM 3:38

NOTICE OF INJURY

AND

CITY ATTORNEY

CLAIM FOR DAMAGES

JF MILWAUKEE
EB-4 PM 3:28
I.D.D. LEONHARDT
CITY CLERK

TO: CITY OF MILWAUKEE
c/o City Clerk
200 E. Wells, Rm. 205
Milwaukee, WI

CITY OF MILWAUKEE SIDEWALK MAINTENANCE DEPARTMENT
841 North Broadway
Milwaukee, WI

UNKNOWN EMPLOYESS

West 19

AGENT FOR STATE PROCESS SERVICE, INC.

Time of Service 3:25 am 02

Date of Service 02-04-02

Served upon Kathleen Margaret

at same address

Personal Service Substitute personal service

Corporate Service Posting

PLEASE TAKE NOTICE that on October 22, 2001, Dwight Pierce of 7869 North 60th Street, Unit A, Milwaukee, Wisconsin tripped and fell on a public sidewalk located at 4716 West Vliet Street, City of Milwaukee, County of Milwaukee, State of Wisconsin.

PLEASE TAKE FURTHER NOTICE that as a proximate result of said accident, Dwight Pierce, sustained personal injuries which necessitated medical care and attention; furthermore, these injuries may be permanent in nature.

Liability for the injuries is claimed as follows:

The City of Milwaukee and City of Milwaukee Sidewalk Maintenance Department on account of its liability for the acts of its agents and unknown employees, and particularly the City of Milwaukee Sidewalk Maintenance Department and said unknown employees, as further set in this Notice of Injury and Claim for Damages, who were acting within the scope of their employment at the time of said accident.

The said trip and fall accident was caused by the negligence

of the City of Milwaukee Sidewalk Maintenance Department on account of its unknown employees for not maintaining said public sidewalk immediately and prior to the time of said trip and fall accident.

Said unknown employees failed to maintain said public sidewalk in such a condition as is reasonably safe for public travel by a person.

As a proximate result of the above-described negligence, Dwight Pierce, sustained personal injuries to his right ankle and back causing him to incur medical bills and expenses, as well as future expenses, loss of earnings capacity and pain and suffering all to his damage in the amount of:

MEDICAL BILLS TO DATE:

St. Michaels Hospital	\$ 600.00
Integrated Billing	\$ 200.00
North Shore Radiologists	\$ 100.00
Lakeshore Medical	\$ 200.00
Kennedy Chiropractic	\$ 5,000.00
Hanger P & O	\$ 400.00

<u>FUTURE MEDICAL EXPENSES:</u>	\$ 3,000.00
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PAIN AND SUFFERING:

Past pain and suffering and disability	\$ 10,000.00
Future pain and suffering and disability	\$ 10,000.00

<u>PAST LOSS OF EARNING CAPACITY:</u>	\$ 1,500.00
<u>FUTURE LOSS OF EARNING CAPACITY:</u>	\$ 1,500.00

<u>TOTAL CLAIM:</u>	\$ 32,500.00
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WHEREFORE, Dwight Pierce, demands THIRTY TWO THOUSAND FIVE HUNDRED AND 00/100 DOLLARS (\$32,500.00) from said City of

Milwaukee, City of Milwaukee Sidewalk Maintenance Department and
unknown employees.

DATED at Milwaukee, Wisconsin this 31st day of

Jan., 2002.

BY: _____

John F. McNally
JOHN F. McNALLY
SBW#: 01013701
Attorney for Claimant

P.O. ADDRESS:


633 West Wisconsin Avenue
Suite 2000
Milwaukee, WI 53203

PH: (414) 271-5300

STATE OF WISCONSIN)
MILWAUKEE COUNTY)

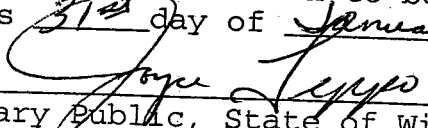
JOHN F. McNALLY, being duly sworn on oath deposes and says:

That he is one of the attorneys for the above-named claimant and that he makes this Affidavit in claimant's behalf being duly authorized to do so; that he is a resident of the City and County of Milwaukee, State of Wisconsin, that he has read the foregoing Amended Notice of Injury and Claim for Damages and believes upon information and belief that the matters stated therein are true. That the source of affiant's information are statements made by the claimant and that he has been duly authorized to verify this Amended Notice of Injury and Claim for Damages.



JOHN F. McNALLY
SBW#: 01013701

Subscribed and sworn to before me
this 31st day of January, 2002.



Notary Public, State of Wisconsin
My Commission Expires: 11/10/02