



Payment Address Document Address
24344 Network Place P.O. Box 94639
Chicago, IL 60673-1243 Cleveland, Ohio 44101-9908
Phone: (877)818-0139
Fax: (888) 781-6947

11/22/2022 10:29:00 AM

Certified Mail 9489 0090 0027 6330 8237 28 Return Receipt Requested

CITY CLERK
ATTN: CLAIMS
200 E. WELLS ST., ROOM 205
MILWAUKEE, WI 53202-3567

Your Client: CITY OF MILWAUKEE
Your Claim Number: N/A
Our Insured: MORALES, STEPHANIE
Our Claim Number: 22-2734048
Amount Subject to Reimbursement: \$4,650.70
Amount of Insured's Deductible: \$1,000

Please take this as formal notice of our subrogation rights relative to the above -captioned claim. We have completed our investigation into the facts of the above-captioned loss and find that your insured was the proximate cause of the accident.

Location of Loss: PARKED AT 2803 S. 8TH ST. MILWAUKEE, WI
Date and Time of Loss: 10/20/2022, 07:00 PM

Description of Loss: OUR INSURED'S VEHICLE WAS PARKED AND UNOCCUPIED AT 2803 S. 8TH ST. MILWAUKEE, WI AND WAS DAMAGED WHEN CITY TREE LIMBS FELL AND STRUCK OUR INSURED'S VEHICLE. WE ARE SEEKING REIMBURSEMENT FOR OUR INSURED'S VEHICLE DAMAGES.

Please make your draft payable to Progressive Universal Insurance Company as subrogee of "MORALES, STEPHANIE", in the amount stated above and mail it to the attention of the undersigned at your earliest convenience.

All supporting documentation is enclosed. Thank you for your anticipated, prompt attention to this matter.

Matthew Hayward.

Progressive Subrogation
Progressive Universal Insurance Company
Tel. 877-818-0139
Fax. 888-781-6947
GovernmentStatus@email.progressive.com

CITY OF MILWAUKEE
2022 DEC -5 PM 12:05
CITY CLERK'S OFFICE

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

Go to www.irs.gov/FormW9 for instructions and the latest information.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
PROGRESSIVE UNIVERSAL INSURANCE COMPANY

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

Individual/sole proprietor or single-member LLC

C Corporation

S Corporation

Partnership

Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is **not** disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

Other (see instructions) ▶ _____

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) 5

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.
6300 WILSON MILLS RD W33

6 City, state, and ZIP code
MAYFIELD VILLAGE, OH 44143

7 List account number(s) here (optional)

Requester's name and address (optional)

Print or type. See Specific Instructions on page 3.

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

			-						
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or

Employer identification number

3	6	-	3	7	8	9	7	8	7
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Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here

Signature of U.S. person ▶

Kae Garrett

Date ▶ *January 1, 2020*

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

Claim Payment Detail (22-2734048)

Payment Information

Disbursement Number: 785883371	Total Amount: \$3,650.70
EFT Trace Number: 715563300	Invoice Number: 103850619
Pay to the Order of: TENDER CAR AUTO BODY LLC	
Mailing Address: 1825 S KINNICKINNIC AVE MILWAUKEE, WI 53204-4028 USA	
In Payment Of: Progressive Invoice Number: 103850619	

Reviewed Summary

Issuing Rep: A123877	Approved By:
Issue Date: 11-10-22	Review Date:
Last Updated Rep: A123877	Reviewed By:

Bank Information

Type: Loss	Bank Code: CTB
Stop Reason:	Cleared: 11-15-22
Stop Date:	

Exposure Detail: COMP

Party Name: MORALES, EDUARDO	Amount Paid: \$3,650.70
Property Description: 22 TOYOTA CAMRY	Deductible Taken: \$1,000.00
Payment Type: FINAL PAYMENT	Property Damage: \$0.00
	Rental: \$0.00

Progressive Universal Insurance Co

Estimate ID
22-2734048-01
Original
Claim Number
22-2734048-01

Owner
EDUARDO MORALES

Insured
STEPHANIE MORALES

Appraiser
GIOVANI ACEVEDO
(414) 316-0860 (Work)
giovani_acevedo@progressive.com

Underwriter
Progressive Universal Insurance Co

Progressive Universal Insurance Co

Claim Number 22-2734048-01	Adjuster GARRETT BRIDGE (440) 620-5275 (Work) a168496@progressive.com	Deductible 1000.00 - Not Waived	Reported Date 10/20/2022
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Loss Date 10/20/2022	Inspection Site Tender Car West 4420 S 108th St NNW G Acevedo Greenfield, WI 53228 (414) 808-2221 (Mobile)
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2022 Toyota Camry SE 4 Door Sedan 2.5L 4 Cyl Gas Injected 8 Speed Auto Trans AWD

Exterior Color WHITE	License WI-AFH2698	VIN 4T1T11BK1NU061383	Drivable Unknown
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Odometer 12155	Mitchell Service Code 912022
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Primary Point of Impact
Left Side (9)

Options

Air Conditioning	All Wheel Drive	Alum/Alloy Wheels	AM-FM Stereo	Anti-Lock Brake Sys. (ABS)
Auto Air Condition	Automatic Headlights	Auxiliary Input	Bluetooth Wireless Connectivity	Cloth Seat
Cruise Control	Daytime Running Lights	Driver Seat With Power Lumbar Support	Driver-Front Air Bag	Dual A/C
Electric Defogger	Electronic Stability Control	First Row Bucket Seat	Heated Mirror	Keyless Entry System
Leather Steering Wheel	Left-Curtain Air Bag	MP3 Player	Passenger-Front Air Bag	Power Door Locks
Power Driver Seat	Power Remote Mirror	Power Steering	Power Windows	Rear Bench Seat
Rear Spoiler	Rearview Camera	Remote Decklid Or Tailgate Release	Satellite Radio	Second Row Side Airbag With Head Protection
Side Airbags	Steering Wheel Mounted Audio Control	Telematic Systems	Theft Deterrent Sys.	Tilt Steering Wheel
Tire Pressure Monitoring System	Traction Control/Electronic	Trip Computer		

STEPHANIE MORALES | 2022 Toyota Camry SE

Parts Profile
MILW WI All Part Types

Parts Profile Version
4.0

Line #	Description	Operation	Type	LABOR		PART				
				Total Units	Type	Number	Qty	Total Price	Tax	
Front Bumper										
1	200426 Frt Bumper Cover	Remove / Install	Body	1.3#		Existing				
Front Lamps										
2	200016 L Front Combination Lamp	Remove / Install	Body	0.3#		Existing				
Hood										
3	205281 Hood Outside	Blend	Refinish	1.2 C		Existing				
Front Fender										
4	203228 L Fender Panel	Repair	Body	1.5*#		Existing				
5	AUTO L Fender Outside	Refinish Only	Refinish	2.1 C		Existing				
6	202837 L Fender Mudguard	Remove / Install	Body	0.2		Existing				
Windshield										
7	201281 L Windshield Mldg	Remove / Install	Body	INC		Existing				
8	203684 L W/Shield Moulding	Remove / Replace	Body	0.2		New	75536-06010	1	\$47.61	Yes
Rocker / Pillars / Floor										
9	201873 L Roof Rail	Refinish Only	Refinish	1.6# C		Existing				
10	201853 L Cowl/Dash Hinge Pillar -S	Repair	Body	6.0*#		Existing				
11	203321 L Rocker Moulding	Remove / Install	Body	0.4		Existing				
Front Door										
12	202631 L Frt Door Repair Panel	Remove / Replace	Body	7.0#		New	67112-06200	1	\$440.52	Yes
13	AUTO L Frt Door Outside	Refinish Only	Refinish	1.8 C						
14	AUTO L Frt Add For Jambs	Refinish Only	Refinish	0.5 C						
15	200276 L Frt Door Rear View Mirror	Remove / Replace	Body	INC#		Aftermarket New	459853-53228APU	1	\$181.33	Yes
16	AUTO L Frt Door Trim Panel	Remove / Install	Body	INC						
17	202312 L Frt Door Mirror Cover	Remove / Replace	Body	0.4#		New	87945-06330-A0	1	\$54.88	Yes
18	202997 L Frt Door Window Frame	Remove / Replace	Body	INC		New	75754-06140	1	\$79.19	Yes
19	203317 L Frt Otr Door Belt Moulding	Remove / Replace	Body	INC#		New	75720-06210	1	\$114.56	Yes
20	900501 Per Toyota Non-Reusable Part									
21	203956 Frt Door Edge Moulding Kit	Remove / Install	Body	0.4*		Existing				
22	900501 Time For DS Front and DS Rear Door									
Rear Door										

				LABOR						PART
Line #	Description	Operation	Type	Total Units	Type	Number	Qty	Total Price	Tax	
23	200083	L Rear Door Outside	Blend	Refinish	0.9 C	Existing				
24	200040	L Rear Upr Door Window Frame Moulding	Remove / Install	Body	INC#	Existing				
25	202410	L Rear Otr Door Belt Moulding	Remove / Install	Body	INC#	Existing				
26	200072	R Rear Door Frame Upper Moulding	Remove / Replace	Body	0.5#	New	75707-06030	1	\$79.19	Yes
27	200073	L Rear Door Frame Upper Moulding	Remove / Replace	Body	0.5#	New	75708-06030	1	\$79.19	Yes
28	204760	L Rear Door Frt Window Frame Mldg	Remove / Replace	Body	0.3#	New	75762-06160	1	\$39.39	Yes
29	900501	Per Toyota Non-Reusable Part								
30	200081	L Rear Otr Door Belt Moulding	Remove / Replace	Body	0.2#	New	75740-06190	1	\$79.19	Yes
31	900501	Per Toyota Non-Reusable Part								
32	200846	L Rear Door Trim Panel	Remove / Install	Body	0.4	Existing				
33	200102	L Rear Otr Door Handle	Remove / Install	Body	0.3#	Existing				
Roof										
34	201527	Roof Panel	Repair	Body	3.0*	Existing				
35	AUTO	Roof Panel Outside	Refinish Only	Refinish	2.8 C	Existing				
36	203141	R Roof Moulding	Remove / Install	Body	0.4	Existing				
37	203142	L Roof Moulding	Remove / Install	Body	0.4	Existing				
38	203143	Roof Antenna	Remove / Install	Body	0.3#	Existing				
Additional Costs & Materials										
39	AUTO	Paint/Materials	Additional Cost					\$611.60*	Yes	
40	AUTO	Hazardous Waste Disposal	Additional Cost					\$3.00*	Yes	
Additional Operations										
41	AUTO	Clear Coat	Additional Operation	Refinish	2.7			\$0.00		
Special / Manual Entry										
42	900500	Calibrate BSM	Additional Labor	Mechanical*	1.0*	Existing				
43	900500	COVER CAR FOR OVERSPRAY	Additional Labor	Refinish*	0.0*	Aftermarket New	** A/M	1	\$8.00*	Yes
44	900500	CORROSION PROTECTION	Additional Labor	Refinish*	0.3*	Existing		0		Yes
45	900500	SEAM SEALER- PANEL REPLACEMENT PER TUBE	Remove / Replace	Body*	0.0*	Sublet	Sublet	1	\$40.00*	Yes

* Judgment Item

T Included in Two Tone Calculation

Labor Note Applies

d Discontinued by Manufacturer

C Included in Clear Coat Calculation

A Included in Clear Coat and Two Tone Calculation

r CEG R&R Time Used for this Labor Operation

[] Verify the part number and price before ordering

Parts Vendors

PAM's Auto
 7505 Ridgewood Rd
 St Cloud MN 56303
 (320) 363-7336 (Work)

Line	Part #	Total Price
15	459853-53228APU	\$181.33

Supplier Notes: APU, Quote#:
 111667729885458 Stock Number: 459853-
 53228 / AM

Disclaimer: This estimate has been prepared based on the use of one or more replacement parts supplied by a source other than the manufacturer of your motor vehicle. Warranties applicable to these replacement parts are provided by the manufacturer or distributor of the replacement parts rather than by the manufacturer of your motor vehicle.

Estimate Totals

Labor	Units	Rate	Sublet Add'l Amount	Totals
Body Labor	24.0	\$64.00		\$1,536.00
Refinish Labor	13.9	\$64.00		\$889.60
Mechanical Labor	1.0	\$125.00		\$125.00
Total Labor	38.9			\$2,550.60
			Taxable	\$2,550.60
			Tax 5.5000%	\$140.28
			Non-Taxable	\$0.00
			Labor Total	\$2,690.88
Parts		Amount		
Taxable Parts		\$1,243.05		\$1,243.05
			Parts Adjustments	\$0.00
			Tax 5.5000%	\$68.37
			Non-Taxable	\$0.00
			Parts Total	\$1,311.42
Costs		Amount		
Other Additional Costs		\$3.00		\$3.00
Paint Materials		\$611.60		\$611.60
			Taxable	\$614.60
			Tax 5.5000%	\$33.80
			Non-Taxable	\$0.00
Paint Materials Rate: \$44.00			Costs Total	\$648.40
Rate Max: 99.9 units				
Additional Rate: \$0.00				
Gross Totals		Amount		
Gross Total		\$4,650.70		\$4,650.70
			Taxable	\$4,408.25
			Tax	\$242.45
			Non-Taxable	\$0.00
			Gross Total	\$4,650.70
Adjustments		Amount		
Deductible		-\$1,000.00		-\$1,000.00
Total Customer Responsibility				-\$1,000.00

Estimate Totals

Net Estimate Total **\$3,650.70**

This estimate has been prepared based on the use of one or more replacement parts supplied by a source other than the manufacturer of your motor vehicle. Warranties applicable to these replacement parts are provided by the manufacturer or distributor of the replacement parts rather than by the manufacturer of your motor vehicle.

All manufacturers requirements regarding seat belt and supplemental restraint system replacement must be adhered to. If additional parts or operations are necessary to properly accomplish this, please contact the estimating claims rep.

This is a damage assessment only - Not an authorization to repair-based on damage visible or certain at the time it was written.

If frame or unibody repair is included on this estimate, the amount shown includes time or allowance for measuring before, during and after those repairs.

The owner of the vehicle may select the repair facility of his/her choice.

To ensure proper and prompt payment for additional damage discovered during the course of repairs, contact Progressive for supplement handling procedures.

Progressive honors the prevailing labor market rate in your area for your property. If you choose a shop that charges in excess of the prevailing labor market rates, you will be responsible for the difference.

Lifetime guarantee for sheet metal and plastic body parts

The replacement parts written on the estimate are intended to return your vehicle to its pre-loss condition with proper installation. After repair, if any sheet metal or plastic body part included in the estimate fails to return your vehicle to its pre-loss condition (assuming proper installation), in terms of form, fit, finish, durability or functionality, Progressive will arrange and pay for the replacement of the part, to the extent not covered by a manufacturer's or other warranty. This service will be performed at no cost to you (including associated repair and rental car costs). To obtain service under this Guarantee, call Progressive at

1-800-274-4641. This Guarantee applies as long as you own or lease the vehicle. This Guarantee is not transferable and terminates if you sell or otherwise transfer your vehicle.

This guarantee does not cover normal wear and tear or damage caused by improper maintenance, neglect, abuse or subsequent accident. This guarantee is limited to arranging for the selection of repair parts that will return your vehicle to its pre-loss condition. Accordingly, Progressive will not be liable for any indirect, incidental or consequential damages that result from the installation or use of these parts.

Part Type Terms and Abbreviations

NEW and OEM or part number displayed - These refer to a new, original equipment manufacturer part.

A/M Certified: This refers to a new, certified non-original equipment manufacturer replacement part.

A/M: This refers to a new, non-original equipment manufacturer replacement part.

Recycled: This refers to a used OEM part.

Remanufactured and Recond. and Recore: These refer to recycled OEM parts that have been rebuilt or refurbished.

OE Discount: This refers to new OEM parts, that are excess inventory from the Original Equipment Manufacturer.

Recovered OE - This refers to parts removed from a new vehicle for various reasons.

Progressive's Lifetime Guarantee does not cover repairs you request the shop to make that are not related to this accident, including but not exclusive to unrelated prior damage and pre-existing damage.

Repair shop's authorized representative's signature indicating agreement on cost to return the vehicle to pre-loss condition including tow/storage charges:

Shop Signature: _____ Est. completion Date: _____

Any person who, with intent to defraud or knowing that he/she is facilitating a fraud against an insurer, submits an application or file a claim containing a false or deceptive statement is guilty of insurance fraud.

Disclaimer: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

Cycle Time Information

Due In 11/7/2022

Estimate Event Log

Job Created	11/8/2022 07:05 AM
Estimate Started	11/9/2022 02:39 PM
Estimate Printed	11/9/2022 03:31 PM
Estimate Committed	11/9/2022 03:31 PM
Estimate Version	0

Claim: 22-2734048 01

EDUARDO MORALES



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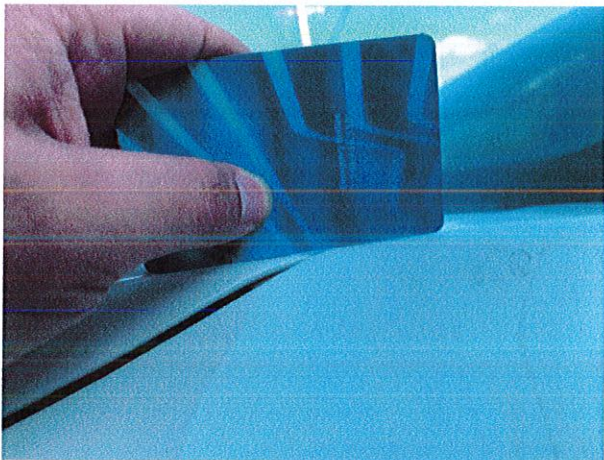
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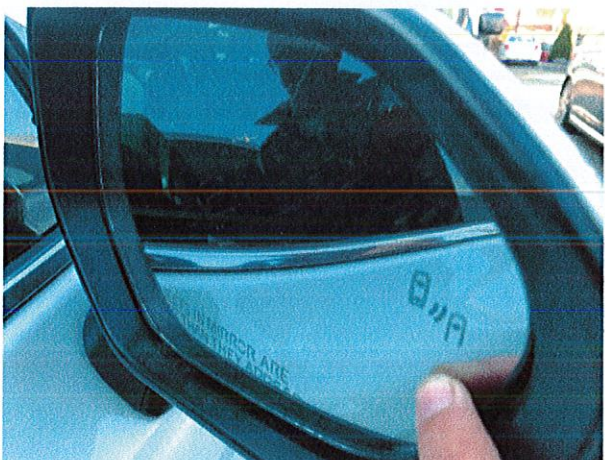
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