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INSURANCE FOR EDU

CITY OF MILWAUKEE
2022 FEB - 7 AM 3:58
CITY CLERK'S OFFICE

Re: **SUBROGATION REQUEST**

Your Insured:	Milwaukee Police Dept
Your claim #:	J9L0MJDNB6 (police report #)
Date of Loss:	08/24/2022
Our Claim Number:	02006224
Our Insured:	Teresa Breitrick
Our Interest:	\$ 4,795.48
Less Insured Deductible:	\$ 500.00
Total Amount:	\$ 5,295.48

2022 FEB 07 AM 3:58
CITY OF MILWAUKEE

Dear City of Milwaukee:

Our investigation shows that your company is responsible for this loss. This letter serves as our request for reimbursement of payments made.

Enclosed are the supporting papers to substantiate our subrogation request. We consider the total amount listed above to be payment in full; however, we will promptly notify you if we incur additional cost(s). **Please remit your check in settlement of this claim and send to:**

MEEMIC Insurance Company
1685 N. Opdyke Rd
Auburn Hills MI 48326
Tax id # 38-1337336

Sincerely,

Annette Williams

Annette Williams
Subrogation Claim Representative
1-800- 231-5770 extension 31473
annette.williams@meemic.com

Enclosure

~~CITY OF MILWAUKEE
2022 FEB - 7 AM 3:52
CITY CLERK'S OFFICE~~

MEEMIC INSURANCE COMPANY

WI

1685 N. Opdyke Rd
Auburn Hills, MI 48326
Phone: (800) 231-5770 x66954

Claim #: 02006224-01
Workfile ID: 06c89357

Supplement of Record 2 Summary

Written By: JAMES R GOLEN, 9/29/2022 10:35:48 AM
Adjuster: GRULKE, MALORI, (800) 231-5770 x31054 Business

Insured: TERESA BREITRICK Owner Policy #: PAP0902593 Claim #: 02006224-01
Type of Loss: C - COLLISION Date of Loss: 08/24/2022 05:30 PM Days to Repair: 3
Point of Impact: 11 Left Front Deductible: 500.00

Owner (Insured): TERESA BREITRICK
N101W14457 RAINTREE DR
GERMANTOWN, WI
53022-5329
(414) 477-3446 Cellular
(414) 426-9010 Other
MATTBREITRICK@GMAIL.COM

Inspection Location: Desk

Appraiser Information: james.golen@meemic.com
(800) 231-5770 x66954

Repair Facility:

VEHICLE

2022 VW Taos SE 4MOTION 4D UTV 4-1.5L Turbocharged Gasline Gasline Direct Injection WHITE

VIN: 3VVLX7B29NM021600 Production Date: 07/2021 Interior Color: Black Leatherette
License: Odometer: 8246 Exterior Color: WHITE
State: Condition:

TRANSMISSION Automatic Transmission 4 Wheel Drive	CONVENIENCE Air Conditioning Intermittent Wipers Tilt Wheel Cruise Control Rear Defogger Keyless Entry Alarm Message Center Steering Wheel Touch Controls Rear Window Wiper Telescopic Wheel Backup Camera Remote Starter	FM Radio Stereo Search/Seek Auxiliary Audio Connection Satellite Radio SAFETY Drivers Side Air Bag Passenger Air Bag Anti-Lock Brakes (4) 4 Wheel Disc Brakes Traction Control Stability Control Front Side Impact Air Bags Head/Curtain Air Bags Hands Free Device Xenon or L.E.D. Headlamps	Blind Spot Detection ROOF Luggage/Roof Rack SEATS Cloth Seats Bucket Seats Heated Seats WHEELS Aluminum/Alloy Wheels PAINT Clear Coat Paint OTHER Rear Spoiler
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Supplement of Record 2 Summary

2022 VW Taos SE 4MOTION 4D UTV 4-1.5L Turbocharged Gasline Gasline Direct Injection WHITE

Line	Oper	Description	Part Number	Qty	Extended Price \$	Labor	Paint
1		RADIATOR SUPPORT					
2	S02	Repl Radiator support	2GJ805588D	1	438.33	2.5	
3		FENDER					
4	*	S01 Rpr LT Fender	2GJ821103B			1.0	1.8
5		S01 Add for Clear Coat					0.7
6	#	Rpr Pre Scan				0.5 M	
7		FRONT BUMPER & GRILLE					
8		O/H front bumper				6.5	
9	S01	Repl Spoiler	2GJ805903989	1	176.67	Incl.	
10		Repl Bumper cover to 01/03/2021	2GJ807221041	1	57.03	Incl.	2.0
11		Add for Clear Coat					0.8
12	*	Rpr LT Lining	2GJ807795GRU			2.0	1.2
13		Add for Clear Coat					0.2
14	S01	Repl LT Side molding	2GJ853665041	1	66.67	Incl.	0.3
15		S01 Add for Clear Coat					0.1
16	S01	Repl Trim	2GJ8075312UC	1	63.33	Incl.	
17	S01	Repl Lower molding	2GJ8075322UC	1	63.33	Incl.	
18		FRONT LAMPS					
19		Repl LT Headlamp assy	2GJ941035	1	931.67	0.5	
20		Aim headlamps				0.5	
21	#	Rpr Post Scan				0.5 M	
22	S01	Repl LT Support	2GJ805931A	1	20.80	0.2	
23		HOOD					
24	*	S01 Rpr Hood to 04/18/2021	2GJ823031C			1.0	3.0
25		S01 Overlap Major Adj. Panel					-0.4
26		S01 Add for Clear Coat					0.5
27		COOLING					
28	S02	R&I Radiator type 2	5QM121251AB			m 2.5	
29	*	S02 R&I Fan shroud	3Q0121205B			m 1.0	
30		AIR CONDITIONER & HEATER					
31	S02	R&I Condenser assy type 1	5QM816411B			m Incl.	
SUBTOTALS					1,817.83	19.7	10.2

Supplement of Record 2 Summary

2022 VW Taos SE 4MOTION 4D UTV 4-1.5L Turbocharged Gasline Gasline Direct Injection WHITE

ESTIMATE TOTALS

Category	Basis	Rate	Cost \$
Parts			1,817.83
Body Labor	17.7 hrs @	\$ 65.00 /hr	1,150.50
Paint Labor	10.2 hrs @	\$ 65.00 /hr	663.00
Mechanical Labor	1.0 hrs @	\$ 85.00 /hr	85.00
Paint Supplies			450.00
Subtotal			4,166.33
Sales Tax	\$ 4,166.33 @	5.5000 %	229.15
Total Cost of Repairs			4,395.48
Deductible			500.00
Total Adjustments			500.00
Net Cost of Repairs			3,895.48

Supplement of Record 2 Summary

2022 VW Taos SE 4MOTION 4D UTV 4-1.5L Turbocharged Gasoline Gasoline Direct Injection WHITE

SUPPLEMENT SUMMARY

Line	Oper	Description	Part Number	Qty	Extended Price \$	Labor	Paint
Added Items							
1		RADIATOR SUPPORT					
2	502 Rep	Radiator support	2GJ805588D	1	438.33	2.5	
27		COOLING					
28	502 R&I	Radiator type 2	5QM121251A8		m	2.5	
29	502 R&I	Fan shroud	3Q0121205B		m	1.0	
30		AIR CONDITIONER & HEATER					
31	502 R&I	Condenser assy type 1	5QMB16411B		m	Incl.	
SUBTOTALS					438.33	6.0	0.0

TOTALS SUMMARY

Category	Basis	Rate	Cost \$
Parts			438.33
Body Labor	6.0 hrs @	\$ 65.00 /hr	390.00
Subtotal			828.33
Sales Tax	\$ 828.33 @	5.5000 %	45.56
Total Supplement Amount			873.89
NET COST OF SUPPLEMENT			873.89

CUMULATIVE EFFECTS OF SUPPLEMENT(S)

Estimate	2,271.63	JAMES R GOLEN
Supplement 501	1,249.96	JAMES R GOLEN
Supplement 502	873.89	JAMES R GOLEN
Workfile Total:	\$ 4,395.48	
TOTAL ADJUSTMENTS:	\$ 500.00	
NET COST OF REPAIRS:	\$ 3,895.48	

Supplement of Record 2 Summary

2022 VW Taos SE 4MOTION 4D UTV 4-1.5L Turbocharged Gasline Gasline Direct Injection WHITE

ALL MANUFACTURERS REQUIREMENTS REGARDING SEATBELT AND SUPPLEMENTAL RESTRAINT SYSTEM REPLACEMENT MUST BE ADHERED TO. IF ANY ADDITIONAL PARTS OR OPERATIONS ARE NECESSARY TO PROPERLY REPAIR/REPLACE, PLEASE CONTACT THE MANUFACTURER REGARDING SEATBELT AND SUPPLEMENTAL RESTRAINT SYSTEM REPLACEMENT. IF ANY ADDITIONAL PARTS OR OPERATIONS ARE NECESSARY TO PROPERLY REPAIR/REPLACE, CONTACT THE ADJUSTER. ALL ADDITIONALS MUST BE APPROVED BY THE ADJUSTER PRIOR TO COMPLETION OF REPAIRS. THIS ESTIMATE IS NOT AN AUTHORIZATION TO REPAIR. ANY AND ALL REPAIRS MUST BE AUTHORIZED BY THE OWNER. NO ADDITIONAL PAYMENT UNLESS APPROVED BY MEEMIC COMPANY REPRESENTATIVE IN WRITING.

Meemic Insurance does not guarantee the quality of workmanship by any repair facility outside of Meemic's Educated Choice Repair Network (www.Meemic.com/Claims). All repair, part and paint warranty inquiries are to be discussed with your selected repair facility. This estimate has been prepared based on Meemic's Automobile Policy to properly restore your vehicle to its pre-accident condition. Deviations from the recommended repairs provided for in this estimate may impact the integrity, performance, or appearance of your vehicle.

MOTOR VEHICLE REPAIR PRACTICES ARE REGULATED BY CHAPTER ATCP 132, WIS. ADM. CODE, ADMINISTERED BY THE BUREAU OF CONSUMER PROTECTION, WISCONSIN DEPT. OF AGRICULTURE, TRADE AND CONSUMER PROTECTION, P.O. BOX 8911, MADISON, WISCONSIN 53708-8911.

Estimate calculated using a preset user threshold amount for the paint and material cost.

Supplement of Record 2 Summary

2022 VW Taos SE 4MOTION 4D UTV 4-1.5L Turbocharged Gasline Gasline Direct Injection WHITE

Estimate based on MOTOR CRASH ESTIMATING GUIDE and potentially other third party sources of data. Unless otherwise noted, (a) all items are derived from the Guide ERA9244, CCC Data Date 08/17/2022, and potentially other third party sources of data; and (b) the parts presented are OEM-parts. OEM parts are manufactured by or for the vehicle's Original Equipment Manufacturer (OEM) according to OEM's specifications for U.S. distribution. OEM parts are available at OE/Vehicle dealerships or the specified supplier. OPT OEM (Optional OEM) or ALT OEM (Alternative OEM) parts are OEM parts that may be provided by or through alternate sources other than the OEM vehicle dealerships with discounted pricing. Asterisk (*) or Double Asterisk (**) indicates that the parts and/or labor data provided by third party sources of data may have been modified or may have come from an alternate data source. Tilde sign (~) items indicate MOTOR Not-Included Labor operations. The symbol (<>) indicates the refinish operation WILL NOT be performed as a separate procedure from the other panels in the estimate. Non-Original Equipment Manufacturer aftermarket parts are described as Non OEM, A/M or NAGS. Used parts are described as LKQ, RCY, or USED. Reconditioned parts are described as Recond. Recored parts are described as Recore. NAGS Part Numbers and Benchmark Prices are provided by National Auto Glass Specifications. Labor operation times listed on the line with the NAGS information are MOTOR suggested labor operation times. NAGS labor operation times are not included. Pound sign (#) items indicate manual entries.

Some 2023 vehicles contain minor changes from the previous year. For those vehicles, prior to receiving updated data from the vehicle manufacturer, labor and parts data from the previous year may be used. The CCC ONE estimator has a list of applicable vehicles. Parts numbers and prices should be confirmed with the local dealership.

The following is a list of additional abbreviations or symbols that may be used to describe work to be done or parts to be repaired or replaced:

SYMBOLS FOLLOWING PART PRICE:

m=MOTOR Mechanical component. s=MOTOR Structural component. T=Miscellaneous Taxed charge category. X=Miscellaneous Non-Taxed charge category.

SYMBOLS FOLLOWING LABOR:

D=Diagnostic labor category. E=Electrical labor category. F=Frame labor category. G=Glass labor category. M=Mechanical labor category. S=Structural labor category. (numbers) 1 through 4=User Defined Labor Categories.

OTHER SYMBOLS AND ABBREVIATIONS:

Adj.=Adjacent. Algn.=Align. ALU=Aluminum. A/M=Aftermarket part. Blend=Blend. BOR=Boron steel. CAPA=Certified Automotive Parts Association. D&R=Disconnect and Reconnect. HSS=High Strength Steel. HYD=Hydroformed Steel. Incl.=Included. LKQ=Like Kind and Quality. LT=Left. MAG=Magnesium. Non-Adj.=Non Adjacent. NSF=NSF International Certified Part. O/H=Overhaul. Qty=Quantity. Refn=Refinish. Repl=Replace. R&I=Remove and Install. R&R=Remove and Replace. Rpr=Repair. RT=Right. SAS=Sandwiched Steel. Sect=Section. Subl=Sublet. UHS=Ultra High Strength Steel. N=Note(s) associated with the estimate line.

CCC ONE Estimating - A product of CCC Intelligent Services Inc.

The following is a list of abbreviations that may be used in CCC ONE Estimating that are not part of the MOTOR CRASH ESTIMATING GUIDE:

BAR=Bureau of Automotive Repair. EPA=Environmental Protection Agency. NHTSA= National Highway Transportation and Safety Administration. PDR=Paintless Dent Repair. VIN=Vehicle Identification Number.

Claim #: 02006224-01
Workfile ID: 06c89357

Supplement of Record 2 Summary

2022 VW Taos SE 4MOTION 4D UTV 4-1.5L Turbocharged Gasline Gasline Direct Injection WHITE

ALTERNATE PARTS USAGE

2022 VW Taos SE 4MOTION 4D UTV 4-1.5L Turbocharged Gasline Gasline Direct Injection WHITE

VIN: JVVXLX7B29NM021500 Production Date: 07/2021 Interior Color: Black Leatherette
License: Odometer: 8246 Exterior Color: WHITE
State: Condition:

Alternate Part Type	# Of Available Parts	# Of Parts Selected
Aftermarket	0	0
Optional OEM	0	0
Reconditioned	0	0
Recycled	0	0



Account No. 05558

MNC PH
Sendout 60

6/4

Attention: Malori Grulke

MEEMIC

Customer Service:

Metro Reporting Customer Support 1-800-245-6686 or help@metroreporting.com

Metropolitan Reporting Bureau
BOX 926, William Penn Annex
Philadelphia, PA 19105-0926
FAX (800) 343-9047

Type of Report: AUTO ACCIDENT

INSURED : TERESA BREITRICK

CLAIM NUMBER: 02006224

POLICY NUM. :

DATE OF LOSS: 08/24/22

LOSS STREET : FOND DU LAC

LOSS CITY : MILWAUKEE WI

POLICE DEPT.: DIV. OF STATE PATROL CRASH REC

REPORT NUM. : J910WJENB6

INS. DR VHR : BAR TRUCK FallPew

OTHER DRIVER:

PCT./BEST. :

DESC. OF OTHER: I WAS NW WOUND ON FOND DU LAC IN THE 1ST OF 2 LAN

THANK YOU FOR THE ORDER!

Any questions or problems please feel free to contact us.

PH. (800) 245-6686 or Help@metroreporting.com



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J9LDMJDNB6
222361438

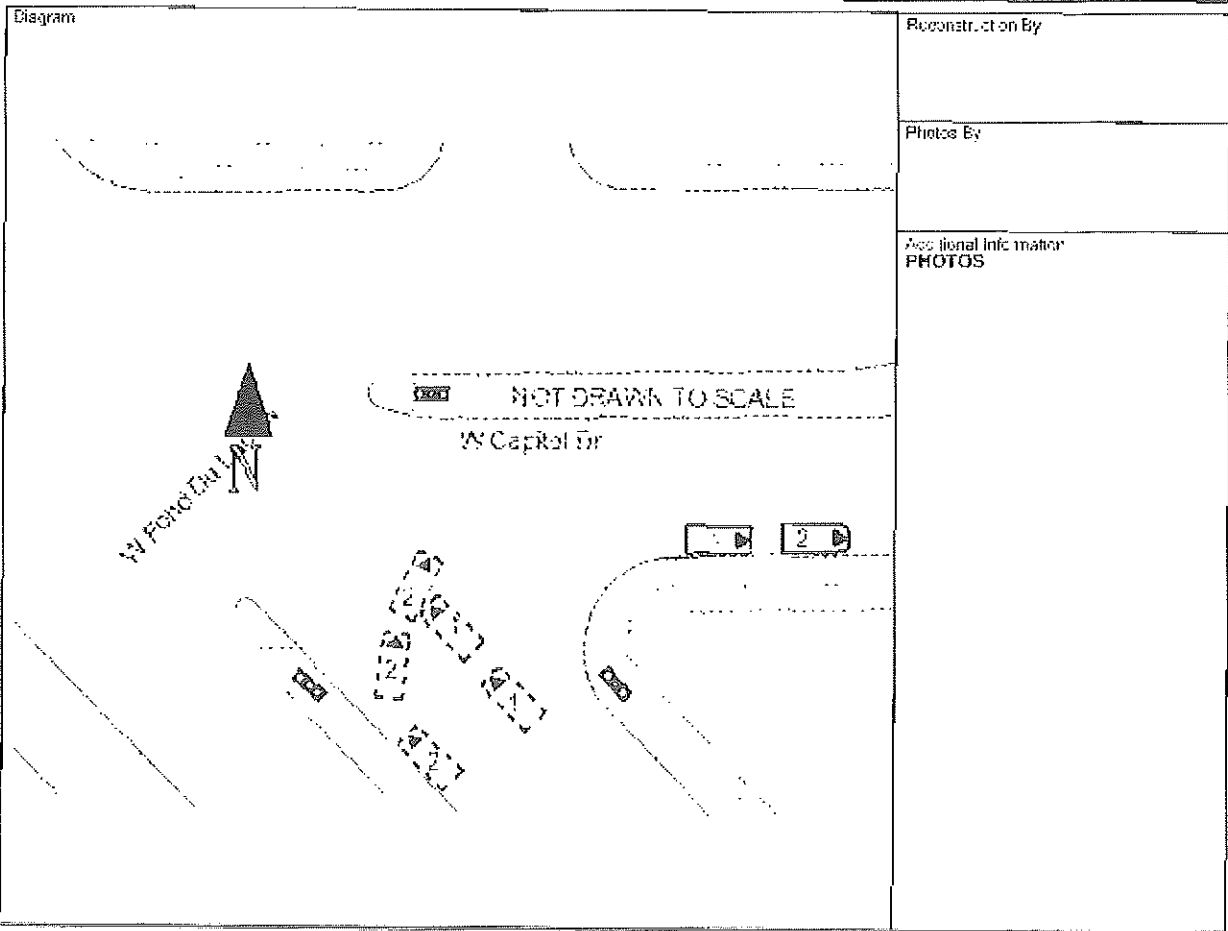
WISCONSIN MOTOR VEHICLE CRASH REPORT

MILWAUKEE POLICE DEPARTMENT
749 WEST STATE STREET
MILWAUKEE, WI 53201
(414) 933-4444

J9LDMJDNB6

Location, Number Overide		Primary Crash Document #		Agency Crash Number D7		Investigating Officer/Deputy K. WALLICH	
Crash Date 08/24/2022		Crash Time 05:24 PM		Date Arrived 08/24/2022		Time Arrived 05:24 PM	
Date Notified 08/24/2022		Time Notified 05:24 PM		Total Injured 02		Total Killed 00	
<input checked="" type="checkbox"/> On Emergency	<input 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 SUPERVISOR APPROVED, SQUAD ACCIDEN		
<input checked="" type="checkbox"/> Reportable	Crash Type DT4000 (STANDARD CRASH)			<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash		

Description



I, a sworn law enforcement officer, agree that I have not added any C.J.I.S. data in this report.

UNIT 1 AND UNIT 2 BOTH WERE ON W FOND DU LAC AV AT W CAPITOL DR STOPPED AT A RED SIGNAL. UNIT 1 IN LANE 2 TURN LEFT IN LEFT TURN LANE. UNIT 2 IS A MILWAUKEE POLICE DEPARTMENT UNMARKED SQUAD CAR EQUIPPED WITH EMERGENCY LIGHTS AND SIREN. UNIT 1 BEGAN TO TRAVEL WB AS THE TRAFFIC SIGNAL TURNED GREEN AT THE SAME TIME UNIT 2 TURNED RIGHT FROM LEFT TURN LANE AFTER ACTIVATING EMERGENCY LIGHTS AND SIREN TO ENGAGE IN AN ACTIVE VEHICLE PURSUIT. UNIT 1 STRUCK UNIT 2 IN A FRONT TO SIDE MANNER CAUSING MINOR DAMAGE TO BOTH VEHICLES.

J9L0MJDNB6
222361438

WISCONSIN MOTOR VEHICLE
CRASH REPORT

MILWAUKEE POLICE DEPARTMENT
749 WEST STATE STREET
MILWAUKEE, WI 53201
(414) 933-4444

Location

ON W FOND DU LAC AVE/ STH145 NB 54 FT S OF STH190 EB IN THE CITY OF MILWAUKEE IN MILWAUKEE COUNTY	Lat/Long	Longitude
	X Coordinate	Y Coordinate
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 01 - ANGLE		Light Condition DAYLIGHT	
Road Surface Condition(s) DRY		None	
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
Willing to Exchange Accr	Intersection Location	Intersection Type	
NO	INTERSECTION	FIVE-POINT, OR MORE	

Unit Summary

UNIT 01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS			Unit Type AUTOMOBILE
	Vehicle Type (SPORT) UTILITY VEHICLE	Operating As Enforcement			
	Total Crises 1	Total Buses Reported	Total Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel WESTBOUND	Pre-Crash Tire Mark [Symbol]	Speed Limit 35	Total Lanes 3
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE
	Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER		Traffic Control TRAFFIC SIGNAL		Traffic Control Inoperative/Warning NO
	Surface Type CONCRETE		Road Curvature STRAIGHT		Road Grade LEVEL
	Track Area Number NO				

Vehicle

UNIT 01 VEHICLE	License Plate Number ACS3046	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 3VVLX7B29NM021600	Make VOLKSWAGEN	Year 2022	Model TAOS
	Color WHI - WHITE	Body Style UT - SPORT UTILITY VEHICLE		Bus Use
	Initial Contact Point 12 - FRONT	Vehicle Damage		
	Extent Of Damage MINOR DAMAGE	12 - FRONT		

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222361438

WISCONSIN MOTOR VEHICLE
CRASH REPORT

MILWAUKEE POLICE DEPARTMENT
749 WEST STATE STREET
MILWAUKEE, WI 53201
(414) 933-4444

UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
01	01	Owner Name MATTHEW DAVID BREITRICK (414) 477-3446		Owner Address N101W14457 RAINTREE DR GERMANTOWN, WI 53022 , US
Sequence Of Events				
01	01	Event MOTOR VEH IN TRANSPORT		
02	01	Event		
03	01	Event		
04	01	Event		
Policy Holder				
UNIT	Insurance Company MEEMIC-INSURANCE-CO		Individual MATTHEW BREITRICK	
Individual				
UNIT INDIVIDUAL	Driver MATTHEW DAVID BREITRICK (414) 477-3446		Citations Issued 0	Sex MALE
	Address N101W14457 RAINTREE DR GERMANTOWN, WI 53022 , US		Date of Birth 04/17/1986	Race WHITE
			Driver License Number B6365448613700 STATE: WISCONSIN COUNTRY: UNITED STATES	
Safety Equipment				
On Duty Crash		Safety Equipment		
01	001	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT
		Helmet Use		Helmet Compliance
		Eye Protection		Tint Compliance
		Injury Severity Injury 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
		Distraction By Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
		Distracted By Action NOT DISTRACTED		

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WISCONSIN MOTOR VEHICLE
CRASH REPORT

MILWAUKEE POLICE DEPARTMENT
749 WEST STATE STREET
MILWAUKEE, WI 53201
(414) 933-4444

UNIT INDIVIDUAL 01 001	Non Motorist		Sinking Unit #	Location	
	Prior Action				
	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				

Unit Summary

UNIT 02	Unit Status ON EMERGENCY		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type (SPORT) UTILITY VEHICLE			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	Pre Crash Tire Mark	Speed Limit 35	Total Lanes 3	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function POLICE		Emergency Motor Vehicle Use EMERGENCY OPERATION, EMERGEN	
	Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER		Traffic Control TRAFFIC SIGNAL		Traffic Control Cooperative/Missing NO	
	Surface Type CONCRETE		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

Vehicle

UNIT VEHICLE 02 02	License Plate Number ANP5833		Plate Type AUT - AUTOMOBILE	St WI	Country of Residence UNITED STATES	
	Vehicle Identification Number 1FMSK8AWXMNA20811		Make FORD	Year 2021	Model EXPLORER	
	Color BLK - BLACK		Body Style UT - SPORT UTILITY VEHICLE		Bus Use	
	Initial Contact Point 04 - RIGHT SIDE REAR		Vehicle Damage 04 - RIGHT SIDE REAR		7 8 9 10 11 6 12 5 4 3 2 1	
	Extent Of Damage MINOR DAMAGE					
	Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER			

J9L0MJDNB6
222361438

WISCONSIN MOTOR VEHICLE
CRASH REPORT

MILWAUKEE POLICE DEPARTMENT
749 WEST STATE STREET
MILWAUKEE, WI 53201
(414) 933-4444

UNIT 02	VEHICLE	What Driver Was Doing	Vehicle Factors	
		Driver Prior Action Other	NOT APPLICABLE	
		Driver Actions	NO CONTRIBUTING ACTION	
UNIT 02	VEHICLE	Owner Name	Owner Address	
		MILWAUKEE POLICE DEPARTMENT	749 W STATE ST MILWAUKEE, WI 53233 , US	
Sequence Of Events				
UNIT 02	VEHICLE	Event	MOTOR VEH IN TRANSPORT	
		Event		
		Event		
		Event		
Policy Holder				
UNIT 02	VEHICLE	Insurance Company	Government	
		SELF-INSURED	MILWAUKEE CITY	
Individual				
UNIT 02	INDIVIDUAL	Driver	Citations Issued	Sex
		DANIEL JOHN SUTYAK	0	MALE
			Date of Birth	Face
	04/07/1984	WHITE		
	Address	Driver License Number		
	749 W STATE ST MILWAUKEE, WI 53233 , US	S33301708412702 STATE: WISCONSIN COUNTRY: UNITED STATES		
UNIT 02	VEHICLE	Safety Equipment	On Duty Crash	Safety Equipment
		POLICE		SHOULDER & LAP BELT
		Row	Seat Position	
		01 - FRONT ROW	07 - LEFT	
		Helmet Use	Helmet Compliance	
	Eye Protector		Time Compliance	
	Injury Severity	Airbag		
	NO APPARENT INJURY	NON DEPLOYED		
UNIT 02	VEHICLE	Ejected	Ejection Path	Trapped/Entrapped
		NOT EJECTED	NOT EJECTED/NOT APPLICABLE	NOT TRAPPED
		Medical Transport	EMS Agency Identifier	EMS Run #
		NOT TRANSPORTED		
	Hospital	Date of Death	Time of Death	
	Distraction By	Distraction By Source		
	NOT DISTRACTED	NOT APPLICABLE (NOT DISTRACTED)		
	Distraction By Action	NOT DISTRACTED		
	Non Motorist	Striking Object	Location	

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WISCONSIN MOTOR VEHICLE
CRASH REPORT

MILWAUKEE POLICE DEPARTMENT
749 WEST STATE STREET
MILWAUKEE, WI 53201
(414) 933-4444

UNIT	INDIVIDUAL	Prior Action				
		Action				
		Actor 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 ANTHONY JAMES MILONE		State's Issued 0	Sex MALE	
Address 749 W STATE ST MILWAUKEE, WI 53233 , US		Date of Birth 07/21/1988	Race WHITE			
Driver License Number M4500108826105		STATE: WISCONSIN COUNTRY: UNITED STATES				
Safety Equipment		On Duty Crash POLICE	Safety Equipment			
Row 01 - FRONT ROW		Seat Position 09 - RIGHT	SHOULDER & LAP BELT			
Helmet Use		Helmet Compliance				
Eye Protection		Tint Compliance				
UNIT	INDIVIDUAL	Injury Severity		Airbag		
		NO APPARENT INJURY		NON DEPLOYED		
		Ejected		Ejection Path		Trapped/Estimated
		NOT EJECTED		NOT EJECTED/NOT APPLICABLE		NOT TRAPPED
		Medical Transport		EMS Agency Identification		EMS Ref #
		NOT TRANSPORTED				
		Hospital		Date of Death		Time of Death
		Distracted By		Distracted By Source		
		Distracted By Action				
Non Motorist		Striking Unit #	Location			
Prior Action						

J9L0MJDNB6
222361438

WISCONSIN MOTOR VEHICLE CRASH REPORT

MILWAUKEE POLICE DEPARTMENT
749 WEST STATE STREET
MILWAUKEE, WI 53201
(414) 933-4444

UNIT INDIVIDUAL 02	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		
	Injurious Condition APPEARED NORMAL		

Annette M. Williams

Payments 02006224

02006224

EXPORT TO EXCEL

CLAIM: 02006224
 DATE FROM:
 DATE TO:
 INDEMNITY/EXPENSE: Indemnity v
 SHOW RESERVE TRANS: Yes v
 VENDOR:
 CLAIM:

CLAIM 01 - TERESA M BREITRICK - STANDARD COLLISION COVERAGE / 5 / \$500 - COLLISION

RESULTS 1 - 5 OF 5

TRADE DATE	CHECK NBR	CHECK AMOUNT	CUMULATIVE	IND RES BAL	TYPE	USER ID	CHECK STATUS	RESOLUTION DATE
09/30/2022	7211186	\$2,123.85	\$3,095.48	\$0	II	JRG2	CASHED	10/13/2022
INTERNATIONAL AUTOS COLLISION CENTER - Vendor Code - 74515 10221 W ARTHUR AVE WEST ALLIS, WI 53227 REPAIRS								
09/29/2022		\$0	\$1,771.63	\$2,200.00		JRG2		
CHANGE RESERVE AMOUNT								
09/29/2022		\$0	\$1,771.63	\$1,300.00		JRG2		
REOPEN RESERVE AMOUNT								
09/01/2022	7202764	\$1,771.63	\$1,771.63	\$0	II	JRG2		
TERESA M BREITRICK AND MATTHEW D BREITRICK AND INTERNATIONAL AUTOS COLLISION CENTER - Vendor Code - 74515 10221 W ARTHUR AVE WEST ALLIS, WI 53227 REPAIRS								
08/25/2022		\$0	\$0	\$4,000.00		AOD1		
OPEN RESERVE AMOUNT								

CLAIM 02 - TERESA M BREITRICK - RENTAL REIMBURSEMENT / 530 / 50 - RENTAL ONLY

RESULTS 1 - 3 OF 3

TRADE DATE	CHECK NBR	CHECK AMOUNT	CUMULATIVE	IND RES BAL	TYPE	USER ID	CHECK STATUS	RESOLUTION DATE
11/04/2022	7221433	\$900.00	\$900.00	\$0	II	YLK1		

Kind regards

Angelle Williams, AIC
Subrogation Claim Representative II

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