

City of Milwaukee  
Office of the City Clerk  
City Hall  
Milwaukee, Wisconsin

**NOTICE OF DISALLOWANCE CLAIM  
(Pursuant to Sec. 893.80 WIS. STATS.)**

TO: Lottisha Williams  
2100 West Pierce Street, Unit 217  
Milwaukee, Wisconsin 53204

You are hereby notified that the Common Council of the City of Milwaukee duly disallowed the claim filed by you. No action on your claim against the City of Milwaukee may be brought after six (6) months from the date of service of the Notice of Disallowance.

FILE NUMBER: 050447

Regarding: Personal injury

Amount of Claim: \$6,883.16


Claim Disallowed on: September 27, 2005

Dated this 27th day of September 2005.

U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
(Domestic Mail Only; No Insurance Coverage Provided)

7000 0520 0020 0182 6119	Postage	\$		Postmark Here
	Certified Fee			
	Return Receipt Fee (Endorsement Required)			
	Restricted Delivery Fee (Endorsement Required)			
	Total *			
	Recip.	Lottisha Williams		(or)
	Street	2100 W Pierce Street, Unit 217		
	City, S	Milwaukee, Wisconsin 53204		

PS Form 3800, February 2000 See Reverse for Instructions

  
Ronald Leonhardt  
City Clerk

Form: Disallow