

West Bend Mutual
INSURANCE COMPANY • TIME TESTED SINCE 1894

CITY OF MILWAUKEE

2004 OCT 15 PM 1:20

RONALD L. EDWARDS
CITY CLERK

October 14, 2004

City of Milwaukee
Milwaukee City Clerk
200 E Wells St, Rm 205
Milwaukee, WI 53202


RE: Our Claim No.: HHV 5227888 15
Our Insured: Sylvia Barnett
Date of Loss: 8/5/2004
C.I. File #: 04-V-143

To Whom It May Concern:

I am in receipt of your denial to our subrogation demand dated October 5, 2004. I am in disagreement with your decision and I wish to appeal. I am hereby requesting a hearing of this matter.

Please notify me with additional information as it becomes available. I am looking forward to hearing from you soon.

Sincerely,



JEANA STEFFENS
CLAIMS REPRESENTATIVE
262-365-2918
jsteffens@wbmi.com
Fax: 262-335-7000

1000
CITY ATTORNEY
2004 OCT 15 PM 3:42

West Bend Mutual

INSURANCE COMPANY • TIME TESTED SINCE 1894

09/21/04 10:11 AM
09/21/04 10:11 AM
09/21/04 10:11 AM
09/21/04 10:11 AM
09/21/04 10:11 AM

September 21, 2004

MILWAUKEE CITY CLERK OFFICE
200 E WELLS ST
RM 205
MILWAUKEE, WI 53202

Our Claim #: HHV 5227888 15
Our Insured: SYLVIA BARNETT

Our Driver: SYLVIA BARNETT
Date of Loss: 8/5/2004

Your Claim or Policy #: UNKNOWN
Your Insured: MILWAUKEE POLICE DEPT
Your Driver: PAUL LOUG
N 35TH ST @ BROWN,
Location: MILWAUKEE

Under a policy of insurance carried with us by the above named insured, WEST BEND MUTUAL has paid \$5115.63 for loss and damage as a result of the accident described above. The total damages were \$6365.63. Deductible Amount: \$250.

An investigation indicates this damage was caused as a result of your insured's negligence. Under the terms of our policy, we are subrogated to the extent of our payment to any legal right which our insured has against you, and we hereby claim a lien on any proceeds that may be paid by way of settlement or judgment on said claim.

Sincerely,



JEANA STEFFENS, AIC
CLAIM REPRESENTATIVE
262-338-7295
JSTEFFENS@WBMI.COM
FAX: 262-335-7000

09/21/04 10:11 AM
09/21/04 10:11 AM
09/21/04 10:11 AM
09/21/04 10:11 AM
09/21/04 10:11 AM

WB-1666 (12-99)



CLAIMSDESKTOP
West Bank Group Insurance Company

POLICY: HHV 5227888 15
INSURED: SYLVIA J BARNETT
CLAIM STATUS: OPEN

LOSS DATE: 08/05/2004 **OCC:**
ADJUSTER: JEANA STEFFENS
ADJUSTER PHONE: (262) 338-729



CLAIM NUMBER

AA15911

CLAIM ROSTER

ALA AWADAWAH (CLAIMANT)

LOSS DESCRIPTION

IV HAD GREEN LIGHT, SAW OFFICER SITTING TO HER LEFT. SHE PROCEEDED THROUGH INTERSECTION, HEARD SIREN AND VEHICLE'S COLLIDED.

LOSS ITEM DETAIL

CLAIMANT NAME:	SYLVIA J BARNETT	RESERVE TYPE:	SALVAGE
UNIT DESCRIPTION:	1997 TYTA COROLLA DX 1NXBB02E4VF519804	MAJOR PERIL:	AUTO PHYSICAL DAMAGE - COLLISION
		CAUSE OF LOSS:	AUTO PHYSICAL DAMAGE COLLISION
		RESERVE CATEGORY:	GENERAL

TRANSACTION DATE	TRANSACTION TYPE	PAYEE(S)	DRAFT NUMBER	AMOUNT
09/21/2004	FINAL RECOVERY	COPART	0003331560	\$672.00

TOTAL PAYMENTS: \$672.00



COMMERCIAL
PERSONAL
CLAIMS
BILLING
MSI
BONDS

CLAIMSDESKTOP

First State Mutual Insurance Company

POLICY: HHV 5227888 15
INSURED: SYLVIA J BARNETT
CLAIM STATUS: OPEN

LOSS DATE: 08/05/2004 **OCC:**
ADJUSTER: JEANA STEFFENS
ADJUSTER PHONE: (262) 338-729

HOME
DIARY
SEARCH
CLAIM SUMMARY
LOG NOTES
REPORTS
VENDOR
ADMIN
CONTRACT FORMS
HELP

CLAIM NUMBER

AA15911

CLAIM ROSTER

ALA AWADAWAH (CLAIMANT)

LOSS DESCRIPTION

IV HAD GREEN LIGHT, SAW OFFICER SITTING TO HER LEFT. SHE PROCEEDED THROUGH INTERSECTION, HEARD SIREN AND VEHICLE'S COLLIDED.

LOSS ITEM DETAIL

CLAIMANT NAME:	SYLVIA J BARNETT	RESERVE TYPE:	LOSS
UNIT DESCRIPTION:	1997 TYTA COROLLA DX 1NXBB02E4VF519804	MAJOR PERIL:	AUTO PHYSICAL DAMAGE - COLLISION
		CAUSE OF LOSS:	AUTO PHYSICAL DAMAGE COLLISION
		RESERVE CATEGORY:	GENERAL

TRANSACTION DATE	TRANSACTION TYPE	PAYEE(S)	DRAFT NUMBER	AMOUNT
08/13/2004	PAYMENT	SYLVIA J BARNETT	0004028562	\$5,532.66
08/23/2004	FINAL PAYMENT	MAYFAIR RENT-A-CAR INC	0004029596	\$254.97
TOTAL PAYMENTS:				\$5,787.63

EDIT PAYMENT
DELETE PAYMENT
NORMAL SIZE
RESTORE TO SUMMARY

MAYFAIR RENT-A-CAR, INC.
1720 PARAMOUNT DRIVE
WALKESHA, WI. 53186
(262) 513-3300 FED. ID #39-1575668
E-MAIL: rentacar@mayerfairrentacar.com

DATE: 08/16/04

CUST #: 06680

WEST BEND MUTUAL INS.
ATTN: CLAIMS DEPARTMENT
1900 S. 18TH AVENUE
WEST BEND, WI 53095

ATTN: WBM/JEANA/
REF: HNV522788815

This is your invoice for the following car rental agreement.

Customer #: 06680
Rental Agreement #: 00373282
Renter: BARNETT, SYLVIA
Rental Date: 08/06/04
Return Date: 08/16/04
Vehicle No.: 24010691

Charges:			
Time & Mileage	11 days	21.95/day	241.45
Sales Tax			13.52
		Total Charges	254.97

Amount Due 254.97

NET AMOUNT DUE UPON RECEIPT

P.O. BOX 371308
MILWAUKEE, WI 53237 1308
PHONE (414) 769-7665
TAX ID# 942867490

Visit us at www.copart.com

FINAL SETTLEMENT STATEMENT

Copart Lot# 7219454 39 MILWAUKEE
Loss Date 8/05/04
Called In 8/11/04
P/U Cleared 8/13/04
Pickup Date 8/16/04
Original Title 8/24/04
Trans Title 8/24/04
Sale Document 8/25/04
Loss Type COLLISION
Description 97 TOYT COROLLA DX TAN
Vehicle ID# 1NXBB02E4VZ519804
License#/ST 584 DWF WI
Mileage 88,268
Pickup From 1850 N 26TH ST.
1850 N 26TH ST.
MILWAUKEE, WI 53205
(414) 449-4777

WBM7 PIP134A
PURPLE TEAM
WEST BEND MUTUAL INS CO
1900 SOUTH 18TH AVENUE
WEST BEND, WI 53095

Claim# HHV522788815
Policy#
Loss Code
Reference#
Insured SILVIA BARNETT
Owner SILVIA BARNETT

ADVANCE CHARGES PAID BY COPART

TOTAL ADVANCE CHARGES00	
COPART SERVICE CHARGES		
TITLE PROCESSING	42.00	TRANSFERS
PIP PROGRAM CHARGE	136.00	
TOTAL COPART SERVICE CHARGES	178.00	
TOTAL DUE COPART	178.00	
PROCEEDS FROM SALE	850.00CR	*Bid Raised By Internet*
NET PROCEEDS	\$ 672.00CR	

W

SALE INFORMATION

Lot# 7219454
Sale Date 9/01/04
Sale Amount 850.00
ACV 5476.00
Repair Est 4736.20
Return 15.5%

Sold To 99547 RELIABLE AUTO SALES
1909 CLARK STREET
DYER, IN 46311
(773) 716-5502 RES# 0112100465

Item# 232

Proceeds Check# 3331560

Cert# 04237AKA277

Payment From Buyer

Check Date 9/17/04
Check Amount 672.00CR USD

ACCIDENT IN THE LINE OF DUTY

8140180

Document Number Override

Wisconsin Motor Vehicle Accident Report

5227888 8-5-04

INSTRUCTIONS

Please use a Black Ink Pen or #2 Pencil.

Mark Areas as shown:

Correct Mark

Incorrect Mark

Reportable Accident

County	MUN/TWP	Accident Date		
40	57	MONTH	DAY	YEAR
		0	5	04
1	1	1	1	1
2	2	2	2	2
3	3	3	3	3
4	4	4	4	4
5	5	5	5	5
6	6	6	6	6
7	7	7	7	7
8	8	8	8	8
9	9	9	9	9

Time of Accident (Military Time)			
HOUR	MIN		
2	716		
0	0	0	0
1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

Total Number		
ENVS	INJURED	KILLED
0	2	0
0	0	0
1	1	1
2	2	2
3	3	3
4	4	4
5	5	5
6	6	6
7	7	7
8	8	8
9	9	9

Hit & Run

Government Property Y N

Fire (Narrative) Y N

Photos Taken (Narrative) Y N

Trailer or Towed (Narrative) Y N

Truck or Bus (Last Page) Y N

Load Spillage Y N

Construction Zone Y N

Names Exchanged Y N

Sheet No. Of

1 1

ACCIDENT LOCATION

Public Highway, Intersection/Related

Public Highway, Non-Intersection

Parking Lot

Private Property or Road

LATITUDE (GPS) Degrees Minutes Seconds **LONGITUDE (GPS)** Degrees Minutes Seconds

ON Hwy No and Street Name **Estimated** **FROM/AT** Hwy No and Street Name

N. 35th St. W. BROWN ST.

House # Fire # Other Agency Space **UNIT TWO VEHICLE # 828 JS** Special Study

Unit Number	Unit Type	Total Number of Occupants	Direction of Travel (Before the Accident)	Unit Number	Unit Type	Total Number of Occupants	Direction of Travel (Before the Accident)
2 3 4	2 3 4	0 2 3 4 5 6	W E	1 3 4	2 3 4	0 1 3 4 5 6	W E

OPERATOR Last Name: **BARNETT, SYLVIA** First: **J** M.I.

ADDRESS Street & Number: **1850 N. 26th ST.**

City & State: **MILWAUKEE WI 53208** ZIP Phone Number: **392-2208**

Driver's License Number: **B653-7904-2751-05** State: **WI** Exp. Year: **10**

Date of Birth: **07-11-42** Sex: **F** Operating as: **Classified** Class: **A** Endorse (Mark All That Apply): **H P T**

OPERATOR Last Name: **LOUG, Paul** First: **P** M.I.

ADDRESS Street & Number: **749 W. STATE ST.**

City & State: **MILWAUKEE WI 53233** ZIP Phone Number: **935-7493**

Driver's License Number: **L200-6847-4170-02** State: **WI** Exp. Year: **09**

Date of Birth: **05-10-74** Sex: **M** Operating as: **Classified** Class: **A** Endorse (Mark All That Apply): **H P T**

On Duty Accident Police EMT First Responder Fire Fighter Winter Hvy Maintenance

On Duty Accident Police EMT First Responder Fire Fighter Winter Hvy Maintenance

SEVERITY SEAT SAFETY AIRBAG EJECTED

Position Equipment Deployed Not Deployed Not Applicable Unknown

1 Not Applicable 2 Trapped/Extricated 3 Trapped/Not Extricated 4 Unknown

1 Not Applicable 2 Trapped/Extricated 3 Trapped/Not Extricated 4 Unknown

TRAPPED/EXTRICATED Not Trapped Trapped/Extricated Trapped/Not Extricated Unknown

TRAPPED/EXTRICATED Not Trapped Trapped/Extricated Trapped/Not Extricated Unknown

Vehicle Owner Name: **City of Milwaukee Police Dept** M.I.

Street Address: **749 W STATE ST**

City & State: **MILWAUKEE WI 53233** ZIP Phone Number: **933-1444**

Year of Vehicle: **1997** Make: **TOYOTA** Model: **Corolla** Body Style: **4DR** Color: **BGE**

Year of Vehicle: **2000** Make: **FORD** Model: **Crown Vic** Body Style: **4DR** Color: **RED**

Vehicle ID Number: **1NKB80ZE4VZ51980Y**

Vehicle ID Number: **2RAFPT1W3YX102977**

License Plate Number: **584-DWF** Plate Type: **AUT** State: **WI** Exp. Year: **05**

License Plate Number: **VBH-171** Plate Type: **AUT** State: **WI** Exp. Year: **05**

Policy Holder's Name: **WEST BEND MUTUAL** Stat. #

Policy Holder's Name: **SELF INSURED** Stat. #

Occupant Unit Number: **AWADAWAH ALA** W 0 Date of Birth: **1029-78** Sex: **F** Severity: **K** SEAT: **3** SAFETY: **1** AIRBAG: **1**

Address Same as Operator Yes No

TRAPPED/EXTRICATED Not Trapped Trapped/Extricated Trapped/Not Extricated Unknown

TRAPPED/EXTRICATED Not Trapped Trapped/Extricated Trapped/Not Extricated Unknown

MV4000 899 **SA T.A.** EMS Number

3 Police No. 8140180 AUG 05 2004 N 35th St W. Brown St

PPD. CA, GA 8-9-04 JC

Occupant Unit Number	NAME Last	First	M.I.	Date of Birth	Sex	Severity	SEAT Position	SAFETY Equipment	AIRBAG
	ADDRESS Street & Number		City & State		M F	K N A B C			1: Deployed 2: Non Deployed 3: Not Applicable 4: Unknown
Address Same as Operator	EJECTED		TRAPPED/EXTRICATED		Medical Transport		Agency Space		
Yes	1: Not Applicable 2: Not Ejected		1: Not Applicable 2: Not Trapped		3: Trapped Extricated 4: Trapped Not Extricated 5: Unknown		Y N		
No	3: Totally Ejected 4: Partially Ejected 5: Unknown								

Type of Accident

01 First Harmful Event
Most Harmful Event

Unit Number	Unit Number
1 2 3 4 5 6 7 8 9 10	1 2 3 4 5 6 7 8 9 10

(select one per vehicle)

Collision With Object Not Fixed

- 1 Motor Vehicle in Transport
- 2 Parked Motor Vehicle
- 3 Deer
- 4 Pedalcycle
- 5 Pedestrian
- 6 Railway Train
- 7 Other Animal
- 8 Motor Vehicle in Transport In Other Roadway
- 9 Other Object (Not Fixed)

Collision With Fixed Object

- 10 Traffic Sign Post
- 11 Traffic Signal
- 12 Utility Pole
- 13 Lum. Light Support
- 14 Other Post
- 15 Tree
- 16 Mailbox
- 17 Guardrail Face
- 18 Guardrail End
- 19 Median Barrier
- 20 Bridge Parapet End
- 21 Bridge Pier Abut.
- 22 Impact Attenuator
- 23 Overhead Sign Post
- 24 Bridge Rail
- 25 Culvert
- 26 Ditch
- 27 Curb
- 28 Embankment
- 29 Fence
- 30 Other Fixed Object
- 31 Unknown

Non-Collision

- 32 Overturn
- 33 Fire/Explosion
- 34 Immersion
- 35 Jackknife
- 36 Other Non-Collision

Driver Condition

Unit Number	Unit Number
1 2 3 4 5 6 7 8 9 10	1 2 3 4 5 6 7 8 9 10

Driver Factors (Or Pedestrians)

- 1 Appeared Normal
- 2 Reduced Alertness
- 3 Ability Impaired
- 4 Not Observed

Presence

- 5 Neither Alcohol nor Drugs Present
- 6 Yes—Alcohol Present
- 7 Yes—Drugs Present
- 8 Yes—Alcohol & Drugs Present
- 9 Unknown

Alcohol

AC Value: AC Value:

- 10 Test Not Given
- 11 Test Refused
- 12 Test Given, Alcohol Unknown
- 13 Test Given, No Alcohol Reported

Drugs

- 14 Test Not Given
- 15 Test Refused
- 16 Test Given, Drugs Unknown
- 17 Test Given, No Drugs Reported
- 18 Drugs Reported (Specify Below)
- 19 Marijuana
- 20 Cocaine
- 21 Opiates
- 22 Amphetamines
- 23 PCP
- 24 Other Drug Medication
- 25 Type Unknown

Pedestrian

Unit # 2 3 4 5 6 7 8 9 10

Location	Action
1 In Crosswalk	1 Walking not Facing Traffic
2 In Roadway	2 Disregarded Signal
3 Not in Roadway	3 Darting into Road
4 On Sidewalk	4 Dark Clothing
	5 Walking Facing Traffic

Manner of Collision

- 1 No Collision with Motor Vehicle in Transport
- 2 Rear-end
- 3 Head On
- 4 Rear to Rear
- 5 Angle
- 6 Sideswipe, Same Direction
- 7 Sideswipe, Opposite Direction
- 8 Unknown

Darken Numbered Area(s) of Vehicle Damage

0 None
10 Undercarriage

11 Total (Damage to All Areas)
12 Other
13 Unknown

Extent of Damage

- 0 None
- 1 Very Minor
- 2 Minor
- 3 Moderate
- 4 Severe
- 5 Very Severe
- 6 Unknown

Vehicle Towed Due to Damage: Y N

Vehicle Removed By: **DRIVER**

Darken Numbered Area(s) of Vehicle Damage

0 None
10 Undercarriage

11 Total (Damage to All Areas)
12 Other
13 Unknown

Extent of Damage

- 0 None
- 1 Very Minor
- 2 Minor
- 3 Moderate
- 4 Severe
- 5 Very Severe
- 6 Unknown

Vehicle Towed Due to Damage: Y N

Vehicle Removed By: **CITY OF MILWAUKEE**

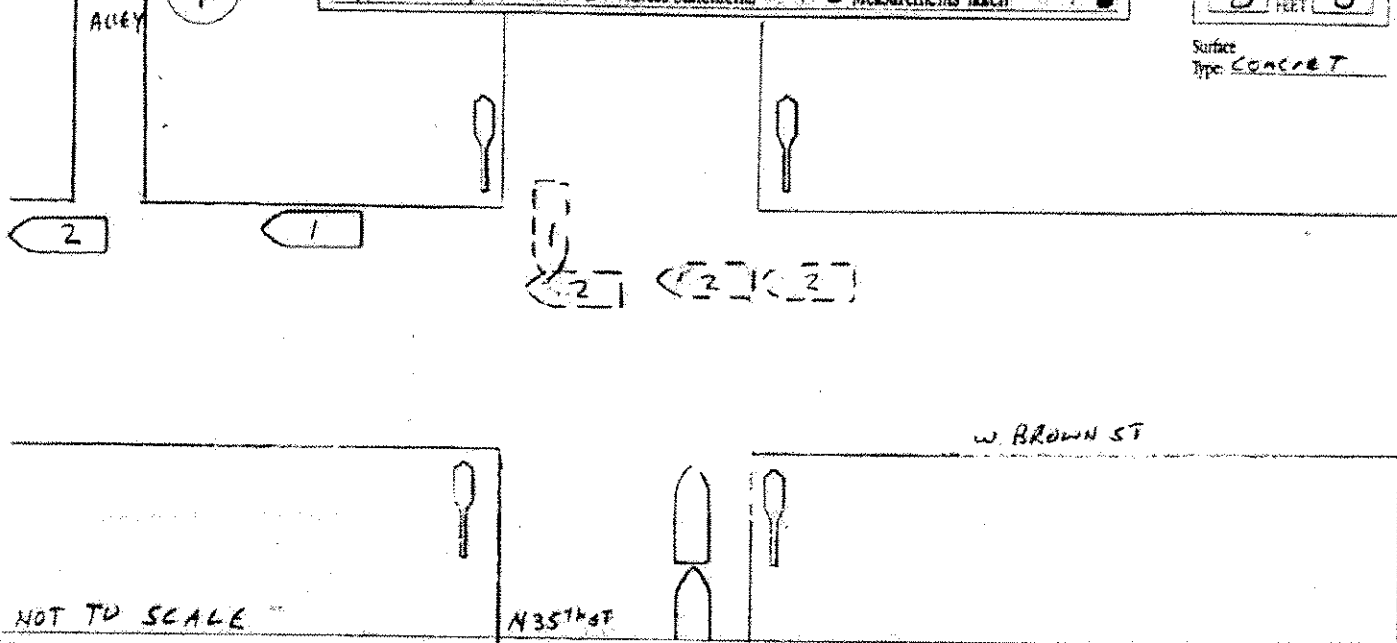
Fixed Object Struck				PROPERTY OWNER		
Unit #	Unit #	Unit #	Unit #	Last	First	M.I.
				ADDRESS Street & Number		
Govt. Damage Tag #				City & State		
				ZIP		Phone Number ()

Draw Diagram of Accident & Indicate North with an arrow in the circle.

Pictorial Representation of Narrative

Supplemental Reports Witness Statements Measurements Taken

Skidmarks to Impact
Unit 1: 0 FEET Unit 2: 0



N UNIT ONE WAS SOUTH BOUND ON N 35TH ST
A APPROACHING W BROWN ST. UNIT TWO WAS WEST
R BOUND ON W BROWN ST. WITH ITS EMERGENCY LIGHT
R AND SIREN ACTIVATED. UNIT TWO STOPPED FOR
A RED TRAFFIC LIGHT FOR EAST/WEST BOUND TRAFFIC
T TO CLEAR THE TRAFFIC ON N 35TH ST. UNIT TWO
I PROCEEDED ACROSS THE INTERSECTION, WEST BOUND
V UNIT ONE'S FRONT END COLLIDED WITH UNIT TWO
E RIGHT SIDE.

Photos By: _____

What Drivers Were Doing

Unit Number	Unit Number
<input type="checkbox"/> 1	<input type="checkbox"/> 1
<input type="checkbox"/> 2	<input type="checkbox"/> 2
<input type="checkbox"/> 3	<input type="checkbox"/> 3
<input type="checkbox"/> 4	<input type="checkbox"/> 4
<input type="checkbox"/> 5	<input type="checkbox"/> 5
<input type="checkbox"/> 6	<input type="checkbox"/> 6
<input type="checkbox"/> 7	<input type="checkbox"/> 7
<input type="checkbox"/> 8	<input type="checkbox"/> 8
<input type="checkbox"/> 9	<input type="checkbox"/> 9
<input type="checkbox"/> 10	<input type="checkbox"/> 10
<input type="checkbox"/> 11	<input type="checkbox"/> 11
<input type="checkbox"/> 12	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 13
<input type="checkbox"/> 14	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 15
<input type="checkbox"/> 16	<input type="checkbox"/> 16
<input type="checkbox"/> 17	<input type="checkbox"/> 17
<input type="checkbox"/> 18	<input type="checkbox"/> 18

- 1. Going Straight
- 2. Making Left Turn
- 3. Making Right Turn
- 4. Slowing or Stopping
- 5. Stopped in Traffic
- 6. Legally Parked
- 7. Violating No Passing Zone
- 8. Illegally Parked
- 9. Parking Maneuver
- 10. Backing Maneuver
- 11. Overtaking on Left
- 12. Overtaking on Right
- 13. Making U Turn
- 14. Turning on Red
- 15. Merging
- 16. Negotiating Curve
- 17. Other
- 18. Other

WITNESS NAME: **CARY, John** First: **John** Last: **M**
 ADDRESS: **12006 N. RIVERLENN** Date of Birth: **06-30-51**
 City & State: **MEDWON WI 53092** Phone Number: **262-243-9039**

ACCESS CONTROL

- 1. No Control (Unlimited Access)
- 2. Full Control (Only Ramp Entry/Exit)
- 3. Partial Control

ROAD TERRAIN

Part A

- 1. Straight
- 2. Curve

Part B

- 3. Level Flat
- 4. Hill

LIGHT CONDITION

- 1. Daylight
- 2. Dark-Not Lighted
- 3. Dark-Lighted
- 4. Dawn
- 5. Dusk
- 6. Unknown

TRAFFIC WAY

- 1. Not Physically Divided (2-Way Traffic)
- 2. Divided Highway, Median Strip, without Traffic Barrier
- 3. Divided Highway, Median Strip, with Traffic Barrier
- 4. One-Way Traffic
- 5. Parking Lot or Private Property

ROAD SURFACE CONDITION

- 1. Dry
- 2. Wet
- 3. Snow/Slush
- 4. Ice
- 5. Sand, Mud, Dirt, Oil
- 6. Other
- 7. Unknown

WEATHER

- 1. Clear
- 2. Cloudy
- 3. Rain
- 4. Snow
- 5. Fog, Smog, Smoke
- 6. Sleet, Hail (Freezing Rain or Drizzle)
- 7. Blowing Sand, Soil, Dirt, Snow
- 8. Severe Crosswinds
- 9. Other
- 10. Unknown

RELATION TO ROADWAY

- 1. On Roadway
- 2. Parking Lot or Private Property
- 3. Shoulder (Other Than Shoulder within Median or Gore)
- 4. Median (Other Than Median within Gore)
- 5. Outside Shoulder-Left
- 6. Outside Shoulder-Right
- 7. Off Roadway-Location Unknown
- 8. Gore (Area between Ramp & Highway)
- 9. On Ramp
- 10. Unknown

Traffic Control

Unit Number	Unit Number
<input type="checkbox"/> 1	<input type="checkbox"/> 1
<input type="checkbox"/> 2	<input type="checkbox"/> 2
<input type="checkbox"/> 3	<input type="checkbox"/> 3
<input type="checkbox"/> 4	<input type="checkbox"/> 4
<input type="checkbox"/> 5	<input type="checkbox"/> 5
<input type="checkbox"/> 6	<input type="checkbox"/> 6
<input type="checkbox"/> 7	<input type="checkbox"/> 7
<input type="checkbox"/> 8	<input type="checkbox"/> 8
<input type="checkbox"/> 9	<input type="checkbox"/> 9
<input type="checkbox"/> 10	<input type="checkbox"/> 10
<input type="checkbox"/> 11	<input type="checkbox"/> 11

- 1. No Control
- 2. Traffic Signal Operating
- 3. Traffic Signal Flashing
- 4. Stop Sign
- 5. Stop Sign with Flasher Warning
- 6. Warn Sign with Flasher
- 7. Yield Sign
- 8. Traffic Control Person
- 9. RR-Sign Signal
- 10. Other
- 11. Other

8140180

Document Number Override

Officer's Opinion of Possible Contributing Circumstances

Driver Factors

Unit Number	Unit Number
1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	1 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>
6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/>	6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/>
N/A	N/A

1	Exceeding Speed Limit	1
2	Speed Too Fast Condition	2
3	Fail to Yield Right of Way	3
4	Inattentive Driving	4
5	Following Too Close	5
6	Improper Turn	6
7	Left of Center	7
8	Disregarded Traffic Control	8
9	Improper Overtaking	9
10	Unsafe Backing	10
11	Failure to Have Control	11
12	Driver Condition	12
13	Physically Disabled	13
14	Other	14

Vehicle Factors

Unit Number	Unit Number
1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	1 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>
6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/>	6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/>
N/A	N/A

1	Brake System	1
2	Tires	2
3	Steering System	3
4	Turn Signals	4
5	Head Lamps	5
6	Stop Lamps	6
7	Tail Lamps	7
8	Disabled in Prior Accident	8
9	Other Disabled	9
10	Mirrors	10
11	Suspension System	11
12	Other	12

Highway Factors

Unit Number	Unit Number
1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	1 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>
6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/>	6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/>
N/A	N/A

1	Snow, Ice or Wet	1
2	Narrow Shoulder	2
3	Low Shoulder	3
4	Soft Shoulder	4
5	Loose Gravel	5
6	Rough Pavement	6
7	Debris From Prior Accident	7
8	Other Debris	8
9	Sign Obscured or Missing	9
10	Narrow Bridge	10
11	Construction Zone	11
12	Visibility Obscured	12
13	Other	13

OFFICER INFORMATION

Last Name: LUEBBE, John First Initial: P

Law Enforcement Agency Address: 749 W. STATE ST

City & State: MILWAUKEE WI 53233 ZIP

Phone Number: (414) 935-7216

Agency: 2-9 Enforcement Agency: MILW PD Officer ID #: 60329

Date Notified (MONTH DAY YEAR): 05 04

Time Notified (Military Time) (HOUR MIN): 17 28

Time Arrived (Military Time) (HOUR MIN): 17 30

Date of Report (MONTH DAY YEAR): 05 04

Truck & Bus Accident Information (This Section Must Be Completed for Each Truck or Bus Involved in this Accident.)

When to Use This Section: Did the accident involve...

Part A

A truck with at least two axles and six tires? Y N

A truck with a hazardous materials placard? Y N

A bus designed to carry 16 or more persons, including the driver? Y N

STOP! If all the responses to Part A are "NO" do not complete this Truck & Bus Accident Information Section. If there are any "YES" answers, continue to Part B.

Part B

Any person who was fatally injured? Y N

Any injured person who required transport for immediate medical treatment? Y N

One or more vehicles that had to be towed from the scene as a result of the accident? Y N

STOP! If all the responses to Part B are "NO" do not continue. If there are any "YES" answers, please complete this Truck & Bus Accident Information section.

Hazardous Material Information

Hazardous Material Class Numbers (1-2 digit):

Hazardous Material "UN" Numbers (1 digit):

Hazardous Material Placard Displayed? Y N

Hazardous Cargo was Released? Y N

List the Hazardous Material(s) by Name in this Load:

List the Name(s) of Released Hazardous Material(s):

Carrier Information

Carrier Identification Numbers

US DOT: 146 LC

KCC MC: IC

Carrier Address:

Source: Vehicle Side Shipping Papers Trip Manifest Driver Log Book

Vehicle Information

Gross Vehicle Weight Rating: LBS Total # of Axles:

Vehicle Configuration:

SEQUENCE OF EVENTS FOR THIS VEHICLE

1	2	3	4	1	2	3	4
1	2	3	4	1	2	3	4
1	2	3	4	1	2	3	4
1	2	3	4	1	2	3	4
1	2	3	4	1	2	3	4
1	2	3	4	1	2	3	4
1	2	3	4	1	2	3	4
1	2	3	4	1	2	3	4
1	2	3	4	1	2	3	4
1	2	3	4	1	2	3	4

Cargo Body Type:

AUG 09 2004

Printed in U.S.A. GS03 854307 Mark Refers by NCS 1007 108-3

PO-15A 3/98 SUPPLEMENTAL REPORT MILWAUKEE POLICE DEPARTMENT	<input type="checkbox"/> INCIDENT SUPPLEMENT <input checked="" type="checkbox"/> ACCIDENT SUPPLEMENT <input type="checkbox"/> JUVENILE SUPPLEMENT	PAGE 1 OF 1	DATE OF REPORT 08-05-04	INCIDENT/ACCIDENT # 8140180
--	---	-------------	----------------------------	--------------------------------

INCIDENT INFORMATION	INCIDENT	DATE OF INCIDENT/ACCIDENT
	P D O (Squad) Accident	08-05-04
	VICTIM	LOCATION OF INCIDENT/ACCIDENT
		N. 27th St. and W. Brown St.
JUVENILE LAST NAME	FIRST	MIDDLE
		DATE OF BIRTH
		<input type="checkbox"/> DETAINED <input type="checkbox"/> ORDERED TO MCCC <input type="checkbox"/> OTHER

QUANTITY	TYPE OF PROPERTY	DESCRIPTION	SERIAL #	CODE #	VALUE
----------	------------------	-------------	----------	--------	-------

This report is being written P.O. John LUEBBE assigned to Patrol Support Division Motor Cycle Unit Early Shift.

On Thursday August 5, 2004 at 5:28 P.M. Squad 873, P.O. LUEBBE, was dispatched to a P.D.O. Accident involving a Squad car at N. 27th St. and W. Brown St.

Upon my arrival I was met by Sgt. Johnny SGIGNUOLI, who responded to an accident involving an unmarked squad car, Squad 513, (P.O. Paul D. LOUG (the driver) and P.O. Ala W. AWADALLAH (passenger.) Sgt. SGIGNUOLI stated that, Squad 513 was responding to back up an officer involved in a foot chase in the area to N. 35th St. and W. Brown St. with the red light and siren activated. Sgt. SGIGNUOLI interviewed a witness to the accident, (John M. CARY W/M DOB 06-30-51 of 12006 N. River Ln. Mequon WI 53092 phone 262-243-9093,) who stated that he was northbound on N. 27th St. approaching W. Brown St. He stated that he had to stop in traffic behind three other north bound cars at a green traffic light, because the squad car was going westbound on W. Brown St. at N. 27th St. with it's red light and siren on. He stated that the squad car stopped at the intersection and the driver of the squad car looked south and north and then proceeded through the intersection. He stated that there was a car coming southbound on N. 27th St. at W. BROWN St. He stated that the (southbound)car did not stop for the squad car. He stated that the southbound car's front end hit the squad car. He stated that, the southbound car did not appear to be speeding.


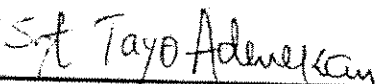
I interviewed, Syla J. BARNETT, (B/F DOB 07-11-42 of 1850 N. 26th St. Milwaukee WI. 53208 phone 414-342-2208) who stated that she was southbound on N. 27th St. approaching W. Brown St. She stated that when she got into the intersection she heard the siren and seen the squad car, but she could not stop to avoid the accident. She stated that she was not hurt in the accident.

I interviewed P.O. LOUG, who stated that, they were responding to back up an officer in a foot chase at N. 35th St. and W. Brown St. with an unmarked squad car with it's emergency light and siren activated. He stated the they were westbound on W. Brown St. at N. 27th St. He stopped for a red traffic light and cleared the intersection of north and southbound traffic. He stated that there were four cars stopped facing northbound. He proceeded through the intersection. He stated that the squad car was hit by a southbound car.

I interviewed P.O. AWADALLAH, who stated that, they were westbound on W. Brown St. at N. 27th St. responding with the emergency light and siren on to back up a Squad involved in a foot chase at N. 35th St. and W. Brown St. He stated that P.O. LOUG stopped for the red traffic signal for east and west bound traffic to clear the intersection. He stated that the intersection was clear and P.O. LOUG proceeded through the intersection. He stated that there was four cars facing northbound who stopped for the squad car at a green traffic light. He stated that when they got into the intersection they were hit by the southbound car.

Squad 383, I.D. Tech. HOFFMAN responded to the scene and took 14 photos at 5:50 P.M.

The damage to the vehicles as follows: Ms. BARNETT's car, front bumper, right and left fenders and hood, the squad cars damage: front right fender directional light, right front wheel, front and rear door, the front of the right rear quarter panel and the front right cowl. The squad car was towed by the city of Milwaukee. Ms. BARNETT drove her car home.

REPORTING OFFICER  P.O. John LUEBBE	Payroll 60329	Loc Code 2-9	SUPERVISORS SIGNATURE 
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CCC VALUESCOPE™

Claim Services

West Bend Market Report

Report Reference Number: 32823103

Claim reference : HHV5227888JA

Loss Incident Date: 08/05/2004

Appraiser : FILO

Insured: Barnwett

Adjuster : Steffens, Jeana

Adjuster ID : DJF

Owner: Sylvia Barnwett

Introduction

West Bend has conducted an appraisal of your 1997 Toyota Corolla DX 4 Door Sedan located in Milwaukee, WI. The appraisal information was then used to conduct research in your local market to determine the local market value of your car. This CCC Valuescope Market Report details the results of that research. It contains the following sections:

<u>Vehicle Valuation Summary</u>	Provides the market valuation including all components
<u>VINGuard™ Vehicle Identification</u>	Details the vehicle configuration information
<u>VINGuard™ Vehicle History Information</u>	Provides the results of vehicle history research
<u>CARFAX^C Report</u>	Provides the results of a CARFAX vehicle history database search
<u>Local Market Definition</u>	Details the local market basis for this valuation
<u>Valuation Methodology</u>	Describes the method used to evaluate the loss vehicle
<u>Vehicle Condition</u>	Details the vehicle's pre-accident condition
<u>Local Market Comparable Vehicles</u>	Presents the comparable vehicles located in your market
<u>NHTSA Vehicle Recall</u>	Lists National Highway Traffic Safety Administration recall notices
<u>Vehicle Appraisal and Valuation Notes</u>	Lists detailed log notes for this file

Claim reference : HHV5227888JA

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Report Reference Number: 32823103

Vehicle Valuation Summary

1997 Toyota Corolla DX 4 Door Sedan - Milwaukee, WI

Below are the components included in this local market valuation:

Component	Code	Value	The base value is the local market value of a vehicle of the same year, make, and model as the loss vehicle, including average mileage, and all standard and predominant equipment.
Base Value		\$ 4,812.00	
Odometer	88,268	+ 293.00	
Equipment			
<u>Transmission</u>			
Automatic Transmission	AT	Included	As such, the vehicle equipment listing reflects proper deductions for all standard or predominant equipment which is not present on the loss vehicle.
Overdrive	OD Standard	Included	
<u>Power</u>			
Power Steering	PS Standard	Included	In cases where a standard or predominant option is superceded by a replacement or upgrade, a corresponding addition will appear for the option which supersedes the standard/predominant option.
Power Brakes	PB Standard	Included	
Power Windows	PW	+ 44.00	Package options are options included with that package.
Power Locks	PL	+ 44.00	
Power Mirrors	PM	Included	Non-factory options were not available from the factory at the time this vehicle was manufactured and any such options were installed at a different location at a later date.
<u>Decor/Convenience</u>			
Air Conditioning	AC	Included	
Rear Defogger	RD Standard	Included	
Tilt Wheel	TW	+ 44.00	
Cruise Control	CC	+ 44.00	
Cloth Seats	CS Standard	Included	
Reclining/Lounge Seats	RL Standard	Included	
Bucket Seats	BS Standard	Included	
Dual Mirrors	DM Standard	Included	
<u>Radio</u>			
AM Radio	AM	Included	
FM Radio	FM	Included	
Stereo	ST	Included	
Cassette	CA	+ 44.00	
Search/Seek	SE	Included	
<u>Other</u>			
Body Side Moldings	BN Standard	Included	
Intermittent Wipers	IW Standard	Included	
Tinted Glass	TG Standard	Included	
Metallic Paint	MP	Included	
Air Bag	AG Standard	Included	
Passenger Air Bag	RG Standard	Included	
Full Wheel Covers	FC Standard	Included	
Local Market Value		\$ 5,325.00	
Current Condition Adjustment		+ 151.00	
Actual Cash Value		\$ 5,476.00	
Pre Tax Amount		\$ 5,476.00	
Adjusted Vehicle Value			

\$ 5,476.00

Claim reference : HHV5227888JA

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VINGuard™ Vehicle Identification

VIN: 1NXBB02E4VZ519804

Every vehicle sold in the United States is required to have a manufacturer assigned Vehicle Identification Number (VIN). This number provides the exact specifications of the vehicle. Decoding the VIN identifies the exact vehicle for which the local market value will be determined.

	Insurer Description	VINGuard Analysis
Year	1997	1997
Make	Toyota	Toyota
Model	Corolla DX	Corolla
Model Number	B02E	B02E
Body Style	4 Door Sedan	4 Door Sedan
Engine	4-1.8L-FI	4-1.8l-Fi
Transmission	Automatic Transmission Overdrive	
Restraints	Air Bags (Driver+Pass.)	Air bags (driver+pass.)
Odometer	88,268	

This vehicle was assembled in FREEMONT, CA

VINGuard™ is a database used to decode completely and accurately all manufacturer assigned Vehicle Identification Numbers.

VINGuard™ Vehicle History Information

VINGuard™ Messages: VINGuard has decoded this VIN without any errors.

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VEHICLE HISTORY INFORMATION

VEHICLE HISTORY REPORTS

www.carfax.com

VIN: 1NXBB02E4VZ519804

CARFAX searched its nationwide database of nearly 2 billion records to provide you with this detailed vehicle history. Avoid making a potentially costly mistake when buying your next used car. Order a CARFAX Vehicle History Report at www.carfax.com.

Carfax Results

DATE REPORTED	ODOMETER READING	INFORMATION SOURCE	GENERAL COMMENTS
09/23/1996		NICB	Vehicle manufactured and shipped to original dealer
12/01/1996		Wisconsin Motor Vehicle Dept. Milwaukee, WI	Registered as personal vehicle
12/18/1996	43	Wisconsin Motor Vehicle Dept. Milwaukee, WI	Odometer reading reported for title
01/14/1997		Wisconsin Motor Vehicle Dept. Milwaukee, WI Title #970149G196	Title or registration issued First owner reported Loan or lien reported
05/31/1997		Wisconsin Police Report Milwaukee, WI Case #970510225	Accident Reported with a parked motor vehicle Severe damage reported
07/20/1997		Wisconsin Police Report Milwaukee, WI Case #970706744	Accident Reported with another motor vehicle Very minor damage reported
09/09/1997		Wisconsin Motor Vehicle Dept. Milwaukee, WI Title #9725232051	Title or registration issued Loan or lien reported
03/27/1998	15,139	Service Facility	Vehicle serviced Fluid levels checked
05/18/1998	16,000	Wisconsin Inspection Station	Passed emissions inspection
08/19/1998	19,542	Service Facility	Vehicle serviced Lubed and oil/filter changed

01/28/1999	25,212	Service Facility	Vehicle serviced Lubed and oil/filter changed
09/27/1999	34,116	Service Facility	Vehicle serviced Lubed and oil/filter changed Maintenance inspection completed
03/31/2000	39,224	Service Facility	Vehicle serviced Lubed and oil/filter changed
05/25/2000	40,000	Wisconsin Inspection Station	Passed emissions inspection
07/25/2000	42,577	Service Facility	Vehicle serviced Lubed and oil/filter changed
11/16/2000	47,018	Service Facility	Vehicle serviced Front brake pads and rotors replaced Lubed and oil/filter changed Fluid levels checked
04/27/2001	51,492	Service Facility	Vehicle serviced Lubed and oil/filter changed Tires rotated
10/23/2001		Wisconsin Police Report Case #011013746	Accident Reported in Milwaukee County Vehicle involved in crash with a parked motor vehicle Very minor damage reported
11/16/2001	59,062	Service Facility	Vehicle serviced Lubed and oil/filter changed
04/05/2002	63,132	Service Facility	Vehicle serviced Lubed and oil/filter changed Tires rotated
05/16/2002	64,000	Wisconsin Inspection Station	Passed emissions inspection
07/10/2002	66,092	Service Facility	Vehicle serviced Lubed and oil/filter changed
10/28/2002	70,180	Service Facility	Vehicle serviced Lubed and oil/filter changed

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Bring this coupon to any CARFAX Certified Dealer to view a FREE CARFAX Vehicle History Report on any vehicle in stock.

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ON ANY USED CAR**

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Guarantee*

We miss it... We buy it



www.carfax.com

a POLK company

Claim reference : HHV5227888JA

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Local Market Definition

The local market value for your **1997 Toyota Corolla DX 4 Door Sedan** was defined by the ZIP code 53205-- Milwaukee, WI. Adjacent markets were also searched as secondary sources to locate comparable vehicles. Details of the specific markets searched follow.

The state of Wisconsin is composed of 7 distinct local markets. The following 7 local markets were used in the preparation of this vehicle market report.

Milwaukee WI - Primary local market vehicle database

In this market, CCC maintains a database of 7,011 inspected dealer vehicles located at 32 dealerships, and 19,507 dealer advertised, and 8,609 privately advertised vehicles taken from 24 local papers or magazines. This local database also includes 1,450 vehicle valuations researched in the last 90 days.

Madison WI - Secondary local market vehicle database

In this market, CCC maintains a database of 4,758 inspected dealer vehicles located at 19 dealerships, and 11,820 dealer advertised, and 5,826 privately advertised vehicles taken from 24 local papers or magazines. This local database also includes 450 vehicle valuations researched in the last 90 days.

La Crosse WI - Third local market vehicle database

In this market, CCC maintains a database of 5,726 dealer advertised, and 1,580 privately advertised vehicles taken from 19 local papers or magazines. This local database also includes 174 vehicle valuations researched in the last 90 days.

Other markets searched - Stevens Point/Wausau, Greenbay/Appleton, Rhinelander and Eau Claire

In these markets, CCC maintains a database of 5,284 inspected dealer vehicles located at 25 dealerships and 46,570 vehicles taken from 80 local newspapers or magazines. These local databases also includes 1,084 vehicle valuations researched in the last 90 days.

From these 7 local markets, comparable vehicles were selected based on the year, make, model, body style and engine configuration of your vehicle. Adjustments were made to the value of each comparable vehicle to compensate for differences in year, model, body style, engine configuration, packages, options, and mileage.

For your vehicle's CCC Valuescope Market Report, CCC identified 2 inspected dealer vehicles and 33 advertised vehicles as most comparable to your vehicle, and used their values to determine the Local Market Value.

Vehicles are determined to be comparable to the loss vehicle based on:

- Nearness to the loss vehicle's primary garage location
- Similarity of model, equipment, and odometer
- Precision of the data (inspected versus advertised)

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Valuation Methodology

This CCC Valuescope Market Report was prepared for West Bend by CCC Information Services Inc. CCC has been preparing market value reports for the insurance industry since 1981. CCC physically inspects vehicles for sale at vehicle dealerships in the local markets, and subscribes to local newspapers and automobile publications in these markets. CCC maintains vehicle databases containing these inspected dealership vehicles along with the dealer and private party advertised vehicle information.

When West Bend requests a CCC Valuescope Market Report from CCC, they provide CCC the VIN (Vehicle Identification Number) of the loss vehicle. Decoding this VIN identifies the exact vehicle for which the local market value will be done. See the **VINGuard™ Vehicle Identification** section.

West Bend also provides CCC the vehicle owner's ZIP code. This identifies the local market that will be used to determine the market value. See the **Local Market Definition** section.

Finally, West Bend provides CCC with the configuration of the loss vehicle including equipment, odometer, condition, maintenance, etc. This information is the starting point for determining the local market value.

Using this information, CCC searches its databases to find comparable vehicles in the local market. Vehicles located are compared to the loss vehicle, and adjustments are made for differences such as model, equipment, and odometer. The comparable vehicles are used to determine the local market value. See the **Local Market Definition** section.

After the **Adjusted Value** for the comparable vehicles are calculated (see the **Local Market Comparable Vehicles** section), CCC calculates the **Local Market Value**. This calculation is a weighted average. Using a weighted average allows those vehicles most similar to the loss vehicle to contribute a greater percentage to the **Local Market Value** than less similar vehicles.

Factors that determine similarity are:

- Precision of the data (inspected versus advertised)
- Equivalency of model, equipment, and odometer
- Nearness to the loss vehicle's primary garage location

Using a weighted average results in a more accurate **Local Market Value** as the vehicles most similar and closest to the loss vehicle contribute more to the value than less similar, more distant vehicles.

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Vehicle Condition

West Bend uses Condition Inspection Guidelines to determine the condition of key components of the loss vehicle. These guidelines are specific to geographic location, year and vehicle type. The guidelines describe physical characteristics for each of the vehicle components. Based on these guidelines, West Bend has determined the condition of the vehicle prior to the loss.

Component	Condition	Adjustment	Inspection Notes
<u>Mechanical</u>			
Engine	Fair	\$0	
Transmission	Fair	\$0	
Paint	Fair	\$0	
<u>Tires</u>			
Front Tires	Fair	\$0	
Rear Tires	Fair	\$0	
Body/Glass	Fair	\$0	OLD DAMAGE TO REAR BUMPER COVER AND CRACKED T/L
Interior	Clean	\$151	
Total		\$151	
Adjustments:			

- The Condition Inspection Guidelines provide information based on vehicle age, vehicle type, and geographic location. Your vehicle has been identified as being located in the Midwest region as a newer passenger car.
- The Condition Inspection Guidelines, and all dollar adjustments, are determined by surveys, inspections, and interviews with dealerships across the United States.

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Local Market Comparable Vehicles

The local market comparable vehicles are compared to the loss vehicle, and adjustments are made for differences in equipment, odometer, model, etc. The **Adjusted Value** represents the price of the comparable configured exactly as the loss vehicle.

Loss Vehicle	Inspected Dealer Comparable 1	Inspected Dealer Comparable 2	Dealer Vehicle Comparable 3
1997 Toyota Corolla DX 4 Door Sedan Automatic Transmission Overdrive	1998 Chevrolet Prizm 4 Door Sedan Automatic Transmission	1998 Toyota Corolla CE 4 Door Sedan Automatic Transmission	1998 Toyota Corolla Ve 4 Door Sedan Automatic Transmission
4-1.8L-FI Air Conditioning Radio: AM/FM Stereo Seek Cassette	4-1.8L Air Conditioning AM/FM Stereo Cassette	4-1.8L Air Conditioning AM/FM Stereo Seek Cassette Flip Roof	4-1.8L Air Conditioning
Not Found on Comparable Vehicle	Power Windows Power Locks		Power Windows Power Locks Tilt Wheel Cruise Control
88,268 miles	75,173 miles List Price \$8,995 Take Price \$4,995	61,662 miles Recently Available for \$7,422	82,000 miles Price \$4,900
Adjustments			
Roof		-87	
Model/Year	+950	-675	-450
Radio Options	+0	+0	+110
Not Found on Comparable Vehicle	+88		+176
Mileage	-35	-306	+122
Baseline Adjustment	-566	-566	-566
Adjusted Value	\$5,432	\$5,788	\$4,292
Location	Gordie Boucher Nissan	Schlossmann Honda City	Royal
Contact	Bruce Larson	Ron Huber	
Telephone	414-543-1234	414-328-3500	414-476-1988
Stock ID	Stock: 5519	Stock: 5586	
VIN	1Y1SK5282WZ420524	1NXBR18E3WZ053129	
Distance from Milwaukee	Inspected 7/29/2004 7 Miles- Milwaukee	7 Miles- Milwaukee	Pub Date 7/18/2004 3 Miles- Milwaukee

08/11/2004 at 11:29 AM

HHV5227888JA

10723

WEST BEND

WEST BEND MUTUAL INSURANCE CO.

DANIEL J. FILO

1900 S. 18TH AVE

WEST BEND, WI 53095

(800)236-5010x2965

ESTIMATE OF RECORD

Written By: DANIEL FILO 08/11/2004 11:29 AM

Adjuster: JEANA STEFFENS

Insured: SYLVIA BARNWETT

Claim #HHV5227888JA

Owner: SYLVIA BARNWETT

Policy #

Address: 1850 N 26TH ST

Date of Loss: 08/05/2004

MILWAUKEE, WI 53205

Type of Loss: Collision

Day: (414)342-2208

Point of Impact: 12. Front

Inspect 1850 N 26TH ST

Day: (414)342-2208

Location: MILWAUKEE, WI 53205

HOME

Repair

7 Days to Repair

Facility:

License #

1997 TOYO COROLLA DX 4-1.8L-FI 4D SED SAND Int:

VIN: 1NXBB02E4VZ519804 Lic:

Prod Date:

Odometer: 88268

Air Conditioning

Rear Defogger

Tilt Wheel

Cruise Control

Intermittent Wipers

Tinted Glass

Body Side Moldings	Dual Mirrors	Clear Coat Paint
Metallic Paint	Power Steering	Power Brakes
Power Windows	Power Locks	Power Mirrors
AM Radio	FM Radio	Stereo
Cassette	Search/Seek	Driver Air Bag
Passenger Air Bag	Cloth Seats	Bucket Seats
Recline/Lounge Seats	Automatic Transmission	Overdrive

NO.	OP.	DESCRIPTION	QTY	EXT. PRICE	LABOR	PAINT
1		RECYCLED ASSEMBLIES				
2*	Repl LKQ sheet metal +20%		1	2100.00	5.0	8.5
3*	Repl LKQ part inr struct +20%		1	240.00	9.5	2.5
4		AIR CONDITIONER & HEATER				
5	Repl Evacuate & recharge		1		m 1.4	M
6	Repl Refrigerant recovery		1		m 0.4	M
7		FRONT DOOR				
8	Blnd RT Door shell w/o molding					1.1
9	Blnd LT Door shell w/o molding					1.1
10*	R&I LT Belt w'strip outer				0.2	
11*	R&I RT Belt w'strip outer				0.2	
12	R&I RT Handle, outside black				0.3	
13	R&I LT Handle, outside black				0.3	
14	R&I RT R&I trim panel				0.4	
15	R&I LT R&I trim panel				0.4	

08/11/2004 at 11:29 AM

HHV5227888JA

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ESTIMATE OF RECORD

1997 TOYO COROLLA DX 4-1.8L-FI 4D SED SAND Int:

NO.	OP.	DESCRIPTION	QTY	EXT. PRICE	LABOR	PAINT
16	R&I	RT Mirror DX & CE black			0.3	
17	R&I	LT Mirror DX & CE black			0.3	
18*	R&I	RT Body side mldg black			0.3	
19*	R&I	LT Body side mldg black			0.3	
20		MISCELLANEOUS OPERATIONS				
21*	Repl	Cover car/bag	1	5.00	0.2	
22#	Algn	Set up guage & measure			2.0	F
23#	Algn	Uni-body / structure			6.0	F
24#		FEA	1	69.00		
25#		Rustproof / Undercoat / Corrosion protection	1	10.00	T 0.2	
26#	Refn	Color match / tint & blend				1.0
27#		Anti-freeze / coolant	1	10.00	T	

Subtotals ==> 2434.00 27.7 14.2

Parts		2414.00
Body Labor	17.9 hrs @ \$ 46.00/hr	823.40
Paint Labor	14.2 hrs @ \$ 46.00/hr	653.20
Mechanical Labor	1.8 hrs @ \$ 58.00/hr	104.40

Frame Labor	8.0 hrs @ \$ 44.00/hr	352.00
Paint Supplies	14.2 hrs @ \$ 26.00/hr	369.20
Sublet/Misc.		20.00

SUBTOTAL		\$ 4736.20
Sales Tax	\$ 4736.20 @ 5.6000%	265.23

TOTAL COST OF REPAIRS		\$ 5001.43
ADJUSTMENTS:		
Deductible		250.00

TOTAL ADJUSTMENTS		\$ 250.00
NET COST OF REPAIRS		\$ 4751.43

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.

08/11/2004 at 11:29 AM

HHV5227888JA

10723

ESTIMATE OF RECORD

1997 TOYO COROLLA DX 4-1.8L-FI 4D SED SAND Int:

Estimate based on MOTOR CRASH ESTIMATING GUIDE. Unless otherwise noted all items are derived from the Guide AEM8425 Database Date 07/2004, CCC Data Date 07/2004, and the parts selected are OEM-parts manufactured by the vehicles Original Equipment Manufacturer. OEM parts are available at OE/Vehicle dealerships. Asterisk (*) or Double Asterisk (**) indicates that the parts and/or labor information provided by MOTOR may have been modified or may have come from an alternate data source. Tilde sign (~) items indicate MOTOR Not-Included Labor operations. Non-Original Equipment Manufacturer aftermarket parts are described as AM, Qual Repl Parts or Comp Repl Parts which stands for Competitive Replacement Parts. Used parts are described as LKQ, Qual Recy Parts, RCY, or USED. Reconditioned parts are described as Recon. Recored parts are described as Recore. NAGS Part Numbers and Prices are provided by National Auto Glass Specifications, Inc. Pound sign (#) items indicate manual entries.

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