

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

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

TO: American Family Insurance  
Attn: Joel J Rogers  
440 S Executive Dr  
Brookfield WI 53005-4280

**NOTICE ISSUED IN ERROR**

You are hereby notified that the Common Cou  
duly disallowed the claim filed by you. No ac  
City of Milwaukee may be brought after six ((  
service of the Notice of Disallowance.

FILE NUMBER: 050228

Regarding: Claim on behalf of Alfredo Mart

Amount of Claim: \$8,114.42

Claim Disallowed on: July 6, 2005

Dated this 6<sup>th</sup> day of July, 2005.

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

Article Sent To:

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

Total American Family Insurance

Name (i Attn: Joel J Rogers

Street: 440 S Executive Dr

City, St: Brookfield WI 53005-4280

Postmark Here

7000 0600 0022 2784 2152

PS Form 3800, July 1999 See Reverse for Instructions

Ronald Leonhardt  
City Clerk

Form: Disallow