

July 27<sup>th</sup> 2018.

To whom this may concern: RE case number 1030-2018-1424

I received a letter stating my claim was denied and we are now requesting a hearing to appeal the cities findings. Enclosed is a copy of the letter we received postmarked July 11<sup>th</sup> as well as my initial claim letter.

Should you have any questions please contact my husband, Matt Pearson at 414-902-0121.

Thank you in advance for your assistance on this matter.

Sincerely,

Jennifer Pearson  
414-870-9797

10830 W Parnell Ave  
Hales Corners, Wi 53130

**RECEIVED**  
OFFICE OF CITY ATTORNEY

JUL 31 2018

11:15 AM/P.M.

CITY OF MILWAUKEE  
2018 JUL 30 P 2:49  
CITY CLERK'S OFFICE

June 6, 2018

**Via U.S. Mail and Email**

Jim Owczarski, City Clerk  
City Hall  
ATTN: Claims  
200 E. Wells Street, Room 205  
Milwaukee, WI 53202  
[jowcza@milwaukee.gov](mailto:jowcza@milwaukee.gov)

RECEIVED  
OFFICE OF THE ATTORNEY

JUN 27 2018

2:30 A.M./P.M.

CITY OF MILWAUKEE  
2018 JUN 25 P 3:15  
CITY CLERK'S OFFICE

Re: Injured Party: Jennifer Pearson  
Date of Loss: May 11, 2018 at 3:10 p.m. (appx.)  
Location of Loss: Miller Park Way and W. National Avenue

Dear Mr. Owczarski:

This is a claim about a vehicle accident regarding a hit and run between an employee of the City of Milwaukee and myself (a twenty-nine year old pregnant woman) that occurred on May 11, 2018 on Miller Park Way just north of W. National Avenue (the "Accident"). The purpose of this correspondence is to place you on formal notice of this hit and run accident and the damages that occurred as result of the City's unlawful, negligent, intentional, and malicious acts.

**Claim**

This is a simple, straightforward claim. A garbage truck owned and operated by the City of Milwaukee unlawfully drove into my vehicle while driving southbound on Miller Park Way. (See the attached Police Report and Witness Statements). The garbage truck then decided to intentionally flee the scene of the Accident. I was unable to record the vehicle number or the name of the employee driving the garbage truck. However, my brother (who was sitting in the passenger seat), and a third-party witness (see attached Police Report) saw and witnessed the City garbage truck hit my car and then flee the Accident scene.

Following the Accident, my husband (Matt Pearson) and I contacted the City and the Department of Public Works on numerous occasions to investigate this hit and run further to determine the name of the responsible employee. In response, the city has not provided any useful or relevant information. We are willing to work with you to investigate the identity of the unknown employee.

City Clerk  
June 6, 2018  
Page 2 of 2

City Vehicle No.: Unknown  
City Employee: Unknown  
  
Claimant: Jennifer Pearson  
10830 W Parnell Ave  
Hales Corners, WI 53130  
414-870-9797

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**Damages/Demand**

The damages that resulted from the City's unlawful acts are twofold. First, the property damage to my car is approximately \$4750. (See repair estimates from Abra and Carstar attached hereto).

In light of the foregoing, demand is made in the sum of \$35,000 to resolve all issues in this matter. This demand shall remain open for 30 days after which time it shall be withdrawn. If we are unable to reach an amicable solution, I will then have no option other than to seek representation to investigate this claim further and to seek punitive and compensatory damages for medical expenses and the emotional distress this Accident as caused to me and my family, and alert the media about the dangers of the City and its employees.

Thank you for your immediate attention to this matter. I look forward to your prompt response.

Very truly yours,



By: Jennifer Pearson

**Attachments/Enclosures**

cc: Matthew P. Pearson  
Milwaukee City Attorney - Grant F. Langley  
Milwaukee Common Counsel - 10<sup>th</sup> District - Michael J. Murphy  
Milwaukee Mayor - Mayor Tom Barrett

1ML0T80Q6Q  
18-056911

# WISCONSIN MOTOR VEHICLE CRASH REPORT

MILWAUKEE COUNTY SHERIFFS OFFICE  
821 W STATE ST RM 221  
MILWAUKEE, WI 53233  
(414) 278-4712

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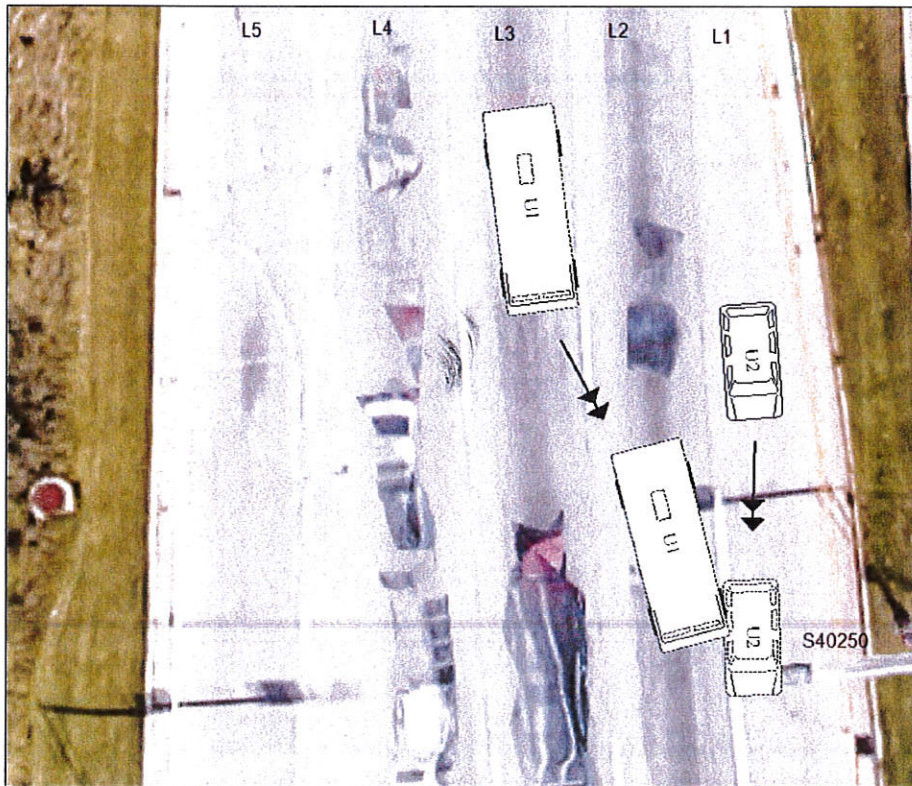
|  |   |   |                                    |   |  |   |                    |
|--|---|---|------------------------------------|---|--|---|--------------------|
| Document Number Override                       |   | Primary Crash Document #                    |                                    | Agency Crash Number                       |  | Investigating Officer/Deputy<br><b>DEPUTY MATTHEW VANDERTIE</b> |                    |
| Crash Date<br>05/11/2018                       |   | Crash Time<br>03:10 PM                      |                                    | Date Arrived<br>05/11/2018                |  | Time Arrived<br>04:25 PM  |                    |
| Date Notified<br>05/11/2018                    |   | Time Notified<br>04:11 PM                   |                                    | Total Units<br>02                         |  | Total Injured<br>00   | Total Killed<br>00 |
| <input type="checkbox"/> On Emergency          | <input checked="" 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<br>NO                  |  | Tags<br>ZONE 2  |                    |
| <input checked="" type="checkbox"/> Reportable |   | Crash Type<br>DT4000 (STANDARD CRASH)       |                                    | <input type="checkbox"/> Amended          |  | <input type="checkbox"/> Secondary Crash                        |                    |

## Description

Diagram



SOUTHBOUND MILLER PARK WAY NORTH OF W. NATIONAL AVE.



NOT DRAWN TO SCALE

Reconstruction By

**RECEIVED**  
OFFICE OF CITY ATTORNEY

Photos By

JUN 27 2018

2:30 A.M./P.M.

Additional Information

**WITNESS STATEMENTS**

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

I, SQUAD 44, WAS DISPATCHED TO THE MILWAUKEE COUNTY SHERIFF'S OFFICE SUBSTATION FOR A REPORT OF A HIT AND RUN CRASH. DRIVER OF UNIT 2 CAME TO THE SUBSTATION WITH UNIT 2 TO REPORT THE CRASH. UNIT 1 AND ITS DRIVER WERE NOT LOCATED.

DRIVER OF UNIT 2 STATED THAT SHE WAS IN THE FAR LEFT LANE BEFORE THE TRAFFIC LIGHTS, AND THE LIGHTS HAD JUST TURNED GREEN. SHE STATED THAT SHE WAS "TRYING TO CHANGE LANES TO THE RIGHT" WHEN A "YELLOW GARBAGE" TRUCK HIT THE PASSENGER'S SIDE OF HER VEHICLE, AND SHE REMEMBERED SEEING HER MIRROR "GO FLYING." SHE ALSO STATED THAT AFTER THE GARBAGE TRUCK HIT HER VEHICLE, SHE SAW IT "KEEP GOING," BUT SHE WAS NOT ABLE TO OBTAIN FURTHER DETAILS FROM THE GARBAGE TRUCK.

WITNESS STATED THAT HE WAS BEHIND UNIT 2 AND WAS "GETTING READY TO TURN MYSELF" WHEN A "YELLOW GARBAGE TRUCK" CAME "FROM THE CENTER LANE" AND SWERVED INTO THEIR LANE. HE STATED THAT THE GARBAGE TRUCK THEN "CLIPPED" UNIT 2 AND "TOOK OFF" SOUTHBOUND.

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UPON INVESTIGATION, BOTH UNITS WERE TRAVELING SOUTHBOUND ON MILLER PARK WAY NORTH OF W. NATIONAL AVE. UNIT 2 WAS IN LANE 1 AND BEGINNING TO CHANGE LANES TO LANE 2. UNIT 1, DESCRIBED AS A YELLOW GARBAGE TRUCK, CAME FROM A LANE TO THE LEFT OF UNIT 2 AND SIDESWIPE THE PASSENGER'S SIDE OF UNIT 2. UNIT 1 THEN LEFT THE SCENE. I CONDUCTED FOLLOW UP WITH LOCAL DEPARTMENTS OF PUBLIC WORKS, INCLUDING THE CITY OF MILWAUKEE, WITH NEGATIVE RESULTS AS TO DETERMINING UNIT 1 OR ITS DRIVER. THERE WAS NO TRAFFIC CAMERA VIDEO FOOTAGE OF THE CRASH.

NO INJURIES.

NO FIRE/MEDICAL UNITS.

NO ASSISTING UNITS.

NO GOVERNMENT PROPERTY.

NO TOWS.

Location

|  |                           |               |
|--|---------------------------|---------------|
| ON S40250 STH 341/ STH175 SB<br>65 FT N<br>OF CONNECTOR STH 175 TO STH 59<br>IN THE CITY OF MILWAUKEE<br>IN MILWAUKEE COUNTY | Latitude                  | Longitude     |
|  | 43.022317358              | -87.970432183 |
|  | X Coordinate              | Y Coordinate  |
|  | 420930.03125              | 4763750       |
|  | Structure Type<br>UTILITY |               |

Crash Scene

|  |   |   |
|--|---|---|
| First Harmful Event<br><b>MOTOR VEH IN TRANSPORT</b>       | First Harmful Event Location<br><b>ON ROADWAY</b>                     | <b>RECEIVED</b><br>OFFICE OF CITY ATTORNEY        |
| Manner of Collision<br><b>05--SIDESWIPE/SAME DIRECTION</b> | Light Condition<br><b>DAYLIGHT</b>                                    | <b>JUN 27 2018</b>                                |
| Road Surface Condition(s)<br><b>WET</b>                    | Roadway Factor(s)<br><b>BACKUP DUE TO REGULAR CONGESTION</b>          | <i>2:30 AM</i>                                    |
| Environment Factor(s)<br><b>NONE</b>                       |   |   |
| Weather Condition(s)<br><b>RAIN</b>                        |   |   |
| Animal Type  | Relation To Trafficway<br><b>TRAFFICWAY - ON ROAD</b>                 |   |
| Crash Classification - Location<br><b>PUBLIC PROPERTY</b>  | Crash Classification - Jurisdiction<br><b>NO SPECIAL JURISDICTION</b> |   |
| Tribal Land  | Access Control<br><b>FULL CONTROL</b>                                 | Special Study                                     |
| Within Interchange Area<br><b>NO</b>                       | Junction Location<br><b>INTERSECTION-RELATED</b>                      | Intersection Type<br><b>FOUR-WAY INTERSECTION</b> |

Unit Summary

|                |   |   |  |  |
|----------------|---|---|--|--|
| <b>UNIT 01</b> | Unit Status<br><b>HIT AND RUN</b>                                   | Vehicle Operating As Classification<br><b>B CLASS</b> | Unit Type<br><b>TRUCK</b>                            |  |
|                | Vehicle Type<br><b>STRAIGHT TRUCK (INSERT TRUCK)</b>                | Operating As Endorsements                             |  |  |
|                | Total Occs<br><b>1</b>  | Train/Bus # Injured                                   | Total # Citations Issued<br><b>0</b>                 | Total Trailers<br><b>0</b>                       |
|                | Insurance?<br><b>UNKNOWN</b>  | Direction Of Travel<br><b>SOUTHBOUND</b>              | <input type="checkbox"/> Pre Crash Tire Mark         | Total HazMat Types<br><b>0</b>                   |
|                | Most Harmful Event: Collision With<br><b>MOTOR VEH IN TRANSPORT</b> | Special Function<br><b>NO SPECIAL FUNCTION</b>        | Speed Limit<br><b>50</b>                             | Total Lanes<br><b>5</b>                          |
|                | Traffic Way<br><b>DIVIDED HWY W/TRAFFIC BARRIER</b>                 | Traffic Control<br><b>TRAFFIC SIGNAL</b>              | Emergency Motor Vehicle Use<br><b>NOT APPLICABLE</b> | Traffic Control Inoperative/Missing<br><b>NO</b> |

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|   |      |                                   |            |   |   |                             |                     |
|---|------|-----------------------------------|------------|---|---|-----------------------------|---------------------|
| Surface Type<br><b>BLACKTOP (BITUMINOUS)</b>                                      |      | Road Curvature<br><b>STRAIGHT</b> |            | Road Grade<br><b>LEVEL</b>                          |   |                             |                     |
| Truck Bus or HazMat<br><b>TRUCK OR TRUCK COMBINATION &gt; 10,000LBS GVWR/GCWR</b> |      |                                   |            |   |   |                             |                     |
| <b>Vehicle</b>  |      |                                   |            |   |   |                             |                     |
| 01  | UNIT | 01                                | VEHICLE    | License Plate Number                                | Plate Type  | St                          | Country of Issuance |
|   |      |                                   |            | Vehicle Identification Number                       | Make  | Year                        | Model               |
| 01  | UNIT | 01                                | VEHICLE    | Color   | Body Style  | Bus Use<br><b>NOT A BUS</b> |                     |
|   |      |                                   |            | Initial Contact Point<br><b>UNKNOWN</b>             | Vehicle Damage  |                             |                     |
|   |      |                                   |            | Extent Of Damage<br><b>UNKNOWN</b>                  | <b>UNKNOWN</b>  |                             |                     |
|   |      |                                   |            | Towed Due To Damage<br><b>NOT TOWED</b>             | Vehicle Removed By<br><b>DRIVER</b>   |                             |                     |
|   |      |                                   |            | What Driver Was Doing<br><b>UNKNOWN</b>             | Vehicle Factors   |                             |                     |
|   |      |                                   |            | Driver Prior Action Other                           | <b>UNKNOWN</b>  |                             |                     |
|   |      |                                   |            | Driver Actions<br><b>UNKNOWN</b>                    |   |                             |                     |
| 01  | UNIT | 01                                | VEHICLE    | Driver Distractions<br><b>UNKNOWN IF DISTRACTED</b> | <p style="text-align: right;">RECEIVED<br/>CITY ATTORNEY</p> <p style="text-align: right;">MAY 27 2018</p> <p style="text-align: right;">2:30 A.M./P.M.</p> |                             |                     |
|   |      |                                   |            | Owner Name  | Owner Address   |                             |                     |
| <b>Sequence Of Events</b>   |      |                                   |            |   |   |                             |                     |
| 04  | UNIT | 01                                | INDIVIDUAL | Event<br><b>MOTOR VEH IN TRANSPORT</b>              |   |                             |                     |
|   |      |                                   |            | Event   |   |                             |                     |
|   |      |                                   |            | Event   |   |                             |                     |
|   |      |                                   |            | Event   |   |                             |                     |
| <b>Individual</b>   |      |                                   |            |   |   |                             |                     |
| 01  | UNIT | 01                                | INDIVIDUAL | Driver  | Citations Issued<br><b>0</b>  | Sex                         |                     |
|   |      |                                   |            |   | Date of Birth   | Race                        |                     |
|   |      |                                   |            | Address   | Driver License Number   |                             |                     |

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|   |   |                       |   |   |   |                |
|---|---|-----------------------|---|---|---|----------------|
| 01<br>001   | <b>Equipment</b>  |                       | On Duty Crash                                     | Safety Equipment                            |   |                |
|   | Seat Position<br><b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>       |                       | <b>RESTRAINT USE UNKNOWN</b>                      |   |   |                |
|   | Helmet Use  |                       | Helmet Compliance                                 |   |   |                |
|   | Eye Protection  |                       | Tint Compliance                                   |   |   |                |
|   | <b>Injury</b>   |                       | Injury Severity<br><b>NO APPARENT INJURY</b>      | Airbag<br><b>NOT APPLICABLE</b>             |   |                |
|   | Ejected<br><b>NOT APPLICABLE</b>                                      |                       | Ejection Path<br><b>NOT EJECTED/NOT APPLICABL</b> | Trapped/Extricated<br><b>NOT APPLICABLE</b> |   |                |
|   | Medical Transport<br><b>NOT TRANSPORTED</b>                           |                       | EMS Agency Identifier                             | EMS Run #                                   |   |                |
|   | Hospital  |                       | Date of Death                                     | Time of Death                               |   |                |
|   | <b>Non Motorist</b>   |                       | Striking Unit #                                   | Prior Action                                | Location  | To/From School |
|   | UNIT<br>INDIVIDUAL  | Action                |   |   |   |                |
| RECEIVED<br>DE OF CITY ATTORNEY<br><br>IN 27 2018<br><br>2:30 A.M. (P.M.) |   |                       |   |   |   |                |
| <b>Drug &amp; Alcohol</b>   |   | Suspected Alcohol Use |   | Suspected Drug Use                          |   |                |
| Alcohol Test Given<br><b>TEST NOT GIVEN</b>                               |   | Alcohol Test Type     |   | Alcohol Test Results                        |   |                |
| Drug Test Given<br><b>TEST NOT GIVEN</b>                                  |   | Drug Test Type        |   | Drug Test Results                           |   |                |
| Drug Type   |   |                       |   |   |   |                |
| Individual Condition<br><b>NOT OBSERVED</b>                               |   |                       |   |   |   |                |
| UNIT<br>TRUCK<br>BUS  | <b>Carrier</b>  |                       |   |   |   |                |
|   | <input checked="" type="checkbox"/> Use Vehicle Owner Same as Carrier |                       |   | Source                                      |   |                |
|   | Name  |                       |   | Address                                     |   |                |
|   | GVWR  |                       | Vehicle Configuration                             |   | Cargo Body Type   |                |
|   | US DOT #  |                       | Carrier Type                                      |   | Permitted Load  |                |
|   | <input type="checkbox"/> OS/OW Load                                   |                       | WI Permit Number                                  |   | <input type="checkbox"/> Permitted Vehicle On Permitted Route |                |
|   |   |                       |   |   | <input type="checkbox"/> Escort Vehicle Required By Permit    |                |
| Measured Height   |   | Measured Length       |   | Measured Width                              |   |                |
|   |   |                       |   | Measured Weight                             |   |                |

Unit Summary

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|                                  |   |  |   |                            |  |  |
|----------------------------------|---|--|---|----------------------------|--|--|
| UNIT<br>02                       | Unit Status<br><b>IN TRANSIT</b>                                    |  | Vehicle Operating As Classification<br><b>D CLASS</b> |                            | Unit Type<br><b>AUTOMOBILE</b>                       |  |
|                                  | Vehicle Type<br><b>(SPORT) UTILITY VEHICLE</b>                      |  |   |                            | Operating As Endorsements                            |  |
|                                  | Total Occs<br><b>2</b>  | Train/Bus # Injured                      | Total # Citations Issued<br><b>0</b>                  | Total Trailers<br><b>0</b> | Total HazMat Types<br><b>0</b>                       |  |
|                                  | Insurance?<br><b>YES</b>  | Direction Of Travel<br><b>SOUTHBOUND</b> | <input type="checkbox"/> Pre Crash Tire Mark          | Speed Limit<br><b>50</b>   | Total Lanes<br><b>5</b>                              |  |
|                                  | Most Harmful Event: Collision With<br><b>MOTOR VEH IN TRANSPORT</b> |  | Special Function<br><b>NO SPECIAL FUNCTION</b>        |                            | Emergency Motor Vehicle Use<br><b>NOT APPLICABLE</b> |  |
|                                  | Traffic Way<br><b>DIVIDED HWY W/TRAFFIC BARRIER</b>                 |  | Traffic Control<br><b>TRAFFIC SIGNAL</b>              |                            | Traffic Control Inoperative/Missing<br><b>NO</b>     |  |
|                                  | Surface Type<br><b>BLACKTOP (BITUMINOUS)</b>                        |  | Road Curvature<br><b>STRAIGHT</b>                     |                            | Road Grade<br><b>LEVEL</b>                           |  |
| Truck Bus or HazMat<br><b>NO</b> |   |  |   |                            |  |  |

|   |  |  |                                       |                             |   |  |
|---|--|--|---------------------------------------|-----------------------------|---|--|
| UNIT<br>02  | <b>Vehicle</b>   |  |                                       |                             |   |  |
|   | VEHICLE<br>02  | License Plate Number<br><b>484ZTE</b>  | Plate Type<br><b>AUT - AUTOMOBILE</b> | St<br><b>WI</b>             | Country of Issuance<br><b>UNITED STATES</b> |  |
|   |  | Vehicle Identification Number<br><b>JM3KFBCMXJ0345692</b>                      | Make<br><b>MAZDA</b>                  | Year<br><b>2018</b>         | Model<br><b>CX-5</b>                        |  |
|   | Color<br><b>GRY - GRAY</b>   | Body Style<br><b>UT - SPORT UTILITY VEHICLE</b>                                |                                       | Bus Use<br><b>NOT A BUS</b> |   |  |
|   | Initial Contact Point<br><b>3--RIGHT SIDE MIDDLE</b>                 | Vehicle Damage   |                                       |                             |   |  |
|   | Extent Of Damage<br><b>MINOR DAMAGE</b>                              | <b>1--RIGHT FRONT CORNER, 2--RIGHT SIDE FRONT, 3--RIGHT SIDE MIDDLE</b>        |                                       |                             |   |  |
|   | Towed Due To Damage<br><b>NOT TOWED</b>                              | Vehicle Removed By<br><b>DRIVER</b>  |                                       |                             |   |  |
|   | What Driver Was Doing<br><b>CHANGING LANES</b>                       | Vehicle Factors  |                                       |                             |   |  |
|   | Driver Prior Action Other  | <b>NOT APPLICABLE</b>  |                                       |                             |   |  |
|   | Driver Actions<br><b>NO CONTRIBUTING ACTION</b>                      | RECEIVED<br>OFFICE OF CITY ATTORNEY<br><br>JUN 27 2018<br><br>2:30 A.M. (P.M.) |                                       |                             |   |  |
| Driver Distractions<br><b>NOT DISTRACTED</b>                    |  |  |                                       |                             |   |  |
| Owner Name<br><b>JP MORGAN CHASE BANK NA<br/>(800) 336-6675</b> | Owner Address<br><b>P O BOX 901098<br/>FORT WORTH, TX 76101 , US</b> |  |                                       |                             |   |  |

|            |  |       |
|------------|--|-------|
| UNIT<br>02 | <b>Sequence Of Events</b>              |       |
|            | Event<br><b>MOTOR VEH IN TRANSPORT</b> | Event |



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|      |   |       |  |               |
|------|---|-------|--|---------------|
| UNIT | 03  | Event |  |               |
|      | 04  | Event |  |               |
| UNIT | <b>Policy Holder</b>  |       |  |               |
|      | Insurance Company<br>PROGRESSIVE-UNIVERSAL-INSURANCE-COMP   |       | Individual<br>JENNIFER PEARSON   |               |
| UNIT | <b>Individual</b>   |       |  |               |
|      | Driver<br>JENNIFER MARIE PEARSON<br>(414) 870-9797  |       | Citations Issued<br>0  | Sex<br>FEMALE |
| UNIT | Date of Birth<br>11/20/1988   |       | Race<br>WHITE  |               |
|      | Address<br>10830 W PARNELL AVE<br>HALES CORNERS, WI 53130 , US  |       | Driver License Number<br>P6254338892005<br>STATE: WISCONSIN COUNTRY: UNITED STATES |               |
| UNIT | <b>Equipment</b>  |       | Safety Equipment   |               |
|      | On Duty Crash   |       | SHOULDER & LAP BELT  |               |
| UNIT | Seat Position<br>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY  |       | Helmet Compliance  |               |
|      | Helmet Use  |       | Tint Compliance  |               |
| UNIT | Eye Protection  |       | Airbag   |               |
|      | <b>Injury</b>   |       | NON DEPLOYED   |               |
| UNIT | Injury Severity<br>NO APPARENT INJURY   |       | Ejection Path  |               |
|      | Ejected<br>NOT EJECTED  |       | NOT EJECTED/NOT APPLICABL  |               |
| UNIT | Medical Transport<br>NOT TRANSPORTED  |       | Trapped/Extricated<br>NOT TRAPPED  |               |
|      | Hospital  |       | EMS Agency Identifier  |               |
| UNIT | Striking Unit #   |       | EMS Run #  |               |
|      | Prior Action  |       | Hospital   |               |
| UNIT | Location  |       | Date of Death  |               |
|      | To/From School  |       | Time of Death  |               |
| UNIT | <b>Non Motorist</b>   |       |  |               |
|      | Action  |       |  |               |
| UNIT | Action Other  |       |  |               |
|      | <p style="text-align: right;">RECEIVED<br/>OFFICE OF CITY ATTORNEY<br/><br/>JUN 27 2018<br/><br/>2:30 A.M./P.M.</p> |       |  |               |
| UNIT | <b>Drug &amp; Alcohol</b>   |       | Suspected Drug Use   |               |
|      | Suspected Alcohol Use<br>NO   |       | NO   |               |
| UNIT | Alcohol Test Given<br>TEST NOT GIVEN  |       | Alcohol Test Type  |               |
|      | Alcohol Test Results  |       | Alcohol Test Results   |               |
| UNIT | Drug Test Given<br>TEST NOT GIVEN   |       | Drug Test Type   |               |
|      | Drug Test Results   |       | Drug Test Results  |               |
| UNIT | Drug Type   |       |  |               |
|      | Individual Condition<br>NOT OBSERVED  |       |  |               |

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|   |   |  |   |   |          |                                    |  |
|---|---|--|---|---|----------|------------------------------------|--|
| UNIT  | INDIVIDUAL  | <b>Individual</b>  |   |   |          |                                    |  |
|   |   | Passenger<br><b>ERIC SCOTT KOPP</b><br>(262) 420-0169                          | Citations Issued<br><b>0</b>                      | Sex<br><b>MALE</b>  |          |                                    |  |
|   |   | Address<br><b>6940 S ROLLING MEADOWS CT</b><br><b>OAK CREEK, WI 53154 , US</b> |   | Driver License Number<br><b>K1002179133708</b><br>STATE: WISCONSIN COUNTRY: UNITED STATES |          |                                    |  |
|   |   | <b>Equipment</b>   | On Duty Crash                                     | Safety Equipment  |          |                                    |  |
|   |   | Seat Position<br><b>3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER)</b>              | <b>SHOULDER &amp; LAP BELT</b>                    |   |          |                                    |  |
|   |   | Helmet Use   | Helmet Compliance                                 |   |          |                                    |  |
|   |   | Eye Protection   | Tint Compliance                                   |   |          |                                    |  |
|   |   | <b>Injury</b>  | Injury Severity<br><b>NO APPARENT INJURY</b>      | Airbag<br><b>NON DEPLOYED</b>   |          |                                    |  |
|   |   | Ejected<br><b>NOT EJECTED</b>  | Ejection Path<br><b>NOT EJECTED/NOT APPLICABL</b> | Trapped/Extricated<br><b>NOT TRAPPED</b>  |          |                                    |  |
|   |   | Medical Transport<br><b>NOT TRANSPORTED</b>                                    | EMS Agency Identifier                             | EMS Run #   |          |                                    |  |
|   |   | Hospital   | Date of Death                                     | Time of Death   |          |                                    |  |
|   |   | <b>Non Motorist</b>  | Striking Unit #                                   | Prior Action  | Location | To/From School                     |  |
|   |   | UNIT   | INDIVIDUAL  | Action  |          |                                    | RECEIVED<br>OFFICE OF CITY ATTORNEY<br><br>JUN 27 2018<br><br>2:30 A.M. (P.M.) |
|   |   |  |   | Action Other  |          |                                    |  |
| <b>Drug &amp; Alcohol</b>                   | Suspected Alcohol Use<br><b>NO</b>                              |  |   | Suspected Drug Use<br><b>NO</b>   |          |                                    |  |
| Alcohol Test Given<br><b>TEST NOT GIVEN</b> | Alcohol Test Type   |  |   | Alcohol Test Results  |          |                                    |  |
| Drug Test Given<br><b>TEST NOT GIVEN</b>    | Drug Test Type  |  |   | Drug Test Results   |          |                                    |  |
| Drug Type                                   |   |  |   |   |          |                                    |  |
| Individual Condition                        |   |  |   |   |          |                                    |  |
| <b>NOT OBSERVED</b>                         |   |  |   |   |          |                                    |  |
| <b>Witness</b>                              |   |  |   |   |          |                                    |  |
| WITN<br>01<br>ESS                           | Individual<br><b>DUSTIN CHARLES STROMBERG</b><br>(414) 369-8195 |  |   | Address<br><b>1712 MILWAUKEE AVE</b><br><b>SOUTH MILWAUKEE, WI 53172 , US</b>             |          | Date of Birth<br><b>11/13/1977</b> |  |

PROGRESSIVE CLAIMS  
2010 O'NEIL AVENUE  
HUDSON, WI 54016

**PROGRESSIVE**<sup>®</sup>

CITY OF MILWAUKEE  
ATTN: CITY CLERK CLAIMS  
200 E WELLS ST, RM 205  
MILWAUKEE, WI 53202

**Underwritten By:  
Progressive Universal Insurance  
Company**

Claim Number: 18-2626578  
Loss Date: May 11, 2018  
Document Date: May 16, 2018  
Page 1 of 1

**claims.progressive.com**

Track the status and details of your claim,  
e-mail your representative or report a  
new claim.

## Claim Information

We have completed the liability investigation for your claim resulting from an incident on May 11, 2018 at approximately 3:00 PM CT near the intersection of Miller Parkway and National. Based on the statement from our insured driver and a witness, it appear that the City of Milwaukee's garbage truck side swiped our insured vehicle causing damage and never stopped.

Based on the available facts, we have determined that our insured is not liable for your damages. As a result, we will not be able to make any payment to you at this time. Furthermore, since our insured is not at-fault for this accident, they will be pursuing a claim against the City of Milwaukee for the damage it caused.

Below is our customer's information:

Jennifer Pearson  
10830 West Parnell Ave  
Hales Corner, WI 53130  
Phone: 414-870-9797  
Phone: 414-902-0121

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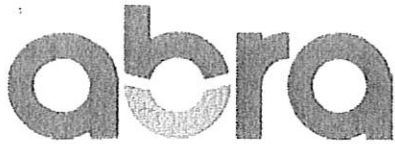
JUN 27 2018

2:30 AM (P.M.)

If you have any questions, please contact us.

MEIAN YU  
Claims Department  
1-715-690-3483  
1-800-PROGRESSIVE (1-800-776-4737)  
Fax: 1-715-381-2940  
Meian\_Yu@Progressive.com

Form Z587 XX (01/08) WI



**ABRA Auto Body & Glass - FranklinWI**

Workfile ID: 580b21cc  
Federal ID: 41-1484683

Right the First Time...On Time  
5525 West Rawson Avenue, Franklin, WI 53132  
Phone: (414) 421-5200  
FAX: (414) 421-5100

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AA

**Preliminary Estimate**

**Customer: PEARSON, MATT**

Written By: Michael Lavora

Insured: PEARSON, MATT  
Type of Loss: Collision  
Point of Impact: 04 Right Qtr Post (Right Side)

Policy #:   
Date of Loss: 5/10/2018 12:00 PM

Claim #: UNK  
Days to Repair: 0

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**Owner:**  
PEARSON, MATT  
10830 WEST PARNELL AVE  
HALES CORNERS, WI 53130  
(414) 902-0121 Business

**Inspection Location:**  
ABRA Auto Body & Glass - FranklinWI  
5525 West Rawson Avenue  
Franklin, WI 53132  
Repair Facility  
(414) 421-5200 Business

**Insurance Company:** 2:30 A.M./P.M.  
PROGRESSIVE INSURANCE COMPANIES

**VEHICLE**

2018 MAZD CX-5 Touring AWD 4D UTV 4-2.5L Gasoline Gasoline Direct Injection METAL GRAY

VIN: JM3KFBCMXX0345692 Interior Color: BLACK Mileage In: 2,772 Vehicle Out:  
License: 484ZTE Exterior Color: METAL GRAY Mileage Out:  
State: WI Production Date: 1/2018 Condition: Good Job #:

**TRANSMISSION**

Automatic Transmission  
4 Wheel Drive

**POWER**

Power Steering  
Power Brakes  
Power Windows  
Power Locks  
Power Mirrors  
Power Driver Seat

**DECOR**

Dual Mirrors  
Privacy Glass  
Console/Storage  
Overhead Console

**CONVENIENCE**

Air Conditioning  
Intermittent Wipers  
Tilt Wheel  
Cruise Control  
Rear Defogger  
Keyless Entry  
Steering Wheel Touch Controls  
Rear Window Wiper  
Telescopic Wheel  
Climate Control  
Backup Camera w/Parking Sensors

**RADIO**

AM Radio

FM Radio  
Stereo  
Search/Seek  
Auxiliary Audio Connection

**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  
Blind Spot Detection

Lane Departure Warning

**SEATS**

Bucket Seats  
Leather Seats  
Heated Seats

**WHEELS**

Aluminum/Alloy Wheels

**PAINT**

Clear Coat Paint

**OTHER**

Rear Spoiler  
Signal Integrated Mirrors

**TRUCK**

Power Trunk/Gate Release

**Preliminary Estimate**

**Customer: PEARSON, MATT**

2018 MAZD CX-5 Touring AWD 4D UTV 4-2.5L Gasoline Gasoline Direct Injection METAL GRAY

| Line | Oper | Description                       | Part Number | Qty | Extended Price \$ | Labor        | Paint |
|------|------|-----------------------------------|-------------|-----|-------------------|--------------|-------|
| 1    |      | <b>FRONT BUMPER &amp; GRILLE</b>  |             |     |                   |              |       |
| 2    |      | O/H bumper assy                   |             |     |                   | 2.9          |       |
| 3    | R&I  | R&I bumper cover                  |             |     |                   | Incl.        |       |
| 4    | * <> | Rpr Bumper cover                  |             |     |                   | <u>4.0</u>   | 2.8   |
| 5    |      | Add for Clear Coat                |             |     |                   |              | 1.1   |
| 6    | R&I  | RT Bezel w/o fog lamp             |             |     |                   | Incl.        |       |
| 7    | R&I  | LT Bezel w/o fog lamp             |             |     |                   | Incl.        |       |
| 8    | *    | R&I Lower panel                   |             |     |                   | <u>0.2</u>   |       |
| 9    | R&I  | License frame                     |             |     |                   | 0.2          |       |
| 10   | Blnd | Tow eye cap                       |             |     |                   |              | 0.1   |
| 11   | R&I  | RT Side bracket                   |             |     |                   | 0.1          |       |
| 12   | *    | R&I Grille assy w/adaptive cruise |             |     |                   | <u>Incl.</u> |       |
| 13   | R&I  | Closure panel                     |             |     |                   | Incl.        |       |
| 14   | R&I  | Closure panel plate               |             |     |                   | Incl.        |       |
| 15   | R&I  | Upper molding                     |             |     |                   | Incl.        |       |
| 16   |      | <b>FRONT LAMPS</b>                |             |     |                   |              |       |
| 17   | R&I  | RT R&I headlamp assy              |             |     |                   | 0.4          |       |
| 18   |      | <b>RADIATOR SUPPORT</b>           |             |     |                   |              |       |
| 19   | *    | R&I Seal                          |             |     |                   | <u>0.1</u>   |       |
| 20   | R&I  | Under cover                       |             |     |                   | 0.2          |       |
| 21   |      | <b>FENDER</b>                     |             |     |                   |              |       |
| 22   | Repl | RT Fender                         | KB7W52111   | 1   | 295.91            | 1.9          | 2.0   |
| 23   |      | Overlap Major Non-Adj. Panel      |             |     |                   |              | -0.2  |
| 24   |      | Add for Clear Coat                |             |     |                   |              | 0.4   |
| 25   |      | Add for Edging                    |             |     |                   |              | 0.5   |
| 26   | R&I  | RT Front bracket                  |             |     |                   | 0.1          |       |
| 27   | R&I  | RT Lower seal                     |             |     |                   | 0.2          |       |
| 28   | R&I  | RT Cover plate                    |             |     |                   | Incl.        |       |
| 29   | R&I  | RT Fender liner                   |             |     |                   | Incl.        |       |
| 30   | R&I  | RT End seal                       |             |     |                   | Incl.        |       |
| 31   | R&I  | RT End plate                      |             |     |                   | 0.1          |       |
| 32   | Repl | RT Wheel opng mldg                | KB7W51W20E  | 1   | 96.50             | Incl.        |       |
| 33   | Repl | RT Lower molding                  | KB7W51W70A  | 1   | 6.25              | Incl.        |       |
| 34   |      | <b>WHEELS</b>                     |             |     |                   |              |       |
| 35   | R&I  | RT/Front R&I wheel                |             |     |                   | m 0.1        |       |
| 36   |      | <b>COWL</b>                       |             |     |                   |              |       |
| 37   | R&I  | RT End cap                        |             |     |                   | 0.1          |       |
| 38   |      | <b>FRONT DOOR</b>                 |             |     |                   |              |       |
| 39   | Repl | RT Door shell (HSS)               | KBY05802XE  | 1   | 714.71            | 5.7          | 3.0   |
| 40   |      | Overlap Major Adj. Panel          |             |     |                   |              | -0.4  |
| 41   |      | Add for Clear Coat                |             |     |                   |              | 0.5   |
| 42   | R&I  | RT Door w'strip                   |             |     |                   | Incl.        |       |
| 43   | R&I  | RT Belt molding                   |             |     |                   | Incl.        |       |

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**Preliminary Estimate**

**Customer: PEARSON, MATT**

2018 MAZD CX-5 Touring AWD 4D UTV 4-2.5L Gasoline Gasoline Direct Injection METAL GRAY

|    |      |  |            |                  |                 |              |             |
|----|------|--|------------|------------------|-----------------|--------------|-------------|
| 44 | Repl | RT Window molding  | KB7W50981F | 1                | 59.09           | Incl.        |             |
| 45 | R&I  | RT Applique black  |            |                  |                 | Incl.        |             |
| 46 | R&I  | RT Corner molding black  |            |                  |                 | Incl.        |             |
| 47 | Repl | RT Lower molding   | KB7W51RA0B | 1                | 38.62           | Incl.        |             |
| 48 | Repl | RT Mirror assy w/o blind spot monitor w/o heated               | KD2W69121A | 1                | 213.28          | Incl.        |             |
| 49 | R&I  | RT Door glass Mazda  |            |                  |                 | Incl.        |             |
| 50 | *    | R&I RT Run channel   |            |                  |                 | <u>Incl.</u> |             |
| 51 |      | R&I RT Carrier assy  |            |                  |                 | 1.5          |             |
| 52 | *    | R&I RT Window regulator  |            |                  |                 | <u>Incl.</u> |             |
| 53 | *    | R&I RT Window motor  |            |                  |                 | <u>Incl.</u> |             |
| 54 |      | R&I RT Handle, outside w/o advanced keyless entry crystal blue |            |                  |                 | Incl.        |             |
| 55 | *    | R&I RT Handle base   |            |                  |                 | <u>Incl.</u> |             |
| 56 |      | R&I RT Lock assy   |            |                  |                 | Incl.        |             |
| 57 |      | R&I RT Door check  |            |                  |                 | Incl.        |             |
| 58 |      | R&I RT R&I trim panel  |            |                  |                 | Incl.        |             |
| 59 |      | <b>REAR DOOR</b>   |            |                  |                 |              |             |
| 60 | *    | Rpr RT Door shell (HSS)  |            |                  |                 | <u>2.0</u>   | 2.1         |
| 61 |      | Overlap Major Adj. Panel                                       |            |                  |                 |              | -0.4        |
| 62 |      | Add for Clear Coat   |            |                  |                 |              | 0.3         |
| 63 |      | Add for Edging   |            |                  |                 |              | 0.5         |
| 64 |      | Add for Inside   |            |                  |                 |              | 0.5         |
| 65 | *    | Rpr RT Outer panel (HSS)                                       |            |                  |                 | <u>4.0</u>   | Incl.       |
| 66 |      | R&I RT Belt molding  |            |                  |                 | 0.3          |             |
| 67 |      | Repl RT Lower molding  | KB7W51RC0B | 1                | 38.61           | 0.4          |             |
| 68 |      | R&I RT Handle, outside meteor gray                             |            |                  |                 | 0.4          |             |
| 69 |      | R&I RT R&I trim panel  |            |                  |                 | 0.5          |             |
| 70 |      | <b>MISCELLANEOUS OPERATIONS</b>                                |            |                  |                 |              |             |
| 71 | #    | Repl `Car Cover  |            | 1                | 15.00           | 0.2          |             |
| 72 | #    | Repl `Corrosion Protection                                     |            | 1                | 16.00           | 0.3          |             |
| 73 | #    | Repl `Flex Additive/Adhesion Promoter                          |            | 1                | 18.00           |              |             |
| 74 | #    | Repl `Hazardous Waste  |            | 1                | 7.50            |              |             |
|    |      |  |            | <b>SUBTOTALS</b> | <b>1,519.47</b> | <b>25.9</b>  | <b>12.8</b> |

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2:30 A.M./P.M.

Preliminary Estimate

Customer: PEARSON, MATT

2018 MAZD CX-5 Touring AWD 4D UTV 4-2.5L Gasoline Gasoline Direct Injection METAL GRAY

**ESTIMATE TOTALS**

| Category             | Basis         | Rate         | Cost \$         |
|----------------------|---------------|--------------|-----------------|
| Parts                |               |              | 1,519.47        |
| Body Labor           | 25.9 hrs @    | \$ 63.00 /hr | 1,631.70        |
| Paint Labor          | 12.8 hrs @    | \$ 63.00 /hr | 806.40          |
| Paint Supplies       | 12.8 hrs @    | \$ 41.00 /hr | 524.80          |
| Subtotal             |               |              | 4,482.37        |
| Sales Tax            | \$ 4,482.37 @ | 5.6000 %     | 251.01          |
| <b>Grand Total</b>   |               |              | <b>4,733.38</b> |
| Deductible           |               |              | 0.00            |
| <b>CUSTOMER PAY</b>  |               |              | <b>0.00</b>     |
| <b>INSURANCE PAY</b> |               |              | <b>4,733.38</b> |

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.

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JUN 27 2018

*[Signature]* A.M./P.M.

## Preliminary Estimate

JUN 27 2018

**Customer: PEARSON, MATT**

2:30 A.M. (P.M.)

2018 MAZD CX-5 Touring AWD 4D UTV 4-2.5L Gasoline Gasoline Direct Injection METAL GRAY

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 ARH5471, CCC Data Date 5/16/2018, and potentially other third party sources of data; and (b) the parts presented are OEM-parts manufactured by the vehicles Original Equipment Manufacturer. OEM parts are available at OE/Vehicle dealerships. 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. OPT OEM or ALT OEM parts may reflect some specific, special, or unique pricing or discount. OPT OEM or ALT OEM parts may include "Blemished" parts provided by OEM's through OEM vehicle dealerships. 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 2017 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. Blnd=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 Information 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.





**CARSTAR AUTO BODY EXPRESS**

6135 S. 108TH ST, HALES CORNERS, WI 53130

Phone: (414) 427-8500

FAX: (414) 427-8511

Workfile ID:  
Federal ID:

58a17669  
39-1519593

**Preliminary Estimate**

**Customer: Pearson, Jennifer**

Written By: Dan Sullivan

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Insured: Pearson, Jennifer  
Type of Loss:  
Point of Impact:

Policy #:  
Date of Loss:

Claim #:  
Days to Repair: 0

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**Owner:**  
Pearson, Jennifer  
10830 W. Parnell Ave  
Hales Corners, WI 53130  
(414) 902-0121 Cell

**Inspection Location:**  
CARSTAR AUTO BODY EXPRESS  
6135 S. 108TH ST  
HALES CORNERS, WI 53130  
Repair Facility  
(414) 427-8500 Business

**Insurance Company:**  
OTHER

**VEHICLE**

2018 MAZD CX-5 Touring AWD 4D UTV 4-2.5L Gasoline Gasoline Direct Injection Grey

VIN: JM3KFBCMXJ0345692  
License:  
State:

Interior Color:  
Exterior Color: Grey  
Production Date:

Mileage In:  
Mileage Out:  
Condition:

Vehicle Out:  
Job #:

**TRANSMISSION**

Automatic Transmission  
4 Wheel Drive

**POWER**

Power Steering  
Power Brakes  
Power Windows  
Power Locks  
Power Mirrors  
Power Driver Seat

**DECOR**

Dual Mirrors  
Privacy Glass  
Console/Storage  
Overhead Console

**CONVENIENCE**

Air Conditioning  
Intermittent Wipers  
Tilt Wheel  
Cruise Control  
Rear Defogger  
Keyless Entry  
Steering Wheel Touch Controls  
Rear Window Wiper  
Telescopic Wheel  
Climate Control

Backup Camera w/Parking Sensors  
Intelligent Cruise

**RADIO**

AM Radio

FM Radio

Stereo  
Search/Seek  
Auxiliary Audio Connection

**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  
Blind Spot Detection

Lane Departure Warning

**SEATS**

Bucket Seats  
Leather Seats  
Heated Seats

**WHEELS**

Aluminum/Alloy Wheels

**PAINT**

Clear Coat Paint

**OTHER**

Rear Spoiler  
Signal Integrated Mirrors

**TRUCK**

Power Trunk/Gate Release

Get live updates at [www.carwise.com/e/3q78mS](http://www.carwise.com/e/3q78mS)

Preliminary Estimate

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Customer: Pearson, Jennifer

2018 MAZD CX-5 Touring AWD 4D UTV 4-2.5L Gasoline Gasoline Direct Injection Grey

JUN 27 2018

2 30 A.M. P.M.

| Line             | Oper  | Description                           | Part Number | Qty | Extended Price \$ | Labor       | Paint       |
|------------------|-------|---------------------------------------|-------------|-----|-------------------|-------------|-------------|
| 1                |       | <b>FENDER</b>                         |             |     |                   |             |             |
| 2                | Repl  | RT Fender                             | KB7W52111   | 1   | 295.91            | 1.9         | 2.0         |
| 3                |       | Add for Clear Coat                    |             |     |                   |             | 0.8         |
| 4                |       | Add for Edging                        |             |     |                   |             | 0.5         |
| 5                |       | Add for Clear Coat                    |             |     |                   |             | 0.1         |
| 6                | Repl  | RT Wheel opng mldg                    | KB7W51W20E  | 1   | 96.50             | Incl.       |             |
| 7                | Repl  | RT Lower molding                      | KB7W51W70A  | 1   | 6.25              | Incl.       |             |
| 8                |       | <b>FRONT BUMPER &amp; GRILLE</b>      |             |     |                   |             |             |
| 9                |       | O/H bumper assy                       |             |     |                   | 2.9         |             |
| 10               | * Rpr | Bumper cover                          |             |     |                   | 2.0         | 2.8         |
| 11               |       | Add for Clear Coat                    |             |     |                   |             | 1.1         |
| 12               |       | <b>FRONT LAMPS</b>                    |             |     |                   |             |             |
| 13               | R&I   | RT R&I headlamp assy                  |             |     |                   | 0.4         |             |
| 14               |       | <b>FRONT DOOR</b>                     |             |     |                   |             |             |
| 15               | Repl  | RT Door shell (HSS)                   | KBY05802XE  | 1   | 714.71            | 5.7         | 3.0         |
| 16               |       | Overlap Major Adj. Panel              |             |     |                   |             | -0.4        |
| 17               |       | Add for Clear Coat                    |             |     |                   |             | 0.5         |
| 18               | Repl  | RT Applique black                     | KB7W50M10B  | 1   | 40.79             | Incl.       |             |
| 19               | Repl  | RT Window molding                     | KB7W50981F  | 1   | 59.09             | Incl.       |             |
| 20               | Repl  | RT Lower molding                      | KB7W51RA0B  | 1   | 38.62             | Incl.       |             |
| 21               |       | <b>REAR DOOR</b>                      |             |     |                   |             |             |
| 22               | Repl  | RT Outer panel (HSS)                  | KB7W72031   | 1   | 146.73            | 6.1         | 2.1         |
| 23               |       | Overlap Major Adj. Panel              |             |     |                   |             | -0.4        |
| 24               |       | Add for Clear Coat                    |             |     |                   |             | 0.3         |
| 25               |       | Add for Edging                        |             |     |                   |             | 0.5         |
| 26               |       | Add for Clear Coat                    |             |     |                   |             | 0.1         |
| 27               |       | Add for Inside                        |             |     |                   |             | 0.5         |
| 28               |       | Add for Clear Coat                    |             |     |                   |             | 0.1         |
| 29               | Repl  | RT Front molding piano black          | KB8A50M30C  | 1   | 69.38             | Incl.       |             |
| 30               | Repl  | RT Rear molding piano black           | KB8A50M50C  | 1   | 29.87             | Incl.       |             |
| 31               | Repl  | RT Lower molding                      | KB7W51RC0B  | 1   | 38.61             | Incl.       |             |
| 32               |       | <b>WHEELS</b>                         |             |     |                   |             |             |
| 33               | Repl  | RT/Front Wheel, alloy 19x7 code K9740 | 9965117090  | 1   | 438.97 m          | 0.3         |             |
| 34               | #     | Subl Tire mount & balance             |             | 1   | 26.00             |             |             |
| 35               | #     | Subl Two wheel alignment              |             | 1   | 79.95             |             |             |
| <b>SUBTOTALS</b> |       |                                       |             |     | <b>2,081.38</b>   | <b>19.3</b> | <b>13.6</b> |

Preliminary Estimate

Customer: Pearson, Jennifer

2018 MAZD CX-5 Touring AWD 4D UTV 4-2.5L Gasoline Gasoline Direct Injection Grey

**ESTIMATE TOTALS**

| Category           | Basis         | Rate         | Cost \$         |
|--------------------|---------------|--------------|-----------------|
| Parts              |               |              | 2,081.38        |
| Body Labor         | 19.3 hrs @    | \$ 58.00 /hr | 1,119.40        |
| Paint Labor        | 13.6 hrs @    | \$ 58.00 /hr | 788.80          |
| Paint              | 13.6 hrs @    | \$ 38.00 /hr | 516.80          |
| Subtotal           |               |              | 4,506.38        |
| Sales Tax          | \$ 4,506.38 @ | 5.6000 %     | 252.36          |
| <b>Grand Total</b> |               |              | <b>4,758.74</b> |

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.

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Customer: Pearson, Jennifer

2018 MAZD CX-5 Touring AWD 4D UTV 4-2.5L Gasoline Gasoline Direct Injection Grey

JUN 27 2018

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 ARH5471, CCC Data Date 5/16/2018, and potentially other third party sources of data; and (b) the parts presented are OEM-parts manufactured by the vehicles Original Equipment Manufacturer. OEM parts are available at OE/Vehicle dealerships. 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. OPT OEM or ALT OEM parts may reflect some specific, special, or unique pricing or discount. OPT OEM or ALT OEM parts may include "Blemished" parts provided by OEM's through OEM vehicle dealerships. 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.

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Some 2017 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. Blnd=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 Information Services Inc.

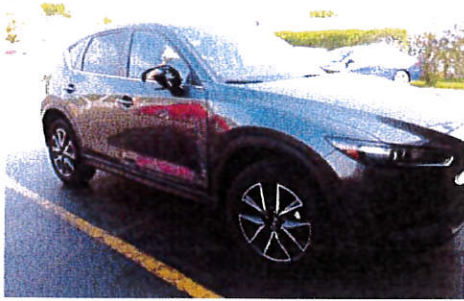
The following is a list of abbreviations that may be used in CCC ONE Estimating that are not part of the MOTOR CRASH ESTIMATING GUIDE:

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

**CARSTAR AUTO BODY EXPRESS**  
**6135 S. 108TH ST, HALES CORNERS, WI 53130**  
**Phone: (414) 427-8500, Fax: (414) 427-8511**

**Image Report**

|            |                   |               |                     |                |                    |                  |
|------------|-------------------|---------------|---------------------|----------------|--------------------|------------------|
| Owner:     | Pearson, Jennifer | Insurance:    | OTHER               | Estimator:     | Dan Sullivan       | Vehicle Out:     |
| RO Number: |                   | Claim Number: |                     |                |                    |                  |
| Year:      | 2018              | Color:        | Grey                | License Plate: |                    | Production Date: |
| Make:      | MAZD              | Body Style:   | 4D UTV              | State:         |                    | Mileage In:      |
| Model:     | CX-5 Touring AWD  | Engine:       | 4-2.5L Gasoline ... | VIN:           | JM3KFBCMXXJ0345692 | Condition:       |



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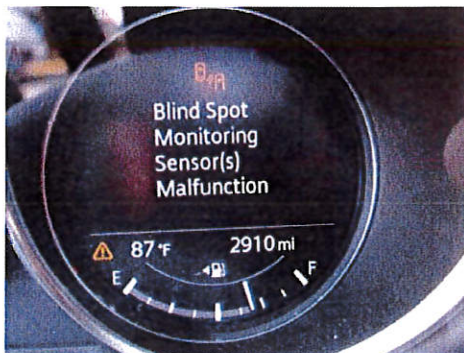
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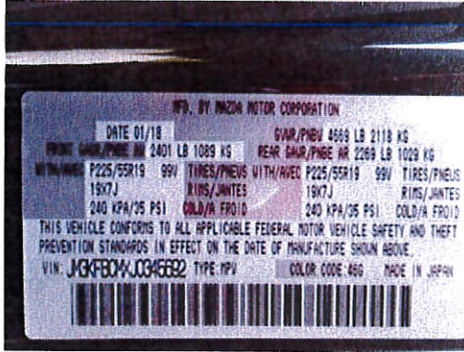
**Image Report**

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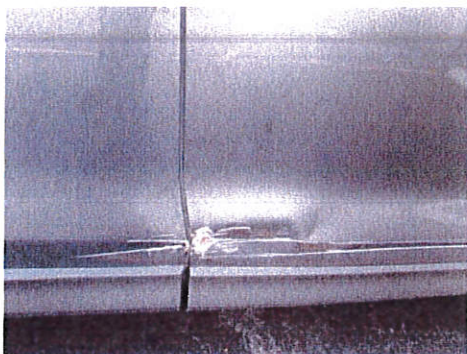
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**Image Report**

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|------------|-------------------|---------------|---------------------|----------------|-------------------|------------------|
| Owner:     | Pearson, Jennifer | Insurance:    | OTHER               | Estimator:     | Dan Sullivan      | Vehicle Out:     |
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