

CITY OF MILWAUKEE
RECEIVER

To Whom it May Concern

I Dora J. Wilkins / Thomas would like my reimbursement of 8,000 dollars or more because my car was in an accident Jan 5,09 on 68th Silver Spring

JAN 27 PM 5:00
LEO CLECK
TODAY
CITY
GAG
I was hurt so bad they had pride the door open to get me out also the fireman called the (Paramedic) to take me to Fredert hosp.

The City of Milw had my car tolled on 38 Lincoln an said my husband couldn't use our AAA card

My Insurance adjuster was angry because of how they destroy my vehicle
JAN 28 PM 4:00
SO LEST
OFFICE CLERK
CITY ATTORNEY
The officer watson has not asked my report yet as of 1-27-09 which I think he should have been filed

so he said he was out sick. I also was out for 5 days bruse up with Black an Blue Marks

I know she didn't yield to on coming traffic an she was on her cell phone an ran the red light an hit me while I was proceeding west on Silverspring

my car plates were on my car an here is the Vehicle ID #
1G6KD54Y4IV194197 also

My Phone number is 414 627 3049
my home is 414 3581712 my address
is 6747 N. 75th St Milwaukee Wi 5
53223 so This is my statement

1-27-09

Thank you & May
God Bless you

Dora J. Wilkins/Thomas

WISCONSIN CERTIFICATE OF TITLE

Vehicle Identification Number
1G6KD54Y41U194197

Year Make
2001 CADILLAC

Title Number
083190445067-1

Issue Date
11/14/2008

Chassis Type
AUTO

Odometer Reading
191826

Odometer Status
ACTUAL

Odometer Date
10/14/2008

Product Number
33011082884

Body Style
4DR SEDAN

Color
SILVER/ALUMINUM

Fleet No.

Titled Owner(s)

THOMAS DORAJ
6747 N 75TH ST
MILWAUKEE, WI 53223

The person, firm or corporation named on this Title is the lawful owner of the vehicle described, subject to any Security Interest (lien(s) shown). The order in which the Lien Holders appear on this Title does not necessarily represent their priority. The Wisconsin Department of Transportation will not be responsible for false or fraudulent odometer statements made in the assignment of the Certificate of Title or for errors in reporting mileage, brand disclosures or the history of the vehicle. The department has no actual knowledge about the history of the vehicle and makes no warranty that the title brands or mileage disclosures on prior titles have been carried forward onto this document.

1G6KD54Y41U194197

Lien Holder(s)

NONE

Additional Vehicle Detail

SELLER: When the vehicle is sold, complete the ASSIGNMENT OF CERTIFICATE OF TITLE on the top back of this title and deliver the title to the purchaser with the vehicle. You may wish to retain a copy of this title with the purchaser's information and signature as proof of sale for your records.

PURCHASER: Apply for a new title with the Wisconsin Division of Motor Vehicles immediately. To legally operate this vehicle, you are required to register it with the Division of Motor Vehicles.



MAIL ADDRESS:
Wisconsin Department of Transportation
PO Box 7949, Madison, WI 53707-7949

QUESTIONS
Contact the Division of Motor Vehicles at
414-266-1000, 608-266-1466, 800-924-3570
www.dmv.wisconsin.gov

7-1-6854126
T055 5/2004

KEEP IN SAFE PLACE

DO NOT KEEP IN VEHICLE