

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

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

Karen Kolarik  
West Bend Mutual  
Insurance Company  
1900 S. 18<sup>th</sup> Ave.  
West Bend, WI 53095

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

FILE NUMBER: 090112

Regarding: Property Damage

Amount of Claim: \$900,000.00

Claim Disallowed on: June 16, 2009

7009 0620 0001 0747 0429

U.S. Postal Service <sup>TM</sup>  
**CERTIFIED MAIL <sup>TM</sup> RECEIPT**  
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement 1 Required)		
Restricted Delivery Fee (Endorsement 1 Required)		
Total Postage &		

Postmark Here

Karen Kolarik  
West Bend Mutual  
Insurance Company  
1900 S. 18<sup>th</sup> Ave.  
West Bend, WI 53095

Sent to  
Street, Apt. No.,  
or PO Box No.  
City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

009

*Ronald D Leonhardt*

Ronald Leonhardt  
City Clerk