City of Milwaukee						
Accounts Receivable Write Offs						
Amounts over \$5,000.00						
12/31/2024						
			4			
Courte Martin	E1400104	וייסלפליוו	AMOUNT.	יוופופט	10tal	Reason
Darquise James Davis	5140019441	11/22/2021	18.083.30	5.951.33	24 034 63	6,007.02 expired statute of limitations
Betty J Braun	5140015907	12/18/2018	6,151.39	1	6,151.39	6.151.39 difference between amount billed and insurance settlement
Seaira D Brown	5140016598	6/4/2019	13,881.70	,	13,881.70	13,881.70 expired statute of limitations
Collette E McDougal	5140016923	8/8/2019	11,419.17	١	11,419.17	11,419.17 expired statute of limitations
Percy Lee Love IV	5140017698	12/31/2019	9,114.06	•	9,114.06	9,114.06 expired statute of limitations
Martin I Rice	5140019419	11/16/2021	5,185.39	1,708.36	6,893.75	6,893.75 expired statute of limitations
Craig G Frese	5140019367	11/8/2021	6,834.22	2,249.06	9,083.28	9,083.28 expired statute of limitations
Cornerstone One	5140019248	10/4/2021	6,126.50	2,080.75	8,207.25	8,207.25 unable to prove contractor caused damage
Jobsco Construction	5140019241	9/29/2021	9,410.92	3,285.78	12,696.70	12,696.70 Kohn unsuccesful, unable to locate company
Anthony R Crump Jr	5140018716	2/25/2021	11,617.99	4,870.08	16,488.07	16,488.07 expired statute of limitations
Abdiel G Ceron-Hernandez	5140018704	2/23/2021	5,379.14	2,254.65	7,633.79	7,633.79 expired statute of limitations
WIN LLC	5140018626	2/4/2021	6,728.51	3,021.71	9,750.22	9,750.22 unable to prove contractor caused damage
Euell J Smith	5140018715	2/25/2021	22,418.33	9,397.17	31,815.50	31,815.50 expired statute of limitations
Joseph E Powell	5140018710	2/24/2021	6,736.17	2,821.42	9,557.59	9,557.59 expired statute of limitations
Tartanar D McKay	5140018713	2/25/2021	23,496.17	9,849.02	33,345.19	33,345.19 expired statute of limitations
Telcom Construction	5140018623	3/8/2021	8,891.19	3,992.92	12,884.11	12,884.11 unable to prove contractor caused damage
Riverside Plumbing	5140018600	1/25/2021	6,854.40	3,143.81	9,998.21	9,998.21 unable to prove contractor caused damage
Mr Rooter c/o Joseph Fix	5140018266	6/5/2020	18,750.00	8,796.59	27,546.59	27,546.59 unable to prove contractor caused damage
					269,169.02	

CANCELLATION OR ADJUSTMENT OF CITY CLAIM OR ACCOUNT

To: City Attorney:		. = 1 **
rom: DPW-ADMINISTRATION Dep	partment Date	August 30 20 24
recommend that the following claim or account be adjusted or can	celled as indicated.	
Account or Claim: Number 5140019456	Amount of claim or account as billed	\$ 6,512.59
Dated 11/29/2021	Interest Added	\$ 2,155.23
Name CRYSTAL R MARTIN	Cancellation or adjustment amount	\$ 8,667.82
	Adjusted balance	\$ 0.00
Reason for cancellation or adjustment: EXPIRED STATUTE OF LIMITATIONS ON COLLECTION		
For Comptroller's Use Only:		
11550 - 0007 -5237		uncollectible
	Submitted by DYLAN WESTPHAL	
	DPW-ADMINISTRATION	Department
	Adjustment or cancellation approved Tawanna J Swanigan By	
	D29104023FB0426 City Attorney's O	ffice (signature)
	Date 2/10/2025	20
n accordance with section 304-3-1 of the Milwaukee Code, I certify ndicated.	to the City Comptroller the uncollectibility of the	R.
	Date	26/ 2025
n accordance with section 304-3.2 of the Milwaukee Code, and on to or cancelled as indicated.	the basis of the certification submitted to me, the	ne above account shall be adjusted
	By order of Aulas Bo	re. Special Deputy
	Date February 19	20_25
Distribution:	1	

(White):- Comptrollers Office (Canary)- Originating department of claim or account (Pink) - City Attorney's Office (Goldenrod) - Originator (detach prior to submitting)

1002 FEB 13 AM 11: 25

CANCELLATION OR ADJUSTMENT OF CITY CLAIM OR ACCOUNT

o; City Altorney:		
rom: DPW-ADMINISTRATION Dep	partment Date	August 22 20 24
ecommend that the following claim or account be adjusted or can	celled as indicated.	
count or Claim: Number 5140019441	Amount of claim or account as billed	\$ 18,083.30
Dated 11/22/2021	Interest Added	\$ 5,951.33
Name DARQUISE JAMES DAVIS	Cancellation or adjustment amount	\$ 24,034.63
eason for cancellation or adjustment: XPIRED STATUTE OF LIMITATIONS ON COLLECTION	Adjusted balance	\$_(0.00)
r Comptroller's Use Only:		
115501-0007-5237		uncollectible
	Submitted by DYLAN WESTPHAL	
	DPW-ADMINISTRATION	Department
	Adjustment of Caricellation approved Tawauna J Swanigan D29104023FB6426 City Attorney's O	ffor (structure)
	Date 2/10/2025	20
accordance with section 304-3-1 of the Milwaukee Code, I certify licated.	By Department He	Ru
	Date	2/6/ 2025
accordance with section 304-3.2 of the Milwaukee Code, and on cancelled as indicated.	the basis of the certification submitted to me, the	ne above account shall be adjusted
	By order of Ruhard Bar	e special beguty
	Date February 19	20 25
stribution:		

(White):- Comptrollers Office (Canary)- Originating department of claim or account (Pink) - City Attorney's Office

(Goldenrod) - Originator (detach prior to submitting)

SOS LEBIS VHII: S2

CANCELLATION OR ADJUSTMENT OF CITY CLAIM OR ACCOUNT

To: City Attorney: From: DPW-ADMINISTRATION Department August 22 20 24 I recommend that the following claim or account be adjusted or cancelled as indicated. Account or Claim: Number 5140015907 Amount of claim or account as billed \$ 6,151.39 Dated 12/18/2018 Interest Added \$ 0.00 Name BETTY J BRAUN Cancellation or adjustment amount \$ 6,151.39 Adjusted balance \$ 0.00 Reason for cancellation or adjustment: DIFFERENCE BETWEEN AMOUNT BILLED AND INSURANCE SETTLEMENT Submitted by DYLAN WESTPHAL **DPW-ADMINISTRATION** Department Adjustment or cancellation approved rey's Office (signature) In accordance with section 304-3-1 of the Milwaukee Code, I certify to the City Comptroller the uncollectibility of the above claim or account as indicated. Van Thomas FATCETAF35AD4CA... Department Head (signature) Date 8/29/2024 20 In accordance with section 304-3.2 of the Milwaukee Code, and on the basis of the certification submitted to me, the above account shall be adjusted or cancelled as indicated. By order of Distribution: (White):- Comptrollers Office

(White):- Comptrollers Office (Canary)- Originating department of claim or account (Pink) - City Attorney's Office (Goldenrod) - Originator (detach prior to submitting)

7075 FEB 13 AM 11: 10

CANCELLATION OR ADJUSTMENT OF CITY CLAIM OR ACCOUNT

To: Çity Atto	rney:				
From: DPW	-ADMINISTRATION	Departm	nent Date	August	30 20 24
recommend	that the following claim or account be	e adjusted or cancelled	d as indicated.		
Account or C Number	laim: 5140016598		Amount of claim or account as billed	\$ <u>13,881.70</u>	
Dated	06/04/2019		Interest Added	\$ 0.00	**
Name	SEAIRA D BROWN	20	Cancellation or adjustment amount	\$ 13,881.70	
	ancellation or adjustment: STATUTE OF LIMITATIONS ON C	COLLECTION	Adjusted balance	\$ 0.00	*
For Comptrol	ller's Use Only:				
1	15501-0007-	5237		uncolle	dible
		S	Submitted by DYLAN WESTPHAL		
¥		<u>D</u>	PW-ADMINISTRATION	<u> </u>	Departmen
		Α	djustment or cancellation approved		
		В	City Attorney's O	ffice (signature)	
	*	С	Date 09/03		20 24
In accordance	e with section 304-3-1 of the Milwauk	cee Code, I certify to the			unt as
		C	Department He 8/30/2024	ad (signature)	20
n accordance or cancelled		ee Code, and on the b	asis of the certification submitted to me, th	e above account sha	II be adjusted
		В —	y order of Auhard Bare City Comptroller	Special D	eputyEV
		- D	ate February	19	20 25
Pink) - City Atto	ating department of claim or account	3 PMII: 11		N	
		. HITTUC	170,		

CANCELLATION OR ADJUSTMENT OF CITY CLAIM OR ACCOUNT

rom: DPW-ADMINISTRATION Depart	tment Date	August 30 20 24
recommend that the following claim or account be adjusted or cancell	ed as indicated.	
ccount or Claim:		C 44 440 47
Number <u>5140016923</u>	Amount of claim or account as billed	\$ <u>11,419.17</u>
Dated 08/08/2019	Interest Added	\$ 0.00
Name COLLETTE E MCDOUGAL	Cancellation of adjustment amount	\$ <u>11,419.17</u>
eason for cancellation or adjustment:	Adjusted balance	\$ 0.00
XPIRED STATUTE OF LIMITATIONS ON COLLECTION		
or Comptroller's Use Only:		
115501-0001-5452		uncollectible
	Submitted by DYLAN WESTPHAL	7
	DPW-ADMINISTRATION	Department
	Adjustment or cancellation approved	
	By Toward	
	Cily Attorney's Of	fice (signature)
	Date 09/03	20 24
accordance with section 304-3-1 of the Milwaukee Code, I certify to dicated.		above claim or account as
	By Dan Thomas	,
	Department Hea	ad (signature)
	Date 8/30/2024	20
accordance with section 304-3.2 of the Milwaukee Code, and on the cancelled as indicated.	basis of the certification submitted to me, the	e above account shall be adjusted
	By order of	
	Muhardboro	Special Peputy S
	City Comptroller (signature)
	Date Vebruary 19	20 🗸 🗸
stribution:	7	
hite):- Comptrollers Office : WY E 83 570 anary)- Originating department of claim or account	l .	

CANCELLATION OR ADJUSTMENT OF CITY CLAIM OR ACCOUNT

To: City Attorney:		
From: DPW-ADMINISTRATION Department	artment Date	August 30 20 24
I recommend that the following claim or account be adjusted or cancer	elled as indicated.	
Account or Claim: Number 5140017698	Amount of claim or account as billed	\$ 9,114.06
Dated 12/31/2019	Interest Added	\$ <u>0.00</u>
Name PERCY LEE LOVE IV	Cancellation or adjustment amount	\$ 9,114.06
Reason for cancellation or adjustment: EXPIRED STATUTE OF LIMITATIONS ON COLLECTION	Adjusted balance	\$ 0.00
For Comptroller's Use Only:		
115501-0001-5452		in collectible
	Submitted by DYLAN WESTPHAL	
	DPW-ADMINISTRATION	Department
	Adjustment or cancellation approved	
	By Tamana City Attorney's O	ffice (eignatura)
	Date 09/03	20 <u>24</u>
In accordance with section 304-3-1 of the Milwaukee Code, I certify to	o the City Comptroller the uncollectibility of the	above claim or account as
indicated.	By Dan Thomas	
	Department He	ad (signature)
		20
In accordance with section 304-3.2 of the Milwaukee Code, and on the or cancelled as indicated.	ne basis of the certification submitted to me, the	e above account shall be adjusted
	By order of Achael Boo	signature) special Deputy
	Date February 19	20 25
Distribution: (White):- Comptrollers Office (Canary)- Originating department of claim of account V E 87 6707		

(Pink) - City Attorney's Office

(Pink) - City Attorney's Onice (Goldenrod) - Originator (detach prior to submitting) 70814H00

CANCELLATION OR ADJUSTMENT OF CITY CLAIM OR ACCOUNT

mment Date	August 30 20 24
elled as indicated.	
Amount of claim or account as billed	\$ 5,185.39
Interest Added	\$ 1,708.36
Cancellation or adjustment amount	\$ <u>6,893.75</u>
Adjusted balance	\$ 0.00
*	
	uncollectible
Submitted by DYLAN WESTPHAL	8
DPW-ADMINISTRATION	Departmen
Adjustment or cancellation approved Tawauna J. Swanigan	
By City Attorney's Of	fice (signature)
Date 2/10/2025	20
The Other Committee than the committee of the other	
the City Comptroller the uncollectibility of the	above ciaim of account as
O_{2}	10
By Department Hea	La
Department Hea	0///
Datee basis of the certification submitted to me, the	2/6/ 2025
Department Hea	2/6/ 2025
Department Heat Date	e above account shall be adjusted Special Deputy
Department Hea	e above account shall be adjusted Special Deputy
Department Heat Date	e above account shall be adjusted Special Deputy
	Amount of claim or account as billed Interest Added Cancellation or adjustment amount Adjusted balance Submitted by DYLAN WESTPHAL DPW-ADMINISTRATION Adjustment or carricellation approved Tawauna J Swanigan By D29104023FB6426 City Attorney's Of

(Pink) - City Attorney's Office (Goldenrod) - Originator (detach prior to submitting)

5052 FEB 13 AHII: 25

CANCELLATION OR ADJUSTMENT OF CITY CLAIM OR ACCOUNT

rom: DPW-ADMINISTRATION Depar	tment Date	August 30 20 24
recommend that the following claim or account be adjusted or cance	illed as indicated.	
ccount or Claim:		
Number 5140019367	Amount of claim or account as billed	\$ <u>6,834.22</u>
Dated 11/08/2021	Interest Added	\$ 2,249.06
Name CRAIG G FRESE	Cancellation or adjustment amount	\$ 9,083.28
	Adjusted balance	\$ 0.00
eason for cancellation or adjustment: XPIRED STATUTE OF LIMITATIONS ON COLLECTION		
or Comptrallaria Usa Only		
or Comptroller's Use Only:	ka ka	
115501 - 0007 - 5237		uncollectible
	Submitted by DYLAN WESTPHAL	
	DPW-ADMINISTRATION	Department
	Adjustment or cancellation approved Tawauna J Swanigan	
	By City Attorney's O	ffice (signature)
	2/10/2025	20
	Date	
accordance with section 304-3-1 of the Milwaukee Code, I certify to	the City Comptroller the uncollectibility of the	e above claim or account as
ndicated.	0711-	D.
	By Department He	ad (signature)
		Olil
	Date	2025
n accordance with section 304-3.2 of the Milwaukee Code, and on the cancelled as indicated.	· · ·	ne above account shall be adjusted
	By order of	200
	Villa Completible	reignatural special Deputy
	City Comptroller	9
	Date Editory (20 0 3
distribution:		
White):- Comptrollers Office Canary)- Originating department of claim or account		

(Pink) - City Attorney's Office

(Goldenrod) - Originator (detach prior to submitting)

5052 FEB 13 AM11: 23

CANCELLATION OR ADJUSTMENT OF CITY CLAIM OR ACCOUNT

om: DPW	Z-ADMINISTRATION Dep	partment Date	August 30 20 24
ecommend	d that the following claim or account be adjusted or can	celled as indicated.	
count or C		Amount of claim or account as billed	\$ 6,126.50
	5140019248		•
	10/04/2021	Interest Added	\$ <u>2,080.75</u>
Name	CORNERSTONE ONE	Cancellation or adjustment amount	\$ <u>8,207.25</u>
	eancellation or adjustment: O PROVE DEBTOR CAUSED DAMAGE	Adjusted balance	\$ 0.00
		*	
1		I I	
	Hada Haa Oahu		
r Comptrol	ller's Use Only:		
1150	EN 0007 -5227 .		
110	301-000+-303+		uncollectib
11 0	301-000+-303+	Submitted by DYLAN WESTPHAL	Uncollectib
11 0	301-000+-303+	Submitted by DYLAN WESTPHAL DPW-ADMINISTRATION	Uncollectio
11 3	301-000+-303+	DPW-ADMINISTRATION Adjustment of cancellation approved	
11 3	301-000+-303+	Adjustment or cancellation approved Tawauna J Swanigan	Department
11 3.	301-000+-303+	Adjustment or cancellation approved Tawauna J Swanigan By D29104023F66426 City Attorney's Of	Department
11 3.	301-000+-303+	Adjustment or cancellation approved Tawauna J Swanigan	Department ffice (signature)
11 3.	301-000+-303+	DPW-ADMINISTRATION Adjustment or cancellation approved Tawauna J Swanigan By D29104023F66426 City Altorney's Of Date 2/10/2025	Department ffice (signature) 20
	e with section 304-3-1 of the Milwaukee Code, I certify	DPW-ADMINISTRATION Adjustment or cancellation approved Tawauna J Swanigan By D29104023F66426 City Altorney's Of Date 2/10/2025	Department ffice (signature) 20
	e with section 304-3-1 of the Milwaukee Code, I certify	DPW-ADMINISTRATION Adjustment or cancellation approved Tawauna J Swanigan By D29104023F66426 City Attorney's Of Date 2/10/2025 to the City Comptroller the uncollectibility of the By	ffice (signature) 20 e above claim or account as
	e with section 304-3-1 of the Milwaukee Code, I certify	DPW-ADMINISTRATION Adjustment or cancellation approved Tawauna J Swanigan By D29104023F66426 City Altorney's Of Date 2/10/2025	ffice (signature) 20 e above claim or account as
accordance	e with section 304-3-1 of the Milwaukee Code, I certify	DPW-ADMINISTRATION Adjustment or cancellation approved Tawauna J Swanigan By D29104023F66426 City Attorney's Of Date 2/10/2025 to the City Comptroller the uncollectibility of the By	ffice (signature) 20 e above claim or account as
dicated.	e with section 304-3-1 of the Milwaukee Code, I certify e with section 304-3.2 of the Milwaukee Code, and on as indicated.	DPW-ADMINISTRATION Adjustment or cancellation approved Tawauna J Swanigan By Deprivation of the City Comptroller the uncollectibility of the Department Here Date Date Date	Department ffice (signature) 20 e above claim or account as ad (signature) 2/6/20 25
licated.	e with section 304-3.2 of the Milwaukee Code, and on	DPW-ADMINISTRATION Adjustment or cancellation approved Tawauna J Swanigan By Deprivation of the City Comptroller the uncollectibility of the Department Here Date Date Date	Department ffice (signature) 20 e above claim or account as ad (signature) 2/6/20 25
licated.	e with section 304-3.2 of the Milwaukee Code, and on	DPW-ADMINISTRATION Adjustment of cancellation approved Tawauna J Swanigan By Department Here Date Date Department Here By Order of Author Box	Department ffice (signature) 20 e above claim or account as ad (signature) 2/6/2025 ne above account shall be adjusted
icated.	e with section 304-3.2 of the Milwaukee Code, and on	Adjustment or cancellation approved Tawauna J Swanigan By 2/10/2025 To the City Comptroller the uncollectibility of the Department He. Date The basis of the certification submitted to me, the cartification submitted to m	Department ffice (signature) 20 e above claim or account as ad (signature) 2/6/2025 ne above account shall be adjusted

(Canary)- Originating department of claim or account
(Pink) - City Altorney's Office
(Goldenrod) - Originator (detach prior to submitting)

E | STOT

CANCELLATION OR ADJUSTMENT OF CITY CLAIM OR ACCOUNT

To: City Attorney:		*	
rom: DPW-ADMINISTRATION	Department	Date	August 30 20 24
ecommend that the following claim or account	be adjusted or cancelled as indica	ated.	
ccount or Claim: Number <u>5140019241</u>	Amou	nt of claim or account as billed	\$ 9,410.92
Dated 09/29/2021	Intere	st Added	\$ <u>3,285.78</u>
Name JOBSCO CONSTRUCTION	Cance	ellation or adjustment amount	\$ 12,696.70
eason for cancellation or adjustment: OLLECTION EFFORTS UNSUCCESSFU		ted balance	\$ 0.00
a a *			
r Comptroller's Use Only:			
115501-0007-5	5237		uncollectible
	Submitted t	DYLAN WESTPHAL	
	DPW-ADM	INISTRATION	Department
	By Ta	oned by Calicellation approved wanna J Swanigan	
		29104023FB6426 City Attorney's Of	ffice (signature)
	Date 2710	0/2025	20
accordance with section 304-3-1 of the Milwadicated.	ukee Code, I certify to the City Co	mptroller the uncollectibility of the	D.
	Date		2/6/ 2025
accordance with section 304-3.2 of the Milwa cancelled as indicated.	ukee Code, and on the basis of the	e certification submitted to me, th	e above account shall be adjusted
	By order of	Aubard Bare City Comptroller (Special Deputy
	Date	February 20	20_7\$
istribution: Vitte):- Comptrollers Office			

Distribution:
(White): - Comptrollers Office
(Canary)- Originating department of claim or account
(Pink) - City Altorney's Office
(Goldenrod) - Originator (detach prior to submitting)

To: City Atto	orney:		
From: DPW	ADMINISTRATION	Department Date	August 22 20 24
l recommend	that the following claim or account be adjusted o	r cancelled as indicated.	
Account or C		Assount of claim or appount as billed	¢ 44 647 00
Number	5140018716	Amount of claim or account as billed	\$ 11,617.99
Dated	02/25/2021	Interest Added	\$ <u>4,870.08</u>
Name	ANTHONY R CRUMP JR	Cancellation or adjustment amount	\$_16,488.07
	ancellation or adjustment:	Adjusted balance	\$ 0.00
		¥*	
	**		
For Comptro	ller's Use Only:		
1159	501-0001-595	3	incollectible
		Submitted by DYLAN WESTPHAL	
		DPW-ADMINISTRATION	Department
		Ol-rad bur	
		Adjustmeni of cancellation approved Tawauna J Swanigan	
		Adjustment of caricellation approved Tawanna J Swanigan By D29104023FB6426. City Attorney's O	ffice (signature)
		Tawauna J Swanigan	ffice (signature)
		By Tawanna J Swanigan Description of the property of the prop	20
	ce with section 304-3-1 of the Milwaukee Code, I c	By Tawanna J Swanigan D29104023FB6426. City Attorney's O	20
In accordance indicated.	ce with section 304-3-1 of the Milwaukee Code, I o	By Tawanna J Swanigan Description of the property of the prop	20
	ce with section 304-3-1 of the Milwaukee Code, I o	By Tawanna J Swanigan D29104023FB6426 City Attorney's O Date 2/10/2025 Department He	e above claim or account as
indicated.		By Tawanna J Swanigan D29T04023FB6426 City Attorney's O Date 2/10/2025 certify to the City Comptroller the uncollectibility of the	e above claim or account as ad isignature 20
indicated.		By Tawanna J Swanigan Department He Date Tawanna J Swanigan City Attorney's O City Attorney's O Date Department He Date	e above claim or account as ad isignature 20
indicated.	ce with section 304-3.2 of the Milwaukee Code, an	Date	e above claim or account as and (signature) 20 and (signature) 20 20 20 20 A begin by a special percity
indicaled.	ce with section 304-3.2 of the Milwaukee Code, an	Date	e above claim or account as and (signature) 20 and (signature) 20 20 20 20 A begin by a special percity

Distribution: (Winte):- Comptrollers Office (Canary)- Originating department of claim or account (Pink) - City Attomey's Office (Goldenrod) - Originator (detach prior to submitting)

7072 FEB 13 AMII: 20

CANCELLATION OR ADJUSTMENT OF CITY CLAIM OR ACCOUNT

To: City Attorney:		
From: DPW-ADMINISTRATION Dep	partment Date	August 30 20 24
I recommend that the following claim or account be adjusted or can-	celled as indicated.	
Account or Claim: Number 5140018704	Amount of claim or account as billed	\$ 5,379.14
Dated 02/23/2021	Interest Added	\$ <u>2,254.65</u>
Name ABDIEL G CERON-HERNANDEZ	Cancellation or adjustment amount	\$ 7,633.79
Reason for cancellation or adjustment: EXPIRED STATUTE OF LIMITATIONS ON COLLECTION	Adjusted balance	\$ 0.00
For Comptroller's Use Only:		
115501-0001-5452		uncollectible
	Submitted by DYLAN WESTPHAL	
	DPW-ADMINISTRATION	Department
	Adjustment or cancellation approved Tawanna J Swanigan By	
	Date 2/10/2025	ffice (signature) 20
In accordance with section 304-3-1 of the Milwaukee Code, I certify indicated.	By OWE	Re
	Department He	ad (signature) 2/6/ 20 2.5
In accordance with section 304-3.2 of the Milwaukee Code, and on or cancelled as indicated.	the basis of the certification submitted to me, the	ne above account shall be adjusted
	By order of Author Bar City Comptroller (Special Depoty &
Distribution:		

(White):- Comptrollers Office (Canary)- Originating department of claim or account (Pink) - City Attorney's Office

(Goldenrod) - Originator (detach prior to submitting)

5052 FEB 13 AMII: 19

CANCELLATION OR ADJUSTMENT OF CITY CLAIM OR ACCOUNT

o: City Attorney:		
rom: DPW-ADMINISTRATION D	epartment Date	NOVEMBER 25 20 24
recommend that the following claim or account be adjusted or ca	ancelled as indicated.	
count or Claim:		
Number 5140018626	Amount of claim or account as billed	\$ 6,728.51
Dated 02/04/2021	Interest Added	\$ 3,021.71
Name WIN LLC	Cancellation or adjustment amount	\$ 9,750.22
	Adjusted balance	\$ 0.00
eason for cancellation or adjustment: NABLE TO PROVE CONTRACTOR LIABILITY		
	wa	
or Comptroller's Use Only:		
115501-0007-5237	(uncollectible
	Submitted by DYLAN WESTPHAL	
The state of the s		
	DPW-ADMINISTRATION	Department
	Adjustmen Weblicellation approved Tawanna J Swanigan By	
	D29104023FB6426 City Attorney's Off	ice (signature)
	2/10/2025 Date	20
accordance with section 304-3-1 of the Milwaukee Code, I certi	fy to the City Comptroller the uncollectibility of the	above claim or account as
dicated.	0711-	10
	By Department Hea	d (signature)
		0111 - 2:
*	Date	20 25
accordance with section 304-3.2 of the Milwaukee Code, and o cancelled as indicated.	n the basis of the certification submitted to me, the	e above account shall be adjusted
	By order of	
	(lechard &	ore special Depoty
	City Comptroller (s	ignature)
	Date teler vary 20	20 25
stribution:		
hite);- Complication decadement of claim of account		
nary}- Originating department of claim or account k) - City Attorney's Office	1002 FEB 13 AMII: 19	

o: City Atto	rney:		-			
rom: DPW	-ADMINISTRATION	<u> </u>	Departmen	t Date	Augus	t 22 20 24
ecommend	I that the following cla	im or account be adjuste	ed or cancelled a	s indicated.		
count or C			,	f	0.00.440.00	
Number	5140018715	4		Amount of claim or account as billed	\$ 22,418.33	
Dated	02/25/2021			Interest Added	\$ 9,397.17	
Name	EUELL J SMITH			Cancellation or adjustment amount	\$ 31,815.50	
	ancellation or adjustm TATUTE OF LIMIT	nent: ATIONS ON COLLEC	TION	Adjusted balance	\$ <u>0.00</u>	
Comptrol	ler's Use Only:					
	15501-	-000/ -	5452		uncoll	ectible
			Sub	mitted by DYLAN WESTPHAL		
			DPV	V-ADMINISTRATION		Department
			Adju By	stment or cancellation approved Tawanna J Swanigan		
				2/10/2025	ffice (signature)	
,			Date	2/10/2025		20
accordance licated.	e with section 304-3-	1 of the Milwaukee Code		City Comptroller the uncollectibility of the	e above claim or ac	count as
		* 1	Ву	Department He	ad (signature)	-
			Date		2/6/	20 25
	e with section 304-3.2 as Indicated.	2 of the Milwaukee Code	, and on the bas	is of the certification submitted to me, the	ne above account s	hall be adjusted
	*		Ву о	order of Auchard Bras	So So	ecial Deput
			Date	Estan Sa	(signature)	20 25
etribution						

(White):- Comptrollers Office (Canary)- Originating department of claim or account (Pink) - City Attorney's Office (Goldenrod) - Originator (detach prior to submitting)

2025 FEB 13 AM 11: 20

CANCELLATION OR ADJUSTMENT OF CITY CLAIM OR ACCOUNT

o: City Attorney:		
rom: DPW-ADMINISTRATION Dep	artment Date	August 30 20 24
recommend that the following claim or account be adjusted or cano	celled as indicated.	
ccount or Claim: Number 5140018710	Amount of claim or account as billed	\$ 6,736.17
Dated 02/24/2021	Interest Added	\$ 2,821.42
Name JOSEPH E POWELL	Cancellation or adjustment amount	\$ 9,557.59
	Adjusted balance	\$ 0.00
eason for cancellation or adjustment: XPIRED STATUTE OF LIMITATIONS ON COLLECTION		
		/
or Comptroller's Use Only:		
		The same
115501-0001-595	<u> </u>	uncollectible
	Submitted by DYLAN WESTPHAL	
	DPW-ADMINISTRATION	Departmen
	Adjustment or cancellation approved Tawauna J Swanigan	
	By City Altorney's O	ffice (signature)
	2/10/2025 Date	20
accordance with section 304-3-1 of the Milwaukee Code, I certify dicated.	to the City Comptroller the uncollectibility of the	e above claim or account as
ordered.	By A M=	P
	Department He	ad (signature)
	Date	2/6/ 20 25
accordance with section 304-3.2 of the Milwaukee Code, and on cancelled as indicated.	the basis of the certification submitted to me, the	ne above account shall be adjusted
	By order of	
	Verhandlear	Special Deputy
	City Comptroller	(signature)
	Date February 26	20 21
stribution:		
hite):- Comptrollers Office anary)- Originating department of claim or account		

(Pink) - City Attorney's Office (Goldenrod) - Originator (detach prior to submitting)

3052 FEB 13 AM 11: 19

To: City Attorney:		
From: DPW-ADMINISTRATION	Department Date	August 22 20 24
I recommend that the following claim or account be adjusted or	cancelled as indicated.	
Account or Claim: Number 5140018713	Amount of claim or account as billed	\$ 23,496.17
Dated 02/25/2021	Interest Added	\$ 9,849.02
Name TARTANAR D MCKAY	Cancellation or adjustment amount	\$ 33,345.19
	Adjusted balance	\$ 0.00
Reason for cancellation or adjustment: EXPIRED STATUTE OF LIMITATIONS ON COLLECTION	N	
For Comptroller's Use Only:		
115501-0001-5452		uncollectible
	Submitted by DYLAN WESTPHAL	
	DPW-ADMINISTRATION	Department
	Adjustment of caricellation approved Tawanna J Swanigan	
	By UZ9104023FB6426 City Altorney's O	ffice (signature)
	Date	20
In accordance with section 304-3-1 of the Milwaukee Code, I ce	ertify to the City Comptroller the uncollectibility of the	e above claim or account as
indicated.	074-	10
	By Department He	ad (signature)
	Date	2/6/ 20 25
In accordance with section 304-3.2 of the Milwaukee Code, and or cancelled as indicated.	on the basis of the certification submitted to me, the	1 = 0
	By order of	
	City Comptroller	e Special Pepuly Co
	Date February 20	20 25
Distribution:	7	

(White):- Comptrollers Office

(Canary)- Originating department of claim or account

(Pink) - City Attorney's Office

(Goldenrod) - Originator (detach prior to submitting)

3032 FEB 13 AM 11: 20

To: City Attorney:	Dete	NOVEMBER 25 20 24
rom: DPW-ADMINISTRATION	Department Date	INUVERIDER 20 20 24
recommend that the following claim or account be adjusted or	r cancelled as indicated.	
Account or Claim:	Amount of claim or account as billed	\$ 8,891.19
Number <u>5140018623</u>		\$ 3,992.92
Dated 03/08/2021	Interest Added	
Name TELCOM CONSTRUCTION	Cancellation or adjustment amount	\$ <u>12,884.11</u>
Reason for cancellation or adjustment:	Adjusted balance	\$ 0.00
JNABLE TO PROVE CONTRACTOR LIABILITY		
For Comptroller's Use Only:	e E	
115501-mo7-52?	57	un collectible.
110001 0001	Submitted by DYLAN WESTPHAL	
		Department
	DPW-ADMINISTRATION Signed by:	Department
	Adjustment of caricellation approved Tawauna J Swanigan	
	By D29104023FB6420 City Attorney's C	Office (signature)
	2/10/2025	20
	Date	
n accordance with section 304-3-1 of the Milwaukee Code, I of	certify to the City Comptroller the uncollectibility of the	e above claim or account as
ndicated.	O_{24}	10
	By Department He	ead (signature)
	Date	2/6/ 20 25
In accordance with section 304-3.2 of the Milwaukee Code, ar		
n accordance with section 304-3.2 of the milwaukee Code, ar or cancelled as indicated.	id on the basis of the certification submittee to me, t	no above account shall be asjusted
	By order of	
	(Kuhond Bar	e Special Deput
	City Comptroller	(signature)
	Date tebruary 2	0 20 25
Distribution:		*
(White):- Comptrollers Office		

Distribution:
(White):- Comptrollers Office
(Canary)- Originating department of claim or account
(Pink) - City Altomey's Office
(Goldenrod) - Originator (detach prior to submitting)

7072 FEB 13 AMII: 19

city Atto		artment Date	NOVEMBER 25 20 24
	-ADMINISTRATION Dep I that the following claim or account be adjusted or canc		NOVEMBER 20 21
count or C		Salos de malestes.	
	5140018600	Amount of claim or account as billed	\$ 6,854.40
Dated	01/25/2021	Interest Added	\$ 3,143.81
Name	RIVERSIDE PLUMBING	Cancellation or adjustment amount	\$ 9,998.21
		Adjusted balance	\$ <u>0.00</u>
	ancellation or adjustment: D PROVE CONTRACTOR LIABILITY		
			4
r Comptrol	ller's Use Only:		
115	5501 - 0007 - 5237		uncollectible
		Submitted by DYLAN WESTPHAL	
٠		DPW-ADMINISTRATION	Departmen
		Adjustment or cancellation approved Tawauna J Swanigan	
		By D29104023FB0426 City Attorney's C	office (signature)
		2/10/2025 Date	20
accordanc licated.	e with section 304-3-1 of the Milwaukee Code, I certify	to the City Comptroller the uncollectibility of th	e above claim or account as
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		By AUW Z	te.
		Department He	ead (signature)
		Date	2/6/ 2025
	e with section 304-3.2 of the Milwaukee Code, and on as indicated.	the basis of the certification submitted to me, t	he above account shall be adjusted
		By order of	
•		(Lichael Ro	10 Court Desite
		City Comptroller	(signature)
		Date February 2	0 20 25
		Date	
stribution:		Date	

(Galdenrod) - Originator (detach prior to submitting)

1 2025 FEB 13 BM 11: 18

- Sin 11	-ADMINISTRATION	Department Date	NOVEMBER 25 20 24
recommend	that the following claim or account be adjus	sted or cancelled as indicated.	
ccount or C	daim: 5140018266	Amount of claim or account as b	illed \$ 18,750.00
Dated	JUNE 5,2020	Interest Added	\$ 8,796.59
Name	MR ROOTER C/O JOSEPH FIX	Cancellation or adjustment amo	unt \$ 27,546.59
	ancellation or adjustment: O PROVE CONTRACTOR LIABILITY	Adjusted balance	\$_0.00
	O I NOTE CONTINUE TO REAL PROPERTY.		
or Comptro	ller's Use Only:		
115	501-0490-68	32	uncollectible
		Submitted by DYLAN WESTPHAL	
		DPW-ADMINISTRATION	Department
		Adjustment of caricellation approved Tawanna J Swanigan	ı
		By D29104023FB6420 City Altorn	ey's Office (signature)
		By	ey's Office (signature)
n accordance	ce with section 304-3-1 of the Milwaukee Coc	2/10/2025	20
n accordance	ce with section 304-3-1 of the Milwaukee Coc	Date 2/10/2025 Date 1 certify to the City Comptroller the uncollectibility	20
n accordanc	ce with section 304-3-1 of the Milwaukee Cod	Date 2/10/2025 Date Every Comptroller the uncollectibility By	20
n accordant ndicated.	ce with section 304-3-1 of the Milwaukee Cod	Date 2/10/2025 Date Every Comptroller the uncollectibility By	of the above claim or account as
dicated.		Date 2/10/2025 Date 2/10/2025 de, I certify to the City Comptroller the uncollectibility By Department	y of the above claim or account as ent Head (signature) 20 25
dicated.	ce with section 304-3.2 of the Milwaukee Coo	Date 2/10/2025 Date 2/10/2025 de, I certify to the City Comptroller the uncollectibility By Department Date	of the above claim or account as ant Head (signature) 20 25 me, the above account shall be adjusted Bore Special Deput
ndicated.	ce with section 304-3.2 of the Milwaukee Coo	Date 2/10/2025 Date 2/10/2025 de, I certify to the City Comptroller the uncollectibility By Department Date	of the above claim or account as ent Head (signature) 20 20 20 20 20 20 20 20 20 2

Distribution:
(White):- Comptrollers Office
(Canary)- Originating department of claim or account
(Pink) - City Altorney's Office
(Goldenrod) - Originator (detach prior to submitting)

5052 LEB 13 VWII: 18