

CITY OF MILWAUKEE

6-13-03

2003 JUN 16 PM 4:43

#201  
8871 W POTOMAC AVE  
MILWAUKEE, WI 53228

RONALD J. LEONHARDT  
CITY CLERK

4147

CITY OF MILWAUKEE  
RECEIVED

'03 JUN 17 PM 3:29

OFFICE OF  
CITY ATTORNEY

DEAR MR STEVEN M. CARNINI,  
INVESTIGATOR ADJUSTER

IN REGARDS TO YOUR LETTER DATED 9 JUN-03,  
CLAIM # C-I FILE NO: 03-5-158 FILE AGAINST  
THE CITY OF MILWAUKEE I SENT THE CITY CLERK  
SUPPORTION DOCUMENT. SEE THE CITY CLERK

ALSO MR OVERHOLT INVESTIGATOR ADJUSTER

THE YOUNG WHITE PUNK POLICEMAN COUNTED  
MY INMATE PROPERTY. HE STATED THAT I ONLY  
HAD \$380, SO I TOLD HIM THAT I HAD  
\$500.00. HE LAUGHED AT ME AND LEFT  
THE ROOM. ~~NO~~ INMATE INVENTORY WAS GIVEN  
TO ME BECAUSE I WAS HAND CUFF. DISTRICT 7

THEY TOOK MY COAT. ALSO, WHEN I WENT  
TO THE MILWAUKEE COUNTY JAIL, DISTRICT  
4, AND MILWAUKEE SHERIFF CONDUCTED  
MY INMATE PROPERTY, I VERIFIED THE  
PROPERTY, AND THEN SIGNED THE FORM.

IN MY VERY DISTRICT 7 WAS A  
LACK OF RESPONSIBILITY TO ME

I THANK YOU KINDLY  
SGM RALPH BELLAMY SR

8871 W. POTOMAC BLVD

MILWAUKEE, WI 53225-0447

CITY OF MILWAUKEE

2003 APR -3 PM 1:25

1 APR 03

RONALD FLAHERTY  
CITY CLERK

ON AND ABOUT 22 JAN I WAS ARRESTED  
BY MILWAUKEE COUNTY POLICE DEPARTMENT FOR DISORDERLY  
CONDUCT. IN DISTRICT 7 TO ME TO REMOVE MY COAT  
WHICH HAD MY IMATED CLOTHES RECEIPT, WAS HANDCUFF  
TO MY WALLET WITH MY PERSONAL EFFECT OF MILITARY  
ID CARD, VA CARD, DIVISION LICENSE AND OTHER EFFECT

I HAD A TOTAL OF \$500. CASH MONEY WHEN THE  
YOUNG POLICE OFFICER COUNTED THE MONEY TO  
HIMSELF OF WHICH I COULD NOT VERIFY  
THE AMOUNT HE TOLD ME THAT I HAD \$382.00  
CASH. I TOLD HIM THAT NOT SO. FOR HIM TO  
RECOUNT THE MONEY, HE STATED THAT HE WOULD  
NOT MAKE A RECOUNT OF THE MONEY HE HAD.

I WAS TRANSFERRED TO THE COUNTY MILWAUKEE JAIL  
MY MONEY, COAT, WALLET DID NOT COME WITH  
ME. MILWAUKEE COUNTY SHERIFF DEPARTMENT INVENTORIED  
MY IMATED CLOTHES WITHOUT THE COAT, WALLET AND  
MONEY OF \$500.00 / \$382.00. YOU CAN SEE THE  
SUPPORT DOCUMENT OF BOTH DISTRICT 7 MILWAUKEE  
COUNTY POLICE DEPARTMENT AND THE MILWAUKEE COUNTY  
SHERIFF DEPARTMENT. A BIG DIFFERENCE.

UPON MY RELEASE MY COAT, \$382. NOT \$500.00  
AND WALLET WAS IN MY POSSESSION  
AND NOT MY WALLET. I AM DISRESPECTED TO A  
BLACK DISABILITY VETERAN VET OF 30 YRS  
OF FAITH SERVICE FOR THE STATE OF WIS AND THE  
AMERICAN PEOPLE. IF ANY MAN PLEASE  
ACCEPT THIS CLAIM AS A UNDER HARDSHIP TO ME

Read

2

AND MY FAMILY. THIS STATEMENT IS THE  
BEST OF MY ABILITY + KNOWLEDGE TO THIS  
JUDGMENT TIME + DATE.

I THANKS YOU KINDLY

Ralph Bellamy SR

RETIRED SERGEANT MAJOR U.S. ARMY

RALPH BELLAMY SR

OFFICE OF MILWAUKEE  
RECEIVED  
03 APR -3 PM 3:48  
OFFICE OF  
CITY ATTORNEY

INMATE PROPERTY RECEIPT

DATE 01/22/03 TIME 20:49

KING NUMBER 34 84522

INMATE NAME BELLAMY, RALPH SR  
EX M RACE B DOB 05/13/1938

DISTRICT 7

INVENTORY DATE, TIME 01/22/2003 20:47  
INVENTORIED AT AGENCY ID, NAME MCSO MILWAUKEE CO. SHERIFF'S DEPARTMENT  
INVENTORIED BY GLF530928

ITEM UNIT	ITEM DESCRIPTION	TRANS DATE	TRANS TYPE	TO/FROM	NAME
0001 EA	BLACK SHOES	01/22/2003	REC	INMATE	BELLAMY, RALPH SR
0001 EA	GREEN SHIRT	01/22/2003	REC	INMATE	BELLAMY, RALPH SR
0001 EA	NO MONEY TAKEN	01/22/2003	REC	INMATE	BELLAMY, RALPH SR

\*\*\*\*\*

\*\*\* YOU MUST CLAIM YOUR PROPERTY WITHIN 10 DAYS OF YOUR RELEASE. \*\*\*

\*\*\* PROPERTY LEFT IN THE MILWAUKEE COUNTY JAIL OR HOUSE OF \*\*\*

\*\*\* CORRECTION FOR MORE THAN 10 DAYS WILL BE DISPOSED OF \*\*\*

\*\*\* ACCORDING TO MILWAUKEE COUNTY POLICY. \*\*\*

\*\*\*

\*\* TELEPHONE CALLS PLACED WHILE AN INMATE AT EITHER THE COUNTY \*\*\*

\*\* JAIL OR HOUSE OF CORRECTION MAY BE MONITORED. \*\*\*

\*\*\*

INMATE/CIVILIAN SIGNATURE

*Ralph Bellamy Sr*

OFFICER SIGNATURE

*W. Hansen*

DATE

639617

BELLAMY, Ralph SR.

B/M 05-13-38

MILWAUKEE County Sheriff DEPARTMENT

1 of 3

BELLAMY, RALPH

B/m 5-13-38

#  
640518

Wirtz POLY BAG STOCK NO. 117.60W  
SIZE 12" X 20" X 4 MIL

2

DATE 01/23/03 TIME 08:06  
BOOKING NUMBER 348684522

INMATE NAME BELLAMY, RALPH SR  
SEX M RACE B DOB 05/13/1938

INVENTORY DATE, TIME 01/22/2003 20:47  
INVENTORIED AT AGENCY ID, NAME MCSB MILWAUKEE CO. SHERIFF'S DEPARTMENT  
INVENTORIED BY GLF530928

ITEM QTY	UNIT CODE	ITEM DESCRIPTION	TRANS DATE	TRANS TYPE	TO/FROM	NAME
0001	EA	BLACK SHOES ✓	01/22/2003	REC	INMATE	BELLAMY, RALPH
0001	EA	GREEN SHIRT ✓	01/22/2003	REC	INMATE	BELLAMY, RALPH
0001	EA	NO MONEY TAKEN ✓	01/22/2003	REC	INMATE	BELLAMY, RALPH
0001	EA	SEALED BAGS ✓	01/22/2003	REC	INMATE	BELLAMY, RALPH
0001	EA	\$390.86 ✓	01/22/2003	REC	INMATE	BELLAMY, RALPH
0001	EA	T-SHIRT BLACK ✓	01/23/2003	REC	INMATE	BELLAMY, RALPH
0001	EA	SWEATPANTSBLACK ✓	01/23/2003	REC	INMATE	BELLAMY, RALPH

\*\*\*\*\*

\*\*\* YOU MUST CLAIM YOUR PROPERTY WITHIN 10 DAYS OF YOUR RELEASE. \*\*\*

\*\*\* PROPERTY LEFT IN THE MILWAUKEE COUNTY JAIL OR HOUSE OF \*\*\*

\*\*\* CORRECTION FOR MORE THAN 10 DAYS WILL BE DISPOSED OF \*\*\*

\*\*\* ACCORDING TO MILWAUKEE COUNTY POLICY. \*\*\*

\*\*\* TELEPHONE CALLS PLACED WHILE AN INMATE AT EITHER THE COUNTY \*\*\*

\*\*\* JAIL OR HOUSE OF CORRECTION MAY BE MONITORED. \*\*\*

\*\*\*\*\*

INMATE/CIVILIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

OFFICER SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_





drop file

CAUTION: NOT TO BE USED FOR IDENTIFICATION PURPOSES

THIS IS AN IMPORTANT RECORD. SAFEGUARD IT.

ANY ALTERATIONS IN SHADED AREAS RENDER FORM VOID

### CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, First, Middle) BELLAMY, RALPH		2. DEPARTMENT, COMPONENT AND BRANCH ARMY/RA		3. SOCIAL SECURITY NO. 252   50   6331	
4.a. GRADE, RATE OR RANK SGM	4.b. PAY GRADE E-9	5. DATE OF BIRTH (YYMMDD) 380513		6. RESERVE OBLIG. TERM. DATE Year NA   Month   Day	
7.a. PLACE OF ENTRY INTO ACTIVE DUTY Richmond, VA		7.b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) Richmond, VA			
8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND Co A HQ Cmd FORSCOM FC		8.b. STATION WHERE SEPARATED Fort Stewart, GA			
9. COMMAND TO WHICH TRANSFERRED USAR Control Group (Retired) RCPAC, 9700 Page Blvd. St. Louis, MO 63132-5200				10. SGLI COVERAGE Amount: \$ 50,000	
11. PRIMARY SPECIALTY (List number, title and years and months in specialty. List additional specialty numbers and titles involving periods of one or more years.) 11Z, Infantry Senior Sergeant, 1 year and 4 months//11B, Infantryman, 11 years and 8 months//NOTHING FOLLOWS		12. RECORD OF SERVICE			
		a. Date Entered AD This Period	78	12	01
		b. Separation Date This Period	90	07	31
		c. Net Active Service This Period	11	08	01
		d. Total Prior Active Service	16	07	23
		e. Total Prior Inactive Service	00	04	22
		f. Foreign Service	02	11	28
		g. Sea Service	00	00	00
		h. Effective Date of Pay Grade	83	09	01
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) Army Service Ribbon//National Defense Service Medal//Army Achievement Medal//Army Commendation Medal//Overseas Service Ribbon(3)//Overseas Service Bars(2)//Vietnam Service Medal with One Bronze and One Silver Service Star//Bronze Star Medal//CONT IN ITEM 18					
14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed) Battalion Training Management Systems, 1 week, Mar 80//First Sergeant Course, 2 weeks, Apr 80// NOTHING FOLLOWS					
15.a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM		Yes	No	15.b. HIGH SCHOOL GRADUATE OR EQUIVALENT	
			X	Yes	
				No	
		X		16. DAYS ACCRUED LEAVE PAID NONE	
17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION					
Yes					
X No					
18. REMARKS Extension of service was at the request and for the convenience of the Government// Immediate reenlistment this period: (781201-850222)//Item 13 Cont: Republic of Vietnam Campaign Medal with 60 Device//Republic of Vietnam Gallantry Cross Unit Citation Badge with Palm//Army Good Conduct Medal (7th Award)//NCO Professional Development Ribbon with Numeral (4)//Purple Heart//Combat Infantryman Badge//Driver and Mechanic Badge//Drill Sergeant Badge//Expert Badge(Rifle)//Meritorious Service Medal//Air Medal// NOTHING FOLLOWS					
19.a. MAILING ADDRESS AFTER SEPARATION (Include Zip Code) 1024 Aphla Street Waycross, GA 31501			19.b. NEAREST RELATIVE (Name and address - include Zip Code) Bertha Hopkins, 1024 Aphla Street Waycross, GA 31501		
20. MEMBER REQUESTS COPY BE SENT TO		GA	DIR. OF VET AFFAIRS	X	Yes
					No
21. SIGNATURE OF MEMBER BEING SEPARATED 			22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature)  WILLIAM C. BELCHER, Chief, TP		

DD Form 214, NOV 88

Previous editions are obsolete.

MEMBER

Retirement

Honorable

Title 10, USC Section 3914

RBD

RE-4R

For Length of Service



Department of Veterans Affairs

# STATEMENT IN SUPPORT OF CLAIM

**PRIVACY ACT INFORMATION:** The law authorizes us to request the information we are asking you to provide on this form (38 U.S.C. 501(a) and (b)). The responses you submit are considered confidential (38 U.S.C. 5701). They may be disclosed outside the Department of Veterans Affairs (VA) only if the disclosure is authorized under the Privacy Act, including the routine uses identified in the VA system of records, 58VA21/22, Compensation, Pension, Education and Rehabilitation Records - VA, published in the Federal Register. The requested information is considered relevant and necessary to determine maximum benefit under the law. Information submitted is subject to verification through computer matching programs with other agencies.

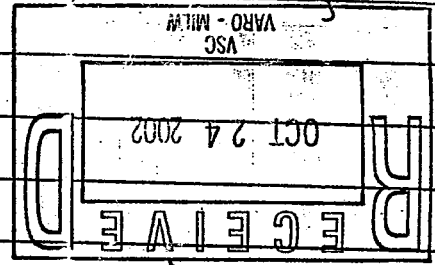
**RESPONDENT BURDEN:** VA may not conduct or sponsor, and respondent is not required to respond to this collection of information unless it displays a valid OMB Control Number. Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have comments regarding this burden estimate or any other aspect of this collection of information, call 1-800-827-1000 for mailing information on where to send your comments.

FIRST NAME - MIDDLE NAME - LAST NAME OF VETERAN (Type or print)		SOCIAL SECURITY NO.	VA FILE NO.
RALPH BELLAMY		252 50 6331	252 50 6331 C/CSS -

The following statement is made in connection with a claim for benefits in the case of the above-named veteran:

My hearing (service connected) has worsened significantly. Please reevaluate my disability for increase. My treatment records are at the VAMC Miles. I will be fitted w/ hearing aids soon.

Thanks!



I would also like to claim service connection for a gunshot wound to my left leg. I was shot in combat while fighting in Viet Nam, & received the Purple heart.

I CERTIFY THAT the statements on this form are true and correct to the best of my knowledge and belief.

(CONTINUE ON REVERSE)

SIGNATURE Ralph Bellamy		DATE SIGNED 24 Oct 02	
ADDRESS MILWAUKEE, WI, 53225-4147		TELEPHONE NUMBERS (Include Area Code)	
8871 W. POTOMAC AVE #101		DAYTIME	EVENING

**PENALTY:** The law provides severe penalties which include fine or imprisonment, or both, for the willful submission of any statement or evidence of a material fact, knowing it to be false.