

2ND COPY

10/4/19

Attention: Milwaukee City Clerk

My name is Janice Kenneth Quin. I'm writing this letter to you after speaking with attorney Benjamin Baldwin who sent me the enclosed letter on appealing his claim decision. Therefore, I'm sending this as a written statement requesting a hearing

(photocopy)

within 21 days of the postmarked date <sup>09/18/19</sup> of this letter to The Milwaukee City Clerk, 200 East Wells Street, Room 205 Milwaukee, Wisconsin 53202.

Included is a photocopy of this letter's envelope, showing the postmark and the original has been retained.

Thank you,  
Ms. Janice Kenneth Quin  
10/4/19

Witness: Jernise Coleman (PCW)  
10-4-2019

Case # C.I. file no. 1029-2019-1125

Attention: Mr. Benjamin Baldwin  
(City adjuster)

On the Morning of October 16<sup>th</sup>, 2019  
it was told to me that you would need  
for me to send another written statement  
concerning the appeal and to request  
another hearing, that is the reason  
for this letter in writing, after following  
your instructions to send the written  
statement to the Milwaukee City Clerk,  
200 East Wells Street, Room 205, Milwaukee,  
Wisconsin 53202. You said the written  
statement had not been found, even  
as of 10/16/19. So after speaking with  
you today I'm mailing a 2<sup>nd</sup> copied  
letter requesting a written statement  
for a hearing again, this time to the  
address you gave me on 10/16/19 at 10:26 AM.

Thank you

Janice Renette Guin  
10/16/19

page 2

From: Janice Bennett  
9304 W. Broadwater Rd.  
Milwaukee Wisconsin - Apt #2  
53322



OFFICE OF GOVERNMENT  
MAIL SERVICES

To: Attorney Benjamin Babin  
841 N. Broadwater  
Milwaukee Wisconsin

Case# C.I. File No. 029-2019-1125  
5320283613



*Evidence*

*Sent: 06/29/2019*  
*Event: 04/3/2019*  
*Damages*

To: Mr. Benjamin ( The City Attorney)

Attention: Mr. Benjamin (City Adjuster)

Hello my name is Janice Renette Quin I know it's been several weeks since our last conversation that's because I've been in and out of the hospital due to undue stress since the severe damages to my car from going down in the unrepaired pot holes on 97<sup>th</sup> and Michelle and 96<sup>th</sup> and Allyn Street on 04/03/2019 at 3:45pm while on my way to work and my front left tire on the driver's side went down into the 1st unrepaired pothole I didn't pay much attention to the tire I just noticed it began wobbling a little but trying to get to work early I continued to drive north and turned onto 96<sup>th</sup> and Allyn Street seconds after turning right my front tire on the driver's side went right down into not one but two very large unrepaired potholes in the street. At this time I heard a loud Boom and then a Pop. And I noticed my car (98 Crown Victoria) was not moving forward or backwards after putting the car in drive. I then tried to get out of the car (Driver's side) and saw that my door was jammed and not opening on the driver's side and I had to slide over to the other side (passenger side) to get to the passenger side and open the door. After getting out that door I opened the door and I stood outside the street feeling in shock all over! and I saw steam coming from underneath the hood of the car and green liquid running into the street and the entire front hood of the car inches off the street. I immediately called my daughter Jernise at work who was just around the corner at Wisconsin Lutheran Senior Living these streets and leaving my daughter Jernise Coleman's job at Wisconsin Lutheran Senior Living located at 9035 N. 97<sup>th</sup> street. Who I had just taken a plate

*page 1*

of homemade lasagna and baked chicken and salad. After calling her on her cell phone she said she would tell her shift supervisor and be right there and call Mr. Chip (Mechanic) of Chip & Son's Auto Repair Shop. And that she would come where I was. 10 minutes later my daughter Jernise was where I was. Around 30 minutes later Mr. Chip showed up and saw my car and asked a man passing by to help push my car out the potholes. The man helped and the both of them pushed my car to a parking space right in the back of a apartment just minutes away from where I live and the front tire began wobbling worse and the car was already not moving. So Mr. Chip said he would go to Auto Zone and get the parts and order go to other stores to get all the necessary parts to repair my car so that I would have transportation back and forth to work. I told him I would have to go to the check cashing on 91<sup>st</sup> and Brown deer Rd. to cash my check and give him the money. We went to the check cashing and I gave him \$1,000 in cash to cover the parts on the invoice and repairs for the radiator, hoses, damaged struts, steering wheel pin for gear shaft, etc. Afterwards he went back to where my car was and I called the head supervisor Ms. Patricia Williams at my job Joyful Living Assisted Living at (414) 520-6882. I explained to her what happened to my car and the unrepaired potholes damage. and that I was catching the bus to work. Since this happened to me on 04/3/2019 I started working rd shift and catching the bus at 10pm at night has been too overwhelming. Because I'm catching the bus at this time of night from 96<sup>th</sup> and Browndeer Rd to 65<sup>th</sup> and Silver Spring after getting off the bus I'm constantly looking over my shoulder. I'm very afraid someone may try to hurt me I'm walking by myself and this has sent my pressure up very high and my blood sugar hit 600 and I had to be hospitalized at Froedhert hospital for one week. Because of my

car damages I have no transportation. And this was the only resource of transport to work and life. With my car I was working over time and able to pay my rent early and even worked over time but now that's no longer possible. The next morning after I got off work at 7am I rode the bus home and was met by Mr. Chip and my daughter Jernise as we were at my car for Mr. Chip to finish working on my car a purple and green tow truck pulled up and parked right behind my car that was still in the parking space. And the driver said he was there to tow the car right then. At that point Mr. Chip and myself and my daughter tried to explain what happened to my car and Mr. Chip again told him who he was and the driver of the tow truck said the landlord had called their company and had the order placed to have the car towed then he started taking pictures and so did I with our cell phones. The driver said my car would be towed to Prairie Land Towing in south Milwaukee. And gave me their telephone number. He then said he could not move the car with his tow truck because the car was immovable and had to call for a flat bed. 15 Minutes later another driver showed up with a flat bed and my car was towed. This is terribly sad and the large pothole on 97<sup>th</sup> and Michelle Street are still not repaired or filled except a sewage drain has been installed in the street to cover a hole. And the other 2 potholes on 96<sup>th</sup> and Allyn are still not repaired or filled as of 06/29/2019.

From: Janice Rennette Quin

06/26/2019

(414) 215-5491 Cell Phone



(414) 499-5444 Jernise Coleman (Cell Telephone Number)

Page 3

CITY OF MILWAUKEE

2019 JUL -8 A 9:21

CITY OF MILWAUKEE

Autozone  
Anice Quin  
414 215-5491

Printed

1st Receipt

AutoZone #

from chip

7377 N 76TH ST  
MILWAUKEE, WI 53223  
(414)760-1809

Total with core (tax included): 736.42  
Total without core (tax included): 705.80  
Total Deal Discount 0.00

VEHICLE:  
1998 Ford Crown Victoria  
No Engine Selected

CATALOG	PART#	PRICE
Ball Joint - Lower		
Duralast	520-207	171.99
Part Description: Lower ball joint front suspension - Driver side. Ball joint and control arm assembly.		
Quantity: 1		

2nd Receipt

Evidence

VEHICLE:  
1998 Ford Crown Victoria  
8 Cylinder 281/04608 II 4.6L FI SOHC

CATALOG	PART#	PRICE
Brake Rotor - Front		
Duralast	54060	64.99
Alt Part# 54060 Warranty: 2 Years Pkg DRUMS Seq No 4540 *Replace in pairs for best performance		
Quantity: 2		
Deal On This Item: Brake Bundle-Buy 2 Duralast Rotors and 1 set of Duralast Brake Pads for \$124.99 or less.. BEGINS 10/29/2018. ENDS 06/24/2019. Limit 1 per customer.		
Shock/Strut - Front		

This is the first of the 1st Receipt and the 2nd Receipt is directly behind it, a copy of the total invoice is enclosed the 3rd Receipt.

3rd Receipt

**Chips & Sons Auto Repairs Shop**

3940 N. 27<sup>th</sup> Street

Milwaukee, Wisconsin 53216

Business Telephone : (414) 698-3215

(Invoice)  
for Janice Quin

CUSTOMER'S ORDER NO. #1765		PHONE (414) 215-5491		DATE 04/3/19		
NAME JANICE QUIN						
ADDRESS 9304 W. Brown deer Rd Apt #2 MILWAUKEE, WIS 53224						
SOLD BY	CASH <input checked="" type="checkbox"/>	C.O.D.	CHARGE	ON ACCT.	MDSE. RET'D.	PAID OUT
QTY.	DESCRIPTION				PRICE	AMOUNT
	UPPER Wheel Ball Joint w/whole Control ARM					\$ 171.99
	FRONT Wheel Alignment AXLE AND ROTARS					\$ 598.63
	SPRING Replacement door LATCH for hood					\$ 64.00
	BAR LINK PADS/PINS Hoses					\$ 64.99
	FRONT SWAY BAR					\$ 24.99
	INNER & outer tire rod					\$ 9.99
	FRONT SUSPENSIONS					\$ 18.49
						\$ 35.00
						\$ 22.99
					Total:	
					\$ 1,461.07	
					TAX	
					\$ 45.00	
RECEIVED BY: <i>Mr. Edward Chip</i>					TOTAL	
					\$ 1,016.07	
					\$ 450.00	

C PRODUCT 610

All claims and returned goods must be accompanied by this bill.

Total: \$1,461.07  
Thank You





Evidence

MAILING LABEL ONLY

0000000
QUIN JANICE R
9304 W BROWN DEER RD # 3
MILWAUKEE, WI 53224-2017

Amount Received: \$ 74.50

MAILING LABEL ONLY

WISCONSIN CERTIFICATE OF TITLE

Table with vehicle details: Vehicle Identification Number (2FAFP73W8WX132048), Year (1998), Make (FORD), Title Number (18232NG005-5), Issue Date (08/20/2018), Chassis Type (AUTO), Odometer Status (EXEMPT), Product Number (98929182325), Body Style (SEDAN), Color (TAN).

Titled Owner(s)
QUIN JANICE R
9304 W BROWN DEER RD # 3
MILWAUKEE, WI 53224-2017

The person, firm or corporation named on this Title is the lawful owner of the vehicle described, subject to any Security Interest (liens) 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.

Lien Holder(s)
NONE,

Additional Vehicle Detail
PREVIOUSLY TITLED IN: IL

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

18 - 1 - 5088895

QUESTIONS:
Contact the Division of Motor Vehicles at:
414-266-1000, 608-266-1466
wisconsin.dmv.gov

This document void without watermark - Hold to light to view

Any alteration, correction, fluid, or erasure voids this title

KEEP IN SAFE PLACE

DO NOT KEEP IN VEHICLE



Froedtert Hospital

*Evidence*

4/30/2019

RE: Your hospital discharge on 04/25/2019

Dear JANICE QUIN,

At Froedtert & the Medical College of Wisconsin we strive to provide you with the best possible health care in a caring and comfortable environment. With this goal in mind we would like to hear your thoughts regarding your medical care at Froedtert Hospital.

We take patient feedback very seriously and because you have a unique perspective as a patient, we would greatly appreciate 5-10 minutes of your time to complete the enclosed survey. We also value your written comments. Your input allows us to recognize new ways to enhance our health care services to you in the future.

The enclosed survey asks about the care you received during your hospital stay that ended on the date listed above. Questions 1-25 are part of a national initiative sponsored by the United States Department of Health and Human Services to measure the quality of care in hospitals. Hospital results will be publically reported and made available on the Internet at [www.medicare.gov/hospitalcompare](http://www.medicare.gov/hospitalcompare). No individual responses will be shared. The overall results will provide comparisons on issues of hospital care that are important to all consumers.

Your answers may be shared with the hospital for quality improvement and may be used for research purposes. The number on the survey is used to tell us if you returned the survey so we don't send you reminders.

Your participation is voluntary and will not affect your health benefits. If you have any questions about this survey, please call 877-842-2477. For other questions about your hospital stay, please call 414-805-2882.

The information shared by you will be kept secure and you do not need to include your name unless you want to. We may share patient comments anonymously on our website. When finished, simply place the survey in the enclosed postage-paid envelope.

Thank you for taking the time to let us know how to better meet your healthcare needs.

Sincerely,

*Cathy Buck*

Cathy Buck  
President



According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0981. The time required to complete this information collected is estimated to average 8 minutes for questions 1-25 on the survey, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: Centers for Medicare & Medicaid Services, 7500 Security Boulevard, C1-25-05, Baltimore, MD 21244-1850.

Return to: 710 Rush Street, South Bend, IN 46601

120-03017-1696-01

Evidence

AFTER VISIT SUMMARY

Janice R. Quin DoB: 9/25/1963 5/30/2019 10:20 AM Family Medicine, Town Hall Health Center 262-532-3700

Instructions from SHIVARANJJANI THILLAIRAJAN MD, MD

Your personalized instructions can be found at the end of this document.



Your medications have changed today

See your updated medication list for details.



Pick these up at FROEDTERT 92ND ST. PHARMACY - MILWAUKEE, WI - 9200 W WISCONSIN AVE

dulaglutide • ONETOUCH DELICA LANCETS 33G • ONETOUCH VERIO

Address: 9200 W WISCONSIN AVE SUITE 200W, MILWAUKEE WI 53226

Hours: Mon-Fri 7:00am-8:00pm, Sat 8:00am-5:00pm, Sun & Hol 10:00am-5:00pm

Phone: 414-805-5117



Return in about 4 weeks

(around 6/27/2019).

What's Next

JUN 3 2019 Physical Exam with SAMUEL STEVENS MD, MD Monday June 3 1:00 PM

Family Medicine, Town Hall Health Center W180 N 8000 TOWN HALL RD 4th Floor MENOMONEE FALLS WI 53051 262-532-3700

JUN 5 2019 Phone Assessment with PHARMACIST 8 Wednesday June 5 10:00 AM This is a TELEPHONE assessment only.

FMCCP CARE COORDINATOR 200 WOODLAND PRIME MENOMONEE FALLS WI 53051 414-777-7970

AUG 5 2019 Diabetes New with KAREN GLASENAPP APNP, APNP Monday August 5 10:15 AM (Arrive by 10:00 AM)

Endocrine, Specialty Clinics Building 9200 W Wisconsin Ave, 4th Floor MILWAUKEE WI 53226 414-805-6552

Today's Visit

You saw SHIVARANJJANI THILLAIRAJAN MD, MD on Thursday May 30, 2019 for: Medication Problem.



Blood Pressure 118/56



BMI 27.17



Weight 194 lb 12.8 oz



Temperature (Tympanic) 97.8 °F



Pulse 92



Oxygen Saturation 99%

MyChart Sign-Up

Send messages to your doctor, view your test results, renew your prescriptions, schedule appointments, and more.

Go to https://www.mychartlink.com/mychart, click "Sign Up Now", and enter your personal activation code: S4QNQ-F4KGD-99DSV. Activation code expires 6/24/2019.

# Changes to Your Medication List

Evidence

START taking these medications



**cetirizine 10 MG tablet**  
Commonly known as: ZyrTEC

Take 1 tablet (10 mg total) by mouth daily.

CONTINUE taking these medications

lancets Misc

TEST SUGARS 4 TIMES DAILY OR AS DIRECTED

**pen needle, diabetic 31 gauge x 3/16" Needle**  
Commonly known as: EASY COMFORT PEN NEEDLES

Please provide the pen needles that fit her insulin syringes. 4 times daily

You might also be taking other medications not listed above. If you have questions about any of your other medications, talk to the person who prescribed them or your Primary Care Provider.



## Helpful ideas for following your medication schedule:

- Develop a daily routine for taking your medication
- Never change or stop taking your medication without first checking with your doctor.
- Call your doctor if you have any problems or questions about your medications.
- Call your doctor for a refill before your medications get too low.
- Keep a current medication list with you at all times.
- Bring your current list of medications with you every time you see your doctor or go to the hospital.
- Make sure your doctor knows about any herbal products, vitamins, or OTC medications that you take.

We have examined and treated you today on an emergency basis only. If your symptoms or medical problem(s) fail to improve, call your doctor or return here. Please note:

- **If you should need psychiatric assistance or suicide prevention information, please call 1-800-273-8255 (suicide crisis line) or Project Impact at 211 for personal crisis resources.**
- **If you were prescribed sedatives or pain medications:** these may make you drowsy. Do not drink alcohol or operate machinery while you are taking these medications.
- **If you were prescribed an over the counter medication:** it is important to thoroughly read the information contained in the package before taking the medication.
- **If you had an x-ray:** fractures (breaks in bone) may not be revealed on the initial X-rays but may be revealed on subsequent X-rays. If your pain persists, please seek follow-up care. Your X-ray has been read on a preliminary basis. Final reading will be made by the radiologist in 24 hours. You will be notified of any additional findings.
- **If you had lab tests or cultures obtained:** if additional treatment is required we will contact you. If you do not hear from us, but are interested in the results, you may view them on MyChart. Results can also be obtained in person with picture ID at our Medical Records department.

Company Code K7/C32 23631941  
 Loc/Dept 01/  
 Number Page 1947140 1 of 1  
 Joyful Living Adult Family Home III  
 3878 N 67th Street  
 Milwaukee, WI 53216

# Earnings Statement



Period Starting: 03/10/2019  
 Period Ending: 03/23/2019  
 Pay Date: 03/29/2019

Taxable Marital Status: Single  
 Exemptions/Allowances: Tax Override:  
 Federal: 2 Federal:  
 State: 2 State:  
 Local: 0 Local:  
 Social Security Number: XXX-XX-XXXX

**Janice Quin**  
 9304 W Browndeer Rd Apt 2  
 Milwaukee, WI 53224

Earnings	rate	hours/units	this period	year to date
Overtime	15.0000	71.50	1072.50	1072.50
<b>Gross Pay</b>			<b>\$1,072.50</b>	<b>\$1,072.50</b>

Other Benefits and Information	this period	year to date
Total Hours Worked	71.50	71.50

Statutory Deductions	this period	year to date
Federal Income	-64.93	64.93
Social Security	-66.50	66.50
Medicare	-15.55	15.55
Wisconsin State Income	-44.08	44.08
<b>Net Pay</b>	<b>\$881.44</b>	

Deposits account number	transit/ABA	amount
XXXXXXXX1128	XXXXXXXXXX	881.44

*Janice Quin*

Your federal taxable wages this period are \$1,072.50

Joyful Living Adult Family Home III  
 3878 N 67th Street  
 Milwaukee, WI 53216

Pay Date: 03/29/2019

Deposited to the account	account number	transit/ABA	amount
Checking DirectDeposit	XXXXXXXX1128	XXXXXXXXXX	881.44

**THIS IS NOT A CHECK**

*Page 6*

MP



# Ascension

Ascension St. Joseph, Emergency Department  
Phone: 414-447-2171

5000 W CHAMBERS ST  
MILWAUKEE WI 53210-1650

*Endwell*

Date: May 1, 2019



Name: Janice R Quin  
9304 W BROWN DEER RD 3  
MILWAUKEE WI 53224

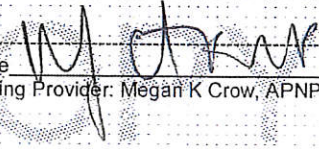
ID: Z1244445  
DOB: 09/25/1963

cetirizine (ZYRTEC) 10 MG tablet  
Sig: Take 1 tablet (10 mg total) by mouth daily.  
Qty: \*\*30 (Thirty) tablet\*\*  
Start: May 1, 2019

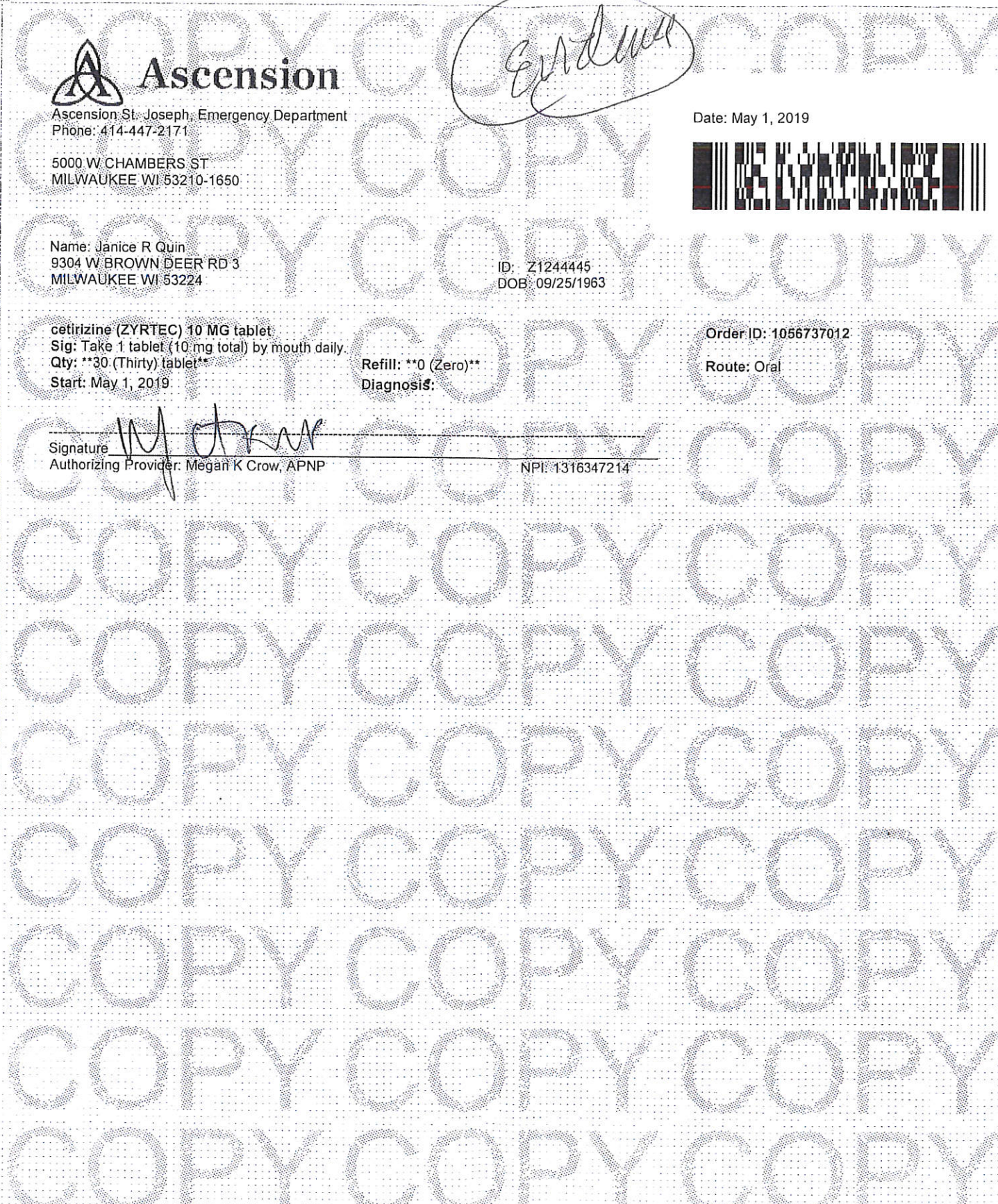
Refill: \*\*0 (Zero)\*\*  
Diagnosis:

Order ID: 1056737012

Route: Oral

Signature   
Authorizing Provider: Megan K Crow, APNP

NPI: 1316347214



WARNING: This document contains the following industry recognized tamper resistant security features.

Copy Void Pantograph

When copying is attempted on many copiers and scanners the message "COPY" appears in the background

TROYmark™

Diagonal repeating "watermark" consisting of variable data from the document, located on front or back of page

Micro Print

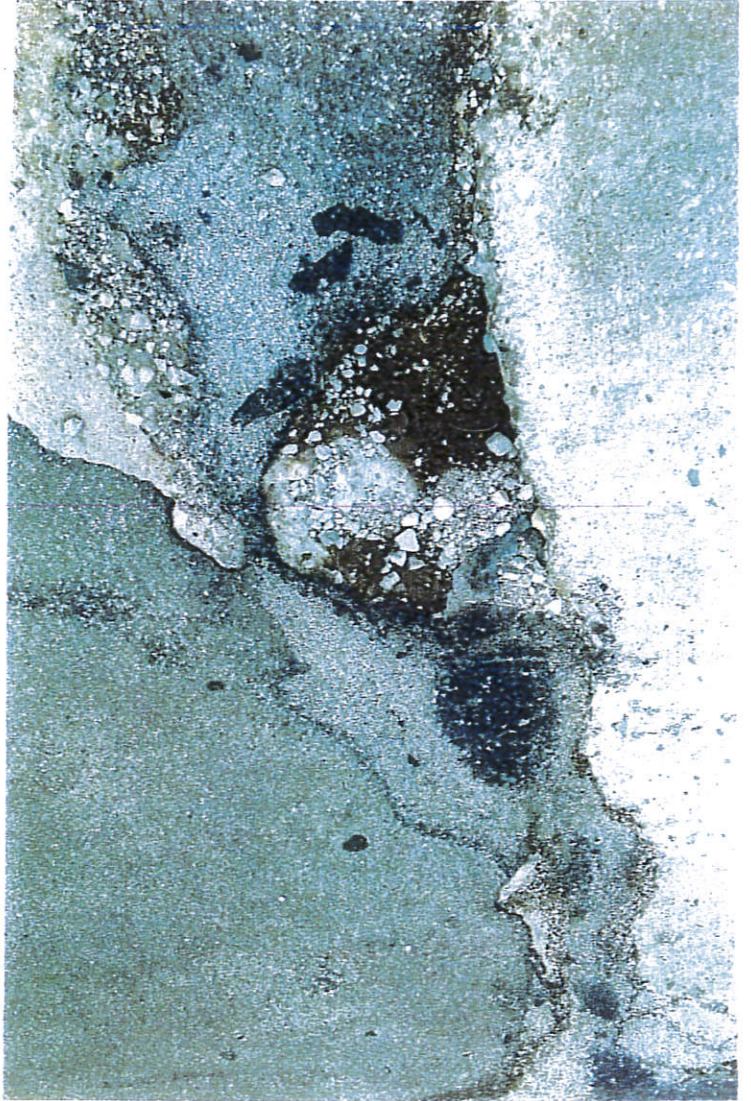
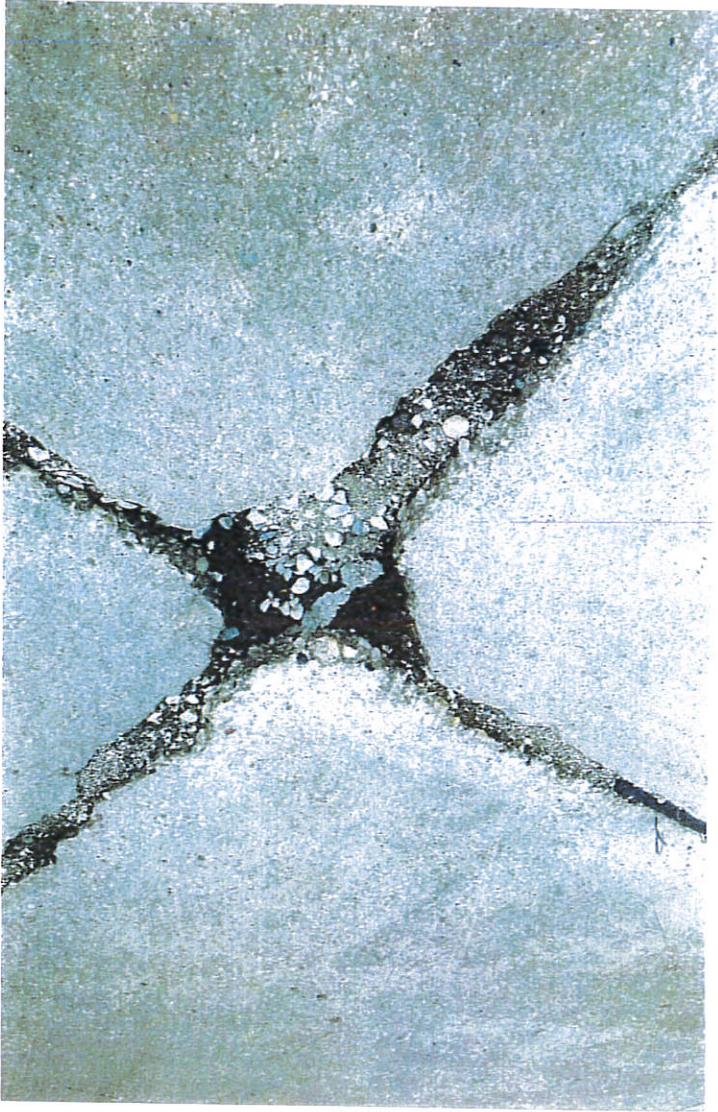
Area of very small print which must be read under magnification found wherever the MP symbol appears

Security Features Warning Box

Warning Box describing the security features contained within this document

MP

CPA



96th + 04/11/19

Michelle

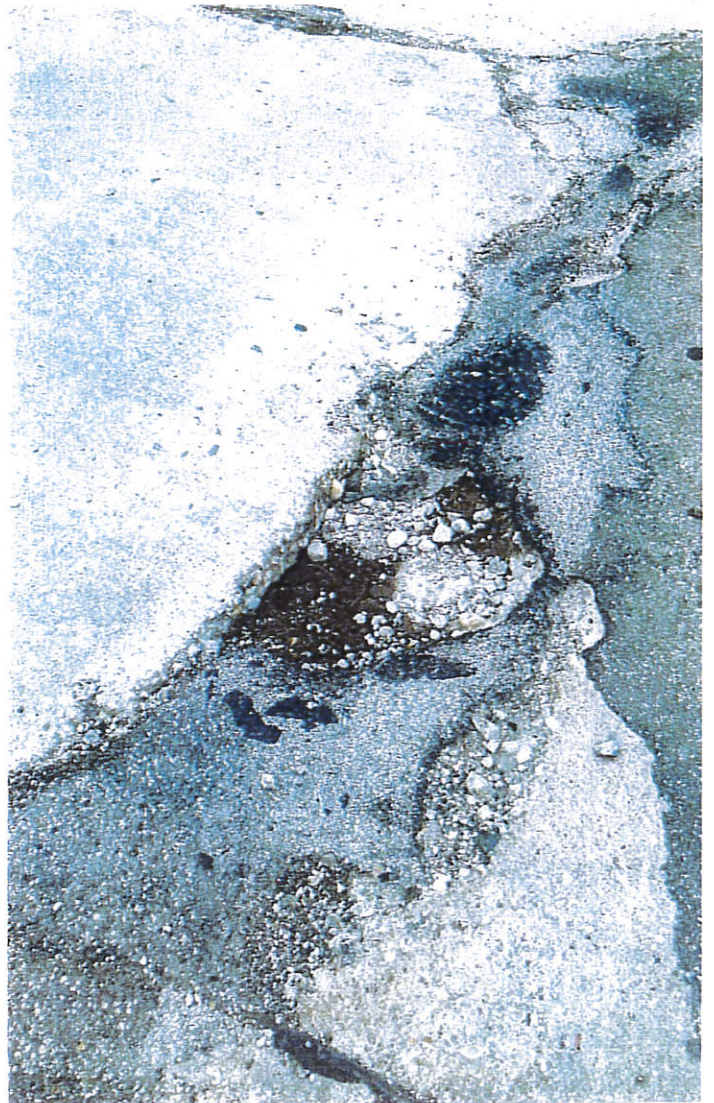
Tire on  
driver's side  
go into 2nd  
Unrepair pothole

96th Allyn 04/13/19

1 Block North of  
Michelle Street  
where pot holes (2)  
a accident occurred

1 Block South  
of Fletcher St.  
school





04/3/19

Prairie Land

Towing had

to call for

flat bed

because my

car was un

movable  
due to potholes.

04/3/19

Unrepaired

pot hole

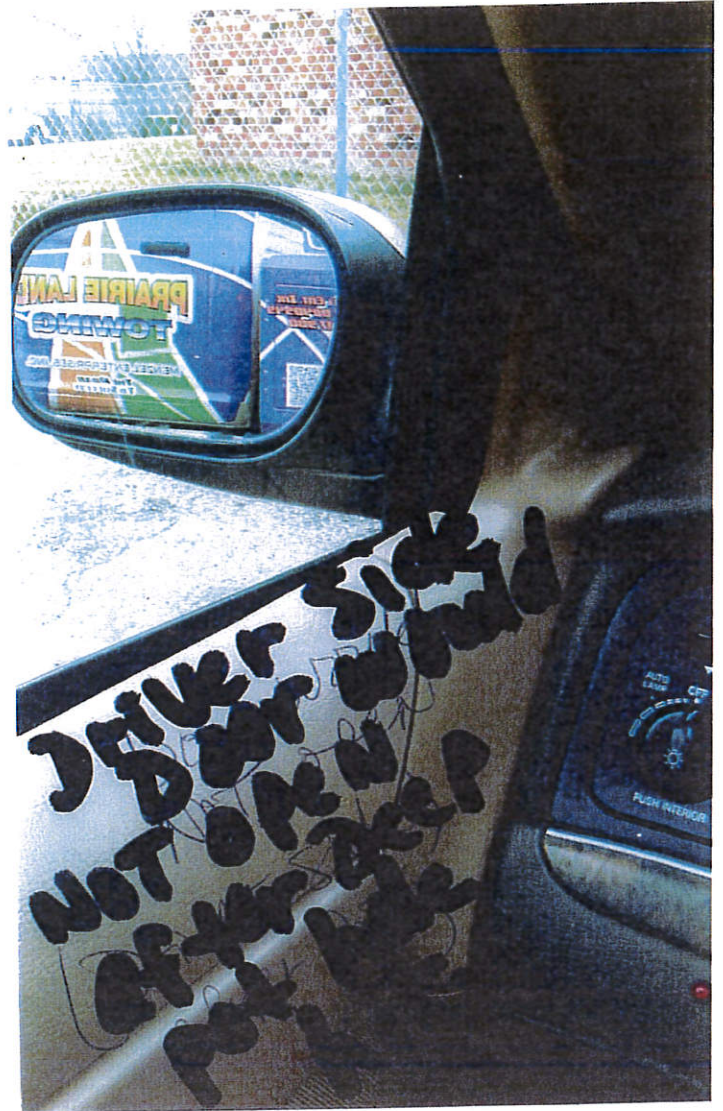
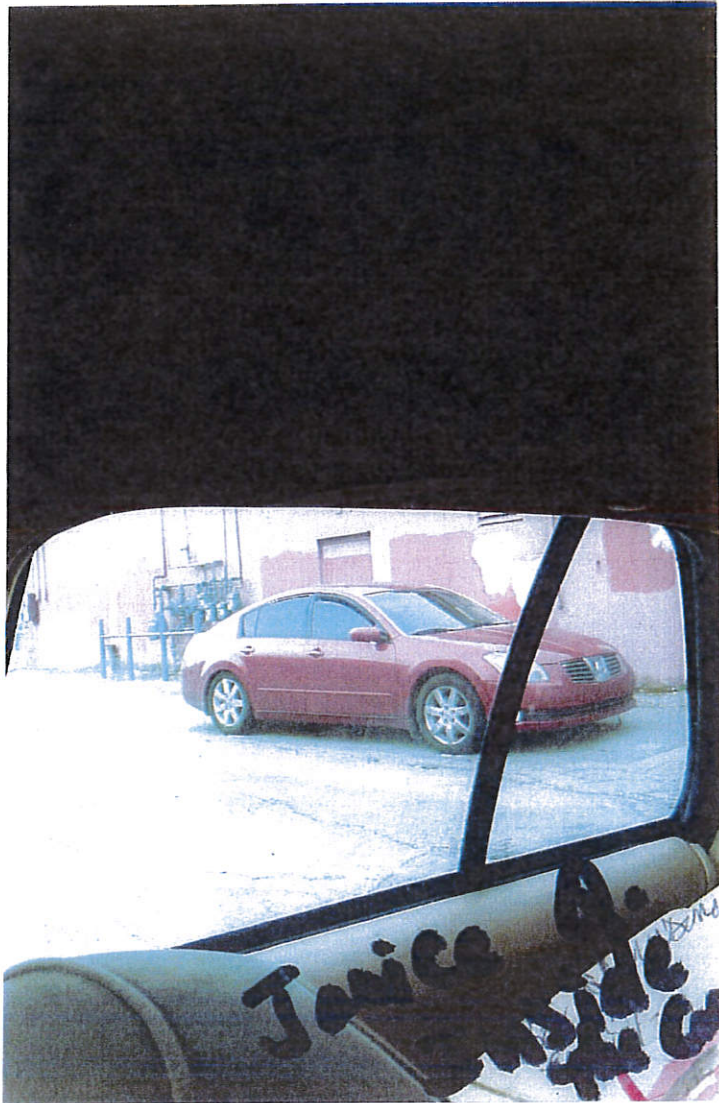
that my car

went down

into tire wh

about to get off

and on the ground



Mr. Chip  
(Mechanic)  
and Jennie  
the next  
morning AM  
I left work  
7AM

Driver  
Side  
Jammed  
would NOT  
open after  
pot hole  
damage.

MC. Chip (mechanic)  
with Jennise



Cliff (Mechanic) 04/3/19

Came to  
Where I  
Was Stranded  
after 2 deep  
pot hole hits  
and car won't  
move.