



Subrogation Department

1310 Martin Luther King Drive | P.O. Box 3068 | Bloomington, IL 61702-3068
Phone 888-767-2361 | Fax 309-820-2626

CITY OF MILWAUKEE
2016 SEP 8 3:06 PM
CITY CLERK'S OFFICE

August 15, 2016

CITY OF MILWAUKEE
CITY CLERK , ATTN: CLAIMS
200 E WELLS ST RM 205
MILWAUKEE, WI 532023591

RECEIVED

SEP 8 - 2016

OFFICE OF
CITY ATTORNEY

RE: Our File #: 1530444
Insured: ROBIN & PATRICIA ANDERSON
AMERICAN FAMILY INSURANCE Claim #: 00-445-163549
Your Claim #: NEW CLAIM.
Your Department: MILWAUKEE POLICE DEPARTMENT
Date of Loss: 5/8/2016
Amount Claimed: \$5,385.80

Dear CLAIMS DEPT

We are contacting you today on behalf of AMERICAN FAMILY INSURANCE regarding a loss. The facts of the accident indicate the city insured is liable for payments that AMERICAN FAMILY INSURANCE made to its policyholder as a result of this loss. Supporting documentation is enclosed for your review.

A suspect was fleeing a store and was shot at by Milwaukee Police officers. The stray bullets damaged the American Family insured's vehicle.

All payments should be made payable to Afni, include the Afni file number and must be directed to:

Afni – Subrogation Department
P.O. Box 3068
Bloomington, IL 61702-3068

Should you have any questions, please feel free to contact me at 888-767-2361.

Sincerely,

Rick Herrera

RICK HERRERA EXT 3152
RICKHERRERA@AFNI.COM
Subrogation Specialist



BE A FORCE

Milwaukee Police Department
Police Administration Building
749 West State Street
Milwaukee, Wisconsin 53233
<http://www.milwaukee.gov/police>

Edward A. Flynn
Chief of Police

(414) 933-4444

August 9, 2016

American Family Insurance Company
Attn: Jeanne BECKETT
6000 American Parkway
Madison, WI 53783

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OFFICE OF
CITY ATTORNEY

Dear Jeanne BECKETT:

This letter is in response to your public records request pursuant to the provisions of the Wisconsin Public Records Law (Wis. Stat. § 19.31-39). In your letter dated June 2, 2016, you requested the following information:

1. See Attached Request

The public policy in this state is to give the public the greatest amount of access to public records as possible. Wis. Stat. § 19.32. The general presumption is that public records are open to the public unless there is a clear statutory or common law exception. If there is no clear statutory or common law exception the custodian must "decide whether the strong presumption favoring access and disclosure is overcome by some even stronger public policy favoring limited access or nondisclosure." *Hempel v. City of Baraboo*, 2005 WI 120, ¶ 28 (citations omitted.) Notwithstanding the presumption of openness, the public's right to access to public records is not absolute. *Journal/Sentinel v. Aagerup*, 145 Wis. 2d 818, 822 (Ct. App. 1988).

Upon inspection of our records, the records custodian has determined that the following items are responsive to your request:

161290094 Incident Report (ROBBSTRNG)

At this time, item #1 that you have requested is the subject of a pending criminal investigation or prosecution (Milwaukee County Case Number 2016CF002054). Wisconsin law makes it clear that the public interest in apprehending and prosecuting offenders outweighs the public interest in disclosure. Wis. Stat. §§ 905.09 and 19.85(1)(a); *Newspapers, Inc. v. Breier*, 89 Wis. 2d 417 (1979); *Linzmeier v. Forcey*, 2002 WI 84, 254 Wis. 2d 306, 325-26. Additionally, The Wisconsin Supreme Court has held that documents relating to a pending investigation may be withheld from inspection. *Newspapers, Inc. v. Breier*, 89 Wis. 2d 417, 438 (1979). Relying on *Breier*, the Wisconsin Attorney General has stated that "statements by the court reveal sensitivity to the reputational interests of persons under investigation and indicate it may very well be proper to keep investigative files confidential until the investigation is substantially completed." 73 Wis. Op. Atty. Gen. 38, 43 (February 17, 1984). Furthermore, the Wisconsin Supreme Court has stated that when an investigation is on-going the "general presumption of openness will likely be overcome." *Linzmeier v. Forcey*, 2002 WI 84, ¶ 30, 254 Wis. 2d 306.

At this time, I am providing only a copy of the original report because it is the subject of a pending criminal investigation or prosecution. After the case is resolved, you may resubmit your request. If you do decide to resubmit your request, please reference case number 161290094 supplement #64.

This determination is subject to review by *mandamus* action under Wis. Stat. § 19.37(1), or upon an application to the Wisconsin Attorney General or the Milwaukee County Corporation Counsel.

Sincerely,

EDWARD A. FLYNN
CHIEF OF POLICE

WICKIE GAGLIANO
POLICE SERGEANT

EAF:JHP:jhp
F10114 Response Letter

6/2/2016

Vandalism rpt Claim# 445-163549 - Records, Open

Vandalism rpt Claim# 445-163549

Beckett, Jeanne K <JBECKETT@amfam.com>

Thu 6/2/2016 10:33 AM

To:Records, Open <mpdopenrecords@milwaukee.gov>;

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Good Morning, could you please send copy of vandalism report for Robin Anderson at location of 7335 W Good Hope Rd, Milwaukee on 05/08/16. Andersons vehicle was parked when police officer shot at and individual and the gun shots hit Andersons vehicle. Case# 161290094 Thank you

American Family Insurance Company | American Family Life Insurance Company | American Family Mutual Insurance Company | American Standard Insurance Company of Ohio | American Standard Insurance Company of Wisconsin | Midvale Indemnity Company | Home Office - 6000 American Parkway | Madison, WI 53783
Permanent General Assurance Corporation | Permanent General Assurance Corporation of Ohio | The General Automobile Insurance Company, Inc. DBA The General® | Home Office - 2636 Elm Hill Pike | Nashville, TN 37214 wholly owned subsidiaries of American Family Mutual Insurance Company

*If you are not the intended recipient, please contact the sender and delete this e-mail, any attachments and all copies.

F10 114

Incident Report MILWAUKEE POLICE DEPT

2333 N. 49TH ST
Milwaukee, WI 53210

(414) 935-7502

161290094

Supplement No
ORIG

Reported Date
05/08/2016
Nature of Call
ROBBSTRNG
Officer
MC CLENDON, GEOFFREY L

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Administrative Information

Agency MILWAUKEE POLICE DEPT	Incident No 161290094	Supplement No ORIG	Reported Date 05/08/2016	Reported Time 11:32	CAD Call No 161291191			
Status REPORT TO FOLLOW	Nature of Call ROBBERY STRONG ARM							
Location 7335 W GOOD HOPE RD			City MILWAUKEE	ZIP Code 53224	Rep Dist 217			
District 4	Squad 440	From Date 05/08/2016	From Time 11:28	Officer 007023/MC CLENDON, GEOFFREY L				
Assignment NORTH INVESTIGATIONS DIVISION			Entered by 007023	Assignment NORTH INVESTIGATIONS DIVISION				
Confidential HOMICIDE	RMS Transfer Successful	Prop Trans Stat Pending	Property? Yes	Approving Officer 009315	Approval Date 05/24/2016			
Approval Time 08:28:02								
TELETYPE DATE 05/08/2016		TELETYPE TIME 7:05 PM		TELETYPE MSGNO 0118				
CRIME VICT RS FM PV-17 Yes								
# Offenses 1	Offense 943.32(1)(a)	Description Robbery W Force:Robb		Complaint Type D	AC C	Use N	Bias 88	Loc 24
#Pr 1	MOE N	Act N	Weapon/Force 40	IBRS 120	No 1			
Link VIC	Involvement VAB	Invl No 1	Name SALLY BEAUTY SUPPLY	Race B	Sex F	DOB 08/21/1996		
Link VIC	Involvement VIC	Invl No 1	Name JORDAN, MINNIE E	Race B	Sex F	DOB 08/21/1996		
Link SUS	Involvement SUS	Invl No 1	Name BAILEY, DALLAS	Race B	Sex M	DOB 08/14/1990		
Link WIF	Involvement WIF	Invl No 1	Name ALLEN, WARREN	Race B	Sex M	DOB		

Person Summary

Invl SUS	Invl No 1	Type I	Name BAILEY, DALLAS	MNI 564966	Race B	Sex M	DOB 08/14/1990
Invl VAB	Invl No 1	Type B	Name SALLY BEAUTY SUPPLY	MNI 1708728	Race	Sex	DOB
Invl VIC	Invl No 1	Type I	Name JORDAN, MINNIE E	MNI 2699995	Race B	Sex F	DOB 08/21/1996
Invl WIF	Invl No 1	Type P	Name ALLEN, WARREN	MNI 2462448	Race B	Sex M	DOB

Vehicle Summary

Invl SUS	Type 1	Plate No 986UZZT	State WI	Lic Year 2016	Year 2001	Make PONT	Model GRA	Style 4D	Color GRY
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Property Summary

Involvement SAR	Description ARTICLE: OTHER CLIPR	Inv #16016054: Oyster Cool Hair Clippers
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Narrative

The actor came into the store acting as if he was going to buy something. The store manager refused to sell the actor anything because he was there in the store the day before and stole merchandise. The actor then grabbed the manager and pushed her down to the floor intentionally causing minor pain and fear to the store manager. The suspect then took merchandise without consent before fleeing the store.

**Incident Report
MILWAUKEE POLICE DEPT**

161290094

Supplement No
ORIG

SUSPECT (1) BAILEY, DALLAS

Involve SUSPECT	Inv No 1	Type INDIVIDUAL	Name BAILEY, DALLAS	MNI 564966
Race BLACK/AFRICAN AMERICAN	Sex MALE	DOB 08/14/1990	Age 25	Juvenile? No
Height 5'11"	Weight 160#	Hair Color BLACK	Eye Color BROWN	
Res Status RESIDENT	OFN_INVL 1			
Type HOME	Address 5800 N 91ST ST	City MILWAUKEE	State WISCONSIN	
ZIP Code 53225				

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VICTIM (BUSINESS) (1) SALLY BEAUTY SUPPLY

Involve VICTIM (BUSINESS)	Inv No 1	Type BUSINESS (USE IF INV IS VAB)		
Name SALLY BEAUTY SUPPLY	MNI 1708728	Means of Attack HANDS, FEET AND/OR FISTS	Extent of Injury NONE	D.V. NO
Res Status RESIDENT				
Type WORK/BUSINESS	Address 7335 W GOOD HOPE RD	City MILWAUKEE		
State WISCONSIN	ZIP Code 53224			
CONVEYED TO NONE	CONVEYED BY NONE	VICTIM ORDERED IN TO DA YES	ORDER IN TO VIEW PHOTOS NO	WILL VICTIM PROSECUTE YES
VICTIM GAVE CONSENT NO	VIC INFORMED CRM PRV SRV YES	VIC REQ ADDL CRM PRV SRV NO		

(IBRS) Info

Victim Inv No 1	Offense Codes 120
---------------------------	-----------------------------

VICTIM (PERSON) (1) JORDAN, MINNIE E

Involve VICTIM (PERSON)	Inv No 1	Type INDIVIDUAL	Name JORDAN, MINNIE E	MNI 2699995
Race BLACK/AFRICAN AMERICAN	Sex FEMALE	DOB 08/21/1996	Age 19	Ethnicity NOT HISPANIC/LATINO
Juvenile? No	Height 5'06"	Weight 180#	Hair Color BLACK	Eye Color BROWN
Skin DARK	Means of Attack HANDS, FEET AND/OR FISTS	Extent of Injury COMPLAINT OF PAIN	D.V. NO	
Body Clothing SHIRT/PANTS/SHOES	Res Status RESIDENT			
Type HOME	Address 5052 N 28TH ST	City MILWAUKEE	State WISCONSIN	
ZIP Code 53218				
Phone Type CELL	Phone No (414) 501-9394	Phone Type WORK	Phone No (414) 706-2218	
CONVEYED TO NONE	CONVEYED BY NONE	VICTIM ORDERED IN TO DA YES	ORDER IN TO VIEW PHOTOS NO	WILL VICTIM PROSECUTE YES
VICTIM GAVE CONSENT NO	VIC INFORMED CRM PRV SRV YES	VIC REQ ADDL CRM PRV SRV NO		
Employer/School SALLY BEAUTY SUPPLY	Position/Grade MANAGER			
Location 7335 W GOOD HOPE RD	City MILWAUKEE	State WISCONSIN		
ZIP Code 53224	Phone Type WORK	Phone No (414) 706-2218		
SHIRT BROWN SHIRT	PANTS BLACK PANTS	SHOES BLACK SHOES		

(IBRS) Info

Victim Inv No 1	Offense Codes 120	Injury APPARENT MINOR INJURY
---------------------------	-----------------------------	--

WITNESS (WITH INFORMATION) (1) ALLEN, WARREN

Involve WITNESS (WITH INFORMATION)	Inv No 1	Type POLICE OFFICER		
Name ALLEN, WARREN	MNI 2462448	Race BLACK/AFRICAN AMERICAN	Sex MALE	
Report Officer 007023/MC CLENDON, GEOFFREY L	Printed At 08/09/2016 10:31	Page 2 of 3		

Incident Report MILWAUKEE POLICE DEPT

161290094

Supplement No
ORIG

Vehicle: 986UZT

Involvement	Type	Plate No	State	Lic Year	Lic Type	Year	Make	Model
SUSPECT	AUTO	986UZT	WISCONSIN	2016	PASSENGER CAR	2001	Pontiac	GRA
Style	Color	VIN	Window Type					
4 DOOR	GRAY	1G2NF12T21M680645	TINTED WINDOW					
Link	Involvement	Invl No	Name	Race	Sex	DOB		
VIC	VAB	1	SALLY BEAUTY SUPPLY					
Link	Involvement	Invl No	Name	Race	Sex	DOB		
VIC	VIC	1	JORDAN, MINNIE E	B	F	08/21/1996		
Link	Involvement	Invl No	Name	Race	Sex	DOB		
SUS	SUS	1	BAILEY, DALLAS	B	M	08/14/1990		
Link	Involvement	Invl No	Name	Race	Sex	DOB		
WIF	WIF	1	ALLEN, WARREN	B	M			

Property

Item	Involvement	Invl Date	In Custody?
1	STOLEN AND RECOVERED	05/08/2016	Yes

Description

Inv #16016054: Oyster Cool Hair Clippers

Type	Cat	Article	UCR Type	# Pieces			
A	OTHER	CLIPR	OTHER	1			
Link	Involvement	Invl No	Name	Race	Sex	DOB	
OWN	VAB	1	SALLY BEAUTY SUPPLY				
Link	Involvement	Invl No	Name	Race	Sex	DOB	
OTH	VIC	1	JORDAN, MINNIE E	B	F	08/21/1996	
Link	Involvement	Invl No	Name	Race	Sex	DOB	
SUS	SUS	1	BAILEY, DALLAS	B	M	08/14/1990	
Link	Involvement	Invl No	Name	Race	Sex	DOB	
OTH	WIF	1	ALLEN, WARREN	B	M		

Modus Operandi

Gang Act?	Gang Name	Person/Prop Attacked	Physical Evidence
No	NONE	OTHER	PHOTOS/PROJECTILE BULLET/CASING
Weapon Used	Theft Type		
HANDS, FEET, FISTS, TEETH	ALL OTHER THEFTS		
Suspect Action			
OTHER			
Crime Code(s)			
ROBBERY			

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Claim 00-445-163549 - Overview

[Overview](#) | [Documents/Images](#) | [Financials](#) | [Activity Record](#) | [Notes](#)

[Expand All](#) | [Collapse All](#)

Assignment Information

[View Claim Assignment](#)

Assignment Status: Active-Suspense (05/27/2016) Primary File Handler: [Stephenie Gross \(SRG025\)](#)

Assignment Location: Inbox - Current Items: Gross, Stephenie R (SRG025)

[View All File Handlers](#)

Claim Quick Links

[View FNOL Report](#)
[DOL Policy Viewer](#)

Claim Assignment

[Suspend](#)
[Reassign](#)

Send

[Referral/Assist](#)
[FYI](#)

Claim Information

[View Claim Details](#)

Date/Time of Loss: 05/08/2016 (11:28 AM CDT)

Open Date: 05/25/2016

Claim Description: Vehicle was parked when police officer shot at an individual and the gun shots hit IV.

Claim Policy Information

[DOL Policy Viewer](#) | [View Prior Claims](#)

Policy Number: 98394058-06 AFMIC WI
Policy Type: Family Private Passenger Auto

Producer: [RICK SHANNON](#)

Payment Block: No

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Vehicle/Party Information

[View Perils & Reserves](#)

Vehicle 1 - 2006 / BMW / 530XI

[View Vehicle](#) | [View TLW](#) | [View Vehicle Salvage Log](#)

VIN: WBANF73586CG69130 Color: Black License Plate:

ANDERSON, ROBIN & PATRICIA WALKER A / Policyholder / Owner

[View Party](#)

Address: 8844 W KIEHNAU AVE Medicare:
MILWAUKEE, WI 53224 Email: pwand358@yahoo.com DOB:
-5353

Phone(s):

Primary	Type	Number	Ext	Comments
✓	Home	(414) 358- 2608		Patricia
	Cell	(414) 233- 8308		

Other Party Information



OFFICE OF THE CITY CLERK
Milwaukee, Wisconsin

INSTRUCTIONS FOR FILING A CLAIM AGAINST THE CITY OF MILWAUKEE

To file a claim against the City a claimant must comply with Section 893.80(1), Wis. Stats., a copy of which is printed at the bottom of this instruction sheet. Generally the statute requires the claimant to submit to the City Clerk:

1. A document stating the circumstances of the claim which must be signed by the claimant, or his/her agent or attorney. This document should be filed within 120 days of the event.
2. A document stating the address of the claimant and a statement of the relief sought. If money damages are sought, a specific sum must be stated.

(The above information may be combined in a single document.)

The following information should also be submitted to allow the City to promptly act on your claim:

1. Proof of the amount of the claim by means of either itemized receipts or two itemized estimates.
2. A phone number where the claimant can be reached during business hours as well as the claimant's e-mail address, if any.
3. As detailed a description of the incident as possible, including the date, time and place.

All information should be submitted to:

City Clerk
ATTN: CLAIMS
200 E. Wells St., Room 205
Milwaukee, WI 53202-3567

ADDITIONAL INFORMATION

Before you can file a lawsuit against the City of Milwaukee for reimbursement, State law requires that you first follow the claim procedures established by the City Clerk.

Filing a claim against the City does not automatically guarantee reimbursement from the City. However, the City examines each claim on an individual basis in determining if reimbursement is legally required.

In order to obtain reimbursement for a claim against the City, you must prove that the City or its employees acted unlawfully or negligently.

Only the City Attorney or the Common Council and the Mayor can authorize payment of a claim against the City. Any other representations made by City employees are not legally binding on the City.

893.80 Claims against governmental bodies or officers, agents or employees; notice of injury; limitation of damages and suits. (1) Except as provided in subs. (1g), (1m), (1p) and (8), no action may be brought or maintained against any volunteer fire company organized under ch. 213, political corporation, governmental subdivision or agency thereof nor against any officer, official, agent or employee of the corporation, subdivision or agency for acts done in their official capacity or in the course of their agency or employment upon a claim or cause of action unless:

(a) Within 120 days after the happening of the event giving rise to the claim, written notice of the circumstances of the claim signed by the party, agent or attorney is served on the volunteer fire company, political corporation, governmental subdivision or agency and on the officer, official, agent or employee under s. 801.11. Failure to give the requisite notice shall not bar action on the claim if the fire company, corporation, subdivision or agency had actual notice of the claim and the claimant shows to the satisfaction of the court that the delay or failure to give the requisite notice has not been prejudicial to the defendant fire company, corporation, subdivision or agency or to the defendant officer, official, agent or employee; and

(b) A claim containing the address of the claimant and an itemized statement of the relief sought is presented to the appropriate clerk or person who performs the duties of a clerk or secretary for the defendant fire company, corporation, subdivision or agency and the claim is disallowed.

[Home](#) [Inbox](#) [Group Pay](#) [Admin](#)

[Recently Viewed Claims](#)

Clm: 00-445-163549 / ANDERSON, ROBIN & PATRICIA WALKER A DOL: 05/08/2016 Policy: 98394058-06 Status: Open

Claim 00-445-163549 - Financials

[Overview](#) [Documents/Images](#) [Financials](#) [Activity Record](#) [Notes](#)

[Financials Summary](#) [Medical Bill List](#)

Financials Summary & Transactions

[View Perils & Reserves](#) | [View Loss Payment - Perils Breakout](#)

[Printable Version](#)

Loss Paid-to-Date: \$5,385.80 **Deductible(s) Applied: \$0.00** **Expense Paid-to-Date: \$0.00**

Filtered by: No filter applied. All items displayed.

Loss Payments: \$5,385.80	Loss Credits: \$0.00	Expense Payments: \$0.00	Expense Credits: \$0.00
Claim: \$5,385.80	Claim: \$0.00	Legal: \$0.00	Legal: \$0.00
Salvage: \$0.00	Salvage: \$0.00	Medical: \$0.00	Medical: \$0.00
Subrogation: \$0.00	Subrogation: \$0.00	Other: \$0.00	Other: \$0.00

Display By: Chronological Order Transaction Party

Displaying 1 - 2 of 2 items.

Trans Date	Trans #	Transaction	Method	Pay To/Payor	Party - Peril	Amount	Trans Status	Service From Date	Service To Date	Action(s)
06/06/2016	0100165423	Payment - Loss - Claim	Check	ROBIN ANDERSON AND LEONARD AUTO BODY INC	ANDERSON, ROBIN & PATRICIA WALKER A Comp - Misc. Non-Collision & Fire Theft Wind (059): \$5,385.80	\$5,385.80	Issued			
05/31/2016	0100146438	Payment - Loss - Claim	Check	ROBIN ANDERSON AND UMANSKY COLLISION CENTER OF MILWAUKEE NO	ANDERSON, ROBIN & PATRICIA WALKER A Comp - Misc. Non-Collision & Fire Theft Wind (059): \$5,385.80	\$5,385.80	Void			

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Displaying 1 - 2 of 2 items.

Build ICSFIN 10.3.0 (2016-06-02_09:22:27) | AT Claims | RXH039 | Current 2016-06-13 13:09:21 CDT | Server papp027.amfam.com
© 2005-2016 American Family Mutual Insurance Company All rights reserved. Internal use information. | I/S Service Desk

AMERICAN FAMILY INSURANCE
SCANNING CENTER
6000 AMERICAN PARKWAY
MADISON, WI 53783-0001
1-800-MYAMFAM (1-800-692-6326)

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*** ESTIMATE ***

05/27/2016 10:48 AM

Owner

Owner: ROBIN & PATRICI ANDERSON
Address: 8844 W KIEHNAU AVE
City State Zip: MILWAUKEE, WI 53224-5353
Home/Day: (414)358-2608
Home/Day: (414)233-8308
FAX:

Control Information

Claim #: 00445163549-0
Loss Date/Time: 05/08/2016 07:00 AM
Deductible: \$500.00
Insured Policy #: 9839405806
Loss Type: Other Comp
Ins. Company: American Family Insurance
Address: SCANNING CENTER 6000
AMERICAN PKWY
City State Zip: Madison, WI 53783-0001
Email: MCLOUGH@AMFAM.COM
Cell: (414)418-7251
Home/Day: (800)692-6326x21861
FAX: (855)598-8481
Insured: ROBIN & PATRICI ANDERSON
Address:
Home/Day: (414)358-2608
(414)233-8308

Inspection

Inspection Date: 05/26/2016 10:47 AM
Inspection Location: BMW of Milwaukee North VEA-20
Address: 5990 N Green Bay Ave
City State Zip: GLENDALE, WI 53209
Primary Impact: Front
Driveable: No
Inspection Type: Field
Contact:
Home/Day:
Secondary Impact:
Rental Assisted:
Assigned Date/Time:
First Contact Date/Time:
Received Date/Time: 05/25/2016 04:36 PM
Appointment Date/Time: 05/26/2016 08:00 AM
Appraiser Name: MARK CLOUGH
Address: SCANNING CENTER 6000
AMERICAN PKWY
City State Zip: MADISON, WI 53783-0001
Email: MCLOUGH@AMFAM.COM
Appraiser License #:
Cell: (414)418-7251
Home/Day: (800)692-6326x21861
FAX: (855)598-8481

Repairer

Repairer: UMANSKY COLL CTR OF MILW
NORT
Address: 1711 W. Florist Avenue
City State Zip: WI 53209-3827
License #:
Contact:
Work/Day: (414)290-4360
Home/Evening: (414)290-1600
FAX: (414)290-4359
Regulation ID: 81-0947183

Target Complete Date/Time:

Days To Repair: 5

Remarks

ANY LOSS RELATED SUPPLEMENTAL DAMAGE MUST BE APPROVED BY THE DAMAGE APPRAISER
 COLLECT DEDUCTIBLE FROM THE OWNER/INSURED
 PRIOR DAMAGE AND RUST ARE THE OWNERS RESPONSIBILITY
 SHOP SHOULD TEAR DOWN AND REPORT DETAILS TO THE DAMAGE APPRAISER

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Vehicle

2006 BMW 530XI STD 4 DR Sedan
 6cyl Gasoline 3.0
 6-Speed Automatic.

Lic. Plate: 333 WGU
 Lic Expire:
 Prod Date:
 Veh Insp# :
 Condition: Good
 Ext. Color: JET BLACK II
 Ext. Refinish: Two-Stage
 Ext. Paint Code: 668

Lic State: WI
 VIN: WBANF73586CG69130
 Mileage: 138,788
 Mileage Type: Actual
 Code: 42163B
 Int. Color: BEZUEGE LED DAKOTA -
 Leather Da
 Int. Refinish:
 Int. Trim Code: LCSW

Options - AudaVIN Information Received

4-Wheel Drive	<i>AM/FM In-dash CD Changer</i>	Air Conditioning
Alarm System	Aluminum/Alloy Wheels	Anti-Lock Brakes
Auto Trns W/Man Select Switch	<i>Automatic Dimming Mirror</i>	Center Console
Cruise Control	<i>Digital Signal Processor</i>	Driver Seat Memory
Dual Airbags	Dual Power Seats	<i>Dual Pwr Lumbar Supports</i>
Dual Zone Auto A/C	Emergency S.O.S. System	Fog Lights
<i>Garage Door Opener</i>	Head Airbags	<i>Headlight Washers</i>
<i>Heated Frnt & Rear Seats</i>	<i>Heated Front Seats</i>	Heated Power Mirrors
<i>Heated Steering Wheel</i>	Heated W/S Wiper Washers	High Intensity Headlamps
Intermittent Wipers	Keyless Entry System	<i>Leather Seats</i>
Leather Steering Wheel	Lighted Entry System	<i>Navigation System</i>
Power Brakes	Power Door Locks	Power Moonroof
Power Steering	Power Windows	Pwr Tilt/Tele. Str Wheel
Rain-Sensing W/S Wipers	Rear Window Defroster	Rem Trunk-L/Gate Release
Side Airbags	Stability Cntrl Suspens	<i>Steering Linked Headlmps</i>
Strg Wheel Radio Control	Tachometer	Theft Deterrent System
Tinted Glass	Tire Pressure Monitor	Traction Control System
Trip Computer	Wood Interior Trim	

AudaVIN options are listed in bold-italic fonts

Damages

Line	Op	Guide	MC	Description	MFR.Part No.	Price	ADJ%	B%	Hours	R
1	PC	6		Cover,Front Bumper	Replace PXN Reconditioned	\$528.00			3.3	SM
				>> Keystone - Milwaukee 800-924-8230						
				>> 9532 W Carmen Avenue						
				>> Milwaukee WI 53225						
				>> Quote# 121463812774463, Stock# BM1000154R, Clifford						
2	L	6	13	Cover,Front Bumper	Refinish				3.7	RF
					2.6 Surface					

			0.6 Two-stage setup					
			0.5 Two-stage					
3	E	20	Filler,Front Bumper LT	51117033705	\$13.31		INC	SM
4	E	21	Filler,Front Bumper RT	51117033706	\$13.31		INC	SM
5	BR	18	Cover,Tow Hook Access	Blend Refinish			0.2	RF
			0.1 Blend					
			0.1 Two-stage					
6	EU	28	Grille Assembly LT	RECYCLED PART	\$50.00	+20.00	INC	SM
			>> PAM's Auto (QRP) 320-363-7336					
			>> 7505 Ridgewood Rd					
			>> St Cloud MN 56303					
			>> Quote# 121463812774463, Stock# W0572, sales					
7	EU	29	Grille Assembly RT	RECYCLED PART	\$50.00	+20.00	INC	SM
			>> PAM's Auto (QRP) 320-363-7336					
			>> 7505 Ridgewood Rd					
			>> St Cloud MN 56303					
			>> Quote# 121463812774463, Stock# W1073, sales					
8	PC	41	Headlamp Assy,Xenon LT	Replace PXN Reconditioned	\$1,327.50		0.6	SM
9	E	42	Headlamp Assy,Xenon RT	63127160158	\$1,668.42		0.6	SM
10	N	973	Headlamps Aim	Additional Labor			0.4	SM
11	E	1278	Bulb,Halogen Headlamp LT	63217160781	\$28.53			SM
12	E	1040	Bulb,Headlamp LT	63126929309	\$43.03			SM
13	E	22	Bulb,Xenon Headlamp LT	63217217509	\$229.32			SM
14	E	455	Motor,Headlamp LT	63127189312	\$230.76		INC	SM
15	E	50	Module,Hdlnp Control LT	63126937223	\$546.31		INC	SM
16	BR	26	Cover,Headlamp Washer LT	Blend Refinish			0.2	RF
			0.1 Blend					
			0.1 Two-stage					
17	BR	27	Cover,Headlamp Washer RT	Blend Refinish			0.2	RF
			0.1 Blend					
			0.1 Two-stage					
18	E	1396	Cover,Rad Supt Panel	51717061890	\$7.72		INC	SM
19	E	1577	Duct,Air Intake LT	51717050649	\$30.74		0.2	SM
20	E	1578	Duct,Air Intake RT	51717050604	\$30.74		0.2	SM
21	E	515	Duct,Air Intake	13717521011	\$40.69		0.1	ME
22	EC		Flex Additive	Replace Economy	\$5.00*			SM*
23	N		Hazardous Waste	Additional Labor	\$4.00*			SM

23 Items

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13 INCLUDES 0.6 HOURS FIRST PANEL TWO-STAGE ALLOWANCE

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Estimate Total & Entries

Gross Parts		\$2,882.88
Other Parts		\$1,964.50
Paint & Materials	4.3 Hours @ \$36.00	\$154.80
Line Item Markup		\$20.00
Parts & Material Total		\$5,022.18
Tax on Parts & Material	@ 5.600%	\$281.24

Labor	Rate	Replace Hrs	Repair Hrs	Total Hrs	
Sheet Metal (SM)	\$56.00	4.9	0.4	5.3	\$296.80
Mech/Elec (ME)	\$139.00	0.1		0.1	\$13.90
Frame (FR)	\$56.00				
Refinish (RF)	\$56.00	4.3		4.3	\$240.80
Labor Total				9.7 Hours	\$551.50
Tax on Labor		@ 5.600%			\$30.88

Gross Total	\$5,885.80
Less: Deductible	\$500.00-
Net Total	\$5,385.80

Alternate Parts Y/02/02/00/00/00 CUM 02/02/00/00/00 Zip Code: 53072 Milwaukee CAPA
Recycled Parts NOT REQUESTED

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1.4 HRS WERE ADDED TO THIS ESTIMATE BASED ON AUDATEX'S TWO-STAGE REFINISH FORMULA.

AMERICAN FAMILY INSURANCE DOES NOT AUTHORIZE REPAIRS. AUTHORIZATION MUST COME FROM THE VEHICLE OWNER. ANY SUPPLEMENT(S) MUST HAVE PRIOR APPROVAL FROM A REPRESENTATIVE OF THIS COMPANY

THIS ESTIMATE HAS BEEN PREPARED BASED ON THE USE OF AFTERMARKET CRASH PARTS SUPPLIED BY A SOURCE OTHER THAN THE MANUFACTURER OF YOUR MOTOR VEHICLE. ANY WARRANTIES APPLICABLE TO THESE REPLACEMENT PARTS ARE PROVIDED BY THE MANUFACTURER OR DISTRIBUTOR OF THESE PARTS RATHER THAN THE MANUFACTURER OF YOUR VEHICLE.

Op Codes

* = User-Entered Value	E = Replace OEM	NG = Replace NAGS
EC = Replace Economy	OE = Replace PXN OE Srpls	UE = Replace OE Surplus
ET = Partial Replace Labor	EP = Replace PXN	EU = RECYCLED PART
TE = Partial Replace Price	PM = Replace PXN Reman/Rebtl	UM = Replace Reman/Rebuilt
L = Refinish	PC = Replace PXN Reconditioned	UC = Replace Reconditioned
TT = Two-Tone	SB = Sublet Repair	N = Additional Labor
BR = Blend Refinish	I = Repair	IT = Partial Repair
CG = Chipguard	RI = R & I Assembly	P = Check
AA = Appearance Allowance	RP = Related Prior Damage	



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Audatex Alternate Parts Locate Report

Vehicle

2006 BMW 530XI STD 4 DR Sedan
 6cyl Gasoline 3.0
 6-Speed Automatic

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Options

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4-Wheel Drive	AM/FM In-dash CD Changer	Air Conditioning
Alarm System	Aluminum/Alloy Wheels	Anti-Lock Brakes
Auto Trns W/Man Select Switch	Automatic Dimming Mirror	Center Console
Cruise Control	Digital Signal Processor	Driver Seat Memory
Dual Airbags	Dual Power Seats	Dual Pwr Lumbar Supports
Dual Zone Auto A/C	Emergency S.O.S. System	Fog Lights
Garage Door Opener	Head Airbags	Headlight Washers
Heated Frnt & Rear Seats	Heated Front Seats	Heated Power Mirrors
Heated Steering Wheel	Heated W/S Wiper Washers	High Intensity Headlamps
Intermittent Wipers	Keyless Entry System	Leather Seats
Leather Steering Wheel	Lighted Entry System	Navigation System
Power Brakes	Power Door Locks	Power Moonroof
Power Steering	Power Windows	Pwr Tilt/Tele. Str Wheel
Rain-Sensing W/S Wipers	Rear Window Defroster	Rem Trunk-L/Gate Release
Side Airbags	Stability Cntrl Suspens	Steering Linked Headlmps
Strg Wheel Radio Control	Tachometer	Theft Deterrent System
Tinted Glass	Tire Pressure Monitor	Traction Control System
Trip Computer	Wood Interior Trim	

Line	Part Description	Supplier Part Number	Substituted For OEM Part Number	Supplier Code	CLS	SRC
1	Cover,Front Bumper	BM1000154R	51117111739	2	R	1
8	Headlamp Assy,Xenon LT	1327.5	63127160157	> 1	R	3

> = ESTIMATE TOTAL IS BASED ON PRICE QUOTED BY THIS SUPPLIER

Key to Classification / Source Codes

CLS = Classification Code

C - CAPA CERTIFIED PART QUOTED BY LISTED SUPPLIER
 M - REMANUFACTURED / REBUILT PART
 R - RECONDITIONED PART
 S - OEM SURPLUS PART

SRC = Source Code

1 - NON ORIGINAL EQUIPMENT MANUFACTURER PART
 3 - ORIGINAL EQUIPMENT MANUFACTURER (OEM) PART

Detailed Distributor List

1	PXN6809	R P W HEADLAMPS RCND 1809 N 9TH ST PO BOX 125 INDIANOLA, IA 50125	(800)336-4028 (515)961-0517
2	APU7712811878245BM1000154R	KEYSTONE - MILWAUKEE 800-924-8230 9532 W CARMEN AVENUE MILWAUKEE WI 53225	Quote# 121463812774463, Stock# BM1000154R, Clifford

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AMERICAN FAMILY INSURANCE
 SCANNING CENTER
 6000 AMERICAN PARKWAY
 MADISON, WI 53783-0001
 1-800-MYAMFAM (1-800-692-6326)

Recycled Real Steel Locate Report

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Owner Name: ROBIN & PATRICI ANDERSON
 Claim #: 00445163549-0

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Vehicle

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2006 BMW 530XI STD 4 DR Sedan
 6cyl Gasoline 3.0
 6-Speed Automatic

Options

4-Wheel Drive	AM/FM In-dash CD Changer	Air Conditioning
Alarm System	Aluminum/Alloy Wheels	Anti-Lock Brakes
Auto Trns W/Man Select Switch	Automatic Dimming Mirror	Center Console
Cruise Control	Digital Signal Processor	Driver Seat Memory
Dual Airbags	Dual Power Seats	Dual Pwr Lumbar Supports
Dual Zone Auto A/C	Emergency S.O.S. System	Fog Lights
Garage Door Opener	Head Airbags	Headlight Washers
Heated Frnt & Rear Seats	Heated Front Seats	Heated Power Mirrors
Heated Steering Wheel	Heated W/S Wiper Washers	High Intensity Headlamps
Intermittent Wipers	Keyless Entry System	Leather Seats
Leather Steering Wheel	Lighted Entry System	Navigation System
Power Brakes	Power Door Locks	Power Moonroof
Power Steering	Power Windows	Pwr Tilt/Tele. Str Wheel
Rain-Sensing W/S Wipers	Rear Window Defroster	Rem Trunk-L/Gate Release
Side Airbags	Stability Cntrl Suspens	Steering Linked Headlmps
Strg Wheel Radio Control	Tachometer	Theft Deterrent System
Tinted Glass	Tire Pressure Monitor	Traction Control System
Trip Computer	Wood Interior Trim	

Line	Part Description	Year/Make / Notes	VIN?	Cleanup	Supplier ID	Stock #
6	Grille Assembly LT		Y		APU121461734801260	W0572
7	Grille Assembly RT		Y		APU121461734801260	W1073

> = ESTIMATE TOTAL IS BASED ON PRICE QUOTED BY THIS SUPPLIER. REPAIRERS MAY USE THE SUPPLIER OF THEIR CHOICE AND MAY NEGOTIATE SPECIFIC TERMS OF PURCHASE WITH THAT SUPPLIER.

Detailed Distributor List

APU121461734801260 PAM's Auto (QRP) 320-363-7336 Quote# 121463812774463, Stock# W0572, sales
 7505 Ridgewood Rd
 St Cloud MN 56303

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Zip Code: 53222 Search Area: Milwaukee

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APU Audit Availability Report

Claim Information

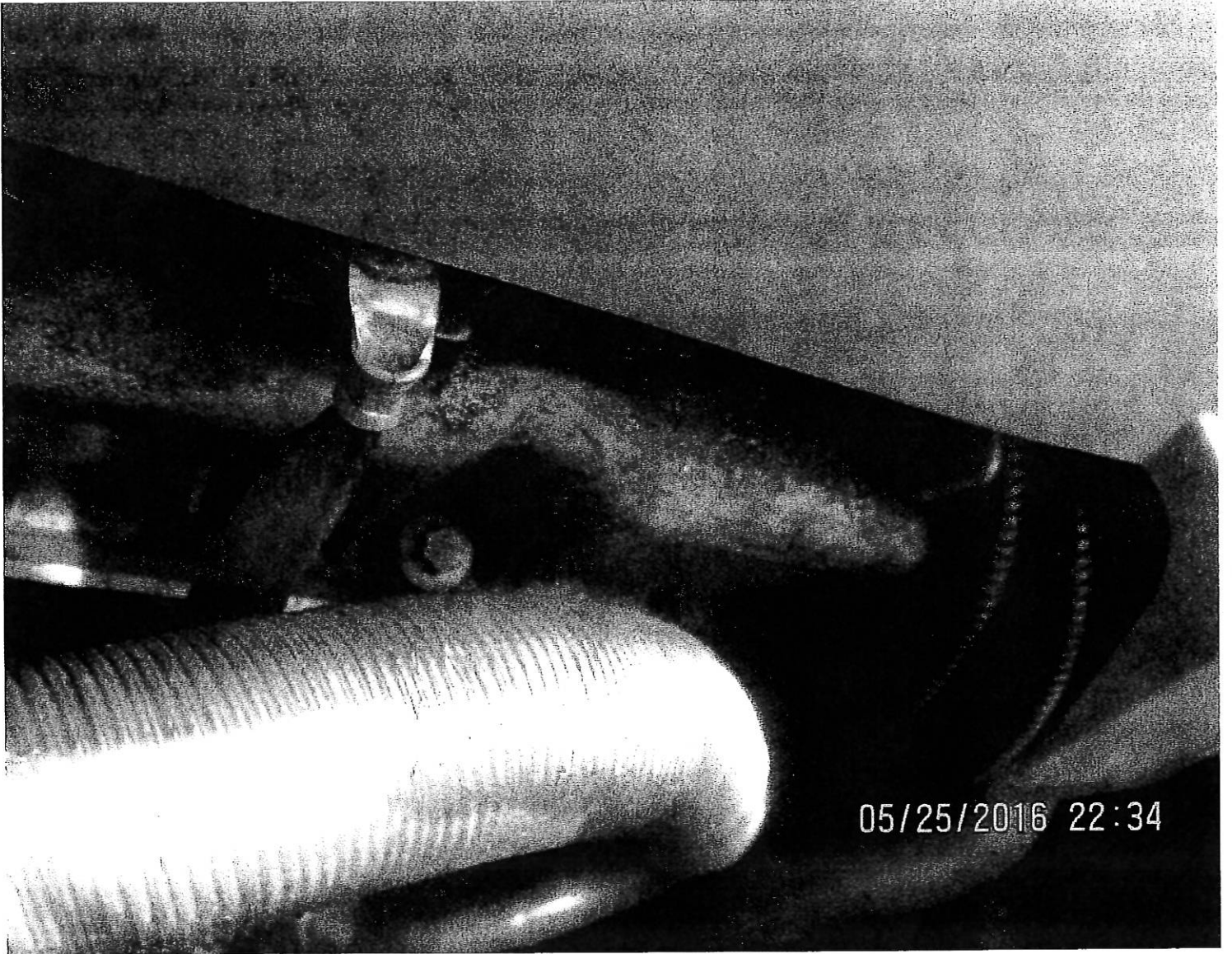
Claim #:00445163549-0	RO #:
Insurance Co:American Family	Adjuster Name:
Regional Office:	Local Office:
Auto Owner:ROBIN & PATRICI ANDERSON	Owner Status:insured
Date of Loss:05/08/2016 7:00 AM	Postal Code Searched:53209
Name:American Family (M. Clough)	APU Submit Date:05/27/2016 11:22 AM

Vehicle Information

Year/Make/Model: 2006 BMW 530xi	Body Type: Sedan	Body Style: 4 Door	Axle Type: AWD	Odometer: 138788
VIN: WBANF73586CG69130	Engine: L6, 3.0L	Fuel Type: Gas		

Parts Information

Part	Quotes Received	Price	Preliminary Estimate Price	Difference	Status
Bumper Cover, Front	1	\$528.00	\$660.37	\$132.37	Recommended
Bumper Filler Panel, Front , Driver	0	\$0.00			Not Used On Estimate
Bumper Filler Panel, Front , Passenger	0	\$0.00			Not Used On Estimate
Grille , Driver	13	\$60.00	\$99.24	\$39.24	Recommended
Grille , Passenger	10	\$60.00	\$99.24	\$39.24	Recommended
Bumper Assembly, Front	4	\$0.00			Not Used On Estimate
Headlamp Assembly , Driver	27	\$0.00			
Headlamp Assembly , Passenger	21	\$0.00			
Electronic Chassis Control Modules , Driver	2	\$0.00			
Headlamp Washer Motor , Driver	0	\$0.00			
Vents and Ducts , Driver	0	\$0.00			
Vents and Ducts , Passenger	0	\$0.00			
Vents and Ducts	0	\$0.00			
Headlamp Bulb , Driver	0	\$0.00			
Headlamp Bulb , Driver	0	\$0.00			
Headlamp Bulb , Driver	0	\$0.00			
Total:		\$648.00	Difference:	\$210.85	

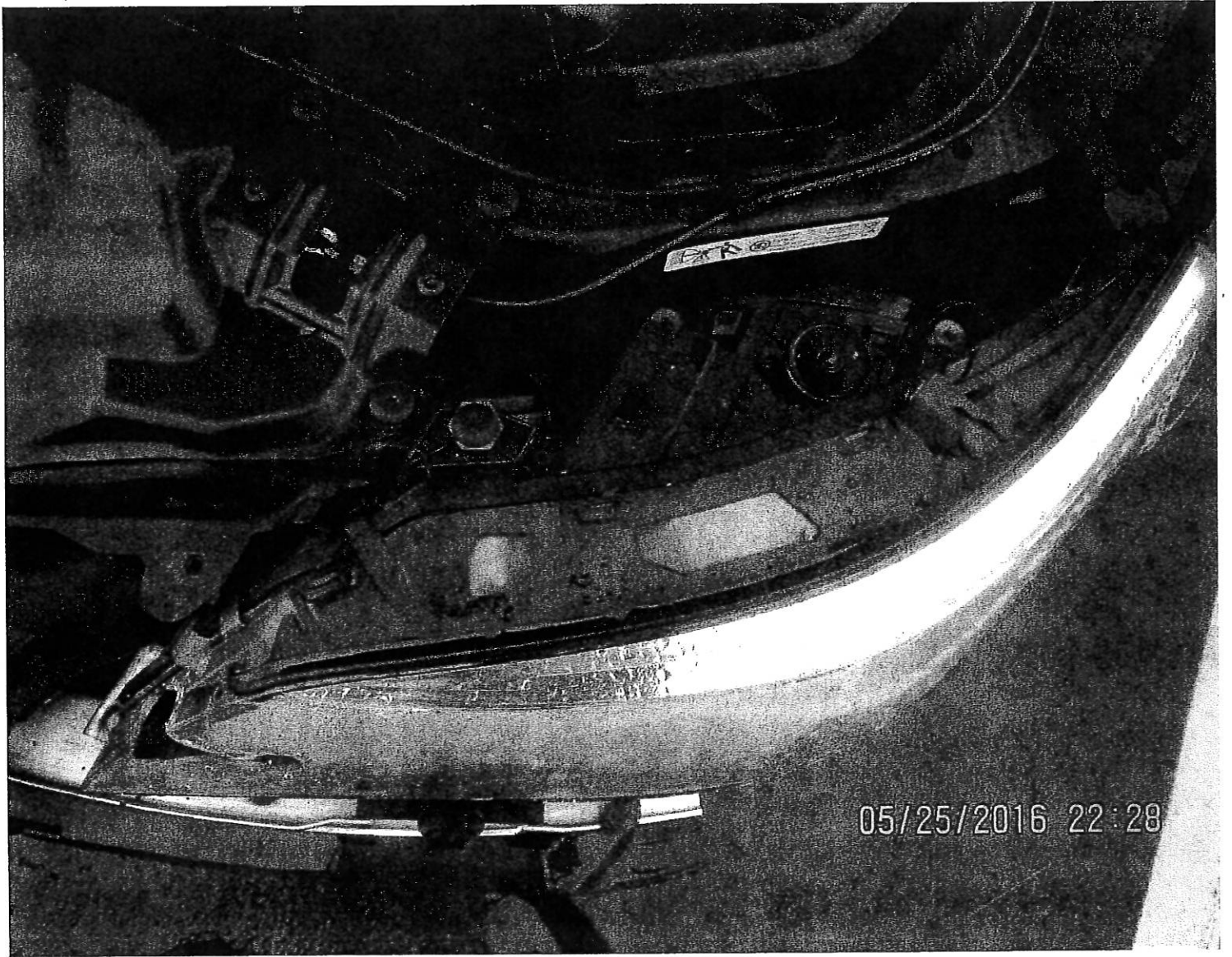


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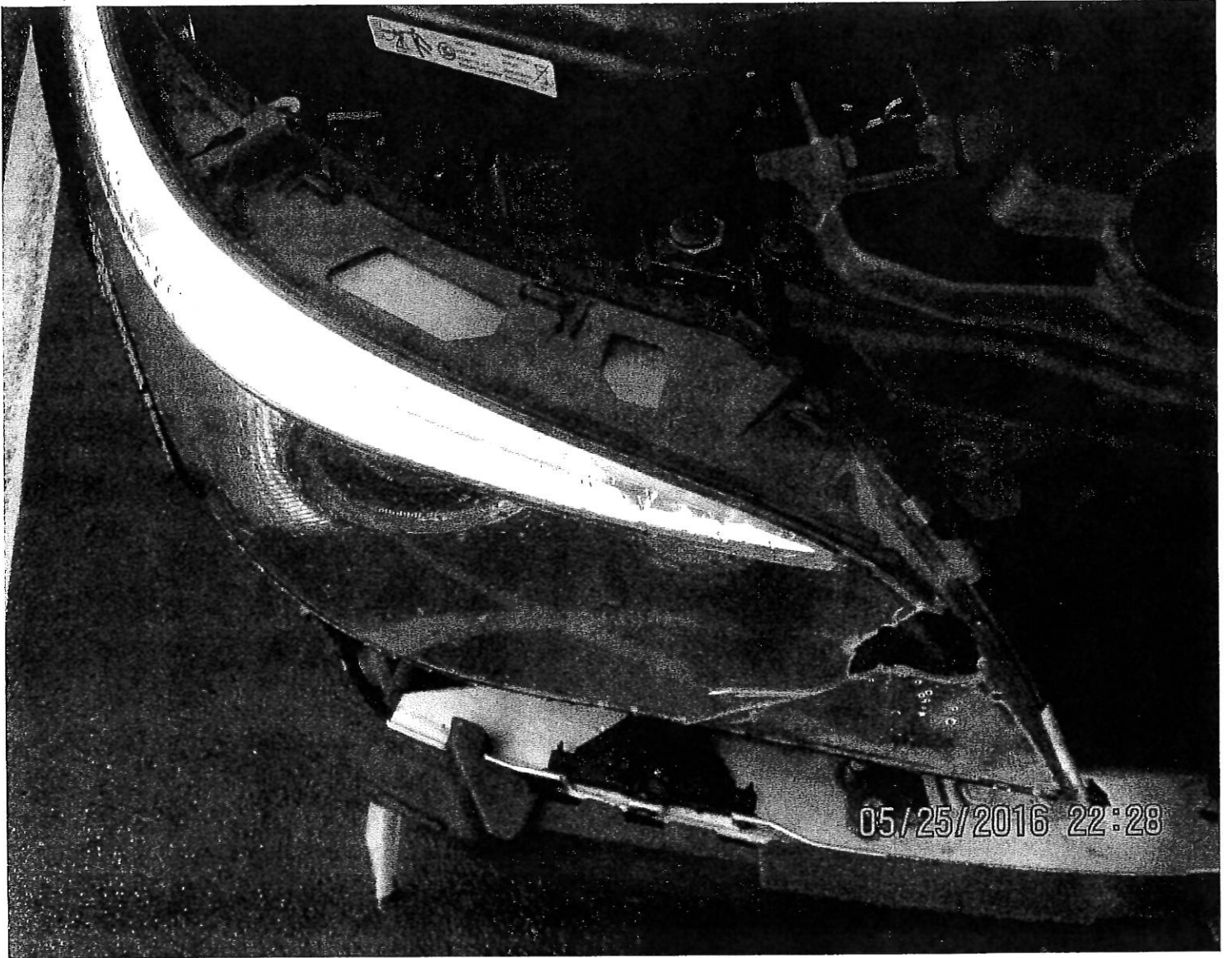
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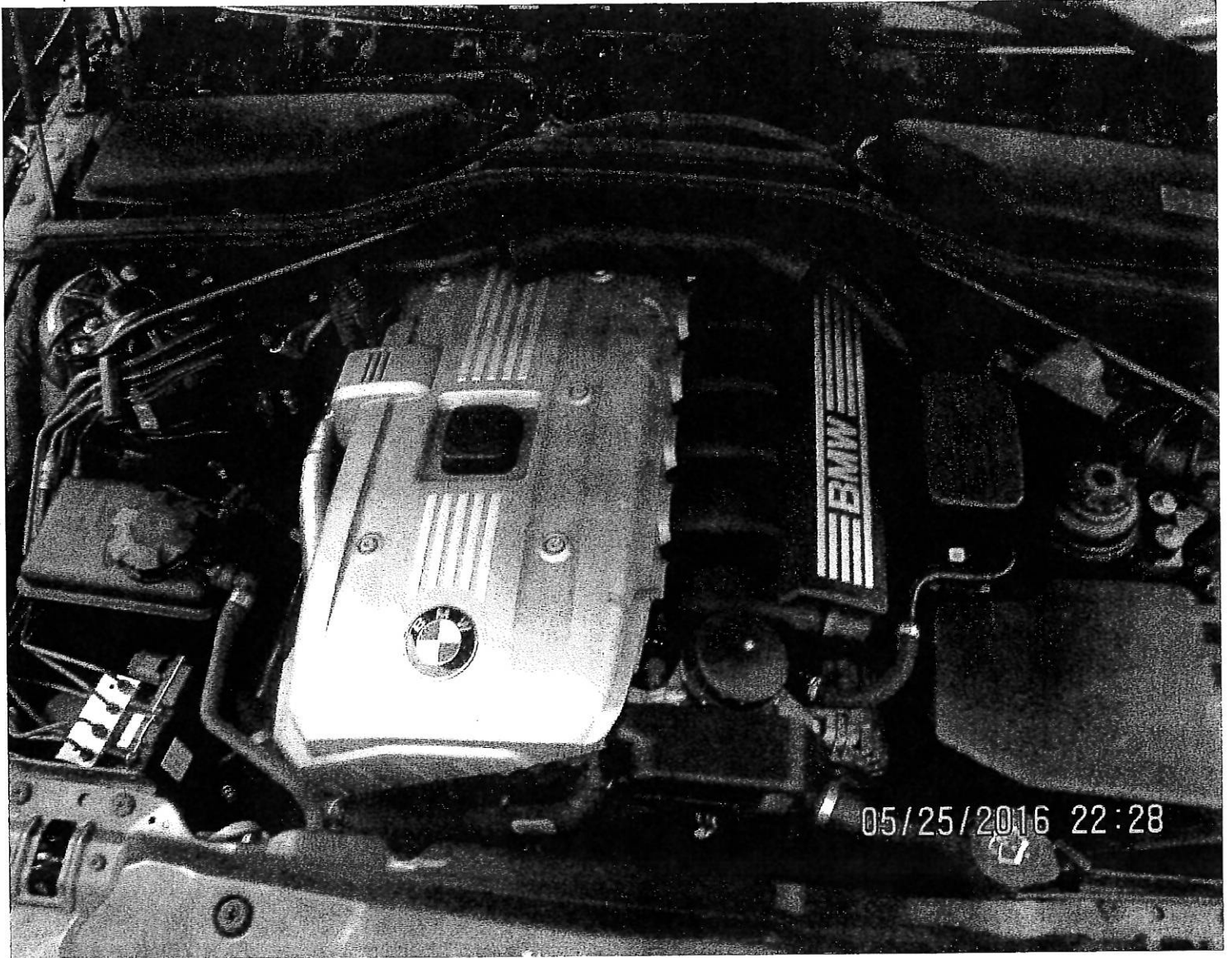
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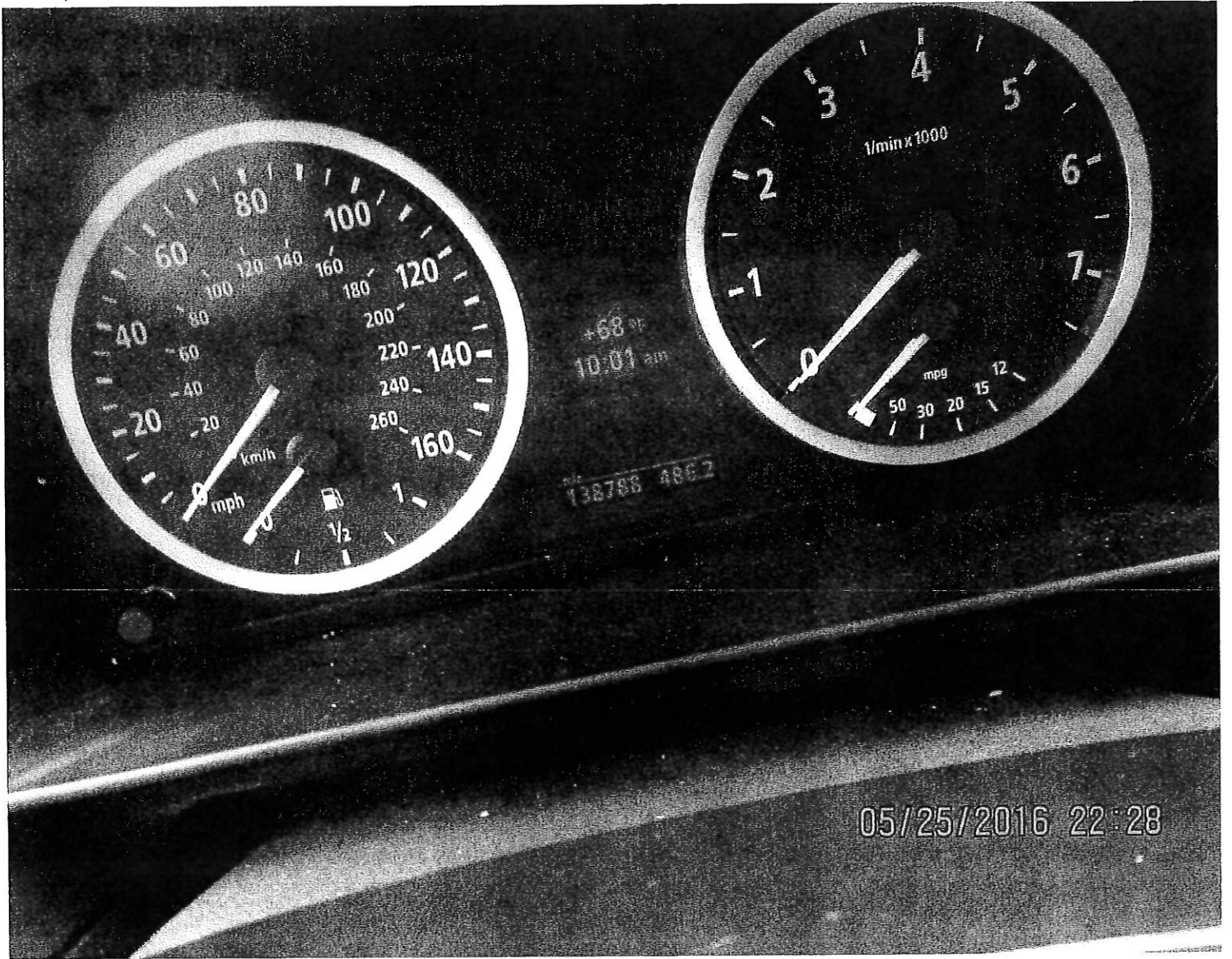


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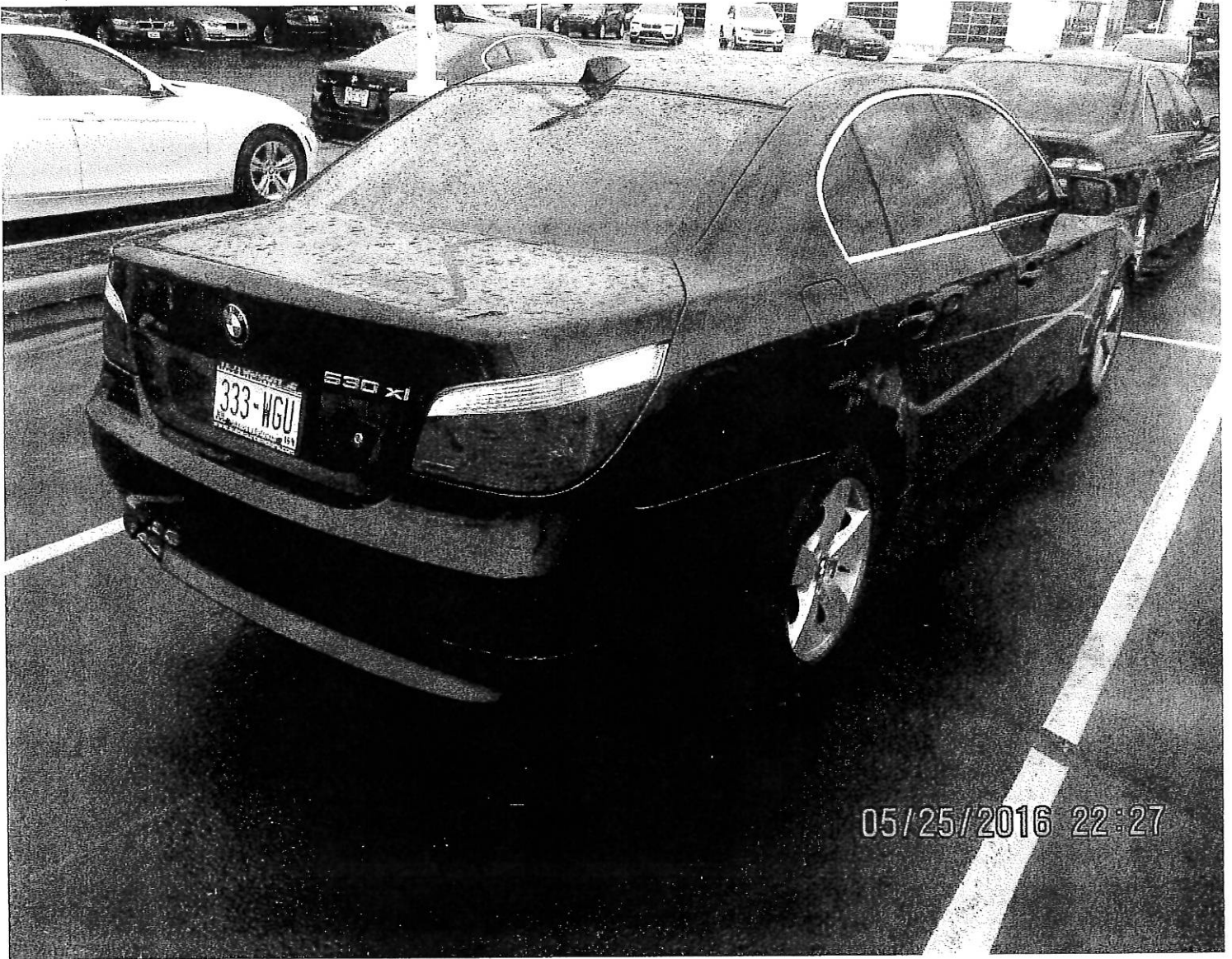


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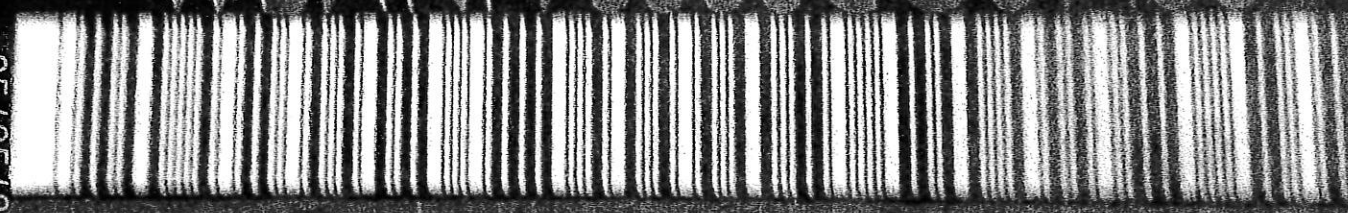


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STONIA VEHICLE TYPE: PASSENGER CAR
MFD BY BAYERISCHE MOTORENWERKE AG 10/05
GVWR 4000 LBS 2100 NO
GAWF FRONT 2000 LBS 1000 NO REAR 2000 LBS 1000 NO
THIS VEHICLE CONFORMS TO ALL APPLICABLE U.S.
FEDERAL MOTOR VEHICLE SAFETY, BUMPER AND THEFT
PREVENTION STANDARDS IN EFFECT ON THE DATE OF
MANUFACTURE SHOWN ABOVE
WEANE/3586CG69130



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