

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

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

Markeith Lewis
7256 W. Wabash Court
Milwaukee, WI 53223

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

FILE NUMBER: 171258

Regarding: Property Damage

Amount of Claim: \$3,626.59

Claim Disallowed on: January 17, 2018

Dated this 17th day of January, 2018



James R. Owczarski
City Clerk

Form: Disallow



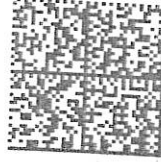
Office of the City Clerk
City Hall, Room 205
200 East Wells Street
Milwaukee, WI 53202

Handwritten signature



7012 3460 0000 0488 1028

U.S. POSTAGE PITNEY BOWES



ZIP 53005 \$ 006.56⁰
02 4W
0000351420 JAN 17 2018

JAN 19 2018

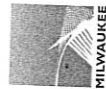
Markeith Lewis
7256 W. Wabash Court
Milwaukee, WI 53223

MIXIE 530 FE 1 0001/25/18

RETURN TO SENDER
ATTEMPTED - NOT KNOWN
UNABLE TO FORWARD

ANK BC: 53202357099 *1886-00513-18-45

5322332603568





SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Marketh Lewis
 7256 W. Wabash Court
 Milwaukee, WI 53223

171258



9590 9402 3170 7166 3108 89

7012 3460 0000 0488

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Insured Mail
 - Insured Mail Restricted Delivery
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

2. Article

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent

B. Received by (Printed Name)

Addressee

C. Date of Delivery

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

Domestic Return Receipt