



# City of Milwaukee

City Hall  
200 East Wells Street  
Milwaukee, WI 53202

## Meeting Agenda JUDICIARY & LEGISLATION COMMITTEE

*ALD. ASHANTI HAMILTON, CHAIR*  
*Ald. Terry Witkowski, Vice-Chair*  
*Ald. James Bohl, Jr., Ald. Joe Davis, Sr., and Ald. Robert Donovan*

*Staff Assistant, Linda Elmer, (414) 286-2232*  
*Fax: (414) 286-3456, E-mail: lelmer@milwaukee.gov*

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Monday, December 14, 2009

1:30 PM

Room 301-B, City Hall

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1. [090950](#) An ordinance relating to revision of various provisions of the code for purposes of correcting errors, clarifying language and eliminating obsolete provisions.  
**Attachments:** [Fiscal Note](#)  
[Hearing Notice List](#)
  
2. [091076](#) Resolution to cancel real estate taxes levied against certain parcels bearing various key numbers on the 2008 tax rolls, plus interest applicable to date of repayment, if appropriate.  
**Sponsors:** THE CHAIR  
**Attachments:** [Cover Letter](#)  
[Fiscal Note](#)  
[Table](#)  
[Assessment Reduction Letters](#)  
[Hearing Notice List](#)
  
3. [091077](#) Resolution to authorize a partial refund of 2008 real estate taxes levied against Milwaukee Turners, 1030-40 North 4th Street.  
**Sponsors:** THE CHAIR  
**Attachments:** [Fiscal Note](#)  
[Cover Letter](#)  
[Settlement Agreement](#)  
[Hearing Notice List](#)
  
4. [090956](#) Resolution cancelling City invoices.  
**Sponsors:** THE CHAIR  
**Attachments:** [Cover Letter](#)  
[Fiscal Note](#)  
[Invoices](#)  
[Hearing Notice List](#)

5. [091099](#) Resolution to settle claims for the defense of police officers.  
**Sponsors:** THE CHAIR  
*---This file includes payment of legal fees for the following police officers: Thomas Ruede, Richard Lopez, William Savagian, Nicole Reaves, Dwain Monteilh, Nick Povolo and Christopher Schlachter.*
6. [081060](#) Communication from the City Attorney relative to expenditures from the Outside Counsel/Expert Witness Fund Special Purpose Account.  
**Sponsors:** THE CHAIR  
**Attachments:** [October 20 Report](#)  
[September 9 Report](#)  
[September 1 Report Re Retention of Outside Counsel](#)  
[Sept 11 Report Re Retention of Outside Counsel](#)  
[June 23 Report](#)  
[May 15 Report](#)  
[April 1 Report](#)  
[Jan 29 Report](#)  
[Retention of Outside Counsel](#)  
[Hearing Notice List](#)
7. [090954](#) An ordinance relating to policies and procedures for vacation of in rem judgments.  
**Sponsors:** THE CHAIR  
**Attachments:** [City Attorney Letter](#)  
[Hearing Notice List](#)

**Items below will be heard no earlier than 1:45 P.M.:**

8. [090845](#) Resolution relating to an appeal from Angela Lopez for property damage. (8th Aldermanic District)  
**Sponsors:** THE CHAIR  
**Attachments:** [City Attorney Letter](#)  
[Appeal](#)  
[Additional Costs/Information Provided by Ms Lopez](#)  
[Statement as to why Ms Lopez Wasn't at Committee](#)  
[Hearing Notice List](#)  
  
*---\$606.80*
9. [090931](#) Resolution relating to the claim of Damion Kreger for property damage. (2nd Aldermanic District)  
**Sponsors:** THE CHAIR

**Attachments:** [City Attorney Letter.doc](#)  
[Claim](#)  
[Hearing Notice List](#)

---\$5,521.35

10. [091088](#) Resolution relating to an appeal from Celeste Baldwin for property damage. (7th Aldermanic District)

**Sponsors:** THE CHAIR

**Attachments:** [City Attorney Letter](#)  
[Appeal](#)  
[Hearing Notice List](#)

---\$1,456.22

11. [090981](#) Resolution relating to an appeal from Rosslind Prescott-Allen for property damage. (5th Aldermanic District)

**Sponsors:** THE CHAIR

**Attachments:** [City Attorney Letter](#)  
[Appeal](#)  
[Hearing Notice List](#)

---\$1,849.40

12. [090939](#) Resolution relating to the claim of Atty. Gregg Bridge on behalf of Devond Barnes for personal injuries. (5th Aldermanic District)

**Sponsors:** THE CHAIR

**Attachments:** [City Attorney Letter.doc](#)  
[Claim](#)  
[Hearing Notice List](#)

---\$50,000.00

13. [091063](#) Resolution relating to the claim of Atty. Jerome Konkell on behalf of Anita Ford for personal injuries. (4th Aldermanic District)

**Sponsors:** THE CHAIR

**Attachments:** [City Attorney Letter.doc](#)  
[Claim](#)  
[Hearing Notice List](#)

---\$50,000.00

14. [091087](#) Resolution relating to an appeal from Maria Vargas for personal injuries. (13th Aldermanic District)

**Sponsors:** THE CHAIR

**Attachments:** [City Attorney Letter](#)  
[Appeal](#)  
[Hearing Notice List](#)

---\$1,098.75

15. [091062](#) Resolution relating to the claim of Reginald Wheeler for property damage and personal injuries. (7th Aldermanic District)

**Sponsors:** THE CHAIR

**Attachments:** [City Attorney Letter.doc](#)

[Claim](#)

[Hearing Notice List](#)

---\$5,234.11

16. [090928](#) Resolution relating to the claim of Jeanette Apollo for property damage. (5th Aldermanic District)

**Sponsors:** THE CHAIR

**Attachments:** [City Attorney Letter.doc](#)

[Claim](#)

[Hearing Notice List](#)

---\$250,000.00

17. [090929](#) Resolution relating to the claim of E.B. and Minnie Garner for property damage. (4th Aldermanic District)

**Sponsors:** THE CHAIR

**Attachments:** [City Attorney Letter.doc](#)

[Claim](#)

[Hearing Notice List](#)

---\$8,300.00

18. [090930](#) Resolution relating to the claim of Edith Rowe for property damage. (10th Aldermanic District)

**Sponsors:** THE CHAIR

**Attachments:** [City Attorney Letter.doc](#)

[Claim](#)

[Hearing Notice List](#)

---\$8,926.86

19. [090940](#) Resolution relating to the claim of Linda Bergman for property damage. (5th Aldermanic District)

**Sponsors:** THE CHAIR

**Attachments:** [City Attorney Letter.doc](#)

[Claim](#)

[Hearing Notice List](#)

---\$6,498.00

20. [090941](#) Resolution relating to the claim of Faith Gregory for property damage. (15th Aldermanic District)



District)

**Sponsors:** THE CHAIR

**Attachments:** [City Attorney Letter.doc](#)

[Claim](#)

[Hearing Notice List](#)

---\$6,079.00

21. [090942](#) Resolution relating to the claim of Carolyn Bracken for property damage. (4th Aldermanic District)

**Sponsors:** THE CHAIR

**Attachments:** [City Attorney Letter.doc](#)

[Claim](#)

[Hearing Notice List](#)

---\$5,400.00

22. [090948](#) Resolution relating to an appeal from Rosemary Smith for property damage. (11th Aldermanic District)

**Sponsors:** THE CHAIR

**Attachments:** [City Attorney Letter](#)

[Appeal](#)

[Hearing Notice List](#)

---\$1,000.00

23. [091064](#) Resolution relating to the claim of Leondis and Darlene Fuller for property damage. (15th Aldermanic District)

**Sponsors:** THE CHAIR

**Attachments:** [City Attorney Letter.doc](#)

[Claim](#)

[Hearing Notice List](#)

---\$30,700.00

24. [090114](#) Resolution relating to an appeal from Ethel Massey-Tate for property damage. (15th Aldermanic District)

**Sponsors:** THE CHAIR

**Attachments:** [City Attorney Letter](#)

[Appeal](#)

[Hearing Notice List](#)

---May be placed on file

This meeting will be webcast live at [www.milwaukee.gov/channel25](http://www.milwaukee.gov/channel25).



## Legislation Details (With Text)

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**File #:** 090950      **Version:** 0  
**Type:** Ordinance      **Status:** In Committee  
**File created:** 11/3/2009      **In control:** JUDICIARY & LEGISLATION COMMITTEE  
**On agenda:**      **Final action:**  
**Effective date:**

**Title:** An ordinance relating to revision of various provisions of the code for purposes of correcting errors, clarifying language and eliminating obsolete provisions.

**Sponsors:** THE CHAIR

**Indexes:** REVISORS BILL

**Attachments:** Fiscal Note, Hearing Notice List

Date	Ver.	Action By	Action	Result	Tally
11/3/2009	0	COMMON COUNCIL	ASSIGNED TO		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		

..Number  
090950  
..Version  
SUBSTITUTE 1  
..Reference

..Sponsor  
THE CHAIR  
..Title

A substitute ordinance relating to revision of various provisions for purposes of correcting errors, clarifying language and eliminating obsolete provisions.

..Sections

79-4-1-am-1	am
200-26-5-e	am
320-27-1-0	rn
320-27-1-a	rp
320-27-1-6	rp

..Analysis

This ordinance revises various provisions of the code for purposes of revising errors, clarifying language and eliminating obsolete provisions.

..Body

The Mayor and Common Council of the City of Milwaukee do ordain as follows:

Part 1. Part 3 of File Number 090592, passed November 6, 2009, effective January 1, 2010, is amended to read:

**79-4. Waste Container Regulations.**

**1. PORTABLE CONTAINERS.**

am. Responsibility for Providing Portable Waste Containers.

am-1. Owners of single, 2-, 3-, or 4-family dwelling units shall be provided carts by the city. ~~[[Owners who request additional carts shall be charged a fee as provided in s. 81-17.3.]]~~

Part 2. Section 200-26-5-e of the code is amended to read:

**200-26. Application for Permits.**

**5. APPLICATION FOR CERTAIN DEMOLITION PERMITS.**

e. Structures which the staff of the historic preservation commission determines would not qualify for historic designation under s. 320-21-9 or s. 320-21-13. The historic preservation commission shall adopt rules and regulations governing such determinations by staff. In order to be considered for such an exception, the owner of the structure shall make application therefor, on a form provided by the ~~[department of city development]~~ >>city clerk<<, to the historic preservation commission staff and pay the fee specified in ch. 81. No structure shall be considered for exemption under this paragraph unless its date of construction was within 50 years preceding the date of application for exemption.

Part 3. Section 320-27-1-0 of the code is renumbered 320-27-1.

Part 4. Section 320-27-1-a and b of the code is repealed.

Part 5. Part 5 of File Number 090276, passed July 28, 2009, is amended to read:

Part 5. This ordinance takes effect [~~January 1, 2010~~] >>December 27, 2009<<.

Part 6. Part 18 of File Number 090592, passed November 6, 2009, effective January 1, 2010, is repealed.

..LRB  
APPROVED AS TO FORM

\_\_\_\_\_  
Legislative Reference Bureau

Date: \_\_\_\_\_

..Attorney

IT IS OUR OPINION THAT THE ORDINANCE  
IS LEGAL AND ENFORCEABLE

\_\_\_\_\_  
Office of the City Attorney

Date: \_\_\_\_\_

..Requestor

..Drafter

LRB

:

BJZ:lp

LRB09454-1

12/9/2009

# CITY OF MILWAUKEE FISCAL NOTE

A) DATE 11/13/09

FILE NUMBER: 090950

Original Fiscal Note  Substitute

SUBJECT: An ordinance relating to revision of various provisions of the code for purposes of correcting errors, clarifying language and eliminating obsolete provisions.

B) SUBMITTED BY (Name/title/dept./ext.): Linda Elmer – Staff Assistant/ Common Council-City Clerk 286-2232

C) CHECK ONE:  ADOPTION OF THIS FILE AUTHORIZES EXPENDITURES  
 ADOPTION OF THIS FILE DOES NOT AUTHORIZE EXPENDITURES; FURTHER COMMON COUNCIL ACTION NEEDED. LIST ANTICIPATED COSTS IN SECTION G BELOW.  
 NOT APPLICABLE/NO FISCAL IMPACT.

D) CHARGE TO:  DEPARTMENT ACCOUNT(DA)  CONTINGENT FUND (CF)  
 CAPITAL PROJECTS FUND (CPF)  SPECIAL PURPOSE ACCOUNTS (SPA)  
 PERM. IMPROVEMENT FUNDS (PIF)  GRANT & AID ACCOUNTS (G & AA)  
 OTHER (SPECIFY)

E) PURPOSE	SPECIFY TYPE/USE	ACCOUNT	EXPENDITURE	REVENUE	SAVINGS
SALARIES/WAGES:					
SUPPLIES:					
MATERIALS:					
NEW EQUIPMENT:					
EQUIPMENT REPAIR:					
OTHER:					
<b>TOTALS</b>					

F) FOR EXPENDITURES AND REVENUES WHICH WILL OCCUR ON AN **ANNUAL** BASIS OVER SEVERAL YEARS CHECK THE APPROPRIATE BOX BELOW AND THEN LIST EACH ITEM AND DOLLAR AMOUNT **SEPARATELY**.

<input type="checkbox"/> 1-3 YEARS	<input type="checkbox"/> 3-5 YEARS
<input type="checkbox"/> 1-3 YEARS	<input type="checkbox"/> 3-5 YEARS
<input type="checkbox"/> 1-3 YEARS	<input type="checkbox"/> 3-5 YEARS

G) LIST ANY ANTICIPATED FUTURE COSTS THIS PROJECT WILL REQUIRE FOR COMPLETION:

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H) COMPUTATIONS USED IN ARRIVING AT FISCAL ESTIMATE:

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PLEASE LIST ANY COMMENTS ON REVERSE SIDE AND CHECK HERE





## Legislation Details (With Text)

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**File #:** 091076      **Version:** 0  
**Type:** Resolution      **Status:** In Committee  
**File created:** 12/1/2009      **In control:** JUDICIARY & LEGISLATION COMMITTEE  
**On agenda:**      **Final action:**  
**Effective date:**

**Title:** Resolution to cancel real estate taxes levied against certain parcels bearing various key numbers on the 2008 tax rolls, plus interest applicable to date of repayment, if appropriate.

**Sponsors:** THE CHAIR

**Indexes:** TAX CANCELLATIONS

**Attachments:** Cover Letter, Fiscal Note, Table, Assessment Reduction Letters, Hearing Notice List

Date	Ver.	Action By	Action	Result	Tally
12/1/2009	0	COMMON COUNCIL	ASSIGNED TO		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		

Number  
091076  
Version  
ORIGINAL  
Reference

Sponsor  
THE CHAIR  
Title

Resolution to cancel real estate taxes levied against certain parcels bearing various key numbers on the 2008 tax rolls, plus interest applicable to date of repayment, if appropriate.

Analysis

This resolution requires the cancellation of taxes because of Board of Review reductions in assessments on certain parcels, the issuance of checks to the City Treasurer or taxpayer as applicable, and the proper reductions of State Tax Credits by journal entries.

Body

Whereas, Assessments were made against certain parcels of real estate for the year 2008 as contained in Common Council Resolution File No. 091076; and

Whereas, The Board of Review has decreased these assessments as shown in this file; now, therefore, be it

Resolved, By the Common Council of the City of Milwaukee, that the proper city officers are authorized and directed to issue city checks in the amounts as shown in this file, payable to the City Treasurer or taxpayer as applicable, to be refunded to the taxpayer where appropriate, plus interest at the rate applicable pursuant to Section 70.511 of Wisconsin Statutes, for an appeal that was filed as shown in this file, applicable from date of payment to date of repayment, said amounts to be charged to the Remission of Taxes Fund, 0001 Org 9990 Program 0001 Sub-class S163 Account 006300, and said checks to be delivered to the Customer Services Unit of the Treasurer's Office for disbursement; and, be it

Further Resolved, That the proper city officers are authorized and directed to reflect the reduction in State Tax Credits as shown in this file by means of journal entries, charging the Remission of Taxes Fund, 0001 Org 9990 Program 0001 Sub-class S163 Account 006300, and crediting the State Tax Credit Fund; and, be it

Further Resolved, That delinquent interest and penalties on any account covered by this resolution are hereby canceled.

Requestor  
Assessor's Office  
Drafter  
mpr/kat  
11/23/09



November 23, 2009

The Honorable, The Common Council  
City of Milwaukee

Dear Members of the Common Council:

Attached is a resolution to cancel real estate taxes levied against certain parcels bearing various key numbers on the 2008 tax rolls, plus interest applicable to date of repayment, if appropriate.

Reductions have been made in the assessments of these properties by the Board of Review under authority of Section 70.511 (2), Wisconsin Statutes. It is now necessary to accomplish the reduction of taxes by means of the attached resolution.

Your favorable approval of the attached resolution is respectfully requested.

Yours very truly,

Mary P. Reavey  
Assessment Commissioner

mpr/kat

# CITY OF MILWAUKEE FISCAL NOTE

CC-170 (REV. 6/86)

**A) DATE:** November 23, 2009

**FILE NUMBER:** \_\_\_\_\_

**Original Fiscal Note**  **Substitute**

**SUBJECT:** Resolution to cancel real estate taxes levied against certain parcels bearing various Key Numbers on the 2008 tax rolls, plus interest applicable to date of repayment, if appropriate

**B) SUBMITTED BY** (name/title/dept./ext.): Mary P. Reavey, Assessment Commissioner, Assessor's Office, Ext. 3101.

**C) CHECK ONE:**  ADOPTION OF THIS FILE AUTHORIZES EXPENDITURES.  
 ADOPTION OF THIS FILE DOES NOT AUTHORIZE EXPENDITURES; FURTHER COMMON COUNCIL ACTION NEEDED.  
 LIST ANTICIPATED COSTS IN SECTION G BELOW.  
 NOT APPLICABLE/NO FISCAL IMPACT.

**D) CHARGE TO:**  DEPARTMENTAL ACCOUNT (DA)  CONTINGENT FUND (CF)  
 CAPITAL PROJECTS FUND (CPF)  SPECIAL PURPOSE ACCOUNTS (SPA)  
 PERM. IMPROVEMENT FUNDS (PIF)  GRANT & AID ACCOUNTS (G & AA)  
 OTHER SPECIFY)

E) PURPOSE	SPECIFY TYPE/USE	ACCOUNT	EXPENDITURE	REVENUE	SAVINGS
<b>SALARIES/WAGES:</b>					
<b>SUPPLIES:</b>					
<b>MATERIALS:</b>					
<b>NEW EQUIPMENT:</b>					
<b>EQUIPMENT REPAIR:</b>					
<b>OTHER 0001 Org 9990</b>	<i>Remission of Taxes Fund</i>		<b>\$97,579.09</b>		
<i>Prog 0001 Sub-cl S163</i>					
<i>Acct 006300</i>					
<b>TOTALS:</b>			<b>\$97,579.09</b>		

**F) FOR EXPENDITURES AND REVENUES WHICH WILL OCCUR ON AN ANNUAL BASIS OVER SEVERAL YEARS CHECK THE APPROPRIATE BOX BELOW AND THEN LIST EACH ITEM AND DOLLAR AMOUNT SEPARATELY.**

<input type="checkbox"/> 1-3 YEARS	<input type="checkbox"/> 3-5 YEARS	
<input type="checkbox"/> 1-3 YEARS	<input type="checkbox"/> 3-5 YEARS	
<input type="checkbox"/> 1-3 YEARS	<input type="checkbox"/> 3-5 YEARS	

**G) LIST ANY ANTICIPATED FUTURE COSTS THIS PROJECT WILL REQUIRE FOR COMPLETION:**

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**H) LIST ANY ANTICIPATED FUTURE COSTS THIS PROJECT WILL REQUIRE FOR COMPLETION:**

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PLEASE LIST ANY COMMENTS ON REVERSE SIDE AND CHECK HERE

Key Number and Address Date of Objection	Name of Taxpayer	Assesment Reduction by B.O.R.	Canceled NET Total Tax	STATE TAX CREDITS SECTION 79.10 (2)		
				City Portion	County Portion	Total Credit
2008 242-9999-100-4 328 adj W. Capitol Dr. December 10, 2008	Glendale Redevelopment LLC	\$ 17,400	\$ 418.16	\$ 21.23	\$ 6.14	\$ 27.37
243-9992-000-7 4129 adj N. Pt. Washington AV December 10, 2008	Glendale Redevelopment LLC	\$ 251,200	\$ 6,036.88	\$ 306.45	\$ 88.68	\$ 395.13
273-9996-000-8 3521 R N. Richards St. December 10, 2008	Glendale Redevelopment LLC	\$ 438,300	\$ 10,533.28	\$ 534.71	\$ 154.73	\$ 689.44
356-0282-000-7 2216-30 N. Farwell Av. May 14, 2008	New Land Investments No 7 LLC	\$ 1,204,000	\$ 28,934.89	\$ 1,468.83	\$ 425.05	\$ 1,893.88
361-0603-116-3 333 W. Kilbourn Av. May 19, 2008	Noble I Milwaukee LLC	\$ 1,900,000	\$ 45,661.37	\$ 2,317.92	\$ 670.77	\$ 2,988.69
		<b>\$ 3,810,900</b>	<b>\$ 91,584.58</b>	<b>\$ 4,649.14</b>	<b>\$ 1,345.37</b>	<b>\$ 5,994.51</b>
<b>TOTAL GROSS</b>	<b>\$ 97,579.09</b>					

Assessor's Office  
November 23, 2009  
mpr/kat

TO THE HONORABLE, THE COMMON COUNCIL

City of Milwaukee

Dear Members of the Common Council:

In re: **242-9999-100-4**  
**328 adj W. Capitol Dr.**  
**Glendale Redevelopment LLC**

**Year: 2008**

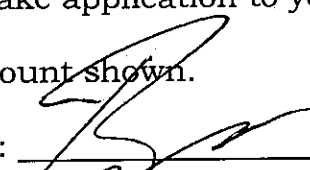
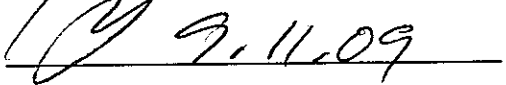
**Amount of Assessment Reduction: \$17,400**

**Amount of Tax Reduction: \$418.16**

As the result of action by the Board of Review, the assessment of my property was reduced as indicated above. Under Section 70.511 (2)(b) of the Wisconsin Statutes, I hereby make application to your Honorable Body for a tax refund/reduction in the amount shown.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

---

Federal laws require that Form 1099 be filed by the City Comptroller's Office at the year-end for payment of earned interest. The Tax Equity and Fiscal Responsibility Act of 1982 has increased the penalties for non-compliance.

Therefore, on the enclosed Form W-9, we request that you furnish us with the **Social Security Number** and the **signature** of the person listed first on the name line **OR** the **Employer I.D. Number** of the business and the appropriate person's **signature**.

RECEIVED

2009 SEP 15 AM 11:31

ASSESSOR'S OFFICE  
CITY OF MILWAUKEE

RECEIVED

TO THE HONORABLE, THE COMMON COUNCIL

2009 SEP 15 AM 11:31

City of Milwaukee

ASSESSOR'S OFFICE  
CITY OF MILWAUKEE

Dear Members of the Common Council:

In re: **243-9992-000-7**  
**4129 adj N. Port Washington Av.**  
**Glendale Redevelopment LLC**

**Year: 2008**

**Amount of Assessment Reduction: \$251,200**

**Amount of Tax Reduction: \$6,036.88**

As the result of action by the Board of Review, the assessment of my property was reduced as indicated above. Under Section 70.511 (2)(b) of the Wisconsin Statutes, I hereby make application to your Honorable Body for a tax refund/reduction in the amount shown.

Signed: \_\_\_\_\_

Date: 9.11.09

---

Federal laws require that Form 1099 be filed by the City Comptroller's Office at the year-end for payment of earned interest. The Tax Equity and Fiscal Responsibility Act of 1982 has increased the penalties for non-compliance.

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TO THE HONORABLE, THE COMMON COUNCIL

City of Milwaukee

RECEIVED

2009 SEP 15 AM 11:31

ASSESSOR'S OFFICE  
CITY OF MILWAUKEE

Dear Members of the Common Council:

In re: **273-9996-000-8**  
**3521 R N. Richards St.**  
**Glendale Redevelopment LLC**

**Year: 2008**

**Amount of Assessment Reduction: \$438,300**

**Amount of Tax Reduction: \$10,533.28**

As the result of action by the Board of Review, the assessment of my property was reduced as indicated above. Under Section 70.511 (2)(b) of the Wisconsin Statutes, I hereby make application to your Honorable Body for a tax refund/reduction in the amount shown.

Signed: \_\_\_\_\_

Date: 9.11.09

---

Federal laws require that Form 1099 be filed by the City Comptroller's Office at the year-end for payment of earned interest. The Tax Equity and Fiscal Responsibility Act of 1982 has increased the penalties for non-compliance.

Therefore, on the enclosed Form W-9, we request that you furnish us with the **Social Security Number** and the **signature** of the person listed first on the name line **OR** the **Employer I.D. Number** of the business and the appropriate person's **signature**.

TO THE HONORABLE, THE COMMON COUNCIL

City of Milwaukee

Dear Members of the Common Council:

In re: **356-0282-000-7**  
**2216-30 N. Farwell Av.**  
**New Land Investments No 7 LLC**

**Year: 2008**

**Amount of Assessment Reduction: \$1,204,000**

**Amount of Tax Reduction: \$28,934.89**

As the result of action by the Board of Review, the assessment of my property was reduced as indicated above. Under Section 70.511 (2)(b) of the Wisconsin Statutes, I hereby make application to your Honorable Body for a tax refund/reduction in the amount shown.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

7/16/09

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Federal laws require that Form 1099 be filed by the City Comptroller's Office at the year-end for payment of earned interest. The Tax Equity and Fiscal Responsibility Act of 1982 has increased the penalties for non-compliance.

Therefore, on the enclosed Form W-9, we request that you furnish us with the **Social Security Number** and the **signature** of the person listed first on the name line **OR** the **Employer I.D. Number** of the business and the appropriate person's **signature**.

RECEIVED  
2009 JUL 17 PM 1:30  
ASSESSOR'S OFFICE  
CITY OF MILWAUKEE









## Legislation Details (With Text)

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**File #:** 091077      **Version:** 0  
**Type:** Resolution      **Status:** In Committee  
**File created:** 12/1/2009      **In control:** JUDICIARY & LEGISLATION COMMITTEE  
**On agenda:**      **Final action:**  
**Effective date:**

**Title:** Resolution to authorize a partial refund of 2008 real estate taxes levied against Milwaukee Turners, 1030-40 North 4th Street.

**Sponsors:** THE CHAIR

**Indexes:** TAX CANCELLATIONS

**Attachments:** Fiscal Note, Cover Letter, Settlement Agreement, Hearing Notice List

Date	Ver.	Action By	Action	Result	Tally
12/1/2009	0	COMMON COUNCIL	ASSIGNED TO		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		

Number  
091077  
Version  
ORIGINAL  
Reference

Sponsor  
THE CHAIR  
Title

Resolution to authorize a partial refund of 2008 real estate taxes levied against Milwaukee Turners, 1030-40 North 4<sup>th</sup> Street.

Analysis  
This resolution authorizes payment of \$3,833.10 plus interest on the tax refund at the rate of 9.6% from January 31, 2009 through the date of payment of the refund Milwaukee, Wisconsin, tax key number 316-0520-000-X according to the settlement agreement of a Section 74.35 lawsuit, Case No. 09-CV-010728.

Body  
Whereas, Milwaukee Turners, Inc. has filed a Wis. State Statute 74.35 lawsuit against the City of Milwaukee for allegedly excessive assessment of its property; and

Whereas, The City Assessor's Office has received the appropriate information to determine the eligibility for exemption for 2008 and 2009 for a portion of the property; and

Whereas, The parties have entered into a settlement agreement to settle the above referenced lawsuit for the amount of \$3,833.10, plus interest on the tax refund at the rate of 9.6% from January 31, 2009 through the date of payment of the refund, said payment to be made by January 31, 2010; now, therefore, be it

Resolved, By the Common Council of the City of Milwaukee, That the proper city officers are authorized and directed to issue a City check in the amount of \$3,833.10, plus interest at the rate agreed, said amounts to be charged to the Remission of Taxes Fund, 0001 Org 9990 Program 0001 Sub-class S163 Account 006300; and, be it

Further Resolved, That for and in consideration of the above-referenced payment, plaintiff and its attorney will provide to the City a release of any and all claims relating to this assessment and a stipulation and order for dismissal of the pending court actions.

Requestor  
Assessor's Office  
Drafter  
mpr/kat  
11/20/09

# CITY OF MILWAUKEE FISCAL NOTE

CC-170 (REV. 6/86)

**A) DATE:** November 20, 2009

**FILE NUMBER:** \_\_\_\_\_  
**Original Fiscal Note**  **Substitute**

**SUBJECT:** Resolution to authorize partial refund of 2008 R.E. taxes levied against tax key number 316-0520-000-X on the 2008 tax rolls, plus interest applicable to date of repayment, if appropriate.

**B) SUBMITTED BY** (name/title/dept./ext.): Mary P. Reavey, Assessment Commissioner, Assessor's Office, Ext. 3101.

**C) CHECK ONE:**  ADOPTION OF THIS FILE AUTHORIZES EXPENDITURES.  
 ADOPTION OF THIS FILE DOES NOT AUTHORIZE EXPENDITURES; FURTHER COMMON COUNCIL ACTION NEEDED.  
 LIST ANTICIPATED COSTS IN SECTION G BELOW.  
 NOT APPLICABLE/NO FISCAL IMPACT.

**D) CHARGE TO:**  DEPARTMENTAL ACCOUNT (DA)  CONTINGENT FUND (CF)  
 CAPITAL PROJECTS FUND (CPF)  SPECIAL PURPOSE ACCOUNTS (SPA)  
 PERM. IMPROVEMENT FUNDS (PIF)  GRANT & AID ACCOUNTS (G & AA)  
 OTHER SPECIFY)

E) PURPOSE	SPECIFY TYPE/USE	ACCOUNT	EXPENDITURE	REVENUE	SAVINGS
<b>SALARIES/WAGES:</b>					
<b>SUPPLIES:</b>					
<b>MATERIALS:</b>					
<b>NEW EQUIPMENT:</b>					
<b>EQUIPMENT REPAIR:</b>					
<b>OTHER 0001 Org 9990</b>	<i>Remission of Taxes Fund</i>		<b>\$3,833.10</b>		
<i>Prog 0001 Sub-cl S163</i>					
<i>Acct 006300</i>					
<b>TOTALS:</b>			<b>\$3,833.10</b>		

**F) FOR EXPENDITURES AND REVENUES WHICH WILL OCCUR ON AN ANNUAL BASIS OVER SEVERAL YEARS CHECK THE APPROPRIATE BOX BELOW AND THEN LIST EACH ITEM AND DOLLAR AMOUNT SEPARATELY.**

<input type="checkbox"/> 1-3 YEARS	<input type="checkbox"/> 3-5 YEARS
<input type="checkbox"/> 1-3 YEARS	<input type="checkbox"/> 3-5 YEARS
<input type="checkbox"/> 1-3 YEARS	<input type="checkbox"/> 3-5 YEARS

**G) LIST ANY ANTICIPATED FUTURE COSTS THIS PROJECT WILL REQUIRE FOR COMPLETION:**

---



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**H) LIST ANY ANTICIPATED FUTURE COSTS THIS PROJECT WILL REQUIRE FOR COMPLETION:**

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PLEASE LIST ANY COMMENTS ON REVERSE SIDE AND CHECK HERE

November 20, 2009

The Honorable, The Common Council  
City of Milwaukee

Dear Members of the Common Council:

Attached is a resolution to refund taxes paid by Milwaukee Turners, Inc. 1030-40 North 4<sup>th</sup> Street, bearing tax key number 316-0520-000-X on the 2008 tax roll, plus interest applicable to date of repayment.

A reduction has been made in the real estate assessment of this property settlement of a Wisconsin State Statute 74.35 lawsuit. It is now necessary to accomplish the reduction of taxes by means of the attached resolution.

Your favorable approval of the attached resolution is respectfully requested.

Yours very truly,

Mary P. Reavey  
Assessment Commissioner

pcw/kat

STATE OF WISCONSIN      CIRCUIT COURT      MILWAUKEE COUNTY  
CIVIL DIVISION, BRANCH 8

---

MILWAUKEE TURNERS, INC.,

Plaintiff,

v.

Case No. 09-CV-010728

Unclassified - 30703

CITY OF MILWAUKEE,

Defendant.

---

**SETTLEMENT AGREEMENT**

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Plaintiff Milwaukee Turners, Inc. ("Turners") and Defendant City of Milwaukee ("City") desire to resolve this case expeditiously and economically. Each party believes that the terms of this settlement agreement represent a reasonable and appropriate resolution of the claims in dispute.

WHEREFORE, the parties stipulate and agree to the following terms and conditions:

1. As related to the claim for refund of 2008 taxes paid on the property located at 1030-1040 North 4th Street, Milwaukee, Wisconsin, tax key number 361-0520-000 (the "Property") which is the subject of this case (the "2008 Refund Claim"), the City agrees to pay a refund of tax and interest to Turners equal to 50% of the 2008 tax in the amount of \$3,833.10, plus interest on the tax refund at the rate of 9.6% from January 31, 2009 through the date of payment of the refund.

The City further agrees to remit the payment of the refund to Turners by January 31, 2010.

2. The City Assessor's Office has determined that for the year 2009 the portion of the Property that is the subject of this case (known as the "Turner Ballroom Theater") qualifies for property tax exemption for the year 2009. The City agrees to adjust the assessed value of the Property for 2009 to recognize the exemption of Turner Ballroom Theater by decreasing the assessed value of the property from \$1,228,000 to \$909,000.

3. The City agrees to continue to recognize the property tax exemption of the Turner Ballroom Theater for 2010 and subsequent years unless there is a change in Wisconsin law related to Wis. Stat. § 70.11(29m) or a change in the ownership or use of the Turner Ballroom Theater.

4. The parties agree to enter into a stipulation dismissing this case with prejudice.

5. In the event that the City does not timely pay the refund as provided in paragraph 1 above or does not adjust the 2009 assessed value of the Property in accordance with paragraph 2 above, this Settlement Agreement and the Stipulation for Dismissal of the case will be null and void. Further, in such event, the City agrees that it will join with Turners in a petition to the court to reopen the case.

6. No attorneys' fees, costs, or any monies other than the refund and interest described in paragraph 1 will be paid by the City.

7. The terms of this Settlement Agreement are valid only for Turners and, due to the unique circumstances of this case, this settlement creates no precedent enforceable against the City in any other matter.

8. This Settlement Agreement is a full, final and complete compromise in settlement of claims, actual, doubtful or disputed, as to questions of liability, damage and remedy for the tax and years at issue in this case.

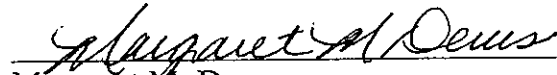
Agreed to by the parties, as of the last date signed below.

This 22<sup>nd</sup> day of October, 2009.

FOR PLAINTIFF:

Reinhart Boerner Van Deuren s.c.  
1000 North Water Street, Suite 1700  
Milwaukee, WI 53202  
Telephone: 414-298-1000  
Facsimile: 414-298-8097

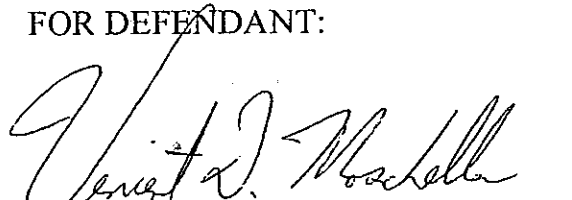
Mailing Address:  
P.O. Box 2965  
Milwaukee, WI 53201-2965

  
Margaret M. Derus  
WI State Bar ID No. 1009511  
mderus@reinhartlaw.com  
Attorney for Plaintiff Milwaukee  
Turners, Inc.

This 22<sup>nd</sup> day of October, 2009.

FOR DEFENDANT:

City of Milwaukee  
800 City Hall  
200 East Wells Street  
Milwaukee, WI 53202  
Telephone: 414-286-2601  
Facsimile: 414-286-8550

  
Vincent D. Moschella  
WI State Bar ID No. 1016845  
vmosch@milwaukee.gov  
Attorney for Defendant City of  
Milwaukee







## Legislation Details (With Text)

---

**File #:** 090956      **Version:** 0  
**Type:** Resolution      **Status:** In Committee  
**File created:** 12/1/2009      **In control:** JUDICIARY & LEGISLATION COMMITTEE  
**On agenda:**      **Final action:**  
**Effective date:**  
**Title:** Resolution cancelling City invoices.  
**Sponsors:** THE CHAIR  
**Indexes:** TAX CANCELLATIONS  
**Attachments:** Cover Letter, Fiscal Note, Invoices, Hearing Notice List

Date	Ver.	Action By	Action	Result	Tally
12/1/2009	0	COMMON COUNCIL	ASSIGNED TO		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		

Number:  
090956

Version:  
ORIGINAL

Reference:

Sponsor:  
THE CHAIR

Title:  
Resolution cancelling City invoices.

Analysis:  
Resolution cancelling City invoices.

Body:  
Whereas, The City of Milwaukee has referred the following invoices to the Kohn Law Firm for collection; and

Whereas, The Kohn Law Firm has obtained judgment against the following individuals and/or entities; and

Whereas, Judgment shall remain of record; and

Whereas, Cancellation and/or adjusting the following invoices will ensure proper accounting within the Department of Public Works, now, therefore, be it

Resolved, By the Common Council of the City of Milwaukee that the following claims are cancelled or adjusted and that any judgments taken shall remain and of record.

Invoice to be Cancelled or Adjusted with Judgment to Remain of Record:

Department	Invoice No.	Amount of Judg.	Defendant
DPW-Administration	5140000407	\$7,508.26	Nikki White
DPW-Administration	5140000660	\$7,751.90	Tiffany I. Palmore
DPW-Administration	91348	\$11,613.58	Deandrae L. Richmond
DPW-Administration	94189	\$7,022.09	Natalya Jewitt
DPW-Administration	5140000668	\$7342.52	Arcelia Espino

Requestor:

Drafter:

City Atty.

MTC:  
151461

**GRANT F. LANGLEY**  
City Attorney

**RUDOLPH M. KONRAD**  
**LINDA ULISS BURKE**  
**VINCENT D. MOSCHELLA**  
Deputy City Attorneys



**THOMAS O. GARTNER**  
**BRUCE D. SCHRIMPF**  
**SUSAN D. BICKERT**  
**STUART S. MUKAMAL**  
**THOMAS J. BEAMISH**  
**MAURITA F. HOUREN**  
**JOHN J. HEINEN**  
**DAVID J. STANOSZ**  
**SUSAN E. LAPPEN**  
**JAN A. SMOKOWICZ**  
**PATRICIA A. FRICKER**  
**HEIDI WICK SPOERL**  
**KURT A. BEHLING**  
**GREGG C. HAGOPIAN**  
**ELLEN H. TANGEN**  
**MELANIE R. SWANK**  
**JAY A. UNORA**  
**DONALD L. SCHRIEFER**  
**EDWARD M. EHRlich**  
**LEONARD A. TOKUS**  
**MIRIAM R. HORWITZ**  
**MARYNELL REGAN**  
**G. O'SULLIVAN-CROWLEY**  
**KATHRYN Z. BLOCK**  
**MEGAN T. CRUMP**  
**ELOISA DE LEÓN**  
**ADAM B. STEPHENS**  
**KEVIN P. SULLIVAN**  
**BETH CONRADSON CLEARY**  
**THOMAS D. MILLER**  
**HEIDI E. GALVÁN**  
**JARELY M. RUIZ**  
**ROBIN A. PEDERSON**  
Assistant City Attorneys

November 12, 2009

To the Honorable Common Council of the  
City of Milwaukee  
Room 205 - City Hall

Re: Cancellation of invoices

Dear Council Members:

Attached is a resolution cancelling invoices. The Department of Public Works has requested that the following claims by the City be cancelled or adjusted. Any judgments taken by the Kohn Law Firm shall remain of record.

In relation to invoice no. 5140000407 due from Nikki White, per Kohn, judgment was taken on 05/18/09 and is to remain on record.

In relation to invoice no. 5140000660 due from Tiffany I Palmore, per Kohn, judgment was taken on 06/16/09 and is to remain on record.

In relation to invoice no. 91348 due from Deandre L. Richmond, per Kohn, judgment was taken on 09/23/09 and is to remain on record.

In relation to invoice no. 94189 due from Natalya Jewitt, per Kohn, Chapter 7 bankruptcy was filed and there are no assets available.

In relation to invoice no. 5140000668 due from Arcelia Espino per Kohn, they are unable to confirm the debtor's address and/or executable income or assets.

Thank you for your attention to this matter.

Very Truly Yours,

GRANT F. LANGLEY  
City Attorney

MEGAN T. CRUMP  
Assistant City Attorney

Cc: Mr. Ronald D. Leonhardt, Milwaukee City Clerk

MTC:

Enclosures



Resolution Required

Form CBP 177 (Rev. 3/01)

CITY OF MILWAUKEE

CANCELLATION OR ADJUSTMENT OF CITY CLAIM OR ACCOUNT

To: City Attorney

From: DPW-ADMINISTRATION Department Date MAY 28 20 09

I recommend that the following claim or account be adjusted or cancelled as indicated.

Claim or Account No 5140000407 06-06-08

Department: DPW-ADMINISTRATION

Due From:  
Name: NIKKI WHITE

Amount of claim or Account as billed.....	\$ <u>7508.26</u>
Recommended Adjustment .....	\$ <u>7508.26</u>
Adjusted Balance .....	\$ <u>0.00</u>

Basis for recommendation of cancellation or adjustment:

**PER KOHN, JUDGMENT ENTERED ON 05-18-09, JUDGMENT TO REMAIN OF RECORD.**

Submitted by Jean Rossetti  
DPW-ADMINISTRATION Department

Adjustment or cancellation approved  
by Megan Crump  
City Attorneys Office  
Date: 11-12 20 09

C.A. File No. \_\_\_\_\_

In accordance with section 2-20.1(1) of the Milwaukee Code, I certify to the City Comptroller the uncollectibility of the above claim or account as indicated.

by Christina Schroeder  
Dept of Public Works Department Head  
Date: June 12 20 09

In accordance with section 2-20.1(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 \_\_\_\_\_  
City Comptroller  
Date: \_\_\_\_\_ 20 \_\_\_\_\_

**Distribution:**  
(White) – Comptrollers Office  
(Canary) – Originating department of claim or account  
(Pink) – City Attorney’s Office  
(Goldenrod) – Originator  
(Detach prior to submitting to City Attorney’s Office)



**Dept of Public Works, City of Milwaukee Invoice  
Miscellaneous Accounts Receivable  
Goods, Services or Damages**

Bill To:

NIKKI WHITE  
1934 N. 49 ST.  
MILWAUKEE WI 53208

Page: 1  
Invoice No: 5140000407  
Invoice Date: 06/06/2008  
Customer Number: 000697  
Payment Terms: 30 Days  
Due Date: 07/06/2008

For billing questions, please call 414-286-8282 DPW Call Center Invoice No: 5140000407

Line	Adj	Identifier	Description	Quantity	UOM	Unit Amt	Net Amount
------	-----	------------	-------------	----------	-----	----------	------------

LOCATION: CHAMBERS & HOPKINS

LABOR MATERIAL & EQUIPMENT SERVICES NEEDED TO MAKE REPAIRS TO A TRAFFIC SIGNAL CONTROL CABINET DAMAGED ON 4-17-08

1		LABOR	Labor	1.00			706.01
2		LABOR2	Additional Labor	1.00		510.52	510.52
3		MATERIAL	Material	1.00			6,261.73
4		P EQUIP	EQUIPMENT	1.00	EA	30.00	30.00

Please Remit To:  
City Treasurer  
City of Milwaukee  
Box 514062  
Milwaukee, WI 53203-3462

Invoice No: 5140000407  
Invoice Date: 06/06/2008  
Customer Number: 000697  
Payment Terms: 30 Days  
Due Date: 07/06/2008

Bill To:

AMOUNT DUE: \$ 7,508.26 USD

NIKKI WHITE  
1934 N. 49 ST.  
MILWAUKEE WI 53208

**Please return this coupon with payment**

4999009187000000000000000075082600000000051400004076

Resolution Required

Form CBP 177 (Rev. 3/01)

CITY OF MILWAUKEE  
CANCELLATION OR ADJUSTMENT OF CITY CLAIM OR ACCOUNT

To: City Attorney

From: DPW-ADMINISTRATION Department Date JULY 14 20 09

I recommend that the following claim or account be adjusted or cancelled as indicated.

Claim or Account No 5140000660  
~~51400000660~~-8-19-2008

Department: DPW-ADMINISTRATION

Due From:  
Name: TIFFANY I PALMORE

Amount of claim or Account as billed.....	\$ <u>7751.90</u>
Recommended Adjustment .....	\$ <u>7751.90</u>
Adjusted Balance .....	\$ <u>0.00</u>

Basis for recommendation of cancellation or adjustment:

PER KOHN, JUDGMENT TAKEN ON 06-16-09, JUDGMENT TO REMAIN OF RECORD.

Submitted by Jean Rossetti  
DPW-ADMINISTRATION Department

Adjustment or cancellation approved  
by Megan Cump  
City Attorneys Office  
Date: 11-12 20 09  
C.A. File No. \_\_\_\_\_

In accordance with section 2-20.I(1) of the Milwaukee Code, I certify to the City Comptroller the uncollectibility of the above claim or account as indicated.

by [Signature]  
DPW-Admin Department Head  
Date: August 19 20 09

In accordance with section 2-20.I(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 \_\_\_\_\_  
City Comptroller  
Date: \_\_\_\_\_ 20 \_\_\_\_\_

**Distribution:**  
(White) – Comptrollers Office  
(Canary) – Originating department of claim or account  
(Pink) – City Attorney’s Office  
(Goldenrod) – Originator  
(Detach prior to submitting to City Attorney’s Office)



RESOLUTION REQUIRED

Form CBP 177 (Rev. 3/01)

CITY OF MILWAUKEE

CANCELLATION OR ADJUSTMENT OF CITY CLAIM OR ACCOUNT

To: City Attorney

From: DPW-ADMINISTRATION Department Date Oct 21 20 09

I recommend that the following claim or account be adjusted or cancelled as indicated.

Claim or Account No. 91348 03/07/2006

Department: DPW-ADMINISTRATION

Due from:

Name: DEANDRAE L. RICHMOND

Amount of claim or account as billed.....	\$ <u>11613.58</u>
Recommended Adjustment.....	\$ <u>11613.58</u>
Adjusted Balance.....	\$ <u>0.00</u>

**Basis for recommendation of cancellation or adjustment:**

PER KOHN, JUDGMENT ENTERED ON 09-23-09, JUDGMENT TO REMAIN OF RECORD.

Submitted by Joan Rossetti  
DPW-ADMINISTRATION Department

Adjustment or cancellation approved

by Megan Crump  
City Attorneys Office

Date: 11-12 20 09

C.A. File No. \_\_\_\_\_

In accordance with section 2-20.1(1) of the Milwaukee Code, I certify to the City Comptroller the uncollectibility of the above claim or account as indicated.

by [Signature]  
DPW-Admin Department Head

Date: 10/12 20 09

In accordance with section 2-20.1(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

\_\_\_\_\_  
City Comptroller

Date: \_\_\_\_\_ 20\_\_

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

RESOLUTION REQUIRED

Form CBP 177 (Rev. 3/01)

**CITY OF MILWAUKEE  
CANCELLATION OR ADJUSTMENT OF CITY CLAIM OR ACCOUNT**

To: City Attorney

From: DPW-ADMINISTRATION Department Date Jun 3 20 09

I recommend that the following claim or account be adjusted or cancelled as indicated.

Claim or Account No. 94189 03/20/2008

Department: DPW-ADMINISTRATION

Due from:  
Name: NATALYA JEWITT

Amount of claim or account as billed.....	\$ 8822.09
Recommended Adjustment.....	\$ 7022.09
Adjusted Balance.....	\$ 1800.00

**Basis for recommendation of cancellation or adjustment:**

PER KOHN, CHAPTER 7 BANKRUPTCY, NO ASSET CASE.

Submitted by Jean Rosselli  
DPW-ADMINISTRATION Department  
 Adjustment or cancellation approved  
 by Morgan Crump  
 City Attorneys Office  
 Date: 11-20 20 09  
 C.A. File No. \_\_\_\_\_

In accordance with section 2-20.1(1) of the Milwaukee Code, I certify to the City Comptroller the uncollectibility of the above claim or account as indicated.

by Dalusha Schueder  
Dept of Public Works Department Head  
 Date: ~~11-20~~ June 12 20 09

In accordance with section 2-20.1(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

\_\_\_\_\_  
 City Comptroller  
 Date: \_\_\_\_\_ 20\_\_

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

**Division Copy**

**INVOICE**

**No. 94189**

NOTICE: If this invoice is NOT paid within 30 days of the issue date, it can be deducted from any payments by the City to the below named.

CITY OF MILWAUKEE  
DEPARTMENT OF PUBLIC WORKS  
ADMINISTRATION DIVISION  
(414) 286-8282

03-20-2008  
ES

NATALYA JEWITT  
N56 W6351 CENTER ST. #2  
CEDARBURG, WI 53012

THOMAS PARSONS  
7018 W. PIONEER RD.  
CEDARBURG, WI 53012

**THIS BILL MUST BE PAID WITHIN 30 DAYS**

J.O. RE5233027664

Location: WELLS & 4 FR-NB

Labor, Material, & Equipment necessary to make repairs to TRAFFIC SIGNAL & TRAFFIC SIGNAL CONTROL CABINET damaged on 01/25/2008.

COPY OF INVOICE SENT TO DRIVER & OWNER OF VEHICLE

MATERIALS

\$6456.97

LABOR

\$2082.81

EQUIPMENT

\$282.31

**Total:**

**\$8822.09**

941090-0001-5452-0800

\$282.31

941091-0001-5140-0200

\$738.60

943085-0007-5231-9901-RE5233027664

\$7801.18

Resolution Required

CITY OF MILWAUKEE  
CANCELLATION OR ADJUSTMENT OF CITY CLAIM OR ACCOUNT

To: City Attorney

From: DPW-ADMINISTRATION Department Date MAY 28 20 09

I recommend that the following claim or account be adjusted or cancelled as indicated.

Claim or Account No 5140000668 08-20-08

Department: DPW-ADMINISTRATION

Due From:  
Name: ARCELIA ESPINO

Amount of claim or Account as billed.....	\$ <u>7342.52</u>
Recommended Adjustment .....	\$ <u>7342.52</u>
Adjusted Balance .....	\$ <u>0.00</u>

**Basis for recommendation of cancellation or adjustment:**

**PER KOHN, INVOICE TO BE CANCELED, UNABLE TO CONFIRM THE DEBTOR'S ADDRESS AND/OR EXECUTABLE INCOME OR ASSETS.**

Submitted by Joan Rossetti  
DPW-ADMINISTRATION Department

Adjustment or cancellation approved  
by Megan Camp  
City Attorneys Office  
Date: 11-12 20 09

C.A. File No. \_\_\_\_\_

In accordance with section 2-20.1(1) of the Milwaukee Code, I certify to the City Comptroller the uncollectibility of the above claim or account as indicated.

by Jalisha Schwede  
Dept of Public Works Department Head  
Date: June 12 20 09

In accordance with section 2-20.1(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 \_\_\_\_\_  
City Comptroller  
Date: \_\_\_\_\_ 20 \_\_\_\_\_

**Distribution:**  
(White) – Comptrollers Office  
(Canary) – Originating department of claim or account  
(Pink) – City Attorney’s Office  
(Goldenrod) – Originator  
(Detach prior to submitting to City Attorney’s Office)







**Dept of Public Works, City of Milwaukee Invoice  
Miscellaneous Accounts Receivable  
Goods, Services or Damages**

Bill To:

SANTIAGO CORREA  
2647 S. 9 PL  
MILWAUKEE WI 53215

Page: 1  
Invoice No: 5140000668  
Invoice Date: 08/20/2008  
Customer Number: 000927  
Payment Terms: 30 Days  
Due Date: 09/19/2008

For billing questions, please call 414-286-8282 DPW Call Center Invoice No: 5140000668

Line	Adj	Identifier	Description	Quantity	UOM	Unit Amt	Net Amount
------	-----	------------	-------------	----------	-----	----------	------------

LOCATION: 27 & CLEVELAND

LABOR, MATERIAL & EQUIPMENT SERVICES NEEDED TO MAKE REPAIRS TO A TRAFFIC SIGNAL CONTROL CABINET DAMAGED ON 7-2-08

1		LABOR	LABOR	1.00	EA		609.83
2		LABOR2	ADDITIONAL LABOR	1.00	EA	440.96	440.96
3		MATERIAL	MATERIAL	1.00	EA		6,261.73
4		PEQUIP	EQUIPMENT	1.00	EA	30.00	30.00

COPY OF INVOICE SENT TO BOTH DRIVERS & OWNERS OF VEHICLES INVOLVED IN TRAFFIC ACCIDENT.

Please Remit To:  
City Treasurer  
City of Milwaukee  
Box 514062  
Milwaukee, WI 53203-3462

Invoice No: 5140000668  
Invoice Date: 08/20/2008  
Customer Number: 000927  
Payment Terms: 30 Days  
Due Date: 09/19/2008

Bill To:

AMOUNT DUE: \$ 7,342.52 USD

SANTIAGO CORREA  
2647 S. 9 PL  
MILWAUKEE WI 53215

Please return this coupon with payment

49990092620000000000000000734252000000000051400006688





## Legislation Details (With Text)

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**File #:** 091099      **Version:** 0  
**Type:** Resolution      **Status:** In Committee  
**File created:** 12/1/2009      **In control:** JUDICIARY & LEGISLATION COMMITTEE  
**On agenda:**      **Final action:**  
**Effective date:**  
**Title:** Resolution to settle claims for the defense of police officers.  
**Sponsors:** THE CHAIR  
**Indexes:** CLAIMS PAYMENT  
**Attachments:**

Date	Ver.	Action By	Action	Result	Tally
12/1/2009	0	COMMON COUNCIL	ASSIGNED TO		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		

..Number  
091099  
..Version  
Substitute 1  
..Reference

..Title  
Substitute Resolution to settle claims of Cermele & Associates for defense of various police officers.

..Body

Resolved, By the Common Council of the City of Milwaukee, that the proper city officers be and they hereby are authorized and directed to issue a city check in the sum of \$5,604.06 payable to Cermele & Associates, 6310 West Bluemound Rd., Suite 200, Milwaukee, WI 53213 to reimburse him for legal fees for defense of the following police officers:

POLICE OFFICERS	AMOUNT
Thomas Ruege	\$825.00
Richard Lopez, William Savagian	\$2,370.06
Nicole Reaves	\$869.00
Dwain Monteilh, Nick Povolo	\$594.00
Christopher Schlachter	\$946.00
TOTAL	\$5,604.06

;and, be it

Further Resolved, that the check for \$5,604.06 is to be delivered upon presentation of a proper release, approved by the City Attorney; said amount to be charged to the Damages and Claims Account -636506- Fund No. 0001 - Organization 1490- Program 2631 - Sub Class S118.

Drafter

City Attorney  
enm  
12/10/09

152879



Legislation Details (With Text)

**File #:** 081060      **Version:** 0  
**Type:** Communication      **Status:** In Committee  
**File created:** 11/25/2008      **In control:** JUDICIARY & LEGISLATION COMMITTEE  
**On agenda:**      **Final action:**  
**Effective date:**

**Title:** Communication from the City Attorney relative to expenditures from the Outside Counsel/Expert Witness Fund Special Purpose Account.

**Sponsors:** THE CHAIR

**Indexes:** CITY ATTORNEY, CONSULTANTS, LITIGATION

**Attachments:** October 20 Report, September 9 Report, September 1 Report Re Retention of Outside Counsel, Sept 11 Report Re Retention of Outside Counsel, June 23 Report, May 15 Report, April 1 Report, Jan 29 Report, Retention of Outside Counsel, Hearing Notice List

Date	Ver.	Action By	Action	Result	Tally
11/25/2008	0	COMMON COUNCIL	ASSIGNED TO		
1/28/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
2/2/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HELD TO CALL OF THE CHAIR	Pass	4:0
3/31/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
4/6/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HELD TO CALL OF THE CHAIR	Pass	5:0
5/18/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HELD TO CALL OF THE CHAIR	Pass	4:0
6/23/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
6/29/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HELD TO CALL OF THE CHAIR	Pass	4:0
9/4/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
9/14/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HELD TO CALL OF THE CHAIR	Pass	5:0
10/19/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
10/26/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HELD TO CALL OF THE CHAIR	Pass	5:0
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		

**Number**

081060

**Version**

ORIGINAL

**Reference**

070993

**Sponsor**

THE CHAIR

**Title**

Communication from the City Attorney relative to expenditures from the Outside Counsel/Expert Witness Fund Special Purpose Account.

**Requestor**

**Drafter**

11/20/08

lme

outside counsel

**GRANT F. LANGLEY**  
City Attorney

**RUDOLPH M. KONRAD**  
**LINDA ULISS BURKE**  
**VINCENT D. MOSCHELLA**  
Deputy City Attorneys



**THOMAS O. GARTNER**  
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**ROBIN A. PEDERSON**  
**DANIELLE M. BERGNER**  
Assistant City Attorneys

December 8, 2009

Alderman Ashanti Hamilton, Chair  
Judiciary & Legislation Committee  
City Hall – Room 205

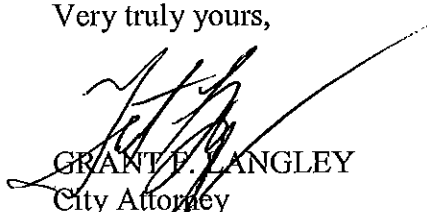
Re: Retention of Outside Counsel

Dear Alderman Hamilton:

Pursuant to Common Council FN 030083 adopted on May 13, 2003 requiring the Judiciary & Legislation Committee be notified in writing of the retention of any outside counsel, I am reporting the following.

Our office has retained the services of the law firm of Gunta & Reak, S.C., to provide legal services and representation as needed to Kevin A. Dudley, a former police officer of the City of Milwaukee, in the matters of *Robert and Judy Jacoby v. Kevin A. Dudley and City of Milwaukee*, United States District Court Case No. 09-C-0875 and Milwaukee County Circuit Court Case No. 09-CV-013956. Payments under this contract are not to exceed \$45,000.00, with \$15,000.00 to be incurred in 2009 and \$30,000.00 in 2010.

Very truly yours,

  
GRANT F. LANGLEY  
City Attorney

GFL:JAS

1032-2009-2517:152700







## Legislation Details (With Text)

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**File #:** 090954      **Version:** 0  
**Type:** Ordinance      **Status:** In Committee  
**File created:** 12/1/2009      **In control:** JUDICIARY & LEGISLATION COMMITTEE  
**On agenda:**      **Final action:**  
**Effective date:**  
**Title:** An ordinance relating to policies and procedures for vacation of in rem judgments.  
**Sponsors:** THE CHAIR  
**Indexes:** IN REM JUDGMENTS  
**Attachments:** City Attorney Letter, Hearing Notice List

Date	Ver.	Action By	Action	Result	Tally
12/1/2009	0	COMMON COUNCIL	ASSIGNED TO		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		

**Number**

090954

**Version**

ORIGINAL

**Reference**

**Sponsor**

THE CHAIR

**Title**

An ordinance relating to policies and procedures for vacation of in rem judgments.

**Sections**

304-50-1 rc

304-50-9.5 cr

304-50-10 am

304-50-11 am

**Analysis**

This ordinance makes the following changes to the city's policies and procedures for vacation of in rem judgments:

1. The time period during which a former owner of record or person having an interest of record in a property acquired by the city through an in rem judgment may submit a request for vacation of the in rem judgment is lengthened from 45 days to 90 days from the date of the in rem judgment.
2. The city treasurer shall not accept a request to proceed with the in rem judgment vacation procedure if the city treasurer has determined, based on consultation with the department of city development, that the city has accepted an offer to purchase the property.
3. The common council reserves the right to disapprove vacation of an in rem judgment if the council determines that the applicant is either delinquent in the payment of any property tax, special assessment, special charge or special tax to the city, or has submitted false or incomplete information, particularly with respect to ownership of, and tax liability for, the subject property.
4. The length of time a requester has to pay the total costs associated with the property is reduced from 45 days to 30 days from the date of common council adoption of the resolution approving vacation of the in rem judgment.
5. Any rental income collected by the city during the time the property is owned by the city shall not be applied against the total amount due to the city for the redemption of the property. Current policy provides for this rental income to be subtracted from the total amount due.

**Body**

The Mayor and Common Council of the City of Milwaukee do ordain as follows:

Part 1. Section 304-50-1 of the code is repealed and recreated to read:

**304-50. Vacation of In Rem Judgment.**

1. The former owner of record or any person having an interest of record has submitted a written request to the city treasurer on a form provided by the city treasurer to have the in rem judgment

vacated. No written request to proceed under this section may be submitted for consideration to the common council where any of the following are true:

- a. More than 90 days have elapsed from the date of entry of the in rem judgment to the date of receipt of the request by the city treasurer
- b. The city treasurer has determined, based on consultation with the department of city development, that the city has accepted an offer to purchase the property.
- c. The requester does not have any interest of record in the property.

Part 2. Section 304-50-9.5 of the code is created to read:

**9.5.** The common council reserves the right to disapprove vacation of an in rem judgment if it determines that either of the following is true:

- a. The person requesting the vacation is delinquent in the payment of any property tax, special assessment, special charge or special tax to the city.
- b. The person requesting the vacation has submitted false or incomplete information, particularly with respect to ownership of, and tax liability for, the subject property.

Part 3. Section 304-50-10 and 11 of the code is amended to read:

**10.** If vacation of the city's foreclosure judgment is approved by the common council, then the requester shall, within ~~[[45]]~~ >>30<< days of the date of the resolution of the common council approving the vacation of the judgment and the return of the subject property to the former owner, pay to the city treasurer by cash or cashier's check, the city's total costs associated with the property, which shall include: costs reported to the common council; all costs incurred by the city with respect to the property through the date of vacation of the city's judgment; all city and county taxes, assessments and charges including interest and penalties through the date of the vacation; and all administrative and overhead costs, including but not limited to, administrative and overhead costs incurred by the reporting departments beyond those costs already paid under sub. 3. ~~[[Said]]~~ >>This << amount shall be the amount needed to redeem the property and may be ascertained by the requester contacting the treasurer's office.

**11.** Any rental income collected by the city shall >>not<< be applied against the total amount due to the city for the redemption of the property.

**LRB**  
APPROVED AS TO FORM

Legislative Reference Bureau  
Date: \_\_\_\_\_

**Attorney**  
IT IS OUR OPINION THAT THE ORDINANCE  
IS LEGAL AND ENFORCEABLE

Office of the City Attorney

Date: \_\_\_\_\_

**Requestor**

City Attorney

**Drafter**

LRB09139-1

JDO

11/13/2009

# CITY OF MILWAUKEE FISCAL NOTE

A) DATE: December 10, 2009

FILE NUMBER: \_\_\_\_\_

ORIGINAL FISCAL NOTE  SUBSTITUTE

SUBJECT: Proposed Amendment to MCO 304-50

B) SUBMITTED BY name/title/dept./ext.): Megan T. Crump, Assistant City Attorney

C) CHECK ONE:  ADOPTION OF THIS FILE AUTHORIZES EXPENDITURES.  
 ADOPTION OF THIS FILE DOES NOT AUTHORIZE EXPENDITURES; FURTHER COMMON COUNCIL ACTION NEEDED.  
 LIST ANTICIPATED COSTS IN SECTION G BELOW.  
 NOT APPLICABLE/NO FISCAL IMPACT.

D) CHARGE TO:  DEPARTMENTAL ACCOUNT (DA)  CONTINGENT FUND (CF)  
 CAPITAL PROJECTS FUND (CPF)  SPECIAL PURPOSE ACCOUNTS (SPA)  
 PERM. IMPROVEMENT FUNDS (PIF)  GRANT & AID ACCOUNTS (G & AA)  
 OTHER (SPECIFY)

E) PURPOSE	SPECIFY TYPE/USE	ACCOUNT	EXPENDITURE	REVENUE	SAVINGS
SALARIES/WAGES:					
SUPPLIES:					
MATERIALS:					
NEW EQUIPMENT:					
EQUIPMENT REPAIR:					
OTHER:					
<b>TOTALS</b>					

G) LIST ANY ANTICIPATED FUTURE COSTS THIS PROJECT WILL REQUIRE FOR COMPLETION:

---



---

H) COMPUTATIONS USED IN ARRIVING AT FISCAL ESTIMATE:

---



---

PLEASE LIST ANY COMMENTS ON REVERSE SIDE AND CHECK HERE

**GRANT F. LANGLEY**  
City Attorney

**RUDOLPH M. KONRAD**  
**LINDA ULISS BURKE**  
**VINCENT D. MOSCHELLA**  
Deputy City Attorneys



**THOMAS O. GARTNER**  
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**JARELY M. RUIZ**  
**ROBIN A. PEDERSON**  
**DANIELLE M. BERGNER**  
Assistant City Attorneys

November 11, 2009

Common Council Members  
Attn: Ronald D. Leonhardt, City Clerk  
City Clerk's Office  
Room 205, City Hall

Re: Proposed Amendment to MCO 304-50

Dear Mr. Leonhardt:

Enclosed for your consideration is a proposed amendment to MCO 304-50 which expands the timeframe by which a former owner and/or interested party may petition the Council for return of a property taken by the City as a result of an *in rem* foreclosure.

Presently, a former owner and/or interested party has 45 days from the date of judgment to petition the Council for return of the property. After the 45 days elapses, former owners and/or interested parties, or their attorneys, frequently contact the City to inquire about additional options to redeem the property.

Their primary option is to file a motion in court seeking to reopen the case based on "excusable neglect." If the Department of City Development does not oppose the return of the property, it has been the practice of our office not to oppose the motion as long as all delinquencies are paid in full. While it may be desirable to return the property in these cases, this process is problematic, partly because there is no showing of actual excusable neglect, but also because the Council may wish to participate in the decision.

Under the proposed amendment, the time to petition the Council would be increased to 90 days from the date of judgment. The expansion of time to redeem, with additional accompanying modifications to the ordinance, will ensure adherence to the legislative intent of MCO 304-50(9), which grants the Council the authority to determine whether a property may be returned. Thereafter, if a former owner and/or interested party seeks to vacate the judgment after the proposed 90 day timeframe has elapsed, they may only do so by petitioning the court and demonstrating to the court that there is actual excusable neglect to warrant the judgment being vacated pursuant to Wis. Stats § 806.07.

Additionally, the proposed amendment will ensure uniformity of process. It is hoped that this will help to reduce the confusion that many former owners and/or interested parties encounter when seeking information about how to redeem their property.

Moreover, the proposed amendment provides additional assurance to the City that the property will be returned to a responsible owner. Under the proposed amendment, the Council will have the authority to disapprove a vacation of the judgment if a former owner has delinquent real estate taxes, special charges, special taxes, or special assessments. The Council will also have the authority to disapprove vacation of the judgment if a former owner and/or interested party has provided false or incomplete information on their application in an effort to hinder the investigation of their ownership interests of other properties within the City.

Also, the new process would provide protection to individuals who are in the final steps of buying an *in rem* foreclosed property. In the current ordinance, there is no such protection provided. Under the proposed amendment, the City Treasurer's Office would not accept an application to vacate the judgment if the Department of City Development has accepted an offer to purchase the property. This proposal would give prospective buyers security in knowing that the former owner and/or interested party cannot come in at the time of closing and redeem the property.

Ronald D. Leonhardt  
November 11, 2009  
Page 3

We have consulted with the Treasurer's Office and the Department of City Development, and have obtained their input into this revised procedure.

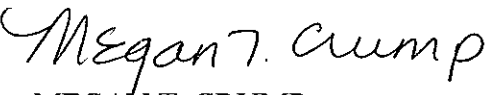
Very Truly Yours,



GRANT E. LANGLEY  
City Attorney



LINDA ULISS BURKE  
Deputy City Attorney



MEGAN T. CRUMP  
Assistant City Attorney

c: Mr. Wayne Whittow, Treasurer's Office  
Attention: Jim Klajbor  
Mr. Rocky Marcoux, Department of City Development  
Attention: Martha Brown

1049-2009-505/151546





**2003 Statistics**

**GENERAL INFORMATION ABOUT MILWAUKEE**

Altitude (City datum)	.....	581.2 feet
City Area	.....	96.1 square miles
Geographic Center	.....	North 42nd Street and West North Avenue
Shoreline of Lake Michigan in City	.....	10.2 miles
Incorporated by Wisconsin Charter	.....	January 31, 1846

**GENERAL INFORMATION ABOUT MILWAUKEE'S INFRASTRUCTURE**

Alleys, total	.....	414.6 miles
Freeways	.....	40.1 miles
Paved City Streets	.....	1,417 miles
Unpaved City Streets	.....	15 miles
Total city streets	.....	1,432 miles
Miles of lighted streets	.....	1,288.54 miles
City maintained bridges	.....	220
Movable bridges	.....	20
Total bridge openings	.....	18,119
Total sewer mileage in operation (sanitary, storm and combined)	.....	2,437
Main line sewers in the City	.....	120 miles
Streets with interim lighting	.....	81.84 miles
Unlit streets	.....	43.69 miles
Street lighting units	.....	66,871
Alley lighting units	.....	8,790
Traffic control signals	.....	728 intersections
Traffic control signs	.....	102,058
Underground conduit	.....	546.3 miles
Bus stops, signage maintained	.....	4,267

**MILWAUKEE WATER WORKS**

Howard Avenue plant capacity	.....	105 million gallons/day (MGD)
Linnwood plant capacity	.....	275 million gallons/day (MGD)
Total annual pumpage (gallons)	.....	46.1 billion
Consumption per capita per day (gallons)	.....	.65
Meters in service	.....	160,966
Water hydrants	.....	19,726
Water mains in service (miles)	.....	1,954
Revenue	.....	\$74.5 million
Milwaukee Water Works' purification process is comprised of ozone disinfection, alum coagulation, dual media filtration, fluoridation, corrosion control, and chloramine post-disinfection.		
<u>Retail customers:</u> Franklin, Greenfield, Hales Corners, St. Francis, West Milwaukee		
<u>Wholesale customers:</u> Brown Deer, Butler, Greendale, Menomonee Falls, Milwaukee County Grounds, New Berlin, Shorewood, Wauwatosa, West Allis, WE Energies Water Services		

**SANITATION**

Residential Waste collected	.....	179,784 Tons
Recyclables collected	.....	26,100 Tons
Leaves and Yard Waste collected & composted	.....	25,285 Tons
Snowfall (January - December)	.....	32.6 Inches
General snow plowings	.....	2
Ice control operations	.....	23

**FORESTRY DIVISION**

Trees on city streets	.....	200,000
Shade trees planted	.....	2,731
Trees pruned	.....	50,258
Trees removed (all causes)	.....	3,529
Stumps removed	.....	4,143
Boulevard medians & greenspaces maintained	.....	476 acres
Flowers produced, annuals	.....	371,546
Flowers planted, annuals	.....	185,448
Flowers planted, perennials & bulbs	.....	7,455
Shrubs planted	.....	1,497
Evergreens planted	.....	107
Landscaped boulevard medians	.....	121.8 miles
Greenspaces maintained	.....	59
Totlots maintained	.....	57
City properties maintained	.....	20
Service requests	.....	9,620

**INFRASTRUCTURE SERVICES -**

**SEWER DESIGN AND MAINTENANCE**

Sewers examined	.....	84 miles
Sewers cleaned	.....	422.2 miles
New sewers	.....	81 miles
Replacement sewers	.....	13.11 miles
Sewer lining	.....	2.0 miles
Service calls answered	.....	7,937

**FLEET SERVICES**

Work Orders	.....	31,415
Preventive Maintenance Inspections Performed	.....	7,359
Tires Mounted	.....	3,933
Field Service Calls, Tires	.....	4,392
Field Service Calls, Other	.....	7,212
Stockroom Activity	.....	\$4,710,704
Vehicles Serviced		
Passenger Vehicles	.....	1,047
Packers, Rear Load	.....	144
Packers, Front Load and Roll-off	.....	22
Packers, Recycling	.....	51
Tractors	.....	65
Street Sweepers	.....	29
Sewer cleaners, flushers, etc.	.....	7
Construction equipment	.....	487
Trucks, all other	.....	842

<u>Compressors</u>	.....	96
Vehicle Total	.....	2,790
<u>Non-automotive equipment</u>	.....	1,395
Total Serviced	.....	4,185

**STREET AND BRIDGE MAINTENANCE**

Bridges, inspected	.....	180
Bridges, number of openings	.....	14,119
Pavement seal coating (square yards)	.....	261,288
Asphalt surface by contract (tons)	.....	3,057
Production of asphalt mixes (tons)	.....	15,012

Average Total DPW Employees, 2003 ..... 2,400

Rec'd 2/24/2005



## Legislation Details (With Text)

**File #:** 090845      **Version:** 0  
**Type:** Resolution      **Status:** In Committee  
**File created:** 11/3/2009      **In control:** JUDICIARY & LEGISLATION COMMITTEE  
**On agenda:**      **Final action:**  
**Effective date:**  
**Title:** Resolution relating to an appeal from Angela Lopez for property damage. (8th Aldermanic District)  
**Sponsors:** THE CHAIR  
**Indexes:** CLAIMS APPEAL  
**Attachments:** City Attorney Letter, Appeal, Additional Costs/Information Provided by Ms Lopez, Statement as to why Ms Lopez Wasn't at Committee, Hearing Notice List

Date	Ver.	Action By	Action	Result	Tally
11/3/2009	0	COMMON COUNCIL	ASSIGNED TO		
11/6/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
11/6/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
11/23/2009	0	JUDICIARY & LEGISLATION COMMITTEE	RECOMMENDED FOR DISALLOWANCE & INDEF. POSTPONEMENT	Pass	5:0
12/1/2009	0	COMMON COUNCIL	REFERRED TO	Pass	14:0
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		

**Number**

090845

**Version**

ORIGINAL

**Reference**

**Sponsor**

THE CHAIR

**Title**

Resolution relating to an appeal from Angela Lopez for property damage. (8<sup>th</sup> Aldermanic District)

**Drafter**

City Atty.

rmo

10/19/09

**GRANT F. LANGLEY**  
City Attorney

**RUDOLPH M. KONRAD**  
**LINDA ULISS BURKE**  
**VINCENT D. MOSCHELLA**  
Deputy City Attorneys



THOMAS O. GARTNER  
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ROBIN A. PEDERSON  
DANIELLE M. BERGNER  
Assistant City Attorneys

September 23, 2009

Angela Lopez  
2038 South 30th Street  
Milwaukee, WI 53215

RE: Angela Lopez  
C.I. File No.: 09-S-286

Dear Ms. Lopez:

We have received your claim in the amount of \$606.80, relating to damages allegedly sustained to your vehicle and associated tow fees when your vehicle was towed on April 2, 2009.

Our investigation reveals that your 2007 Pontiac was towed to the City of Milwaukee Tow Lot for Obstructing A Traffic Lane. Our office also confirmed the vehicle's arrival with the tow lot manager. The investigation further revealed that the citation issued with this towing incident was dismissed on May 12, 2009; as a condition of this dismissal you agreed not to seek reimbursement of the towing fees.

The City is tendering the rest of your claim to C.H.I. Towing, the towing contractor for the City. You will receive a copy of this letter under separate cover. Since you entered into the above noted agreement and the City is tendering the damage portion of the claim, we are denying your claim.

OFFICE OF THE CITY ATTORNEY

Milwaukee City Hall Suite 800 • 200 East Wells Street • Milwaukee, Wisconsin 53202-3551 • Telephone: 414.286.2601 • TDD: 414.286.2025 • Fax: 414.286.8550


Angela Lopez  
September 23, 2009  
Page 2

If you wish to appeal this decision, you may do so by sending a letter within 21 days of receipt of this letter to the Milwaukee City Clerk, 200 East Wells Street, Room 205, Milwaukee, Wisconsin 53202, requesting a hearing.

Very truly yours,



GRANT F. LANGLEY  
City Attorney



ROBERT OVERHOLT  
Investigator Adjuster

RMO:ms

c: Dave Lawrence

1044-2009-2108:150202

Office of the City Attorney  
200 East Wells Street  
Suite 800  
Milwaukee, WI 53202

Angela M. Lopez  
2038 S. 30<sup>th</sup> street  
Milwaukee, WI 53215

C.I. File No.: 09-S-286

October 6, 2009

Dear City Attorney Grant F. Langley,

I am responding to your letter(s) regarding the claim I filed regarding damages to my vehicle that occurred as a result of negligent towing; a complete stranger ended up with my damaged car in their possession for three days, to supposedly fix it at their discretion, and consequently damaged my speakers, advanced the Mp3 track, and cracked the spoiler in my fairly new and well kept car. I am not certain as to what they fixed because of steering damage (axel and wheel pole) or alleged they changed the tire and feel unsafe about my car.

Contrary to the interpretation made by the Deputy City Attorney, I do not allege that the speakers were stolen, but that the fairly new speakers on my 2007 vehicle were blown by negligent use, and do not sound like they did before they towed my car. I had paid \$95.00 (for a tow) to get it, but was left without a vehicle, having no idea actually where it was and who was driving it. They left clear evidence that they drove it around, messed with my music; the speakers do not sound the same, and they played games with me over the telephone threatening to fix the tire and steering wheel pole damage with junkyard parts at their discretion. I had pleaded with them to have it fixed at a GM dealer. But, instead they kept it for three days and used it; then they drove it to me at a public library; it was not delivered to me by a tow truck.

I should have a right to a refund; I was not allowed to retrieve it from the city tow lot where I accordingly paid the \$95.00.

A tow truck did not bring me my car, to the public library. Nevertheless, this was embarrassing; I was interrupted in the middle of a class I was teaching in the community meeting room inside the Capitol Library.

I do not feel safe driving my car since this happened because I have no idea what they fixed or replaced and the dealer mechanic could not find anything, as of late. I feel unsafe.

My car did not have any numbers marked on it, indicating that it had ever been towed.

When I got into my car, I discovered that they changed the station on my radio and that the MP3 disc that was playing had advanced about two hours of playing tracks. This means the car was driven around a great distance.

When I had parked it on Wisconsin Avenue (from where it had been towed), I had 1/2 tank of gas. When I started the car at the library, I only had a quarter tank of gas left. This too, indicates the car was driven. When I inspected the exterior, I discovered a nick/crack in my spoiler that wasn't there previously, to the car 'getting stolen for a joyride'.

I reiterate the speakers in car do not sound the same. It seems that the person(s) who used my car for three days, blew the speakers out, and this may explain why my MP3 disc was not on the track where I had left it.

I consider those two days of not having my car as auto theft. I demand a refund of the \$95.00 I paid to retrieve my car from the tow lot on 38th and Lincoln, as I was without a car for three days and it was never in the possession of the city tow lot to merit me having to pay any money in order to get it back.

Now that I am informed of the consequence of the deal made with the City Attorney for dismissing the ticket of \$55.00, I realize that I made a huge error by taking that deal. I do not argue that I deserved the parking ticket, and did want to pay it.

Also, as suggested by the City Attorney, I requested rental car compensation. I request reimbursement to replace the speakers, to fix the spoiler and for a rental car. I will pay the parking ticket; hence I am asking \$551.08, the total reflecting the difference of the merited parking ticket and the tow fee.

I appreciate your time and effort in resolving this issue, whether the next step be going to a hearing, or if we can arrive at an immediate solution through my clarification of the circumstances surrounding this claim.

I may be reached at 414-243-2383, anytime.

Sincerely yours,



Angela M. Lopez

C.C. Attorney Linda Uliss Burke  
C.C. Investigator Adjuster Robert Overholt



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

CITY OF MILWAUKEE  
RECEIVED  
2009 JUL 31 PM 2:23

OFFICE OF  
CITY ATTORNEY

Angela M. Lopez  
2038 S. 30<sup>th</sup> street  
Milwaukee, WI 53215

July 29, 2009

To whom it may concern,

I am filing a claim against the City of Milwaukee, which complies with Sec. 893.80, Stats because my car was damaged, and it did not make it to the City tow lot, when I went to pay \$95.00 (for a tow) to get it, on the same day, 4/2/09.

When I first noticed that my car was gone, I called the city and was told that my car had been taken to the lot on 38th and Lincoln. Then I rushed over there before 6pm and paid the \$95.00 (TOW # 1398682) to get my car out, and waited. Then after waiting for my car, the tow lot employees alleged that the towing company they contracted, Fah Towing and Storage LLC had damaged my car while towing it and it is "undriveable"; but Fah Towing would be willing to repair it, at their cost.

The tow lot employees had taken my keys and would not show me my damaged car because the gate was closed (where they alleged my car was). I asked to see the damages to my car, and they said it was too late. They said "the towing company damaged the axel and wheel pole". My father was present as a witness to this.

Then I called FAH and told them it would have to be repaired at a GM authorized Pontiac dealer because it is a new car under the bumper to bumper and power train warranty, which would be nullified if any unauthorized repairs are done by a non GM mechanic. FAH said they would be shopping around junkyards to get parts needed to fix it. I told them I do not agree to this. We continued to argue this issue over the telephone throughout the evening and the following morning.

CITY OF MILWAUKEE  
2009 JUL 31 PM 1:19  
DONALD D. LEONHART  
CITY CLERK

Next I learned that FAH took my 'undriveable' car, which, according to the City of Milwaukee Tow Lot, had tire and steering damage (axel and wheel pole) to some storage lot on N. Teutonia and told me they would be charging me for storage until I pick it up. Then I kept calling, trying to speak to the person in charge, whom according to the city tow lot employees, is someone who goes by the name "G".

Then after being without my car for three business days, a FAH employee, Alex, who had been driving my car without my permission, said his boss refuses to take my car to be fixed at a GM dealer and said I would have to take it myself, to the GM dealer and pay to get it fixed. The boss would not answer my calls. I had been trying to work things out, but every time I called FAH, they say they 'only listen to what their boss tells them to do'. The boss was some higher up person, who would not speak to me and was never available. They said they 'do not know what it is like to have a warranty because they never owned a new car' and basically patronized me about my demand to have my car properly repaired.

Then all of the sudden Alex called me, the next day, on 4/5/09 regarding my car. I told him that I was at the Capitol Library, and that I had to walk and take the bus, in the cold, to get there. Then all of the sudden, he came to the library, gave me my keys and said my car was parked outside, which he had driven it there, and 'it was no longer damaged'. I did not give anyone permission to drive my car. Alex tried to convince me that the City had confused my car with another car they had damaged.

But why did the City give this person my keys?

A tow truck did not bring me my car, to the public library. Nevertheless, this was embarrassing; I was interrupted in the middle of a class I was teaching in the community meeting room inside the Capitol Library.

I do not feel safe driving my car since this happened because I have no idea what they fixed or replaced and the dealer couldn't find anything, as of late. I feel violated.

My car did not have any numbers marked on it, indicating that it had ever been towed. When I got into my car, I discovered that they changed the station on my radio and that the MP3 disc that was playing had advanced about two hours of playing tracks. This means the car was driven around a great distance.

When I had parked it on Wisconsin Avenue (from where it had been towed), I had 1/2 tank of gas. When I started the car at the library, I only had a quarter tank of gas left. This too, indicates the car was driven. When I inspected the exterior, I discovered a nick/crack in my spoiler that wasn't there previously, to the car 'getting stolen for a joyride'.

Also the speakers in car do not sound the same. It seems that the person(s) who used my car for three days, blew the speakers out, and this may explain why my MP3 disc was not on the track where I had left it. New car speakers will cost \$94.99, the cheaper of two estimates for speakers for my car year, make and model; see print out.

I consider those two days of not having my car as auto theft. I demand a refund of the \$95.00 I paid to retrieve my car from the tow lot on 38th and Lincoln, as I was without a car for three days and it was never in the possession of the city tow lot to merit me having to pay any money in order to get it back.

Enclosed you will find two estimates for the cost to repair the damage to my spoiler (Greenfield Pontiac, \$207.93 AND Auto Collision Specialists, \$212.26).

Also, as suggested by the City Attorney, there are two estimates for the cost to rent a car, similar to mine, from two car rental companies, for the three days I was missing my vehicle (Avis \$208.16 AND National \$246.42).

I request reimbursement for the tow-which never happened to make it to the possession of the city tow lot, and also money to replace the speakers, to fix the spoiler and for a rental car. The lesser of two combined estimates, with the least expensive speakers, and the tow, totals \$606.08. This is the total amount I am asking to settle this. I have enclosed copies of all pertaining estimates for your convenience

Please note that the return address on this document is my permanent mailing address.

I appreciate your time and effort in resolving this issue.  
I may be reached at 414-243-2383, anytime.

Sincerely,



Angela M. Lopez

Estimate #1  
Least Expensive

GREENFIELD PONTIAC BUICK  
3615 S 108TH ST  
MILWAUKEE, WI 53228  
414-545-7000

\*\*\* ESTIMATE \*\*\*

04/07/2009 02:55 PM

**Owner**

Owner: ANGELA LOPEZ  
Address: 2759 N BREMEN STREET  
City State Zip: Milwaukee, WI 53212  
Home/Evening: (414)243-2383  
FAX:

**Inspection**

Inspection Date: 04/07/2009 02:55 PM  
Inspection Type:  
Appraiser Name: Jay Gesell  
Address: 3615 S. 108th St  
City State Zip: Greenfield, WI 53226  
Email: bodyshop@greenfieldpontiac.com  
Appraiser License #:  
Work/Day: (414)290-7181  
FAX: (414)290-7180  
FAX:

**Repairer**

Repairer: John Paul's Greenfield  
Address: 3615 S. 108th St  
City State Zip: Greenfield, WI 53226  
Email: bodyshop@greenfieldgmpartscenter.com  
Contact: Jay Gesell  
Work/Day: (414)290-7181  
Work/Day: (414)545-7000  
FAX: (414)290-7180

**Vehicle**

2007 Pontiac G5 STD 2 DR Coupe  
4cyl Gasoline 2.2  
4 Speed Automatic

Lic.Plate: 530NMS  
Lic Expire:  
Veh Insp#:   
Condition:  
Ext. Color: BLACK  
Ext. Refinish: Two-Stage  
Lic State: WI  
VIN: 1G2AL15F677281919  
Mileage Type: Actual  
Code: W2362A  
Int. Color:  
Int. Refinish: Two-Stage

**Options**

AM/FM CD Player	Air Conditioning	Alarm System
Center Console	Dual Airbags	Floor Mats
Intermittent Wipers	Keyless Entry System	Lighted Entry System
MP3 Player	Mud/Splash Guards	Power Brakes
Power Door Locks	Power Mirrors	Power Steering
Power Windows	Rear Spoiler	Rear Window Defroster
Rem Trunk-L/Gate Release	Tachometer	Theft Deterrent System
Tilt Steering Wheel	Tinted Glass	Trip Computer
Velour/Cloth Seats		

**Damages**

Line	Op	Guide	MC	Description	MFR.Part No.	Price	ADJ%	B%	Hours	R
1	I	494		Spoiler,Deck Lid	Repair				0.3*	SM
2	L	494	#	Spoiler,Deck Lid	Refinish				1.6*	RF
					0.8 Surface					
					0.6 Two-stage setup					

Angela Lopez

				0.2 Two-stage		
3	RI	494	# = 10, 13	Spoiler,Deck Lid	R & I Assembly	0.6 SM
4	N	M60		Hazardous Waste Removal	Additional Labor	\$5.00* SM
4	Items					

<b>MC</b>	<b>Message</b>
10	INCLUDES AUDATEX TIME TO CLEAR ENTIRE PANEL
13	INCLUDES 0.6 HOURS FIRST PANEL TWO-STAGE ALLOWANCE

**Estimate Total & Entries**

Other Parts		\$5.00	
Paint Materials		\$54.40	
<b>Parts &amp; Material Total</b>			\$59.40
Tax on Parts & Material	@ 5.600%		\$3.33

Labor	Rate	Replace Hrs	Repair Hrs	Total Hrs	
Sheet Metal (SM)	\$55.00	0.6	0.3	0.9	\$49.50
Mech/Elec (ME)	\$94.00				
Frame (FR)	\$65.00				
Refinish (RF)	\$55.00	1.6		1.6	\$88.00
Paint Materials	\$34.00				

Labor Total			2.5 Hours	\$137.50
Tax on Labor	@ 5.600%			\$7.70
<b>Gross Total</b>				<b>\$207.93</b>
Net Total				\$207.93

Alternate Parts Y/00/00/00/00 CUM 00/00/00/00/00 Zip Code: 53228 Default

Audatex Estimating 5.0.623 ES 04/07/2009 02:56 PM REL 5.0.623 DT 03/01/2009 DB 04/01/2009  
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0.8 HRS WERE ADDED TO THIS ESTIMATE BASED ON AUDATEX'S TWO-STAGE REFINISH FORMULA.

THIS ESTIMATE HAS BEEN PREPARED BASED ON THE USE OF ONE OR MORE REPLACEMENT PARTS SUPPLIED BY A SOURCE OTHER THAN THE MANUFACTURER OF YOUR MOTOR VEHICLE. WARRANTIES APPLICABLE TO THESE REPLACEMENT PARTS ARE PROVIDED BY THE MANUFACTURER OR DISTRIBUTOR OF THE REPLACEMENT PARTS RATHER THAN BY THE MANUFACTURER OF YOUR MOTOR 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 = Replace Recycled
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 = Chippguard	RI = R & I Assembly	P = Check
AA = Appearance Allowance	RP = Related Prior Damage	

AUTO COLLISION SPECIALISTS  
8280 NORTH TEUTONIA AVENUE  
BROWN DEER, WI 53209  
OFFICE:(414) 355-1900 FAX:(414) 355-1500

*Estimate #2*

CD LOG NO 2513-1 DATE 07/08/09

SHOP: AUTO COLLISION SPECIALISTS INSP DATE: 07/08/09  
ADDRESS: 8280 N. TEUTONIA AVE. CONTACT: TROY DYKSTRA  
CITY STATE: BROWN DEER, WI PHONE 1: (414)355-1900  
ZIP: 53209- FAX: (414)355-1500

OWNER: LOPEZ, ANGELA CELL PHONE: (414)243-2383  
ADDRESS: 2759 N. BREMEN STREET  
CITY STATE: MILWAUKEE, WI  
ZIP: 53212  
EMAIL: ANGELALAGITANA@YAHOO.COM

POINT OF IMPACT: 0

LIC#: 530-NMS STATE: WI VIN: 1G2AL15F677281919  
BODY COLOR: BLACK MILEAGE: 30,123  
CONDITION: EXCELLENT ACCTNG CTL#:

DRIVEABLE: YES VEH. INSP#:

\*=USER-ENTERED VALUE E=REPLACE OEM NG=REPLACE NAGS  
EC=REPLACE ECONOMY UE=REPLACE OE SURPLUS UC=RECONDITIONED PRT  
UM=REMAN/REBUILT PRT EU=REPLACE SALVAGE EP=REPLACE PXN  
OE=REPLACE PXN OE SRPLS PC=PXN RECONDITIONED PM=PXN REMAN/REBUILT  
TE=PARTL REPL PRICE ET=PARTL REPL LABOR IT=PARTIAL REPAIR  
I=REPAIR L=REFINISH BR=BLEND REFINISH  
TT=TWO-TONE CG=CHIPGUARD SB=SUBLET  
N=ADDITIONAL LABOR RI=R&I ASSEMBLY P=CHECK  
AA=APPEAR ALLOWANCE RP=RELATED PRIOR UP=UNRELATED PRIOR

2007 PONTIAC G5 STD 2DOOR COUPE 4CYL GASOLINE 2.2  
CODE: W2362A/C OPTNS D/24CDVL

OPTIONS:

TWO-STAGE - EXTERIOR SURFACES  
POWER DOOR LOCKS  
ELEC REMOTE CONTROL MIRRORS

TWO-STAGE - INTERIOR SURFACES  
POWER WINDOWS  
AIR CONDITIONING

OP	GDE	MC	DESCRIPTION	MFG.PART NO.	PRICE	AJ%	B%	HOURS	R
I	0494		SPOILER,DECK LID	REPAIR				0.5	*1
L	0494	13	SPOILER,DECK LID	REFINISH				2.0	4
SBM	60		HAZARD. WSTE. REM.	SUBLET REPAIR	3.00*				1*

3 ITEMS

MC MESSAGE(S)  
13 INCLUDES 0.6 HOURS FIRST PANEL TWO-STAGE ALLOWANCE

*Angela Lopez*

2007 PONTIAC G5 STD 2DOOR COUPE  
CD LOG NO 2513-1

FINAL CALCULATIONS & ENTRIES

PAINT MATERIAL				68.00
PARTS & MATERIAL TOTAL				68.00
TAX ON PARTS & MATERIAL @			5.600%	3.81

LABOR	RATE	REPLACE HRS	REPAIR HRS	
1-SHEET METAL	52.00		0.5	26.00
2-MECH/ELEC	75.00			
3-FRAME	65.00			
4-REFINISH	52.00	2.0		104.00
5-PAINT MATERIAL	34.00			
LABOR TOTAL				130.00
TAX ON LABOR		@	5.600%	7.28
SUBLET REPAIRS				3.00
TAX ON SUBLET		@	5.600%	0.17
TOWING				
STORAGE				

GROSS TOTAL 212.26

NET TOTAL 212.26

SHOPLINK U1661 ES CD LOG 2513-1 DATE 07/08/09 03:50:27PM R6.37 CD 06/09  
PXN: Y/00/00/00/00/00 CUM 00/00/00/00/00 GEOCODE 53209  
HOST LOG  
(C) 1998 - 2008 AUDATEX NORTH AMERICA, INC.

0.8 HRS WERE ADDED TO THIS EST. BASED ON AUDATEX TWO-STAGE REFINISH FORMULA.

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*Angel Lopez*

#1 Least expensive Estimate

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Hi, angela

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All-New Mail

Help



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- Folders**
- Inbox (2)
  - Drafts (5)
  - Sent
  - Spam [Empty]
  - Trash [Empty]

**Avis Reservation Confirmation**  
 "avisreservations@avis.com" <avisreservations@avis.com>  
 ANGELALAGITANA@YAHOO.COM

Friday, May 15, 2009 10:07 PM

**Chat & Mobile Text**  
 I am Offline

- My Folders** [Add - Edit]
- AAvantange am...
  - autumn
  - career develop...
  - Citcard
  - claves y queso
  - continental ai...
  - discover card (1)
  - dividend miles...
  - e rewards surv...
  - fotos
  - gelco
  - GUARANTEE RECO...
  - Hayward pics06
  - healthy recipe... (6)
  - how to get out... (1)
  - international ...
  - kittle kissers
  - moon is shlnn...
  - must do now
  - netbank (1)
  - ordered stuff
  - patas
  - pics south ame...
  - pline
  - priceline hote...
  - profundez
  - recipes (2)
  - records

**AVIS** We try harder. **Your Avis Reservation Confirmation**

ANGELA LOPEZ,  
 Thank you for choosing Avis for your car rental needs at General Mitchell Field (Milwaukee,WI). We look forward to seeing you on Wed, May 20, 2009 06:00 PM.

For your convenience here are some key facts you should know about your reservation.

**Reservation Quick Facts**

Reservation Number: 25005075US4  
 Pickup date/time: Wed, May 20, 2009 06:00 PM  
 Return date/time: Fri, May 22, 2009 06:00 PM  
 Approximate Total: **208.16 USD\***

\* This total does not reflect any coupons, special services, optional or additional insurance coverages, or products selected at time of reservation. These will be applied at the time of rental.

For complete details on your reservation, simply go [here](#) to view your personal Reservation Confirmation page.

It was our pleasure to assist you today, and we look forward to providing you with a great rental experience. If you need to make any changes to your reservation, please contact us at one of the numbers below:

- If calling from:**
- United States: 1 800 368 6888
  - Canada: 1 800 368 6888
  - Australia: 1300 368 6888
  - New Zealand: 0800 368 6888
  - Auckland: 09 368 6888

Note: If you have reserved counter products such as GPS, please do not make modifications to your reservation online. Contact us direct by telephone for any modifications to ensure your selected products remain on your reservation.

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Angela Lopez



Yahoo! My Yahoo! Mail More

Make Y! My Homepage

Hi, angela

Sign Out

All-New Mail

Help

YAHOO! MAIL Classic

SEARCH

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Return:

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PAID: Dollars A Day

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- Folders**
- Inbox (1)
  - Drafts (5)
  - Sent
  - Spam [Empty]
  - Trash [Empty]

Chat & Mobile Text

I am online

My Folders [Add - Edit]

- AAAdvntange am...
- autumn
- career develop...
- Citicard
- claves y queso
- continental al...
- discover card (1)
- dividend miles...
- e rewbrds surv...
- fotos
- gelco
- GUARANTEE RECO...
- Hayward plcs06
- healthy recp... (6)
- how to get out... (1)
- international ...
- kittie klssers
- moon is shinin...
- must do now
- netbank (1)
- ordered stuff
- patas
- pics south ame...
- pline
- priceline hote...
- profundez
- recipes (2)
- records

**National Car Rental Reservation Confirmation 850042356 for Milwaukee Arpt**

Friday, May 15, 2009 10:00 PM

"reservations@nationalcar.com" <reservations@nationalcar.com>  
angelalagitana@yahoo.com



**National Car Rental**

Rates & Reservations | View | Modify | Cancel | Locations | Vehicles | Specials | Go | Emerald Club

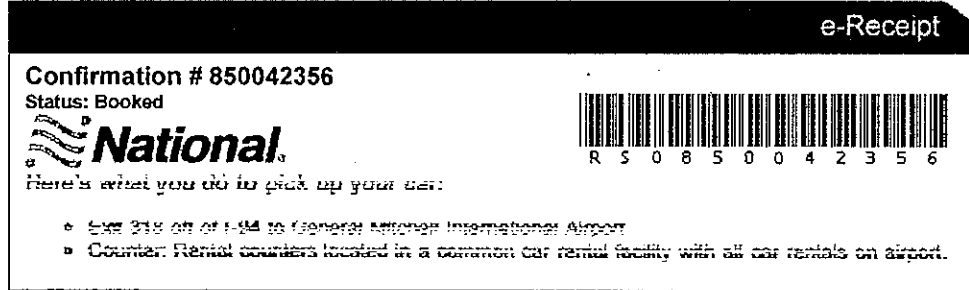
Dear Angela  
Thank you for choosing National to make your reservation.  
Your confirmation number is: **850042356**

Reserved rate reflects the pick-up date and time, return date and time, and car class quoted at time of reservation.  
Any changes to this reservation's only affect the rates quoted herein.

Your level of service is Counter. Please proceed to the rental counter.  
If you need to make a change to this reservation, please use your reservation number as a reference.

**e-Receipt**

**Confirmation # 850042356**  
Status: Booked



Here's what you did to pick up your car:

- Exit 218 off of I-94 to General Mitchell International Airport
- Counter: Rental counters located in a common car rental facility with all car rentals on airport.

**Rental Information**

Name: Angela Lopez  
E-Mail: angelalagitana@yahoo.com

Vehicle Type: Pick-up - 4-Door Automatic - Medium CD or Similar

**Pickup Information**

Location: Milwaukee Arpt (MKE/TOL)  
 Date & Time: Milwaukee, WI, USA - 05/15/09 08:00 AM  
 Address: 5300 S. Hiram Avenue  
 General Mitchell Field  
 Milwaukee, WI 53207  
 Phone: (414) 222-8300  
 Fax: (414) 222-1973  
 Hours:  
 Sun: 07:00 am - 10:00 pm  
 Mon-Fri: 02:00 am - 12:00 am  
 Mon-Fri: 06:00 am - 10:00 pm  
 Sat: 12:00 am - 12:00 am  
 Sat: 06:00 am - 10:00 pm

**Dropoff Information**

Angela Lopez

send earnings  
snapfish  
sun is shining  
sunrise

Location: Milwaukee Arpt (MKET01)  
Date & Time: Friday, May 22, 2009 @ 12:00 PM

Search Shortcuts  
My Photos  
My Attachments

Rate Information

Item: Prices (USD)

Car Class: Midsize 4-Door/Automatic/Air

Rates:					
Time & distance	2 DAY	@	\$95.99	\$191.98	
Time & distance	0 HOUR	@	\$48.00	\$0.00	
Time & distance	0 WEEK	@	\$6/1.93	\$0.00	
Unlimited distance-time & distance	0 DISTANCE	@	\$0.00	\$0.00	

Guaranteed Base Rate Included  
Unlimited Miles Included

Sub total.....\$191.98

Surcharges:

Facility Fee 1.00 Usd/rental	\$1.00
Regional Transit Authority Fee	\$2.00
Concession Recoup Fee 11.11 Pct	\$21.47
Convention Center Tax 3 Pct	\$5.80
W/ rental vehicle see 5 pct	\$10.75
Veh Lic Fee Recovery .65/day	\$1.30

Taxes:  
Sales Tax (5.60%) \$12.14

Total Estimate.....\$246.42  
(Country of Residence: US)  
Approximate Estimated Conversion: \$246.42

Total may vary at time of rental based on the election of prepaid gas, optional coverage items or changes in taxes, surcharges and fees.

Thank you again for choosing National to make your reservation.

Click below to View, Modify or Cancel your Reservation using the Web site.

<http://www.nationalcar.com/index.do?>

[action=resFetch.do&resNumber=850042356&lastName=Lopez&pickUpMonthYr=MAY-2009&pickUpDay=20](http://www.nationalcar.com/index.do?action=resFetch.do&resNumber=850042356&lastName=Lopez&pickUpMonthYr=MAY-2009&pickUpDay=20)

Please note that if you experience any problems with the link, you can visit <http://www.nationalcar.com> and click on "Existing Reservations" from the home page, or you can call **1-800-CAR-RENT**

click here to use toolbar and add this directory to your calendar.

Use toolbar technology for free by following the link provided below. Look for the internet icon located to the left of the Reservation Details information.

<http://www.nationalcar.com/index.do?>

[action=resFetch.do&resNumber=850042356&lastName=Lopez&pickUpMonthYr=MAY-2009&pickUpDay=20](http://www.nationalcar.com/index.do?action=resFetch.do&resNumber=850042356&lastName=Lopez&pickUpMonthYr=MAY-2009&pickUpDay=20)

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Angela Lopez



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**Power Search**

Guided Search

**Manufacturer:**

- [Eclipse \(1\)](#)
- [Rockford Fosgate \(1\)](#)

**Price:**

- [\\$51 - \\$100 \(1\)](#)
- [\\$101 - \\$250 \(1\)](#)

**Availability:**

- [In Stock \(1\)](#)
- [Backorder \(1\)](#)

**Speaker Size:**

- [6" x 9" \(2\)](#)

**Design:**

- [2-way Component System \(2\)](#)

**RMS Power Handling:**

- [51 - 100 watts \(2\)](#)

**Peak Power Handling:**

- [101 - 200 watts \(1\)](#)
- [201 - 300 watts \(1\)](#)

**Impedance (per voice coil):**

- [4 ohms \(2\)](#)

**Sensitivity:**

- [71 - 90 dB \(2\)](#)

**Tweeter Design:**

- [Dome \(2\)](#)

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6" x 9" Component Systems



**Rockford Fosgate Punch P1692S**

**6" x 9" Components / 2-way Speakers**

Free Ground Shipping within the 48 states

6" x 9" Punch Series Component system/2-way Speakers • 120W Max • 60W RMS • Mica injected polypropylene cone • Polyurethane surround • 3 Tweeter configurations: Dual coax, coax/component, dual tweeter component • Cold rolled vented steel frame

(1 review) **★★★★★**

Availability: In Stock - Ships the same or next business day

*Least expensive*

**\$94.99**

Shipping: N/A  
 enter zip to get quote

**+ Add to Cart**



**Eclipse SC6900**

**6" x 9" 2-way Component System**

6" x 9" Component Series Component System • 240W Max • 80W RMS • Glass Fiber-Kevlar cone • Rubber surround • Aluminum cast baskets • Passive crossover networks included • 1" Silk dome tweeters

**\$149.99**

Shipping: N/A  
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Availability: Out of Stock - Backorder

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*Angela Lopez*

City Hall  
200 East wells Street  
Room 301-B  
Milwaukee, WI 53202

CITY OF MILWAUKEE  
2009 NOV 13 AM 11:46  
RONALD D. LEONHARDT  
CITY CLERK

(Re: TOW # 1398682)

Angela M. Lopez  
2038 S. 30<sup>th</sup> street  
Milwaukee, WI 53215

November 2, 2009

Dear Judiciary & Legislation Committee,

I am enclosing a copy of the receipt to repair my car, of additional damages that resulted from the contracted tow company having mishandled my car during a tow on 4/2/09, and keeping it from me for three days while they replaced damaged parts without my permission.

On 4/2/09-4/5/09 Fah Towing and Storage, had damaged my car and apparently drove it for three days, without my permission, and after arguing with me about where and how to repair it. They drove and returned the car to me at a public library and did not even mark any numbers on my car (never made it to the city tow lot?).

The tow lot employees had taken my keys and would not show me my damaged car because the gate was closed (where they alleged my car was). I asked to see the damages to my car, and they said it was too late. They said "the towing company damaged the axel and wheel pole". My father was present as a witness to this.

Previously, I had asked the city to seek reimbursement for the lesser of two combined estimates, with the least expensive speakers and a refund of the tow, which totals \$606.08; then I reviewed the information regarding the waived ticket and tow, and the amount I was asking was corrected to be \$551.08.

The city attorney had waived the parking ticket and advised me to write letters to the city to get reimbursed for the damages as well as missing my car for three days, and did not explain that I was not entitled to a refund of the tow (I had requested a refund of the tow in my initial complaint on the grounds that my car did not make it to the tow lot where I had paid \$95.00; instead FAH Towing and Storage had kept my car for three days, and did what ever they wanted to it.


Within my rights, I had requested reimbursement to replace the blown speakers, to fix the spoiler and for a rental car for three days, a total of \$551.08.

Since the tow, my car has damaged front swaybar kinks (characteristic of front end steering and tire pole damage), and uncommon for low mileage, which I had to have fixed on 11/2/09. Including the additional cost to repair my car, which \$245.26 is itemized on the enclosed receipt, I hereby ask a total amount of \$796.34 to fix the damages caused by FAH Towing.

Please be sure to correct the amount when my claim (090845) is heard on November 23, 2009 by you, the Judiciary & Legislation Committee.

I appreciate your time and effort in resolving this issue; I hope we can arrive at an immediate solution through my clarification of the circumstances surrounding this claim.

Sincerely yours,

  
Angela M. Lopez

GREENFIELD PONTIAC  
3615 S. 108TH STREET  
GREENFIELD, WI 53228  
(414) 645-7000

**Sale**

MID: 542929801872409  
IID: 339246  
11/02/09 13:17:07  
Batch #: 78

# JOHN PAUL'S



Angela Lopez  
2038 S. 30th St.  
Milwaukee, WI 53215

615 S. 108th Street • Greenfield, WI 53228 • Phone: (414) 545-7000 • Fax: (414) 290-7162

MASTERCARD  
XXXXXXXXXXXX4688  
Appr Code: 02185P Inv#: 000013  
Ticket#: 545281  
Total: \$ 245.26

APPROVED 02185P  
Customer Copy  
THANK YOU FOR COMING IN.

ADVISOR <b>STEVEN BUCZAK</b>	TAQ NO. 273	6171	INVOICE DATE 11/02/09	INVOICE NO. PNC5545281
LABOR RATE	LICENSE NO. 530NMS	MILEAGE 46,703	COLOR BLACK/	STOCK NO.
YEAR / MAKE / MODEL 07/PONTIAC/G5/2DR CPE			DELIVERY DATE	DELIVERY MILES
VEHICLE I.D. NO. 1G2AL15F677281919			SELLING DEALER NO.	PRODUCTION DATE
F.T.E. NO.		P.O. NO.	R.O. DATE 11/02/09	REPRINT# 1
RESIDENCE PHONE 414-243-2383	BUSINESS PHONE		COMMENTS	

LABOR & PARTS  
# 1 06PNZ FRONT SUSPENSION TECH(S):249 127.86  
CUSTOMER STATES THERE IS A CLUNK FELT IN THE FRONT OF VEHICLE WHILE DRIVING, LOW SPEEDS OVER BUMPS INSPECT AND DIAGNOSE. FRONT SWAY BAR LINKS NOISY/LOOSE. REPLACED BOTH FRONT SWAYBAR KINKS

PARTS	QTY	FP NUMBER	DESCRIPTION	UNIT PRICE
JOB # 1	2	20784686	LINK 7.240	49.00
JOB # 1 TOTAL PARTS				98.00
JOB # 1 TOTAL LABOR & PARTS				225.86

MISC	CODE	DESCRIPTION	CONTROL NO
JOB # 1	HW	ENVIRONMENTAL COMPLIANCE	
TOTAL MISC			6.39

ESTIMATE  
CUSTOMER HEREBY ACKNOWLEDGES RECEIVING ORIGINAL ESTIMATE OF \$243.00 (+TAX)

COMMENTS  
WAITER

TOTALS  
PARTS DESIGNATED WITH AN ASTERISK (\*) INDICATES LIFETIME GUARANTEE APPLIES FOR CUSTOMER PAY REPAIRS. IF YOU HAVE ANY QUESTIONS REGARDING G.M. GOODWRENCH SERVICE PLUS PLEASE SEE YOUR SERVICE ADVISOR.

TOTAL LABOR	127.86
TOTAL PARTS	98.00
TOTAL SUBLET	0.00
TOTAL G.O.G.	0.00
TOTAL MISC CHG	6.39
TOTAL MISC DISC	0.00
TOTAL TAX	13.01
<b>TOTAL INVOICE \$</b>	<b>245.26</b>



WARRANTY PARTS AND LABOR 1 YEAR OR 12,000 MILES

**Thank You**  
We Appreciate Your Business

\*Ask about after hours pick-up & drop off!

(414) 545-7000

"Any warranties on the products sold hereby are those made by the manufacturer. The seller, JOHN PAUL'S GREENFIELD PONTIAC BUICK GMC, INC., hereby expressly disclaims all warranties, either expressed or implied, including any implied warranty of merchantability or fitness for a particular purpose, and neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of said products."

"Motor vehicle repair trade practices are regulated by chapter ATCP 132, Wis. Adm. Code, administered by the Bureau of Consumer Protection, Wisconsin Dept. of Agriculture, Trade and Consumer Protection, P.O. Box 8911, Madison, Wisconsin 53708-8911"

CUSTOMER SIGNATURE

**PAID**  
NOV 2 2009  
CASH/CK # [Signature]  
CC [Signature]

CITY OF MILWAUKEE

2009 NOV 30 AM 10:07

RONALD D. LEONHARDT  
CITY CLERK

City Hall  
200 East wells Street  
Room 301-B  
Milwaukee, WI 53202

(Re: TOW # 1398682, Hearing 090845)

Angela M. Lopez  
2038 S. 30<sup>th</sup> street  
Milwaukee, WI 53215

November 23, 2009

Dear Judiciary & Legislation Committee,

I am writing to you, having just watched the online live webcast of today's hearing, which I regrettably did not attend and thought I could have participated online via the webcast. This is my first time pursuing such a matter as this one. I had received the notice, on November 6, 2009, that I was invited to hear the committee discuss my claim regarding damage to my car and that I could log on to [www.milwaukee.gov/channel25](http://www.milwaukee.gov/channel25).

Today, I set up my web cam and logged on at 1:30pm, listened and stayed online until my case was called, and regrettably dismissed. I could not find any way to make the committee see that I was present virtually.

I did, however, review the documents on hand at the hearing, including my most recent correspondence, regarding the costs of the additional repairs to my car, posted November 13, 2009. I had checked this site for my documents several days in advance and thought by my letters being available on the city website, they would be read by the committee at today's (webcast) hearing. They were not because I was not there.

I wish to pursue this case, and request a chance at a new hearing.

I hold my grounds to discuss this matter with the Committee because they need to know that the contracted tow company had taken possession of my car for several days, and kept it, despite and my father and I had come and paid the \$95.00 tow fee; they drove it, and returned it to me at a public library, three days later, and not by a tow truck. They had argued with me over the telephone as to how to fix my car with junkyard parts, and even tried to get me to come to their remote storage lot on N. Teutonia and pay them extra storage fees.

I want the city and the Judiciary & Legislation Committee to know that since the negligent tow, my car is not the same: it doesn't drive the same; it has had front end steering problems that were addressed on 11/2/2009 and incurred additional costs. The speakers are blown, and do not sound the same. I wish to replace them. The spoiler has a nick crack in it and I wish to repair it. I hereby ask for \$796.34 to fix the damages caused by FAH Towing from April 2-5, 2009

I appreciate your time and effort in resolving this issue; I hope we can arrive at a reasonable solution through my clarification of the circumstances surrounding this claim.

Sincerely yours,

Angela M. Lopez

Email [angelalagitana@yahoo.com](mailto:angelalagitana@yahoo.com)



City Hall  
200 East wells Street  
Room 301-B  
Milwaukee, WI 53202

(Re: TOW # 1398682)

Angela M. Lopez  
2038 S. 30<sup>th</sup> street  
Milwaukee, WI 53215

November 2, 2009

Dear Judiciary & Legislation Committee,

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I appreciate your time and effort in resolving this issue; I hope we can arrive at an immediate solution through my clarification of the circumstances surrounding this claim.

Sincerely yours,

Angela M. Lopez





## Legislation Details (With Text)

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**File #:** 090931      **Version:** 0

**Type:** Resolution      **Status:** In Committee

**File created:** 12/1/2009      **In control:** JUDICIARY & LEGISLATION COMMITTEE

**On agenda:**      **Final action:**

**Effective date:**

**Title:** Resolution relating to the claim of Damion Kreger for property damage. (2nd Aldermanic District)

**Sponsors:** THE CHAIR

**Indexes:** CLAIMS

**Attachments:** City Attorney Letter.pdf, Claim, Hearing Notice List

Date	Ver.	Action By	Action	Result	Tally
12/1/2009	0	COMMON COUNCIL	ASSIGNED TO		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		

---

**File #:** 090931      **Version:** 0

---

**Number**

090931

**Version**

ORIGINAL

**Reference**

**Sponsor**

THE CHAIR

**Title**

Resolution relating to the claim of Damion Kreger for property damage. (2nd Aldermanic District)

**Requestor**

City Attorney

**Drafter**

JAS:ms

November 2, 2009

1068-2009-2237:151485

**GRANT F. LANGLEY**  
City Attorney

**RUDOLPH M. KONRAD**  
**LINDA ULISS BURKE**  
**VINCENT D. MOSCHELLA**  
Deputy City Attorneys



**THOMAS O. GARTNER**  
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**SUSAN D. BICKERT**  
**STUART S. MUKAMAL**  
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**THOMAS D. MILLER**  
**HEIDI E. GALVÁN**  
**JARELY M. RUIZ**  
**ROBIN A. PEDERSON**  
**DANIELLE M. BERGNER**  
Assistant City Attorneys

November 2, 2009

To the Honorable Common Council  
Of the City of Milwaukee  
Room 205 – City Hall

Re: Resolution Relating to the Claim of Damion Kreger  
C.I. File No. 09-L-89

Dear Council Members:

We return the enclosed document which as been filed with the City Clerk and ask that it be introduce and referred to the Committee on Judiciary & Legislation with the following recommendation.

Claimant, Damion Kreger, 5306 North 62nd Street, Milwaukee, WI 53218, alleges that on August 10, 2009, he sustained damages when a branch from a tree on a City-owned vacant lot broke off and fell onto his vehicle which was parked at 5306 North 62<sup>nd</sup> Street. He claims damages in the amount of \$5,521.35.

Our investigation reveals that the Forestry Division records indicate that on August 10, 2009, they received and responded to an emergency request for service involving a fallen tree branch at 5306 North 62<sup>nd</sup> Street. Upon arrival, their crew found that a 2-inch diameter by 10-foot-long branch from a Box Elder tree located on a City-owned vacant lot had fallen. The tree and limb that the branch fell from were alive. There were no external or internal signs of decay. The division noted that the area had experienced a peak wind speed of 48 miles per hour. They also reviewed the DPW Call Center database for the last 5 years and found no tree related entries. There is no evidence that the City was negligent in this matter. As such, the City would not be liable.

Honorable Common Council  
November 2, 2009  
Page 2

Therefore, we recommend that this claim be denied.

Very truly yours,

GRANT F. LANGLEY  
City Attorney

JAN A. SMOKOWICZ  
Assistant City Attorney

JAS:ms  
Enclosure  
1068-2009-2237:151483

CITY OF MILWAUKEE  
RECEIVED  
2009 AUG 13 PM 2:34

My Detailed Description of the Incident

To Whom it may concern:

On August 9<sup>th</sup>, I, Damion Kreger, was parked in my driveway overnight. My address is: 5306 N. 62<sup>nd</sup> Street, and there is an empty lot to the right (South) of our driveway. In the lot, there is a large tree 15 to 20 feet to the right of our driveway.

On the night of August 9<sup>th</sup>, morning of August 10<sup>th</sup>, around 1:00 A.M., the tree branches broke and landed on my truck. There are a lot of damages to my truck. The lot that the tree is on is city property. The tree is very large and the limbs hung over my driveway 10 to 15 feet. The limbs that fell were rotten at the base of the branches, coming off the tree. Also has large mushrooms and lots of ants where the break was.

On August 9<sup>th</sup> the weather

OFFICE OF  
ATTORNEY

2009 AUG 13 AM 11:29  
RECEIVED  
CITY OF MILWAUKEE  
DANIEL EDWARDS  
CITY OF MILWAUKEE



was stormy, which also was a factor. August 10<sup>th</sup> I called the Milwaukee City Forestry Dept. They came and took pictures of the damages.

They removed the tree limbs off of the driveway and my truck.

Sincerely,  
Damian B. Kreeger

Damion R. Kreeger  
5306 N. 62 St.  
Milw. WI. 53218

Phone # (414) 588-4951



E 0083	PANEL, HOOD	55275733AF	515.00	2.2	1
L 0083	13 PANEL, HOOD	REFINISH		6.0	4
		3.0 SURFACE			
		1.5 EDGE			
		0.6 TWO STAGE SETUP			
		0.9 TWO STAGE			
E 0035	01 LABEL, HOOD	52113745AA	2.15	0.1	1
RI0086	PAD, INSULATOR HOOD	R&I ASSEMBLY		0.4	1
E 0092	RETAINER, HOOD INSULATOR	MULTI-PART	33.60		1
BR0103	FENDER, FRONT	LT BLEND REFINISH		1.2	4
		0.8 BLEND			
		0.4 TWO STAGE			
TT0103	15 FENDER, FRONT	LT TWO TONE		1.0	4
		0.4 TWO TONE SETUP			
		0.6 TWO TONE			
I 0104	FENDER, FRONT	RT REPAIR		2.5*	1
L 0104	FENDER, FRONT	RT REFINISH		2.3	4
		1.9 SURFACE			
		0.4 TWO STAGE			
TT0104	FENDER, FRONT	RT TWO TONE		0.6	4
		0.6 TWO TONE			
RI1039	CABLE, ANTENNA	RT R&I ASSEMBLY		0.3	1
RI0156	SKIRT, INNER FENDER	LT R&I ASSEMBLY		0.6	1
RI0157	SKIRT, INNER FENDER	RT R&I ASSEMBLY		0.4	1
SB0143	WINDSHIELD, SHADED	SUBLET REPAIR	280.00*+25.00		1
	PREMIER AUTO GLASS INCLUDES GLASS AND LABOR				
E 1171	SPACER, WINDSHIELD	LT 55276549AA	6.20	INC	1
E 1172	SPACER, WINDSHIELD	RT 55276549AA	6.20	INC	1
E 0147	BLADE ASSEMBLY, WIPE	LT 55077100AC		INC	1
E 0148	BLADE ASSEMBLY, WIPE	RT 55077100AC		INC	1
E 0145	ARM, WIPER BLADE	LT 55077133AC	42.65	0.1	1
E 0146	ARM, WIPER BLADE	RT 55077132AC	42.65	0.1	1
E 0173	PANEL, COWL TOP	55056006AF	334.00	0.2	1
E 1149	CLIP, COWL TOP PANEL	MULTI-PART	16.80		1
E 1105	MLDG, PILLAR DRIP	LT 55277187AB	49.15	INC	1
E 1106	MLDG, PILLAR DRIP	RT 55277186AB	48.85	INC	1
BR0178	PILLAR, DOOR FRAME R	LT BLEND REFINISH		1.2	4
		0.8 BLEND			
		0.4 TWO STAGE			
BR0179	PILLAR, DOOR FRAME R	RT BLEND REFINISH		1.0	4
		0.9 BLEND			
		0.1 TWO STAGE			
I 1018	PANEL, PLENUM	REPAIR		3.0*	1
	ROLLED DOWN FROM IMPACT				
L 1018	PANEL, PLENUM	REFINISH		0.6	4
		0.5 SURFACE			
		0.1 TWO STAGE			
I 0209	PNL, FRONT DOOR OUTE	LT REPAIR		4.0*	1
L 0209	PNL, FRONT DOOR OUTE	LT REFINISH		2.7	4
		2.7 SURFACE			
		INC TWO STAGE			
TT0209	PNL, FRONT DOOR OUTE	LT TWO TONE		0.8	4

			0.8 TWO TONE		
I 0210	PNL, FRONT DOOR OUTE RT	REPAIR			6.0*1
L 0210	PNL, FRONT DOOR OUTE RT	REFINISH			2.7 4
			2.7 SURFACE		
			INC TWO STAGE		
TT0210	PNL, FRONT DOOR OUTE RT	TWO TONE			0.8 4
			0.8 TWO TONE		
RI0277	W/STRIP, BELT OUTER LT	R&I ASSEMBLY			0.2 1
RI0278	W/STRIP, BELT OUTER RT	R&I ASSEMBLY			0.2 1
RI0231	PNL, INNER DOOR TRIM LT	R&I ASSEMBLY			INC 1
RI0232	PNL, INNER DOOR TRIM RT	R&I ASSEMBLY			INC 1
E 0119	N/PLATE, FRONT DOOR LT	55077336AA	41.55		0.2 1
E 0120	N/PLATE, FRONT DOOR RT	55077336AA	41.55		0.2 1
RI0400	MIRROR, OUTER R/C LT	R&I ASSEMBLY			0.3 1
RI0401	MIRROR, OUTER R/C RT	R&I ASSEMBLY			0.3 1
RI0251	CHANNEL, FRONT GLASS LT	R&I ASSEMBLY			0.2 1
RI0252	CHANNEL, FRONT GLASS RT	R&I ASSEMBLY			0.2 1
RI0227	HANDLE, FRONT DOOR O LT	R&I ASSEMBLY			1.3 1
RI0228	HANDLE, FRONT DOOR O RT	R&I ASSEMBLY			1.3 1
E 0341	PANEL, ROOF	55275816AA	804.00		16.8 1
L 0341	PANEL, ROOF	REFINISH			2.5 4
			2.5 SURFACE		
			INC TWO STAGE		
E 0357	MLDG, ROOF DRIP LT	55277351AA	15.45		INC 1
E 0358	MLDG, ROOF DRIP RT	55277350AA	19.85		INC 1
RI0883	ROOF HEADLINER R & I	R&I ASSEMBLY			INC 1
SB0369	BACK GLASS, TINTED	SUBLET REPAIR	118.00*		1
	PREMIER AUTO GLASS R&I				
EC0370	SEALANT KIT, BACK GLASS	ECONOMY PART	25.00*		INC 1
RI0511	COMPL BED ASSY R & I	R&I ASSEMBLY			3.0 1
RI0548	LAMP, HIGH MOUNTED STOP	R&I ASSEMBLY			INC 1
ECM14	CORROSION PROTECTION	ECONOMY PART		*	0.5*4*
ECM17	COVER CAR EXTERIOR	ECONOMY PART	10.00*		2*
SBM60	HAZARD. WSTE. REM.	SUBLET REPAIR	5.00*		1*
ECM68	CAULK	ECONOMY PART	15.00*		1*
N	GLASS CLEAN UP	ADDNL LABOR OPERA			1.0*1*

63 ITEMS

- MC MESSAGE(S)  
 01 CALL DEALER FOR EXACT PART NUMBER / PRICE  
 13 INCLUDES 0.6 HOURS FIRST PANEL TWO-STAGE ALLOWANCE  
 15 INCLUDES 0.4 HOURS FIRST PANEL TWO-TONE ALLOWANCE

FINAL CALCULATIONS & ENTRIES

GROSS PARTS		2,019.65
OTHER PARTS		50.00
PAINT MATERIAL		812.60
PARTS & MATERIAL TOTAL		2,882.25
TAX ON PARTS & MATERIAL @	5.600%	161.41

LABOR                                      RATE                      REPLACE HRS                      REPAIR HRS

2006 DODGE RAM 150/1500 SLT 2DOOR STANDARD CAB  
CD LOG NO 17454-1

1-SHEET METAL	54.00	29.2	16.5	2,467.80
2-MECH/ELEC	103.00			
3-FRAME	54.00			
4-REFINISH	54.00	23.9		1,290.60
5-PAINT MATERIAL	34.00			
LABOR TOTAL				3,758.40
TAX ON LABOR		@	5.600%	210.47
SUBLET REPAIRS				473.00
TAX ON SUBLET		@	5.600%	26.49
TOWING				
STORAGE				
GROSS TOTAL				7,512.02
NET TOTAL				7,512.02

SHOPLINK U1732 ES CD LOG 17454-1 DATE 08/11/09 10:17:54AM R6.37 CD 07/09  
HOST LOG  
(C) 1998 - 2008 AUDATEX NORTH AMERICA, INC.

2.9 HRS WERE ADDED TO THIS EST. BASED ON AUDATEX TWO-STAGE REFINISH FORMULA.  
AUDATEX TWO-STAGE EXTERIOR THRESHOLD OF 2.5 HOURS WAS CALCULATED IN THIS  
ESTIMATE.

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

NOTICE: WHEN SELECTING A REPAIR FACILITY, THE VEHICLE OWNER SHOULD CONSIDER  
THAT THE REPAIRS TO THIS VEHICLE MAY REQUIRE SPECIFIC WELDING EQUIPMENT AND  
THE RESTORATION OF CORROSIVE RESISTANT COATINGS AS RECOMMENDED BY THE  
MANUFACTURE. FAILURE TO HAVE THE VEHICLE PROPERLY REPAIRED COULD RESULT IN  
A SAFETY HAZARD

**REFLECTIONS AUTO BODY INC.**  
6920 N. 76th Street  
Milwaukee, WI 53223  
(414)358-2110 Fax: (414)358-2232

**PRELIMINARY ESTIMATE**

Written By: DAN BACON  
Adjuster:

<b>Insured:</b> DAMIEN KRUEGER	<b>Claim #</b>
<b>Owner:</b> DAMIEN KRUEGER	<b>Policy #</b>
<b>Address:</b> 5306 N 62ND STREET	<b>Deductible:</b>
MILWAUKEE, WI 53218	<b>Date of Loss:</b>
<b>Evening:</b> (414)588-4951	<b>Type of Loss:</b>
	<b>Point of Impact:</b>

**Inspect**  
**Location:**

**Insurance**  
**Company:**

Days to Repair

2006 DODG RAM 1500 4X2 8-4.7L-FI 2D LONG WHITE/SILV Int:  
**VIN:** 1D7HA16N06J183112 **Lic:** WI **Prod Date:** 02/2006 **Odometer:**  
 Air Conditioning Tilt Wheel Intermittent Wipers  
 Dual Mirrors Clear Coat Paint Power Steering  
 Power Brakes AM Radio FM Radio  
 Stereo Cassette Search/Seek  
 Anti-Lock Brakes (2) Driver Air Bag Passenger Air Bag  
 4 Wheel Disc Brakes Rear Step Bumper 6 Speed Transmission  
 Overdrive Styled Steel Wheels

NO.	OP.	DESCRIPTION	QTY	EXT. PRICE	LABOR	PAINT
1		FENDER				
2*	Rpr	RT Fender			2.0	2.0
3		Add for Clear Coat				0.8
4		FRONT LAMPS				
5	R&I	RT Headlamp assy w/o black bezel			0.4	
6		HOOD & GRILLE				
7	Repl	Hood w/o scoop	1	496.00	1.5	3.2
8		Add for Clear Coat				0.6
9		Add for Underside(Complete)				1.6
10	R&I	R&I grille assy			Incl.	
11#	Rpr	UPPER COWL FLANGE AT SCREEN ATTACHMENT			1.5	
12		ELECTRICAL				
13	R&I	Antenna mast			0.1	
14*	R&I	Adapter			0.2	
15		WINDSHIELD				
16	Repl	Windshield Dodge	1	466.00	Incl.	

**PRELIMINARY ESTIMATE**

2006 DODG RAM 1500 4X2 8-4.7L-FI 2D LONG WHITE/SILV Int:

NO.	OP.	DESCRIPTION	QTY	EXT. PRICE	LABOR	PAINT
17		CAB				
18	Repl	Roof panel	1	804.00	13.5	2.8
19		Overlap Major Adj. Panel				-0.4
20		Add for Clear Coat				0.5
21	Repl	Cowl grille	1	334.00	Incl.	
22	Repl	Seal to cowl	1	23.35		
23	R&I	Headliner w/o overhead console			Incl.	
24	R&I	Rear trim panel gray			0.3	
25*	R&I	RT Upper seal			0.2	
26*	R&I	LT Upper seal			0.2	
27	R&I	RT W'strip on body			Incl.	
28	R&I	LT W'strip on body			Incl.	
29		DOOR				
30*	Rpr	RT Door shell w/o SRT			4.5	2.8
31		Overlap Major Adj. Panel				-0.4
32		Add for Clear Coat				0.5
33	Repl	RT Nameplate "RAM 1500"	1	41.55	0.3	
34	R&I	RT Belt w'strip			0.3	
35	R&I	RT Mirror manual 6x9, black			0.3	
36	R&I	RT Run channel			0.2	
37	R&I	RT Door glass Dodge			0.5	
38	R&I	RT Handle, outside w/o keyless entry			0.3	
39	R&I	RT R&I trim panel			0.5	
40*	Rpr	LT Door shell w/o SRT			5.5	2.8
41		Overlap Major Adj. Panel				-0.4
42*		Add for Clear Coat				0.5
43*	R&I	LT Nameplate "RAM 1500"			0.3	
44	R&I	LT Belt w'strip			0.3	
45	R&I	LT Mirror manual 6x9, black			0.3	
46	R&I	LT Run channel			0.2	
47	R&I	LT Door glass Dodge			0.5	
48	R&I	LT Handle, outside w/o keyless entry			0.3	
49	R&I	LT R&I trim panel			0.5	
50		BACK GLASS				
51	R&I	Back glass Dodge stationary w/o heat			Incl.	
52		REAR LAMPS				
53	R&I	High mount lamp			Incl.	
54#	Repl	Restore Corrosion Protection	1	12.00 T		
55#	Repl	Car Cover/ Mask for Overspray	1	10.00 T		
56#	Subl	Hazardous Waste Disposal	1	5.00 T		
57#	Repl	Urethane Kit	2	50.00 T		
58#	Rpr	Clean & Re-Tape Mldg(s)			0.4	<u>Incl.</u>
59#	R&I	RT & LT ROOF MLDS			0.4	
Subtotals ==>				2241.90	35.5	16.9



08/11/2009 at 09:41 AM  
98049

Job Number:

**PRELIMINARY ESTIMATE**

2006 DODG RAM 1500 4X2 8-4.7L-FI 2D LONG WHITE/SILV Int:

Parts			2164.90
Body Labor	35.5 hrs @ \$ 52.00/hr		1846.00
Paint Labor	16.9 hrs @ \$ 52.00/hr		878.80
Paint Supplies	16.9 hrs @ \$ 32.00/hr		540.80
Sublet/Misc.			77.00
-----			
SUBTOTAL			\$ 5507.50
Sales Tax	\$ 5507.50 @ 5.6000%		308.42
-----			
GRAND TOTAL			\$ 5815.92
ADJUSTMENTS:			
Deductible			0.00
-----			
CUSTOMER PAY			\$ 0.00
INSURANCE PAY			\$ 5815.92

\*\*\*\*\*

Thank You For Your Business.

This is an estimate only. This estimate does not account for hidden or unseen damage. Parts prices may vary and are subject to invoice.

Authorization of Repair

Customer Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

\*\*\*\*\*

MOTOR VEHICLE REPAIR PRACTICES ARE REGULATED BY CHAPTER ATCP 132, WIS. ADM. CODE, ADMINISTERED BY THE BUREAU OF CONSUMER PROTECTION, WISCONSIN DEPT. OF AGRICULTURE, TRADE AND CONSUMER PROTECTION, P.O. BOX 8911, MADISON, WISCONSIN 53708-8911.

08/11/2009 at 09:41 AM  
98049

Job Number:

**PRELIMINARY ESTIMATE**

2006 DODG RAM 1500 4X2 8-4.7L-FI 2D LONG WHITE/SILV Int:

Estimate based on MOTOR CRASH ESTIMATING GUIDE. Unless otherwise noted all items are derived from the Guide DR3TM06, CCC Data Date 07/10/2009, and the parts selected are OEM-parts manufactured by the vehicles Original Equipment Manufacturer. OEM parts are available at OE/Vehicle dealerships. OPT OEM (Optional OEM) or ALT OEM (Alternative OEM) parts are OEM parts that may be provided by or through alternate sources other than the OEM vehicle dealerships. OPT OEM or ALT OEM parts may reflect some specific, special, or unique pricing or discount. OPT OEM or ALT OEM parts may include "Blemished" parts provided by OEM's through OEM vehicle dealerships. Asterisk (\*) or Double Asterisk (\*\*) indicates that the parts and/or labor information provided by MOTOR may have been modified or may have come from an alternate data source. Tilde sign (~) items indicate MOTOR Not-Included Labor operations. Non-Original Equipment Manufacturer aftermarket parts are described as AM, Qual Repl Parts or Comp Repl Parts which stands for Competitive Replacement Parts. Used parts are described as LKQ, Qual Recy Parts, RCY, or USED. Reconditioned parts are described as Recond. Recored parts are described as Recore. NAGS Part Numbers and Benchmark Prices are provided by National Auto Glass Specifications. Labor operation times listed on the line with the NAGS information are MOTOR suggested labor operation times. NAGS labor operation times are not included. Pound sign (#) items indicate manual entries. Some 2010 vehicles contain minor changes from the previous year. For those vehicles, prior to receiving updated data from the vehicle manufacturer, labor and parts data from the previous year may be used. The Pathways estimator has a complete list of applicable vehicles. Parts numbers and prices should be confirmed with the local dealership.

CCC Pathways - A product of CCC Information Services Inc.

MOTORCAR COLLISION  
 8120 W. BRADLEY ROAD  
 MILWAUKEE, WI 53223  
 OFFICE: 414-354-2400 FAX: 414-354-3128

\*\*\* PRELIMINARY ESTIMATE \*\*\*

08/11/2009 10:56 AM

Owner

Owner: DAMION KREGER  
 Address: 5306 N. 62ND ST.  
 City State Zip: Milwaukee, WI 53218

Cell: (414)588-4951  
 FAX:

Inspection

Inspection Date: 08/11/2009 10:47 AM  
 Primary Impact: Hood  
 Driveable: Yes

Inspection Type: Direct Repair Program  
 Secondary Impact: Roof  
 Rental Assisted:

First Contact Date/Time:

Appointment Date/Time: 08/11/2009 10:47 AM

Appraiser Name: JIM KELLER  
 Address:  
 City State Zip:

Appraiser License # :  
 Work/Day: (414)354-2400  
 FAX: (414)354-3128

Repairer

Repairer: Motorcar Crash1  
 Address: 8120 W. Bradley Road  
 City State Zip: Milwaukee, WI 53223  
 Email: JKellerJr@Crash1.com

Contact: Jim Keller  
 Work/Day: (414)354-2400  
 FAX: (414)354-3128

Target Complete Date/Time:

Days To Repair: 12

Vehicle

2006 Dodge Ram 150/1500 SLT 2 DR Standard Cab Short Bed  
 8cyl Gasoline 4.7  
 5 Speed Automatic

Lic Expire:  
 Veh Insp# :  
 Condition:  
 Ext. Refinish: Two-Stage

VIN: 1D7HA16N065183112  
 Mileage Type: Actual  
 Code: N8342A  
 Int. Refinish: Two-Stage

Options

AM/FM CD Player	Air Conditioning	Aluminum/Alloy Wheels
Anti-Lock Rear Brakes	Center Console	Chrome Step Bumper
Cruise Control	Dual Airbags	Heated Power Mirrors
Intermittent Wipers	Keyless Entry System	Lighted Entry System
Power Brakes	Power Door Locks	Power Steering
Power Windows	Split Front Bench Seat	Tachometer
Theft Deterrent System	Tilt Steering Wheel	Tinted Glass
Trip Computer	Velour/Cloth Seats	

Damages

Line	Op	Guide	MC	Description	MFR.Part No.	Price	ADJ%	B%	Hours	R
1	RI	28		Grille Assembly	R & I Assembly				INC	SM
2	E	83	46	Panel,Hood	55275733AF	\$529.00			2.2	SM
3	L	83	13	Panel,Hood	Refinish				6.0	RF
4	NG	143		Windshield,Shaded	NAGS DW1456-GB	\$352.25*			4.3	SM
5	E	1023		Panel,Plenum	55275783AF	\$199.00			2.0	SM

6	L	1023	Panel,Plenum	Refinish		0.6	RF
7	RI	1500	Console,Overhead	R & I Assembly		INC	SM
8	I	207	Door Shell,Front LT	Repair		3.0*	SM
9	L	207	Door Shell,Front LT	Refinish		3.6	RF
10	TT	207	15 Door Shell,Front LT	Two-Tone		1.3	RF
11	I	208	Door Shell,Front RT	Repair		7.0*	SM
12	L	208	Door Shell,Front RT	Refinish		3.6	RF
13	TT	208	Door Shell,Front RT	Two-Tone		0.9	RF
14	RI	246	W/Strip,Frt Door Body RT	R & I Assembly		0.4	SM
15	RI	277	W/Strip,Belt Outer LT	R & I Assembly		0.2	SM
16	RI	278	W/Strip,Belt Outer RT	R & I Assembly		0.2	SM
17	RI	231	Pnl,Inner Door Trim LT	R & I Assembly		INC	SM
18	RI	232	Pnl,Inner Door Trim RT	R & I Assembly		INC	SM
19	E	119	N/Plate,Front Door LT	55077336AA	\$41.55	0.2	SM
20	E	120	N/Plate,Front Door RT	55077336AA	\$41.55	0.2	SM
21	RI	400	Mirror,Outer R/C LT	R & I Assembly		0.3	SM
22	RI	401	Mirror,Outer R/C RT	R & I Assembly		0.3	SM
23	RI	227	Handle,Front Door Otr LT	R & I Assembly		1.3	SM
24	RI	228	Handle,Front Door Otr RT	R & I Assembly		1.3	SM
25	I	341	Panel,Roof	Repair		20.0*	SM
			>> Incl Set Up and Pull Time				
26	L	341	Panel,Roof	Refinish		2.6	RF
27	RI	883	Roof Headliner R & I	R & I Assembly		2.0*	SM
28	RI	548	Lamp,High Mounted Stop	R & I Assembly		0.3	SM
29	N	M14	Corrosion Protection	Additional Labor	\$7.00*	0.3*	SM
30	N	M17	Cover Car Exterior	Additional Labor	\$5.00*	0.2*	RF
31	EC	M29	Glass Installation Kit	Replace Economy	\$25.00*		SM
32	N	M60	Hazardous Waste Removal	Additional Labor	\$5.00*		SM
33	I	M69	Glass Clean Up	Repair		1.5*	SM

33 Items

MC Message

13	INCLUDES 0.6 HOURS FIRST PANEL TWO-STAGE ALLOWANCE
15	INCLUDES 0.4 HOURS FIRST PANEL TWO-TONE ALLOWANCE
46	PRINTABLE ALTERNATE PARTS COMPARE

Estimate Total & Entries

Gross Parts	\$811.10	
Other Parts	\$394.25	
Paint Materials	\$601.60	
Parts & Material Total		\$1,806.95
Tax on Parts & Material	@ 5.600%	\$101.19

Labor	Rate	Replace Hrs	Repair Hrs	Total Hrs	
Sheet Metal (SM)	\$52.00	15.2	31.8	47.0	\$2,444.00
Mech/Elec (ME)	\$85.00				
Frame (FR)	\$52.00				
Refinish (RF)	\$52.00	18.6	0.2	18.8	\$977.60
Paint Materials	\$32.00				

Labor Total		65.8 Hours	\$3,421.60
Tax on Labor	@ 5.600%		\$191.61
Gross Total			\$5,521.35
Net Total			\$5,521.35

Alternate Parts Y/01/00/00/01/01 CUM 01/00/00/01/01 Zip Code: 53223 Default

Audatex Estimating 6.0.025 ES 08/11/2009 11:03 AM REL 6.0.025 DT 07/01/2009 DB 08/08/2009  
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2.9 HRS WERE ADDED TO THIS ESTIMATE BASED ON AUDATEX'S TWO-STAGE REFINISH FORMULA.  
ESTIMATE CALCULATED USING THE 2.5 HOUR MAXIMUM ALLOWANCE FOR TWO-STAGE REFINISH OF NON-FLEX, EXTERIOR SURFACES.

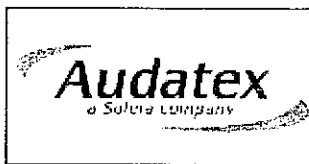
THIS ESTIMATE HAS BEEN PREPARED BASED ON THE USE OF ONE OR MORE REPLACEMENT PARTS SUPPLIED BY A SOURCE OTHER THAN THE MANUFACTURER OF YOUR MOTOR VEHICLE. WARRANTIES APPLICABLE TO THESE REPLACEMENT PARTS ARE PROVIDED BY THE MANUFACTURER OR DISTRIBUTOR OF THE REPLACEMENT PARTS RATHER THAN BY THE MANUFACTURER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

**Op Codes**

\* = User-Entered Value  
EC = Replace Economy  
ET = Partial Replace Labor  
TE = Partial Replace Price  
L = Refinish  
TT = Two-Tone  
BR = Blend Refinish  
CG = Chipguard  
AA = Appearance Allowance

E = Replace OEM  
OE = Replace PXN OE Srpls  
EP = Replace PXN  
PM = Replace PXN Reman/Reblt  
PC = Replace PXN Reconditioned  
SB = Sublet Repair  
I = Repair  
RI = R & I Assembly  
RP = Related Prior Damage

NG = Replace NAGS  
UE = Replace OE Surplus  
EU = Replace Recycled  
UM = Replace Reman/Rebuilt  
UC = Replace Reconditioned  
N = Additional Labor  
IT = Partial Repair  
P = Check

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## Legislation Details (With Text)

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**File #:** 091088      **Version:** 0

**Type:** Resolution      **Status:** In Committee

**File created:** 12/1/2009      **In control:** JUDICIARY & LEGISLATION COMMITTEE

**On agenda:**      **Final action:**

**Effective date:**

**Title:** Resolution relating to an appeal from Celeste Baldwin for property damage. (7th Aldermanic District)

**Sponsors:** THE CHAIR

**Indexes:** CLAIMS APPEAL

**Attachments:** City Attorney Letter, Appeal, Hearing Notice List

Date	Ver.	Action By	Action	Result	Tally
12/1/2009	0	COMMON COUNCIL	ASSIGNED TO		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		

**Number**

091088

**Version**

ORIGINAL

**Reference**

**Sponsor**

THE CHAIR

**Title**

Resolution relating to an appeal from Celeste Baldwin for property damage. (7<sup>th</sup> Aldermanic District)

**Drafter**

CC

dkf

12/1/09



**GRANT F. LANGLEY**  
City Attorney

**RUDOLPH M. KONRAD**  
**LINDA ULISS BURKE**  
**VINCENT D. MOSCHELLA**  
Deputy City Attorneys



**THOMAS O. GARTNER**  
**BRUCE D. SCHRIMPF**  
**SUSAN D. BICKERT**  
**STUART S. MUKAMAL**  
**THOMAS J. BEAMISH**  
**MAURITA F. HOUREN**  
**JOHN J. HEINEN**  
**DAVID J. STANOSZ**  
**SUSAN E. LAPPEN**  
**JAN A. SMOKOWICZ**  
**PATRICIA A. FRICKER**  
**HEIDI WICK SPOERL**  
**KURT A. BEHLING**  
**GREGG C. HAGOPIAN**  
**ELLEN H. TANGEN**  
**MELANIE R. SWANK**  
**JAY A. UNORA**  
**DONALD L. SCHRIEFER**  
**EDWARD M. EHRlich**  
**LEONARD A. TOKUS**  
**MIRIAM R. HORWITZ**  
**MARYNELL REGAN**  
**G. O'SULLIVAN-CROWLEY**  
**KATHRYN Z. BLOCK**  
**MEGAN T. CRUMP**  
**ELOISA DE LEÓN**  
**ADAM B. STEPHENS**  
**KEVIN P. SULLIVAN**  
**BETH CONRADSON CLEARY**  
**THOMAS D. MILLER**  
**HEIDI E. GALVÁN**  
**JARELY M. RUIZ**  
**ROBIN A. PEDERSON**  
**DANIELLE M. BERGNER**  
Assistant City Attorneys

October 26, 2009.

Celeste Baldwin  
4623 North 38th Street  
Milwaukee, WI 53209

RE: Celeste Baldwin  
C.I. File No.: 09-S-370

Dear Ms. Baldwin:

We have received your claim in the amount of \$1,456.22, relating to damage allegedly sustained to your vehicle on October 2, 2009 when a branch from a City tree fell onto it while it was parked at 5537 West Melvina Street.

Our investigation reveals that the Forestry Division records indicate that on October 2, 2009, they received and responded to an emergency request for service involving a fallen branch at 5537 West Melvina Street. Upon arrival, their crew found that a 16-inch diameter by 55-foot long branch from a 33-inch diameter Norway maple tree, located in the right-of-way, had fallen. The tree and limbs were alive and showed no external or internal signs of decay. The division noted that the area had experienced a peak wind speed of 35 miles per hour. They also reviewed the DPW Service Request database for the last 5 years and found no service requests for this tree. The tree is on a regular pruning schedule and was last pruned in 2005. There is no evidence that the City was negligent in this matter. As such, the City would not be liable. Therefore, we are denying your claim.

Celeste Baldwin  
October 26, 2009  
Page 2

If you wish to appeal this decision, you may do so by sending a letter within 21 days of receipt of this letter to the Milwaukee City Clerk, 200 East Wells Street, Room 205, Milwaukee, Wisconsin 53202, requesting a hearing.

Very truly yours,



GRANT F. LANGLEY  
City Attorney

*Steven M. Carini*

STEVEN M. CARINI  
Investigator Adjuster

SMC:ms  
1068-2009-2750:151260

CITY OF MILWAUKEE  
RECEIVED

CITY OF MILWAUKEE

November 11, 2009

2009 NOV

AM 11:49

2009 NOV 24 PM 2:49

RONALD  
CIT

LEONHARDT  
CLERK

OFFICE OF  
CITY ATTORNEY

Milwaukee City Clerk  
200 East Wells Street, Room 205  
Milwaukee, WI 53202

RE: Your File No.: 09-S-370

Dear Clerk:

Please allow this letter to serve as my request that you schedule a hearing in the above-referenced matter. I received a letter from Grant Langley, City Attorney and Steven Carini, Investigator/Adjustor for the city, denying liability for damage caused to my 2004 Mercury Grand Marquis LS vehicle by a huge branch that landed atop it on October 2, 2009. Please see the enclosed. The tree was located on city property.

The reasons for denying my claim were that there was a 35 mile per hour wind that evening, and the branch was not compromised. Please take note that when the city employees arrived to clear the branch that totally enveloped my car, they determined that the entire tree had to be removed due to its condition. It is highly unlikely that the tree was alive and thriving if it needed to be cut out entirely. Also, it would seem that a branch 16", or over a foot in diameter and 55' long, if alive, and not decayed, would not have just blown off with that relatively low level of wind velocity.

The letter of denial also states that the tree was on a regular pruning schedule, but had not been pruned for four years. One wonders about the length of time between prunings on this schedule, and what, if any, inspections are made in between. Certainly, it is evident that no one had inspected the tree in at least four years. As well, there was nothing said about what condition the tree was in when it was pruned, or what recommendations may have been made at that time.

Based upon all of the foregoing, I respectfully request that you set a hearing on this matter.

Sincerely,



Celeste Baldwin

cc: Grant Langley, City Attorney

*Note: Denial letter mailed  
10-29-09 (this is 26 days)-  
let the appeal be processed.  
If problem or questions call  
me at EXT. 2644.*

*Thanks,  
Steve*

(INCLUDE)

CITY OF MILWAUKEE  
2009 NOV 24 AM 11:49  
RONALD D. LEONHARDT  
CITY CLERK

CITY OF MILWAUKEE  
RECEIVED

Sept. 6 - 2009

CITY OF MILWAUKEE

2009 OCT 08 AM 10: 00

2009 OCT -8 PM 2: 33

RONALD D. LEWIS  
CITY CLERK

OFFICE OF  
CITY ATTORNEY

My Name is Celeste Baldwin. I Live  
at. 4623 No 38 St. Milwaukee WI 53209.  
I am the owner of the 2004 Merc. Grand.

Marquis LS. Ultimate.

My Mercury was Parked at My Son House @  
5537 W. Milena 53216. Milwaukee. When a  
Tree Fell on it. My Son Gerald Baldwin  
Call Police They Come Out. Cut the Tree  
Down. That Fell on the Mercury. Home with the  
Claim Paper said to send it in to the City Clerk.  
They also said the Tree was Rated:  
I'm sending in Claim Sheet. And statement from  
Pinkie's Capital. Auto Body Shop.

This Happen on Oct. 2nd 2009.

Here is my Home Phone # 414-464 0892

Celeste Baldwin

10/05/2009 at 01:16 PM  
11794

Job Number:

**PINKEY'S CAPITAL AUTO BODY**  
License #:  
PINKEYS CAPITAL AUTO BODY  
120 W. MELVINA ST.  
MILWAUKEE, WI 53212  
(414)962-3380 Fax: (414)962-0670

**PRELIMINARY ESTIMATE**

Written By: RICKY FEEST  
Adjuster:

Insured: CELEST BALDWIN  
Owner: CELEST BALDWIN  
Address:

Claim #  
Policy #  
Deductible:  
Date of Loss:  
Type of Loss:  
Point of Impact: 12. Front

Day: (414)464-0892

Inspect PINKEY'S CAPITAL AUTO BODY  
Location: 120 W. MELVINA ST.  
MILWAUKEE, WI 53212

Business: (414)962-3380

Insurance  
Company:

Days to Repair

2004 MERC GRAND MARQUIS LS ULTIMATE 8-4.6L-FI 4D SED GOLD Int:

VIN: 2MEFM75WX4X612300 Lic: 62215D WI Prod Date: Odometer:

Air Conditioning	Rear Defogger	Tilt Wheel
Cruise Control	Intermittent Wipers	Elec. Instrumentation
Keyless Entry	Steering Wheel Controls	Body Side Moldings
Dual Mirrors	Overhead Console	Traction Control
Clear Coat Paint	Metallic Paint	Power Steering
Power Brakes	Power Windows	Power Locks
Power Driver Seat	Power Passenger Seat	Power Mirrors
Heated Mirrors	Power Trunk/Gate Release	Power Adjustable Pedals
AM Radio	FM Radio	Stereo
Cassette	Search/Seek	CD Player
Anti-Lock Brakes (4)	Driver Air Bag	Passenger Air Bag
4 Wheel Disc Brakes	Cloth Seats	Automatic Transmission
Overdrive	Aluminum/Alloy Wheels	

NO.	OP.	DESCRIPTION	QTY	EXT. PRICE	LABOR	PAINT
1		HOOD				
2*	Rpr	Hood			3.5	3.0
3		Add for Clear Coat				1.2
4		FENDER				
5	Blnd	RT Fender				1.4
6	Blnd	LT Fender				1.4
7	Repl	RT Nameplate "ULTIMATE EDITION"	1	19.40	0.2	

414-464-0892  
Celeste Baldwin

10/05/2009 at 01:16 PM  
11794

Job Number:

PRELIMINARY ESTIMATE

2004 MERC GRAND MARQUIS LS ULTIMATE 8-4.6L-FI 4D SED GOLD Int:

NO.	OP.	DESCRIPTION	QTY	EXT. PRICE	LABOR	PAINT
8	Repl	LT Nameplate "ULTIMATE EDITION"	1	19.40	0.2	
9		FRONT DOOR				
10	Repl	LT Mirror assy w/o heat	1	133.00	0.5	
11	R&I	LT R&I trim panel			0.4	
12		MISCELLANEOUS OPERATIONS				
13	Repl	Cover car/bag	1		0.2	
14#	Subl	HAND STRIPE RF FENDER	1	65.00 T		
15#	Subl	HAND STRIPE LF FENDER	1	65.00 T		
16#		hazard waste	1	4.00		
17#	Refn	CORROSION PROTECTION				0.3
18#	Subl	PORTER COMPLETE CAR FROM SMALL SCRATCHES	1	200.00 T		
Subtotals ==>				505.80	5.0	7.3

Parts		175.80
Body Labor	5.0 hrs @ \$ 52.00/hr	260.00
Paint Labor	7.3 hrs @ \$ 52.00/hr	379.60
Paint Supplies	7.3 hrs @ \$ 32.00/hr	233.60
Sublet/Misc.		330.00
SUBTOTAL		\$ 1379.00
Sales Tax	\$ 1379.00 @ 5.6000%	77.22
GRAND TOTAL		\$ 1456.22

MOTOR VEHICLE REPAIR PRACTICES ARE REGULATED BY CHAPTER ATCP 132, WIS. ADM. CODE, ADMINISTERED BY THE BUREAU OF CONSUMER PROTECTION, WISCONSIN DEPT. OF AGRICULTURE, TRADE AND CONSUMER PROTECTION, P.O. BOX 8911, MADISON, WISCONSIN 53708-8911.

*Celeste Baldwin*  
414-4640892

10/05/2009 at 01:16 PM  
11794

Job Number:

**PRELIMINARY ESTIMATE**

2004 MERC GRAND MARQUIS LS ULTIMATE 8-4.6L-FI 4D SED GOLD Int:

Estimate based on MOTOR CRASH ESTIMATING GUIDE. Unless otherwise noted all items are derived from the Guide DR2LA03, CCC Data Date 09/09/2009, and the parts selected are OEM-parts manufactured by the vehicles Original Equipment Manufacturer. OEM parts are available at OE/Vehicle dealerships. OPT OEM (Optional OEM) or ALT OEM (Alternative OEM) parts are OEM parts that may be provided by or through alternate sources other than the OEM vehicle dealerships. OPT OEM or ALT OEM parts may reflect some specific, special, or unique pricing or discount. OPT OEM or ALT OEM parts may include "Blemished" parts provided by OEM's through OEM vehicle dealerships. Asterisk (\*) or Double Asterisk (\*\*) indicates that the parts and/or labor information provided by MOTOR may have been modified or may have come from an alternate data source. Tilde sign (~) items indicate MOTOR Not-Included Labor operations. Non-Original Equipment Manufacturer aftermarket parts are described as AM, Qual Repl Parts or Comp Repl Parts which stands for Competitive Replacement Parts. Used parts are described as LKQ, Qual Recy Parts, RCY, or USED. Reconditioned parts are described as Recond. Recored parts are described as Recore. NAGS Part Numbers and Benchmark Prices are provided by National Auto Glass Specifications. Labor operation times listed on the line with the NAGS information are MOTOR suggested labor operation times. NAGS labor operation times are not included. Pound sign (#) items indicate manual entries. Some 2010 vehicles contain minor changes from the previous year. For those vehicles, prior to receiving updated data from the vehicle manufacturer, labor and parts data from the previous year may be used. The Pathways estimator has a complete list of applicable vehicles. Parts numbers and prices should be confirmed with the local dealership.

CCC Pathways - A product of CCC Information Services Inc.

*Celeste Balonin*  
10/05/2009 11:16 AM

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 on the reverse side 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.
3. As detailed a description of the incident as possible, including the date, time and place.  
OCT 2 - 2009

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.



414-464-0892  
Celeste Balsman







## Legislation Details (With Text)

**File #:** 090981      **Version:** 0  
**Type:** Resolution      **Status:** In Committee  
**File created:** 12/1/2009      **In control:** JUDICIARY & LEGISLATION COMMITTEE  
**On agenda:**      **Final action:**  
**Effective date:**

**Title:** Resolution relating to an appeal from Rosslind Prescott-Allen for property damage. (5th Aldermanic District)

**Sponsors:** THE CHAIR

**Indexes:** CLAIMS APPEAL

**Attachments:** City Attorney Letter, Appeal, Hearing Notice List

Date	Ver.	Action By	Action	Result	Tally
12/1/2009	0	COMMON COUNCIL	ASSIGNED TO		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
12/9/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		

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**File #:** 090981      **Version:** 0

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Number  
090981  
Version  
ORIGINAL  
Reference

Sponsor  
THE CHAIR

Title  
Resolution relating to an appeal from Rosslind Prescott-Allen for property damage. (5<sup>th</sup> Aldermanic District)

Drafter  
City Atty.  
Dkf  
11/18/09

**GRANT F. LANGLÉY**  
City Attorney

**RUDOLPH M. KONRAD**  
**LINDA ULISS BURKE**  
**VINCENT D. MOSCHELLA**  
Deputy City Attorneys



**THOMAS O. GARTNER**  
**BRUCE D. SCHRIMPF**  
**SUSAN D. BICKERT**  
**STUART S. MUKAMAL**  
**THOMAS J. BEAMISH**  
**MAURITA F. HOUREN**  
**JOHN J. HEINEN**  
**DAVID J. STANOSZ**  
**SUSAN E. LAPPEN**  
**JAN A. SMOKOWICZ**  
**PATRICIA A. FRICKER**  
**HEIDI WICK SPOERL**  
**KURT A. BEHLING**  
**GREGG C. HAGOPIAN**  
**ELLEN H. TANGEN**  
**MELANIE R. SWANK**  
**JAY A. UNORA**  
**DONALD L. SCHRIEFER**  
**EDWARD M. EHRlich**  
**LEONARD A. TOKUS**  
**MIRIAM R. HORWITZ**  
**MARYNELL REGAN**  
**G. O'SULLIVAN-CROWLEY**  
**KATHRYN Z. BLOCK**  
**MEGAN T. CRUMP**  
**ELOISA DE LEÓN**  
**ADAM B. STEPHENS**  
**KEVIN P. SULLIVAN**  
**BETH CONRADSON CLEARY**  
**THOMAS D. MILLER**  
**HEIDI E. GALVÁN**  
**JARELY M. RUIZ**  
**ROBIN A. PEDERSON**  
**DANIELLE M. BERGNER**  
Assistant City Attorneys

October 30, 2009

Rosslind Prescott-Allen  
11316 West Bobolink Avenue  
Milwaukee, WI 53225

RE: Rosslind Prescott-Allen  
C.I. File No.: 09-S-345

Dear Ms. Prescott-Allen:

We have received your claim in the amount of \$1,849.40, relating to damages to your vehicle when it was allegedly struck by an object thrown by a City lawnmower on September 2, 2009 at 8465 West Fond du Lac Avenue.

Our investigation reveals that the Forestry Section was mowing a buffer swale on the date and at the location in question. The employee assigned to this location had no knowledge of any debris being discharged. Our office also spoke with a Forestry Section Manager and she noted the section had checked the area prior to mowing. The section followed its other standard procedures for this type of operation. Since the City was not negligent in this matter, it cannot accept liability and we are denying your claim.

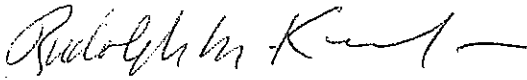
OFFICE OF THE CITY ATTORNEY

Milwaukee City Hall Suite 800 • 200 East Wells Street • Milwaukee, Wisconsin 53202-3551 • Telephone: 414.286.2601 • TDD: 414.286.2025 • Fax: 414.286.8550

Rosslind Prescott-Allen  
October 30, 2009  
Page 2

If you wish to appeal this decision, you may do so by sending a letter within 21 days of receipt of this letter to the Milwaukee City Clerk, 200 East Wells Street, Room 205, Milwaukee, Wisconsin 53202, requesting a hearing.

Very truly yours,



GRANT F. LANGLEY  
City Attorney



ROBERT OVERHOLT  
Investigator Adjuster

RMO:ms  
1068-2009-2514:151482

November 13, 2009  
Milwaukee City Clerk  
200 East Wells Street Room 205  
Milwaukee, WI 53202

CITY OF MILWAUKEE  
CITY OF MILWAUKEE RECEIVED  
2009 NOV 16 PM 12: 21 2009 NOV 16 PM 2: 49

RONALD D. LEONHART  
CITY CLERK  
OFFICE OF  
CITY ATTORNEY

To Whom It May Concern:

As a taxpayer of the city of Milwaukee and a victim of an accident caused by a city lawn mower operator, I am disappointed with the lies that have been created, by the higher ups to cover up the negligence of the City of Milwaukee Forestry division and out right denial of my claim to recover damages to my car.

On September 2<sup>nd</sup> 2009 at approximately 9:00 a.m. my car was struck (and almost me) by a metal cable anchor that should have been removed prior to mowing. The median that the city workers were mowing had not been mowed for a long time and was full of trash and debris. No one bothered to remove any of the trash and debris prior to mowing.

We were very frighten by this incident and I thank God that my daughter or me were not injured. My daughter and I were sitting in my parked car waiting for my granddaughter. A few minutes into the mowing all of a sudden there was a loud bomb like a gunshot as my car shook like an earthquake. A metal object was hit by the city lawnmower and was sent air born at a high speed and just missed hitting me in the head. The metal object ended up hitting my drivers side car door and ricocheted towards the rear of the car causing several dents on the drivers side of my car before falling to the ground.

The two City employees that were mowing the lawn immediately jumped off of their mowers and rushed over to see if we were ok. The city worker then combed through the trashy grass and picked up what they called a metal anchor hook. Operator Ron Hauper then stated that he had hit the metal anchor hook and he saw it fly from up under his mower and hit my car. Operator Jimmy Wilson also explained that these things happen all the time and apologized over and over again, Stating not to worry that they would take care of my damages. I said I need to call the police but I had no cell phone with me. He immediately made a phone call and said that some one is already on the way. He also thanked me for not being rude to them.

While we were waiting Witness Antwanetta Madison who resides at 8465 W. Fond du Lac Ave. Argued with operator Jimmy Wilson about why didn't they or someone come and remove the debris and trash before they began mowing over it. She as well as others are also willing to testify that they did not clear the area of trash and debris before mowing. I have a signed statement from her and others.

Supervisor Ted Mueller arrived on the scene and said that it was not necessary to call the police because he was there to represent the City of Milwaukee and me and to write up the report. Ron Hauper gave Mr. Mueller the metal object that he hit with the mower that then hit my car. Mr. Mueller again assured me that he would take care of everything and that we did not need to involve the police. He wrote notes on a property damage report and took photos. Mr. Mueller then handed me a sheet of paper with directions to file a claim. He told me to follow the instructions on the form and said that once he turned in his report the city will pay the claim. This was all a scam for me not to contact the police!

Mr. Mueller then told me to go to two auto body shops and get estimates done and submit them with my claim and they would cover the damages. I trusted what the supervisor said, since he arrived in a city truck, appeared professional and assured me that he would take care of everything admitting that it was their fault. I did take photos of the report he filled out, the car and the area.

Since then I received a disturbing letter from the office of the City attorney stating that their investigation revealed that they checked the area prior to mowing and that the employee assigned to the location had no knowledge of any debris being discharged. Both statements are not true and I have a written statement from the employee stating that on 9-2-09 while mowing on Fon Du Lac Ave. object flew from his mower and struck my car and that it was a cable hook that should have been removed.

**There fore I would like to appeal this decision and I am sending this letter to do so. I do have several witnesses, the signed and dated statements from Mr. Hauper admitting that he caused the accident and admits that the anchor should have removed which proves negligence.**

I also have copies of letters from Mr. David B. Slyver Forestry Services Manager to Mr. Grant F. Langley, which is full of lies proving the attempt to cover up the truth. One letter states that the employee had no knowledge of any debris being discharged and another letter that does not include this statement. I have copies of both letters. He also states that an individual approached the worker as he was mowing but the workers actually approached me! In a conversation on 11-11-09 with Mr. Slyver, he claims that he will correct the letter but that I will have to request it from the court.

I met with Liz Kieren Urban Forestry Manager and Ted Mueller on 11-9-09 who have turned over to me my files, which include most everything. Liz made an attempt to defend the letter and the negligence but the employee again came forward and openly and honestly admitted everything! I have had several conversations with Robert Overholt who has been rude and is also denying that they were not negligent and says it's not the city's fault because they did their job by damaging my car! He says I should have my insurance to take care of it! "Because we are not going to." They are all creating lies and as he stated I'm standing behind it! They are willing to do anything to avoid the responsibility of negligence and payment

It is my hopes that you can see that it is obvious that there was negligence or the incident would have never occurred. I have proof that the area was not checked or cleaned up prior to the employees mowing.

I would also argue that It is not reasonable to say that there is not negligence when a self mulching feature or mower that does not have a blower that is self contained could have been used to not cause damage to someone, or something such as a persons car or other property.

The city is lucking that we were not severely injured from the negligence and having to pay doctor, hospital bills or for God forbid a death claim as well! Proper measures were not taken to avoid an accident from happening and these things should be addressed to avoid accidents of this kind in the future. Please pay for the damages to my car! May God Bless you. I am requesting a hearing.

Sincerely,



Rosslind Prescott-Allen  
11316 W. Bobolink Ave.  
Milwaukee, WI 53225  
C.I. File No.: 09-S-345

414-540-2221 work  
414-916-9994 cell  
414-760-2939 Home

September 10, 2009

Dear City Clerk,

On Wednesday, September 2, 2009 on or about 9:00 a.m. I was sitting in my car, which was parked in front of 8465 W. Fond Du Lac Ave. Milwaukee, WI. when a city lawn mower hit a metal cable anchor in the high grass where they were mowing. The metal anchor flew at a very high speed and hit my passenger driver's side door and then ricocheted towards the trunk of the car. This caused several dents and scratches on the car. The taillight also cracked as a result of the metal anchor hitting the vehicle.

The vehicle is owned by myself, Rossling Prescott Allen my home address is 11316 W. Bobolink Ave. Milwaukee, WI 53225. I am looking to have the city pay for the damages to my vehicle during this incident. I have received an estimate from Reflections Auto Body Inc. to repair the damages for \$1849.00. I received a second estimate from Prestige Auto Works \$2287.00 I have enclosed both estimates.



Rosslind Prescott Allen  
11316 W. Bobolink Ave.  
Milwaukee, WI 53225  
414-540-2221 Work  
414-916-9994 Cell  
414-760-2939 Home

CITY OF MILWAUKEE  
CITY OF MILWAUKEE  
RECEIVED  
2009 SEP 14 AM 11:29  
RONALD D. LEONHARDT  
CITY CLERK  
OFFICE OF  
CITY ATTORNEY  
2009 SEP 15 PM 2:34



PRESTIGE AUTO WORKS AND FINISHES INC  
 6301 W DOUGLAS AVENUE  
 MILWAUKEE, WI. 53218  
 PHONE 414-466-2111 FAX 414-466-9992  
 FEDERAL ID# 39-1661-727

CD LOG NO 22056-1 DATE 09/04/09

SHOP: PRESTIGE AUTO WORKS INSP DATE: 09/04/09  
 ADDRESS: 6301 W DOUGLAS AVE CONTACT: SHAUN  
 CITY STATE: MILWAUKEE, WI PHONE 1: (414) 466-2111  
 ZIP: 53218- FAX: (414) 466-9992

OWNER: PRESCOTT-ALLEN, ROSSLIND HOME PHONE: (414) 760-2939  
 ADDRESS: 11316 W BOBOLINK AVE WORK PHONE: (414) 540-2221  
 CITY STATE: MILWAUKEE, WI CELL PHONE: (414) 916-9994  
 ZIP: 53225

POINT OF IMPACT: 6

LIC#: 744-NGU STATE: WI VIN: 1FAFP56S9YG210326  
 BODY COLOR: SILVER MILEAGE: 188,416  
 CONDITION: ACCTNG CTL#:

*=USER-ENTERED VALUE	E=REPLACE OEM	NG=REPLACE NAGS
EC=REPLACE ECONOMY	UE=REPLACE OE SURPLUS	UC=RECONDITIONED PRT
UM=REMAN/REBUILT PRT	EU=REPLACE SALVAGE	EP=REPLACE PXN
OE=REPLACE PXN OE SRPLS	PC=PXN RECONDITIONED	PM=PXN REMAN/REBUILT
TE=PARTL REPL PRICE	ET=PARTL REPL LABOR	IT=PARTIAL REPAIR
I=REPAIR	L=REFINISH	BR=BLEND REFINISH
TT=TWO-TONE	CG=CHIPGUARD	SB=SUBLET
N=ADDITIONAL LABOR	RI=R&I ASSEMBLY	P=CHECK
AA=APPEAR ALLOWANCE	RP=RELATED PRIOR	UP=UNRELATED PRIOR

MORE DAMAGE POSSIBLE TEAR DOWN AND INSPECT

2000 FORD TAURUS SE COMFORT 4DOOR SEDAN 6CYL GASOLINE 3.0 DOHC  
 CODE: P3533E/A OPTNS D/24ACDGJMO

OPTIONS:  
 TWO-STAGE - EXTERIOR SURFACES TWO-STAGE - INTERIOR SURFACES  
 DRIVER POWER SEAT HEATED REMOTE CONTROL MIRRORS  
 POWER DOOR LOCKS ANTI-LOCK BRAKE SYSTEM  
 CLIMATE CONTROLLED A/C ALARM SYSTEM  
 CRUISE CONTROL

OP	GDE	MC	DESCRIPTION	MFG. PART NO.	PRICE	AJ%	B%	HOURS	R
BR0170			PANEL, BODYSIDE OTR	LT BLEND REFINISH 0.5 BLEND 0.2 TWO STAGE				0.7	4
RI0245			DEFLECTOR, ROCKER PA	LT R&I ASSEMBLY				0.3	1
BR0255			DOOR SHELL, FRONT	LT BLEND REFINISH 0.9 BLEND				1.3	4

		0.4 TWO STAGE		
RI0231	PNL, INNER DOOR TRIM	LT R&I ASSEMBLY		INC 1
RI0273	MLDG, FRONT DOOR BEL	LT R&I ASSEMBLY		0.2 1
E 0018	MLDG, FRONT DOOR SID	LT 2F1Z5420939PTM	58.25	0.6 1
L 0018	13 MLDG, FRONT DOOR SID	LT REFINISH		1.4 4
		0.7 SURFACE		
		0.6 TWO STAGE SETUP		
		0.1 TWO STAGE		
RI0229	MIRROR, OUTER R/C	LT R&I ASSEMBLY		0.3 1
RI0227	HANDLE, FRONT DOOR O	LT R&I ASSEMBLY		0.8 1
I 0289	PNL, REAR DOOR OUTER	LT REPAIR		8.0*1
L 0289	PNL, REAR DOOR OUTER	LT REFINISH		2.2 4
		1.8 SURFACE		
		0.4 TWO STAGE		
RI0338	MLDG, REAR DOOR BELT	LT R&I ASSEMBLY		0.2 1
E 0020	MLDG, REAR DOOR SIDE	LT 2F1Z5425533PTM	46.28	0.6 1
L 0020	MLDG, REAR DOOR SIDE	LT REFINISH		0.5 4
		0.4 SURFACE		
		0.1 TWO STAGE		
RI0307	PNL, INNER DOOR TRIM	LT R&I ASSEMBLY		INC 1
RI0305	HANDLE, RR DOOR OUTE	LT R&I ASSEMBLY		0.6 1
RI0271	MLDG, ROOF SIDE	LT R&I ASSEMBLY		0.3 1
I 0389	PANEL, QUARTER	LT REPAIR		3.0*1
L 0389	PANEL, QUARTER	LT REFINISH		2.6 4
		2.2 SURFACE		
		0.4 TWO STAGE		
RI0184	ANTENNA, QUARTER PAN	LT R&I ASSEMBLY		0.5 1
RI0395	QTR GLASS R & I	LT R&I ASSEMBLY		2.0*1
E 0533	TAILLAMP ASSEMBLY	LT 3F1Z13405DA	116.73	0.3 1
RI0566	REAR BUMPER COVER R&I	R&I ASSEMBLY		1.9 1
L M14	CORROSION PROTECTION	REFINISH		0.5*4*
ECM29	GLASS INSTALL. KIT	ECONOMY PART	25.00*	1*
SBM60	HAZARD. WSTE. REM.	SUBLET REPAIR	4.00*	1*
EC	BUMPER RETAINERS	ECONOMY PART	12.50*	1*
L	MASK JAMS	REFINISH		0.3*4*

28 ITEMS

MC MESSAGE(S)  
 13 INCLUDES 0.6 HOURS FIRST PANEL TWO-STAGE ALLOWANCE

FINAL CALCULATIONS & ENTRIES

GROSS PARTS		221.26
OTHER PARTS		37.50
PAINT MATERIAL		332.50
PARTS & MATERIAL TOTAL		591.26
TAX ON PARTS & MATERIAL @	5.600%	33.11

LABOR	RATE	REPLACE HRS	REPAIR HRS	
1-SHEET METAL	54.00	8.6	11.0	1,058.40
2-MECH/ELEC	95.00			
3-FRAME	55.00			
4-REFINISH	54.00	9.5		513.00

2000 FORD TAURUS SE COMFORT 4DOOR SEDAN  
CD LOG NO 22056-1

5-PAINT MATERIAL	35.00		
LABOR TOTAL			1,571.40
TAX ON LABOR	@	5.600%	88.00
SUBLET REPAIRS			4.00
TAX ON SUBLET	@	5.600%	0.22
TOWING			
STORAGE			
GROSS TOTAL			2,287.99
NET TOTAL			2,287.99

SHOPLINK U2834 ES CD LOG 22056-1 DATE 09/04/09 04:27:01PM R6.37 CD 07/09  
PXN: Y/00/00/00/00/00 CUM 00/00/00/00/00 GEOCODE 53218  
HOST LOG  
(C) 1998 - 2008 AUDATEX NORTH AMERICA, INC.

2.2 HRS WERE ADDED TO THIS EST. BASED ON AUDATEX TWO-STAGE REFINISH FORMULA.

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

THIS ESTIMATE HAS BEEN PREPARED BASED ON A VISUAL INSPECTION. ACTUAL REPAIRS MAY REQUIRE ADDITIONAL PARTS AND LABOR DUE TO HIDDEN DAMAGE. THEREFORE WE CANNOT GUARANTEE A FINAL PRICE PRIOR TO COMPLETION NOR A FINAL COMPLETION TIME. YOU WILL BE NOTIFIED OF ADDITIONAL COST. ESTIMATE VALID FOR 30 DAYS. PARTS PRICES SUBJECT TO CHANGE WITHOUT NOTICE FROM MFG. YOU ARE RESPONSIBLE FOR FULL PAYMENT UPON COMPLETION. STORAGE FEES ARE \$20/DAY. NO PERSONAL CHECKS ACCEPTED. NON OEM PARTS ARE IDENTIFIED AS "ECONOMY" OR "QUALITY REPLACEMENT PART". PAW NOT RESPONSIBLE FOR PERSONAL PROPERTY LOST OR DAMAGED DURING REPAIRS. I HAVE READ, UNDERSTAND, AND RECEIVED A COPY OF THIS ESTIMATE AND AUTHORIZE REPAIRS, INCLUDING SUBLET.

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

REFLECTIONS AUTO BODY INC.  
6920 N. 76th Street  
Milwaukee, WI 53223  
(414)358-2110 Fax: (414)358-2232

PRELIMINARY ESTIMATE

Written By: DAN BACON  
Adjuster:

Insured: ROSSLIND PRESCOTT ALLEN	Claim #
Owner: ROSSLIND PRESCOTT ALLEN	Policy #
Address: 11316 W BOBOLINK AVE	Deductible:
MILWAUKEE, WI	Date of Loss:
Evening: (414)760-2939	Type of Loss:
Business: (414)540-2221	Point of Impact:

Inspect  
Location:

Insurance  
Company:

Days to Repair

2000 FORD TAURUS SE COMFORT 6-3.0L-FI 4D SED SILVER Int:  
VIN: 1FAFP56S9YG210326 Lic: 744NGU WI Prod Date: 04/2000 Odometer: 188401

Air Conditioning	Rear Defogger	Tilt Wheel
Cruise Control	Intermittent Wipers	Climate Control
Keyless Entry	Alarm	Dual Mirrors
Console/Storage	Clear Coat Paint	Power Steering
Power Brakes	Power Windows	Power Locks
Power Driver Seat	Power Mirrors	Heated Mirrors
AM Radio	FM Radio	Stereo
Cassette	Search/Seek	Anti-Lock Brakes (4)
Driver Air Bag	Passenger Air Bag	Cloth Seats
Bucket Seats	Automatic Transmission	Overdrive
Aluminum/Alloy Wheels		

NO.	OP.	DESCRIPTION	QTY	EXT. PRICE	LABOR	PAINT
1		REAR DOOR				
2*	Rpr	LT Outer panel			6.5	2.2
3		Add for Clear Coat				0.9
4	R&I	LT Belt w'strip sedan			0.3	
5*	R&I	LT Body side mldg primed			0.3	
6#	Rpr	Clean & Re-Tape Mldg(s)				0.2
7	R&I	LT Handle, outside primed			0.4	
8	R&I	LT R&I trim panel			0.4	
9		QUARTER PANEL				
10*	Rpr	LT Quarter panel			7.5	2.2
11		Overlap Major Adj. Panel				-0.4
12		Add for Clear Coat				0.4
13		REAR LAMPS				
14	Repl	LT Tail lamp assy	1	116.73	0.4	

PRELIMINARY ESTIMATE

2000 FORD TAURUS SE COMFORT 6-3.0L-FI 4D SED SILVER Int:

NO.	OP.	DESCRIPTION	QTY	EXT.	PRICE	LABOR	PAINT
15		REAR BUMPER					
16	R&I	Bumper cover				1.6	
17		FRONT DOOR					
18	Blnd	LT Outer panel					1.1
19*	R&I	LT Body side mldg primed				0.3	
20#	Rpr	Clean & Re-Tape Mldg(s)					0.2
21	R&I	LT Mirror w/o heated glass				0.4	
22	R&I	LT Handle, outside w/keyless entry primed				0.4	
23	R&I	LT R&I trim panel				0.5	
24	R&I	LT Belt w'strip sedan				0.3	
25#	Repl	Restore Corrosion Protection	1		12.00 T		
26#	Repl	Car Cover/ Mask for Overspray	1		10.00 T		
27#	Subl	Hazardous Waste Disposal	1		5.00 T		
28#	Repl	Stripe Tape	1		12.00 T	0.4	
Subtotals ==>					155.73	19.7	6.8

Parts		116.73
Body Labor	19.7 hrs @ \$ 52.00/hr	1024.40
Paint Labor	6.8 hrs @ \$ 52.00/hr	353.60
Paint Supplies	6.8 hrs @ \$ 32.00/hr	217.60
Sublet/Misc.		39.00

SUBTOTAL		\$ 1751.33
Sales Tax	\$ 1751.33 @ 5.6000%	98.07
GRAND TOTAL		\$ 1849.40

ADJUSTMENTS:		
Deductible		0.00

CUSTOMER PAY		\$ 0.00
INSURANCE PAY		\$ 1849.40

Job Number:

09/04/2009 at 08:59 AM  
38049

PRELIMINARY ESTIMATE  
2000 FORD TAURUS SE COMFORT 6-3.0L-FI 4D SED SILVER Int:

\*\*\*\*\*

Thank You For Your Business.

This is an estimate only. This estimate does not account for hidden or unseen damage. Parts prices may vary and are subject to invoice.

Authorization of Repair

Customer Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

\*\*\*\*\*

MOTOR VEHICLE REPAIR PRACTICES ARE REGULATED BY CHAPTER ATCP 132, WIS. ADM. CODE, ADMINISTERED BY THE BUREAU OF CONSUMER PROTECTION, WISCONSIN DEPT. OF AGRICULTURE, TRADE AND CONSUMER PROTECTION, P.O. BOX 8911, MADISON, WISCONSIN 53708-8911.

Estimate based on MOTOR CRASH ESTIMATING GUIDE. Unless otherwise noted all items are derived from the Guide DR2JN00, CCC Data Date 07/10/2009, and the parts selected are OEM-parts manufactured by the vehicles Original Equipment Manufacturer. OEM parts are available at OE/Vehicle dealerships. OPT OEM (Optional OEM) or ALT OEM (Alternative OEM) parts are OEM parts that may be provided by or through alternate sources other than the OEM vehicle dealerships. OPT OEM or ALT OEM parts may reflect some specific, special, or unique pricing or discount. OPT OEM or ALT OEM parts may include "Blemished" parts provided by OEM's through OEM vehicle dealerships. Asterisk (\*) or Double Asterisk (\*\*) indicates that the parts and/or labor information provided by MOTOR may have been modified or may have come from an alternate data source. Tilde sign (~) items indicate MOTOR Not-Included Labor operations. Non-Original Equipment Manufacturer aftermarket parts are described as AM, Qual Repl Parts or Comp Repl Parts which stands for Competitive Replacement Parts. Used parts are described as LKQ, Qual Recy Parts, RCY, or USED. Reconditioned parts are described as Recond. Recored parts are described as Recore. NAGS Part Numbers and Benchmark Prices are provided by National Auto Glass Specifications. Labor operation times listed on the line with the NAGS information are MOTOR suggested labor operation times. NAGS labor operation times are not included. Pound sign (#) items indicate manual entries. Some 2010 vehicles contain minor changes from the previous year. For those vehicles, prior to receiving updated data from the vehicle manufacturer, labor and parts data from the previous year may be used. The Pathways estimator has a complete list of applicable vehicles. Parts numbers and prices should be confirmed with the local dealership.

CCC Pathways - A product of CCC Information Services Inc.





## Legislation Details (With Text)

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**File #:** 090939      **Version:** 0

**Type:** Resolution      **Status:** In Committee

**File created:** 12/1/2009      **In control:** JUDICIARY & LEGISLATION COMMITTEE

**On agenda:**      **Final action:**

**Effective date:**

**Title:** Resolution relating to the claim of Atty. Gregg Bridge on behalf of Devond Barnes for personal injuries. (5th Aldermanic District)

**Sponsors:** THE CHAIR

**Indexes:** CLAIMS

**Attachments:** City Attorney Letter.pdf, Claim, Hearing Notice List

Date	Ver.	Action By	Action	Result	Tally
12/1/2009	0	COMMON COUNCIL	ASSIGNED TO		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		



**Number**

090939

**Version**

ORIGINAL

**Reference**

**Sponsor**

THE CHAIR

**Title**

Resolution relating to the claim of Atty. Gregg Bridge on behalf of Devond Barnes for personal injuries. (5th Aldermanic District)

**Requestor**

City Attorney

**Drafter**

JAS:ms

October 30, 2009

1029-2009-2406:151253

**GRANT F. LANGLEY**  
City Attorney

**RUDOLPH M. KONRAD**  
**LINDA ULISS BURKE**  
**VINCENT D. MOSCHELLA**  
Deputy City Attorneys



**THOMAS O. GARTNER**  
**BRUCE D. SCHRIMPF**  
**SUSAN D. BICKERT**  
**STUART S. MUKAMAL**  
**THOMAS J. BEAMISH**  
**MAURITA F. HOUREN**  
**JOHN J. HEINEN**  
**DAVID J. STANOSZ**  
**SUSAN E. LAPPEN**  
**JAN A. SMOKOWICZ**  
**PATRICIA A. FRICKER**  
**HEIDI WICK SPOERL**  
**KURT A. BEHLING**  
**GREGG C. HAGOPIAN**  
**ELLEN H. TANGEN**  
**MELANIE R. SWANK**  
**JAY A. UNORA**  
**DONALD L. SCHRIEFER**  
**EDWARD M. EHRlich**  
**LEONARD A. TOKUS**  
**MIRIAM R. HORWITZ**  
**MARYNELL REGAN**  
**G. O'SULLIVAN-CROWLEY**  
**KATHRYN Z. BLOCK**  
**MEGAN T. CRUMP**  
**ELOISA DE LEÓN**  
**ADAM B. STEPHENS**  
**KEVIN P. SULLIVAN**  
**BETH CONRADSON CLEARY**  
**THOMAS D. MILLER**  
**HEIDI E. GALVÁN**  
**JARELY M. RUIZ**  
**ROBIN A. PEDERSON**  
**DANIELLE M. BERGNER**  
Assistant City Attorneys

October 30, 2009

To the Honorable Common Council  
Of the City of Milwaukee  
Room 205 – City Hall

Re: Resolution Relating to the Claim of Devond L. Barnes  
C.I. File No. 09-L-101

Dear Council Members:

We return the enclosed document which has been filed with the City Clerk and ask that it be introduced and referred to the Committee on Judiciary & Legislation with the following recommendation.

Claimant, Devond L. Barnes, 4483 North 84<sup>th</sup> Street, Milwaukee, WI 53225, alleges through his attorney, Bridge Law Office, 2300 North Mayfair Road, Suite 470, Milwaukee, WI 53226, that on May 4, 2009, he sustained injuries when the moped he was riding collided with a pothole, causing him to be thrown into a parked van vehicle, while he was traveling southbound on North 20<sup>th</sup> Street just before West North Avenue. They claim damages in the amount of \$50,000.00.

Our investigation reveals that the Infrastructure Services Division (ISD) reviewed their records and the records of the DPW Call Center relative to this alleged incident. They found that the ISD had patched potholes in this general area on May 15, 2009 pursuant to a complaint call they received. The ISD followed its normal procedures and it was acting within the City's discretion. Furthermore, the police officer responding to the accident scene could not find any pothole needing to be filled. As such, the City cannot accept liability. Therefore, we recommend that this claim be denied.

Very truly yours,

**GRANT F. LANGLEY**  
City Attorney

**JAN A. SMOKOWICZ**  
Assistant City Attorney

JAS:ms  
Enclosure  
1029-2009-2406:151251

2300 North Mayfair Rd., Suite 470  
Wauwatosa, Wisconsin 53226-1505  
Telephone: 414-259-7605  
Fax: 414-259-7610  
E-mail: gbridge@bridge-law.com

August 27, 2009

**NOTICE OF INJURY AND  
CLAIM FOR DAMAGES  
WIS. STATS. SEC. 893.80**

To: City Clerk  
City of Milwaukee  
200 East Wells Street  
Milwaukee, WI 53202

City of Milwaukee  
Department of Public Works  
821 North Broadway Street, Rm. 516  
Milwaukee, WI 53202

CITY OF MILWAUKEE  
2009 AUG 31 PM 1:10  
RONALD D. LEONARDI  
CITY CLERK

THE ABOVE-NAMED PARTIES, PLEASE TAKE NOTICE:

1. Devond L. Barnes is an adult who resides at 4483 North 84<sup>th</sup> Street, Milwaukee, Wisconsin 53225.
2. Devond L. Barnes was injured as a result of the negligent acts of the above-named parties by their agents, servants or employees.
3. The circumstances of the injuries are as follows: On May 4, 2009, at approximately 2:46 p.m., Mr. Barnes was riding his 2008 Yamaha Moped on North 20<sup>th</sup> Street near West North Avenue in the City of Milwaukee, when he hit a pothole in the street and was violently thrown from his vehicle into a parked grey van, which resulted in a comminuted, open fracture of his right tibia which required two surgeries to repair and a week-long hospital admission.

The fracture was so severe that the bone penetrated through the skin. Mr. Barnes was taken from the accident scene via ambulance to Froedtert Hospital located at 9200 West Wisconsin Avenue, Milwaukee, Wisconsin.

Mr. Barnes has incurred over \$62,500.00 for medical treatment provided at Froedtert Hospital and by Medical College Physicians. He is still undergoing treatment and the full extent of his medical bills and the nature and extent of the injuries he suffered is not fully ascertainable at this time.

4. As a direct and proximate result of the aforementioned incident, Mr. Barnes suffered a

CITY OF MILWAUKEE  
RECEIVED  
2009 SEP 01 AM 8:29  
CITY ATTORNEY

**Devond Barnes**  
**Notice of Injury and**  
**Claim for Damages**  
Page 2  
August 27, 2009

compound fracture of his right tibia which caused him severe pain and discomfort which has required on-going care and treatment. As of the date of this notice, Mr. Barnes has incurred over \$62,500.00 in medical bills and expenses and is still under the care of his physician. It is unknown at this time if a permanent condition has resulted from the injuries sustained.

5. Further, as a direct and proximate result of the aforementioned incident, Mr. Barnes has suffered a loss of wages from his employment.
6. At all times material, the above-named parties had actual notice of the aforesaid incident.
7. This document is a **Notice of Injury** served on the above-named parties in compliance with Wisconsin law.

**CLAIM FOR DAMAGES**

My client, Devond Barnes, has undergone medical treatment necessitated following a serious accident, which we believe was caused by negligence on the part of employees of the Department of Public Works for the City of Milwaukee. The medical bills incurred by Mr. Barnes have already surpassed the \$50,000.00 municipal limit of liability. Consequently, this matter is in a position to be considered for resolution.

In that regard, you will find enclosed with this Claim for Damages the following information pertinent to this claim:

1. Photographic exhibit depicting injuries to Devond Barnes;
2. Wisconsin Motor Vehicle Accident Report No. 9H172WX;
3. Certified copies of medical records from Froedtert Hospital for emergency and inpatient treatment provided from May 4 through May 8, 2009, together with their statement for services rendered in the amount of \$51,808.42;
4. Copy of Statement of Physician Services from Medical College Physicians for treatment provided from May 4, 2009, through May 8, 2009, in the amount of \$10,779.44;

**Devond Barnes**  
**Notice of Injury and**  
**Claim for Damages**  
Page 3  
August 27, 2009


Devond Barnes was riding with his cousin, Glendale Roberson, who witnessed the accident and remained at the scene until Mr. Barnes was taken from the scene via ambulance. Mr. Roberson spoke with several people at the scene who lived in the area who informed him that they had called the City about the potholes in the area, but there had been no response. In addition, Mr. Roberson witnessed members of the City Department of Public Works come to the scene shortly after his cousin was injured and began filling in potholes in the area. There should be records at City Hall that would corroborate what Mr. Roberson witnessed. Obviously, if the potholes had been properly addressed earlier, this tragic situation would not have occurred.

Based upon all of the above, it is my belief that the City was negligent with respect to the state of disrepair that existed in the area of Mr. Barnes' accident subjecting people using that area to an unreasonable risk of harm. Unfortunately, it resulted in a dangerous accident and a serious open fracture of the tibia/fibula for Mr. Barnes which required an inpatient hospital admission and surgical repair. Mr. Barnes has already had several months of medical care and attention while his leg heals. He has incurred over \$62,500.00 in medical expenses. Based upon all of the above, the municipal liability limit of \$50,000.00 should be tendered to Mr. Barnes as compensation for the claims that arise out of this accident.

I am available to discuss this matter in greater detail and would appreciate the courtesy of a reply to this settlement offer at your earliest convenience.

Very truly yours,

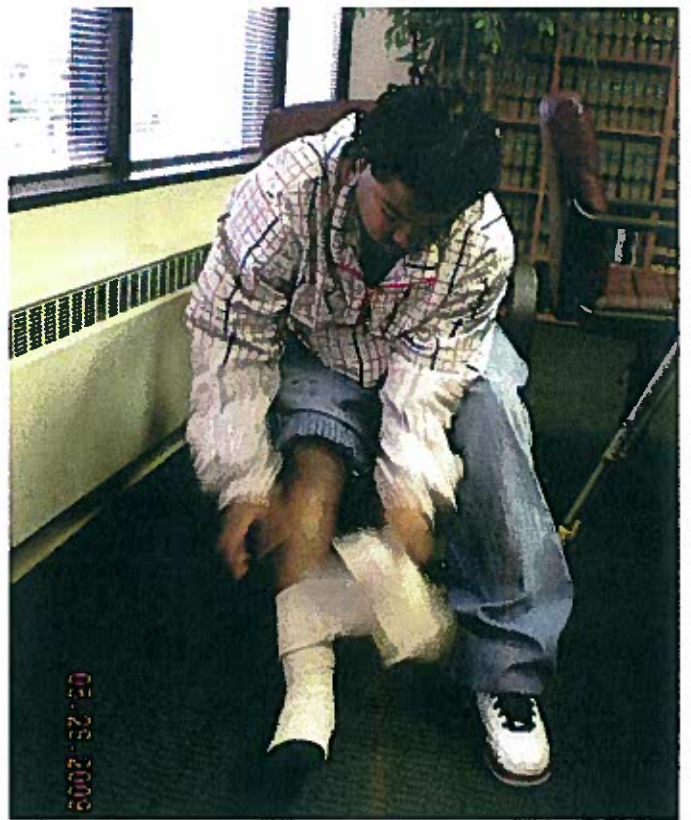
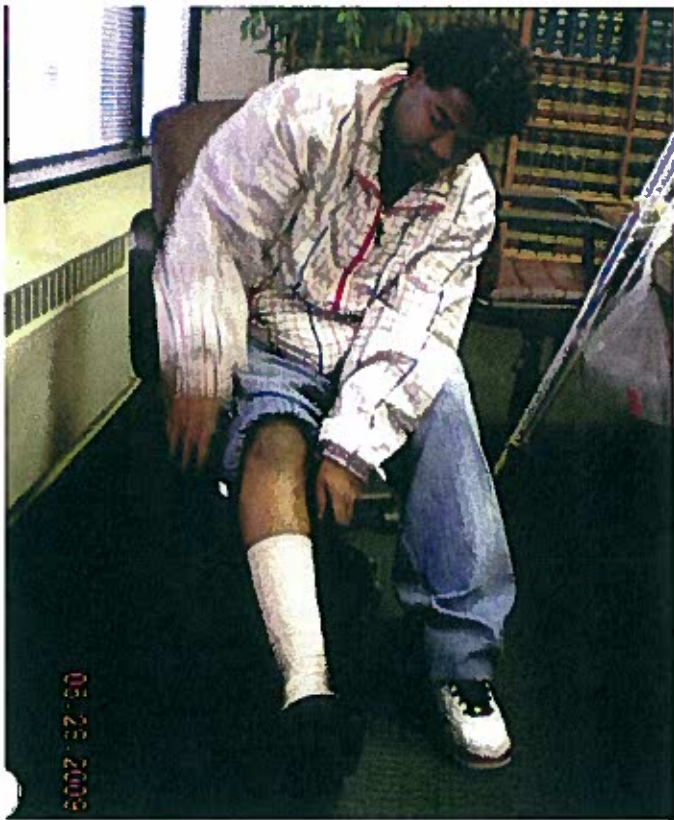
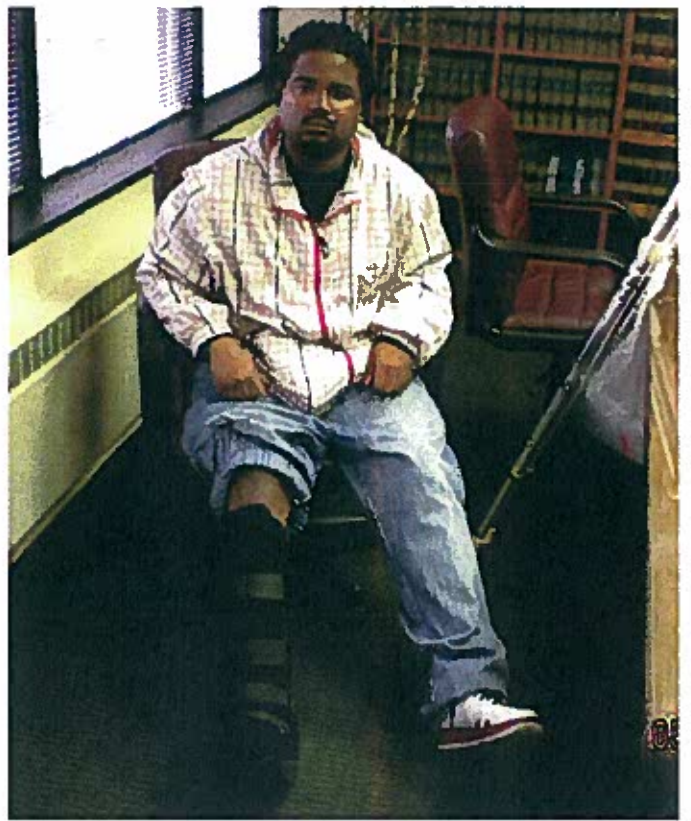
**BRIDGE LAW OFFICE**

  
GREGG BRIDGE  
Attorney at Law

GEB/jw  
Enclosures  
cc Mr. Devond Barnes











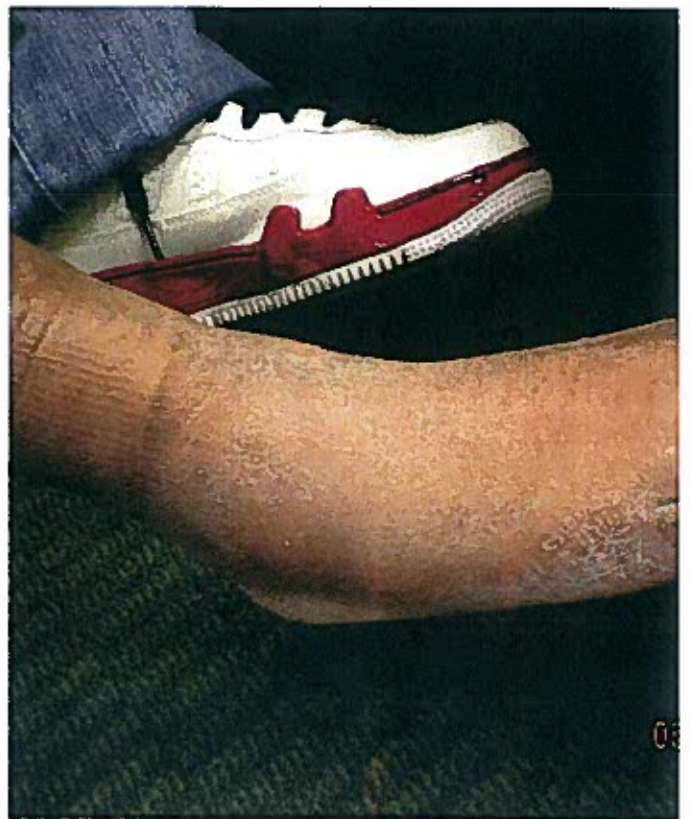


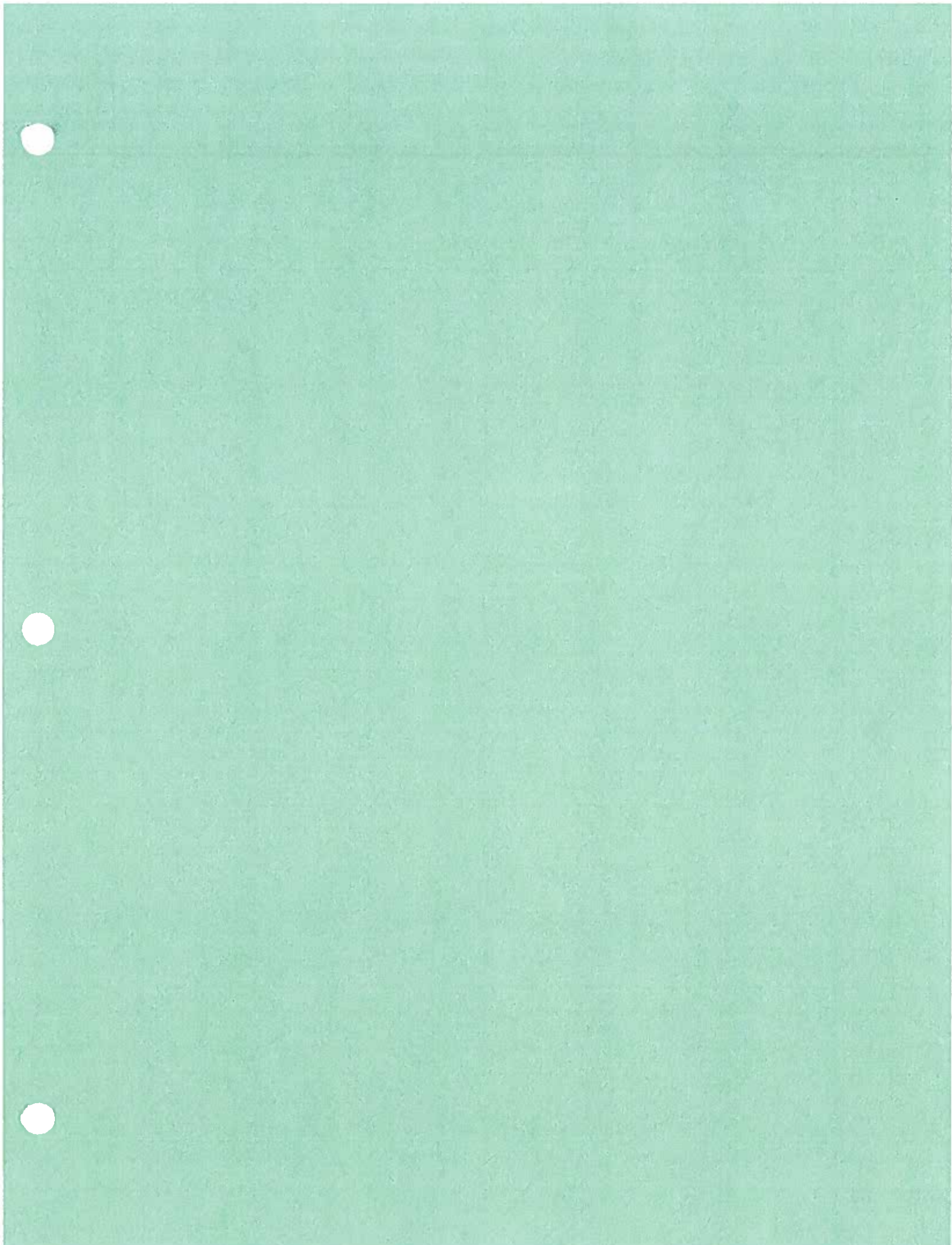












**Wisconsin Motor Vehicle Accident Report** 9H172WX  
 MV4000e 01/2005

PK2007

POLICE # DISTRICT 3 \* F \*

ACCIDENT # 091241117

<input checked="" type="checkbox"/> Reportable Accident		<input type="checkbox"/> On Emergency		<input type="checkbox"/> Amended		DOT Document Number 9H172WX		Document Override Number		
Agency Accident Number 091241117					Police Number DISTRICT 3 * F *					
4 - Accident Date 05/04/2009			5 - Time of Accident (Military Time) 1446		6 - Total Units 02		7 - Total Injured 01		6 - Total Killed 00	
MILWAUKEE - 407			MILWAUKEE - 7400			NON-INTERSECTION				
14 - On Hwy No.		14 - On Street Name 20TH ST N			14 - Bus/Fmt/Rmp		15 - Est. Dist 300	FV/MI F	15 - Hwy. Dir NORTH	
16 - Fr/At Hwy No.		18 - From/At Street Name NORTH AVE W			16 - Business/Frontage/Ramp					
17 - Structure Type		17 - Structure Number		12 - Latitude			13 - Longitude			
80 - First Harmful Event OTHER NON-COLLISION					93 - Manner of Collision NO COLLISION WITH MOTOR VEHICLE IN TRANSPORT					
112 - Access Control NO CONTROL		113 - Road Curvature STRAIGHT		113 - Road Terrain LEVEL/FLAT		Surface Type CONCRETE - 1				
115 - Traffic Way NOT-PHYSICALLY-DIVIDED-(2-WAY TRAFFIC)										
117 - Relation To Roadway ON-ROADWAY										
114 - Light Condition DAYLIGHT			116 - Road Surface Condition DRY			118 - Weather CLEAR				
9 <input checked="" type="checkbox"/> Hit and Run		9 <input type="checkbox"/> Government Property		9 <input type="checkbox"/> Fire		9 <input type="checkbox"/> Photos Taken		9 <input type="checkbox"/> Trailer or Towed		
9 <input type="checkbox"/> Truck, Bus, or Hazardous Materials			9 <input type="checkbox"/> Load Spillage		9 <input type="checkbox"/> Construction Zone		9 <input type="checkbox"/> Names Exchanged			
101 <input type="checkbox"/> Supplemental Reports		102 <input checked="" type="checkbox"/> Witness Statements			103 <input type="checkbox"/> Measurements Taken		79 - E M S Number			

GENERAL INFORMATION

**Operator/Pedestrian**

Unit Status H - HIT AND RUN		81 - Most Harmful Event: Collision With MOTOR VEHICLE IN TRANSPORT			23 - Dir Of Travel SOUTH		24 - Speed Limit 30		
36 - Operating as Classified D CLASS		37 - Endorsements			35 <input type="checkbox"/> Operating Commercial Motor Vehicle				
32 - Date Of Blith									
33 - Sex									
26 - Address Street & Number							26 - PO Box		
27 - City				27 - State		27 - Zip Code		28 - Telephone Number	
39 - Seat Position					40 - Safety Equipment NOT-APPLICABLE-NONMOTORIST				
38 - Injury Severity N - NO APPARENT INJURY			41 - Airbag NOT APPLICABLE		42 - Ejected NOT-APPLICABLE		44 <input type="checkbox"/> Medical Transport		
43 - Trapped/Extricated NOT-APPLICABLE		92 - Pedestrian Location			92 - Pedestrian Action				
119 - What Driver Was Doing OTHER				120 - Traffic Control NO-CONTROL			62 - No. of Citations Issued 00		
64 - 1st Statute No.		64 - 2nd Statute No.		64 - 3rd Statute No.		64 - 4th Statute No.		64 - 5th Statute No.	
122 - Driver Factors NOT-APPLICABLE									
88 - Driver or Pedestrian Cond NOT OBSERVED			89 - Substance Presence UNKNOWN						
90 - Alcohol Test TEST NOT GIVEN			90 - Alcohol Content			91 - Drug Test TEST-NOT-GIVEN			

OPERATOR/PEDESTRIAN 01

91 - Drugs Reported
124 - Highway Factors NOT-APPLICABLE

**Vehicle**

<b>VEHICLE 01</b>	21 - Unit Type <b>AUTOMOBILE</b>	Vehicle Type <b>PASSENGER-CAR</b>	22 - Total Occupants <b>01</b>	
	50 - Year   51 - Make   52 - Model   53 - Body Style   54 - Color   100 - Skidmarks to Impact (Ft)			
	94 - Vehicle Damage <b>UNKNOWN</b>			
	95 - Extent Of Damage <b>UNKNOWN</b>	96 <input type="checkbox"/> Vehicle Towed Due To Damage	97 - Vehicle Removed By <b>UNKNOWN</b>	
	123 - Vehicle Factors <b>NOT-APPLICABLE</b>			

**Vehicle Owner**

<b>VEH OWNER 01</b>	45 <input type="checkbox"/> Vehicle Owner Same As Operator
	46 - Vehicle Owner Last Name   46 - First Name   46 - Middle Initial   46 - Suffix
	46 - Company Name
	47 - Address Street & Number   47 - PO Box
	48 - City   48 - State   48 - Zip Code   49 - Telephone Number

**Insurance**

<b>INS 01</b>	63 - Liability Insurance Company <b>UNKNOWN</b>	60 <input type="checkbox"/> Policy Holder Same As Owner
	61 - Policy Holder Last Name   61 - Policy Holder First Name	
	61 - Policy Holder Company	

**School Bus**

<b>BUS 01</b>	Bus Travelling to/from <input type="radio"/> To <input type="radio"/> From	School Name	Body Make	Seating Capacity
	School District Contracted With			

**Operator/Pedestrian**

Unit Status	81 - Most Harmful Event: Collision With <b>MOTOR VEHICLE IN TRANSPORT</b>	23 - Dir Of Travel <b>SOUTH</b>	24 - Speed Limit <b>30</b>
36 - Operating as Classified <b>D CLASS</b>	37 - Endorsements	35 <input type="checkbox"/> Operating Commercial Motor Vehicle	
20 - Driver License Number <b>B6321723144804</b>	26 - State <b>WI</b>	27 - Date of Birth <b>12/08/1981</b>	28 - Operator's Address <b>DEVERO</b>
25 - Operator/Pedestrian Last Name <b>BARNES</b>	25 - First Name <b>DEVERO</b>	29 - Middle Initial	28 - Street
32 - Date Of Birth <b>12/08/1981</b>	33 - Sex <b>MALE</b>		

OPERATOR/PEDESTRIAN 02	26 - Address Street & Number 4483 N 84TH ST				26 - PO Box	
	27 - City MILWAUKEE		27 - State WI	27 - Zip Code 53225	28 - Telephone Number (414) 461-1257 EXT.	
	39 - Seat Position FRONT-SEAT-LEFT-SIDE-(MC/BIKE DRIVER, TRAIN CONDUCTOR)			40 - Safety Equipment NONE-USED-VEHICLE-DRIVER/OCCUPANT		
	38 - Injury Severity A - INCAPACITATING INJURY		41 - Airbag NOT APPLICABLE	42 - Ejected TOTALLY-EJECTED	44 <input checked="" type="checkbox"/> Medical Transport	
	43 - Trapped/Extricated NOT-APPLICABLE		92 - Pedestrian Location	92 - Pedestrian Action		
	119 - What Driver Was Doing GOING-STRAIGHT		120 - Traffic Control NO-CONTROL		62 - No. of Citations Issued 00	
	64 - 1st Statute No.	64 - 2nd Statute No.	64 - 3rd Statute No.	64 - 4th Statute No.	64 - 5th Statute No.	
	122 - Driver Factors NOT-APPLICABLE					
	88 - Driver or Pedestrian Cond APPEARED NORMAL		89 - Substance Presence NEITHER-ALCOHOL-NOR-DRUGS-PRESENT			
	90 - Alcohol Test TEST NOT GIVEN		90 - Alcohol Content		91 - Drug Test TEST-NOT-GIVEN	
	91 - Drugs Reported					
	124 - Highway Factors NOT-APPLICABLE					

Vehicle

VEHICLE 02	21 - Unit Type MOTORCYCLE		Vehicle Type MOPED			22 - Total Occupants 01
	44 - License Plate Number MFD 123456789					
	50 - Year 2008	51 - Make YAMA	52 - Model	53 - Body Style MB	54 - Color GRN	100 - Skidmarks to Impact (Ft)
	94 - Vehicle Damage FRONT					
	95 - Extent Of Damage MODERATE		96 <input type="checkbox"/> Vehicle Towed Due To Damage		97 - Vehicle Removed By BARNES FRIEND	
	123 - Vehicle Factors NOT-APPLICABLE					

Vehicle Owner

VEH OWNER 02	45 <input type="checkbox"/> Vehicle Owner Same As Operator				
	46 - Vehicle Owner Last Name POETZL		46 - First Name NICK	46 - Middle Initial	46 - Suffix
	46 - Company Name				
	47 - Address Street & Number 5728 W BELOIT RD			47 - PO Box	
	48 - City MILWAUKEE		48 - State WI	48 - Zip Code 53214	49 - Telephone Number

Insurance



INS 02	63 - Liability Insurance Company NONE		60 <input type="checkbox"/> Policy Holder Same As Owner
	61 - Policy Holder Last Name		61 - Policy Holder First Name
	61 - Policy Holder Company		

**School Bus**

BUS 02	Bus Travelling to/from <input type="radio"/> To <input type="radio"/> From	School Name	Body Make	Seating Capacity
	School District Contracted With			

**Diagram and Narrative**

105 - PHOTOS BY

DIAGRAM AND NARRATIVE

W NORTH AV  
N 20th ST

N

Not drawn to scale

THIS REPORT WAS TYPED BY P.O. JOSEPH SCHANKEY OF DISTRICT 3-EARLY SHIFT, SQD # 3221. ON MONDAY, 05-04-09 AT 3:28PM I WAS DISPATCHED TO A PI ACCIDENT AT THE LOCATION OF N. 20TH ST/W. NORTH AVE. UPON ARRIVAL THERE WERE NO VEHICLES THAT APPEARED TO BE DAMAGED AND I DID NOT GET FLAGGED DOWN FOR ANYONE GETTING INTO AN ACCIDENT. I CALLED MILWAUKEE FIRE DEPARTMENT AND WAS ADVISED THAT THE VICTIM OF UNIT #2 WAS TRANSPORTED TO FROEDTERT HOSPITAL. I WENT TO THE HOSPITAL WHERE THE VICTIM (DEVOND BARNES) WAS ADMITTED AT 3:27PM AND WAS SEEN BY DR. TESLUTES FOR A RIGHT ANKLE FRACTURE. BARNES WOULD NEED SURGERY TO REPAIR THE ANKLE. BARNES STATED THAT HE WAS DRIVING ON HIS NEW MOPED S/B ON N. 20 ST IN THE 2300 BLOCK. BARNES STATED THAT HE HIT A POTHOLE IN THE STREET AND FLEW OFF HIS MOPED INTO A PARKED GRY VAN (UNKNOWN PLATES OR MODEL). I SPOKE TO BARNES FRIEND IDENTIFIED AS GLENDALE ROBERSON. ROBERSON STATED THAT HE WAS DRIVING A MOPED RIGHT BEHIND BARNES AND DID OBSERVE BARNES HIT A POTHOLE IN THE STREET AND FLEW INTO A PARKED VAN. I WENT BACK TO THE LOCATION OF 2300 N. 20 ST TO CHECK FOR ANY POSSIBLE POTHOLES, BUT DID NOT OBSERVE ANY THAT NEEDED TO BE FILLED IN. IT SHOULD BE NOTED THAT I DID NOT SEE ANY VAN THAT MAY HAVE BEEN INVOLVED IN ACCIDENT.

**Witness**

WITNESS 01	107 - Witness Last Name ROBERSON		107 - First Name GLENDALE		107 - Middle Initial
	108 - Address Street & Number 143 W MITCHELL ST			108 - PO Box	109 - Date of Birth 11/6/1982
	110 - City MILWAUKEE		State WI	110 - Zip Code 53204	111 - Telephone Number (414) 384-7395 EXT.

**Officer information**



**Wisconsin Motor Vehicle 9H172WX**  
**Accident Report MV4000e 01/2005**

PK2007

<b>OFFICER INFORMATION</b>	125 - Officer Last Name <b>SCHANKEY</b>		125 - First Name <b>JOSEPH</b>	125 - Middle Initial <b>V</b>	131 - Officer iD <b>13218</b>	
	129 - Law Enforcement Agency No. <b>006</b>		130 - Law Enforcement Agency Name <b>MILWAUKEE POLICE DEPARTMENT</b>			
	126 - Law Enforcement Agency Address Street & Number <b>749 WEST STATE STREET</b>					
	127 - City <b>MILWAUKEE</b>		127 - State <b>WI</b>	127 - Zip Code <b>53233</b>	128 - Telephone Number <b>(414) 933-4444 EXT.</b>	
	132 - Date Notified <b>05/04/2009</b>		133 - Time Notified (Military Time) <b>1528</b>	134 - Time Arrived (Military Time) <b>1548</b>		135 - Date Of Report <b>05/18/2009</b>
	Agency Accident Number <b>091241117</b>		Police Number <b>DISTRICT 3 * F *</b>		19 - Special Study	
	18 - Agency Space					



MAKE CHECKS PAYABLE TO:

IF PAYING BY CREDIT CARD, PLEASE CHECK CARD TO BE USED FOR PAYMENT

CHECK CARD TO BE USED FOR PAYMENT

<input type="checkbox"/> Discover	<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> American Express
CARD NUMBER			AMOUNT
SIGNATURE			EXP. DATE
INVOICE DATE	PLEASE PAY THIS AMOUNT	ACCOUNT NUMBER	
05/17/2009	\$51,808.42	349418947	
PATIENT NAME			
DEVOND L BARNES			

PAYMENT IS DUE UPON RECEIPT.

Please check box if address is incorrect or insurance information has changed, indicate change(s) on reverse side.

# Froedtert Hospital

West Wisconsin Avenue  
Milwaukee, WI 53226-3596  
Phone: 800-803-6155  
froedtert.com

To: P.O. Box 3202 • Milwaukee, WI 53201-3202

DEVOND L BARNES  
100 N 84TH ST  
MILWAUKEE WI 53225-5160

0000 0000000349418947 5180842 0000000 0000000000 6

## INVOICE

AND RETURN TOP PORTION WITH YOUR PAYMENT.

Date: Friday, May 17, 2009  
Patient: Devond L Barnes  
Account: 349418947  
Amount Due: \$51,808.42

Date of Service: 05/04/2009  
Patient Service: Orthopedics-Inpatient  
Primary Insurance Billed: SELF PAY-THIRD PARTY LI  
Secondary Insurance Billed: SELF PAY

Dear Devond L Barnes:

Thank you for selecting Froedtert Hospital for your health care services. For your records, below is a summary of the charges for this account. If you would like an itemized statement, please call Patient Financial Services at 800-803-8155.

Room & Board	\$ 2,484.00
Nursing Incremental Care	\$ 2,024.00
Pharmacy	\$ 3,523.89
Drugs Incident to Radiology	\$ 132.00
IV Solutions	\$ 677.53
IV Therapy	\$ 451.50
Nonsterile Supplies	\$ 779.00
Sterile Supplies	\$ 67.00
Supply/Implant	\$ 4,590.00
Laboratory	\$ 68.00
Lab-Chemistry	\$ 79.00
Lab-Immunology	\$ 232.50
Lab-Hematology	\$ 95.50
Lab-Bact/Microbiology	\$ 129.00
Lab-Urology	\$ 85.00
Diagnostic X-Ray	\$ 2,176.50
Chest X-Ray	\$ 294.00
CT Scan-Body	\$ 4,334.50

**Froedtert Hospital**  
9200 West Wisconsin Avenue  
Milwaukee, WI 53226-3596

# Froedtert Hospital

9200 West Wisconsin Avenue  
Milwaukee, WI 53226-3596

Phone: 800-803-8155  
froedtert.com

Remit To: P.O. Box 3202 • Milwaukee, WI 53201-3202

IF PAYING BY CREDIT CARD, PLEASE FILL OUT BELOW

<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		CHECK CARD TO BE USED FOR PAYMENT
CARD NUMBER					AMOUNT	
SIGNATURE					EXP. DATE	
INVOICE DATE		PLEASE PAY THIS AMOUNT		ACCOUNT NUMBER		
05/17/2009		\$51,808.42		349418947		
PATIENT NAME						
DEVOND L BARNES						



DEVOND L BARNES  
4483 N 84TH ST  
MILWAUKEE WI 53225-5160



PAYMENT IS DUE UPON RECEIPT.

Please check box if address is incorrect or insurance information has changed, indicate change(s) on reverse side.

0000 0000000349418947 5180842 000000 0000000000 6

PLEASE DETACH AND RETURN TOP PORTION WITH YOUR PAYMENT.

## INVOICE

Sunday, May 17, 2009

**Patient:** Devond L Barnes  
**Account:** 349418947  
**Amount Due:** \$51,808.42

**Date of Service:** 05/04/2009  
**Patient Service:** Orthopedics-Inpatient  
**Primary Insurance Billed:** SELF PAY-THIRD PARTY LI  
**Secondary Insurance Billed:** SELF PAY

Dear Devond L Barnes:

Thank you for selecting Froedtert Hospital for your health care services. For your records, below is a summary of the charges for this account. If you would like an itemized statement, please call Patient Financial Services at 800-803-8155.

Room & Board	\$	2,484.00
Nursing Incremental Care	\$	2,024.00
Pharmacy	\$	3,523.89
Drugs Incident to Radiology	\$	132.00
IV Solutions	\$	677.53
IV Therapy	\$	451.50
Nonsterile Supplies	\$	779.00
Sterile Supplies	\$	67.00
Supply/Implant	\$	4,590.00
Laboratory	\$	68.00
Lab-Chemistry	\$	79.00
Lab-Immunology	\$	232.50
Lab-Hematology	\$	95.50
Lab-Bact/Microbiology	\$	129.00
Lab-Urology	\$	85.00
Diagnostic X-Ray	\$	2,176.50
Chest X-Ray	\$	294.00
CT Scan-Body	\$	4,334.50

# Froedtert Hospital

9200 West Wisconsin Avenue  
Milwaukee, WI 53226-3596

# Froedtert Hospital

9200 West Wisconsin Avenue  
Milwaukee, WI 53226-3596

Phone: 800-803-8155  
froedtert.com

Remit To: P.O. Box 3202 • Milwaukee, WI 53201-3202



**DEVOND L BARNES**  
4483 N 84TH ST  
MILWAUKEE WI 53225-5160

00853

IF PAYING BY CREDIT CARD, PLEASE FILL OUT BELOW

<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		CHECK CARD TO BE USED FOR PAYMENT
CARD NUMBER					AMOUNT	
SIGNATURE					EXP. DATE	
INVOICE DATE		PLEASE PAY THIS AMOUNT		ACCOUNT NUMBER		
05/17/2009		\$51,808.42		349418947		
PATIENT NAME <b>DEVOND L BARNES</b>						

PAYMENT IS DUE UPON RECEIPT.

Please check box if address is incorrect or Insurance information has changed, indicate change(s) on reverse side.

0000 0000000349418947 5180842 0000000 0000000000 6

PLEASE DETACH AND RETURN TOP PORTION WITH YOUR PAYMENT.

**INVOICE**

Operating Room Services	\$	13,085.00
Anesthesia	\$	4,922.50
Physical Therapy	\$	336.00
Physical Therapy-Eval	\$	182.50
Occupational Therapy-Eval	\$	91.00
Emergency Room	\$	110.00
Emergency Room-Other	\$	3,620.50
Trauma Response	\$	2,566.00
Recovery Room	\$	3,558.00
EKG / ECG	\$	39.50
Vaccine Administration	\$	28.00
Prof. Fee-Anesthetist CRNA	\$	1,046.50
<b>Total Charges</b>	<b>\$</b>	<b>51,808.42</b>
<b>Total Payments</b>	<b>\$</b>	<b>0.00</b>
<b>Total Adjustments</b>	<b>\$</b>	<b>0.00</b>
<b>Please Pay This Amount</b>	<b>\$</b>	<b>51,808.42</b>

Please mail payment in full today or contact Patient Financial Services at 800-803-8155 to arrange payment. Please visit us at [froedtert.com](http://froedtert.com) if you would like to make a payment online using Mastercard, Visa or Discover or if you would like to view a list of Frequently Asked Questions. A \$25 service fee will be charged for any checks returned.

Physician charges will be billed separately by the Medical College of Wisconsin.

Our commitment is to your health. We appreciate your confidence in Froedtert Hospital.

Sincerely,

Patient Financial Services

**Froedtert Hospital**

9200 West Wisconsin Avenue  
Milwaukee, WI 53226-3596



\*\*1071420303

**STATEMENT OF PHYSICIAN SERVICES**

The back of the statement contains information on terms, conditions and hours of operation. To make a payment or speak with customer service see the phone numbers listed below under **IMPORTANT MESSAGE**.  
**SE HABLA ESPAÑOL**

Please check box if address is incorrect or insurance information has changed and indicate change(s) on reverse side.  
 RESPONSIBLE PARTY

DEVOND L BARNES  
 4483 N 84TH ST  
 MILWAUKEE, WI 53225

PATIENT NAME: BARNES, D      STATEMENT DATE: 05/09/2009      ACCOUNT NUMBER: 3M1559556

VISA    VISA    MC    DISCOVER    AMR EXP

CARD NUMBER: \_\_\_\_\_      EXPIRATION DATE: \_\_\_\_\_

3 or 4 digit verification number on card: V, MC, D | (3) AmEx | (4)

CARD HOLDER SIGNATURE: X      \$ \_\_\_\_\_

MAKE CHECK PAYABLE TO: MEDICAL COLLEGE OF WISCONSIN

RETURN TOP PORTION WITH YOUR PAYMENT TO: P.O. BOX 13308 - MILWAUKEE, WI 53213-0308

RETAIN THIS PORTION FOR YOUR RECORDS

IRS TAX I.D. #39-0806261

ACCOUNT NUMBER	INSURANCE INFORMATION	STATEMENT DATE
3M1559556	PRIMARY:      SECONDARY:	05/09/2009
PATIENT NAME		Payments received after statement date will not appear on this statement.
DEVOND L BARNES		

DATE	DESCRIPTION	CHARGES	INSURANCE PAYMENTS AND ADJUSTMENTS	PATIENT PAYMENTS AND ADJUSTMENTS	BALANCE DUE
05/04/09 05/04/09 05/07/09	Invoice Number: 36891079 (Continued) 72193 CT PELVIS W/DYE 74160 CT ABDOMEN W/DYE UNINSURED 10 PERCENT DISCOUNT	413.00 422.00		83.50	\$751.50
05/04/09 05/07/09	Invoice Number: 36891080 Department: RADIOLOGY Location: FROEDTERT MEM LUTH HOSP(EMERGENCY) 73590 X-RAY EXAM OF LOWER LEG UNINSURED 10 PERCENT DISCOUNT	46.00		4.60	\$41.40
05/04/09 05/04/09 05/07/09	Invoice Number: 36891081 Department: ANESTHESIOLOGY Location: FROEDTERT MEM LUTH HOSP(INPATIENT) 01480 ANESTHESIA LOWER LEG BONE SURG 99140 EMERGENCY ANESTHESIAESIA UNINSURED 10 PERCENT DISCOUNT	1,454.16 242.00		169.62	\$1526.54
05/04/09 05/04/09 05/08/09	Invoice Number: 36900946 Department: ORTHOPAEDIC SURGERY Location: FROEDTERT MEM LUTH HOSP(INPATIENT) 27759 TREATMENT OF TIBIA FRACTURE 11012 DEBRIDE SKN/MUSCLE/BONEASSOCW FX UNINSURED 10 PERCENT DISCOUNT	5,761.00 2,476.00		823.70	\$7413.30

**IMPORTANT MESSAGE:**

To call Customer Service or make a payment, call (414) 456-4511 or 1-800-242-1649.

Only invoices with a balance due appear. If your total payment is not reflected, a portion was applied to one or more invoices previously reported as outstanding.

Please Pay This Amount  
 by 05/26/2009  
**\$10,779.44**



\*\*1071420103

# STATEMENT OF PHYSICIAN SERVICES

The back of the statement contains information on terms, conditions and hours of operation. To make a payment or speak with customer service see the phone numbers listed below under **IMPORTANT MESSAGE**.  
**SE HABLA ESPAÑOL**

Please check box if address is incorrect or insurance information has changed and indicate change(s) on reverse side.

RESPONSIBLE PARTY

DEVOND L BARNES  
 4483 N 84TH ST  
 MILWAUKEE, WI 53225

\*\*107142

PATIENT NAME: BARNES, D      STATEMENT DATE: 05/09/2009      ACCOUNT NUMBER: 3M1559556

VISA     MC     DISCOVER     AMR EXP  
 CARD NUMBER: \_\_\_\_\_      EXPIRATION DATE: \_\_\_\_\_  
 3 or 4 digit verification number on card: V, MC, D | (3) AmEx | (4)  
 CARD HOLDER SIGNATURE: \_\_\_\_\_      SHOW AMOUNT PAID HERE: \$ \_\_\_\_\_  
 X

MAKE CHECK PAYABLE TO: MEDICAL COLLEGE OF WISCONSIN

**RETURN TOP PORTION WITH YOUR PAYMENT TO: P.O. BOX 13308 • MILWAUKEE, WI 53213-0308**

RETAIN THIS PORTION FOR YOUR RECORDS

IRS TAX I.D. #39-0806261

ACCOUNT NUMBER	INSURANCE INFORMATION	STATEMENT DATE
3M1559556	PRIMARY:      SECONDARY:	05/09/2009
PATIENT NAME		Payments received after statement date will not appear on this statement.
DEVOND L BARNES		

DATE	DESCRIPTION	CHARGES	INSURANCE PAYMENTS AND ADJUSTMENTS	PATIENT PAYMENTS AND ADJUSTMENTS	BALANCE DUE
05/04/09 05/09	Invoice Number: 36876859 Department: PATHOLOGY Location: FROEDTERT MEM LUTH HOSP(EMERGENCY) 85025 COMPLETE CBC W/AUTO DIFF WBC UNINSURED 10 PERCENT DISCOUNT	21.00		2.10	\$18.90
05/04/09 05/04/09 05/04/09 05/04/09 05/04/09 05/06/09	Invoice Number: 36876860 Department: PATHOLOGY Location: FROEDTERT MEM LUTH HOSP(EMERGENCY) 86900 BLOOD TYPING ABO 86901 BLOOD TYPING RH (D) 86850 RBC ANTIBODY SCREEN 86922 COMPATIBILITY TEST ANTIGLOB 86922 COMPATIBILITY TEST ANTIGLOB UNINSURED 10 PERCENT DISCOUNT	7.00 8.00 21.00 18.00 18.00		7.20	\$64.80
05/04/09 05/07/09	Invoice Number: 36887681 Department: PATHOLOGY Location: FROEDTERT MEM LUTH HOSP(INPATIENT) 81001 URINALYSIS AUTO W/SCOPE UNINSURED 10 PERCENT DISCOUNT	13.00		1.30	\$11.70
05/05/09 05/07/09	Invoice Number: 36887682 Department: PATHOLOGY Location: FROEDTERT MEM LUTH HOSP(INPATIENT) 80048 METABOLIC PANEL TOTAL CA UNINSURED 10 PERCENT DISCOUNT	23.00		2.30	\$20.70
05/05/09 05/07/09	Invoice Number: 36887683 Department: PATHOLOGY Location: FROEDTERT MEM LUTH HOSP(INPATIENT) 85027 COMPLETE CBC AUTOMATED UNINSURED 10 PERCENT DISCOUNT	18.00		1.80	\$16.20
	<b>** Continued on Next Page**</b>				

**IMPORTANT MESSAGE:**

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Only invoices with a balance due appear. If your total payment is not reflected, a portion was applied to one or more invoices previously reported as outstanding.

**Please Pay This Amount**  
**by 05/26/2009**  
**\$10,779.44**



\*\*1071420203

**STATEMENT OF PHYSICIAN SERVICES**

The back of the statement contains information on terms, conditions and hours of operation. To make a payment or speak with customer service see the phone numbers listed below under **IMPORTANT MESSAGE**.  
**SE HABLA ESPAÑOL**

Please check box if address is incorrect or insurance information has changed and indicate change(s) on reverse side.

RESPONSIBLE PARTY

DEVOND L BARNES  
4483 N 84TH ST  
MILWAUKEE, WI 53225

PATIENT NAME BARNES, D		STATEMENT DATE 05/09/2009	ACCOUNT NUMBER 3M1559556
<input type="checkbox"/> VISA <input type="checkbox"/> MC <input type="checkbox"/> DISCOVER <input type="checkbox"/> AMR EXP			
CARD NUMBER			EXPIRATION DATE
3 or 4 digit verification number on card V, MC, D       (3) AmEx       (4)			SHOW AMOUNT PAID HERE
CARD HOLDER SIGNATURE x			\$

MAKE CHECK PAYABLE TO: MEDICAL COLLEGE OF WISCONSIN

RETURN TOP PORTION WITH YOUR PAYMENT TO: P.O. BOX 13308 • MILWAUKEE, WI 53213-0308

RETAIN THIS PORTION FOR YOUR RECORDS

IRS TAX I.D. #39-0806261

ACCOUNT NUMBER	INSURANCE INFORMATION		STATEMENT DATE
3M1559556	PRIMARY:	SECONDARY:	05/09/2009
PATIENT NAME			Payments received after statement date will not appear on this statement.
DEVOND L BARNES			

DATE	DESCRIPTION	CHARGES	INSURANCE PAYMENTS AND ADJUSTMENTS	PATIENT PAYMENTS AND ADJUSTMENTS	BALANCE DUE
05/04/09 C 09	Invoice Number: 36891074 Department: RADIOLOGY Location: FROEDTERT MEM LUTH HOSP(EMERGENCY) 71010 CHEST X-RAY UNINSURED 10 PERCENT DISCOUNT	55.00		5.50	\$49.50
05/04/09 05/04/09 05/04/09 05/07/09	Invoice Number: 36891075 Department: RADIOLOGY Location: FROEDTERT MEM LUTH HOSP(EMERGENCY) 73610 X-RAY EXAM OF ANKLE 73590 X-RAY EXAM OF LOWER LEG 73560 X-RAY EXAM OF KNEE 1 OR 2 UNINSURED 10 PERCENT DISCOUNT	60.00 46.00 56.00		16.20	\$145.80
05/04/09 05/07/09	Invoice Number: 36891076 Department: RADIOLOGY Location: FROEDTERT MEM LUTH HOSP(EMERGENCY) 73030 X-RAY EXAM OF SHOULDER UNINSURED 10 PERCENT DISCOUNT	73.00		7.30	\$65.70
05/04/09 05/07/09	Invoice Number: 36891077 Department: RADIOLOGY Location: FROEDTERT MEM LUTH HOSP(EMERGENCY) 72125 CT NECK SPINE W/O DYE UNINSURED 10 PERCENT DISCOUNT	397.00		39.70	\$357.30
05/04/09 05/07/09	Invoice Number: 36891078 Department: RADIOLOGY Location: FROEDTERT MEM LUTH HOSP(EMERGENCY) 72131 CT LUMBAR SPINE W/O DYE UNINSURED 10 PERCENT DISCOUNT	329.00		32.90	\$296.10
	Invoice Number: 36891079 Department: RADIOLOGY Location: FROEDTERT MEM LUTH HOSP(EMERGENCY)  <b>** Continued on Next Page**</b>				

**IMPORTANT MESSAGE:**

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Only invoices with a balance due appear. If your total payment is not reflected, a portion was applied to one or more invoices previously reported as outstanding.

Please Pay This Amount  
by 05/26/2009  
**\$10,779.44**







## Legislation Details (With Text)

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**File #:** 091063      **Version:** 0  
**Type:** Resolution      **Status:** In Committee  
**File created:** 12/1/2009      **In control:** JUDICIARY & LEGISLATION COMMITTEE  
**On agenda:**      **Final action:**  
**Effective date:**  
**Title:** Resolution relating to the claim of Atty. Jerome Konkell on behalf of Anita Ford for personal injuries.  
(4th Aldermanic District)  
**Sponsors:** THE CHAIR  
**Indexes:** CLAIMS  
**Attachments:** City Attorney Letter.pdf, Claim, Hearing Notice List

Date	Ver.	Action By	Action	Result	Tally
12/1/2009	0	COMMON COUNCIL	ASSIGNED TO		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		

**Number**

091063

**Version**

ORIGINAL

**Reference**

**Sponsor**

THE CHAIR

**Title**

Resolution relating to the claim of Atty. Jerome Konkel on behalf of Anita Ford for personal injuries. (4th Aldermanic District)

**Requestor**

City Attorney

**Drafter**

JAS:ms

November 24, 2009

1029-2008-557:149703

**GRANT F. LANGLEY**  
City Attorney

**RUDOLPH M. KONRAD**  
**LINDA ULISS BURKE**  
**VINCENT D. MOSCHELLA**  
Deputy City Attorneys



**THOMAS O. GARTNER**  
**BRUCE D. SCHRIMPF**  
**SUSAN D. BICKERT**  
**STUART S. MUKAMAL**  
**THOMAS J. BEAMISH**  
**MAURITA F. HOUREN**  
**JOHN J. HEINEN**  
**DAVID J. STANOSZ**  
**SUSAN E. LAPPEN**  
**JAN A. SMOKOWICZ**  
**PATRICIA A. FRICKER**  
**HEIDI WICK SPOERL**  
**KURT A. BEHLING**  
**GREGG C. HAGOPIAN**  
**ELLEN H. TANGEN**  
**MELANIE R. SWANK**  
**JAY A. UNORA**  
**DONALD L. SCHRIEFER**  
**EDWARD M. EHRlich**  
**LEONARD A. TOKUS**  
**MIRIAM R. HORWITZ**  
**MARYNELL REGAN**  
**G. O'SULLIVAN-CROWLEY**  
**KATHRYN Z. BLOCK**  
**MEGAN T. CRUMP**  
**ELOISA DE LEÓN**  
**ADAM B. STEPHENS**  
**KEVIN P. SULLIVAN**  
**BETH CONRADSON CLEARY**  
**THOMAS D. MILLER**  
**HEIDI E. GALVÁN**  
**JARELY M. RUIZ**  
**ROBIN A. PEDERSON**  
**DANIELLE M. BERGNER**  
Assistant City Attorneys

November 24, 2009

To the Honorable Common Council  
Of the City of Milwaukee  
Room 205 – City Hall

Re: Resolution Relating to the Claim of Anita Ford  
Through her attorney, Jerome Konkol  
C.I. File No. 08-L-18

Dear Council Members:

We return the enclosed document which as been filed with the City Clerk and ask that it be introduce and referred to the Committee on Judiciary & Legislation with the following recommendation.

Claimant, Anita Ford, 3205 West Wisconsin Avenue, Milwaukee, WI 53208 alleges through her attorney, Jerome Konkol, 1110 North Old World Third Street, Suite 405, Milwaukee, WI 53203, that on January 7, 2008, she sustained injuries when a vehicle she was a passenger in struck a ditch in the roadway at/near North 32<sup>nd</sup> Street and West Wisconsin Avenue. They claim damages in the amount of \$50,000.00.

Our investigation reveals that the Infrastructure Services Division (ISD) reviewed their records relative to this incident. They found that they responded to a request from the City Hall Operator regarding this situation. The site was found to be a contractor's work area and their steel plate had shifted. When the ISD received the initial call of this incident, they were advised there was a hole in the roadway. They responded with a "pothole" truck, but found they needed their "barricade" truck. The responding ISD employee remained on scene until the Milwaukee Police had arrived on scene and took control of the site. The ISD subsequently barricaded the area and contacted the contractor. The review further found that Time Warner Cable Telecom, 3235 Intertech Drive, Room 600, Brookfield, WI 53045, (262) 894-1175, was issued Public Way Permit 200723-0399 for work in this area. In addition, Ken Becker & Sons, Inc., 11715 West Silver Spring Road, Milwaukee, WI 53225, (414) 462-4826, was also issued Public Way

Honorable Common Council  
November 24, 2009  
Page 2

Permit 200724-0017 for work here as well. Since the City was not engaged in this excavating activity, responded promptly when notified of a problem in the roadway, and took appropriate measures to protect the public from the hazard, it cannot accept liability and we recommend denial of this claim.

Very truly yours,

GRANT F. LANGLEY  
City Attorney

JAN A. SMOKOWICZ  
Assistant City Attorney

JAS:ms  
Enclosure  
1029-2008-557:149702

**NOTICE OF INJURY**  
**PURSUANT TO WIS. STAT. SEC. 893.80**

CITY OF MILWAUKEE  
08 FEB 18 PM 12:16  
RONALD D. BURNHAM  
CITY CLERK

**TO:** City Clerk  
City of Milwaukee  
205 City Hall  
200 East Wells Street  
Milwaukee, WI 53202

Pursuant to the provisions of Section 893.80(1)(a), Wisconsin Statutes, the Claimant, Anita Ford, herewith gives notice of injury, in order to make a future claim for relief in the form of monetary damages, as set forth below:

1. That the Claimant, Anita Ford, is an adult resident of the City of Milwaukee residing at 3205 West Wisconsin Avenue, Milwaukee, Wisconsin 53208.
2. That the attorneys for the Claimant, Anita Ford, are Samster, Konkel & Safran, S.C., 1110 North Old World Third Street, Suite 405, Milwaukee, Wisconsin 53203.
3. That the Claimant, Anita Ford, sustained serious personal injuries at approximately 8:30 p.m. on January 7, 2008, traveling Westbound on Wisconsin Avenue near 32<sup>nd</sup> Street, in the City of Milwaukee, when the vehicle that she was a passenger in hit a ditch in the street. Upon information and belief, the City of Milwaukee was notified of the ditch and failed to address or take actions to repair or rectify the problem.
4. That a proximate cause of said injuries was the negligence of the City of Milwaukee.
5. That as a result of the aforementioned incident and negligence, the Claimant, Anita Ford, has suffered injuries to various parts of her body, including, but without limitation, her back and knee.

*Handwritten:*  
S  
2-18-08  
12:15 PM  
RHL

02-2-08 PM 2:20

CITY OF MILWAUKEE  
CITY CLERK

6. That as a result of the aforementioned incident and negligence, the Claimant, Anita Ford, has and will continue to incur medical expenses, has and will continue to suffer lost wages, and is also entitled to be compensated for the pain, suffering, and disability which she has endured and will continue to endure in the future.

7. That the undersigned is one of the attorneys for the Claimant, Anita Ford, and is, therefore, authorized to give this notice of injury.

Dated at Milwaukee, Wisconsin, this 15 day of <sup>February</sup> ~~January~~, 2008.

SAMSTER, KONKEL & SAFRAN, S.C.

By: 

Jerome A. Konkel  
State Bar No. 1000149  
Attorneys for the Claimant,  
Anita Ford

**P.O. ADDRESS**

Suite 405, Riverfront Plaza  
1110 North Old World Third Street  
Milwaukee, WI 53203  
(414) 224-0400

SAMSTER, KONKEL & SAFRAN, s.c.  
ATTORNEYS AT LAW

James P. Samster  
Jerome A. Konkol\*  
Jonathan S. Safran

1110 North Old World Third St., Suite 405  
Milwaukee, Wisconsin 53203

Telephone: (414) 224-0400  
Facsimile: (414) 224-0280  
www.skslawyers.com

\*Certified Civil Trial Specialist by  
the National Board of Trial  
Advocacy

August 31, 2009

Mr. Robert Overholt  
City Clerk  
City of Milwaukee  
200 E. Wells Street  
Milwaukee, WI 53202

Re: Our Client: Anita Ford  
Date of Accident: 1/7/2008

Dear Mr. Overholt:

Enclosed please find the following items of medical information and special damages regarding the above matter:

1. St. Joseph's Hospital records (Dr. Kevin Weidman-Ortho. Clinic) of 1/8/08 to 5/8/09, along with their billing in the amount of \$3,775.00.
2. Wheaton Franciscan Healthcare – St. Joseph's records of 3/4/09 to 3/13/09, along with their billing statement in the amount of \$13,224.25.
3. Milan Grbic, PT LLC's records of 3/25/09 to 4/29/09, along with their billing statement in the amount of \$1,500.00.

**TOTAL SPECIALS TO DATE: \$18,499.25**

Upon receipt of this correspondence, please contact me to discuss this matter further.

Yours very truly,

SAMSTER, KONKEL & SAFRAN, S.C.

  
Jerome A. Konkol  
jkonkol@skslawyers.com

2009 SEP 1 PM 1:21  
CITY OF MILWAUKEE  
RONALD D. LEONHART  
CITY CLERK

2009 SEP -1 PM 2:30  
CITY OF MILWAUKEE  
RECEIVED  
OFFICE OF  
CITY ATTORNEY



**Patient Ledger**  
**BAYSHORE BILLING SERVICE INC**  
**MILAN GRBIC PT, LLC**

**ANITA FORD (FORD0004)**

Responsible: Self Home: (414) - Work: (414) 573-4484 xCELL  
 Primary: TODAY'S HEALTH CLAIMS (TODAY0000) Phone: (866) 253-4471 ID: 52000432200  
 Secondary: EDS FEDERAL (EDS) ID: 1400076111

Billing	Date	Pror	TX Code	TX Description	Debit	Credit	Balance
<b>Primary:</b>				<b>First Billed</b>	<b>Last Billed</b>	<b>Times Billed</b>	
				04/15/2009	04/15/2009	1	
<b>Billing Total:</b>					<b>\$240.00</b>	<b>\$215.00</b>	<b>\$25.00</b>
27109	04/23/2009	RBIC000	97110	THERAPEUTIC EXERCISES	\$120.00	\$0.00	\$120.00
27109	04/23/2009	RBIC000	97112	NEUROMUSCULAR REEDL	\$60.00	\$0.00	\$180.00
27109	04/23/2009	RBIC000	97140	MANUAL THERAPY	\$60.00	\$0.00	\$240.00
27109	04/27/2009	RBIC000	97110	THERAPEUTIC EXERCISES	\$120.00	\$0.00	\$360.00
27109	04/27/2009	RBIC000	97112	NEUROMUSCULAR REEDL	\$60.00	\$0.00	\$420.00
27109	04/27/2009	RBIC000	97140	MANUAL THERAPY	\$60.00	\$0.00	\$480.00
<b>Primary:</b>				<b>First Billed</b>	<b>Last Billed</b>	<b>Times Billed</b>	
				04/30/2009	04/30/2009	1	
<b>Billing Total:</b>					<b>\$480.00</b>	<b>\$0.00</b>	<b>\$480.00</b>
27215	04/29/2009	RBIC000	97110	THERAPEUTIC EXERCISES	\$120.00	\$0.00	\$120.00
27215	04/29/2009	RBIC000	97140	MANUAL THERAPY	\$60.00	\$0.00	\$180.00
<b>Primary:</b>				<b>First Billed</b>	<b>Last Billed</b>	<b>Times Billed</b>	
				05/05/2009	05/05/2009	1	
<b>Billing Total:</b>					<b>\$180.00</b>	<b>\$0.00</b>	<b>\$180.00</b>
<b>Patient Total:</b>					<b>\$1,500.00</b>	<b>\$715.00</b>	<b>\$785.00</b>
<b>Patient Unapplied Prepayment Total</b>							<b>\$0.00</b>
<b>Provider Totals</b>							
MILAN GRBIC PT					\$1,500.00	\$715.00	\$785.00
<b>Report Totals</b>					<b>\$1,500.00</b>	<b>\$715.00</b>	<b>\$785.00</b>
<b>Report Prepayment Totals</b>							<b>\$0.00</b>





## Legislation Details (With Text)

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**File #:** 091087      **Version:** 0

**Type:** Resolution      **Status:** In Committee

**File created:** 12/1/2009      **In control:** JUDICIARY & LEGISLATION COMMITTEE

**On agenda:**      **Final action:**

**Effective date:**

**Title:** Resolution relating to an appeal from Maria Vargas for personal injuries. (13th Aldermanic District)

**Sponsors:** THE CHAIR

**Indexes:** CLAIMS APPEAL

**Attachments:** City Attorney Letter, Appeal, Hearing Notice List

Date	Ver.	Action By	Action	Result	Tally
12/1/2009	0	COMMON COUNCIL	ASSIGNED TO		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		

**Number**

091087

**Version**

ORIGINAL

**Reference**

**Sponsor**

THE CHAIR

**Title**

Resolution relating to an appeal from Maria Vargas for personal injuries. (13<sup>th</sup> Aldermanic District)

**Drafter**

CC

dkf

11/30/09

**GRANT F. LANGLEY**  
City Attorney

**RUDOLPH M. KONRAD**  
**LINDA ULISS BURKE**  
**VINCENT D. MOSCHELLA**  
Deputy City Attorneys



**THOMAS O. GARTNER**  
**BRUCE D. SCHRIMPF**  
**SUSAN D. BICKERT**  
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**HEIDI E. GALVÁN**  
**JARELY M. RUIZ**  
**ROBIN A. PEDERSON**  
**DANIELLE M. BERGNER**  
Assistant City Attorneys

November 11, 2009

Maria Vargas  
2420 South 17th Street  
Milwaukee, WI 53215

RE: Maria Vargas  
C.I. File No.: 09-S-225

Dear Ms. Vargas:


We have received your claim in the amount of \$1,098.75, relating to medical expenses incurred after you allegedly slipped and fell on April 27, 2009 on the sidewalk near Locust Street and Richards Street.

Our investigation reveals that the Infrastructure Services Division records indicate that prior to April 27, 2009 the City had no notice of this hazard in the sidewalk and because of this lack of notice the City would not be liable. Therefore, we are denying your claim.

If you wish to appeal this decision, you may do so by sending a letter within 21 days of receipt of this letter to the Milwaukee City Clerk, 200 East Wells Street, Room 205, Milwaukee, Wisconsin 53202, requesting a hearing.

Very truly yours,

  
GRANT F. LANGLEY  
City Attorney

  
STEVEN M. CARINI  
Investigator Adjuster

SMC:ms  
1029-2009-1679:151815

OFFICE OF THE CITY ATTORNEY

09-5-225

CITY OF MILWAUKEE  
RECEIVED

November 17, 2009

2009 NOV 20 PM 2: 54

OFFICE OF  
CITY ATTORNEY

To whom it may concern:

I'm requesting to appeal the decision you've made, because I did get hurt on April 27, 2009. Like I said before I was walking on the sidewalk on Locust and Richards St, and I slipped and fell. The side walk had cracks, ~~and~~ dirt and water and I fell. I want my bills and pain and suffering paid for.

Sincerely,  
Maria Vargas

Maria Vargas

CITY OF MILWAUKEE  
2009 NOV 19 AM 11:45  
RONALD D. LEONHARDT  
CITY CLERK

June 13, 2009

To City of Milwaukee,

On April 27, 2009 I was walking on the sidewalk at Locust St and Richard St. The sidewalk had a crack and dirt and water. I slipped and fell.

I am still having pain from this fall. I want my bills and time paid for.

Sincerely,

Maria Vargas

Maria T

OFFICE OF  
CITY ATTORNEY

2009 JUN 17 PM 3:30

CITY OF MILWAUKEE  
RECEIVED

CITY OF MILWAUKEE  
2009 JUN 16 AM 11:54  
RONALD D. LEONARDI  
CITY CLERK

Vargas

Mary K. Boyle  
June 9, 2009

## LAKESHORE MEDICAL CLINIC, LTD.

**MIDTOWN HEALTH CENTER**  
5818 W. Capitol Drive  
Milwaukee, WI 53216  
Phone: 414-449-2114

**CUDAHY CAMPUS**  
*At St. Luke's South Shore*  
5900 S. Lake Drive  
Cudahy, WI 53110  
Phone: 414-489-4190

**SOUTHPOINTE FAMILY PRACTICE**  
4448 W. Loomis Road, Suite 100  
Greenfield, WI 53220  
Phone: 414-281-5150

**LAYTON AVENUE CAMPUS**  
*Lakeshore Medical Clinic*  
2000 E. Layton Avenue  
St. Francis, WI 53235  
Phone: 414-744-6589

**MUSKEGO CAMPUS**  
S74 W16775 Janesville Road  
Muskego, WI 53150  
Phone: 414-422-2180

**THIRD WARD CAMPUS**  
180 N. Milwaukee Street  
Milwaukee, WI 53202  
Phone: 414-227-1127

**WOMEN'S PAVILION**  
8905 W. Lincoln Ave, Suite 409  
West Allis, WI 53227  
Phone: 414-328-8770

**NEW BERLIN CAMPUS**  
14555 W. National Avenue  
New Berlin, WI 53151  
Phone: 262-827-2959

**OAK CREEK CAMPUS**  
331 E. Puetz Road  
Oak Creek, WI 53154  
Phone: 414-570-3590

**20TH & OHIO CAMPUS**  
*Lakeshore Medical Clinic*  
3305 S. 20th Street  
Milwaukee, WI 53215  
Phone: 414-645-1808

**GREENFIELD URGENT CARE**  
4131 W. Loomis Road, Suite 110  
Greenfield, WI 53221  
Phone: 414-281-5153

**WEST ALLIS CAMPUS**  
*Lakeshore Medical Clinic*  
2424 S. 90th Street  
West Allis, WI 53227  
Phone: 414-328-8777

**SOUTH POINTE INTERNAL MEDICINE**  
4448 W. Loomis Road, Suite 206  
Greenfield, WI 53220  
Phone: 414-281-1688

**SOUTH MILWAUKEE**  
3611 S. Chicago Ave. Ste. 100  
South Milwaukee, WI 53172  
Phone: 414-762-7270

**SOUTHPOINTE OB/GYN**  
4448 W. Loomis Road, Suite 201  
Greenfield, WI 53220  
Phone: 414-817-0784

Please excuse maria Vargas From:  Work  Gym/Sports  
 School  Other: \_\_\_\_\_

First Day Off \_\_\_\_\_ Patient was here today 6/11/9 for an appointment

Return to Work/School/Activities Date \_\_\_\_\_ NEXT CLINIC APPOINTMENT 3 weeks

Restrictions If Any chip fr - Right wrist - cast applied.

Remarks: \_\_\_\_\_

Eve [Signature]  
Signature

for SNCRP

6/11/9  
Date



**LAKESHORE MEDICAL CLINIC, LTD.**  
**RADIOLOGY REPORT**

**PATIENT NAME:** MARIA I. VARGAS

**XR#:** 58123

**DATE OF BIRTH:** 04/26/1952

**MRN:** 14741052

**LAKESHORE SITE:** Layton

**ORDERING PHYSICIAN:** Richard Hayes, MD

**SEND REPORT TO SITE:** LSF

**DATE OF SERVICE:** 06/03/2009

**EXAM:** Chest X-Ray, Left Rib Series, Four-View Right Wrist X-Ray

**HISTORY:** Status post fall, injury, pain in chest, ribs, and wrist. Injury 05/27/2009.

**EXAM:** Four-View Right Wrist

**FINDINGS:** Best seen on the lateral radiograph is a subtle fracture of the trapezium with ulnar neutral variance is seen. No dislocation. Tiny cystic change in the scaphoid bone measuring 1 to 2 mm in size is present.

**IMPRESSION:** Subtle fracture of the trapezium.

**EXAM:** Chest X-Ray

**FINDINGS:** The heart is mildly prominent in size. Aortic ectasia is noted. No confluent infiltrates or pulmonary vascular congestive changes. No evidence of a pleural effusion or pneumothorax.

**IMPRESSION:** No active disease in the chest.

**EXAM:** Left Rib Series

**FINDINGS:** Multiple views of the left ribs were obtained. No evidence of a left rib fracture is seen. If symptoms persist, bone scan study may be of value.

**IMPRESSION:** Negative left rib series.

Richard + locust ST  
at 11:00

June 3, 2009

re: Maria Vargas

on April 27, 2009, Maria fell on  
the sidewalk, suffering injuries.

She was seen at St Mary's  
Hospital ER.

She continues to have left sided  
chest pain and right wrist pain  
from the accident.

RM Hayes MD

Richard M Hayes MD

Richard + Locust  
Mon 11:00



# Columbia St. Mary's

A Passion for Patient Care

Columbia (CH) / Milwaukee (SMM) / Ozaukee (SMO)

## EMERGENCY SERVICES

## HOME MEDICATION LIST AND DISCHARGE INSTRUCTIONS

Prescription, over-the-counter, and herbal/natural medications taken routinely prior to admission.

VARGAS  
MR 343490 04/26/1952 57Y PT 120253425 F  
120253425  
ATN: BRACKETT, NATHANIEL S  
ADM: 05/28/09 Type E EHR SMM

Data Source:  Patient  Family  MD  Pharmacies  Old Records  Nursing Home / other facility  EHR

Patient's Pharmacy \_\_\_\_\_ Address: \_\_\_\_\_ Phone # \_\_\_\_\_

Latex Allergy:  yes  no Reaction: \_\_\_\_\_

Medicine / Food / Other Allergy	Reaction	Medicine / Food / Other Allergy	Reaction

HOME MEDICATIONS						MD TO COMPLETE THIS SECTION
MEDICATION NAME	DOSE	ROUTE	Frequency	Indication	Last Taken	Medication Changes / Special Instructions
Libbutrol						
Provera						

RN Recording Home Medications: *Wanda Adams*

### PHYSICIAN DISCHARGE ORDERS:

NEW MEDICATIONS	REASON	INSTRUCTIONS
<i>Libbutrol</i>	<i> </i>	<i> </i>

### MEDICATION INSTRUCTIONS:

- Take all home medications listed above.
- Take home medications following instructions above.
- Follow up with your primary doctor about your home medications.
- Start new medications listed above.

### DIAGNOSES:

1. *Left side chest wall pain*
2.
3.

INSTRUCTIONS:  Sedative / Narcotic  Wound  Head Injury  Sprain/Fracture  Back Pain

Other: Return to Emergency Department if condition worsens or excessive and persistent pain, or

*Do not take any more Libbutrol. Need to cough up sputum for unit. Bring to unit. Transporter will take to lab. Also are heating pad to area.*

FOLLOW UP: Work/School Excuse:  N  Y until (date)

Call Dr. \_\_\_\_\_ for appointment / to be seen in \_\_\_\_\_ days Phone: \_\_\_\_\_

Call Dr. \_\_\_\_\_ for appointment / to be seen in \_\_\_\_\_ days Phone: \_\_\_\_\_

Emergency Physician Signature: DATE *5/24/09* TIME *1:40* Signature *[Signature]*

RN Reviewing Instructions: DATE \_\_\_\_\_ TIME \_\_\_\_\_ Signature \_\_\_\_\_

Patient Signature: *[Signature]*

01-4110-22 Rev. 12/07

BARCODE

HOME MEDICATION LIST AND DISCHARGE INSTRUCTIONS  
WHITE - MED RECORD CANARY - PATIENT PINK - PHYSICIAN

*Richard Klocust at 11:00*



# Columbia St. Mary's

A Passion for Patient Care

Columbia (CH) / Milwaukee (SMM) / Ozaukee (SMO)

## EMERGENCY SERVICES

## HOME MEDICATION LIST AND DISCHARGE INSTRUCTIONS

Prescription, over-the-counter, and herbal/natural medications taken routinely prior to admission.

VARGAS  
MR 343490 04/26/1952 MARIA A  
120116770  
ATN REID, JANE E., MD  
ADM 04/27/09 Tube E EMR SMM

Data Source:  Patient  Family  MD  Pharmacist  Old Records  Nursing Home / other facility  EHR  
Patient's Pharmacy \_\_\_\_\_ Address \_\_\_\_\_ Phone # \_\_\_\_\_

Latex Allergy:  yes  no Reaction:

Medicine / Food / Other Allergy	Reaction	Medicine / Food / Other Allergy	Reaction

HOME MEDICATIONS	DOSE	ROUTE	Frequency	Indication	Last Taken	MD TO COMPLETE THIS SECTION
MEDICATION NAME						Medication Changes / Special Instructions
Vitamin D						

RN Recording Home Medications:

### PHYSICIAN DISCHARGE ORDERS:

NEW MEDICATIONS	REASON	INSTRUCTIONS
Forib 5/500mg to 7/15Rx		
adul 200mg to 1 (2 tabs every 4-6 hours)		

**MEDICATION INSTRUCTIONS:**

Take all home medications listed above.  
 Take home medications following instructions above.  
 Follow up with your primary doctor about your home medications.  
 Start new medications listed above.

**DIAGNOSES:**

1. acute sprain
2. injury to R wrist
- 3.

**INSTRUCTIONS:**  Sedative / Narcotic  Wound  Head Injury  Sprain/Fracture  Back Pain  
 Other:  Return to Emergency Department if condition worsens or excessive and persistent pain, or

\* reassurance, rest, accurate and splint for one week, elevate R hand with ice pack for one week, daily warm soaks to follow, see MD

**FOLLOW-UP:** as needed on week Work/School Excuse:  N  Y until (date)

Call Dr. \_\_\_\_\_ for appointment / to be seen in \_\_\_\_\_ days Phone: \_\_\_\_\_  
 Call Dr. \_\_\_\_\_ for appointment / to be seen in \_\_\_\_\_ days Phone: \_\_\_\_\_

Emergency Physician Signature: DATE \_\_\_\_\_ TIME \_\_\_\_\_ Signature: *J. Reid*  
 RN Reviewing Instructions: DATE \_\_\_\_\_ TIME \_\_\_\_\_ Signature: \_\_\_\_\_

Patient Signature: \_\_\_\_\_

Richard Locust at 11:00



COLUMBIA ST MARYS HOSPITAL-MILWAUKEE CAMPUS  
P O BOX 2960  
MILWAUKEE, WI 53201-2960

RECORD OF SERVICE PG# 1  
DATE: 06/09/09  
ACCT TYPE: O

414 326-1900

PATIENT NAME: VARGAS, MARIA A PATIENT NUMBER: 120116770 FC: Y  
ADMIT DATE: 04/27/09 DISCHARGE DATE: BIRTH DT: 04/26/1952 PT: E

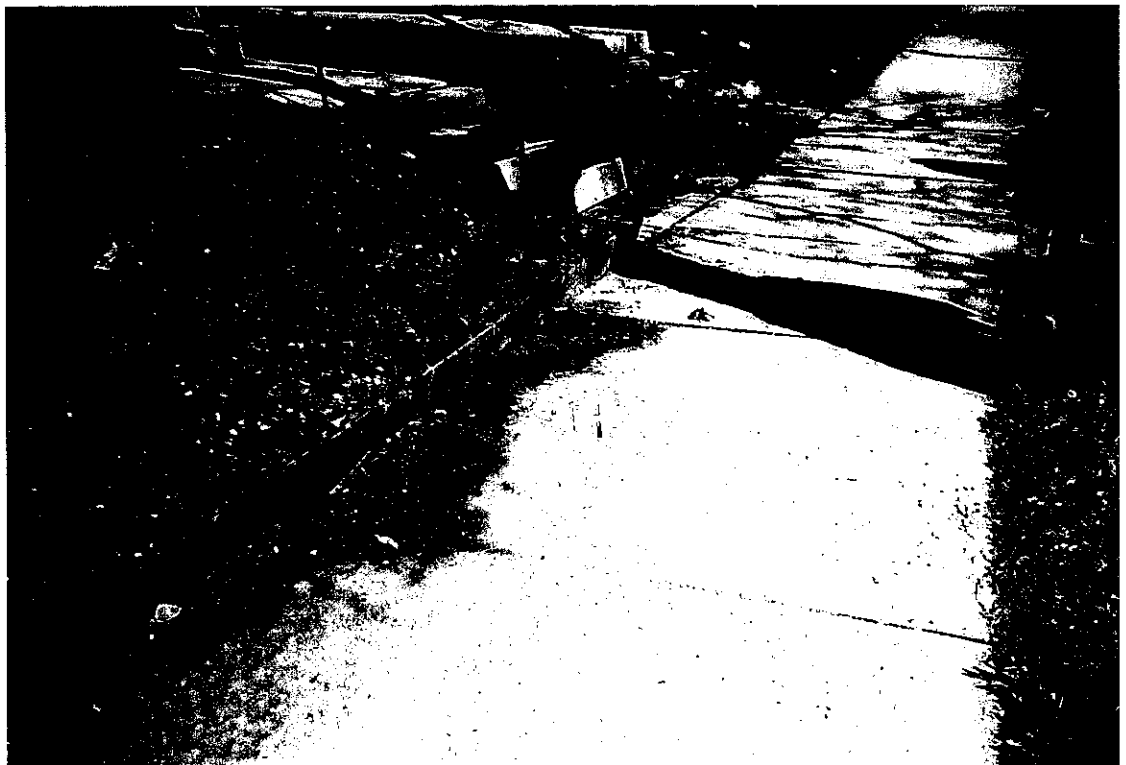
GUARANTOR: MARIA A VARGAS TOTAL CHARGES: 1098.75  
NAME AND : 2863 N BUFFUM ST  
ADDRESS : *Apt 1* MILWAUKEE WI 53212  
ACCOUNT BAL: .00  
PATIENT BAL: .00

DATE	DESC	BAL:	INS1: T66	INS2:	INS3:	PATIENT
			.00			.00
042709	1 WRIST 3+V RT	80420935		305.50	0.00	0.00
042709	1 EMERGENCY RM LE	61510044		462.00	0.00	0.00
042709	1 STRAPPING, WRIS	61621695		331.25	0.00	0.00

*Richard + locust ST  
at 11:00*

11:07 06/09/09 FROM IBUU,EDPABLFX















## Legislation Details (With Text)

---

**File #:** 091062      **Version:** 0  
**Type:** Resolution      **Status:** In Committee  
**File created:** 12/1/2009      **In control:** JUDICIARY & LEGISLATION COMMITTEE  
**On agenda:**      **Final action:**  
**Effective date:**  
**Title:** Resolution relating to the claim of Reginald Wheeler for property damage and personal injuries. (7th Aldermanic District)  
**Sponsors:** THE CHAIR  
**Indexes:** CLAIMS  
**Attachments:** City Attorney Letter.pdf, Claim, Hearing Notice List

Date	Ver.	Action By	Action	Result	Tally
12/1/2009	0	COMMON COUNCIL	ASSIGNED TO		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		

**Number**

091062

**Version**

ORIGINAL

**Reference**

**Sponsor**

THE CHAIR

**Title**

Resolution relating to the claim of Reginald Wheeler for property damage and personal injuries. (7th Aldermanic District)

**Requestor**

City Attorney

**Drafter**

JAS:ms

November 24, 2009

1029-2009-2906:152334

**GRANT F. LANGLEY**  
City Attorney

**RUDOLPH M. KONRAD**  
**LINDA ULISS BURKE**  
**VINCENT D. MOSCHELLA**  
Deputy City Attorneys



**THOMAS O. GARTNER**  
**BRUCE D. SCHRIMPF**  
**SUSAN D. BICKERT**  
**STUART S. MUKAMAL**  
**THOMAS J. BEAMISH**  
**MAURITA F. HOUREN**  
**JOHN J. HEINEN**  
**DAVID J. STANOSZ**  
**SUSAN E. LAPPEN**  
**JAN A. SMOKOWICZ**  
**PATRICIA A. FRICKER**  
**HEIDI WICK SPOERL**  
**KURT A. BEHLING**  
**GREGG C. HAGOPIAN**  
**ELLEN H. TANGEN**  
**MELANIE R. SWANK**  
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**DONALD L. SCHRIEFER**  
**EDWARD M. EHRlich**  
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**MIRIAM R. HORWITZ**  
**MARYNELL REGAN**  
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**THOMAS D. MILLER**  
**HEIDI E. GALVÁN**  
**JARELY M. RUIZ**  
**ROBIN A. PEDERSON**  
**DANIELLE M. BERGNER**  
Assistant City Attorneys

November 24, 2009

To the Honorable Common Council  
Of the City of Milwaukee  
Room 205 – City Hall

Re: Resolution Relating to the Claim of Reginald Wheeler  
C.I. File No. 09-L-125

Dear Council Members:

We return the enclosed document which has been filed with the City Clerk and ask that it be introduced and referred to the Committee on Judiciary & Legislation with the following recommendation.

Claimant, Reginald Wheeler, 4320 North 42<sup>nd</sup> Place, Milwaukee, WI 53216, alleges that on July 13, 2009 he sustained damages to his vehicle, personal injury and pain and suffering when his vehicle allegedly struck a manhole cover that was sticking up in the roadway at/near South 28<sup>th</sup> Street and West National Avenue. He claims damages in the amount of \$5,234.11.

Our investigation reveals that the Sewer Maintenance Section reviewed their records and found they had not received any calls regarding this alleged situation. They checked the area as a result of this claim and found all of the City's structures were secured at that time. The City had no notice of this defect with the manhole and because of this lack of notice, it would not be liable, as such, we recommend denial of this claim.

Very truly yours,

GRANT F. LANGLEY  
City Attorney

JAN A. SMOKOWICZ  
Assistant City Attorney

JAS:ms  
Enclosure  
1029-2009-2906:151798

**NOTICE OF CIRCUMSTANCES GIVING RISE TO  
CLAIM FOR DAMAGES PURSUANT TO SECTION 893.80, WIS. STAT.**

TO: City Clerk  
Attn: CLAIMS  
200 E. Wells Street  
Room 205  
Milwaukee, WI 53201-3567

REGINALD H. WHEELER  
CITY CLERK  
09 OCT 23 PM 12:32  
CITY OF MILWAUKEE

PLEASE TAKE NOTICE that Reginald H. Wheeler, claims the circumstances giving rise to a claim as follows:

1. Reginald H. Wheeler is an adult who resides at 4320 N. 42<sup>nd</sup> Place, Milwaukee, WI 53216.
2. Reginald H. Wheeler sustained personal injuries and property damage to his vehicle due to the negligence of the agent/employees of the above-named party.
3. The circumstances of the injuries and property damage are as follows: On July 13, 2009 at approximately 2:50 a.m., Reginald H. Wheeler was driving his 1996 SL2 Saturn (VIN 1G8ZK527TZ11656) north on S. 28<sup>th</sup> Street approximately 50 feet south of National Ave. in the City of Milwaukee when he collided with a manhole cover that was sticking up from the ground causing damage to his vehicle and causing him personal injuries (See Wisconsin Motor Vehicle Accident Report attached hereto as Exhibit A).
4. The above-named party was negligent with regard to the care and maintenance of the manhole cover and by failing to warn Mr. Wheeler of the dangerous conditions on a public roadway.
5. As a direct and proximate result of the negligence of the above-named party, Mr. Wheeler's vehicle sustained property damage totaling between \$702.03 and \$735.38 (See Repair Estimates attached hereto as Exhibits B and C).
6. As a direct and proximate result of the negligence to the above-named party, Reginald H. Wheeler sustained a neck sprain and other personal injuries and incurred medical bills totaling \$2,032.08 (See Exhibits D, E and F attached hereto).
7. At all times material, the above-named party had actual notice of the aforesaid incident and thoroughly investigated it.

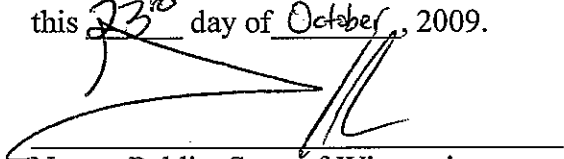
THEREFORE, Reginald H. Wheeler, claims damages against the City of Milwaukee for the sum of \$702.03 and \$735.38 for property damage sustained by his vehicle and for medical bills reasonably related to the above incident in the amount of \$2,032.08 and for \$2,500.00 for his personal pain and suffering as a result of the above accident.

OFFICE OF  
CITY ATTORNEY  
09 OCT 26 PM 2:42  
CITY OF MILWAUKEE  
RECEIVED

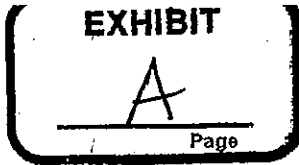
Dated: 10-23-09

Reginald H. Wheeler  
Reginald H. Wheeler  
4320 N. 42<sup>nd</sup> Place  
Milwaukee, WI 53216

Subscribed and sworn to before me  
this 23<sup>rd</sup> day of October, 2009.



Notary Public, State of Wisconsin  
My Commission 10-09-2011.



**Wisconsin Motor Vehicle 9H0XXL5**  
**Accident Report MV4000e 01/2005**  
 PK2007

POLICE # DISTRICT 2  
 ACCIDENT # 091940231

<input checked="" type="checkbox"/> Reportable Accident		<input type="checkbox"/> On Emergency		<input type="checkbox"/> Amended		DOT Document Number 9H0XXL5		Document Override Number		
Agency Accident Number 091940231				Police Number DISTRICT 2						
4 - Accident Date 07/13/2009		5 - Time of Accident (Military Time) 0250		6 - Total Units 01		7 - Total Injured 00		8 - Total Killed 00		
2 - County MILWAUKEE - 40		3 - Municipality MILWAUKEE - 57 CITY			11 - Accident Location NON-INTERSECTION					
14 - On Hwy No.		14 - On Street Name 28TH ST S			14 - Bus/Fmt/Rmp		15 - Est. Dist 50		15 - Hwy. Dir F	15 - Hwy. Dir SOUTH
16 - Fr/At Hwy No.		16 - From/At Street Name NATIONAL AVE W				16 - Business/Frontage/Ramp				
17 - Structure Type		17 - Structure Number		12 - Latitude			13 - Longitude			
80 - First Harmful Event OTHER NON-COLLISION				83 - Manner of Collision NO COLLISION WITH MOTOR VEHICLE IN TRANSPORT						
112 - Access Control NO CONTROL		113 - Road Curvature STRAIGHT		113 - Road Terrain LEVEL/FLAT		Surface Type SLAG, GRAVEL, OR STONE - 4				
115 - Traffic Way NOT-PHYSICALLY-DIVIDED-(2-WAY TRAFFIC)										
117 - Relation To Roadway ON-ROADWAY										
114 - Light Condition DARK-NOT-LIGHTED			116 - Road Surface Condition OTHER			118 - Weather CLEAR				
<input type="checkbox"/> Hit and Run		<input checked="" type="checkbox"/> Government Property			<input type="checkbox"/> Fire		<input type="checkbox"/> Photos Taken		<input type="checkbox"/> Trailer or Towed	
<input type="checkbox"/> Truck, Bus, or Hazardous Materials			<input type="checkbox"/> Load Spillage		<input type="checkbox"/> Construction Zone			<input type="checkbox"/> Names Exchanged		
101 <input type="checkbox"/> Supplemental Reports		102 <input type="checkbox"/> Witness Statements			103 <input type="checkbox"/> Measurements Taken			79 - E M S Number		

**Operator/Pedestrian**

Unit Status		81 - Most Harmful Event: Collision With OTHER FIXED OBJECT			23 - Dir Of Travel NORTH		24 - Speed Limit 25			
36 - Operating as Classified D CLASS		37 - Endorsements			35 <input type="checkbox"/> Operating Commercial Motor Vehicle					
29 - Driver License Number WA607286720409			30 - State WI	31 - Expiration Year 2014		34 - On Duty/Accident				
25 - Operator/Pedestrian Last Name WHEELER				25 - First Name REGINALD		25 - Middle Initial H		25 - Suffix		
32 - Date Of Birth 06/04/1967		33 - Sex MALE								
26 - Address Street & Number 4320 N.42 ND PL						26 - PO Box				
27 - City MILWAUKEE			27 - State WI		27 - Zip Code 53216		28 - Telephone Number (810) 007-0 EXT.			
39 - Seat Position FRONT-SEAT-LEFT-SIDE-(MC/BIKE DRIVER, TRAIN CONDUCTOR)					40 - Safety Equipment SHOULDER-BELT-AND-LAP-BELT-USED					
38 - Injury Severity N - NO APPARENT INJURY			41 - Airbag NON-DEPLOYED		42 - Ejected NOT-EJECTED		44 <input type="checkbox"/> Medical Transport			
43 - Trapped/Extricated NOT-TRAPPED			92 - Pedestrian Location		92 - Pedestrian Action					
119 - What Driver Was Doing GOING-STRAIGHT			120 - Traffic Control NO-CONTROL				82 - No. of Citations Issued			
64 - 1st Statute No.		64 - 2nd Statute No.		64 - 3rd Statute No.		64 - 4th Statute No.		64 - 5th Statute No.		
122 - Driver Factors NOT-APPLICABLE										
88 - Driver or Pedestrian Cond APPEARED NORMAL			89 - Substance Presence NEITHER-ALCOHOL-NOR-DRUGS-PRESENT							
80 - Alcohol Test TEST NOT GIVEN			90 - Alcohol Content			91 - Drug Test TEST-NOT-GIVEN				



PK2007

91 - Drugs Reported
124 - Highway Factors OTHER-DEBRIS, SIGN-OBSCURED-OR-MISSING

**Vehicle**

<b>VEHICLE 01</b>	21 - Unit Type <b>AUTOMOBILE</b>		Vehicle Type <b>PASSENGER-CAR</b>			22 - Total Occupants <b>1</b>
	50 - License Plate Number <b>201MHY</b>		57 - Plate Type <b>AUT</b>	58 - State <b>WI</b>	59 - Exp Year <b>2009</b>	55 - Vehicle Identification Number <b>1GBZK527TZ11656</b>
	50 - Year <b>1996</b>	51 - Make <b>STRN</b>	52 - Model <b>SL2</b>	53 - Body Style <b>4D</b>	54 - Color <b>DGR</b>	100 - Skidmarks to Impact (Ft)
	84 - Vehicle Damage <b>UNDERCARRIAGE</b>					
	95 - Extent Of Damage <b>MODERATE</b>		86 <input checked="" type="checkbox"/> Vehicle Towed Due To Damage		97 - Vehicle Removed By <b>RAY'S TOWING</b>	
	123 - Vehicle Factors <b>NOT-APPLICABLE</b>					

**Vehicle Owner**

<b>VEH OWNER 01</b>	45 <input checked="" type="checkbox"/> Vehicle Owner Same As Operator				
	46 - Vehicle Owner Last Name <b>WHEELER</b>		46 - First Name <b>REGINALD</b>	46 - Middle Initial <b>H</b>	46 - Suffix
	48 - Company Name				
	47 - Address Street & Number <b>4320 N.42 ND PL</b>			47 - PO Box	
	48 - City <b>MILWAUKEE</b>		48 - State <b>WI</b>	48 - Zip Code <b>53216</b>	49 - Telephone Number <b>(810) 007-0 EXT.</b>

**Insurance**

<b>INS 01</b>	83 - Liability Insurance Company <b>NONE</b>		80 <input type="checkbox"/> Policy Holder Same As Owner		
	61 - Policy Holder Last Name		61 - Policy Holder First Name		
	61 - Policy Holder Company				

**School Bus**

<b>BUS 01</b>	Bus Travelling to/from <input type="radio"/> To <input type="radio"/> From		School Name	Body Make	Seating Capacity
	School District Contracted With				

**Property**

Organization Type <b>GOVERNMENT</b>	84 - Property Owner Last Name	84 - First Name	84 - Middle Initial	84 - Suffix
--	-------------------------------	-----------------	---------------------	-------------

<b>PROPERTY OWNER 01</b>	84 - Company Name <b>CITY OF MILWAUKEE</b>		Government Property Type <b>COUNTY/MUNICIPAL</b>	
	85 - Address Street & Number <b>200 E WELLS ST</b>		85 - PO Box	
	86 - City <b>MILWAUKEE</b>	86 - State <b>WI</b>	86 - Zip Code <b>53202</b>	87 - Telephone Number <b>(414) 286-3850 EXT.</b>
	83 - Government Damage Tag Number			
	<b>Fixed Objects Struck</b>			
82 - Striking Unit <b>01</b>	82 - Object Struck <b>OTHER-OBJECT-NOT-FIXED</b>		82 - Striking Unit	82 - Object Struck
82 - Striking Unit	82 - Object Struck		82 - Striking Unit	82 - Object Struck
82 - Striking Unit	82 - Object Struck		82 - Striking Unit	82 - Object Struck

**Diagram and Narrative**

<b>DIAGRAM AND NARRATIVE</b>	105 - PHOTOS BY
UNIT 1 TRAVELING NORTH ON S.28TH ST COLLIDED WITH A MAN HOLE COVER THAT WAS STICKING UP FROM THE GROUND CAUSING DAMAGE TO UNIT 1'S UNDER CARRIAGE.	

**Officer Information**

<b>OFFICER INFORMATION</b>	125 - Officer Last Name <b>SVENSSON</b>		125 - First Name <b>STEVEN</b>	125 - Middle Initial <b>B</b>	131 - Officer ID <b>11346</b>	
	129 - Law Enforcement Agency No. <b>006</b>		130 - Law Enforcement Agency Name <b>MILWAUKEE POLICE DEPARTMENT</b>			
	126 - Law Enforcement Agency Address Street & Number <b>749 WEST STATE STREET</b>					
	127 - City <b>MILWAUKEE</b>		127 - State <b>WI</b>	127 - Zip Code <b>53233</b>	128 - Telephone Number <b>(414) 933-4444 EXT.</b>	
	132 - Date Notified <b>07/13/2009</b>		133 - Time Notified (Military Time) <b>0305</b>	134 - Time Arrived (Military Time) <b>0309</b>	135 - Date Of Report <b>07/13/2009</b>	
	Agency Accident Number <b>091940231</b>		Police Number <b>DISTRICT 2</b>		19 - Special Study	
	18 - Agency Space <b>4057</b>					

QUOTE  
1167765  
10/01/2009

FIRESTONE COMPLETE AUTO CARE  
8485 W BROWN DEER RD  
MILWAUKEE, WI. 53224-2110

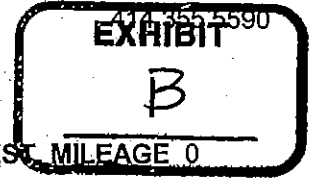
SERVICE ADVISOR:  
02 CHRIS

WHEELER, REGINALD  
4320 N 42ND PL  
MILWAUKEE, WI 53216-1624  
414.873.6092

1996 SATURN SL2  
4-116 1.9L DOHC  
LIC # GET WI  
IN 01/01/70 12:00AM

VIN #

EST MILEAGE 0



Store # 017736

QUOTE

Description	Article Number	T#	Qty	Part	Labor	Extended Price	Job Total
<b>ALTERNATOR/GENERATOR</b>							<b>201.99</b>
8107N NEW ALTERNATOR	7037558		1	154.99		154.99	
REMOVE & REPLACE ALTERNATOR DRIVE BELT	7021202		1		47.00	47.00	
<b>TIE ROD ENDS (Both Left and Right Outer)</b>							<b>259.18</b>
ES3238RL TIE ROD END	7001415		2	91.99		183.98	
REMOVE & REPLACE TIE ROD END- OUTER, BOTH	7023000		1		75.20	75.20	
<b>ALIGNMENT SERVICE</b>							<b>74.99</b>
Symptom:-							
ALIGNMENT SERVICE	7004578		1		74.99	74.99	
<b>PREMIUM ALIGNMENT SERVICE</b>							<b>139.99</b>
Symptom:-							
LIFETIME ALIGNMENT SERVICE	7005229		1		159.99	159.99	
LBR-DISC SALE	7001681		-1		20.00	-20.00	

Prices valid for 30 days

Summary	
Parts	338.97
Labor	337.18
Shop Supplies 20-23	
Sub	696.38
Tax	39.00
<b>Total</b>	<b>735.38</b>

"MOTOR VEHICLE REPAIR PRACTICES AND PROCEDURES" BY THE BUREAU OF CONSUMER PROTECTION, WISCONSIN DEPT. OF TRANSPORTATION, TRADE AND LABOR, 100 SOUTH MONROE STREET, MADISON, WISCONSIN 53708-8911

**THIS IS NOT AN INVOICE - DO NOT PAY**

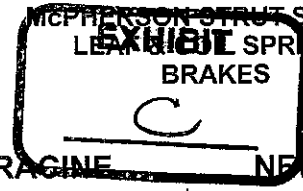
TIRES  
AIR CONDITIONING  
BELTS / HOSES  
HEADLIGHTS · CHASSIS



www.wimuffler.com

"The Boys That  
Fix The Noise"

EXHAUST  
SHOCK ABSORBERS  
MCPHERSON STRUT SERVICE  
LEAF SPRINGS  
BRAKES



RACINE NEW BERLIN

2905 Lathrop Avenue  
Racine, WI 53405  
(262) 633-6276

13320 West College Avenue  
New Berlin, WI 53151  
(414) 427-4900

THIS IS AN ESTIMATE ONLY

NORTH

5835 West Lisbon Avenue  
Milwaukee, WI 53210  
(414) 447-1118

SOUTH

3634 West Lincoln Avenue  
Milwaukee, WI 53215  
(414) 643-5464

NAME <i>Reginald White</i>	DAYTIME PHONE <i>873-6092</i>	HOME PHONE <i>801-0170 Cel</i>
ADDRESS	CITY	STATE ZIP

MAKE OF AUTO <i>Saturn</i>	MODEL <i>SL1</i>	YEAR <i>96</i>	LICENSE # <i>201-MHY</i>	ODOMETER <i>119459</i>	DATE <i>7-29-09</i>
-------------------------------	---------------------	-------------------	-----------------------------	---------------------------	------------------------

NOT RESPONSIBLE FOR LOSS OR DAMAGE TO CARS OR ARTICLES LEFT IN CARS IN CASE OF FIRE, THEFT OR ANY OTHER CAUSE BEYOND OUR CONTROL.

ALL PIPES ARE WARRANTED AGAINST WEAR OUT OR RUST OUT FOR ONE YEAR FROM DATE OF INSTALLATION ON YOUR U.S. MADE CAR. REPLACEMENT WILL BE MADE AT NO CHARGE FOR PARTS OR LABOR UPON PRESENTATION OF SALES RECEIPT BY THE ORIGINAL PURCHASER TO WISCONSIN MUFFLER ONLY.

YOU ARE ENTITLED TO A PRICE ESTIMATE FOR THE REPAIRS YOU HAVE AUTHORIZED. THE REPAIR PRICE MAY BE LESS THAN THE ESTIMATE, BUT WILL NOT EXCEED THE ESTIMATE WITHOUT YOUR PERMISSION. YOUR SIGNATURE WILL INDICATE YOUR ESTIMATE SELECTION.

1. I request an estimate in writing before you begin repairs.  
 Yes  No

2. Please proceed with repairs, but call me before continuing if the price will exceed.  
\$  Yes  No

3. I do not want an estimate.  
 Yes  No

4. Additional work authorized by:

DATE TIME NO. CALLED NEW ESTIMATE

5. Do you want the replaced parts you are entitled to?  Yes  No

Authorized by:

Payment made by:  Cash  Credit Card  Other

Motor vehicle repair practices are regulated by chapter ATCP 132, Wis. Adm. Code, administered by the Bureau of Consumer Protection, Wisconsin Department of Agriculture, Trade and Consumer Protection, P.O. Box 8911, Madison, Wisconsin 53708-8911

LIMITED WARRANTY

ALL MATERIALS AND WORKMANSHIP ARE GUARANTEED AGAINST DEFECT (90) DAYS. ALL CLAIMS MUST BE ACCOMPANIED BY THIS INVOICE.

I HEREBY AUTHORIZE the above repair work to be done along with necessary materials. You and your employees may operate above vehicle for purposes of testing, inspection or delivery at my risk. An express mechanic's lien is acknowledged on above vehicle to secure the amount of repairs thereto. You will not be held responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft, accident or any other cause beyond your control or for any delays caused by unavailability of parts or delays in parts shipments by the supplier or transporter.

X THE PRICE FOR THE AUTHORIZED REPAIRS DESCRIBED WILL NOT BE EXCEEDED IF THE MOTOR VEHICLE IS DELIVERED TO THE SHOP WITHIN 30 DAYS.

QTY	PART NUMBER	ARTICLE	PRICE
		EXHAUST PIPE	
		.	
	<i>ALTERED</i>	.	<i>27500</i>
		MUFFLER	
		.	
		TAIL PIPE	
		.	
		GASKETS	
		CLAMPS	
		HANGERS	
		SHOCK FRONT	
	<i>253238</i>	ABSORBERS: REAR	
	<i>2 outer tie rod</i>		<i>17990</i>
		STAB KITS	
		IDLER ARM	
	<i>FA1760</i>	BALL JOINTS	<i>19995</i>
		SPRINGS	
		ALIGNMENT	
		BRAKE PADS	
		BRAKE SHOES	
		DISC HARDWARE	
		DRUM HARDWARE	
		ROTORS	
		DRUMS	
		REMAN-CALIPERS	
		WHEEL CYLINDER	
		CABLES	
		HOSES	
		RESURFACE ROTOR	
		RESURFACE DRUM	
		BLEED & FLUSH	
		ENVIRONMENTAL FEE	<i>995</i>
		DISCOUNT	
		PARTS	
		LABOR	
		SUBTOTAL	<i>64980</i>
		TAX	<i>3723</i>
		TOTAL	<i>70203</i>

MECHANIC:

*Eui*

This estimate is good for 30 days only.

TOTAL

*70203*

*NO PART VTR*

09/08/2009

10/08/2009

120451391

**BILLING QUESTIONS? PLEASE CALL:**



Phone: 414-326-1900  
Fax: 414-326-1994

**Office Hours:** 9:00am-5pm M-Thur  
9:00am-3:30pm Fridays

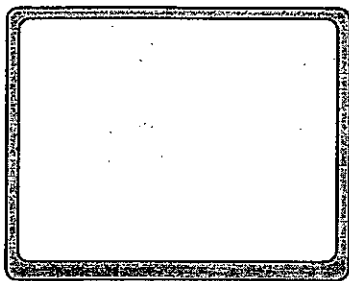
You may receive bills from other providers. Please contact them directly.

WI Radiology Specialists (WRS):  
888-989-2289

Metropolitan (Anesthesia):  
262-787-6700

Northshore Pathology:  
800-601-9825 or 262-241-4030

Infinity (ER doc group):  
414-290-6720



**EXHIBIT**

D

Dear REGINALD H WHEELER,

Thank you for choosing Columbia St. Mary's Hospital as your health care provider. We are dedicated to retaining customer loyalty and providing the highest quality of care and service to our customers. We trust this commitment was demonstrated in the services received on 07/13/09.

Payment is due within 30 days of this invoice. Please return your payment in the envelope provided. If you have any questions, need payment arrangements, or a financial assistance application, please call 414-326-1900. Thank you for your prompt attention to this bill.

If you feel your insurance payment is not correct, please contact your insurance company for clarification.

Our commitment is to your health. We appreciate your confidence in Columbia St. Mary's Hospital.

HOSPITAL SERVICE: Emergency Dept. \$1474.59  
TOTAL CHARGES: \$1474.59  
TOTAL PAYMENTS/DISCOUNTS: \$-294.92

**ALL CSM HOSPITALS AND CLINICS WILL REQUIRE PATIENTS TO PRESENT PICTURE IDS IN ORDER TO VERIFY IDENTIFICATION STARTING AUGUST 1, 2009.**

**PLEASE PAY** →

**\$1179.67**

Please see reverse side for additional information.

To ensure proper credit, detach bottom portion and return in the enclosed envelope.

PO BOX 2960, MILWAUKEE WI 53201-2960

**If Paying By Credit Card, Please Fill Out Below:**



Card Number \_\_\_\_\_ V-Code \_\_\_\_\_  
Print Name \_\_\_\_\_ Amt. Paid \_\_\_\_\_  
Signature \_\_\_\_\_ Exp. Date \_\_\_\_\_

DUE DATE

AMOUNT DUE

ACCOUNT #

10/08/2009

\$1179.67

120451391

\*Please check box and make address or insurance changes on reverse side.

**ADDRESSEE:**

**MAKE CHECKS PAYABLE AND REMIT TO:**

01-A 20090910 T003 S 00839

REGINALD H WHEELER  
4320 N 42ND ST  
MILWAUKEE WI 53216-1620

ST. MARY'S MILWAUKEE  
PAYMENT PROCESSING CENTER  
PO BOX 2960  
MILWAUKEE WI 53201-2960



00000120451391 00000001275 0 00117967 00000000 00117967 000000 9



<b>Account Number</b> 6149655	<b>Date of Service</b> 07/13/09	<b>Patient</b> Reginald H Wheeler
<b>Total Charges</b> \$205.00	<b>Total Payments and Adjustments</b> \$0.00	<b>Balance Due</b> \$205.00

Dear Reginald H Wheeler:

Thank you for selecting Infinity Healthcare Physicians LLC for your health care services rendered at St Marys Milwaukee Campus. For your records, a summary of your account balance is listed above. These charges are not included in your hospital bill.

Please contact our billing office toll free at **1-866-575-7812** to pay the remaining balance using our automated system or establish arrangements for a payment plan. To make a payment using Visa, MasterCard, American Express or Discover, please list your information on the reverse side of this notice.

It is important for you to know that making partial payments without an established arrangement will not keep your account in good standing. If you have any questions regarding the balance on your account, please contact our billing office at the number listed above.

If payment or arrangements have been made since the date of this letter, please accept our thank you in advance.

All correspondence should be sent to the following address: 111 E Wisconsin Avenue, Suite 2000, Milwaukee, WI 53202. **Payment should be forwarded to the address below.** A return envelope is enclosed for your convenience.

Sincerely,

Infinity Healthcare Physicians LLC

\*\*\*Detach Lower Portion and Return with Payment\*\*\*

IONSTAT20430

See Reverse Side

Address or insurance changes  Credit card information

Account Number: 8-6149655
Statement Date: 08/11/2009
Payment Due Date: 08/25/2009
Balance Due: \$205.00

Amount Paid: \$ \_\_\_\_\_



PO Box 1022  
Wixom MI 48393-1022

August 11, 2009

8-6149655-430-S2 206692187



Reginald H Wheeler  
4320 N 42nd St  
Milwaukee WI 53216-1620

Infinity Healthcare Physicians LLC  
PO Box 3261  
Milwaukee, WI 53201-3261



00800000061496550002050000000000000003

# Horizon Financial Management

8585 S. Broadway, Suite 880 ■ Merrillville, IN 46410-5661

Toll-Free: (877) 794-1003

Office Hours: 8:00 a.m. to 5:00 p.m.



August 26, 2009

Client: St. Marys Hospital-Milwaukee  
File #: 000117994449  
Account #: 1268497  
Amount Due: \$352.49

Dear Reggie Wheeler:

Our client specified above, has requested that we assist in the collection of your delinquent account.

We would like to see this matter resolved immediately.

Unless you notify this office within 30 days after receiving this letter that you dispute the validity of this debt or any portion thereof, this office will assume the debt is valid. If you notify this office in writing within 30 days from receiving this notice, this office will obtain verification of the debt, a copy of a judgment and mail you a copy of such judgment or verification.

To insure proper credit of your payment you must send your payment along with this letter to the remit to address on this letter. If you have any questions or are unable to make your payment, please contact this office at the address or phone number listed on the letter.

This is an attempt to collect a debt and any information obtained will be used for that purpose.

Sincerely,

Account Representative

60CU102587V-MILW1

\*\*\*PLEASE DETACH AND RETURN BOTTOM PORTION WITH YOUR PAYMENT\*\*\*



8585 S. Broadway Ste 880  
Merrillville IN 46410-5661

RETURN SERVICE REQUESTED

Patient: Reggie Wheeler  
Acct. #: 1268497  
000117994449

August 26, 2009

1268497-V-MILW1 213452612

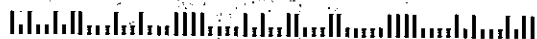


Reggie Wheeler  
4320 N 42nd St  
Milwaukee WI 53216-1620

### SEND PAYMENTS TO:

#### HORIZON FINANCIAL MANAGEMENT




8585 S Broadway Ste 880  
Merrillville IN 46410-5661



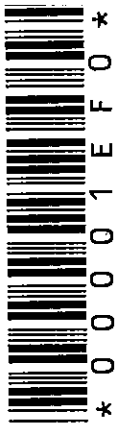
AMOUNT DUE: \$352.49	AMOUNT PAID: \$
-------------------------	--------------------

(EXTRA BILL) ADD ON PLEASE

CHARGES APPEARING ON THIS INVOICE ARE NOT INCLUDED ON ANY HOSPITAL BILL OR INVOICE

  	
CARD NUMBER	AMOUNT
SIGNATURE	EXP. DATE

PATIENT			
REGINALD H WHEELER			
INVOICE DATE	ACCOUNT NUMBER	DUE DATE	AMOUNT PAID
09/22/2009	WRS 134128	10/06/2009	



PHONE NUMBER: (888) 989-2289  
 pay online at <https://pay.instamed.com/WRS>  
 Make Checks Payable to:

REGINALD H WHEELER  
 4320 N 42nd St  
 Milwaukee WI 53216-1620

13  
 WRS

WISCONSIN RADIOLOGY SPEC. S.C.  
 PO BOX 2350  
 BROOKFIELD WI 53008-2350



Please check box if above address is incorrect or insurance information has changed. Indicate change(s) on reverse side.

**INVOICE**

^^ Please detach and return top portion with payment.^^

DATE	PLACE OF SERVICE	DESCRIPTION	CHARGE	PAYMENTS/ ADJUSTMENTS	AMOUNT DUE
07/13/09	ST MARYS H	X-RAY EXAM OF NECK SPINE	75.00		75.00
08/05/09		BLUE CROSS PAYMENT EXPENSES INCURRED PRIOR TO COVERAGE PLEASE CALL OR SEND INSURANCE INFO		.00	

| check autho

\*\*\* YOU MAY NOW PAY ONLINE \*\*\*

.00	75.00	.00	.00	.00	<b>PLEASE PAY THIS AMOUNT</b>	75.00
CURRENT	OVER 30 DAYS	OVER 60 DAYS	OVER 90 DAYS	OVER 120 DAYS		

09/22/2009	WRS 134128	10/06/2009
INVOICE DATE	ACCOUNT NUMBER	DUE DATE

MAKE CHECKS PAYABLE TO:  
 WISCONSIN RADIOLOGY SPEC. S.C.

CALL US TOLL-FREE AT 1-888-989-2289 Mon-Fri 8 am TO 5 pm





**Columbia St. Mary's**  
A Passion for Patient Care

Columbia (CH) / Milwaukee (SMM) / Ozaukee (SMO)

**EMERGENCY SERVICES**

**HOME MEDICATION LIST AND DISCHARGE INSTRUCTIONS**

Prescription, over-the-counter, and herbal/natural medications taken routinely prior to admission.

WHEELER REGINALD H  
MR 233871 06/04/1967 42Y PT 120451391 M  
120451391  
ATN BRACKETT, NATHANIEL S  
ADM 07/13/09 Tube E EMR SMM

Data Source:  Patient  Family  MD  Pharmacies  Old Records  Nursing Home / other facility  EHR

Patient's Pharmacy \_\_\_\_\_ Address: \_\_\_\_\_ Phone # \_\_\_\_\_

Latex Allergy:  yes  no Reaction: \_\_\_\_\_

Medicine / Food / Other Allergy	Reaction	Medicine / Food / Other Allergy	Reaction
NKDA			

HOME MEDICATIONS						MD TO COMPLETE THIS SECTION
MEDICATION NAME	DOSE	ROUTE	Frequency	Indication	Last Taken	Medication Changes / Special Instructions
Demioz						

RN Recording Home Medications: *M/Sullivan*

**PHYSICIAN DISCHARGE ORDERS:**

NEW MEDICATIONS	REASON	INSTRUCTIONS
Demioz N-100 PO #15		

**MEDICATION INSTRUCTIONS:**

- Take all home medications listed above.
- Take home medications following instructions above.
- Follow up with your primary doctor about your home medications.
- Start new medications listed above.

**DIAGNOSES:**

1. Acute posterior neck strain
2. neck strain
- 3.

INSTRUCTIONS:  Sedative / Narcotic  Wound  Head Injury  Sprain/Fracture  Back Pain

Other:  Return to Emergency Department if condition worsens or excessive and persistent pain, or

\*rest, soft neck collar for 3-5 days, hot compress to neck muscles, see an MD if not better in 3-5 days

FOLLOW-UP: *as above* (Work/School) Excuse:  N  Y until (date) *7/16/09*

Call Dr. \_\_\_\_\_ for appointment / to be seen in \_\_\_\_\_ days Phone: \_\_\_\_\_

Call Dr. \_\_\_\_\_ for appointment / to be seen in \_\_\_\_\_ days Phone: \_\_\_\_\_

Emergency Physician Signature: DATE \_\_\_\_\_ TIME \_\_\_\_\_ Signature *W. Jay*

RN Reviewing Instructions: DATE \_\_\_\_\_ TIME \_\_\_\_\_ Signature \_\_\_\_\_

Patient Signature: \_\_\_\_\_

01-4110-22 Rev. 12/07

BARCODE

HOME MEDICATION LIST AND DISCHARGE INSTRUCTIONS  
WHITE - MED RECORD CANARY - PATIENT PINK - PHYSICIAN





## Legislation Details (With Text)

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**File #:** 090928      **Version:** 0  
**Type:** Resolution      **Status:** In Committee  
**File created:** 12/1/2009      **In control:** JUDICIARY & LEGISLATION COMMITTEE  
**On agenda:**      **Final action:**  
**Effective date:**  
**Title:** Resolution relating to the claim of Jeanette Apollo for property damage. (5th Aldermanic District)  
**Sponsors:** THE CHAIR  
**Indexes:** CLAIMS  
**Attachments:** City Attorney Letter.pdf, Claim, Hearing Notice List

Date	Ver.	Action By	Action	Result	Tally
12/1/2009	0	COMMON COUNCIL	ASSIGNED TO		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		

**Number**

090928

**Version**

ORIGINAL

**Reference**

**Sponsor**

THE CHAIR

**Title**

Resolution relating to the claim of Jeanette Apollo for property damage. (5th Aldermanic District)

**Requestor**

City Attorney

**Drafter**

JAS:ms

November 2, 2009

1029-2009-2516:151581

**GRANT F. LANGLEY**  
City Attorney

**RUDOLPH M. KONRAD**  
**LINDA ULISS BURKE**  
**VINCENT D. MOSCHELLA**  
Deputy City Attorneys



**THOMAS O. GARTNER**  
**BRUCE D. SCHRIMPF**  
**SUSAN D. BICKERT**  
**STUART S. MUKAMAL**  
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**JARELY M. RUIZ**  
**ROBIN A. PEDERSON**  
**DANIELLE M. BERGNER**  
Assistant City Attorneys

November 2, 2009

To the Honorable Common Council  
Of the City of Milwaukee  
Room 205 – City Hall

Re: Resolution Relating to the Claim of Jeanette Apollo  
C.I. File No. 09-L-105

Dear Council Members:

We return the enclosed document which has been filed with the City Clerk and ask that it be introduced and referred to the Committee on Judiciary & Legislation with the following recommendation.

Claimant, Jeanette Apollo, 2773 North 76<sup>th</sup> Street, Milwaukee, WI 53222, alleges that on June 18, 2009 she sustained damages when there was a sewer back-up at her home. She claims damages in the amount of \$250,000.00.

Our investigation reveals that the Infrastructure Services Division (ISD) records indicate that because of the large amount and strong intensity of rain during this time, the City experienced flows that exceeded the capacity of the sewer system. City records indicate that the main had last been cleaned in April 2009. The ISD checked the main sewer again as a result of this claim and it was found to be in proper working order.

Hon. Common Council  
November 2, 2009  
Page 2

There is no evidence, therefore, that the City was negligent. It would not, therefore, be liable and we recommend denial of this claim.

Very truly yours,

GRANT F. LANGLEY  
City Attorney

JAN A. SMOKOWICZ  
Assistant City Attorney

JAS:ms  
Enclosure

1029-2009-2516:150326

September 10, 2009

City Clerk  
Attn: Claims  
200 East Wells Street Room 205  
Milwaukee, WI 53202-3567

CITY OF MILWAUKEE  
RECEIVED  
2009 SEP 15 PM 2:34

OFFICE OF  
CITY ATTORNEY

Mrs. Jeanette Apollo  
2773 North 76<sup>th</sup> Street  
Milwaukee, WI 53222-5044  
414-475-0973  
Attn: Claims - \$250,000

To Whom It May Concern:

I am formally filing a claim against the City of Milwaukee for \$250,000 for damages due to "sewer back up" which occurred on June 18, 2009 into my basement.

Since that date, my insurance company terminated my coverage for "Sewer Backup" because; **THIS WAS NOT THE ONLY TIME I HAD THE SEWER BACK UP INTO MY BASEMENT.** My insurance company told me I needed to get "my sewer problem resolved" before coverage would be re-instated. Each time a heavy rain occurs, I worry it may back up into my basement again. I pay the city to pump the water out of my basement, not into my basement.

I have thrown thousands of dollars of items away that were damaged or contaminated by the "sewer back up". I have had to have the basement cleaned and bleached out each time, which is costly. I have been required to have my furnace replaced because of the damage, and am required to keep everything elevated off of the floor, "just in case it rains". So really, the basement is useless. I cannot sell my home; no one wants to buy a home with a sewer back up problem. Will the City? I am 79 years old and I would like to go into a senior apartment, but no one will even consider buying a home with sewer problems such as mine.

So, I am filing this claim against the city in case I have future damage in my basement. For example: the walls caving in or the floors buckling (which are already happening).

Originally, I spoke to my Alderman (Jim Bohl), who said the sewer back up had "nothing to do with the City" and to contact MMSD. Therefore, I called Kevin Shafer at 272-5100 on 8/20/09 at 2:15 pm at Milwaukee Metropolitan Sewer District; who told me it was "the Cities problem". I was shifted from "pillar to post" for a while, which finally led me to write this letter to see if I can get this resolved.

Waiting to hear from you,  
Sincerely,  
Jeanette L. Apollo



ROMALD O'NEILL  
CITY ATTORNEY  
2009 SEP 14 PM 8:14  
CITY OF MILWAUKEE







## Legislation Details (With Text)

---

**File #:** 090929      **Version:** 0  
**Type:** Resolution      **Status:** In Committee  
**File created:** 12/1/2009      **In control:** JUDICIARY & LEGISLATION COMMITTEE  
**On agenda:**      **Final action:**  
**Effective date:**  
**Title:** Resolution relating to the claim of E.B. and Minnie Garner for property damage. (4th Aldermanic District)  
**Sponsors:** THE CHAIR  
**Indexes:** CLAIMS  
**Attachments:** City Attorney Letter.pdf, Claim, Hearing Notice List

Date	Ver.	Action By	Action	Result	Tally
12/1/2009	0	COMMON COUNCIL	ASSIGNED TO		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		

**Number**

090929

**Version**

ORIGINAL

**Reference**

**Sponsor**

THE CHAIR

**Title**

Resolution relating to the claim of E.B. and Minnie Garner for property damage. (4th Aldermanic District)

**Requestor**

City Attorney

**Drafter**

JAS:ms

November 2, 2009

1029-2009-2491:151580

**GRANT F. LANGLEY**  
City Attorney

**RUDOLPH M. KONRAD**  
**LINDA ULISS BURKE**  
**VINCENT D. MOSCHELLA**  
Deputy City Attorneys



**THOMAS O. GARTNER**  
**BRUCE D. SCHRIMPF**  
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**JARELY M. RUIZ**  
**ROBIN A. PEDERSON**  
**DANIELLE M. BERGNER**  
Assistant City Attorneys

November 2, 2009

To the Honorable Common Council  
Of the City of Milwaukee  
Room 205 – City Hall

Re: Resolution Relating to the Claim of E.B. & Minnie Garner  
C.I. File No. 09-L-103

Dear Council Members:

We return the enclosed document which has been filed with the City Clerk and ask that it be introduced and referred to the Committee on Judiciary & Legislation with the following recommendation.

Claimants, E.B. & Minnie Garner, 2832 West Vliet Street, Milwaukee, WI 53208, allege that on June 7, 2008 and June 19, 2009, they sustained damages when there were sewer back-ups at their home. They claim damages in the amount of \$3,800.00 for the 2008 loss and \$4,500.00 for the 2009 loss for a total of \$8,300.00.

This claim was filed on September 10, 2009. Wisconsin Statute § 893.80 (1)(a) requires that a claim must be filed within 120 days after the happening of the event giving rise to the claim. The portion of the claim dealing with the June 7, 2008 loss was not filed timely.

The Infrastructure Services Division (ISD) records relative to the June 19, 2009 incident indicate that because of the large amount and strong intensity of rain during this time, the City experienced flows that exceeded the capacity of the sewer system. The ISD received a backwater complaint for this address on June 19, 2009. The investigator found the City sewer system main to be in proper working order on that date. City records reflect that the main was last cleaned in

Honorable Common Council  
November 2, 2009  
Page 2

October 2008.

There is no evidence, therefore, that the City was negligent. It would not, therefore, be liable and we recommend denial of the entire claim.

Very truly yours,

GRANT F. LANGLEY  
City Attorney

JAN A. SMOKOWICZ  
Assistant City Attorney

JAS:ms  
Enclosure

1029-2009-2491:150346

CITY OF MILWAUKEE  
RECEIVED

8/7/09

2009 SEP 10 PM 3:01

TO WHOM IT MAY CONCERN  
OFFICE OF CITY ATTORNEY

RONALD D. STREET  
2009 SEP 10 9:58 AM  
CITY OF MILWAUKEE

I E.B. GARNER Live AT 2832 W. VLIET STREET  
IN THE CITY OF MILWAUKEE WISCONSIN 53208. I HAVE LIVED IN  
WISCONSIN SINCE 1958. I RECENTLY BROUGHT A BRAND  
NEW HOME AT 2832 W. VLIET STREET MILWAUKEE  
WISCONSIN 53208.

THE LAST (2) TWO YEARS 2008 & 2009  
MY BASEMENT HAVE FLOODED WITH SEWAGE COMING  
BACK UP THROUGH THE DRAINS LEAVING 12" INCHES OF RAW  
SEWAGE WATER IN BASEMENT LAST YEAR I MANAGE TO  
TAKE CARE OF THIS PROBLEM FINANCIALLY. BUT TWO  
YEARS IN A ROW IS JUST A LITTLE BITE TOO MUCH.

PLEASE HELP ME

YOUR TRULY  
E.B. GARNER  
*E.B. Garner* HOME OWNER

P. S.

RECENTLY I HAD TO CALL A HEAT REPAIR MAN  
TO REPAIR MY HEAT & AIR UNIT \$750.80 WATER FROM  
BASEMENT CAUSE PROBLEM

DATE OF FLOODING JUNE 19, 2009

APPX. TIME 12:30AM.

CLEAN-UP & REPLACEMENT  
COST \$4,500.00 DOLLARS

AFTER HEAVY RAIN FALL

8/7/09

1<sup>ST</sup> FLOOD

6/7/08 JUNE 7, 2008

APPROX 11:15 P.M. AFTER HEAVY RAIN FALL

FIRE DEPARTMENT TURNED OFF POWER TO EQUIPMENT  
IN BASEMENT 10" INCHES OF RAW SEWAGE.

2<sup>ND</sup> FLOOD

6/19/09 JUNE 19, 2009

APPROX 12:30 A.M. AFTER HEAVY RAIN FALL

FIRE DEPARTMENT TURNED OFF POWER TO BASEMENT  
HEATING & AIR COND UNIT PLUS HOT WATER TANK

COST - PER YEAR

JUNE 7, 2008 - \$3,800.00 1<sup>ST</sup> FLOOD

JUNE 19, 2009 - 4,500.00 2<sup>ND</sup> FLOOD

HERE ARE SOME PICTURES FROM FLOOD  
BASEMENT AREA

HOME TELEPHONE - (414) 342-3929

CELL # - (414) 687-8717

ANY TIME



8/8/09













## Legislation Details (With Text)

---

**File #:** 090930      **Version:** 0

**Type:** Resolution      **Status:** In Committee

**File created:** 12/1/2009      **In control:** JUDICIARY & LEGISLATION COMMITTEE

**On agenda:**      **Final action:**

**Effective date:**

**Title:** Resolution relating to the claim of Edith Rowe for property damage. (10th Aldermanic District)

**Sponsors:** THE CHAIR

**Indexes:** CLAIMS

**Attachments:** City Attorney Letter.pdf, Claim, Hearing Notice List

Date	Ver.	Action By	Action	Result	Tally
12/1/2009	0	COMMON COUNCIL	ASSIGNED TO		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		

**Number**

090930

**Version**

ORIGINAL

**Reference**

**Sponsor**

THE CHAIR

**Title**

Resolution relating to the claim of Edith Rowe for property damage. (10th Aldermanic District)

**Requestor**

City Attorney

**Drafter**

JAS:ms

November 2, 2009

1029-2009-2762:151487

**GRANT F. LANGLEY**  
City Attorney

**RUDOLPH M. KONRAD**  
**LINDA ULISS BURKE**  
**VINCENT D. MOSCHELLA**  
Deputy City Attorneys



**THOMAS O. GARTNER**  
**BRUCE D. SCHRIMPF**  
**SUSAN D. BICKERT**  
**STUART S. MUKAMAL**  
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**HEIDI E. GALVÁN**  
**JARELY M. RUIZ**  
**ROBIN A. PEDERSON**  
**DANIELLE M. BERGNER**  
Assistant City Attorneys

November 2, 2009

To the Honorable Common Council  
Of the City of Milwaukee  
Room 205 – City Hall

Re: Resolution Relating to the Claim of Edith Rowe  
C.I. File No. 09-L-119

Dear Council Members:

We return the enclosed document which as been filed with the City Clerk and ask that it be introduce and referred to the Committee on Judiciary & Legislation with the following recommendation.

Claimant, Edith Rowe, 5603 West Roosevelt Drive, Milwaukee, WI 53216, alleges that on July 12, 2009, she sustained damages when a City sewer backed up into the basement of her property. She claims damages in the amount of \$8,926.86.

Our investigation reveals that the Infrastructure Services Division (ISD) records indicate that on July 13, 2009, they responded to a call of a backwater at 5603 West Roosevelt Drive. This ISD found the City main sewer to be clogged with grease. They used a sewer jet to open the clog, clean the sewer and restore it to proper working order. The previous clogging incident for this sewer was on October 4, 1972. The sewer is on a regular cleaning schedule and was last cleaned, prior to this incident, on March 13, 2009. Because the sewer is on a regular cleaning schedule and the City did not have notice of any problems with the sewer, the City cannot be held liable. Therefore we recommend that this claim be denied.

Very truly yours,

GRANT F. LANGLEY  
City Attorney

JAN A. SMOKOWICZ  
Assistant City Attorney

JAS:ms  
Enclosure  
1029-2009-2762:151486

Edith Rowe  
5603 W. Roosevelt Dr.  
Milwaukee, WI  
September 18, 2009

CITY OF MILWAUKEE  
RECEIVED  
2009 OCT 12 PM 2:52

OFFICE OF  
CITY ATTORNEY

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

Dear Clerk:

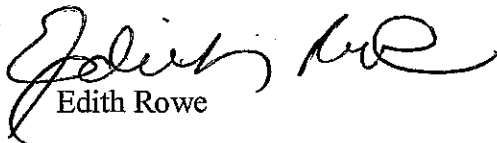
I submit this claim for relief against the City of Milwaukee WI for damages to property located at 5603 W. Roosevelt Dr. that occurred on 7/12/2009.

On July 12th, 2009 the sewer attached to my property clogged and as a result flooded my basement with sewer water. Please refer to attached report from the city.

I have attached all paperwork concerning this incident. The amount of my claim in damages is \$8926.86

Please call me if there any questions regarding this incident. I appreciate your help. My home telephone number is 414-873-6253 and work is 414-286-6611.

Sincerely,

  
Edith Rowe

Enclosure

CITY OF MILWAUKEE  
2009 OCT 12 AM 9:57  
RONALD D. LEONARDI  
CITY CLERK

USA

CITY OF MILWAUKEE  
INFRASTRUCTURE  
ENVIRONMENTAL ENGINEERING  
SEWER MAINTENANCE

**BACKWATER IN BASEMENT - CODE 1**  
Dispatched Location: 5603 W. Roosevelt Dr.  
Received: (Date): 7-13-09 (Time): 9:17 (From): RLC  
Contact: (Person): Edith Rowe (Phone #): 100

**FIELD INVESTIGATION**

Time Arrived: 9:37 Crew #: M3 Field Investigator: Schwartz Assisted by: Lin Hre 11  
Sewer Type: San. Sewer Size: 8" <sup>M</sup> Sewer Status: Clogged Flow in Inches: 0  
Date of Backwater: 7-13-09 City Surcharge: Yes  No  MIS Surcharge: Yes  No   
Highwater Mark from Top of Frame: \_\_\_\_\_ Lateral Clogged - Recommend Plumber

**Sewer clog: 1. Obtain print when possible 2. Locate obstruction 3. Call proper equipment**  
Time Found: 9:30 Time Began Cleaning: 10:00 Time Opened: 10:37  
Opened By: L. Brown Time Completed: 10:45  
Location of Clog (note dry & backed-up manholes): Intersection N. Howard & W. Roosevelt  
Sewage Elevation (from top of manhole): 5ft Obstruction Due To: Grease Rocks S/S

REFERRED  
SEWER ENGINEERS

Isn't that how they make applause?

▼ ROLLOVER TO IMPRESS THE BOSS ▼

## History for Milwaukee, WI

Sunday, July 12, 2009

### Daily Summary

	Actual:	Average :	Record :
<b>Temperature:</b>			
Mean Temperature	69 °F	72 °F	
Max Temperature	80 °F	81 °F	97 °F (1930)
Min Temperature	58 °F	63 °F	50 °F (1975)
<b>Degree Days:</b>			
Heating Degree Days	0	1	
Month to date heating degree days	10	12	
Since 1 June heating degree days	118	98	
Since 1 July heating degree days	10	12	
Cooling Degree Days	4	7	
Month to date cooling degree days	42	80	
Year to date cooling degree days	176	226	
Since 1 June cooling degree days	161	194	
Growing Degree Days	20 (Base 50)		
<b>Moisture:</b>			
Dew Point	44 °F		
Average Humidity	42		
Maximum Humidity	56		
Minimum Humidity	27		
<b>Precipitation:</b>			
Precipitation	0.00 in	0.11 in	1.95 in (1956)
Month to date precipitation	0.18	1.39	
Year to date precipitation	19.64	17.88	
<b>Snow:</b>			
Snow	0.00 in	0.00 in	0.00 in (2007)
Month to date snowfall	0.0	0.0	
Since 1 June snowfall	0.0	0.0	
Since 1 July snowfall	0.0	0.0	
Snow Depth	0.00 in		
<b>Sea Level Pressure:</b>			
Sea Level Pressure	30.09 in		
<b>Wind:</b>			
Wind Speed	7 mph (NW)		
Max Wind Speed	15 mph		
Max Gust Speed	21 mph		
Visibility	10 miles		
Events			

T = Trace of Precipitation, MM = Missing Value

Source: NWS Daily Summary

# Isn't that how they make applause?

▼ ROLLOVER TO IMPRESS THE BOSS ▼

## History for Milwaukee, WI

Monday, July 13, 2009

### Daily Summary

	Actual:	Average :	Record :
<b>Temperature:</b>			
Mean Temperature	68 °F	72 °F	
Max Temperature	76 °F	81 °F	103 °F (1995)
Min Temperature	59 °F	63 °F	52 °F (1967)
<b>Degree Days:</b>			
Heating Degree Days	0	1	
Month to date heating degree days	10	13	
Since 1 June heating degree days	118	99	
Since 1 July heating degree days	10	13	
Cooling Degree Days	3	7	
Month to date cooling degree days	45	87	
Year to date cooling degree days	179	233	
Since 1 June cooling degree days	164	201	
Growing Degree Days	18 (Base 50)		
<b>Moisture:</b>			
Dew Point	44 °F		
Average Humidity	45		
Maximum Humidity	67		
Minimum Humidity	23		
<b>Precipitation:</b>			
Precipitation	0.00 in	0.11 in	2.19 in (1912)
Month to date precipitation	0.18	1.50	
Year to date precipitation	19.64	17.99	
<b>Snow:</b>			
Snow	0.00 in	0.00 in	0.00 in (2007)
Month to date snowfall	0.0	0.0	
Since 1 June snowfall	0.0	0.0	
Since 1 July snowfall	0.0	0.0	
Snow Depth	0.00 in		
<b>Sea Level Pressure:</b>			
Sea Level Pressure	30.06 in		
<b>Wind:</b>			
Wind Speed	6 mph (ENE)		
Max Wind Speed	13 mph		
Max Gust Speed	23 mph		
Visibility	10 miles		
Events			

T = Trace of Precipitation, MM = Missing Value

Source: NWS Daily Summary



Record of items Loss due to Sewer Back Up on 7/11/2009

7.12.09 *Edith Ane*

item	serial number	model	approx date	material	approx.amt
			purchased	name brand	paid in
				type	dollars
space heater	16 inches	5362	2000	Lasko	metal \$35.00
carpet cleaner	29700119302	F5861-900	2008		hard plastic \$89.00
vacuum	none noted	none noted	1998	Hoover	hard plastic \$85.00
sewing cabinet	none noted	none noted	1999	Hoover	
book case cart	none noted	none noted	1999	Singer	particle board \$250.00
book case	none noted	none noted	2002	none noted	particle board \$20.00
computer desk	none noted	none noted	1999	Sauder	particle board \$35.00
bookcase	none noted	none noted	2007	Sauder	particle board \$149.00
entertainment unit	none noted	none noted	2006	Sauder	particle board \$249.00
Chaise	none noted	none noted	1999	Broyhill	faux leather \$350.00
cabinet	none noted	none noted	1999	Sauder	particle board \$99.00
cabinet	none noted	none noted	1999	none noted	particle board \$129.00
fabric military bag	none noted	none noted	2004/2005	none noted	fabric \$96.00
battle dress	none noted	none noted	2000	none noted	fabric \$50.00
uniforms	none noted	none noted	2000	none noted	fabric/camo \$150.00
quilt rack	none noted	none noted	1999	none noted	maple wood \$55.00
exercise machine	none noted	Body by Jake(abdomen and thigh)	2000	none noted	metal \$150.00
rug	none noted	none noted	2006	none noted	acrylic \$59.00
Trampoline	none noted	none noted	2005	none noted	mesh \$59.00
exercise step	none noted	none noted	2004	none noted	plastic \$10.00
luggage	none noted	none noted (Samsonite)	1998	none noted	leather \$20.00
comforter	none noted	none noted	2000	none noted	fabric \$45.00
comforter	none noted	none noted	1997	none noted	fabric \$35.00
yarn	none noted	none noted	2005	none noted	yarn \$3.00
wood poles	none noted	none noted	2006	none noted	wood given as a gift/30



		Amount Due	Amount Enc.		
		\$0.00			
Date	Transaction	Amount	Balance		
12/31/2008	Balance forward		0.00		
08/05/2009	11258 - Job -- INV #287762.	3,733.77	3,733.77		
08/05/2009	PMT #29598236.	-3,733.76	0.01		
08/05/2009	Discount #29598236.	-0.01	0.00		
<p style="font-size: 2em; font-family: cursive;">SERVICMASTER</p>					
CURRENT	1-30 DAYS PAST DUE	31-60 DAYS PAST DUE	61-90 DAYS PAST DUE	OVER 90 DAYS PAST DUE	Amount Due
0.00	0.00	0.00	0.00	0.00	\$0.00



2215 S. 162nd St.  
New Berlin, WI 53151  
(262) 782-3335  
Fax (262) 782-4230

3410 Dewey St.  
Manilowoc, WI 54221  
(920) 682-8668  
Fax (262) 782-4230

Email: mcyganiak@svmclean.com  
Fed. ID# 39-1355743  
Toll Free (800) 559-9070

- SM Manilowoc Co. (920) 682-8668
- SM Southwest Milwaukee Co. (414) 421-4940
- SM West Allis/Wauwatosa/New Berlin (262) 782-3335
- SM Greater Waukesha (262) 542-9555
- SM Restoration and Cleaning (262) 763-8228
- SM Restoration and Remodeling (262) 348-9070
- SM Oconomowoc (262) 569-9070
- SM Menomonee Falls (262) 251-7590
- SM Disasler Resloration Services (920) 783-2233

### CONTRACT FOR SERVICES

**A. PARTIES TO CONTRACT.** This Contract is made this 18 day of JULY, 2007 by and between ROSE EDITH, as or on behalf of OWNER, whose address is 5603 N. ROBERT and JRC Inc. d/b/a SERVICEMASTER.

**B. SCOPE OF SERVICES.** This Contract authorizes SERVICEMASTER to proceed with disaster restoration and/or repair services at the Premises which was damaged by SEWER

on or about \_\_\_\_\_ (date) as follows (check all that apply):

**WATER DAMAGE:** Emergency/Mitigation Services  Drying Equipment  Total Restoration Services \_\_\_\_\_

**FIRE DAMAGE:** Clean on Premises \_\_\_\_\_ Deodorize \_\_\_\_\_ Pack-out Services  Other \_\_\_\_\_

**MOLD REMEDIATION:** Brief Description: N/A

(Detailed scope of work will be available after approval by your insurance company)

OWNER also authorizes any work, including, but not limited to, any emergency work, orally authorized or performed by SERVICEMASTER prior to signing this Contract even if not specifically described above. The work described above and any previously performed work are defined as the "Work" authorized by this Contract. OWNER also agrees that the Work may change from time to time as documented in Additional Work Authorizations executed by OWNER and SERVICEMASTER. SERVICEMASTER is not responsible for any property or work not included within or covered by the scope of the Work authorized under this Contract or any portion of the Premises or Personal Property deemed a total loss by OWNER, SERVICEMASTER or Adjuster, as identified in paragraph H. below.

**C. OWNER'S ELECTION NOT TO PERFORM CERTAIN WORK.** SERVICEMASTER has recommended to OWNER that the following procedures or actions be taken in relation to the Premises: \_\_\_\_\_

(hereafter, the "Listed Procedure"). OWNER has rejected, declined, or otherwise made it clear that the Listed Procedures should be excluded from the scope of the Work, and not performed. OWNER hereby acknowledges that 1) the Listed Procedures are recommended by ServiceMaster for the Premises in light of the water/sump/sewer backup losses; 2) OWNER understands that failure to perform the Listed Procedures may result in moisture being retained within the Premises or its contents; and 3) such moisture may be one factor which could lead to the growth of mold or other fungal contamination.

**D. OWNER REPRESENTATION.** OWNER represents to SERVICEMASTER that OWNER owns the Premises and the personal property located at the Premises ("Personal Property") or is authorized on behalf of the individual holding title to the Premises and Personal Property to enter into this Contract on that person or persons' behalf.

**E. START DATE AND COMPLETION DATE.** The Work shall start on \_\_\_\_\_, 20\_\_ and the Work is expected to be completed within \_\_\_\_ days. Actual completion date will depend, in part, on the rate of drying and other factors outside SERVICEMASTER's control.

**F. CONTRACT PRICE, CHARGES AND RENTAL OF EQUIPMENT.**

1. OWNER hereby agrees to the unit charges for services and equipment identified on Exhibits A and B attached to this Contract and specifically requests the services and equipment checked or listed on those exhibits be provided by SERVICEMASTER as part of the Work. OWNER acknowledges that the prices listed on the attached exhibits are unit prices or estimates and actual charges depend upon the quantity of services utilized or the length of time the equipment is rented. The preliminary estimated charges for the Work are \$ 47,000. SERVICEMASTER supervisory personnel shall review this preliminary estimated charge (including the scope of the Work and services or equipment to be provided under this Contract), and if any adjustments are made by them, a revised estimate of charges, scope of Work, services or equipment to be provided shall be sent to OWNER and upon execution and return to SERVICEMASTER this Contract shall be binding on OWNER and SERVICEMASTER.

Owner Initials \_\_\_\_\_

2. With respect to any equipment rented and services provided, OWNER acknowledges and agrees as follows:

a. **General.** OWNER shall not turn off or move equipment without first calling SERVICEMASTER's office. If dehumidifiers or air movers must be moved after SERVICEMASTER is contacted and approves the move, they must be shut off and unplugged, as it may be hazardous to move these units while they are operating. OWNER shall not open the windows in the impacted area of the Premises while the Work is being done unless instructed by SERVICEMASTER, as this may retard the drying process. The area of the Premises where the Work is being conducted should have an initial temperature setting between 68-72F for maximum drying and to help prevent or inhibit bacteria and fungus growth.

b. **Safety and Health.** When entering the area of the Premises where the Work is being conducted, OWNER shall adhere to all of SERVICEMASTER's safety requirements. SERVICEMASTER cautions that during the Work the impacted areas are dangerous and entering any of these areas is done at the person's risk and SERVICEMASTER is not liable for any injuries that may occur. OWNER shall pay special attention to children and pets and for the safety of all others who may be present during the work. SERVICEMASTER is not responsible for their actions while the Work is in progress. During the course of the Work OWNER shall pay special attention to exposed-tack strips, exposed nails and transition bars in all areas under construction. Exposed tackless strip is a danger even when covered; care must be taken when walking near tackless strip. The floors may be slippery when wet; extreme care must be taken if walking on or from wet flooring materials. If the Work calls for an antimicrobial to be applied, no one shall enter the treated areas for at least 6 hours after application. An antimicrobial is a chemical which inhibits microorganisms such as bacteria, fungi, protozoa or viruses. A MSDS sheet will be provided upon request.

c. **Equipment Responsibility.** OWNER is responsible for loss or theft of the equipment that is rented

FIKE DAMAGE: Clean on Premises \_\_\_\_\_ Deodorize \_\_\_\_\_ Pack-out Services   X   Other \_\_\_\_\_

MOLD REMEDIATION: Brief Description:   N/A  

(Detailed scope of work will be available after approval by your insurance company)

OWNER also authorizes any work, including, but not limited to, any emergency work, orally authorized or performed by SERVICEMASTER prior to signing this Contract even if not specifically described above. The work described above and any previously performed work are defined as the "Work" authorized by this Contract. OWNER also agrees that the Work may change from time to time as documented in Additional Work Authorizations executed by OWNER and SERVICEMASTER. SERVICEMASTER is not responsible for any property or work not included within or covered by the scope of the Work authorized under this Contract or any portion of the Premises or Personal Property deemed a total loss by OWNER, SERVICEMASTER or Adjuster, as identified in paragraph H. below.

**C. OWNER'S ELECTION NOT TO PERFORM CERTAIN WORK.** SERVICEMASTER has recommended to OWNER that the following procedures or actions be taken in relation to the Premises: \_\_\_\_\_

(hereafter, the "Listed Procedure"). OWNER has rejected, declined, or otherwise made it clear that the Listed Procedures should be excluded from the scope of the Work, and not performed. OWNER hereby acknowledges that 1) the Listed Procedures are recommended by ServiceMaster for the Premises in light of the water/sump/sewer backup losses; 2) OWNER understands that failure to perform the Listed Procedures may result in moisture being retained within the Premises or its contents; and 3) such moisture may be one factor which could lead to the growth of mold or other fungal contamination.

**D. OWNER REPRESENTATION.** OWNER represents to SERVICEMASTER that OWNER owns the Premises and the personal property located at the Premises ("Personal Property") or is authorized on behalf of the individual holding title to the Premises and Personal Property to enter into this Contract on that person or persons' behalf.

**E. START DATE AND COMPLETION DATE.** The Work shall start on \_\_\_\_\_, 20\_\_ and the Work is expected to be completed within \_\_\_\_ days. Actual completion date will depend, in part, on the rate of drying and other factors outside SERVICEMASTER's control.

**F. CONTRACT PRICE, CHARGES AND RENTAL OF EQUIPMENT.**

1. OWNER hereby agrees to the unit charges for services and equipment identified on Exhibits A and B attached to this Contract and specifically requests the services and equipment checked or listed on those exhibits be provided by SERVICEMASTER as part of the Work. OWNER acknowledges that the prices listed on the attached exhibits are unit prices or estimates and actual charges depend upon the quantity of services utilized or the length of time the equipment is rented. The preliminary estimated charges for the Work are \$   27,000  . SERVICEMASTER supervisory personnel shall review this preliminary estimated charge (including the scope of the Work and services or equipment to be provided under this Contract), and if any adjustments are made by them, a revised estimate of charges, scope of Work, services or equipment to be provided shall be sent to OWNER and upon execution and return to SERVICEMASTER this Contract shall be binding on OWNER and SERVICEMASTER.

Owner Initials \_\_\_\_\_

2. With respect to any equipment rented and services provided, OWNER acknowledges and agrees as follows:

a. **General.** OWNER shall not turn off or move equipment without first calling SERVICEMASTER's office. If dehumidifiers or air movers must be moved after SERVICEMASTER is contacted and approves the move, they must be shut off and unplugged, as it may be hazardous to move these units while they are operating. OWNER shall not open the windows in the impacted area of the Premises while the Work is being done unless instructed by SERVICEMASTER, as this may retard the drying process. The area of the Premises where the Work is being conducted should have an initial temperature setting between 68-72F for maximum drying and to help prevent or inhibit bacteria and fungus growth.

b. **Safety and Health.** When entering the area of the Premises where the Work is being conducted, OWNER shall adhere to all of SERVICEMASTER's safety requirements. SERVICEMASTER cautions that during the Work the impacted areas are dangerous and entering any of these areas is done at the person's risk and SERVICEMASTER is not liable for any injuries that may occur. OWNER shall pay special attention to children and pets and for the safety of all others who may be present during the work. SERVICEMASTER is not responsible for their actions while the Work is in progress. During the course of the Work OWNER shall pay special attention to ~~exposed tack strips, exposed nails and transition bars in all areas under construction.~~ Exposed tackless strip is a danger even when covered; care must be taken when walking near tackless strip. The floors may be slippery when wet; extreme care must be taken if walking on or from wet flooring materials. ~~If the Work calls for an antimicrobial to be applied, no one shall enter the treated areas for at least 6 hours after application.~~ An antimicrobial is a chemical which inhibits microorganisms such as bacteria, fungi, protozoa or viruses. A MSDS sheet will be provided upon request.

c. **Equipment Responsibility.** OWNER is responsible for loss or theft of the equipment that is rented.

**G. RESPONSIBILITY FOR PAYMENT AND PAYMENT TERMS.** OWNER acknowledges that payment of each invoice for the Work is due within 30 days of the date of the invoice. Balances more than thirty (30) days past due shall bear simple interest at the rate of 1.5% per month (beginning with invoice date) thereafter until paid in full. OWNER agrees to pay all costs of enforcing this agreement incurred by SERVICEMASTER, including reasonable attorney fees, whether or not suit is filed.

**H. ADJUSTER.** OWNER represents to SERVICEMASTER that OWNER has separately authorized \_\_\_\_\_ (the "Adjuster") or Adjuster's assignee or successor, to perform certain approval and work oversight functions and that SERVICEMASTER may rely on the Adjuster or their personnel as agents of OWNER to negotiate the scope of the Work, subject to final approval of OWNER.

**I. ASSIGNMENT OF INSURANCE BENEFITS.** If OWNER is a named insured or beneficiary under a valid casualty insurance policy, OWNER hereby assigns all such insurance payments for covered charges directly to SERVICEMASTER under OWNER's policy from the following insurance company(ies): \_\_\_\_\_ Policy No(s).   A-1   Claim No(s). \_\_\_\_\_ OWNER agrees to pay OWNER's insurance deductible, if any, directly to SERVICEMASTER upon execution of this Contract. OWNER agrees to pay SERVICEMASTER any insurance proceeds received directly from its insurance carrier(s), in the event such carrier(s) do not agree to honor this assignment of benefits. OWNER's payment obligations will not be modified, extended, or made in any way contingent upon OWNER's insurance carrier's disbursement or timing of disbursement of any insurance proceeds. Should OWNER's insurance company require direct payment to OWNER, OWNER shall direct that SERVICEMASTER be added as a co-payee to the payment check covering SERVICEMASTER services.

**MOLD NOTIFICATION.**

1. While performing services at the Premises, SERVICEMASTER may identify and, if identified, will notify OWNER of what appears to be mold or other fungal contamination or bacteria ("Mold"). Mold cannot be confirmed with any certainty without laboratory analysis of air and/or surface samples taken by a qualified industrial hygienist. Anyone occupying the Premises who may have a physical condition or sensitivity aggravated by Mold may wish to consult a doctor. ~~Mold can amplify over time, and SERVICEMASTER is not responsible for any existing or the spread or concentration of Mold. SERVICEMASTER is not qualified to measure and classify the concentration, extent or character of the Mold it has, or may have, encountered or to recommend remedial measures. SERVICEMASTER can provide names of industrial hygienists, but~~

Carpet



LOWE'S HOME CENTERS, INC.  
5800 WEST HOPE AVENUE  
MILWAUKEE, WI 53216  
(414)449-5900

**PICK UP INFORMATION**

TO OBTAIN STOCK MERCHANDISE  
DESIGNATED AS [PICK UP LATER] ON  
THIS RECEIPT, YOU MUST COME TO THE  
CUSTOMER SERVICE DESK.

PICK UP DATE 07/26/09  
FOR INVOICE 89654

-INSTALLED SOS SALE-

SALES #: S2515RL2 959224 07-25-09

291848

LAB INSTL CARPET - PRICE  
[DIRECT DELIVERY]

227645

LAB INST CARPET-STAND NO  
285 @  
[DIRECT DELIVERY]

226207

LAB INST CARPET STEP NO B  
12 @  
[DIRECT DELIVERY]

253313

LAB INST CARPET CUSTOM ST  
[DIRECT DELIVERY]

228209

LAB INST CARPET-TACK STRI  
56 @  
[DIRECT DELIVERY]

ORIG. PO#: 65494319

INVOICE 89653 SUBTOTAL : 232.62\*

\* LABOR SUBTOTAL REFLECTS \$35.00 CREDIT  
FOR DETAIL



-INSTALLED SALE-

SALES #: S2515RL2 959224 07-25-09

230238

296.40 H

15' ARISTOCRAT ENG TOFFEE  
19 @ 15.60

[PICK UP LATER]

7469	CONTRACTOR PACKS 100PCS T [PICK UP LATER]	29.49 H
17122	6' ODOR BAN II CARPET CUS 48 @ 3.90 [PICK UP LATER]	187.20 H
16273	3' GOLD TAPOON W/PIHS [PICK UP LATER]	5.62 H
INVOICE 89654 SUBTOTAL :		512.71



-SALE-

SALES #: S2515QB1 1263107 07-25-09

107173

12-MONTH STORE CREDIT PRO

INVOICE 14055 SUBTOTAL : 0.00



INVOICE 89653 SUBTOTAL :	232.62
INVOICE 89654 SUBTOTAL :	512.71
INVOICE 14055 SUBTOTAL :	0.00
SUBTOTAL :	745.33
TAX:	0.00
BALANCE DUE:	745.33
LCC:	745.33

LCC: XXXXXXXXXXXX9690 001920  
AMOUNT: 745.33

2515 TERMINAL: 14 07/25/09 10:20:17

# OF ITEMS PURCHASED:  
EXCLUDES FEES; SERVICES AND SPECIAL ORDER ITEMS

THANK YOU  
FOR SHOPPING LOWE'S

RECEIPT REQUIRED FOR CASH REFUND.  
CHECK PURCHASE REFUNDS REQUIRE  
15 DAY WAIT PERIOD FOR CASH BACK.  
STORE MGR: CHRIS WEGNER

HAVE A COMMENT OR FEEDBACK? LET US KNOW AT:  
[WWW.LOWES.COM/FEEDBACK](http://WWW.LOWES.COM/FEEDBACK)  
STORE CODE: 25150-72509-14055



**INSTALLATION SERVICES CUSTOMER CONTRACT - FLOOR - CARPET**

LOWE'S OF CENTRAL MILWAUKEE, WI.  
 STORE # 2515  
 5800 WEST HOPE AVENUE  
 MILWAUKEE, WI 53216

STORE PHONE: (414) 449-5900  
 SALESPERSON: ROY LUCKETT  
 SALESPERSON ID: 959224  
 Document Print Date : 07/25/2009

This is only a Quote for the merchandise and services printed below. This becomes an agreement upon payment and an endorsement by a Lowe's register validation. Upon such payment and endorsement, the entire agreement, including the specifically completed pages of this document, the Terms and Conditions included with this document and any other addenda or attachments hereto, shall be referred to herein as this "Contract."  
**PLEASE READ THIS ENTIRE DOCUMENT, INCLUDING THE "TERMS AND CONDITIONS," BEFORE SIGNING.**

Lowe's Registration or Contractor License Number / Lowe's Contractor Name

<b>S</b>	Customer Name	EDITH ROWE	Home Phone	414-873-6253
<b>O</b>	Customer Address	5603 W ROOSEVELT DR	Other Phone	414-915-1311
<b>L</b>	City	MILWAUKEE	State / Province	WI
<b>D</b>	Installation Address	5603 W ROOSEVELT DR	Zip / Postal Code	53216
<b>T</b>	Installation City	MILWAUKEE	Installation State/Province	WI
<b>O</b>	Installation City	MILWAUKEE	Installation Zip/Postal Code	53216

*21% interest rate*

**MERCHANDISE AND INSTALLATION SUMMARY**

**MERCHANDISE SUMMARY**

7469 : 75200 : STK : CONTRACTOR PACKS 100PCS TACKCON : CONTRACTOR PACKS 100PCS TACKCON : MD BUILDING PRODUCTS - QTY 1	
16273 : 79053 : STK : 3GOLD TAPDOWN W/PINS 79053 : 3GOLD TAPDOWN W/PINS 79053 : MD BUILDING PRODUCTS - QTY 1	
17122 : BZ0257 : STK : 6' ODOR BAN II CARPET CUSHION : 6' ODOR BAN II CARPET CUSHION : LEGGETT & PLATT CARPET CUSHION - QTY 48	
230238 : 7L28000704 : STK : 15' ARISTOCRAT ENG TOFFEE : 15' ARISTOCRAT ENG TOFFEE : SHAW INDUSTRIES - QTY 19	
<b>Materials Price</b>	<b>\$ 512.71</b>



**INSTALLATION DESCRIPTION**

Job Type : New Construction  
 Total Square Feet of Product to Install : 285  
 Carpet Install Type : Power Stretch on Tack Strip  
 Color of Carpet : aristocrat english  
 Carpet Border / Inserts Installed : No  
 Stairs : Yes  
 Num of Std Waterfall Steps Through Balusters : None  
 Custom Stairs Description : 1uoholstered step  
 Install Tack Strip : Yes  
 Reconnect of Ice Maker Supply Line : No  
 Subfloor Leveling or Damage Repair : No  
 Transition Material : Metal  
 Linear Feet of New Moulding : None  
 If Required Who Will Cut Down Interior Doors : Customer  
 Permit Required : No  
 Dump Entry Fee : None  
 Describe Work Needed to Bring up to Code : None  
 Eligible for Offer : Yes

Room : stairs,basement  
 Carpet Type : Textured  
 Carpet Size : 15' Wide  
 Pattern Match : No  
 Will Installer Supply Carpet Pad : No  
 Num of Std Waterfall Steps Not Through Balusters : 12  
 Number of Custom Stairs : 1  
 Custom Stairs Charge : Yes  
 Linear Feet of Tack Strip Installed : 56  
 Subfloor Composition : Concrete  
 Transitions : Yes  
 Remove and Reuse Existing Moulding : No  
 Labor Category : Carpet  
 Customer Understands Carpet Project Scope : Yes  
 Additional Miles Traveled Over 20 : 0  
 Installer Access Fee : No  
 Describe Other Work Needed : None  
 Comments : No Comment

Labor Charges	\$ 267.62
Detail Deduction	-\$ 35.00

**Additional Specifications:**

Notation: Lowe's will not make structural modifications or remove vinyl flooring.  
 Additional Specifications: The Environmental Protection Agency (EPA) has requested that Lowe's notify installation customers that a lead based paint hazard may exist in dwellings built prior to 1978. See pamphlet EPA 747-K-99-001 for details.

**TOTAL CHARGES OF ALL MERCHANDISE AND SERVICES**

\*where applicable labor is taxable,check local tax restrictions.



**CUSTOMER COPY**

SUB-TOTAL	\$ 745.33
*SALES TAX	\$ 0.00
DELIVERY	\$ 0.00
ORDER TOTAL	\$ 745.33
BALANCE DUE	

Work is to commence upon reasonable availability of Contractor which is anticipated to be TBD [fill in date].  
 Estimated completion date is TBD [fill in date].

**NOTICE TO CUSTOMER**

All items listed in this contract and specification sheet(s) are to be installed under conditions agreed upon at time of purchase and at the price appearing on this contract form. This assumes sound existing substructures, superstructure and points of attachments. Extra labor or material incident to installation necessitated by defective substructures, superstructure, points of attachment, or the moving of fixtures or appliances to be billed at extra cost to customer. DO NOT SIGN THIS CONTRACT UNTIL COMPLETE AND YOU HAVE READ THE TERMS AND CONDITIONS OF THIS CONTRACT. BY SIGNING BELOW, YOU ARE ACKNOWLEDGING THAT YOU HAVE READ, UNDERSTAND AND AGREE TO THE TERMS AND CONDITIONS SET FORTH ON THIS CONTRACT. YOU ARE ENTITLED TO A COPY OF THIS CONTRACT AT THE TIME OF SIGNATURE.

WITNESS OUR HAND(S) AND SEAL(S) BELOW THIS 25 DAY OF JULY, 2009.  
 Lowe's Home Centers, Inc.

By: [Signature] (Seal)

Print Name: Ray Buckett

Address: 5800 W. HOPE AVE

City: Milwaukee State / Province: WI Zip / Postal Code: 53216

[Signature] (Seal)

Owner: Edith Rowe

Print Name: Edith Rowe  
 Spouse: n/a (Seal)



LOWE'S HOME CENTERS, INC.  
12000 WEST BURLEIGH  
MILWAUKEE, WI 53222  
(414)257-4159

-SALE-

SALES #: S2309EV1 1305973 08-16-09

148740 DRP BEIGE/GOLD LEAF 5" TE	11.97
3 @ 3.99	
235082 DRP 9" GARNET RED HARDBAC	1.87
224564 DRP BAVARIA GOLD INST PLE	10.00
3355 PNE-QTRD 106 11/16 X 11/16	15.04
4 @ 3.76	

SUBTOTAL: 38.88

TAX: 2.18

INVOICE 14538 TOTAL: 41.06

BALANCE DUE: 41.06

CHECK: 41.06

2309 TERMINAL: 14 08/16/09 11:30:47

# OF ITEMS PURCHASED: 9

EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



THANK YOU FOR SHOPPING LOWE'S  
RECEIPT REQUIRED FOR CASH REFUND.  
CHECK PURCHASE REFUNDS REQUIRE  
15 DAY WAIT PERIOD FOR CASH BACK.  
STORE MGR: AHY

HAVE A COMMENT OR FEEDBACK? LET US KNOW AT:

WWW.LOWES.COM/FEEDBACK

STORE CODE: 23090-81609-14538

YOUR OPINIONS COUNT!

REGISTER TO WIN A \$2500 LOWE'S GIFT CARD

REGISTRESE PARA GANAR UNA TARJETA DE REGALO LOWE'S

REGISTER ONLINE OR BY PHONE BY COMPLETING A GUEST  
SATISFACTION SURVEY ANYTIME DURING THE NEXT 3 DAYS:

<http://webview4.isacorp.com/lowes>

OR

1-866-362-3877



LOWE'S HOME CENTERS, INC.  
5800 WEST LOPE AVENUE  
MILWAUKEE, WI 53216  
(414)449-5900

-SALE-

SALES #: S25 58E1 1344892 08-08-09

295344 B&O 12U SHARP SELECT ORIL	39.97
235349 DRP 13" D&C GULDER GATE TA	13.98
2 @ 6.54	
40054 1/2 LB WIPING CLOTHS - FF	1.98
267427 DRP 57" MAPLE GRS LG POLYDT	10.17
100802 20" HLT W/ W/GR	14.84
133105 TAP SPLT 1/2-14 5 PK ID	1.98
2771 3-PK HALL MOISTURE ABS	8.48
235082 DRP 9" GARNET RED HARDBAC	1.87
152083 10.2 OZ PL PANELING AND T	17.98
5 @ 2	
274191 DRP 20" BRACIAN B...	25.00
3263 PNE BASE 713 3 1/4	53.00
5 @	

SUBTOTAL: 134.24

TAX: 10.88

INVOICE 02705 TOTAL: 205.12

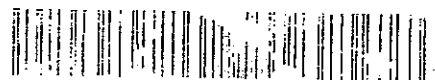
BALANCE DUE: 205.12

CHECK: 205.12

2515 TERMINAL: 08/08/09 12:02:18

# OF ITEMS PURCHASED: 21

EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



THANK YOU FOR SHOPPING LOWE'S  
RECEIPT REQUIRED FOR CASH REFUND.  
CHECK PURCHASE REFUNDS REQUIRE  
15 DAY WAIT PERIOD FOR CASH BACK.  
STORE MGR: CHRIS WEGHER

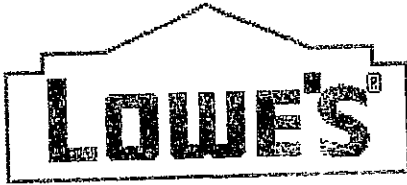
HAVE A COMMENT OR FEEDBACK? LET US KNOW AT:

WWW.LOWES.COM/FEEDBACK

STORE CODE: 5150-60809-02705

*These items  
were used  
to replace the  
baseboards and  
to reset the  
paneling.*

THE FOLLOWING ITEMS EXTENDED...  
AVAILABLE FOR PURCHASE... YOU HAVE 30 DAYS FROM THE DATE  
OF THIS SALE TO PURCHASE A PLAN TO MANAGE...  
CONTACT A LOWE SALES PERSON.



LOWE'S HOME CENTERS, INC.  
5800 WEST HOPE AVENUE  
MILWAUKEE, WI 53216  
(414)449-5900

-SALE-

SALES #: S2515BB1 1166366 07-28-09

290204 6PK 2" FOAM BRUSH WHIZZ	2.38
156886 55YD BLACK DUCT TAPE - 3H	6.96
3875 PNE CASE 366 2 1/4 X 11/1	13.80
2 @ 6.90	
109382 25 OZ CONET POWDER	1.96
2 @ 0.98	
208663 35 OZ KABOODI	4.98
19416 1/4" X 36" OAK DOWEL	1.96
2 @ 0.98	
188541 3-PK SCOTCH-BRITE HD SCOU	2.29
100517 PNE CHRL ISCR 5-3/4"	3.56
2 @ 1.78	
267467 DRP 1/2 PT GLOSS MB POLY	3.42
5.47 DISCOUNT EACH	-7.76
2 @ 1.71	
267469 DRP 1/2 PT SEMI-GLS MB PG	1.71
9.47 DISCOUNT EACH	-7.76

SUBTOTAL: 43.64  
TAX: 2.45  
INVOICE 14307 TOTAL: 46.09  
BALANCE DUE: 46.09

CHECK : 46.09  
TOTAL DISCOUNT: 23.28

2515 TERMINAL: 14 07/28/09 18:24:07

# OF ITEMS PURCHASED: 15  
EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



THANK YOU FOR SHOPPING LOWE'S  
RECEIPT REQUIRED FOR CASH REFUND.  
CHECK PURCHASE REFUNDS REQUIRE  
15 DAY WAIT PERIOD FOR CASH BACK.  
STORE MGR: CHRIS WEGNER

HAVE A COMMENT OR FEEDBACK? LET US KNOW AT:  
[WWW.LOWES.COM/FEEDBACK](http://WWW.LOWES.COM/FEEDBACK)  
STORE CODE: 25150-72809-14307



LOWE'S HOME CENTERS, INC.  
5800 WEST HOPE AVENUE  
MILWAUKEE, WI 53216  
(414)449-5900

-SALE-

SALES #: S2515CT4 1361560 08-09-05

263202 QT BROWN MAHOGANY INT OIL	7.37
75441 COTTON TWIST HOP W/ SPOT	10.98
251119 CLIP-ON DUSTPAN	1.98
276462 JUNBO ANGLE BROOM - MICRO	10.97

SUBTOTAL: 31.90  
TAX: 1.79  
INVOICE 13491 TOTAL: 33.69

BALANCE DUE: 33.69

CASH : 100.00  
CHANGE : 66.31

2515 TERMINAL: 13 08/09/09 10:48:14

# OF ITEMS PURCHASED: 4  
EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



THANK YOU FOR SHOPPING LOWE'S  
RECEIPT REQUIRED FOR CASH REFUND.  
CHECK PURCHASE REFUNDS REQUIRE  
15 DAY WAIT PERIOD FOR CASH BACK.  
STORE MGR: CHRIS WEGNER

HAVE A COMMENT OR FEEDBACK? LET US KNOW AT:  
[WWW.LOWES.COM/FEEDBACK](http://WWW.LOWES.COM/FEEDBACK)  
STORE CODE: 25150-80909-13491



LOWE'S HOME CENTERS, INC.  
 5800 WEST HOPE AVENUE  
 MILWAUKEE, WI 53216  
 (414)449-5900

-SALE-

SALES #: S2515KB1-1328974 08-30-08

107553 WHW CORNER BLOCK 2 1/2"BU	3.96
2 @ 1.98	
65618 10 X 2-1/2 PH FL BRS WOOD	7.96
45545 QT KILZ 2 PRIMER	6.98
107337 60W A15C FAN DL CAN BASE	5.98
169458 60W A15C FAN CAN BASE 4PK	3.98
1205 1X2X6 SELECT PINE	2.33
1087 1X4X6 POPLAR BOARD	6.99
33221 DRP 52" LRKESIDE WHITE CF	35.92

SUBTOTAL:	74.12
TAX:	4.15
INVOICE 09309 TOTAL:	78.27

BALANCE DUE: 78.27

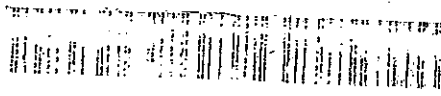
DISC: 78.27

DISC XXXXXXXXXXXX5162 030209  
 AMOUNT: 78.27

*John Lewis*

2515 TERMINAL: 09 08/30/08 17:55:01

# OF ITEMS PURCHASED: 9  
 EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



THANK YOU  
 FOR SHOPPING LOWE'S

RECEIPT REQUIRED FOR CASH REFUND.  
 CHECK PURCHASE REFUNDS REQUIRE  
 15 DAY WAIT PERIOD FOR CASH BACK.  
 STORE MGR: KEITH HARSH



LOWE'S HOME CENTERS, INC.  
 5800 WEST HOPE AVENUE  
 MILWAUKEE, WI 53216  
 (414)449-5900

\*\*\*\*\*

**PICK UP INFORMATION**

TO OBTAIN STOCK MERCHANDISE  
 DESIGNATED AS [PICK UP LATER] ON  
 THIS RECEIPT, YOU MUST COME TO THE  
 CUSTOMER SERVICE DESK.

PICK UP DATE 07/22/09  
 FOR VOICE 14314

\*\*\*\*\*

-SALE-

SALES #: S2515CG1 1243975 07-22-09

55005 (93067)2# BUG-BETA SHANK	9.48
262518 36" SIGNATURE BEVEL WHT-B	244.00
[PICK UP LATER]	
3877 PNE CASE 366 2 1/4 X 11/1	33.12
6 @ 5.52	
SUBTOTAL: 286.60	
TAX: 16.05	
INVOICE 14314 TOTAL: 302.65	
BALANCE DUE: 302.65	
LCC: 302.65	

LCC XXXXXXXXXXXX9690 001474  
 AMOUNT: 302.65

*[Handwritten Signature]*

2515 TERMINAL: 14 07/22/09 20:21:29

# OF ITEMS PURCHASED: 8  
 EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



THANK YOU  
 FOR SHOPPING LOWE'S

RECEIPT REQUIRED FOR CASH REFUND.  
 CHECK PURCHASE REFUNDS REQUIRE  
 15 DAY WAIT PERIOD FOR CASH BACK.  
 STORE MGR: CHRIS WEGNER

HAVE A COMMENT OR FEEDBACK? LET US KNOW AT:



LOWE'S HOME CENTERS, INC.  
 5800 WEST HOPE AVENUE  
 MILWAUKEE, WI 53216  
 (414)449-5900

-SALE-

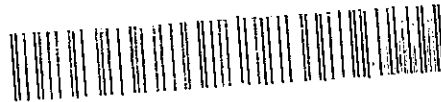
SALES #: S2515HS1 1179529 08-01-09

124567 JH DURACELL AA 10PK	6.88
48719 PNE CRN ISCR ICB250 2-1/2	5.96
2 @ 2.98	
107575 WAW PLINTH BLOCK 2 1/2"	4.96
2 @ 2.48	
11504 7/16"X2 1/2" DOVEL PIN	1.98
193283 PNE CRN IS ICB275 3-1/2X3	4.98
65735 GL VALSPAR LTX FLOOR LT G	22.98
257444 QT DARK DAK GLS UB POLYST	10.38
12.98 DISCOUNT EACH	-2.60

SUBTOTAL:	58.12
TAX:	3.26
INVOICE 12597 TOTAL:	61.38
BALANCE DUE:	61.38
CHECK:	61.38
TOTAL DISCOUNT:	2.60

2515 TERMINAL: 12 08/01/09 14:47:04

# OF ITEMS PURCHASED: 9  
 EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



THANK YOU FOR SHOPPING LOWE'S  
 RECEIPT REQUIRED FOR CASH REFUND.  
 CHECK PURCHASE REFUNDS REQUIRE  
 15 DAY WAIT PERIOD FOR CASH BACK.  
 STORE MGR: CHRIS WEGNER

HAVE A COMMENT OR FEEDBACK? LET US KNOW AT:  
[WWW.LOWES.COM/FEEDBACK](http://WWW.LOWES.COM/FEEDBACK)  
 STORE CODE: 25150-80109-12697



LOWE'S HOME CENTERS, INC.  
5800 WEST HOPE AVENUE  
MILWAUKEE, WI 53216  
(414)449-5900

-SALE-

SALES #: S2515HS1 1179529 08-16-09

294385 SEAT RD WHITE HOOD ECONOM 5.88  
148740 DRP BEIGE/GOLD LEAF 5" TE 5.49  
96864 RUSSET QUARTER ROUND 14.56  
4 @ 3.64

SUBTOTAL: 25.93  
TAX: 1.45  
INVOICE 13081 TOTAL: 27.38  
BALANCE DUE: 27.38

CASH: 50.00  
MERCH/GIFT CARDS: 15.60  
CHANGE: 38.22

MERCH/GIFT CARD 2296 AUTHCODE 000000

BEGIN BAL	TRANSACTION AMT	ENDING BAL
15.60	15.60	0.00

2515 TERMINAL: 13 08/16/09 10:44:55

# OF ITEMS PURCHASED: 6  
EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



THANK YOU FOR SHOPPING LOWE'S  
RECEIPT REQUIRED FOR CASH REFUND.  
CHECK PURCHASE REFUNDS REQUIRE  
15 DAY WAIT PERIOD FOR CASH BACK.  
STORE MGR: CHRIS WEGNER

HAVE A COMMENT OR FEEDBACK? LET US KNOW AT:  
[WWW.LOWES.COM/FEEDBACK](http://WWW.LOWES.COM/FEEDBACK)  
STORE CODE: 251509-81609-13081



LOWE'S HOME CENTERS, INC.  
5800 WEST HOPE AVENUE  
MILWAUKEE, WI 53216  
(414)449-5900

-SALE-

SALES #: S2515BB1 1166366 08-02-09

45086 3 PACK SCOTCH TAPE 3.96  
2 @ 1.98  
159912 4 FT GREEN BAMBOO STAKE ( 4.98  
48713 PNE CRN ISCR ICB250 2-1/2 5.96  
2 @ 2.98  
69175 NAIL COATED SINKER 1LB 120 1.48  
275488 WATERBRIDGE PLACE END TAB 49.00  
99281 2"X36" CEDAR STAIN EOATING 7.98  
133012 3.4 QT ANNUAL PREMIUM PLA 17.96  
2 @ 8.98

SUBTOTAL: 91.32  
TAX: 5.11  
INVOICE 14163 TOTAL: 96.43

BALANCE DUE: 96.43

MERCH/GIFT CARDS: 20.54  
H/C: 75.89

MERCH/GIFT CARD 0720 AUTHCODE 000000

BEGIN BAL	TRANSACTION AMT	ENDING BAL
20.54	20.54	0.00

H/C XXXXXXXXXXXX3846 00200P  
AMOUNT: 75.89

*Robert Lane*

2515 TERMINAL: 14 08/02/09 16:09:29

# OF ITEMS PURCHASED: 10  
EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



THANK YOU  
FOR SHOPPING LOWE'S

RECEIPT REQUIRED FOR CASH REFUND.  
CHECK PURCHASE REFUNDS REQUIRE  
15 DAY WAIT PERIOD FOR CASH BACK.  
STORE MGR: CHRIS WEGNER

HAVE A COMMENT OR FEEDBACK? LET US KNOW AT:

179.37  
Total

----- Please read the following important information -----

- \* 1 : Product that the customer requests be held for pickup may not be available beyond 4 days. Items held for a scheduled delivery may not be available beyond 14 days.
- \* 2 : Please check your receipt. If you were charged a price higher than the price shown on our price tag at the time of your purchase, we will pay you the difference, plus \$3
- \* 3 : \*See back of receipt for Price Guarantee details.

Comments : Converted to sale by CTSB on 18-AUG-09

**Payment Information**

Amt paid MOP Card#/Check#	Auth Nr	Prom End Date	Subtotal :	
0.00 CA			Del Chg :	299.97
316.77 CK 6142	AP 173459		Fuel Chg :	0.00
			Tax Chg :	0.00
			Total Chg:	16.80
			Total Pd :	316.77
			Balance :	316.77
				0.00

Store Location: American - Brown Deer 6700 West Brown Deer Road, Brown Deer, WI 53223  
 Store 414-362-1000 Repair 262-521-1001 Delivery 262-548-8550 Mobile Install 414-362-1362  
 Port# bdracap2-2x cdr# CTSB)

*TV Stand*

American's Satisfaction Policy • American's 110% Price Guarantee



www.americantv.com

Storage Units

6138  
R005 - 2005 - 4539 - 08  
414-878-6283  
EDITH HOWE  
8015 W ROOSEVELT DR  
MILWAUKEE, WI 53216-3153  
8-17-09  
6138

Buy to the Order of  
Edith Howe  
Purchase Price \$433.40  
Ed/100  
100%

USDA FEDERAL SAVINGS BANK  
7170 ROCKLEIGH DRIVE  
CORPUS CHRISTI, TEXAS 78408-0554  
FOR DEPOSIT ONLY  
1910855900 6138



BOSTON STORE

THANK YOU FOR YOUR FURNITURE PURCHASE!

RESERVATION #: 3601011 - 00 LOCATION: 529  
 RESERVATION DATE : 09/04/2009 PAGE 1  
 DELIVERY DATE: 09/11/2009

ASSOCIATE #: 856396

SOLD TO: EDITH ROWE  
 5603 W ROOSEVELT DRIVE  
 MILWAUKEE, WI. 53216

Boston Store

Brookfield Furniture # 529  
 Brookfield, WI 53045  
 (262) 827-8398  
 www.bostonstore.com

SHIP TO: SAME AS "SOLD TO"  
 HOME: (414) 873-6253  
 WORK: ( ) -

BIG TICKET 529 5 3234 09/04/2009  
 IBM ENTERING 856396 08:34 P  
 v.2.2.4.5

\*\*CUSTOMER COPY\*\*

DEPT/CLS/SKU DESCRIPTION	QTY	EA PRICE	NET PRICE	TOTAL
501/784/70365958 ARMLESS	3	600.00	540.00	1620.00
	60.00	10%	GROUP MD TAKEN	
* 501/784/70365961 OTTOMAN	1	399.00	359.10	359.10
	39.90	10%	GROUP MD TAKEN	
* 501/784/70365956 CORNER	2	800.00	720.00	1440.00
	80.00	10%	GROUP MD TAKEN	
605/605/70083553 WARRANTY	1	279.00	279.00	279.00
MERCHANDISE TOTAL			3,419.10	T
WARRANTY TOTAL			279.00	T
DELIVERY FEE			0.00	T
SUBTOTAL			3,698.10	
TAX ( 5.600%)			207.09	
AMOUNT DUE			3,905.19	

RESERVATION NUMBER: 360101100

Subtotal \$3,698.10  
 Total Tax \$207.09  
 Total \$3,905.19  
 CHECK \$1,500.00  
 BD CHARGE \$2,405.19

Ship To:  
 ROWE, EDITH  
 5603 W ROOSEVELT DRIVE

MILWAUKEE, WI  
 53216  
 53216

Total Items: 7

*one corner unit  
 and an ottoman  
 were the replacements  
 units.*

CHARGE DESCRIPTION NOT FOUND

\*\*\*\*\*1812

NO INTEREST/EQUAL PAYMENTS FOR 24 MONTHS  
 YOU ARE REQUIRED TO PAY A MINIMUM MONTHLY  
 PAYMENT OF 1/24 OF THIS PURCHASE AMOUNT. NO





## Legislation Details (With Text)

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**File #:** 090940      **Version:** 0  
**Type:** Resolution      **Status:** In Committee  
**File created:** 12/1/2009      **In control:** JUDICIARY & LEGISLATION COMMITTEE  
**On agenda:**      **Final action:**  
**Effective date:**  
**Title:** Resolution relating to the claim of Linda Bergman for property damage. (5th Aldermanic District)  
**Sponsors:** THE CHAIR  
**Indexes:** CLAIMS  
**Attachments:** City Attorney Letter.pdf, Claim, Hearing Notice List

Date	Ver.	Action By	Action	Result	Tally
12/1/2009	0	COMMON COUNCIL	ASSIGNED TO		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		

**Number**

090940

**Version**

ORIGINAL

**Reference**

**Sponsor**

THE CHAIR

**Title**

Resolution relating to the claim of Linda Bergman for property damage. (5th Aldermanic District)

**Requestor**

City Attorney

**Drafter**

JAS:ms

October 29, 2009

1029-2009-2790:151412

**GRANT F. LANGLEY**  
City Attorney

**RUDOLPH M. KONRAD**  
**LINDA ULISS BURKE**  
**VINCENT D. MOSCHELLA**  
Deputy City Attorneys



**THOMAS O. GARTNER**  
**BRUCE D. SCHRIMPF**  
**SUSAN D. BICKERT**  
**STUART S. MUKAMAL**  
**THOMAS J. BEAMISH**  
**MAURITA F. HOUREN**  
**JOHN J. HEINEN**  
**DAVID J. STANOSZ**  
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**MELANIE R. SWANK**  
**JAY A. UNORA**  
**DONALD L. SCHRIEFER**  
**EDWARD M. EHRlich**  
**LEONARD A. TOKUS**  
**MIRIAM R. HORWITZ**  
**MARYNELL REGAN**  
**G. O'SULLIVAN-CROWLEY**  
**KATHRYN Z. BLOCK**  
**MEGAN T. CRUMP**  
**ELOISA DE LEÓN**  
**ADAM B. STEPHENS**  
**KEVIN P. SULLIVAN**  
**BETH CONRADSON CLEARY**  
**THOMAS D. MILLER**  
**HEIDI E. GALVÁN**  
**JARELY M. RUIZ**  
**ROBIN A. PEDERSON**  
**DANIELLE M. BERGNER**  
Assistant City Attorneys

October 29, 2009

To the Honorable Common Council  
Of the City of Milwaukee  
Room 205 – City Hall

Re: Resolution Relating to the Claim of Linda Bergman  
C.I. File No. 09-L-123

Dear Council Members:

We return the enclosed document which as been filed with the City Clerk and ask that it be introduce and referred to the Committee on Judiciary & Legislation with the following recommendation.

Claimant, Linda Bergman, 3850 North 84th Street, Milwaukee, WI 53222, alleges that in June, 2009, she sustained damages when a City sewer backed up into the basement of her property. She claims damages in the amount of \$6,498.00.

Our investigation reveals that the Infrastructure Services Division (ISD) records indicate that because of the large amount and strong intensity of the rain during the June 18-19, 2009 flood, the City experienced flows that exceeded the capacity of the sewer systems. Additionally, the ISD checked the City main sewer as a result to Ms. Bergman's claim and found it to be in proper working order. The City was not negligent in the matter. As such, the City would not be liable. Therefore, we recommend that this claim be denied.

Very truly yours,

**GRANT F. LANGLEY**  
City Attorney

**JAN A. SMOKOWICZ**  
Assistant City Attorney

JAS:ms  
Enclosure  
1029-2009-2790:151411

**OFFICE OF THE CITY ATTORNEY**

Office of the City Clerk.

Sept 2009

RE: Sewer Back-Up In June when I called the City and one of your employees came to my house and told me to file a claim with the city.

Items Damaged: Carpet/Rugs \$989.98

Plus Tax  
↓

Bare boards \$210.00

(2) Dehumidifiers \$249.99 x 2 = \$499.98

(2) Sofas \$77.95

(4) Chairs \$195.00

(3) End Tables \$379.99

(4) Bar stools \$145.96

Poker Table & 4 chairs \$459.99

TV \$199.99

Decor. (misc.) \$350-\$500.00

(2) Floor Lamps \$119.98

RECALD D. L. JAMES  
CITY CLERK

2009 OCT 14 PM 1:56  
2009 OCT 14 PM 2:41

CITY OF MILWAUKEE  
CITY OF MILWAUKEE  
RECEIVED  
OFFICE OF THE  
CITY ATTORNEY

Time Off Work to clean: \$313.46 (+ Comm. + Mileage Missed)

Cleaning Supplies \$127.75

Thank You For Your Help  
Linda Bergman

414-536-9901 - Home (Nights)  
414-358-0104 - Work (Very Limited calls)

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 on the reverse side 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

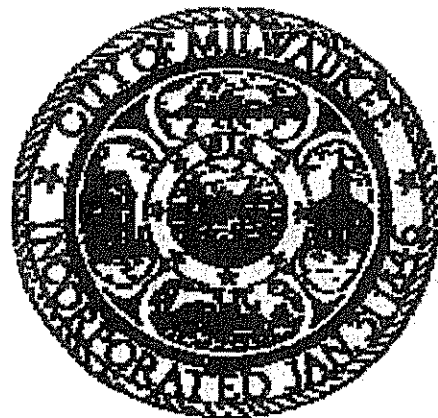
## ADDITIONAL INFORMATION

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.



893.60 Claims against governmental bodies or officers, agents or employees; notice of Injury; limitation of damages and suits. (1) Except as provided in subs. (1 g), (1 in), (1 p) 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.



Office of the City Clerk.

Sept 2009

RE: Sewer Back-Up In June when I called the City and one of your employees came to my house and told me to file a claim with the city.

Items damaged: Carpet/Rugs \$989.98  
Plus Tax Baseboards \$210.00  
↓  
(2) Dining Chairs \$249.99 x 2 = \$499.98  
(2) Sofas \$77.95  
(4) chairs \$795.00  
(3) End Tables \$379.99  
(4) Bar stools \$145.96  
Poker Table & 4 chairs \$459.99  
TV \$199.99  
Decor. (Misc) \$350-\$500.00  
(2) Floor Lamps \$119.98

Time Off Work to clean: \$313.46 (+ Comm. + Mileage Missed)

Cleaning Supplies \$127.15

Thank you for your help  
Linda Bergman

414-536-9901 Home (Nights)  
414-358-0104 work (Very limited calls)





## Legislation Details (With Text)

---

**File #:** 090941      **Version:** 0

**Type:** Resolution      **Status:** In Committee

**File created:** 12/1/2009      **In control:** JUDICIARY & LEGISLATION COMMITTEE

**On agenda:**      **Final action:**

**Effective date:**

**Title:** Resolution relating to the claim of Faith Gregory for property damage. (15th Aldermanic District)

**Sponsors:** THE CHAIR

**Indexes:** CLAIMS

**Attachments:** City Attorney Letter.pdf, Claim, Hearing Notice List

Date	Ver.	Action By	Action	Result	Tally
12/1/2009	0	COMMON COUNCIL	ASSIGNED TO		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		

**Number**

090941

**Version**

ORIGINAL

**Reference**

**Sponsor**

THE CHAIR

**Title**

Resolution relating to the claim of Faith Gregory for property damage. (15th Aldermanic District)

**Requestor**

City Attorney

**Drafter**

JAS:ms

October 26, 2009

1029-2009-2730:151256

**GRANT F. LANGLEY**  
City Attorney

**RUDOLPH M. KONRAD**  
**LINDA ULISS BURKE**  
**VINCENT D. MOSCHELLA**  
Deputy City Attorneys



**THOMAS O. GARTNER**  
**BRUCE D. SCHRIMPF**  
**SUSAN D. BICKERT**  
**STUART S. MUKAMAL**  
**THOMAS J. BEAMISH**  
**MAURITA F. HOUREN**  
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**DAVID J. STANOSZ**  
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**MELANIE R. SWANK**  
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**EDWARD M. EHRlich**  
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**JARELY M. RUIZ**  
**ROBIN A. PEDERSON**  
**DANIELLE M. BERGNER**  
Assistant City Attorneys

October 26, 2009

To the Honorable Common Council  
Of the City of Milwaukee  
Room 205 – City Hall

Re: Resolution Relating to the Claim of Faith O. Gregory  
C.I. File No. 09-L-114

Dear Council Members:

We return the enclosed document which as been filed with the City Clerk and ask that it be introduced and referred to the Committee on Judiciary & Legislation with the following recommendation.

Claimant, Faith O. Gregory, 1339 West Kneeland Street, Milwaukee, WI 53205, alleges that on June 18, 2009, she sustained damages when a City sewer backed up into the basement of her residence. She claims damages in the amount of \$6,079.00. The Assessor's Office information notes that she is not the owner of record of this property.

Our investigation reveals that the Infrastructure Services Division (ISD) records indicate that they did not receive a complaint of backwater at the time. Their records also indicate that because of the large amount and strong intensity of the rain during the June 18-19, 2009 flood, the City experienced flows that exceeded the capacity of the sewer systems. Additionally, the ISD checked the City main sewer as a result to Ms. Gregory's claim and found it to be in proper working order. The City was not negligent in the matter. As such, the City would not be liable. Therefore, we recommend that this claim be denied.

Very truly yours,

**GRANT F. LANGLEY**  
City Attorney

**JAN A. SMOKOWICZ**  
Assistant City Attorney

JAS:ms  
Enclosure  
1029-2009-2730:151255

**OFFICE OF THE CITY ATTORNEY**



Faith O Gregory  
 1339 W Kneeland St  
 Milwaukee WI 53205

414.915.9866

414.344.3374

HOME

I Am very upset be-  
 cause this is the second  
 time this happen to me.

I went to FENIA, to Housing  
 Authority they SAID they  
 could not help me. Go to  
 the city.

because of sewer backed  
 up, my belongings in the  
 basement were ruined. I  
 believe that the city should  
 be liable for the damage.

On June 18, 2009 it was  
 raining very hard, at 1339  
 W. Kneeland St in the basement  
 where my belonging were  
 they got ruined. the ~~water~~  
 water was coming out of  
 the sewers. "Please see pictures".

I'm not trying to get rich,  
 I just want a little help, so  
 I can try to repair some of  
 my things.

CITY OF MILWAUKEE  
 RECEIVED  
 2009 OCT 16 PM 2:35  
 BY: [unclear]

RONALD D. LEONHARDT  
 CITY CLERK  
 09 OCT 16 PM 2:32  
 CITY OF MILWAUKEE

2- Stereo speakers \$250.00 ea.

8- Towels sets \$20.00 ea.

10- Sheets sets \$15.00-30.00 ea (Queen +  
TWINS)

5- Blankets - \$20.00 ea.

Clothes - \$225.00 (jogging suits +  
hats, gloves, towels, socks, jeans)

Toys \$300.00 (Barbie Dolls and clothes  
Barbie house and furniture etc.)

6- Dolls - \$40.00 (Baby Alive Dolls)

2- wall pictures - \$59.00 ea.

10- (VHS) movies \$20.00 ea.

3- Comforter sets - \$89.00 ea.

3- Bathroom sets - \$25.00 ea.

Disney books<sup>set</sup> + Dr. Seuss

Learning books - \$8.00 (A, B, C & 1, 2, 3  
math books + reading book)

3- iron board covers - \$10.00 ea.

2 (brown) extension cord \$1.00 ea.

2 (orange) extension cord \$15.00 ea.

2 Surge protector \$12.00 ea.

pictures (Family Photos)

\$50.00 clean up

WILLIAMSON  
10001-2 bill \$65  
11/11/07

3 sheets

21 <sup>Page</sup> pictures

Faith O. Gregory



Faith O. Gregory  
1339 W. Kneeland St.  
Milwaukee, WI 53205-2116











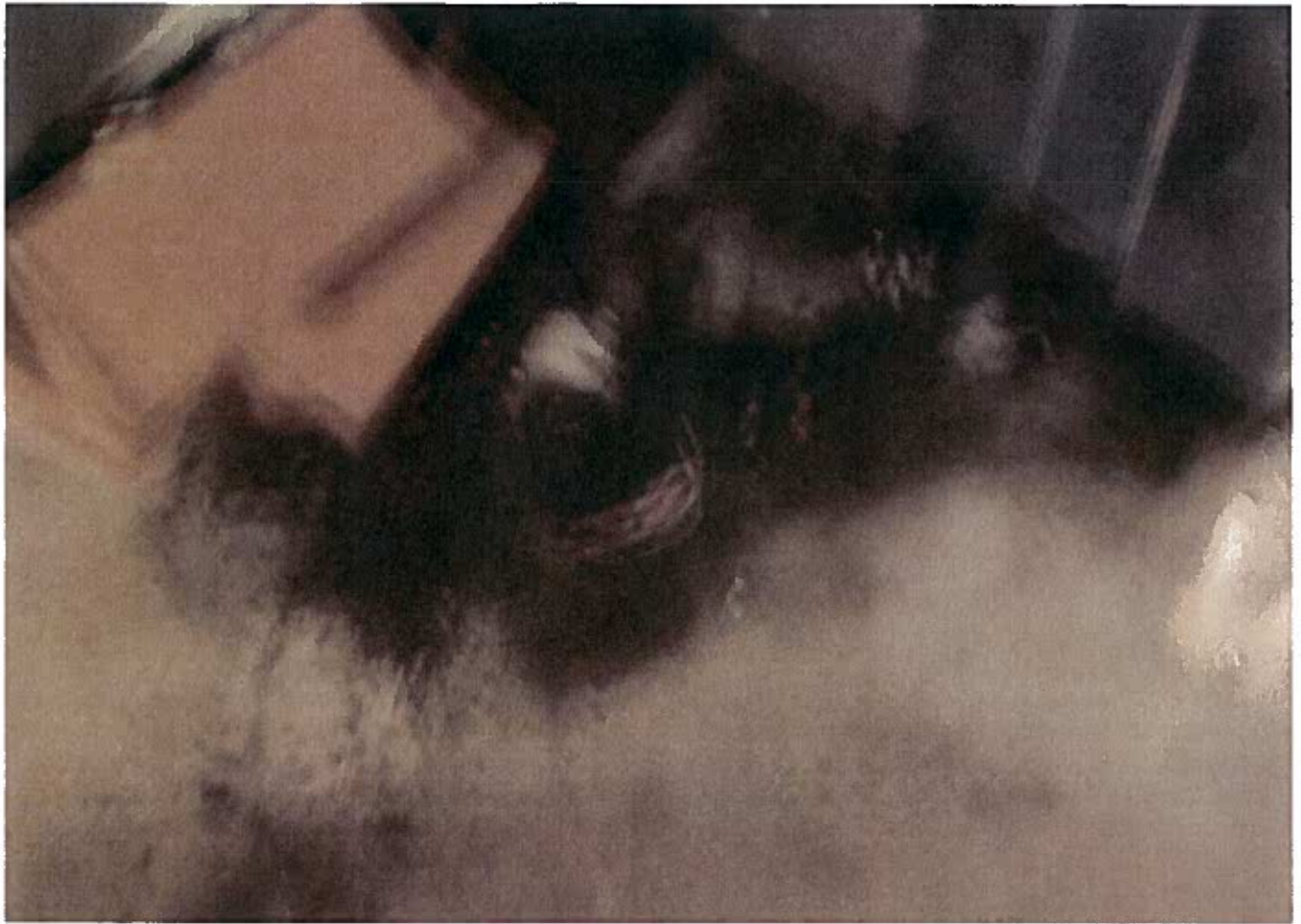




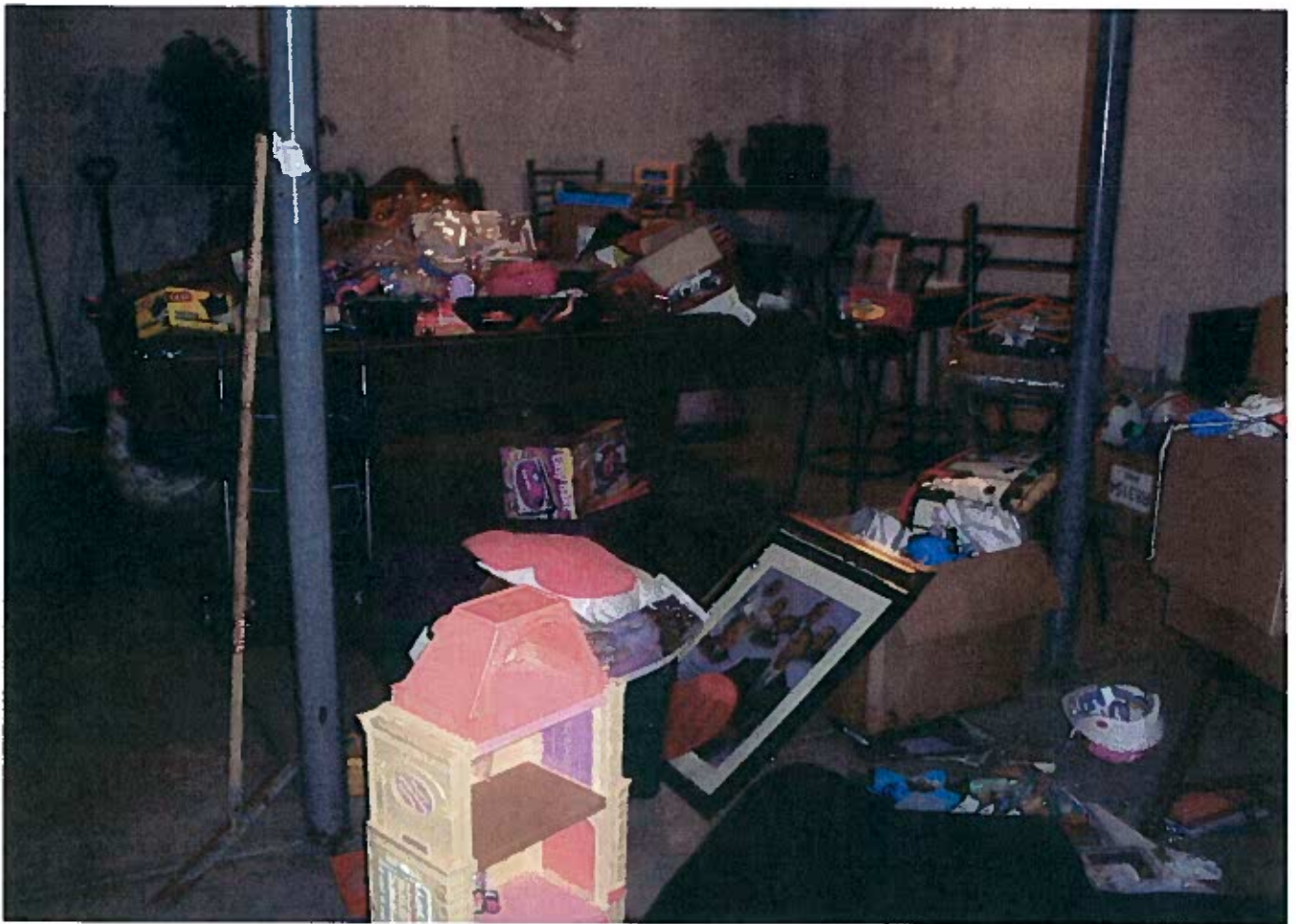
































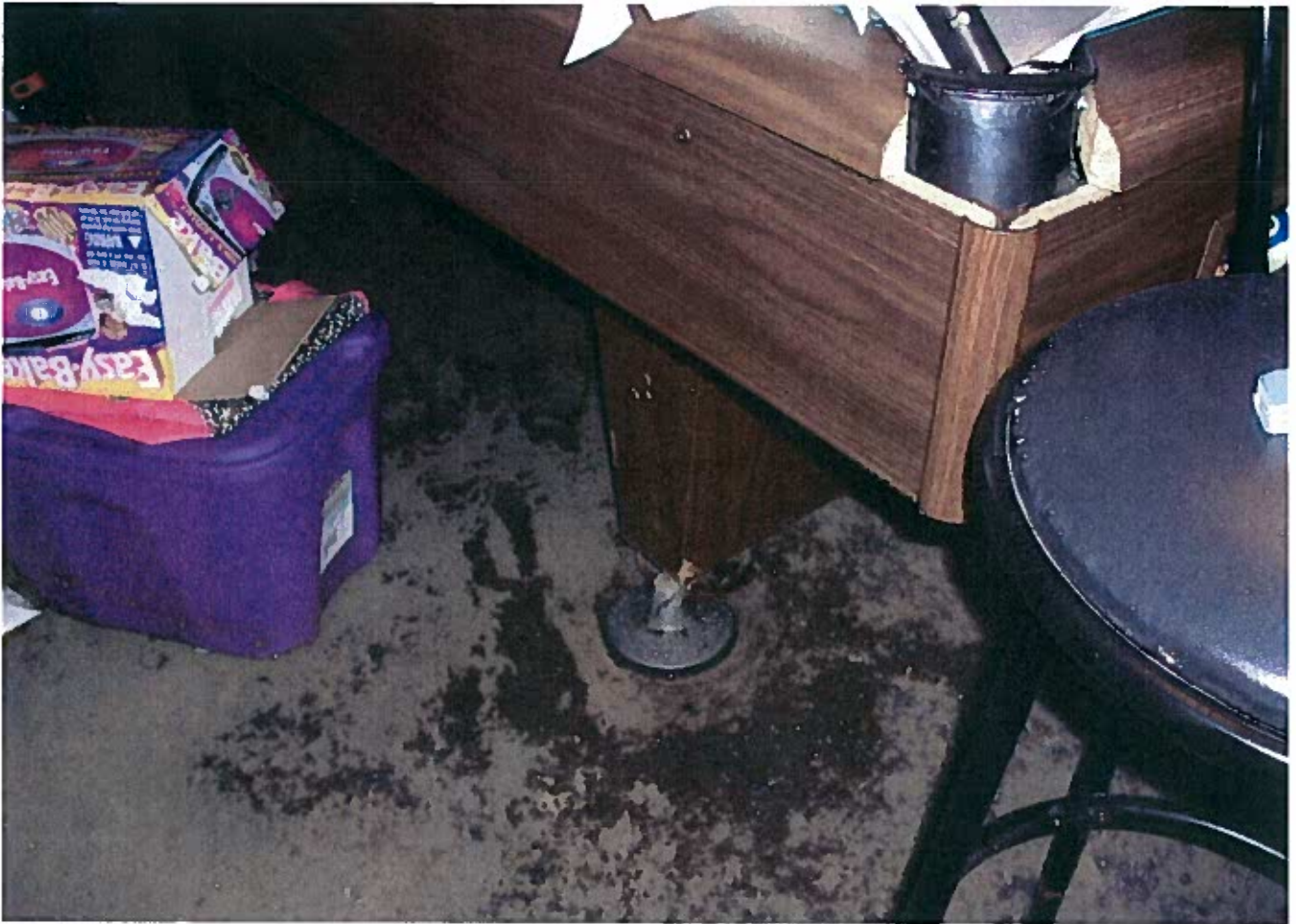




















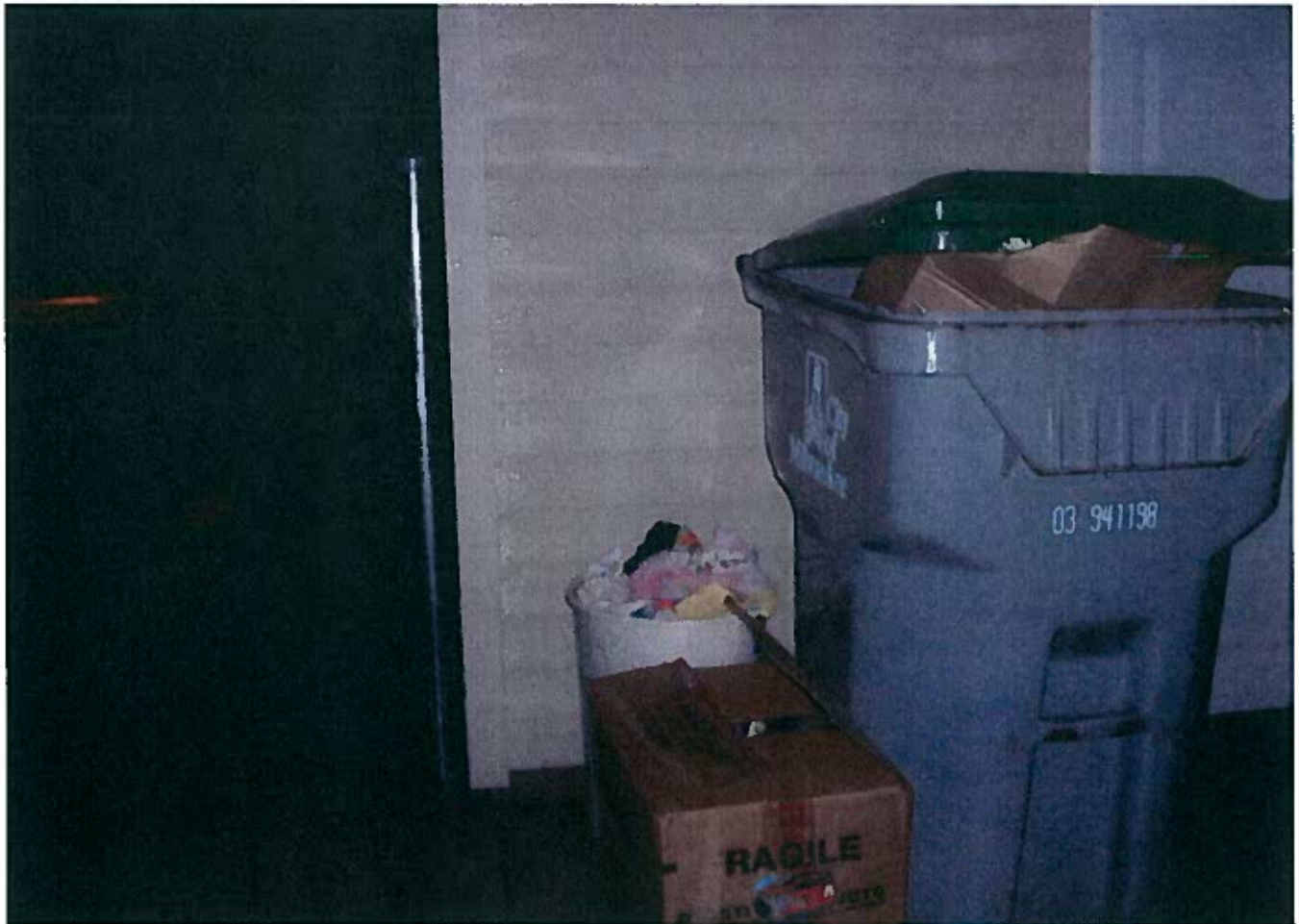




















## Legislation Details (With Text)

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**File #:** 090942      **Version:** 0  
**Type:** Resolution      **Status:** In Committee  
**File created:** 12/1/2009      **In control:** JUDICIARY & LEGISLATION COMMITTEE  
**On agenda:**      **Final action:**  
**Effective date:**  
**Title:** Resolution relating to the claim of Carolyn Bracken for property damage. (4th Aldermanic District)  
**Sponsors:** THE CHAIR  
**Indexes:** CLAIMS  
**Attachments:** City Attorney Letter.pdf, Claim, Hearing Notice List

Date	Ver.	Action By	Action	Result	Tally
12/1/2009	0	COMMON COUNCIL	ASSIGNED TO		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		

**Number**

090942

**Version**

ORIGINAL

**Reference**

**Sponsor**

THE CHAIR

**Title**

Resolution relating to the claim of Carolyn Bracken for property damage. (4th Aldermanic District)

**Requestor**

City Attorney

**Drafter**

JAS:ms

October 30, 2009

1029-2009-2753:151259



**GRANT F. LANGLEY**  
City Attorney

**RUDOLPH M. KONRAD**  
**LINDA ULISS BURKE**  
**VINCENT D. MOSCHELLA**  
Deputy City Attorneys



**THOMAS O. GARTNER**  
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**DANIELLE M. BERGNER**  
Assistant City Attorneys

October 30, 2009

To the Honorable Common Council  
Of the City of Milwaukee  
Room 205 – City Hall

Re: Resolution Relating to the Claim of Carolyn Bracken  
C.I. File No. 09-L-117

Dear Council Members:

We return the enclosed document which as been filed with the City Clerk and ask that it be introduced and referred to the Committee on Judiciary & Legislation with the following recommendation.

Claimant, Carolyn Bracken, 2417 West Galena Street, Milwaukee, WI 53205, alleges that on June 19, 2009, she sustained damages when a City sewer backed up into the basement of her residence. She claims damages in the amount of \$5,400.00. The Assessor's Office information notes that she is not the owner of record of this property.

Our investigation reveals that the Infrastructure Services Division (ISD) records indicate that they did not receive a complaint of backwater at the time. Their records also indicate that because of the large amount and strong intensity of the rain during the June 18-19, 2009 flood, the City experienced flows that exceeded the capacity of the sewer systems. Additionally, the ISD checked the City main sewer as a result to Ms. Bracken's claim and found it to be in proper working order. The City was not negligent in the matter. As such, the City would not be liable. Therefore, we recommend that this claim be denied.

Very truly yours,

**GRANT F. LANGLEY**  
City Attorney

**JAN A. SMOKOWICZ**  
Assistant City Attorney

JAS:ms  
Enclosure  
1029-2009-2753:151257

**OFFICE OF THE CITY ATTORNEY**

**HOUSING AUTHORITY OF THE CITY OF MILWAUKEE  
DAMAGE CLAIM  
HOUSING MANAGER'S INVESTIGATION FORM**

Complete the appropriate section(s) below. Record or Attach any significant comments or documents which would contribute to the systematic processing of this claim.

**A. SECTION TO BE COMPLETED BY HOUSING MANAGER:**

Claimant Last Name	First Name	Address	Home Phone	Work Phone
Bracken	Carolyn	2417 W. Galena	627-3758	—

Date & Time Reported to Office	Development	Development Manager
6/22/09 - 9AM	Cherry Ct	Gail L. Wood

Kind of Loss/Damage	Pictures Attached?	Work Orders Attached?
Sewer BACK UP	(YES) NO	(YES) NO
Person(s) Contacted	Attached Statements?	
MANAGER	(YES) NO	

Total Claim Amount	Date & Time of Damage
\$	

Was Claimant Injured?	YES	NO	Police Report Files?
		(NO)	YES (NO)
Name of Insurance Company	Date(s) of Investigation		
	6/22/09		
Estimated Damage	Proof of Purchase? YES (NO)		
\$	Damage Verified? YES (NO)		
	By Whom?		

Summarize Your Investigation and Determine Cause of Damage: (Attach additional pages if necessary to the back of this page.)

Resident called in to report sewer backup, work order written to check A/C, sump pump + furnace. New hot water heater installed on 6/22/09 - Emergency Restoration called for basement floor/walls. Claim # 09033 - No claim amount for damages. No receipts - Resident forwarded pictures

Housing Manager	Date
Gail L. Wood	7/20/09

**B. SECTION TO BE COMPLETED BY HOUSING OPERATIONS MANAGER:**

Was Report Complete?	Recommend Settlement?	Amount Recommended?
YES NO	YES NO	\$

If Claim is Covered by Insurance, Indicate Carrier Disposition:

Additional Comments:

RONALD O. LEE  
CITY OF MILWAUKEE  
2009 OCT 8 AM 11:33  
CITY OF MILWAUKEE  
2009 OCT 8 AM 11:33  
CITY OF MILWAUKEE  
2009 OCT -8 PM 2:34  
CITY OF MILWAUKEE  
RECEIVED

Housing Operations Manager	Date

**DAMAGE CLAIM  
HOUSING MANAGER'S INVESTIGATION FORM (Continued)**

**C. IF CLAIM EXCEEDS \$1,000-SECTION TO BE COMPLETED BY CITY ATTORNEY:**

Comments and Summation: (Attach Detailed Decision to Back of Form)

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\_\_\_\_\_  
City Attorney

\_\_\_\_\_  
Date

**D. SECTION TO BE COMPLETED BY DIRECTOR OF FINANCE:**

Comments and Recommendations:

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---

---

\_\_\_\_\_  
Director of Finance

\_\_\_\_\_  
Date

**E. SECTION TO BE COMPLETED BY APPEAL HEARING MEMBERS: (IF APPLICABLE)**

Members:

---

Recommendations:

APPROVAL \_\_\_\_\_ DENIAL \_\_\_\_\_ AMOUNT \$ \_\_\_\_\_

Comments:

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---

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\_\_\_\_\_  
Signed

\_\_\_\_\_  
Date

09:03:26

Work Order

WO# 121628 Status: Active

Tenant Name CAROLYN BRACKEN Phone #  
 Address 2417 W. GALENA STREET Tenant Phone # (414)610-4879  
 Apt #

Project # 693 Date Called 06/22/2009  
 Unit # 93048 Time Called 09:01  
 Sequence # 1 Estimated Completion Date 06/22/2009  
 Start Date 6/22/09 11  
 Start Time 1:00  
 Work Area Date Completed 6/22/09 11  
 Priority EMERGENCY Time Completed 2:00 ::  
 Source Tenant Enter Apartment Yes

HouseKeeping	Good	Fair	Poor			
Smoke Alarm Standard Check List	Is Applicable?	Yes	No			
Smoke Alarm Downstairs	Is Working?	Yes	No	Has Battery?	Yes	No
Smoke Alarm Upstairs	Is Working?	Yes	No	Has Battery?	Yes	No

Work Code Description	Done	Time	WK	Time	Charges	Labor Cost	Applied Labor Cost
WATER HEATER-ADJUST/REPAIR/RPL SIDORO MUNOZ	---	---	---	---	---	---	---
HEATING/VENT/AIR-COND./GENERAL SIDORO MUNOZ	---	---	---	---	---	---	---

Total Labor Cost :  
 Applied Total Labor Cost :

Notes  
 NO HOT WATER  
 CHECK FURNACE

The Work Described Above Has Been Satisfactorily Performed? Yes No  
 Tenant Sign-off: \_\_\_\_\_ Time: \_\_\_\_\_ Employee Sign-off: T. Munoz

Unit Notes

Tenant Notes

Water heater & Furnace need replacing  
 & basement needs restoration



# DIVA Plumbing Company

PO Box 522  
Brookfield, WI 53008

# Invoice

Date	Invoice #
7/19/2009	550

Bill To  
 Friends of Housing  
 PO Box 772  
 Milwaukee, WI 53201  
 Contract #08-067

NAME J. Daniels  
 Sign Off John Wood  
 Date: 7/20/09

Project
Cherry Court

*Daniels*

Due Date	Contract No.
7/19/2009	08-067

Work Order...	Date	Plumber	Address/Work Performed	Hours	Rate	Amount
121309	6/22/2009	DW	1835 N 25th Supply and install new water heater	4	105.00	420.00
121309			40 Gallon Power Vent Gas Water Heater, T & P Valve with drop pipe. Connections to existing water.		817.00	817.00
Pending	6/22/2009	CJ	2417 W Galena Supply and install new water heater	4	105.00	420.00
Pending			40 Gallon Power Vent Gas Water Heater, T & P Valve with drop pipe. Connections to existing water.		817.00	817.00
121146	6/24/2009	AH	1629 N 23rd Supply and install new water heater	4	70.00	280.00
121146			40 Gallon Power Vent Gas Water Heater, T & P Valve with drop pipe. Connections to existing water.		820.00	820.00

*Bracken*

*McKnights*

Total	\$3,574.00
Balance Due	\$3,574.00

Phone #	Fax #	E-mail
414-704-1199	262-784-1518 ...	plumberchick52@hotmail.com

HOUSING AUTHORITY OF THE CITY OF MILWAUKEE  
NO ICE OF DAMAGE / CLAIM - RESIDENT PERSONAL PROPERTY

Name of Claimant (Print or Type): Carolyn Bracken Development Manager: Gail Woods/Lakeshia  
 Address of Claimant: 2477 W. Galena Development Name: Cherry Court Gate w/c

Home Phone: 1027-3758 Work Phone: \_\_\_\_\_  
 Instructions: C Claimant is to complete all applicable items, sign certification below and return to your manager as soon as possible in order to expedite claim processing time.  
 Kind of Loss/Damage (Fire, Wind, Loss of Electricity): Flood Sewage damage 2 1/2 feet

Amount claimed: \$ 5,400  
 Date and Time Damage Occurred: 6/19/09 Date and Time Office Notified: 10/22/09  
 How Notified?: walked into the office

(Base ment)  
 Place of Occurrence: (Kitchen, Bedroom, etc) (Base ment)  
 Explain In Detail What Happened: Sewage (damaged Backup flood) furniture damaged, Speakers, Pictures, Radio, Computer, clothes, TV, CD's, movie's, chairs, tables

Is the Housing Authority Responsible? Yes [ ] No [  ]  
 If Yes, Explain Why: The city is at fault because it was a Sewage Back up From the city.

List of Damages: (Claim should be documented with appropriate estimates and/or description of loss or damaged item: )

EM	COST	DATE PURCHASED
	<u>\$ 5,400</u>	

Has a Police Report been filed? NO Date of Filing: \_\_\_\_\_  
 Attach Available receipts

Claimant: Did you have insurance to cover this damage? Yes [ ] No [  ]  
 If yes, please give name and address of company:

RECEIVED  
JUN 24 2009  
BY:

**NOTICE OF DAMAGE/CLAIM – RESIDENT (Continued)**

I submit this information in support of a Notice for Damages. I certify that the information submitted is true and accurate to the best of my knowledge that falsification of any item submitted may result in forfeiture of the entire claim.

6/19/2009  
Date

Carolyn Bracken  
Signature of Claimant

**DO NOT WRITE BELOW THIS LINE**  
**TO BE COMPLETED BY THE HOUSING OPERATIONS MANAGER**

Claim Received (date): \_\_\_\_\_ Claim Completed: Yes [ ] No [ ]

Claim Forwarded for Additional Action: Yes [ ] No [ ]

Review Completed (date): \_\_\_\_\_



Housing Authority Insurance Group

PO Box 159  
Cheshire, CT 06410  
Attn: Claims Department

203-272-8220 Ext. 288  
or 800-873-0242  
Fax: 203-250-8377

### Report of Claim / Incident

Note: Please return the top copy of this form to Housing Authority Insurance at the above address.  
Enclose any photos, correspondence or comments relative to this incident.

Date of this Report: 6/19/2009  
Housing Authority Name: Cherry Courts  
Contact Name: Lakeshia Gate wood  
Phone: (414) 344-6705 Fax: \_\_\_\_\_  
Person filing this notice: Carolyn Bracken Phone: 627-3758

Claim originates from	
<input type="checkbox"/> Family Low-rise	<input type="checkbox"/> Family High-rise
<input type="checkbox"/> Elderly Low-rise	<input type="checkbox"/> Elderly High-rise
<input type="checkbox"/> Section 8	<input checked="" type="checkbox"/> Other: <u>Hope IV Program</u>

Date of Accident/Incident	<u>6/19/2009</u>	Time (a.m. or p.m.)	_____
Location (be specific)	<u>2417 W. Galena (Basement) Sewage Backup</u>		
Claimant Name	<u>Carolyn Bracken</u>	Phone	_____
Street Address	<u>2417 W. Galena</u>		
City	<u>Milwaukee</u>	State	<u>WI</u>
DOB	<u>6/17/83</u>	SS#	<u>314-90-0854</u>
Occupation	_____		
Tenant? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Guardian:	_____	

Accident/Incident Description: Sewage backup/flood. Damage furnitz  
Every thing in the Basement.

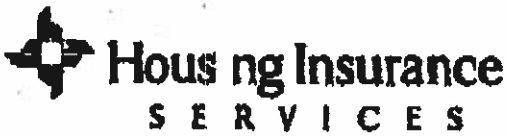
Describe injury alleged (including part of body): NONE

1. Is claimant seeking monetary damages from PHA?  Yes  No If yes, please explain \_\_\_\_\_
2. Is claimant represented by an attorney?  Yes  No If yes, who? \_\_\_\_\_

For Claimant's Property Damage	Items Damaged	Estimated Value	In your opinion, was the PHA directly responsible (negligent) for the loss or damage to property?
			<input type="checkbox"/> Yes <input type="checkbox"/> No Why? _____

Witness Name: Greg (Supervisor)  Employee  Tenant  Relative  Other \_\_\_\_\_  
 Address: Cherry Courts Phone: \_\_\_\_\_  
 Witness Name: \_\_\_\_\_  Employee  Tenant  Relative  Other \_\_\_\_\_  
 Address: \_\_\_\_\_





P.O. Box 189  
Cheshire, CT 06410  
Attn: Claims Department

203-272-8220 Ext. 218  
or 800-873-0242  
Fax: 203-250-8377

# Report of Property / Inland Marine Claim

Note: Please return the top copy of this form to Housing Insurance Services at the above address.  
Enclose any photos, correspondence or comments relative to this claim.

Date of this Report: 6/22/2009  
Housing Authority Name: Cherry Courts  
Contact Name (for Address): Gail Woods/Lakeshia Gate Phone: 344-6705  
Person filing this notice: Carolyn Bracken Phone: 627-3758

Project Name: \_\_\_\_\_  
HUD/State Number: \_\_\_\_\_ Policy Number (if known): \_\_\_\_\_  
Building Number and/or Address of Loss: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Date of Loss: \_\_\_\_\_ Time of Loss: \_\_\_\_\_

Type of Loss:  Fire  Wind  Vandalism  Other: every thing flood/sewage back up personal, Belonging Furniture  
Cause of Loss (if known):  Carelessness  Arson  Defective Equipment  Natural Disaster  Other: Water/Sewage

Description of Loss (including approximate number of units damaged): furniture, Radio, Speakers, Pictures  
Computer, CLOTHES, CD'S, MOVIES, TV (Television)  
Tables, Chairs, 3 pc table set, Bar stool + table

Estimate of damage: \$ 5,400 Reported to Police or Fire Department?  Yes  No  
Name of person/firm who estimated damage: WM Biz100  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Furniture \$800

Computer \$500

Radio + Speakers \$1,000

Pictures \$500 (price less memorys)

Television \$200

Clothes \$1,000

CD's + movies \$500

3 piece table \$300

Bar table + 4 stools \$300

Sony Receiver \$350

Equalizer \$200

Salon chair \$150

\$5,400

Carolyn Bracken

~~\* Inventory of tossed Furniture \*~~

2 Black couches (photos - priceless)

1 Salon Chair CD's + MOVIE'S

3 Black Metal Glass top tables

1 wood table stand w/ Glass top

7 all Black pillows

4 Decorative Black pillows

2 12" 3way Sony Speakers

1 Sony Speaker Receiver LBT-W5000

1 Apex TV

4 Bar Stools white tops

1 Yamaha AV Receiver Model # RX-V393

1 hp CPU (Computer tower)

1 phillips Computer monitor

1 optimus ten Band equalizer

1 Tall Metal stand table

1 hp Key Board

1 hp wireless mouse

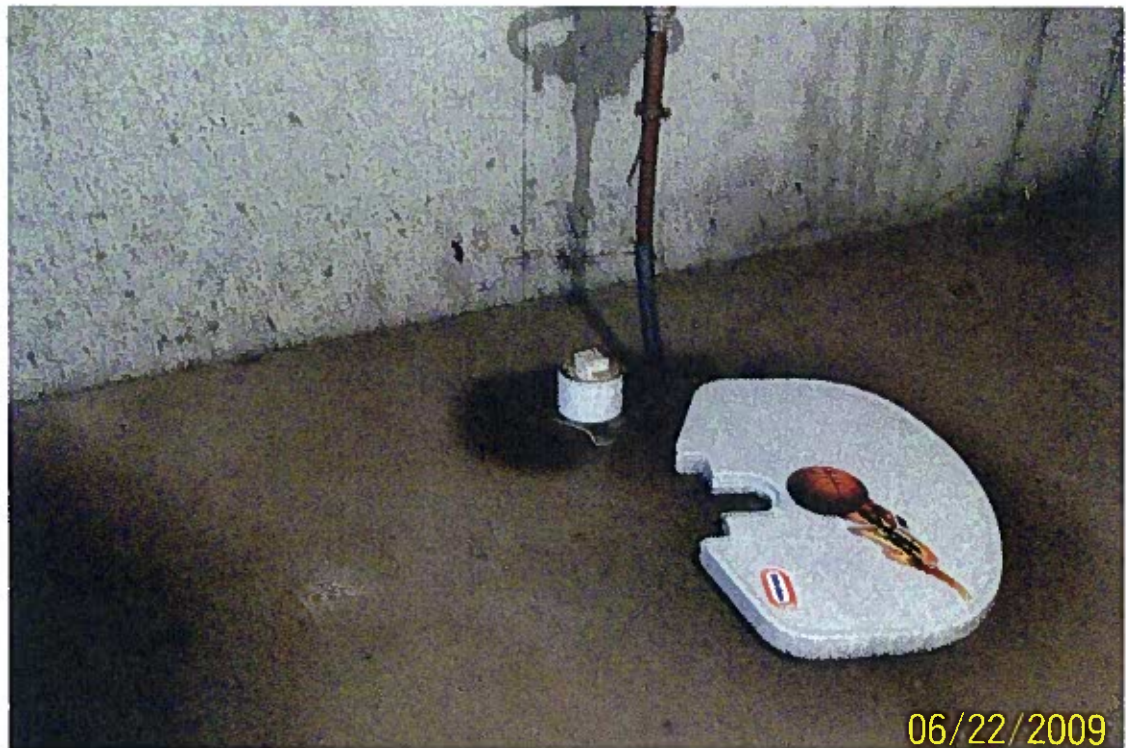
~~\* Wm Bislog \*~~



































## Legislation Details (With Text)

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**File #:** 090948      **Version:** 0

**Type:** Resolution      **Status:** In Committee

**File created:** 12/1/2009      **In control:** JUDICIARY & LEGISLATION COMMITTEE

**On agenda:**      **Final action:**

**Effective date:**

**Title:** Resolution relating to an appeal from Rosemary Smith for property damage. (11th Aldermanic District)

**Sponsors:** THE CHAIR

**Indexes:** CLAIMS APPEAL

**Attachments:** City Attorney Letter, Appeal, Hearing Notice List

Date	Ver.	Action By	Action	Result	Tally
12/1/2009	0	COMMON COUNCIL	ASSIGNED TO		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		

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**File #:** 090948      **Version:** 0

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Number  
090948  
Version  
ORIGINAL  
Reference

Sponsor  
THE CHAIR

Title  
Resolution relating to an appeal from Rosemary Smith for property damage. (11<sup>th</sup> Aldermanic District)

Drafter  
City Atty.  
rmo  
11/10/09

**GRANT F. LANGLEY**  
City Attorney

**RUDOLPH M. KONRAD**  
**LINDA ULISS BURKE**  
**VINCENT D. MOSCHELLA**  
Deputy City Attorneys



**THOMAS O. GARTNER**  
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**HEIDI E. GALVÁN**  
**JARELY M. RUIZ**  
**ROBIN A. PEDERSON**  
**DANIELLE M. BERGNER**  
Assistant City Attorneys

October 26, 2009

Rosemary Smith  
3417 South 24th Street  
Milwaukee, WI 53215

RE: Rosemary Smith  
C.I. File No.: 09-S-237

Dear Ms. Smith:


We have received your claim in the amount of \$1,000.00, relating to damages you allegedly sustained due to a sewer back-up at your home on June 18, 2009.

Our investigation reveals that the Infrastructure Services Division (ISD) records indicate that because of the large amount and strong intensity of rain during this time, the City experienced flows that exceeded the capacity of the sewer system. The ISD did receive a backwater complaint for this address on June 19, 2009, but the water had receded. They also checked the City main as a result of this claim, and found it to be in proper working order. Since the City was not negligent, it would not be liable. As such, we are denying your claim.

If you wish to appeal this decision, you may do so by sending a letter within 21 days of receipt of this letter to the Milwaukee City Clerk, 200 East Wells Street, Room 205, Milwaukee, Wisconsin 53202, requesting a hearing.

Very truly yours,

  
GRANT F. LANGLEY  
City Attorney

  
ROBERT OVERHOLT  
Investigator Adjuster

RMO:ms  
1029-2009-1843:151265

OFFICE OF THE CITY ATTORNEY

Milwaukee City Hall Suite 800 • 200 East Wells Street • Milwaukee, Wisconsin 53202-3551 • Telephone: 414.288.2601 • TDD: 414.288.2025 • Fax: 414.288.8550

# FAX Transmission

Number of pages including cover sheet 1

Attention: Phon

Company: ALBY CLARK

Phone: \_\_\_\_\_

Fax: 414-286-3456

Comments: \_\_\_\_\_

Date: 10-21-09

From: ROSEMARY SMITH

Company: \_\_\_\_\_

Phone: 414-643-0228



3555 South 27th Street  
Milwaukee, WI 53221  
Phone: 414.383.8777  
Fax: 414.383.8797 - 414.383.2727  
E-mail: impress0569@officemax.com

2009 NOV -6 PM 3:00  
OFFICE OF  
CITY ATTORNEY  
CITY OF MILWAUKEE  
RECEIVED

Rosemary Smith  
3417 S 245th

Milwaukee, WI 53215  
Account Number 09 5237

Grant F Langley

I have received your letter of denial of my  
claim on June 09-2009 about the damage  
of the water in my basement because the  
sewer system had up in my home about  
one foot of water deep in my basement  
and the damage it caused.



regret your decision, it I think your  
decision is unfair. How your staff made the  
decision that the water in my basement  
was't negligent because of paper water  
order. But I had damages about 500.00 <sup>in damage</sup>  
plus I clean up for two day to get the bed  
back in order. I hope you understand my claim

Rosemary Smith

Rose Mary Smith  
3417 S. 24th St  
Milwaukee, WI 53217  
Claim # 09-5237

I wrote you in June 19-2009  
about the water thru my basement  
became it rain that day and the  
sews back up in my basement.  
My BOB overhauled me to write  
him with a dollar amount be-  
cause I did it. So of all my things  
in the basement about  
one thousand dollar. I do not have  
no transaction of merchants so I have  
to name a dollar amount!

Rose Mary Smith

# FAX Transmission

Number of pages including cover sheet 1

Attention: Phon

Company: ALBY CLARK

Phone: \_\_\_\_\_

Fax: 414-286-3456

Comments: \_\_\_\_\_

Date: 10-21-09

From: ROSEMARY SMITH

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Phone: 414-643-0228



3555 South 27th Street  
 Milwaukee, WI 53221  
 Phone: 414.383.8777  
 Fax: 414.383.8797 - 414.383.2727  
 E-mail: impress0569@officemax.com

CITY OF MILWAUKEE  
 RECEIVED  
 2009 OCT 22 PM 2:40

OFFICE OF  
 CITY ATTORNEY

CITY OF MILWAUKEE  
 2009 OCT 22 PM 2:27  
 RONALD D. LEONARD  
 CITY CLERK

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. (1 g), (1 in), (1 p) 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.

2009 JAN 29 PM 5:14  
OFF MILWAUKEE  
D. LEONARD  
CITY CLERK

Rosemary Smith, 3417 S 24th St Milwaukee WI  
53215 phone after 12: A.M. 4146430228 on June 18-

2009 there was a rain storm in the city of Milwaukee, So I call Department of public work, the sewer department and told them I had water in my basement. Some man call me back after the message on the phone, and told me Milwaukee sewer, the drain was plug up and back up in my basement and in the street. The damage was done was my kitchen room table, buffet, my fans, my oil heater, my washer & dryer. Box of washer power, my wood basket to put my washer clothes in, my bath room rug, many rugs, and bath room tops for the toilet, some drapers for my bedrooms window, my W2 - humidifier and my humidifier, Sunbeam, my clothes Pockets you put on the top of a case to carry your clothes in my hot plant & TV; and a T.V. table in my living room. I have no price of my things or I shall say I have a receipt to did that I want keep my receipt when I put my things in the basement.

Rosemary Smith

RECEIVED  
MILWAUKEE  
JAN 29 3:13 PM  
CITY CLERK

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 on the reverse side 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.



OFFICE OF  
CITY ATTORNEY  
109 JUN 29 PM 3:43  
RECEIVED  
CITY OF MILWAUKEE





## Legislation Details (With Text)

---

**File #:** 091064      **Version:** 0  
**Type:** Resolution      **Status:** In Committee  
**File created:** 12/1/2009      **In control:** JUDICIARY & LEGISLATION COMMITTEE  
**On agenda:**      **Final action:**  
**Effective date:**

**Title:** Resolution relating to the claim of Leondis and Darlene Fuller for property damage. (15th Aldermanic District)

**Sponsors:** THE CHAIR

**Indexes:** CLAIMS

**Attachments:** City Attorney Letter.pdf, Claim, Hearing Notice List

Date	Ver.	Action By	Action	Result	Tally
12/1/2009	0	COMMON COUNCIL	ASSIGNED TO		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		

**Number**

091064

**Version**

ORIGINAL

**Reference**

**Sponsor**

THE CHAIR

**Title**

Resolution relating to the claim of Leondis and Darlene Fuller for property damage. (15th Aldermanic District)

**Requestor**

City Attorney

**Drafter**

JAS:ms

November 24, 2009

1029-2009-2743:151250



**GRANT F. LANGLEY**  
City Attorney

**RUDOLPH M. KONRAD**  
**LINDA ULISS BURKE**  
**VINCENT D. MOSCHELLA**  
Deputy City Attorneys



**THOMAS O. GARTNER**  
**BRUCE D. SCHRIMPF**  
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**THOMAS D. MILLER**  
**HEIDI E. GALVÁN**  
**JARELY M. RUIZ**  
**ROBIN A. PEDERSON**  
**DANIELLE M. BERGNER**  
Assistant City Attorneys

November 24, 2009

To the Honorable Common Council  
Of the City of Milwaukee  
Room 205 – City Hall

Re: Resolution Relating to the Claim of Leondis and Darlene Fuller  
C.I. File No. 09-L-115

Dear Council Members:

We return the enclosed document which has been filed with the City Clerk and ask that it be introduced and referred to the Committee on Judiciary & Legislation with the following recommendation.

Claimants, Leondis and Darlene Fuller, 2234 West Galena Street, Milwaukee, WI 53205, allege that on June 7, 2008 and June 18, 2009, they sustained damages when there were sewer back-ups at their home. They claim damages in the amount of \$30,700.00.

Our investigation reveals that this claim was filed on October 7, 2009. Wisconsin Statute § 893.80 (1)(a) requires that a claim must be filed within 120 days after the happening of the event giving rise to the claim. The portion of the claim dealing with the June 7, 2008 loss was not filed timely. The Infrastructure Services Division (ISD) records relative to the June 18, 2009 incident indicate that because of the large amount and strong intensity of rain during this time, the City experienced flows that exceeded the capacity of the sewer system. The ISD received a backwater complaint for this address on June 19, 2009. The investigator found the City sewer system main to be in proper working order on that date. City records reflect that the main was last cleaned in September, 2008.

Honorable Common Council  
November 24, 2009  
Page 2

There is no evidence, therefore, that the City was negligent. It would not, therefore, be liable and we recommend denial of the entire claim.

Very truly yours,

GRANT F. LANGLEY  
City Attorney

JAN A. SMOKOWICZ  
Assistant City Attorney

JAS:ms  
Enclosure

1029-2009-2743:151248

CITY OF MILWAUKEE  
RECEIVED

October 5, 2009

2009 OCT -8 PM 2:33

**Claim Against the City of Milwaukee**

OFFICE OF  
CITY ATTORNEY

On June 18, 2009 there was a sever rain storm in the City of Milwaukee. At 3:34a.m, claimant Leondis Fuller was awaken by the powerful rain. As he walked through his home where he and his wife Darlene resides he heard the sub pump going on in the lower level (basement). At that time he visually observed the water which was over 12" deep, covering at least 2 of the bottom steps. Realizing there was nothing he could do at the time, he went back and laid down in frustration, due to this being the second time in two years this has occurred. The next morning following the rain storm, Leondis went downstairs and noticed the water going down, but what was most disturbing was backed up raw sewage was left behind; it was horrible. There were clothes from the laundry room, shoes from the walk-in closet, as well as carpet, computer hard-drive, big screen television, leather furniture, the grandchildren's toys, other stored merchandise and potential mold surrounding the entire basement. All items listed were damaged and destroyed.

Darlene and Leondis reside at 2234 W. Galena St. Milwaukee, WI. 53205. Sewage back-up occurred on June 7, 2008 and June 18, 2009. Prior to these two years there hasn't been any problem. The statement of relief sought is in the form of money as well as verification from the City of Milwaukee that this problem has been repaired and resolved, as far as with the sewer system. An itemized statement of lost items as well as damages and repairs involve to residential dwellings, which is additional living space for our family. Money sought is \$30,000.00.

Email address Leondis Fuller: LFULLER1@wi.rr.com  
Email address Darlene Fuller: DSFULL3@wi.rr.com  
Telephone number: 414-933-0947

Claimant signature: *Leondis Fuller*  
Claimant signature: *Darlene Fuller*

CITY OF MILWAUKEE  
09 OCT - 7 AM 10:49  
RONALD D. LEONHARDT  
CITY CLERK

**June 18, 2009 Sewage Damage**

<b>Item</b>	<b>Date of Purchase</b>	<b>Price</b>
Big Screen TV (55PP9352)	11/29/2002	\$1955.00 + Tx
2 separate 4-piece Luggage Sets	2003	\$225.00 pr set
Leather Sectional Living Rm	09/04/2003	\$2399.85
Dell Desk Top Computer	12/2002	\$1400.00
Clothing/Shoes	02/2007-06/2009	\$1500.00
Pastor's Study Materials (Books)	2005-2009	\$455.00
Christmas Ornaments	2006-2008	\$300.00
Christmas Tree with Lights	11/2007	\$199.00
Carpet in Walk-In Closet	08/2008	\$55.00
New Home Interior Items	02/2008	\$79.00
Kids Toys	12/2008	\$350.00
<b>Total Approximately</b>		<b>\$9142.85</b>

FAX: 414-540-0608

**BOONE'S CONSTRUCTION - GENERAL CONTRACTORS**  
LICENSED - BONDED - INSURED  
7600 N. RANGE LINE RD, GLENDALE, WI 53209  
CELL: 414-738-3211

HOME: 414-540-0607

Proposal Submitted To:

Rev. Leonide Fuller

Date: May 27, 2009

Address:

Job Location: 2224 W. Galena, Milwaukee, WI 53205

Phone No: 414-303-1903

Customer Fax: 414-874-2826

Cell:

Job Number

We hereby submit specifications and estimates for:

Finish Basement Water Damaged Area 22ft x 35 ft = 770 sq.ft.

Demo all outer drywall 4ft above floor

Areas 770 sq ft (Kitchen, all closets, bathroom, and open areas)

Treat all the areas 4ft above the floor for water damage and mold

Replace all demo drywall with new

Tape, mud, sand and finish all new drywall.

**Kitchen**

Remove all base cabinets, countertops, sinks and fixtures

Treat open areas for water damage and mold

Reinstall base cabinets, countertops, sink and fixtures

\$15,600.00

Note: All water damaged materials will be replaced with new. Paint all new drywall back to its original color.

Total Labor & Materials:

\$15,600.00

This offer has been accepted by:

(Sign & Date) Owner:

Contractor:

# American

Date: 9/04/2002 Page 1  
 Sale Num: 09042155481  
 Doc Date: 09/04/2002 08:08pm

Bill to:  
 DARLENE SPREWER  
 2234 W GALENA ST  
 MILWAUKEE, WI 53205 MILWAUKEE

Ship to:  
 Same

Delivery Dates: ~~CALL AMTV~~

Cust Code: (SPRE223A) Tax Nr:

Home Ph#: 414-233-0947 Bus Nr: 414-303-1983 xCELL Slsp: JEK - JOHNNY K

Qty	SKU#	Vend Description	Model	Size	Finsh	St Loc	PDL	Promotion	Price	Extended
1	3320734EE	ALBA RECL SOFA-F:L14	730-01-LM-	L140-			J D		999.95	999.95

Special order item is not part of the 6 week Express program.  
 If an item is returned from your package purchase, the prices on the remaining items will be their individual selling prices.

1	982600009	LPS SOFA - LTHR PLU SOFA					J D		0.00	0.00
---	-----------	--------------------------	--	--	--	--	-----	--	------	------

Leather Plus Limited 7 year protection plan against accidental staining or damage. To obtain service or advice, contact the Stainsafe Company at 800-521-8555. Damage or Stains must be reported within 5 days of the incident.  
**COVERED:** Accidental Stains from household foods, beverages, human and pet bodily fluids, ball point pen ink, or damage due to cracking, peeling, rips, tears or burns.  
**NOT COVERED:** Anything not specifically mentioned as covered. Damage caused by animals (with the exception of bodily fluids) fading or discoloration, misuse or abuse, general soiling, chewing gum, accumulation or stains, buildup of perspiration and body oils, furniture in transit or storage.

1	333659906	ALBA FULL SLEEPER-F: 730-45-LM-	L140-				J D		999.95	999.95
---	-----------	---------------------------------	-------	--	--	--	-----	--	--------	--------

Special order item is not part of the 6 week Express program.  
 If an item is returned from your package purchase, the prices on the remaining items will be their individual selling prices.

1	982600009	LPS SOFA - LTHR PLU SOFA					J D		0.00	0.00
---	-----------	--------------------------	--	--	--	--	-----	--	------	------

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1	334808411	ALBA WEDGE-F:L140-58 730-35-LM-	L140-				J D		399.95	399.95
---	-----------	---------------------------------	-------	--	--	--	-----	--	--------	--------

Special order item is not part of the 6 week Express program.  
 If an item is returned from your package purchase, the prices on the remaining items will be their individual selling prices.

1	982600011	LPS LOVESEAT - LTHR LOVESEAT					J D		0.00	0.00
---	-----------	------------------------------	--	--	--	--	-----	--	------	------

Leather Plus Limited 7 year protection plan against accidental staining or damage. To obtain service or advice, contact the Stainsafe Company at 800-521-8555. Damage or Stains must be reported within 5 days of the incident.  
**COVERED:** Accidental Stains from household foods, beverages, human and pet bodily fluids, ball point pen ink, or damage due to cracking, peeling, rips, tears or burns.

\*\*\* Sale continued on Page 2 \*\*\*

American's Satisfaction Policy • American's 110% Price Guarantee • American's Performance Guarantee  
 See Back of Yellow Sales Receipt for American's Contract Promises To You, Restrictions and Limitations.



BAVBSR01

\*\*\* SEARS STATEMENT TRANSACTION \*\*\*

\*\*\* REFERENCE REPORT \*\*\*

REPORT DATE : 11/16/06

STATEMENT DATE: 20021214

PAGE : 1

ACCDUNT: 5121075017113981

LEONDIS FULLER

CUSTOMER ID : 69418544142

```

=====
ACCT TYPE: PRE STATUS: CVAVFU
NOW DUE :          0.00   SCHED          NEW BAL :          1,955.00
BAL LMT  :          1,955.00   PAYMT:          0.00   PRV BAL :          0.00
                                     CASH          BALANCE
CASH LMT :          196.00   BAL :          0.00   TRN AHT :          0.00
=====

```

Sale Date	Post Date	Transaction Description/ Reference Number	Amount
11/29	11/30	PRDTECTIDN AGREEMENT PTV 55PP9352 DELIVERY CHARGES PRDMOTIDNAL SALE 20021129001082*157 1610  0571931162ER	1,955.00

\*\*\*FINANCE CHARGE ON AVERAGE DAILY BALANCE DF: 0.00 0.00

```

CURRENT BALANCE :          1,955.00          DELAYED SALES :          0.00
NEW BALANCE      :          1,955.00
=====

```

*Big Screen Television*



**Additional Information for Claim # 09L115**

October 28, 2009

To: Robert Overholt  
Claim Adjuster

Re: Claim #09L115  
Sewage back-up Fuller's Home

Dear Robert Overholt,

I am writing this brief memo pursuant to our conversation regarding a missing item on the original claim. This item was an oversight due to my wife, Darlene nor myself, Leondis usage of our Treadmill. When an attempt to use it at a time that was convenient to us it did not work. We did have a maintenance repair agreement with Sears on the item and the technician saw that it was not repairable and provided us with a receipt of its value (\$700.00), as well as the cause of damage; which we knew was a result of the flooding sewage water. Receipt is enclosed.

Mr. Overholt as I also mentioned in our conversation, "This was the second time the sewage backed up in our home within the last 2 years causing foundation damage. There have been some apparent sewage repairs in our area due to a change in sewage needs. For many years there was a Sentry Food store on the corner of 20<sup>th</sup> and Walnut St., which extended to 22<sup>nd</sup> and Walnut/Galena St. The closed, vacant store was torn down in 2005 through 2007 and a plan to build residential home was made. The sewage system began receiving some sort of services during this time and our problems began. Hopefully an investigation in this matter will be made, because there was no previous sewage back up problem prior to this. Other residence have experienced back up problems as well and we all experience some lost and damages.

Respectfully,

*Rev. Leondis Fuller, MS*

Rev. Leondis Fuller, MS  
2234 W. Galena Street  
Milwaukee, WI 53205

(414) 933-0947



SEARS HOME SERVICES

State Reg #: Not Applicable

WESTERN GREAT LAKES  
4260M S. 76TH STREET  
GREENFIELD, WI 53220  
(800) 4MY-HOME

Sears #: 0008182 Oct 19, 2009

Technician ID: 0303426  
Service Order Number: 80858335

LEONNIS FULLER  
2234 W GALENA ST # NOEN  
MILWAUKEE, WI 53205  
(414) 933-0947

MOUSE: TREADMILL POWER 1YR  
Brand Name: PROFORM  
Model Number: 831293060  
Serial Number: R62131629  
Service Requested:  
BELT WILL NOT MOVE WHEN SPEED IS DEPRESS

Technician Comments:  
Other: unit damaged by flooding in  
basement, not repairable total loss  
valued at \$700

Labor Performed - Protection Agreement:  
Special \$ 99.00  
Total Labor \$ 99.00

This Repair is valued at: \$ 99.00  
This Service Performed at No Charge

Customer Approval:

We care how well we did.  
Your feedback is appreciated at:  
[www.searshomeservices.com/feedback](http://www.searshomeservices.com/feedback)

Thank you for calling  
SEARS HOME SERVICES

Warranty, Claims/Part History Statement  
District #: 0008182 Tech #: 0003426  
SO #: 80858335 Call Code: 20  
Arrv: 12:51 Depart: 13:14  
Model #: 831293060  
Serial #: R62131629  
99999Y SP Special \$ 99.00





## Legislation Details (With Text)

**File #:** 090114      **Version:** 0  
**Type:** Resolution      **Status:** In Committee  
**File created:** 5/27/2009      **In control:** JUDICIARY & LEGISLATION COMMITTEE  
**On agenda:**      **Final action:**  
**Effective date:**

**Title:** Resolution relating to an appeal from Ethel Massey-Tate for property damage. (15th Aldermanic District)

**Sponsors:** THE CHAIR

**Indexes:** CLAIMS APPEAL

**Attachments:** City Attorney Letter, Appeal, Hearing Notice List

Date	Ver.	Action By	Action	Result	Tally
5/27/2009	0	COMMON COUNCIL	ASSIGNED TO		
6/2/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
6/2/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
6/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HELD TO CALL OF THE CHAIR	Pass	5:0
6/23/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
6/23/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		
6/29/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HELD TO CALL OF THE CHAIR	Pass	5:0
12/8/2009	0	JUDICIARY & LEGISLATION COMMITTEE	HEARING NOTICES SENT		

---

**File #:** 090114      **Version:** 0

---

**Number**

090114

**Version**

ORIGINAL

**Reference**

**Sponsor**

THE CHAIR

**Title**

Resolution relating to an appeal from Ethel Massey-Tate for property damage. (15<sup>th</sup> Aldermanic District)

**Drafter**

City Atty.

SMC

5/20/09

**GRANT F. LANGLEY**  
City Attorney

**RUDOLPH M. KONRAD**  
**LINDA ULISS BURKE**  
**VINCENT D. MOSCHELLA**  
Deputy City Attorneys



**THOMAS O. GARTNER**  
**BRUCE D. SCHRIMPF**  
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**HEIDI E. GALVÁN**  
**JARELY M. RUIZ**  
**ROBIN A. PEDERSON**  
**DANIELLE M. BERGNER**  
Assistant City Attorneys

April 24, 2009

Ethel Massey-Tate  
2135 North 33rd Street  
Milwaukee, WI 53208-1427

RE: Ethel Massey-Tate  
C.I. File No: 09-S-36

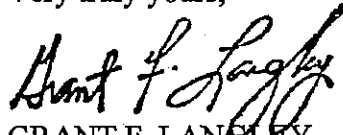
Dear Ms. Massey-Tate:

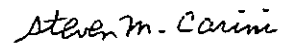
We have received your claim in the amount of \$4,436.10, relating to damage allegedly sustained to your vehicle on January 10, 2009 when it collided with a pothole while you were traveling northbound on 33<sup>rd</sup> Street just past North Avenue.

Our investigation reveals that the Infrastructure Services Division and the Sanitation Division records indicate that prior to January 10, 2009 the City had no notice of this hazard in the roadway and because of this lack of notice the City would not be liable. Therefore, we are denying your claim.

If you wish to appeal this decision, you may do so by sending a letter within 21 days of receipt of this letter to the Milwaukee City Clerk, 200 East Wells Street, Room 205, Milwaukee, Wisconsin 53202, requesting a hearing.

Very truly yours,

  
GRANT F. LANGLEY  
City Attorney

  
STEVEN M. CARINI  
Investigator Adjuster

SMC:beg  
1029-2009-266:145264

OFFICE OF THE CITY ATTORNEY

May 18, 2009

Milwaukee City Clerk  
200 East Wells Street  
Room 205  
Milwaukee, WI 53202

RE: Ethel Massey-Tate  
C. I. File No: 09-S-36  
Request for an Appeal

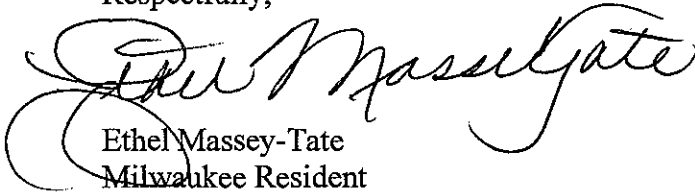
To Whom It May Concern:

This letter is in response to your letter dated April 24, 2009. I am respectfully requesting an appeal for damages to my vehicle that happened on January 10, 2009 on 33<sup>rd</sup> Street just past North Avenue in the amount of \$4,436.10 .

Please respond with a date and time and I will be there.

Thank you in advance for consider this matter,

Respectfully,



Ethel Massey-Tate  
Milwaukee Resident

CITY OF MILWAUKEE  
RECEIVED  
2009 MAY 18 PM 3:57  
CITY ATTORNEY

CITY OF MILWAUKEE  
2009 MAY 18 PM 3:24  
RONALD D. LEONHART  
CITY CLERK

January 22, 2009

Ethel Massey-Tate  
2135 North 33<sup>rd</sup> St  
Milwaukee, WI 53208-1427  
414-899-8156/414-444-1600

2009 JAN 23 PM 4: 06  
RONALD D. LEONHARD  
CITY CLERK  
CITY OF MILWAUKEE

To Whom It May Concern:

My name is Ethel Massey-Tate. I am writing this letter concerning a very serious matter between myself and the City of Milwaukee because I have been financially injured because I have lost the use of my vehicle due to an unsafe street.

I was driving North on 33<sup>rd</sup> St and had just crossed North Avenue and experienced a big bump. Myself and my husband stopped and looked to see if there was any real damage but it was 6:30 P.M. on January 10, 2009 and too dark to see clearly a problem. There is a hole about 4-5 feet across and about 3-4 feet wide on the corner of 33<sup>rd</sup> between North and Meinecke. The hole is to the right of the Boys' and Girls' Club building on 33<sup>rd</sup> Street.

I proceeded on and I remembered that I had to go to Walgreen's on 27<sup>th</sup> and North on my way back so we went back to go to Walgreens. At that time I told my husband that since there was some lighting on the parking lot to see if he could notice anything wrong. Him not being a mechanic looked around the outer view of the car and did not notice any damage.

We went home and waited about 20 minutes for a car to move so that we could park. A car behind us finally moved so we took a spot a couple of houses up the street.

The next day we had dressed for church and my husband was starting the car to warm it up and I was standing in the living room door looking out and wondering why it was taking so long and why the car was moving so slowly. He got out of the car and said that the car had a problem. He walked back to the parking space and noticed red fluids on the ground. I also noticed the fluids and notice that the spot we sat waiting for a park had lots of red fluids as well.

I told my husband that our transmission had been damaged and we would need to call someone to look at it and we left the car parked and called a friend later that evening to look at the car. We thought it may just be the transmission pan. Our friend stated that there is a crack in the cover of the transmission and more serious than a pan.

We start to check to see how much it would cost to replace the transmission and the prices are for above what we could afford and I call to get procedural information from

2009 JAN 26 PM 4: 12  
OFFICE OF  
CITY ATTORNEY  
CITY OF MILWAUKEE  
RECEIVED

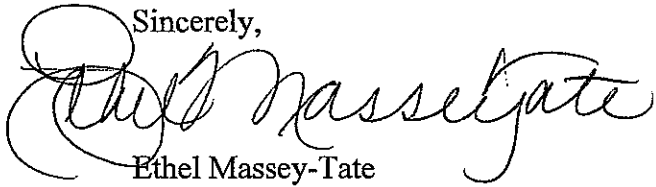
my alderman's office and was mailed out information of how to file this claim with the city.

This was our only working vehicle and it has cost even more expense paying to use other people vehicles and has effective our lives to the point we have problems keeping appointments and scheduled events.

I have enclosed two estimates as required. I have been told that this transmission is expensive and I can't afford to pay for it myself, being unemployed at this time.

Please consider this claim.

Sincerely,

A handwritten signature in cursive script that reads "Ethel Massey-Tate". The signature is written in black ink and is positioned to the right of the word "Sincerely,".

Ethel Massey-Tate





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- Suggested Retail Value
- Photo Gallery**
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Back Next

Exterior



Interior



Colors may not be available for all trims.

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Select Make...

Select Model...

Or Search by Category

Or Change ZIP Code

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6.34% APR

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carfax.com


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### NEXT STEPS:


- Search Local Listings
- Sell Your Mercury Villager

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
Mercury  
Villager

3b Miles or less

ZIP Code 53288

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Or Change ZIP Code

**BLUE BOOK® SUGGESTED RETAIL VALUE** ← HUNDREDS OTHER



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**Condition** EXCELLENT BEST **Value**  
**Excellent** **\$6,900**

Suggested Retail Value Assumes Excellent Condition...  
[More](#)

**Estimated Payments**  
**\$135 /mo @ 5.54% APR**  
Check for Details

Get a Pre-Ormed Loan from 6.34% APR

Get Your Credit Score Now

Get a Free Insurance Quote

**NEXT STEP:** [SEARCH LOCAL LISTINGS](#)

Free CARFAX Record Check

Powered by 

VIN:

No VIN? No Problem!

Average Consumer Rating (81 Reviews)

[Read Reviews](#)

☆☆☆☆ 4.6 out of 5

[Review this Vehicle](#)

**Vehicle Highlights**

Mileage: 105,000  
 Engine: V6 3.3 Liter  
 Transmission: Automatic  
 Drivetrain: FWD

**Selected Equipment**

**Change Equipment**

**Standard**

7 Passenger  
 Air Conditioning  
 Power Steering  
 Power Windows

Power Door Locks  
 Tilt Wheel  
 Cruise Control  
 AM/FM Stereo

Cassette  
 Dual Front Air Bags  
 Roof Rack  
 Alloy Wheels

**Optional**

Rear Air  
 Multi Compact Disc

Premium Sound  
 Privacy Glass

**Blue Book Suggested Retail Value**

The Kelley Blue Book Suggested Retail Value is representative of dealers' asking prices and is the starting point for negotiation between a consumer and a dealer. This Suggested Retail Value assumes that the vehicle has been fully reconditioned and has a clean title history. This value also takes into account the dealers' profit, costs for advertising, sales commissions and other costs of doing business. The final sale price will likely be less depending on the vehicle's actual condition, popularity, type of warranty offered and local market conditions.

**Vehicle Condition Ratings**

[Check Vehicle Title History](#)

**Excellent**  
 **\$6,900**

GORDIE BOUCHER LINCOLN MERCURY INC  
3161 SOUTH 108TH STREET  
WEST ALLIS, WI 53227  
PHONE: 414/327-6000  
LICENSE#: ASA#:

CD LOG NO 10572-1 DATE 01/19/09

SHOP: BOUCHER COLLISION CENTER INSP DATE: 01/19/09  
ADDRESS: 3161 S 108TH ST CONTACT: WALLY ZIESEMER  
CITY STATE: WEST ALLIS, WI PHONE 1: (414) 546-8385  
ZIP: 53227- PHONE 2: (414) 546-8385  
FAX: (414) 546-5825  
EMAIL: BOUCHER.COLLISION@GORDIE.COM

OWNER: MASSEY-TATE, ETHEL HOME PHONE: (414) 899-8156  
ADDRESS: 2135 N 33RD STREET  
CITY STATE: MILWAUKEE, WI  
ZIP: 53208

POINT OF IMPACT: 0 TYPE OF LOSS: /UNK

LIC#: STATE: VIN: INACCESSIBLEVIN  
BODY COLOR: MILEAGE:  
CONDITION: ACCTNG CTL#:

DRIVEABLE: NO VEH. INSP#:

*=USER-ENTERED VALUE	E=REPLACE OEM	NG=REPLACE NAGS
EC=REPLACE ECONOMY	UE=REPLACE OE SURPLUS	UC=RECONDITIONED PRT
UM=REMAN/REBUILT PRT	EU=REPLACE SALVAGE	EP=REPLACE PXN
OE=REPLACE PXN OE SRPLS	PC=PXN RECONDITIONED	PM=PXN REMAN/REBUILT
TE=PARTL REPL PRICE	ET=PARTL REPL LABOR	IT=PARTIAL REPAIR
I=REPAIR	L=REFINISH	BR=BLEND REFINISH
TT=TWO-TONE	CG=CHIPGUARD	SB=SUBLET
N=ADDITIONAL LABOR	RI=R&I ASSEMBLY	P=CHECK
AA=APPEAR ALLOWANCE	RP=RELATED PRIOR	UP=UNRELATED PRIOR

PRELIMINARY ESTIMATE -BASED ON VISIBLE DAMAGE ONLY  
PART PRICES ARE SUBJECT TO INVOICE  
DAMAGE DUE TO HITTING POT HOLE

1999 MERCURY VILLAGER STD 4DOOR PASSENGER VAN 6CYL GASOLINE 3.3  
CODE: R6412A/A OPTNS A/24DG

OPTIONS:  
TWO-STAGE - EXTERIOR SURFACES TWO-STAGE - INTERIOR SURFACES  
ELEC REMOTE CONTROL MIRRORS LUGGAGE RACK

OP	GDE	MC	DESCRIPTION	MFG. PART NO.	PRICE	AJ% B%	HOURS	R
E			TRANSMISSION ASSEMBLY INCLUDES FLUSH LINES AND INSTALLATION	NEW PART	3,530.66*		6.0	*2*

E TRANS FLUID NEW PART 10.50\* INC\*2\*  
TOP OFF FLUID-UP TO THREE QUARTS  
2 ITEMS

FINAL CALCULATIONS & ENTRIES

GROSS PARTS 3,541.16  
PARTS & MATERIAL TOTAL 3,541.16  
TAX ON PARTS & MATERIAL @ 5.600% 198.30

LABOR	RATE	REPLACE HRS	REPAIR HRS
1-SHEET METAL	52.00		
2-MECH/ELEC	109.95	6.0	659.70
3-FRAME	52.00		
4-REFINISH	52.00		
5-PAINT MATERIAL	32.00		
LABOR TOTAL			659.70
TAX ON LABOR @			5.600% 36.94
SUBLET REPAIRS			
TOWING			
STORAGE			

GROSS TOTAL 4,436.10

NET TOTAL 4,436.10

SHOPLINK U1996 ES CD LOG 10572-1 DATE 01/19/09 01:23:34PM R6.37 CD 12/08  
EDU: 0115 HOST LOG  
(C) 1998 - 2008 AUDATEX NORTH AMERICA, INC.

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

ServicePricing

Selection Criterion:

Make: Mercury

Model: Villager

Year: 1999

Recommended Work Summary

Line	OpCode	Operation Text	Service Operation	Total
A ( new )	AT90	Transmission, Automatic (Factory) - Remove and Install	4F20E	\$559.26
<b>Total:</b>				<b>\$559.26</b>

Trans cooler Fluid  
 misc.  
 Alignment  
 P&B

136.50

100.00

89.95

370.00

4585.70

Shop  
Supplies

20.00

4605.70

+ TAX

