Matthew Repinski 4228 W Parkland Ave Brown Deer, WI 53209

RECEIVED

Date: February 21, 2013

To: City of Milwaukee – Office of the City Attorney

FEB 25 2013

200 E Wells Street - Milwaukee City Hall Suite 800

OFFICE OF CITY ATTORNEY

Milwaukee, WI 53202-3551

Dear Mr. Langley

After reviewing the incident that occurred involving the bullet hole in my wife's van I would like to appeal the decision that the city was not negligent in this matter. I believe I misread the police damage report initially and had the date as 8/14/12. I reviewed my wife's calendar and phoned the police department to verify the correct date and have determined the incident in question happened on 8/13/12 rather than 8/14/12. I also initialed the police report after changing it slightly, because the officer writing the report had the incorrect door identified on the damage report. I apologize for having the incorrect date on the initial request and for the time taken in pursuing the incorrect date. Please feel free to contact me at any time with questions.

This is in reference to C.I.File No. 12-S-256

Sincerely,

Matthew Repinski

414-534-6667 cell

BITY OF MILWAUKEE
2013 FEB 21 PM 1: 03
CITY CLERK'S OFFICE

Statement Date: 12/12/2012

Matthew Repinski 4228 W Parkland Ave Brown Deer, WI 532090 414-354-6619 Home

4145346667 Cell

STATEMENT OF ACCOUNT Office of the City Clerk 200 E Wells St Room 205 Milwaukee, WI 53202-3567

		Balance brought forward	
8/14/12	Repair of bullet hole in Personal Vehicle	see estimates	
- <u>, - ·,</u>			
	While treating a home health patient, Jill		
	Repinski's vehicle was hit by a bullet from a		
	Milwaukee Police Officer firing his weapon at a	1	
	dog that was threatening the neighborhood.	!	
	dog that was threatening the neighborhood.		
	Attached are estimates for repair and a police		
	Attached are estimates for repair and a police	`	
	report on the incident.		
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AUTO COLLISION SPECIALISTS 8280 NORTH TEUTONIA AVENUE BROWN DEER, WI 53209 OFFICE:(414) 355-1900 FAX:(414) 355-1500

*** PRELIMINARY ESTIMATE ***

12/12/2012 02:53 PM

Owner

Owner: MATT REPINSKI
Address: 4228 W PARKLAND AVE
City State Zip: Brown Deer, WI 53209

Cell: (414)534-6667

FAX:

Inspection

Inspection Date: 12/12/2012 02:52 PM

Inspection Location: AUTO COLLISION SPECIALISTS

Address: 8280 N TEUTONIA AVENUE

City State Zip: Brown Deer, WI 53209-1502

Email: autocollision@wi.rr.com

Primary Impact: Right Side

Company: AUTO COLLISION SPECIALISTS

Contact: BOB RASMUSSEN

Address: 8280 N TEUTONIA AVENUE

City State Zip: Brown Deer, WI 53209
Email: autocollision@wi.rr.com

Inspection Type:

Contact: BOB RASMUSSEN Work/Day: (414)355-1900x FAX: (414)355-1500x

Work/Day:

Secondary Impact:

Appraiser License #:

Work/Day: (414)355-1900

FAX:

Repairer

Repairer: AUTO COLLISION SPECIALISTS

Address: 8280 N TEUTONIA AVENUE

City State Zip: Brown Deer, WI 53209-1502

Email: autocollision@wi.rr.com

Contact: BOB RASMUSSEN Work/Day: (414)355-1900

FAX: (414)355-1500

Work/Day:

Vehicle

2003 Honda Odyssey EX-L DVD 4 DR Passenger Van

6cyl Gasoline 3.5 5 Speed Automatic

Lic.Plate: 660-FUE

Lic Expire: Prod Date:

Veh Insp# : Condition:

Ext. Refinish: Two-Stage

Lic State: WI

VIN: 5FNRL18033B143796

Mileage: 125,123 Mileage Type: Actual Code: H6112B

Int. Refinish: Two-Stage

Options

7 Passenger Seating Aluminum/Alloy Wheels Captain Chairs (4) Cruise Control

Dual Power Sliding Doors

AM/FM CD Player Anti-Lock Brakes Center Console Dual Air Conditioning Garage Door Opener

Alarm System

Automatic Dimming Mirror Climate Control For A/C

Dual Airbags Heated Front Seats Damages

Intermittent Wipers
Lighted Entry System
Overhead Console
Power Door Locks
Power Steering
Rear Entertainment Systm
Rear Window Wiper/Washer
Strg Wheel Radio Control
Tinted Glass
Keyless Entry System
Overhead Console
Power Drivers Seat
Power Windows
Rear Spoiler
Side Airbags
Traction Control System

Leather Seats
Power Brakes
Power Mirrors
Privacy Glass
Rear Window Defroster
Sliding Driver Side Door

Tilt Steering Wheel

Line Op	Guide	MC	Description		MFR.Par	No.	Price	ADJ%	В%	Hours	R
1 BR	208	13	Door Shell,Fro	nt RT	0.6 Tv	end wo-stage setuj	p			2.1	RF
2 RI	238		Mldg,Front Doo	or Balt RT	R & I Ass	wo-stage				0.3	SM
3 RI	260		Mldg,Front Do		R & I Ass					0.3	SM
4 RI	230		Mirror, Outer R		R & I Ass					0.3	SM
5 RI	228		Handle, Front D		R&IAss	•				0.7	SM
	288		Door Shell,Slid		Repair	Cilibiy				3.5*	SM
6 I 7 L	288		Door Shell,Slid		Refinish 1.8 S					2.2	RF
						wo-stage					
8 RI	336		Mldg,Rear Doo		R & I Ass					0.3	SM
9 RI	306		Handle,Sliding		R & I Ass	embly				1.3	SM
10 L	M14		Corrosion Prot		Refinish					0.3*	RF
11 SB	M60		Hazardous Wa	ste Removal	Sublet Re	ераіг	\$4.00*				SM
12 N 12 I I	tems		RETAPE MOU	ILDINGS	Additiona	l Labor				0.5*	SM
			MC I	Message	·						
			13 I	-	6 HOURS F	IRST PANEL	TWO-STAGE ALL	OWANCE			
Estimate To	otal & Er	ntries	13 I	-	6 HOURS F	IRST PANEL		OWANCE	11 12 11		
aint Materia arts & Mater	ıls rial Tota	al	13 I	-		IRST PANEL	TWO-STAGE ALL \$156.40	OWANCE		6.40 8.76	
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MILWAUKEE AUTO BODY 2

Workfile ID: Federal ID:

4fd52d93 39-1142526

Resale Number: 004-0000155901-03

www.milwaukeeautobody2.com 3435 W. GREEN TREE RD, MILWAUKEE, WI 53209

> Phone: (414) 540-2396 FAX: (414) 540-2398

Preliminary Estimate

Customer: Repinski, Matt

Job Number:

Written By: Ryan Ringwelski

Insured:

Repinski, Matt

Policy #: Date of Loss: Claim #:

Days to Repair: 0

Type of Loss: Point of Impact:

Owner:

Repinski, Matt (414) 534-6667 Cell **Inspection Location:**

MILWAUKEE AUTO BODY 2 3435 W. GREEN TREE RD MILWAUKEE, WI 53209

Repair Facility

(414) 540-2396 Business

Insurance Company:

VEHICLE

Year: Make:

Model:

2003

HOND

ODYSSEY EXL

TRANSMISSION

Automatic Transmission

Color: Int:

Body Style: Engine:

Condition:

Production Date:

4D VAN 6-3.5L-FI

License: State:

VIN:

Job #:

Mileage In:

Mileage Out: Vehicle Out:

Overdrive

POWER

Power Steering

Power Brakes

Power Locks

Power Mirrors

Dual Mirrors

Privacy Glass

DECOR

Power Windows

Power Driver Seat

Body Side Moldings

CONVENIENCE

Air Conditioning Rear Defogger

Tilt Wheel

Cruise Control

Intermittent Wipers Keyless Entry

Alarm

Dual Air Condition

Dual Power Sliding Doors Rear Window Wiper

Entertainment Center Steering Wheel Controls

RADIO

AM Radio

FM Radio Stereo Search/Seek

CD Player SAFETY

Anti-Lock Brakes (4)

Driver Air Bag

Passenger Air Bag

Front Side Impact Air Bags 4 Wheel Disc Brakes

5FNRL18033B143796

Traction Control

ROOF

Luggage/Roof Rack

SEATS

Leather Seats **Heated Seats**

Recline/Lounge Seats

3rd Row Seat Captain Chairs (4)

Retractable Seats

WHEELS

Aluminum/Alloy Wheels

PAINT

Clear Coat Paint

OTHER Rear Spoiler

Preliminary Estimate

Customer: Repinski, Matt

Job Number:

Vehicle: 2003 HOND ODYSSEY EXL 4D VAN 6-3.5L-FI

Line	0	per	Description	Part Number	Qty	Extended Price \$	Labor	Paint
1	SIDE LOADING D	000	R					
2	* 1	₹pr	RT Door shell				<u>3.0</u>	2.0
3			Add for Clear Coat					0.8
4	#		inner jamb		1			0.3
5	FRONT DOOR							
6	В	Ind	RT Outer panel					1.0
7	#		cover car exterior		1	5.00		0.3
				SUBTOTALS		5.00	3.0	4.4

ESTIMATE TOTALS				
Category	Basis		Rate	Cost \$
Parts				5.00
Body Labor	3.0 hrs	@	\$ 54.00 /hr	162.00
Paint Labor	4.4 hrs	@	\$ 54.00 /hr	237,60
Paint Supplies	4.4 hrs	@	\$ 34.00 /hr	149.60
Subtotal				554.20
Sales Tax	\$ 554.20	@	5.6000 %	31.04
Grand Total				585.24
Deductible				0.00
CUSTOMER PAY				0.00
INSURANCE PAY				585.24

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.

Preliminary Estimate

Customer: Repinski, Matt

Job Number:

Vehicle: 2003 HOND ODYSSEY EXL 4D VAN 6-3,5L-FI

Estimate based on MOTOR CRASH ESTIMATING GUIDE. Unless otherwise noted all items are derived from the Guide AEG4427, CCC Data Date 12/10/2012, 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. The symbol (<>) indicates the refinish operation WILL NOT be performed as a separate procedure from the other panels in the estimate. Non-Original Equipment Manufacturer aftermarket parts are described as AM. Used parts are described as LKQ, 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 2012 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 CCC ONE estimator has a complete list of applicable vehicles. Parts numbers and prices should be confirmed with the local dealership.

The following is a list of additional abbreviations or symbols that may be used to describe work to be done or parts to be repaired or replaced:

SYMBOLS FOLLOWING PART PRICE:

m=MOTOR Mechanical component. s=MOTOR Structural component. T=Miscellaneous Taxed charge category. X=Miscellaneous Non-Taxed charge category.

SYMBOLS FOLLOWING LABOR:

D=Diagnostic labor category. E=Electrical labor category. F=Frame labor category. G=Glass labor category. M=Mechanical labor category. S=Structural labor category. (numbers) 1 through 4=User Defined Labor Categories.

OTHER SYMBOLS AND ABBREVIATIONS:

Adj.=Adjacent. Algn.=Align. ALU=Aluminum. A/M=Aftermarket part. Blnd=Blend. BOR=Boron steel. CAPA=Certified Automotive Parts Association. D&R=Disconnect and Reconnect. HSS=High Strength Steel. HYD=Hydroformed Steel. Incl.=Included. LKQ=Like Kind and Quality. LT=Left. MAG=Magnesium. Non-Adj.=Non Adjacent. NSF=NSF International Certified Part. O/H=Overhaul. Qty=Quantity. Refn=Refinish. Repl=Replace. R&I=Remove and Install. R&R=Remove and Replace. Rpr=Repair. RT=Right. SAS=Sandwiched Steel. Sect=Section. Subl=Sublet. UHS=Ultra High Strength Steel. N=Note(s) associated with the estimate line.

CCC ONE Estimating - A product of CCC Information Services Inc.

The following is a list of abbreviations that may be used in CCC ONE Estimating that are not part of the MOTOR CRASH ESTIMATING GUIDE:

BAR=Bureau of Automotive Repair. EPA=Environmental Protection Agency. NHTSA= National Highway Transportation and Safety Administration. PDR=Paintless Dent Repair. VIN=Vehicle Identification Number.



OFFICE OF THE CITY CLERK Milwaukee, Wisconsin

INSTRUCTIONS FOR FILING A CLAIM AGAINST THE CITY OF MILWAUKEE

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

- 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.
- 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.
- A phone number where the claimant can be reached during business hours as well as the claimant's e-mail address, if any.
- As detailed a description of the incident as possible, including the date, time and place.

All information should be submitted to:

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

ADDITIONAL INFORMATION

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

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

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

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

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

- (a) Within 120 days after the happening of the event giving rise to the claim, written notice of the circumstances of the claim signed by the party, agent or attorney is served on the volunteer fire company, political corporation, governmental subdivision or agency and on the officer, official, agent or employee under s. 801.11. Failure to give the requisite notice shall not bar action on the claim if the fire company, corporation, subdivision or agency had actual notice of the claim and the claimant shows to the satisfaction of the court that the delay or failure to give the requisite notice has not been prejudicial to the defendant fire company, corporation, subdivision or agency or to the defendant officer, official, agent or employee; and
- (b) A claim containing the address of the claimant and an itemized statement of the relief sought is presented to the appropriate clerk or person who performs the duties of a clerk or secretary for the defendant fire company, corporation, subdivision or agency and the claim is disallowed.

MILWAUKEE POLICE DEPARTMENT DAMAGE NOTICE

(SUPERVISOR TO LEAVE IN PROMINENT PLACE AT SCENE)

The Milwaukee Police Department received a call for
service on: 08-24 20 20 at: 610 a.m. (p.m. at: 2333 N. UG W. (ADDRESS)
at: 2333 N. UGW
(പാഗകരം)
to: confirm welfare of occupant(s)
make an arrest
execute a search warrant
recover evidence of crime
Xother (describe) Shot a Dos
occur a lozza w Junipter
occur w 10330 w Junipter on 08-14-12 w U:15p
The following damage to premises or vehicle occurred:
bullet have to the lower.
Troot pussemes done
Front pussemen door
Supervisor's Name: 564. Shawan TA+Ca
1,000,000
DIST 3 Late O14164 (DIST. / WORK LOC.) (SHIFT) (EMPLOYEE I.D. #)
SEE NOTICE ON REVERSE SIDE

BE A FORCE Hitwaukee Wi 53210 Hitp://www.milwaukee.gov/police Hitmaukee.gov/police Hitmaukee.gov/police

PD-43 05/07

MILWAUKEE POLICE DEPARTMENT DAMAGE NOTICE

(SUPERVISOR TO LEAVE IN PROMINENT PLACE AT SCENE)

The Milwaukee Police Department received a call for
service on: 08-24 20 2 at: 810 a.m. (p.m. at: 2333 N. UG W. (ADDRESS)
at: 2333 N. UG W. (ADDRESS)
to: 🖸 confirm welfare of occupant(s)
make an arrest
cxecute a search warrant
recover evidence of crime
X other (describe) Shot a Dos
0 n- 08-14-12 w 4:15p
0 n 08-14-12 wa:15p
The following damage to premises or vehicle occurred:
bullet have to the lower
Front passemer dock
(fear) W
•
Supervisor's Name: Sol. Shaunon TA+Con (PRINT)
DIST 3 Late O14164 (DIST. / WORK LOC.) (SHIFT) (EMPLOYEE I.D. #)
(DIST. / WORK LOC.) (SHIFT) (EMPLOYEE I.D. #)

SEE NOTICE ON REVERSE SIDE

68	
	BE A FORCE
MILWAUKEE POLICE	Aimee Ohregon
DEPARTMENT	Unit/Oistrict/Section #13 Phone 935 723 /
2333 North 49% Street Milwaukee, WI 53210	Fax AOb/CAO milwaultee.gov/ http://www.milwaukee.gov/police