



Claim for Damages

To:
MILWAUKEE CITY OF
200 E WELLS ROOM 205
MILWAUKEE, WI 53202

Claim Number: AMER-25-201511-00-6254-WFB

Charges for Damages to:
WISCONSIN BELL INC., DBA AT&T- WISCONSIN

Occured/Discovered On or About: 11/12/2015

Approximate Location:
F 622 N CASS ST, MILWAUKEE CITY (PT.), WI

How Damage Occured:
CITY OF MILWAUKEE DIGGING TRENCH FOR CONDUIT.
AT&T MARKED ACCURATELY.

Summary of Charges

The labor cost amount claimed includes direct costs and indirect costs, including but not limited to personnel, equipment, vehicles, administrative overheads, and an allocation of general corporate overhead.

LABOR COST	\$9539.20
MATERIALS/UNIT COST ITEMS	\$1311.31
CONTRACTOR	\$3692.44
LOSS OF SERVICE	\$556.00
TOTAL AMOUNT DUE:	\$15098.95

**Call before you dig
Call 811**

For Inquiries Call: 800-894-0374 or 800-363-3234 (FAX) RK # 1511006254-01

This payment is due upon receipt. If payment is not received within 30 days further collection action will be taken. IF A PAYMENT FOR LESS THAN THE FULL AMOUNT IS RECEIVED, IT WILL BE APPLIED AS A PARTIAL PAYMENT. **Please do not pay with telephone bill.**

If you are covered by insurance, please forward this to your carrier for payment. Once your claim has been established with your insurance company, please contact us at 800-894-0374 with your claim information, and we will work with your insurance company to resolve. AT&T accepts checks, money orders or credit card payments. We do not accept cash. Please complete the information below and return in the enclosed envelope or you may call 800-894-0374 to pay by phone.



TOTAL AMOUNT DUE: \$15098.95

Amount enclosed: \$ _____

MILWAUKEE CITY OF

Claim Number: AMER-25-201511-00-6254-WFB

Return this section with payment in enclosed envelope.

Please write claim number on check or money order to ensure proper credit.

For credit card payment:

Credit Card number: _____

Name on Card: _____

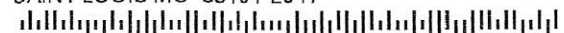
Amount to be charged to your card: _____

Three digit security number on back of card: _____

Expiration Date: _____

Remit Payment to:

AT&T
RM 39-N-13
909 CHESTNUT ST
SAINT LOUIS MO 63101-2017





May 10, 2016

MILWAUKEE CITY OF
200 E WELLS ROOM 205
MILWAUKEE, WI 53202

RECEIVED

MAY 18 2016

OFFICE OF
CITY ATTORNEY

RE: AT&T
Claim Number: AMER-25-201511-50-0057-WFB
Date of Damage: On or about 11/12/2015
Location of Damage: F 622 N CASS ST, MILWAUKEE CITY (PT.), WI
Amount Billed: \$15,532.78

Dear Sir/Madam:

The payment for the claim listed above is now delinquent. If you have insurance, please file this claim with your insurance company and provide our office with the name and phone number of your insurance agent.

If you do not have insurance, you need to mail your check immediately to:

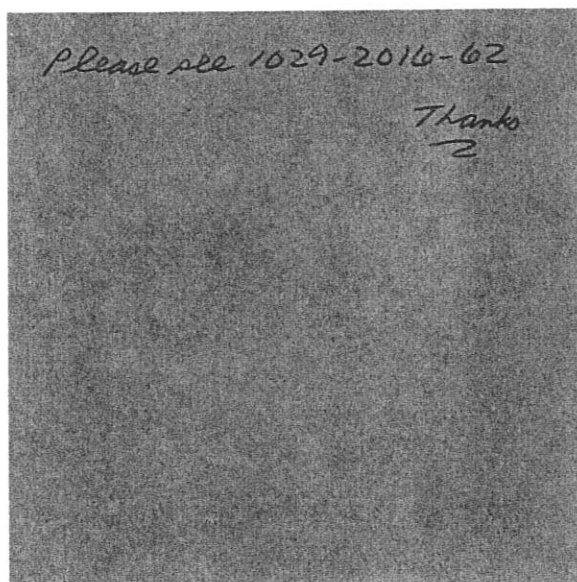
AT&T
Attn: Risk Mgmt
909 Chestnut Street
Room 39-N-13
St. Louis, MO 63101-3099

If you believe this claim has been sent to you in error, please contact our office at 800-894-0374.

If we have not received payment by May 25, 2016 or if you have not contacted our office, this claim will be referred for further collection action. If payment has already been submitted for this claim, please disregard this notice.

Sincerely,

AT&T



CITY OF MILWAUKEE
2016 MAY 17 P 1:08
CITY CLERK'S OFFICE