



CLAIMANT CONTACT INFORMATION

Name: Progressive Universal Insurance Company
A/S/O LATTHIYA, ASACHANH A
Address: PO Box 94639
Cleveland, OH 44101

Phone: 877-818-0139
Email: GOVERNMENTSTATUS@EMAIL.PROGRESSIVE.COM

INSTRUCTIONS

Complete this form, print and sign it, and serve a hard copy upon the West Allis City Clerk. If you have questions about how to fill out this form, please contact a private attorney who can assist you.

NOTICE OF CLAIM

Date of incident: 3/10/2023 Time of day: 9:10 AM CT
Location: PARKED AT 1723 S 72ND STREET IN WEST ALLIS, WI

Describe the circumstances of your claim here. You may attach additional sheets or exhibits. Some helpful information may be the police report, pictures of the incident or damage, a diagram of the location, a list of injuries, a list of property damage, names and contact information for witnesses to the incident, and any other information relevant to the circumstances.

OUR INSURED'S VEHICLE WAS PARKED AT 1723 S 72ND STREET IN WEST ALLIS, WI WHEN A CITY VEHICLE WITH PLATE # 93972 OPERATED BY ROACH, REGINALD K. FAILED TO MAINTAIN PROPER LOOKOUT AND CONTROL OF VEHICLE, STRUCK OUR INSURED'S PARKED VEHICLE. WE ARE SEEKING REIMBURSEMENT FOR OUR INSURED'S VEHICLE DAMAGES.

2018 SUBARU OUTBACK W/EYESIGHT - LFRNT

Police Agency: WEST ALLIS Police Report #: 23-008884

YOUR DRIVER: ROACH, REGINALD K

Tracking Number:
70192280000066360723

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Latest Update

Your item was picked up at a postal facility at 8:37 am on April 24, 2023 in MILWAUKEE, WI 53214.

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Delivered

Delivered, Individual Picked Up at Postal Facility

MILWAUKEE, WI 53214

April 24, 2023, 8:37 am

[See All Tracking History](#)

Check one:

..... I am seeking damages at this time (complete Claim Amount section below)

..... I am submitting this notice without a claim for damages. This claim is not complete and will not be processed until I submit a claim for damages on a later date.

Progressive Universal Insurance Company

Signed: Matthew Hayward SUBROGATION SPECIALIST

Date: 4/11/2023

CLAIM AMOUNT

To complete this claim, attach an itemized statement of damages sought. If any damages are for repair to property, include at least 2 estimates for repairs.

The total amount sought is: \$ 3,600.90

SAVE

PRINT