

RECEIVED

DEC 09 2014

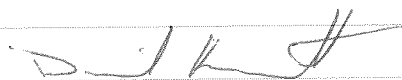
CITY OF WEST ALLIS
CITY CLERK

To whom this may concern:

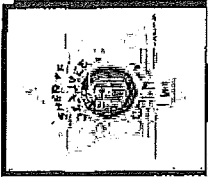
My name is David Kracht. On the morning of November 14, 2014, I was pulled over and arrested by Cedarburg police on Warrants from West Allis. The Cedarburg police officer took me to Ozaukee jail where I was held until West Allis police could come get me. Once West Allis police got there, the Ozaukee officer gave the West Allis officers all of my personal possessions for safe keeping during transport. Before leaving the station, one of the West Allis officers placed my bag of belongings on the roof of the squad car and never removed it before driving away. The officer drove off with my possessions still on the roof of his squad car. There is surveillance footage from Ozaukee jail proving this. The items were lost and never found. Some of the items lost were my keys, cellphone, belt, wallet, and a check for \$31.00. Because the officer lost my only car key, I had to have my car towed to the dealership and have a new key made. I am asking to be reimbursed the amount it cost for the tow and a new key. I also had to replace my cell phone and license and would like to receive reimbursement for that as well. Finally I am hoping to get another check to replace the one that was lost.

In total I am asking for \$768.91. It cost 217.56 to have my car towed from Cedarburg to Milwaukee. To get a replacement license cost \$14.00. A new phone cost \$175.00. To have a new

car key mad was \$331.33, 225.73 for the actual key and \$105.60 to have it programed to my car. Finally an additional \$31.00 to replace the check that was lost. I have provided all of the receipts.



2920 A N. Peirce St
Milwaukee, W.I. 53212
(414) 840-2330



Ozaukee County Sheriff's Office

1201 S Spring Street PO Box 245 | Port Washington, WI 53074 | Phone: (262) 284-7172

Tuesday, December 2, 2014
8:57:44 am

** For official use only **

CMS Inmate Property Receipt

SPN : 167073 Name : Krachtt, David Alan

Booking # : 14-002158

Location :

Item	Item Description	Qty	Container	Action Description	Issued To Name	Action By Officer	Date / Time
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Belt	BLACK	1	PB23	Released to Inmate	NILSESTUEN, TIMOTHY11/14/14	NILSESTUEN, TIMOTHY11/14/14	10:11
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Clothing	BLACK JACKET	1	PB23	Released to Inmate	NILSESTUEN, TIMOTHY11/14/14	NILSESTUEN, TIMOTHY11/14/14	10:11
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Shoes	BLACK	1	PB23	Released to Inmate	NILSESTUEN, TIMOTHY11/14/14	NILSESTUEN, TIMOTHY11/14/14	10:11
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Wallet	GRAY	1	PB23	Released to Inmate	NILSESTUEN, TIMOTHY11/14/14	NILSESTUEN, TIMOTHY11/14/14	10:11
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Cell phone	US CELLULAR W/CRACKED FACE	1	PB23	Released to Inmate	NILSESTUEN, TIMOTHY11/14/14	NILSESTUEN, TIMOTHY11/14/14	10:11
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DL/ID	WIS DL SOCIAL SECURITY CARD	2	PB23	Released to Inmate	NILSESTUEN, TIMOTHY11/14/14	NILSESTUEN, TIMOTHY11/14/14	10:11
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Keys	X 6	1	PB23	Released to Inmate	NILSESTUEN, TIMOTHY11/14/14	NILSESTUEN, TIMOTHY11/14/14	10:11
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Credit Card	VISA-3155	1	PB23	Released to Inmate	NILSESTUEN, TIMOTHY11/14/14	NILSESTUEN, TIMOTHY11/14/14	10:11
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SCHLOSSMANN CITY MITSUBISHI
 4640 S. 27th St. • Milwaukee, WI 53221
 Phone: (414) 281-9100 • Fax: (414) 281-9130
 Parts Direct: (414) 459-3697 • Parts Fax: (414) 281-1279

CUSTOMER NO. 11192		ADVISOR JASON	2236	TAG NO. 033	INVOICE DATE 11/20/14	INVOICE NO. MICS29581	
DAVID A KRACHTT 2920A N PIERCE ST MILWAUKEE, WI 53212		LABOR RATE	LICENSE NO.	MILEAGE 10	COLOR RED/	STOCK NO. P531	
		YEAR / MAKE / MODEL 10/MITSUBISHI/LANCER/5DR HB				DELIVERY DATE 04/15/14	DELIVERY MILES 41,326
		VEHICLE I.D. NO. J A 3 2 X 8 H W 8 A U 0 2 0 0 3 3				SELLING DEALER NO.	PRODUCTION DATE
		F.T.E. NO.		P.O. NO.		R.O. DATE 11/20/14	
RESIDENCE PHONE 414-840-2330	BUSINESS PHONE	COMMENTS					

MO: 12

JOB# 1 CHARGES-----	
LABOR-----	
J# 1 60MIZ INTERIOR TRIM TECH(S):2463	100.00
PROGRAM SUPPLIED KEY	
PROGRAMMED SUPPLIED KEY	
JOB# 1 TOTALS-----	
	LABOR 100.00
	JOB# 1 JOURNAL PREFIX MICS JOB# 1 TOTAL 100.00
TOTALS-----	

STORAGE IS CHARGED BETWEEN \$20 AND \$25 PER DAY ON MOTOR VEHICLES LESS THAN 20,000 LBS. AND \$35 PER DAY ON MOTOR VEHICLES OVER 20,000 LBS.

WARRANTY INFORMATION

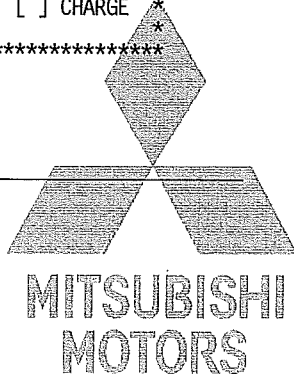
The parts checked "warranty" on the face side hereof are covered by a manufacturer's warranty, copies of which are available through the selling dealer. There are no other warranties applicable to the parts or service furnished in this repair. The dealer is not a party to any such manufacturer's warranty.

*****	TOTAL LABOR....	100.00
* [] CASH [] CHECK CK NO. []	TOTAL PARTS....	0.00
* [] VISA [] MASTERCARD [] DISCOVER	TOTAL SUBLET...	0.00
* [] AMER XPRESS [] OTHER [] CHARGE	TOTAL G.O.G....	0.00
*****	TOTAL MISC CHG.	0.00
	TOTAL MISC DISC	0.00
	TOTAL TAX.....	5.60
	TOTAL INVOICE \$	105.60

THE DEALER HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES, EITHER EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED WARRANTIES 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 THESE PARTS AND/OR SERVICE. BUYER SHALL NOT BE ENTITLED TO RECOVER FROM THE SELLING DEALER ANY CONSEQUENTIAL DAMAGES, DAMAGES TO PROPERTY, DAMAGES FOR LOSS OF USE, LOSS OF TIME, LOSS OF PROFITS, OR INCOME, OR ANY OTHER INCIDENTAL DAMAGES.

THANK YOU FOR YOUR BUSINESS!!

CUSTOMER SIGNATURE



I authorize the retrieval of on-board data as needed to facilitate vehicle repair, as well as sharing of that data with the manufacturer for diagnostic and research purposes.

026529

ALL STAR TOWING
2640 W. Greves St.
Milwaukee, WI 53233

(414) 324-7897 Fax (414) 345-9701
Storage, Winching, Jump Start, Lock Out, Flat Tire
Light, Medium, Heavy Duty Towing

TOWING REPORT

NAME: PRIVATE
 ADDRESS: _____
 CITY: _____ STATE: _____ ZIP: _____
 PHONE: 414-840-1330

PAY METHOD
 CASH
 CHECK # _____
 CREDIT CARD
 ON ACCOUNT

DATE: 11-17-14 TIME: 8:15 AM REQUESTED BY: OWNER
 YEAR: 11 MAKE/MODEL/COLOR: SUBARU
 DRIVER: JAMES REGISTRATION NO.: _____ LICENSE NO.: _____
 LOCATION OF VEHICLE: 2774 + LAYTON TOWED TO: _____

MILEAGE		
BEFORE TOW	MILEAGE	
1	2	3
4	5	6
7	8	9
10	11	12
13	14	15
16	17	18

FINISH: _____ START: _____ TOTAL: _____
 SERVICE TIME: _____
 FINISH: _____ START: _____ TOTAL: _____
 MILEAGE: _____
 FINISH: _____ START: _____ TOTAL: _____

SPECIAL EQUIPMENT
 SINGLE LINE WINCHING
 DUAL LINE WINCHING
 SNATCH BLOCKS
 SCOTCH BLOCKS
 FLAT TIRE
 OUT OF GAS
 WRECK
 RECOVERY
 LOCK OUT

I HAVE BEEN ADVISED THAT MY VEHICLE MAY BE DAMAGED IF WINCHED, TOWED, UNLOCKED OR LEFT ON UNATTENDED PREMISES. I RECOGNIZE THE DIFFICULTY INVOLVED AND I AGREE NOT TO HOLD THE TOWING SERVICE RESPONSIBLE FOR SUCH DAMAGE SHOULD IT RESULT.
 SIGNATURE OF CAR OWNER OR AGENT: _____ DATE: 11/17/14

REMARKS: VEHICLE WILL NOT BE RELEASED UNTIL TOWING SERVICE IS PAID

MILEAGE CHG.	TOWING CHG.	LABOR CHG.	STORAGE CHG.	SUBTOTAL	TAX	TOTAL
	75.00					150.00

SIGNATURE OF TOW OPERATOR: _____ DATE: 11/17/14
 AUTHORIZED SIGNATURE: _____ DATE: _____



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 Phone: (414) 281-9100 • Fax: (414) 281-9130
 Parts Direct: (414) 459-3697 • Parts Fax: (414) 281-1279

56235

56235

CUST NO.	TAX EXEMPT NUMBER	CUST. P. O. NO.	SHIP VIA	PAY	SOLD BY	INVOICE DATE	INVOICE NO.
11192	414-840-2330			CASH	ROBERT	11/17/14	56235 MIR

BILL TO: DAVID A KRACHTT
 2920A N PIERCE ST
 MILWAUKEE, WI 53212

SUBTOTAL

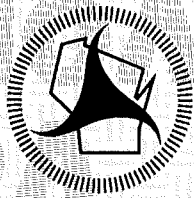
SHIP QTY	B. O. QTY	PART NUMBER / DESCRIPTION	BIN	LIST	NET	AMOUNT
1	0	6370A148 KEY-DOOR LOCK TRANS SHIPPED 0 SPECIAL ORDERED 1	SPORD	213.76	213.76	213.76
SUBTOTAL						213.76
TAX						11.97
FREIGHT						0.00
PAY THIS AMOUNT						225.73



ALL CLAIMS AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS INVOICE. NO RETURNS ON ELECTRICAL OR SPECIAL ORDER PARTS. NO RETURNS AFTER 30 DAYS. 10% RE-STOCK CHARGE ON ALL RETURNED PARTS.
 THE SELLER HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES, EITHER EXPRESS OR IMPLIED, INCLUDING ALL IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR THE PARTICULAR PURPOSE, AND THE SELLER NEITHER ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF THESE PARTS.

Thank
 You
 for
 Your
 Business!

CUSTOMER COPY



Wisconsin Department of Transportation

www.dot.state.wi.us



DMV Survey

T1002 11/2011

Division of Motor Vehicles
Qualification and Issuance Section
P O Box 7995
Madison, WI 53707-7995

DAVID A KRACHTT
2920A N PIERCE ST
MILWAUKEE WI 53212-2550

Telephone: 608-266-0898
FAX: 608-261-8201
Email: dre.dmv@dot.wi.gov
STN ID: MBC1 at Terminal ID: H53189

Fee and Driving Receipt

K623-1618-9216-06

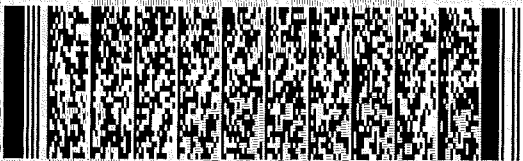
NOVEMBER 18, 2014

Product Type: Regular
Product Nb: 53271-081-755
Payment Date: 11-18-2014
Payment #: 86563214322
Fee Total: \$14.00

Fee Description	Fee Amount
Duplicate License	\$ 4.00
Card Issuance Fee	\$ 10.00

Physical Description

DOB: 06-16-1989
Sex: Male
Height: 6'00"
Weight: 155 lb
Hair: BLD
Eye: BLU
Organ Donor: Yes
License Classes: D



**KRACHTT
DAVID A**

This receipt is an acceptable Photo ID for voting and serves as your Driver License until your card arrives in the mail (s.5.02(6m) Wis. Stats.). This receipt is proof that fees, if any, have been collected. Carry this receipt with you while driving until you receive your Driver License. This receipt is valid until 01-02-2015, unless otherwise cancelled, revoked, suspended or disqualified by WisDOT. If you have not received your Driver License in 10 business days, please contact DMV using the Information above. No person may operate a motor vehicle in this State unless the owner or driver of the vehicle has liability insurance in effect for the vehicle being operated and carry proof of insurance whenever driving. Law Enforcement may ask for proof of insurance at any traffic stop or accident. Failure to have insurance could result in up to a \$500 fine. Failure to have proof when requested, could result in a \$10 fine. You do not need proof of insurance when registering a vehicle or obtaining a driver license, unless DMV specifically requested proof of financial responsibility (SR22) after a revocation or suspension. Refer to s.344.61-344.65 Wis. Stats. for full details.

License Restrictions:
Corrective Lenses

Additional Payment Method Information:
Type: Cash Amt: \$14.00