

RECEIVED

AUG 14 2025

WEST ALLIS
CITY ATTORNEY**Plaintiff:** (Name [First, Middle, Last], Address, City, State, Zip)**Demandante:** (Nombre [primero, segundo, apellido], domicilio, ciudad, estado, código postal)Cornelius LLOYD Armstrong
2832 N. 12th St
Milwaukee, WI. 53206

AGENT FOR STATE PROCESS SERVICE, INC.

Time of Service

Date of Service

Served upon:

☐ See attached for additional plaintiffs.

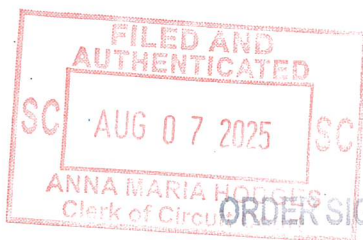
Ver adjunto para otros demandantes.

☐ Amended Enmendado

-vs- -contra-

To: Defendant(s): (Name [First, Middle, Last], Address, City, State, Zip)**Para: Demandado(s):** (Nombre [primero, segundo, apellido], domicilio, ciudad, estado, código postal)City of Milwaukee
200 E. Wells St Milwaukee, WI 53202 Suite 800
City of West Allis
7525 W. Greenfield Ave West Allis, WI 53214☐ See attached for additional defendants.

Ver adjunto para otros demandados.

**Summons and Complaint****Small Claims****Citaciones y Demanda**
Reclamos de menor cuantía

Case No. _____

Causa No. _____

☒ Claim for money (\$10,000 or less) 31001

Reclamo de dinero (\$10,000 o menos) 31001

☐ Tort/Personal injury (\$5,000 or less) 31010

Agravio/lesión personal (\$5,000 o menos) 31010

☐ Return of property (replevin) 31003

Devolución de propiedad (reivindicación de cosas muebles) 31003

☐ Eviction / Desalojo 31004

Desalojo por ejecución de hipoteca 31004

☐ Eviction due to foreclosure 31002

Desalojo por ejecución de hipoteca 31006

☐ Arbitration award 31006

Sentencia de arbitraje 31008

☐ Return of earnest money 31008

Devolución de señal 31008

This form does not replace the need for an interpreter, any colloquies mandated by law, or the responsibility of court and counsel to ensure that persons with limited English proficiency fully comprehend their rights and obligations. This form must be completed in the English language.

Este documento no sustituye el uso de un intérprete, ni los coloquios judiciales exigidos por la ley. Tampoco sustituye la responsabilidad del tribunal y los abogados de asegurarse de que las personas cuya comprensión del idioma inglés sea limitada entiendan por completo sus derechos y obligaciones. Este documento debe completar en el idioma inglés.

One or both parties require the services of an interpreter. Which party? _____ Which language? _____

Complete and file the Interpreter Request (GF-149) form.

Una o ambas partes requieren los servicios de un intérprete. ¿Qué parte? _____ ¿Qué idioma? _____

Llene y presente el formulario de solicitud de intérprete (GF-149).

If you require reasonable accommodations due to a disability to participate in the court process, please call _____ prior to the scheduled court date. Please note that the court does not provide transportation.

Si necesita arreglos razonables para participar en el proceso judicial debido a una discapacidad, por favor llame a _____ antes de la fecha judicial programada. Tenga en cuenta que el tribunal no proporciona transporte.

SUMMONS / CITACIONES**To the Defendant(s): Para el/los demandado/s:**

You are being sued as described on the attached complaint. If you wish to dispute this matter:

Lo están demandando según lo indicado en la demanda adjunta. Si desea disputar este asunto:

☐ You must appear at the time and place stated.

Debe comparecer a la hora y en el lugar establecidos.

☐ You must file a written answer and provide a copy to the plaintiff or plaintiff's attorney on or before the date and time stated.

Debe presentar una respuesta por escrito y proporcionar una copia al demandante o al abogado del demandante en la fecha y hora

When to Appear/File an Answer**Fecha para comparecer/
presentar una respuesta**Date
Fecha

AUG 25 2025

Time
Hora

930am

Place to Appear/File an Answer
**Lugar para comparecer/presentar una
respuesta**CITY OF WEST ALLIS
14 AUG '25 AM 11:39

establecidas o con anterioridad a ellas.

If you do not appear or answer, the plaintiff may win this case and a judgment entered for what the plaintiff is asking.

Si no comparece ni responde, el demandante puede ganar esta causa y se puede dictar un fallo a favor de lo que el demandante esté solicitando.

Place to Appear: **APPEAR IN PERSON**

Milwaukee County Courthouse

901 North 9th Street, CH #400

Milwaukee, WI 53222

Clerk/Attorney Signature
Firma del Actuario de Juzgado/Abogado

Olivia Maria Dodge

Date Summons Issued
Fecha de emisión de la citación

08/07/25

Date Summons Mailed
Fecha en la que se envió la citación

COMPLAINT / DEMANDA

Plaintiff's Demand:

Demanda del demandante:

The plaintiff states the following claim against the defendant(s):

El demandante realiza la siguiente demanda contra el/los demandado/s:

1. Plaintiff demands judgment for (Check as appropriate)

El demandante exige un fallo por: (Marcar lo que corresponda):

☒ Claim for Money \$ 5,500

Reclamo de dinero

☐ Tort/Personal Injury \$ _____

Agravio/lesión personal

☐ Return of property (replevin) (Describe property in 2 below.) (Not to include Wis. Stats. 425.205 actions to recover collateral.)

Devolución de propiedad (reivindicación de cosas muebles) (Describe la propiedad en el punto 2 abajo) (Excluyendo las acciones en virtud de las leyes de Wisconsin 425.205 para recuperar la garantía)

☐ Eviction

Desalojo

☐ Eviction due to foreclosure

Desalojo por ejecución de hipoteca

☐ Return of Earnest Money

Devolución de señal

☐ Confirmation, vacation, modification or correction of arbitration award.

Confirmación, anulación, modificación o corrección de sentencia arbitral.

Plus interest, costs, attorney fees, if any, and such other relief as the court deems proper.

Más intereses, costos, honorarios legales, de existir, y toda otra asistencia que el tribunal considere adecuada.

2. Brief statement of dates and facts:

Breve declaración de fechas y hechos:

(If this is an eviction action and you are seeking money damages, you must also state that claim on this form.)

(Si es una acción de desalojo y busca el resarcimiento de dinero, debe también indicar ese reclamo en este formulario.)

Please see Attachments

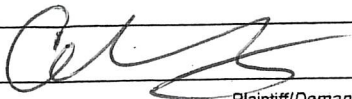
I am the property owner of 2832 N. 12th St. A Search Warrant was issued for the apprehension of tenant Romeo B. Lane in upper unit. The itemized damages includes 5 broken windows, holes on siding of home for gas canister, hole in ceiling, rear entrance door frame w/ security door, hallway ceilings, driver side door handle broken and damages to upper hallway.

☒ See attached for additional information. Provide copy of attachments for court and defendant(s).

Ver adjunto para información adicional. Proporcione copia de adjunto para el tribunal y el/los demandado/s.

I am the: ☒ plaintiff. ☐ attorney for the plaintiff.

Soy: ☒ demandante. ☐ abogado del demandante.



Plaintiff/Demandante

Cornelius LLOYD Armstrong

Name Printed or Typed / Nombre escrito en letra de molde o a máquina

2832 N. 12th St

Address / Dirección

armstrongcl1983@gmail.com

Email Address

Dirección de correo electrónico

262 206-9123

8-7-2025

Telephone Number / Teléfono

Date / Fecha

Attorney/Abogado

Name Printed or Typed / Nombre escrito en letra de molde o a máquina

Address / Dirección

Email Address

Dirección de correo electrónico

Telephone Number

Teléfono

Date / Fecha

State Bar No.

Número de inscripción en el Colegio de Abogados



25SC020797
City Attorney's Office
attorney@westalliswi.gov
Office: 414.302.8450
Fax: 414.302.8444

Kail Decker
City Attorney
Nicholas S. Cerwin
Deputy City Attorney
Rebecca Monti
Principal Assistant City Attorney
Allison Childs
Assistant City Attorney

NOTICE OF DISALLOWANCE OF CLAIM

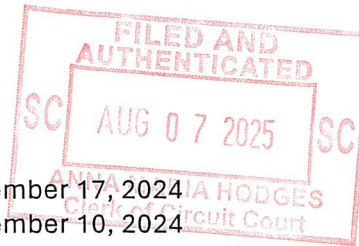
January 6, 2025

CERTIFIED MAIL

RETURN RECEIPT REQUESTED

Cornelius Armstrong
2832 N. 12th St. Lower Unit
Milwaukee, WI 53206
armstrongcl1983@gmail.com

RE: Notice of Claim filed: December 17, 2024
Date of Injury/Loss: December 10, 2024



Atty
Mined
(414) 232-6630

Mr. Armstrong,

The City Attorney's Office investigated the claim you submitted. The City has determined that we are not able to admit liability. Therefore, our office has concluded your claim is to be disallowed and denied. The reason(s) for the decision to disallow this claim includes, but is not limited to, the following:

The City is not liable for the damages in this incident. West Allis Police Officers were assisting Milwaukee Metropolitan Drug Enforcement Group with executing a valid search warrant. Entry was not forced pursuant to that warrant until after several knock and announce opportunities giving the target of the warrant an opportunity to voluntarily allow entry, but they did not. Officers were not negligent in any way in the actions taken to execute the warrant. There was not anything that officers legally should have done otherwise when executing the warrant. Any damage caused is the responsibility of the subject of the search warrant, that person being Romeo Lane. You may be able to seek restitution for your damages under any criminal charges issued against Mr. Lane or possibly through any revocation proceedings he may face.

In conclusion, the City is not required to provide an explanation for its decision to disallow a claim, but one is provided so you know how the claim was evaluated. The City is required by law to inform you that no lawsuit may be brought on this claim against the City of West Allis or any of its officials, officers, agents or employees after six months from the date of service of this letter.

Sincerely,

Rebecca Monti

Rebecca Monti
Principal Assistant
City Attorney

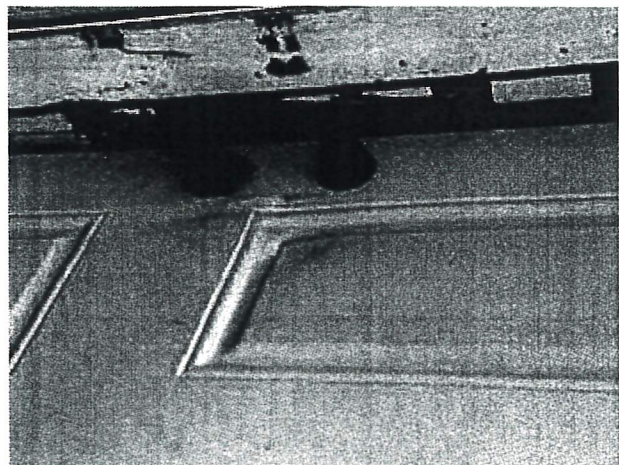
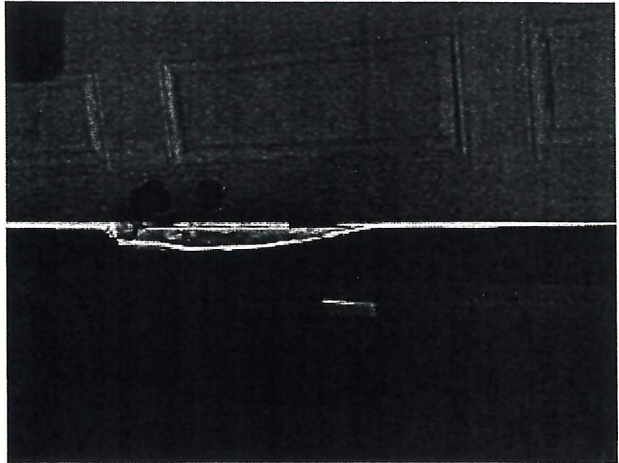
Civil Court
414-278-4140

Milwaukee County
Dist office
Criminal Justice
Probation

414-278-4646

Small Claims
414-278-4140

Sent from my iPhone



- Replace Washer
-Delivery Service
-Installation

Cost of Materials and Labor.....\$1,400.00.

- Repair Aluminum trimming on Windows, Front of home Siding.

Cost of Materials and Labor.....\$2,300.00.

The total of services is \$24,850.00. All services provided are payable to MMG Landscaping Construction LLC. For any questions or concerns, email or call.

Property Management

MMG Landscaping Construction LLC

Date



o (414) 915-3612 o mghconst.llc@gmail.com o

Invoice

Street: 2832 N. 12th Street

Project Details:

- Replace 5 Windows-
 - (2) Upstairs Bedroom
 - (2) Backside Hallway
 - (1) Living Room

Cost of Materials and Labor.....\$5,250.00.

- Paint and Repairs
 - Hallway
 - Kitchen
 - (3) Upstairs Rooms

Cost of Materials and Labor.....\$6,800.00.

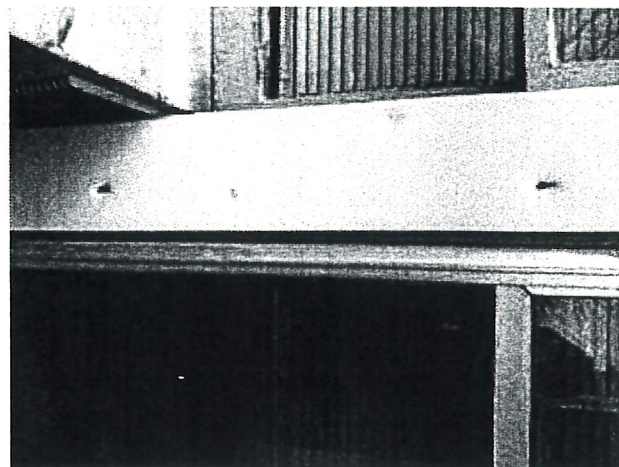
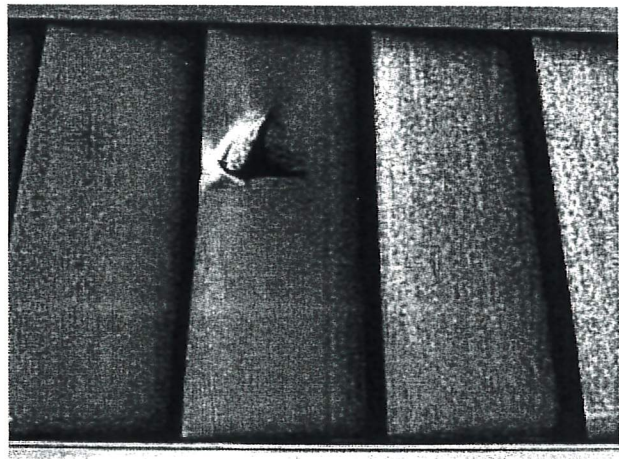
- Remove and Replace Carpet in Rooms* and Hallway

Cost of Materials and Labor.....\$4,500.00.

- Replace Backdoor
 - Door Trims
 - Door Handles
 - Add Storm Door*

Cost of Materials and Labor.....\$4,600.00.

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