



CLAIMANT CONTACT INFORMATION

Name: LORA Lewis  
Address: 7520 W Northridge  
WAKES BLVD #101  
MILWAUKEE WI 53223

Phone: 414-640-1804  
Email: Sweetthang66628@gmail.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: 3/10/25 Time of day: not sure  
Location: 6525 W Belmont #13 west Allis 53219  
west

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.

My vehicle was parked in front of the building where westallis police and fire department was on scene because my father passed away. I was upstairs with the medical examiner, who was taking care of the scene. when I came downstairs I was informed that the westallis police hit my parked vehicle. They gave me a report number for the incident report that he filed. To add to my claim which is 25-008559.

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.

Signed: Lora Lewis

Date: 3/14/25

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: \$ ~~1,281.28~~ 1,281.28

SAVE

PRINT