CLAIMANT CONTACT INFORMATION

Name: Kathy Bott Address: 1343 5. 113th St West Allis, WI 53214

Phone: 414-257-0662 Email: trusting fool OUG & hot mail. com

INSTRUCTIONS

Complete this form 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:	Jan	2022		Time of day:	11:30 am
Location: 1343	5. 113	st St.	West Allis		

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.

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Check one:

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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										
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will not be processed until I submit a claim for damages on a later date.										
Signadi	Kathl	Rott		Date		-17-22				
Signed.	Alla	DOU		Date		11 02				
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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: \$ \clubsuit Renard al