

	ALLIS CLAIMANT CONTACT INFORMATION 2:23
	Name: BRIAN (9NH) Address: 2048 5 70 TH ST Email: BRIAN LYNCH GWGNAL COM
CITY OF WEST 3 MAY '22 PM	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 2:39 Date of incident:
	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.
	BURING THE JAN. 4 ^{CH} Snow Generaling My UAR WAS THERE FROM BUING PARKED ON THE WRITERT SUDE OF THE STREET. WHEN
ÿ.	THE WAS TOWER IT WAS ON THE CORRECT SING. WHEN
	CONGRED IN SNOW. IT WAS OVERED IN STOW B/c the I HAD
	NOUND JUST CLEAR THE MINUSUS ENOGH TO SEC. (BAK)
	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: Date:

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: \$ 94 95

The total amount sought is: \$

SAVE

PRINT

WAS COLD BY SOMEONE AT CITY HALL THAT IF MY CAR WAS LIGHTLED OFF FROM SNOW, IT LIFEY WOULD NOT HAVE BEEN TOWN. LIKEWISE, AN EATTER

I AM SEEKING DUMANES FOR TOWING IN THE AMOUNT OF DAMAGES I COVER ASK FOR IN THIS WORLD.

ADDITUONSAC BOLV NEWFATION (S ATTACHED).

ou are Notified to Pay or App	me Form No. and	version C1	CT CITATION NO.		
		O AM	0405	1S805	1TK8S
EST ALLIS CITY MUNICIPAL COURT	7.11 07 2022	Juvenile	DE	POSIT Cas	h- Card
I301 W LINCOLN AVE IEST ALLIS, WI 53227			\$2	50.00 N	N
14) 302-8181 WWW.WESTALLISWI.G	ov	Court Use: DA	1		
fendant(Last Name, First, Middle), Stree	et Address, P.O. Box, City, State	e, Zip Bi	rth Date	Sex	Race
YNCH, BRIAN JAMES		6/	14/1993	M	W
048 S 70TH ST IILWAUKEE WI 53219		H 51			Eyes HAZEL
Driver License/Identification Card Number	er State			nt/Guardian/Lega	Custodian
L520-0709-3214-05	WI	2028 (If minor defe	ndant)		
Other Identification Number	ID Type				
License Plate Number Plat	e Type State	Exp. Yr.			
907YXT A	UT WI	2022			
Vehicle Identification Number	Telephone Nun	nber Telephone No	ımber of Parer	nt/Guardian/Lega	l Custodian
3FAFP37313R110704					
Plaintiff	Ordinance Violate	ed	Add	opting State Statu	ite
CITY OF WEST ALLIS	WA-6.015(2))			
Violation Description				Agency Space	
				22-000395	
Ordinance Description				22-000333	
ABANDONED VEHICLE (PUBL	IC NUISANCE)				
Week Day Date	Time				
TUESDAY 01/04/2022	01:12 AM				
From/AT Hwy No. and/or Street Name					
ON S 70TH ST 287 FT N OF W BECH	ER ST				
County	ity/Village/Town		1		
MILWAUKEE - 40 V	VEST ALLIS - 60, CITY				
Officer Name		Date Citation	n Served,	Method	
OFFICER M. OTTO		01/05/2022		MAILED	
		Residence	Contact Name		Age
Officer ID Department					
9829 WEST ALLIS POLICE I	(If left with	(If left with person at defendant's address)			

instructions do not apply to you.

APPEARANCE NOT MANDATORY?

IF YOU WISH TO DISPUTE THE CITATION, you must either appear in court or enter a not guilty plea by mail prior to your court date. You may do so even if you have already paid the deposit or posted a bond. Please include either:

- a photocopy of your citation, OR
- your correct name and mailing address, citation number, court appearance date listed on the citation, offense, and arresting police agency.

These should be mailed to the court address written under YOU ARE NOTIFIED TO APPEAR. The court will schedule another court date and/or a trial before a judge without a jury.

WISCONSIN NON TRAFFIC CITATION AND COMPLAINT

not wish to contest the citation. Please include either:

- a photocopy of your citation,

- your correct name and mailing address, citation number, court appearance date listed on the citation, offense, and arresting police agency.

Make check payable to the clerk of court and mail it to the court address written under YOU ARE NOTIFIED TO APPEAR. You do not need to appear. The court will either:

- accept your nonappearance as a plea of no contest, find you guilty and keep the deposit amount as payment for your citation;

 OR keep the deposit amount as payment for your citation;
- decline to accept the deposit and order you to appear in court by summons or warrant.

IF YOU DO NOTHING, the court may either: OR

- issue a summons for you to appear in court,
- find you guilty for failing to appear in court and order you to pay the forfeiture and costs imposed by the court.

You are Notified to Pay or Appear Date Time			Form No. and Version CT		CITA	CITATION NO. *	
Appearance Required:	NO MAR-07-2	022	Time 08:30 AM	MUNI	0405	1S80	51TK8S
WEST ALLIS CITY MUNIC		022	00.00 AN	Juvenile	DI	EPOSIT Ca	ash- Card
11301 W LINCOLN AVE WEST ALLIS, WI 53227					\$2	250.00	N N
(414) 302-8181 WWW.W				Court Use: DA	N		
and the contract of the contra	st, Middle), Street Address, P	O. Box, C	ity, State, Zip		th Date	Sex	Race
LYNCH, BRIAN J	AMES				4/1993	М	W
2048 S 70TH ST MILWAUKEE WI 53219				HT 510			Eyes N HAZEL
Driver License/Identificat	ion Card Number	State	Exp. Yr.			ent/Guardian/Leg	al Custodian
L520-0709-3214	-05	WI	2028	(If minor defen	dant)		
Other Identification Num	ber	ID T	ype				
License Plate Number	Plate Type	State	Exp. Yr.				
907YXT	AUT	WI	2022				
Vehicle Identification Nu	ımber	Telepho	one Number	Telephone Nur	mber of Pare	ent/Guardian/Leg	al Custodian
3FAFP37313R110704							
Plaintiff		Ordinance	e Violated		Ad	dopting State Sta	tute
CITY OF WEST ALLIS		WA-6.	015(2)				
Violation Description						Aganay Cagaa	
						Agency Space 22-000395	
Ordinance Description						22-000395	
ABANDONED VEH	ICLE (PUBLIC NUISA	NCE)					
Week Day Date		•					
TUESDAY 01/04/2022	01:12 AM						
From/AT Hwy No. and/o	or Street Name						
ON S 70TH ST 287 FT I	N OF W BECHER ST						
County	City/Village/To	wn					
MILWAUKEE - 40	WEST ALLIS	- 60, CITY					
Officer Name		-		Date Citation	Served,	Method	
OFFICER M. OTTO			w.	01/05/2022		MAILED	
				Residence C	ontact Name	•	Age
Officer ID Departme	ent			-			45
9829 WEST ALLIS POLICE DEPARTMENT				(If left with pe	rson at defe	ndant's address)	
			ONS - READ CAF	REFULLY -			
MANDATORY APPEARANCE appearance, you MUST appear in	E? If your citation is marked as a court. The appearance not mar	a mandatory ndatory		O NOT WISH TO ount on the citation	by the court of	THE CITATION, state, with a stateme	simply mail in the nt saying you do

APPEARANCE NOT MANDATORY?

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- decline to accept the deposit and order you to appear in court by summons or warrant.

IF YOU DO NOTHING, the court may either: - issue a warrant for your arrest,

- - OR
 - OR
- issue a summons for you to appear in court, - find you guilty for failing to appear in court and order you to pay the forfeiture and costs imposed by the court.



N & S TOWING, INC. 1719 So. 83rd Street • West Allis, WI 53214 476-8697 • Fax 476-7828





TOWED FOR Brian James Lynch DATE 1, 4,22	CASH	
ADDRESS 811 C. Linus St. Lowerro# 53207 PO#	CHARGE	120
FLATBED (TOW) SERVICE CALL MAKE FORD FOCUS YEAR	TRUCK #	C.S.
LICENSE #907-YXT STATE WIT WA 3548 - 2049 S. 7045.	65	00
VIN # MILEAGE		
NAME		
ADDRESS PHONE () -		
DL# 620 -0709-3214-05 DOB 0114 193 ADVANCE CHARGES		
ACC# EXP: 0644128 STORAGE / / TO H 126	25.	00
I agree to not hold N&S Towing responsible for damages done to my vehicle due to services provided by them unless negligence can be proven and also I AUTHORIZATION # 554624 TAX	4.	95
agree to pay total amount of invoice according to card issuers agreement and/or N&S Towing's billing policy if credit voucher.	94	95
48024		
OWNER/ REPRESENTATIVE DRIVER		

N&S Towirty Inc 17.3 S 83rd St MILVAUKEE, WI 53214 414-476-8697 39300981856080

SALE

Store: 0001 Term: 0002 REF#: 00000014 002 RRN: 200420414304 14:57:16 Chip Trans ID: 582004754366599 APPR CODE: 004624 VISA Batch #: 002 MID: 6080 01/04/22

APPROVED

\$94.95

AMOUNT

THANK YOU! VISA CREDIT
AID: A0000000031010
TVR: 80 80 00 80 00
TSI: 68 00

CUSTOMER COPY