MAY 16 2023





CLAIMANT CONTACT INFORMATION

Name: STEVEN STERN Phone: 414 218 - 8766 Address: W124 S 9529 WEATHERWOOD Email:
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: 5 - 1 - 23 Time of day: 10 '. as AM ARRAN Location: CITY YABD
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.
I WAS HOOKING UP A ROAD PLATE TO
THE LOADER BUCKET, MY PHONE WAS IN
MY UPPER LEFT POCKET, IT SLIPPED OUT
AMD HIP THE ROAD PLATE AND THE SCREEN SHATTERED
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: 5-6-23
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: \$ <u> </u>

SAVE

PRINT



7440 West Holmes Avenue Greenfield, WI 53220

414-615-8988

Sale: 20968860

Merchant ID:45045809977004

Your Tech: Joseph G.

Sale Completed: 5/2/23 at 6:07 PM

Customer: Steven Stern Contact: 414-218-8766

Work Order: 18899214

IMEI: 353644933869644

SKU	Item	Price
23798	Google Diagnostic	\$0.00
406799	Google Pixel 7 Glass/LCD, G949 - 00322-01	\$204.99
	Sub-Total	\$204.99
	Sales Tax (5.5%)	\$11.27
	Total	\$216.26
, CC	Auth: 01875P - M/C ***********0282	-\$216.26
	Amount Due	\$0.00

For repairs not covered by an OEM Warranty or protection program: