Received 5/26/26
Andrew V.

CLAIMANT CONTACT INFORMATION

Name: Corrine Helback
Address: 14101 West Lilac Lane
New Berlin, WI 53151

Phone: 262-782-0026 & 262-424-9023 (cell)
Email: dacory@SBCglobal.net

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: 05/12/2026 Time of day: 03:15
Location: 200 block south on 92nd street

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.

Driving south on 92nd street, hit a pot hole that blew out my tire. Had to wait 2 hours for AAA to come and put on my spare. It was not a happy day - either with West Allis streets or AAA road service. Couldn't drive my car for six days because I no longer had a spare. I got a new tire on Monday May 18th. The cost was $260.27..

Check one:

- [x] ..... 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: Corrine J Helback Date: 05/20/2026

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: $ 260.27

SAVE PRINT

Ravenswood Auto Center, INC.
14001 W Cleveland Ave
New Berlin, WI. 53151
Phone: 262-784-6300 Fax: 262-784-7739

INVOICE
66889

INVOICE

Print Date: 05/18/2026 **Work Completed: 05/18/2026**

HELBACK, CORRINE
14101 W LILAC LN
NEW BERLIN, WI 53151
Home: 262-782-0026 Cellular: 262-424-9023
Cust ID : 14040

2019 Buick - LaCrosse Premium - 3.6L, V6 (223CI) VIN(S)
Lic # : C0RYJ - WI Odometer In : 37,651
Unit # : Odometer Out :
VIN # : 1G4ZT5SS1 **KU102604**

Part Description	Qty	Sale	Extd
235/50R18 97V ContiProContact TX AS (TPC) BLK Size: 2355018	1.00	201.13	201.13
TIRE DISPOSAL	1.00	5.00	5.00
VALVE STEM - 950 (TPMS)	1.00	6.75	6.75

Labor / Description	Extd
TIRE REPLACEMENT	35.00
REPLACE TIRE, MOUNT AND BALANCE, INSTALL ON VEHICLE - HAND TORQUE WHEELS	
ALL TIRES SET AT 35 PSI. R-REAR TPMS SENSOR DEAD.	

YOU ARE ENTITLED TO A PRICE ESTIMATE FOR THE REPAIRS YOU HAVE AUTHORIZED. THE REPAIR PRICE MAY BE LESS THAN THE ESTIMATE, BUT WILL NOT EXCEED THE ESTIMATE WITHOUT YOUR PERMISSION. YOUR SIGNATURE WILL INDICATE YOUR ESTIMATE SELECTION.
1. I request an estimate in writing before you begin repairs_____
2. Please proceed with repairs, but call me before continuing if the price will exceed $_____
3. I do not want an estimate. _____

Payment will be made by ☐ Cash ☐ Check ☐ Credit ☐ Credit Card

[Payments -]

Labor:	**35.00**
Parts:	**212.88**
Sublet:	**0.00**
Sub:	**247.88**
Tax:	**12.39**
Total:	**260.27**
Bal Due:	**$260.27**

[Technicians : BOB, ; Visk, Andrew]

Do you want the replaced parts you are entitled to? ☐ Yes ☐ No

Revision # 1, Previous Estimate Amount: 0.00, Additional Cost: 260.27, Revised Estimate: 260.27, Parts: $212.88 Labor: $35.00 Sublet: $0.00 Taxes & Fees: $12.39 Authorized by - HELBACK, CORRINE, Date - 5/18/2026, Time - 1:34 PM, Initiated By - Shop, Written By - Carlson, Chris, Phone Number - Home: 262-782-0026

Motor vehicle repair practices are regulated by chapter ATCP 132 Wis. Adm. Code, administered by the Bureau of Consumer Protection, Wisconsin Dept. of Agriculture, Trade and Consumer Protection, P.O. Box 8911, Madison, Wisconsin 53708-8911

☐ This vehicle received without face to face contact.

_____
Shop Representative

Having authority to do so I hereby order the above products and services, parts, and labor and grant permission to you and/or your employees to operate the vehicle described for the purpose of testing and/or inspection. I agree to pay cash when the work is completed or to pay on the other terms satisfactory to you. Until paid in full, the amount owing on this work shall constitute a lien on the motor vehicle. If collection is made by suit or otherwise, I agree to pay storage and collection and reasonable attorney's fees.

Customer Sign: _____ Date: _____

Visit us on the web : http://www.newberlinautorepair.com/

Our Email Address: *ravenswoodauto@yahoo.com*

Written By: Carlson, Chris

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