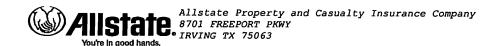


Allstate Property and Casualty Insurance Company 8701 FREEPORT PKWY IRVING TX 75063

իլիանիդիկիսակինակինիանիկինակինիանը

WAUWATOSA CITY ATTORNEY 7725 W NORTH AVE WAUWATOSA WI 532131720

0751418880 FDG



արավունինիրի անականի անդանականին արագահանին հայանականում և առաջան անականում և հայանական հայանական հայանական հ

WAUWATOSA CITY ATTORNEY 7725 W NORTH AVE WAUWATOSA WI 532131720

June 03, 2024

CLAIM NUMBER: 0751418880 FDG DATE OF LOSS: April 12, 2024

OUR INSURED: ANNETTE LAUR

YOUR FILE NUMBER: Unknown please provide

YOUR INSURED: Wauwatosa Police Department Dexter Schleis

ADDRESS:

CITY STATE ZIP: Wauwatosa, WI, 53266

LOSS LOCATION: BURLEIGH STREET, WAUWATOSA, , WI

AMOUNT OF LOSS: \$9,645.36

Re: Subrogation Claim Notice

Dear WAUWATOSA CITY ATTORNEY,

Our investigation indicates your insured was responsible for the loss referenced above.

Please accept this letter as notice of our subrogation claim. Enclosed, you will find copies of the supporting documents for which we are seeking reimbursement. To assist you in your review, the following is a breakdown of our subrogation demand:

PHONE NUMBER: 972-871-4553

FAX NUMBER: 866-447-4293

OFFICE HOURS:

Auto Damage (Company Paid):	\$8,305.36
Rental:	\$840.00
Towing:	\$
Other:	\$
Deductible (Customer Paid):	\$500.00
Salvage Recovery:	\$
Insured Out of Pocket (please send directly to our Insured):	S

Please forward your payment with our claim number to:

Allstate Payment Processing Center P.O. BOX 650271 Dallas, TX 75265 0271

Be advised that any amounts received from you for less than the amount demanded will be considered an undisputed partial payment amount only, and we retain the right to pursue full payment.

We ask that you direct any future correspondence to the address listed at the top of this letter.

If corresponding by e-mail, please send to <u>claims@claims.allstate.com</u> and refer to the Allstate claim number on the subject line. Thank you.

Sincerely,

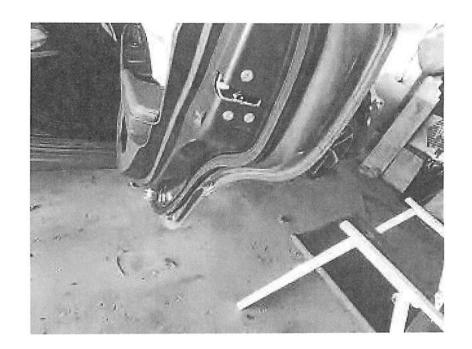
DAWN GANN

DAWN GANN 972-871-4553 Allstate Property and Casualty Insurance Company Report Date: 06/03/2024

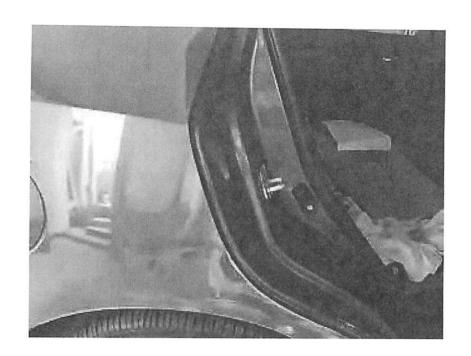
Payment Ledger

Policy Holder:	ANNETTE LAUR	Total Amount Paid	\$9,145.36	
Participant:	ANNETTE LAUR	Medical Deductible:	\$0.00	
Date of Loss:	04/12/2024	Co-payment Amount	\$0.00	
Claim Number:	0751418880			

Payment/Credit Date	Payee/Payor	Check#		Amount
05/31/2024	ENTERPRISE HOLDINGS INC	14764	s	840.00
05/29/2024	CRASH CHAMPIONS #0600 WAUWATOSA	14762	\$	8,305.36

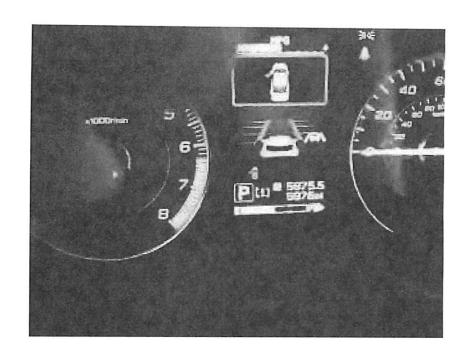












JOHN THE MUFFLER MAN 2313 W WELLS MILWAUKEE, WI 53233

	414-344-2740			
5/23/2024 R:13:11 AM CDT	Invoice #43923			Pege:1
CRASH CHAMPIONS LLC.,			Phone: 41	4-475-5926
		Service Writer	: MK	
Vehicle : 2022 Subaru Impreza	2.0 L 1995 CC H4 DOHC 16 Valve	Tag/State	: AMC-1441/WI	
VIN : 453GKAL6XN3601176				
Fleet #/Driver ;		Odometer In	: 5996 - 5996	
Created : 5/21/2024 1:31:36 PM Invoiced : 5/23/2024 8:12:40 AM		Odometer Out	2999	
Labor/Notes				
Oty Technician Reference	Description		Urst Price	Price
7 IVS LABOR	LABOR- INSTALL NEW TPMS SENSOR ON CUSTOMERS PROVIDED (NEW) W PASSENGER REAR	AND INSTALL TIRE HEEL ON THE	\$139,99	\$97.99
2 JVS ALIGNMENT	WHEEL ALIGNMENT		\$139.95	\$139.95
WHEEL WAS TORQUED DOWN	TO SPECIFICATION			
Parts	2	Condition	Unit Price	Price
Ony Cude Baference 1 ATD 15ENSOR	Tire Pressure Monitoring System (TPMS) Se		\$47.96	\$47.96
, Alto Isenson	Assembly PASSENGER REAR			
		and the morning contract	******	\$237.94
				\$47.96
	Supplies	11 (11.1 11.1 11.1 11.1 11.1 11.1 11.1		\$5.72
			Total	\$291.62
		P	AYMENT	\$0.00
		BALAI	NCE DUE	\$291.62
Technician Code Certification #				
1/3	Approvals			
Date & Time Total Amount	Authorized By N	tethod	Emple	
damage to vehicle or articles left in vehicle permission to operate the vehicle herein de	of forth to be done along with the necessary in case of Sie, theft or any other cause beyon socialed on streets, highways or elsewhere to be on above vehicle to secure the amount of a STORAGE FEE. 24 Month or 24,000. Mile V	regains thereto. All Vehicles	ang/or inspection. Ar	n employees n express
Customer Signature				

INTERPRETARION DESCRIPTION NAMED

Find text or tools Q

同

6242 W State St Wauwatosa, WI 53213

Invoice Number: RO Number:

110541 500000901

Date:

5/21/2024 6:51 AM

2022 Year:

Subaru

Estimator/Customer Service Advisor:

Model: Impreza Sport w/Continuously

Variable Transmission

Bojcevski, Cindy

VIN:

Make

4S3GKAL6XN3601176

Service	MITTO	ant's Labor	IN.
Initializations/R	elearn	Steering Angle	Sensor

Technician

-Performed function for steering angle calibration -Proceeded with steering angle check through live data

Steering Angle Sensor Calibration successful; true 0 degrees displayed white steering wheel centered at this time 95.00 95.00

Hrs Part

Dynamic - Lane Keep Assist System (LKAS)

Technician

Performed vehicle system health check

Verified tire pressures at specification.
Proceeded with function for take keep assest camera learn mode.
Completed front camera calibration by performing a "Learn Drive Cycle" function while driving the vehicle.
Performed vehicle system reset, reset successfully.

Test drove vehicle

Calibration successful, LKAS operating normally at this time 250.00

250.00

Static - Lane Keep Assist System (LKAS)

Technician.
-Performed vehicle health check

Calibration was successful, LKAS operating normally at this time

350.00

350.00

Subtotal \$ Taxes 5 Invoice Total \$

695.00 0.00

695,00

Thank you for your business

06:49:18 PAGE 1 OF 1

483.91

PAY THIS AMOUNT

0.00

TAX

483.91

SUBTOTAL

INVOICE DATE 04/19/24 483.91 Schlossmann's Subaru City 4640, 5,27th, 5t. Milwaukes, Wi 5221 Phone (414), 281-9100 Fax: (414), 281-9100 Parts Direct; (414), 482-9697 Parts Fax: (414), 281-1279 BRANDON SOLD BY 698.28 LIST CHARGE -0 wI-a PAY BIN SPORD SHIP VIA DEL

PNL SD OUT Q

51439FL06A9P SP

SHIP QTY | B. O. QTY |

PART NUMBER / DESCRIPTION

T WAUWATOSA@CRASHCHAMPIONS, COM CRASH CHAMPIONS - TOSA 6242 W STATE ST WAUWATOSA, WI 53213

m---

562329

562329

CILL

SCHLOSSMANN

CUST NO. | TAX EXEMPT NUMBER | CUST. P. O. NO.

60000000

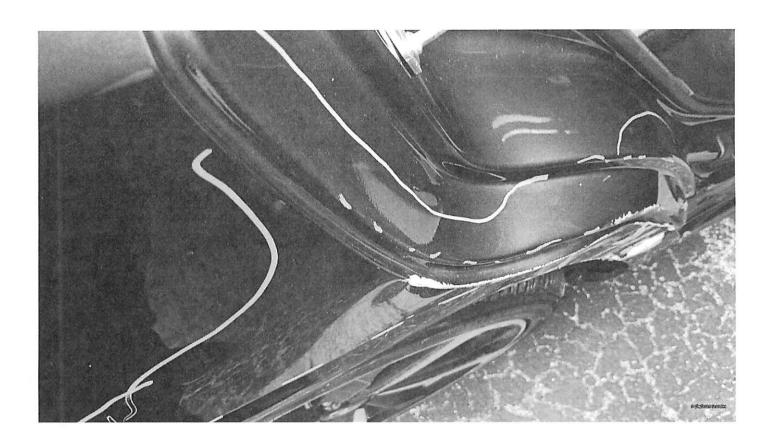
217406 456-1030462461-04 414-475-5926 T#5

INVOICE NO.

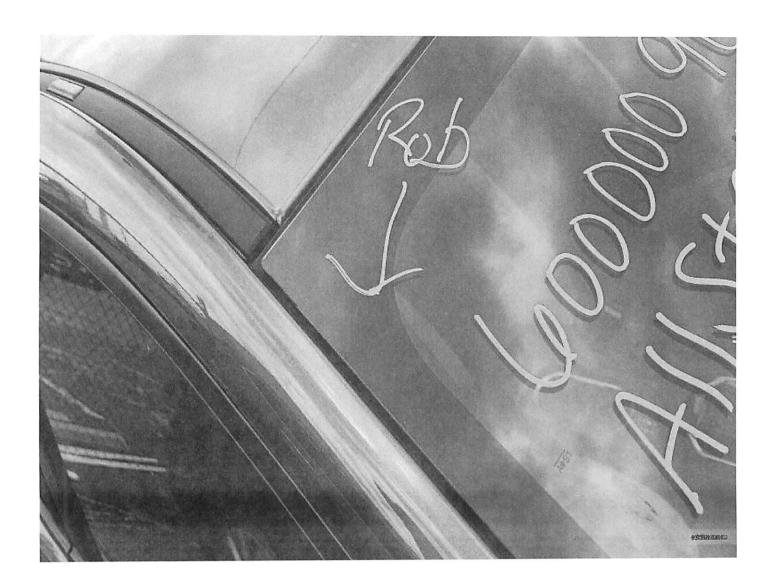
PARTS INVOICE ALL CLAMS AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS INVOICE NO RETURNS ON ELECTRICAL. OR SPECIAL, ORDER PARTS. NO RETURNS AFTER 30 DAYS, 10% RE-STOCK CHARGE ON ALL RETURNED PARTS.
THE SELER HERBER EXPRESSEY DISCLAIMS ALL WARRANTIES, EITHER EXPRESS OR IMPLIED, INCLUDING ALL IMPLIED WARRANTIES OF MEICHANTABILITY OF FITNESS FOR THE PARTICULAR PURPOSE. AND THE SELLER NEITHER ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT ANY LABILITY IN CONNECTION WITH THE SALE OF THESE PARTS.

CUSTOMER COPY.

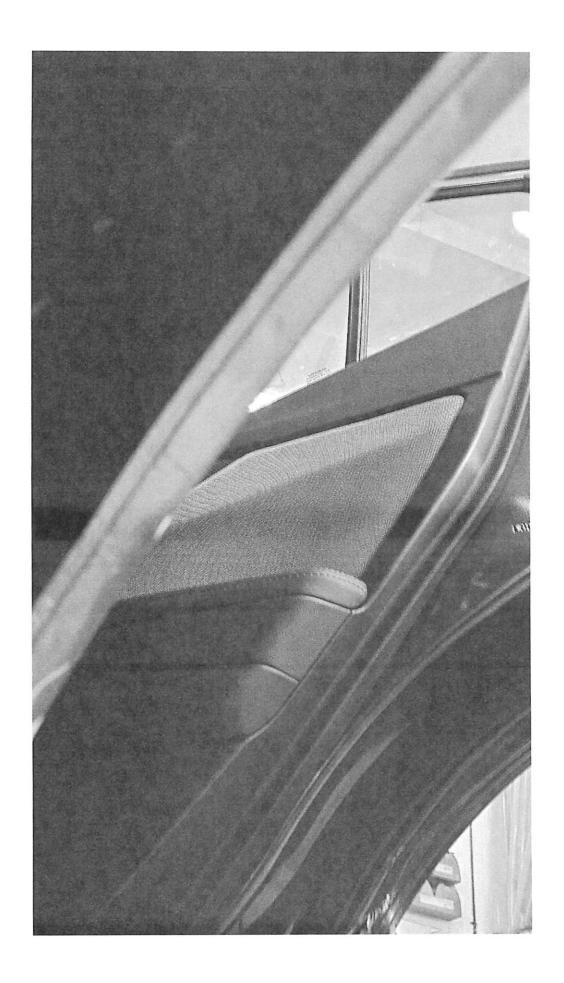




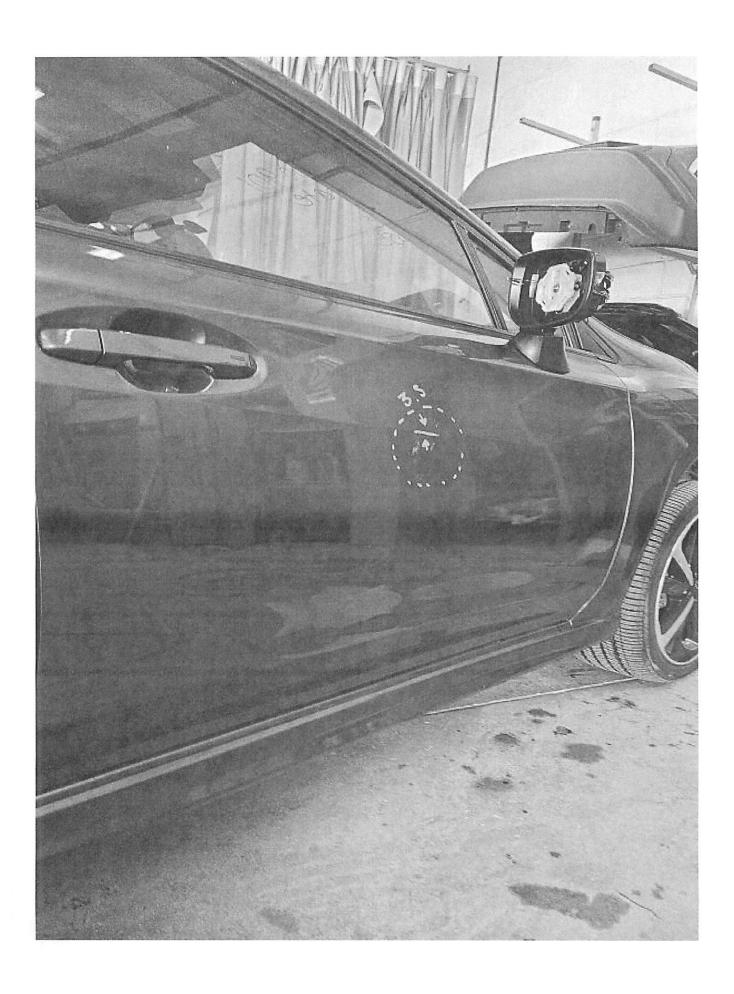




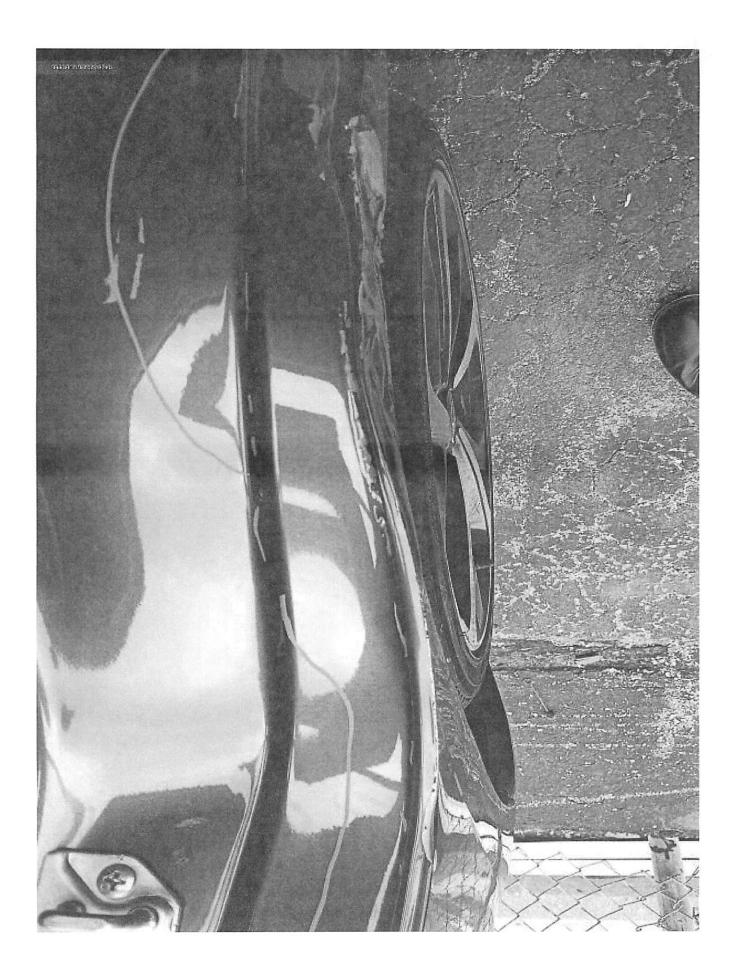


























Rental Company:

ıy: =

Enterprise Rent-A-Car

\$840.00

4406D45B9QG

Alternate Invoice Number:

Invoice:

45B9QG

Bill To: ALL55A1

ALLSTATE INSURANCE

ATTN:ESCALATED RNTLS *ALLSTATE

PO BOX 385005

BIRMINGHAM, AL 35238
RENTER INFORMATION:

Renter: LAUR, ANNETTE

Address:

Home Phone: Office Phone:

LAUK, ANNETTE

Office Phone:

RENTAL INFORMATION:

Rental Branch Location:

ENTERPRISE RENT-A-CAR(4406)

1750 N MAYFAIR RD

WAUWATOSA, WI 532263020

ADDITIONAL CLAIM INFORMATION:

Claim Number: 0751418880

Claim Type: Insured

Vehicle Condition: Driveable
Date Of Loss: 04/12/2024
Insured Name: LAUR,ANNETTE
Owner's Vehicle: 2022 SUBARU

ERAC Reference Only: BRANCH NOTIFIED Estimate or Last Supplement Date: 05232024

MOI: DRP

NextGen Occurrence: 1

Repair Status: VehicleDelivered

ACV Agree Date: SLA End Date:

Policy Max Date: 05252024 Total Repair Cost: 8805.36

Escalated Y/N: No

Policy Max Notification Date: 05212024

Escalation Reason: Total Loss Indicator: No SLA Start Date:

SLA Start Date:
Date Repair Started:
Date Vehicle Delivered:

Date Escalated:

Claimant ID Number: 01 Coverage Code: UU Policy # of Days Limit:

Repair Facility:

CRASH CHAMPIONS #0600-WAUWATOSA

WAUWATOSA, WI 532132906

(414) 475-5926

VEHICLES RENTED:

Effective Date	Time	Year	Make	Model	VIN	Mileage
04/26/2024	10:51 AM	2022	CHEV	MALI	1G1ZD5ST3NF115835	44

RENTAL DETAIL:

Rental Period: 04/26/2024 to 05/23/2024 (28 days)

Billed Period: 04/26/2024 to 05/23/2024 (28 days)

Description	Quantity	Rate	Amount
TIME & DISTANCE	28	\$30.79	\$862.12
YOUNG RENTER FEE	28	\$0.00	\$0.00
TITLE AND REGISTRATION FEES	28	\$0.99	\$27.72
SALES TAX	1	5.90%	\$52.50
Tota	l Charges:		\$942.34
Less Amount	Received:		\$102.34

Total Amount Due:

Rental Invoice

Please Return This Portion with Remittance

Make Payment To:

ENTERPRISE RENT-A-CAR

P.O. BOX 840086

KANSAS CITY, MO 641840086

Federal ID: 43-0724835

Total Charges:

Less Amount Received:

Total Amount Due.....

Please Include on your Check: Invoice:4406D45B9QG

\$942.34 \$102.34

\$840.00

CRASH CHAMPIONS #0600 WAUWATOSA

Workfile ID: Federal ID: State EPA:

APW6ELWP 47-1529314 WIR000103960

We Believe The Difference is Trust 6242 W State Street, Wauwatosa, WI 53213 Phone: (414) 475-5926

Supplement of Record 4 with Summary

RO Number: 600000901

Written By: Cindy Bojcevski, 5/29/2024 3:11:50 PM Adjuster: Johnson, William, (917) 449-2795 Cell

Insured:

LAUR, ANNETTE

Type of Loss:

Collision

Point of Impact: 05 Right Rear

Policy #:

Date of Loss:

000811700941

4/12/2024 9:30 AM

Claim #:

000751418880D01

Days to Repair:

Owner:

LAUR, ANNETTE

Inspection Location: LAUR, ANNETTE

Insurance Company:

ALLSTATE PROPERTY AND CASUALTY

INSURANCE COMPANY Allstate Property and Cas

WISCONSIN **BROOKFIELD**

VEHICLE

2022 SUBA Impreza Sport w/Continuously Variable Transmission 4D SED 4-2.0L Gasoline Gasoline Direct Injection Magnetite Gray Metal

VIN: License: 4S3GKAL6XN3601176

Interior Color:

Production Date:

Black

Mileage In: Mileage Out: 5,976

Vehicle Out:

5/23/2024

State:

WI

AMC1441

Exterior Color:

Magnetite Gray Metal 8/2021

Condition:

5,976 Good

Job #:

60000901

TRANSMISSION

Automatic Transmission 4 Wheel Drive

POWER Power Steering

Power Brakes

Power Windows

Power Locks

Power Mirrors Heated Mirrors DECOR

Dual Mirrors Tinted Glass Console/Storage

Overhead Console **CONVENIENCE**

Air Conditioning

Intermittent Wipers Tilt Wheel Cruise Control Rear Defogger

Keyless Entry Alarm

Message Center

Steering Wheel Touch Controls Telescopic Wheel Remote Starter Backup Camera Intelligent Cruise

RADIO AM Radio FM Radio

Stereo Search/Seek **CD Player**

Auxiliary Audio Connection

Satellite Radio **SAFETY**

Drivers Side Air Bag Passenger Air Bag Anti-Lock Brakes (4) 4 Wheel Disc Brakes Front Side Impact Air Bags Head/Curtain Air Bags

Communications System Hands Free Device Lane Departure Warning

ROOF

Luggage/Roof Rack

SEATS Cloth Seats **Bucket Seats**

Reclining/Lounge Seats

Heated Seats WHEELS

Aluminum/Alloy Wheels

PAINT

Clear Coat Paint Metallic Paint **OTHER**

Traction Control Stability Control Rear Spoiler

Signal Integrated Mirrors Power Trunk/Liftgate

Supplement of Record 4 with Summary

RO Number: 600000901

2022 SUBA Impreza Sport w/Continuously Variable Transmission 4D SED 4-2.0L Gasoline Gasoline Direct Injection Magnetite Gray Metal

Line			Oper	Description	Part Number	Qty	Extended Price \$	Labor	Paint
1	#			ESTIMATE SHARE IS THE FASTEST WAY TO PROCESS SUPPLEMENTS		1	0.00	0.0	0.0
2	#			PAYMENT NOT ISSUED		1	0.00	0.0	0.0
3	#	S04	Subl	4WA - Four Wheel Alignment		1	99.95	0.0	0.0
4	#	S04	Subl	Mount and Balance Wheel/Tire		1	20.00	0.0	0.0
5	**	S03	Subl	A/M Valve stem		1	5.72	X 0.0	0.0
6	WHEELS								
7	**	S02	Repl	RECOND Wheel, alloy 18"	28111FL27A	1	310.66	m <u>0.1</u>	0.0
8	ROOF								
9		S01	R&I	RT Roof molding		0	0.00	0.5	0.0
10	PILLARS	, ROC	KER &	FLOOR					
11		S01	R&I	RT Sill trim rear		0	0.00	Incl.	0.0
12		S01	R&I	RT Body w'strip rear door		0	0.00	0.3	0.0
13		S02	R&I	RT Rocker molding paint to match		0	0.00	0.9	0.0
14	FRONT D	OOR							
15	*	S01	Rpr	RT Door shell		0	0.00	<u>3.5</u>	2.0
16				Add for Clear Coat		0	0.00	0.0	0.8
17	*	S01	R&I	RT Belt w'strip black		0	0.00	<u>0.3</u>	0.0
18	#	S01	Refn	Partial Refinish w/ Full Clear		0	0.00	0.0	-0.2
19		S01	R&I	RT Cover		0	0.00	0.1	0.0
20	*	S01	R&I	RT Applique upper		0	0.00	<u>0.2</u>	0.0
21	*	S01	R&I	RT Applique rear from 07/31/2017		0	0.00	<u>0.2</u>	0.0
22		S01	R&I	RT Handle, outside w/o keyless start paint to match		0	0.00	0.4	0.0
23		S01	R&I	RT R&I trim panel		0	0.00	0.5	0.0
24		S01	R&I	RT Water shield w/premium audio		0	0.00	0.1	0.0
25	*	S01	R&I	RT Mirror glass		0	0.00	<u>Incl.</u>	0.0
26	*	S04	Repl	RCY RT Mirror assy w/o blind spot detection +25%	91036FL07B	1	<u> 268.75</u>	<u>0.7</u>	0.0
				Note: QUOTED PART COMES COMP	LETE from LKQ 866-727-4	1437 QU	OTE#10806363	3	
				LABOR: Time includes R&I/R&R sign	nal lens, mirror glass, cove	er and lov	ver cover.		
27	*	S04	R&I	RT Cover paint to match		0	0.00	<u>Incl.</u>	0.0
28		S01	Refn	RT Cover paint to match		0	0.00	0.0	0.5
29		S01		Overlap Minor Panel		0	0.00	0.0	-0.2
30		S01		Add for Clear Coat		0	0.00	0.0	0.1
31	REAR DO	OOR							
32		S01	Repl	RT Door shell sedan	60409FL06B9P	1	775.10	5.2	3.0
				Note: parts search LKQ 866-727-44	37 not cost effective QT#	1080636	3		
33				Overlap Major Adj. Panel		0	0.00	0.0	-0.4

Supplement of Record 4 with Summary

RO Number: 600000901

2022 SUBA Impreza Sport w/Continuously Variable Transmission 4D SED 4-2.0L Gasoline Gasoline Direct Injection Magnetite Gray Metal

34				Add for Clear Coat		0	0.00	0.0	0.5
35	*		R&I	RT Belt w'strip sedan black		0	0.00	<u>Incl.</u>	0.0
36			R&I	RT Handle, outside paint to match		0	0.00	Incl.	0.0
37			R&I	RT R&I trim panel		0	0.00	Ind.	0.0
38	*	S01	R&I	RT Applique front from 07/31/2017		0	0.00	<u>0.2</u>	0.0
39		S01	Repl	RT Applique rear, sedan	90422FL16A	1	2.92	0.2	0.0
40		S01	Repl	RT Applique upper sedan	90422FL14A	1	3.47	0.2	0.0
41		S01	R&I	RT Striker		0	0.00	Incl.	0.0
42	#	S02	Repl	Mask jambs		1	5.00	0.3	0.0
43	QUAR'	TER PAN	IEL						
44	*	S04	Rpr	RT Outer wheelhouse		0	0.00 s	<u>5.0</u>	<u>0.2</u>
				Note: Body time is for after body pulls Paint time reduced to reflect for repairs					
45	#	S01	R&I	Battery D&R (Disconnect and Reconnect Before Welding/Repair0		0	0.00	0.3	0.0
46	*	S01	Blnd	Fuel door		0	0.00	0.0	0.3
47	#	S01		Clear wrap upper rail		1	0.00	0.0	0.6
48	#	S01	Rpr	Set-Up for Floor Pull		0	0.00	1.0	0.0
49	#	S02	Rpr	Body Pull / Floor Pull		0	0.00	2.0	0.0
50		S04	Sect	RT Quarter panel w/Sport cut in sail panel	51439FL06A9P	1	698.28	23.1	3.4
51		S04		Overlap Major Adj. Panel		0	0.00	0.0	-0.4
52		S04		Add for Clear Coat		0	0.00	0.0	0.6
53	#	S03	Rpr	Attempted Quarter Repair		0	0.00	2.0	0.0
54	*	S04	R&I	RT Splash shield	-	0	0.00	Incl.	0.0
55	REAR	BODY &	FLOO	R					
56	*	S04	R&I	RT Trunk side trim		0	0.00	<u>Incl.</u>	0.0
57		S01	R&I	Rear panel trim		0	0.00	Incl.	0.0
58		LAMPS							
59	*	S04	R&I	RT Tail lamp		. 0	0.00	Incl.	0.0
60	REAR	BUMPE				_			
61		S01	R&I	R&I bumper cover		0	0.00	Incl.	0.0
62	•	S01	Rpr	Bumper cover w/o reverse sensors		0	0.00	<u>0.5</u>	0.0
				Note: BUFF ONLY		٠			
63	#	S01		Rope glass (RT Frnt Pillar)		1	0.00	0.3	0.0
64		LE DIAC					100.00		
65 66	# #	S03 S03	Subl Subl	-		1	180.00	0.0	0.0
				Angle Sensor		1	95.00	0.0	0.0
67	#	S03	Subl	System (LKAS)		1	250.00	0.0	0.0
68	#	S03	Subl	Static - Lane Keep Assist System (LKAS)		1	350.00	0.0	0.0

Supplement of Record 4 with Summary

RO Number: 600000901

2022 SUBA Impreza Sport w/Continuously Variable Transmission 4D SED 4-2.0L Gasoline Gasoline Direct Injection Magnetite Gray Metal

69	*	S03 S	ubl Program TPMS		1	<u>47.96</u> X m	0.0	0.0
70	MISC	ELLANEOUS	OPERATIONS					
71	#	S02 R	epl Corrosion Protection		1	15.00	0.0	0.0
72	#	S02	Cover Car for Overspray		1	5.00	0.0	0.0
73	#	S02	Cavity wax		1	15.00	0.3	0.0
74	#	S04	Urethane Kit		1	20.00	0.0	0.0
				SUBTOTALS		3.167.81	48.4	10.8

ESTIMATE TOTALS

Category	Basis		Rate	Cost \$
Parts				3,114.13
Parts Discount	\$ 1,479.77		-2.0 %	-29.60
Body Labor	48.4 hrs	@	\$ 70.00 /hr	3,388.00
Paint Labor	10.8 hrs	@	\$ 70.00 /hr	756.00
Paint Supplies	10.8 hrs	@	\$ 48.00 /hr	518.40
Miscellaneous				53.68
Subtotal				7,800.61
Sales Tax	\$ 7,746.93	@	5.0000 %	387.35
Municipal Tax	\$ 7,746.93	@	2.0000 %	154.94
County Tax	\$ 7,746.93	@	0.9000 %	69.72
Grand Total				8,412.62
Deductible				500.00
CUSTOMER PAY				500.00
INSURANCE PAY				7,912.62

RO Number: 600000901

2022 SUBA Impreza Sport w/Continuously Variable Transmission 4D SED 4-2.0L Gasoline Gasoline Direct Injection Magnetite Gray Metal

SUPPLEMENT SUMMARY

Line			Oper	Description	Part Number	Qty	Extended Price \$		Labor	Paint
Chang	ed Items									
3	#	S03	Subl	4WA - Four Wheel Alignment		1	-139.95		0.0	0.0
3	#	S04	Subl	4WA - Four Wheel Alignment		1	99.95		0.0	0.0
4	#	S03	Subl	Mount and Balance Wheel/Tire		1	-97.99		0.0	0.0
4	#	S04	Subl	Mount and Balance Wheel/Tire		1	20.00		0.0	0.0
26	*	S02	Repl	RCY RT Mirror assy w/o blind spot detection +25%	91036FL07B	1	-268.75		<u>-0.7</u>	0.0
				NOTE: QUOTED PART COMES COM	PLETE from LKQ 866-727	-4437 QU	OTE#1080636	3		
26	*	S04	Repl	RCY RT Mirror assy w/o blind spot detection +25%	91036FL07B	1	<u>268.75</u>		0.7	0.0
				NOTE: QUOTED PART COMES COM	PLETE from LKQ 866-727	-4437 QU	OTE#1080636	3		
				LABOR: Time includes R&I/R&R sign	nal lens, mirror glass, cove	er and lov	ver cover.			
27		S01	R&I	RT Cover paint to match		0	0.00		-0.3	0.0
27	*	S04	R&I	RT Cover paint to match		0	0.00		<u>Incl.</u>	0.0
44	*	S03	Rpr	RT Outer wheelhouse		0	0.00	S	<u>-6.5</u>	-0.2
				NOTE: Body time is for after body p Paint time reduced to reflect for rep						
44	*	S04	Rpr	RT Outer wheelhouse		0	0.00	S	5.0	0.2
				NOTE: Body time is for after body p Paint time reduced to reflect for rep						
54		S01	R&I	RT Splash shield		0	0.00		-0.4	0.0
54	*	S04	R&I	RT Splash shield		0	0.00		Incl.	0.0
56		S01	R&I	RT Trunk side trim		0	0.00		-0.3	0.0
56	*	S04	R&I	RT Trunk side trim		0	0.00		Incl.	0.0
59			R&I	RT Tail lamp		0	0.00		-0.4	0.0
59	*	S04	R&I	RT Tail lamp		0	0.00		<u>Incl.</u>	0.0
Delete	d Items									
50	**	S03	Sect	Opt OEM RT Quarter panel w/Sport cut in sail panel	51439FL06A9P	1	-691.30		-23.1	-3.4
51		S03		Overlap Major Adj. Panel		0	0.00		0.0	0.4
52		S03		Add for Clear Coat		0	0.00		0.0	-0.6
73	#	S01		Rope glass (RT RR Quarter)		1	0.00		-0.3	0.0
75	#	S02		Rope Glass - Backglass		1	0.00		-0.5	0.0
Added	Items									
50		S04	Sect	RT Quarter panel w/Sport cut in sail panel	51439FL06A9P	1	698.28		23.1	3.4
51		S04		Overlap Major Adj. Panel		0	0.00		0.0	-0.4
52		S04		Add for Clear Coat		0	0.00		0.0	0.6
74	#	S04		Urethane Kit		1	20.00		0.0	0.0
					SUBTOTALS		-91.01		-3.7	0.0

RO Number: 600000901

2022 SUBA Impreza Sport w/Continuously Variable Transmission 4D SED 4-2.0L Gasoline Gasoline Direct Injection Magnetite Gray Metal

TOTALS SUMMARY

Category	Basis		Rate	Cost \$
Parts				-91.01
Parts Discount	\$ 698.28		-2.0 %	-13.97
Body Labor	-3.7 hrs	@	\$ 70.00 /hr	-259.00
Paint Labor	3.6 hrs	@	\$ 70.00 /hr	252.00
Additional Supplement Labor				-252.00
Paint Supplies	3.6 hrs	@	\$ 48.00 /hr	172.80
Additional Supplement Materials/Supplies				-172.80
Subtotal				-363.98
Sales Tax	\$ -363.98	@	5.0000 %	-18.20
Municipal Tax	\$ -363.98	@	2.0000 %	-7.28
County Tax	\$ -363.98	@	0.9000 %	-3.28
Total Supplement Amount				-392.74
NET COST OF SUPPLEMENT				-392.74

CUMULATIVE EFFECTS OF SUPPLEMENT(S)

Estimate	2,595.11	WILLIAM JOHNSON
Supplement S01	4,537.73	Cindy Bojcevski
Supplement S02	-1,302.34	Cindy Bojcevski
Supplement S03	2,974.86	Cindy Bojcevski
Supplement S04	-392.74	Cindy Bojcevski
Job Total:	\$ 8,412.62	
CUSTOMER PAY:	\$ 500.00	
INSURANCE PAY:	\$ 7,912.62	

This estimate has been repaired based on the use of crash parts supplied by a source other than the manfacturer of the motor vehicle. Warranties applicable to these replacement parts are provided by the manufacturer or distributor of these parts rather than the manufacturer of your vehicle.

NO WARRANTY ON RUST.

PART PRICES SUBJECT TO CHANGE.

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 ESTIMATE HAS BEEN PREPARED BASED ON THE USE OF ONE OR MORE REPLACEMENT PARTS SUPPLIED BY A SOURCE OTHER THAN THE MANUFACTURER OF YOUR MOTOR VEHICLE. WARRANTIES APPLICABLE TO THESE REPLACEMENT PARTS ARE PROVIDED BY THE MANUFACTURER OR DISTRIBUTOR OF THE REPLACEMENT PARTS RATHER THAN BY THE MANUFACTURER OF YOUR MOTOR VEHICLE.

RO Number: 600000901

2022 SUBA Impreza Sport w/Continuously Variable Transmission 4D SED 4-2.0L Gasoline Gasoline Direct Injection Magnetite Gray Metal

Estimate based on MOTOR CRASH ESTIMATING GUIDE and potentially other third party sources of data. Unless otherwise noted, (a) all items are derived from the Guide ARL7597, CCC Data Date 05/16/2024, and potentially other third party sources of data; and (b) the parts presented are OEM-parts. OEM parts are manufactured by or for the vehicle's Original Equipment Manufacturer (OEM) according to OEM's specifications for U.S. distribution. OEM parts are available at OE/Vehicle dealerships or the specified supplier. OPT OEM (Optional OEM) or ALT OEM (Alternative OEM) parts are OEM parts that may be provided by or through alternate sources other than the OEM vehicle dealerships with discounted pricing. Asterisk (*) or Double Asterisk (**) indicates that the parts and/or labor data provided by third party sources of data may have been modified or may have come from an alternate data source. Tilde sign (~) items indicate MOTOR Not-Included Labor operations. The symbol (<>) indicates the refinish operation WILL NOT be performed as a separate procedure from the other panels in the estimate. Non-Original Equipment Manufacturer aftermarket parts are described as Non OEM, A/M or NAGS. Used parts are described as LKQ, RCY, or USED. Reconditioned parts are described as Recond. Recored parts are described as Recore. NAGS Part Numbers and Benchmark Prices are provided by National Auto Glass Specifications. Labor operation times listed on the line with the NAGS information are MOTOR suggested labor operation times. NAGS labor operation times are not included. Pound sign (#) items indicate manual entries.

Some 2024 vehicles contain minor changes from the previous year. For those vehicles, prior to receiving updated data from the vehicle manufacturer, labor and parts data from the previous year may be used. The CCC ONE estimator has a list of applicable vehicles. Parts numbers and prices should be confirmed with the local dealership.

The following is a list of additional abbreviations or symbols that may be used to describe work to be done or parts to be repaired or replaced:

SYMBOLS FOLLOWING PART PRICE:

m=MOTOR Mechanical component. s=MOTOR Structural component. T=Miscellaneous Taxed charge category. X=Miscellaneous Non-Taxed charge category.

SYMBOLS FOLLOWING LABOR:

D=Diagnostic labor category. E=Electrical labor category. F=Frame labor category. G=Glass labor category. M=Mechanical labor category. S=Structural labor category. (numbers) 1 through 4=User Defined Labor Categories.

OTHER SYMBOLS AND ABBREVIATIONS:

Adj.=Adjacent. Algn.=Align. ALU=Aluminum. A/M=Aftermarket part. Blnd=Blend. BOR=Boron steel. CAPA=Certified Automotive Parts Association. D&R=Disconnect and Reconnect. HSS=High Strength Steel. HYD=Hydroformed Steel. Incl.=Included. LKQ=Like Kind and Quality. LT=Left. MAG=Magnesium. Non-Adj.=Non Adjacent. NSF=NSF International Certified Part. O/H=Overhaul. Qty=Quantity. Refn=Refinish. Repl=Replace. R&I=Remove and Install. R&R=Remove and Replace. Rpr=Repair. RT=Right. SAS=Sandwiched Steel. Sect=Section. Subl=Sublet. UHS=Ultra High Strength Steel. N=Note(s) associated with the estimate line.

CCC ONE Estimating - A product of CCC Intelligent Services Inc.

The following is a list of abbreviations that may be used in CCC ONE Estimating that are not part of the MOTOR CRASH ESTIMATING GUIDE:

BAR=Bureau of Automotive Repair. EPA=Environmental Protection Agency. NHTSA= National Highway Transportation and Safety Administration. PDR=Paintless Dent Repair. VIN=Vehicle Identification Number.

RO Number: 600000901

2022 SUBA Impreza Sport w/Continuously Variable Transmission 4D SED 4-2.0L Gasoline Gasoline Direct Injection Magnetite Gray Metal

IMPORTANT INFORMATION ABOUT THE NAMED INSURANCE COMPANY'S PARTS POLICY.

THIS ESTIMATE MAY LIST PARTS FOR USE IN THE REPAIR OF YOUR VEHICLE THAT ARE MANUFACTURED BY A COMPANY OTHER THAN THE ORIGINAL MANUFACTURER OF YOUR VEHICLE. THESE PARTS ARE COMMONLY REFERRED TO AS AFTERMARKET PARTS OR COMPETITIVE PARTS, AND MAY INCLUDE COSMETIC OUTER BODY CRASH PARTS SUCH AS HOODS, FENDERS, BUMPER COVERS, ETC. THE INSURANCE COMPANY GUARANTEES THE FIT AND CORROSION RESISTANCE OF ANY AFTERMARKET/COMPETITIVE OUTER BODY CRASH PARTS THAT ARE LISTED ON THIS ESTIMATE AND ACTUALLY USED IN THE REPAIR OF YOUR VEHICLE FOR AS LONG AS YOU OWN IT. IF A PROBLEM DEVELOPS WITH THE FIT OR CORROSION RESISTANCE OF THESE PARTS, THEY WILL BE REPAIRED OR REPLACED AT THE INSURANCE COMPANY'S EXPENSE. THIS GUARANTEE IS LIMITED TO THE REPAIR OR REPLACEMENT OF THE PART. THE INSURANCE COMPANY DOES NOT SEPARATELY GUARANTEE THE PERFORMANCE OF ORIGINAL EQUIPMENT MANUFACTURER PARTS AND MAKES NO REPRESENTATION ABOUT THE AVAILABILITY OF ANY MANUFACTURER'S GUARANTEE.

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2022 SUBA Impreza Sport w/Continuously Variable Transmission 4D SED 4-2.0L Gasoline Gasoline Direct Injection Magnetite Gray Metal

PARTS SUPPLIER LIST

Line	Supplier	Description	Price
7	Wheels America	#68878_23030	\$ 310.66
	17349 Bell North Drive # 200	RECOND Wheel, alloy 18"	
	Schertz TX 78154	Quote: 2139268131	
	(210) 590-0602	Expires: 05/16/24	
26	LKQ Corp	#~380186209	\$ 215.00
	2101 Beloit Avenue	RCY RT Mirror assy w/o blind spot detection +25%	
	Janesville WI 53546	Side View Mirror (POWER MIRROR), MOULDED IN BLACK (NON-HEATED), R.,S#\$UA723	
	(800) 362 -94 51	Quote: 2467864328	
		Expires: 05/31/24	
39	Schlossmann Subaru City	#90422FL16A	\$ 2.92
	4640 S. 27th St	RT Applique rear, sedan	
	Milwaukee WI 53221	Quote: 2138962528	
		Expires: 05/16/24	
40	Schlossmann Subaru City	#90422FL14A	\$ 3.47
	4640 S. 27th St	RT Applique upper sedan	
	Milwaukee WI 53221	Quote: 2136985843	
		Expires: 05/16/24	

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2022 SUBA Impreza Sport w/Continuously Variable Transmission 4D SED 4-2.0L Gasoline Gasoline Direct Injection Magnetite Gray Metal

ALTERNATE PARTS USAGE

2022 SUBA Impreza Sport w/Continuously Variable Transmission 4D SED 4-2.0L Gasoline Gasoline Direct Injection Magnetite Gray Metal

VIN: 4S3GKAL6XN3601176

WI

Interior Color:

Black

8/2021

Mileage In:

Condition:

Job #:

Vehicle Out: 5/23/2024

License: AMC1441

State:

Exterior Color: **Production Date:** Magnetite Gray Metal

Mileage Out: 5,976

5,976

Good

60000901

Alternate Part Type	Selection Method	# Of Times Notified Of Available Parts	# Of Parts Selected	
Aftermarket	Manually List	2	1	
Optional OEM	Manually List	0	0	
Reconditioned	Manually List	2	1	
Recycled	N/A	4	1	



For tips on ordering visit: statetips.lexisnexisrisk.com

NOTE:

For Customer Support refer to the appropriate platform below:

Police Records Retrieval

800-934-9698

PoliceRecords.support@lexisnexisrisk.com

Accurint for Insurance

866-277-8407

Accurint.support@lexisnexisrisk.com

PAGE COUNT: 7									
CLIENT: 8810 DIVISION: ADJUSTER: OE09B5 CLAIM: 0751418880									
TRANSACTION #: 2530290114 DATE: 2024-05-22 12:15:51.0									
DATE OF LOSS: 04/12/2024 TIME OF LOSS: 9:30:0 STREET: BURLEIGH STREET CITY: WAUWATOSA COUNTY: MILWAUKEE STATE: WI									
INVESTIGATING AGENCY: WI HQ DMV REPORT NUMBER: DOT DOCUMENT # 1RL1FB0001 REPORT TYPE: AUTOACCIDENT PARTY1: ANNETTE D LAUR PARTY2: WAUWATOSA POLICE DEPT PARTY3:									
CAR: IMPREZA MAKE: SUBARU YEAR: 2022 TAG:									
ADDITIONAL INFO: UNKNOWN LOSS FACTS									

THANK YOU FOR YOUR ORDER!

WISCONSIN MOTOR VEHICLE CRASH REPORT

WAUWATOSA POLICE DEPARTMENT 1700 NORTH 116TH STREET WAUWATOSA, WI 53226 (414) 471-8430

	Document Number Override	Primary Crash [Primary Crash Document #		Crash Number	, ,	Investigating Officer/Deputy LIEUTENANT CHAD GEISZLER		
01	Crash Date 04/12/2024	Crash Time 09:07 AM			rrived 2024	Time Arrived 09:09 AM			
B00	Date Notified 04/12/2024	Time Notified 09:09 AM			Inits	Total Injured 00	Total Killed 00		
1F	✓ On Emergency Hit and Run		Lane Closure Work Zone		Work Zone	Trailer or	Towed	Reporting Threshold	
1RI	Government Property	Active Sc	Active School Zone		Bus Related	Tags			
	✓ Reportable	Crash Type DT4000 (STA	NDARD CRAS	H)		Amended		Secondary Crash	

UNIT 1 DRIVING IN LANE #2 E/B ON W BURLEIGH ST APPROACHING N 106 ST. UNIT 2 WAS POLICE SQUAD CAR ASSISTING ON A TRAFFIC STOP WITH TWO OTHER SQUAD CARS. ALL THREE SQUAD CARS HAD EMERGENCY RED AND BLUE LIGHTS ACTIVATED. UNIT 2 WAS PARTIALLY BLOCKING LANE #2. AS UNIT 1 PASSED UNIT 2. THE OPERATOR OF UNIT 2 WAS OPENING THE DRIVER'S DOOR. THE DRIVER'S DOOR OF UNIT 2 WAS STRUCK BY UNIT 1 CAUSING DAMAGE TO BOTH VEHICLES.

WISCONSIN MOTOR VEHICLE CRASH REPORT

LUC	cation ====							
ON	W BURLEIGH ST	····		Latitude			Longitud	e
	FT W		43.07479625 -88.04593885					
	N 106TH ST		X Coordinate Y			Y Coord	inate	
	THE CITY OF WAUWAT MILWAUKEE COUNTY		414850.4	0625		476965		
""	WILLWACKEE COOK! 1		Structure T	vpe				
			NO STRU					
Cra	sh Scene							
First	t Harmful Event			First Harm	ful Event I	ocation		
MO.	TOR VEH IN TRANSPO	ORT		ON ROAL	DWAY			
Man	ner of Collision			Light Cond	lition			
07 -	SIDESWIPE/SAME D	IRECTION		DAYLIGH	I T			
Roa	d Surface Condition(s)			Roadway F	actor(s)			
DRY	Y							
Envi	ironment Factor(s)		-	1				
NOI	NE			NONE				
Wea	ather Condition(s)			1				
CLC	YQUC							
Anin	nal Type			Relation To		-		
						N ROAD		
1	sh Classification - Location					- Jurisdiction		
	BLIC PROPERTY					RISDICTION		Longist Guid.
Inba	al Land			Access Co				Special Study
With	in Interchange Area	Junction Location	Intersecti					
NO		NON-JUNCTION	NOT AN	INTERSEC	CTION			
Uni	t Summary =							
	t Summary Status		Vehicle Operating As C	Classification		Unit Type		
Unit			Vehicle Operating As C	Classification		AUTOMO		
Unit IN 7 Vehi	Status FRANSIT Icle Type		· · · · · ·	Classification				nents
Unit IN 7 Vehi PAS	Status FRANSIT icle Type SSENGER CAR	LiferialDus # Decorded	D CLASS		Total Tra	AUTOMOI Operating A	s Endorser	
Unit IN T Vehi PAS Tota	Status FRANSIT Icle Type	Train/Bus # Recorded	D CLASS Total # Citations Issued		Total Tra	AUTOMOI Operating A	s Endorser Total Haz	nents Mat Types
Unit IN 7 Vehi PAS Tota 1	Status FRANSIT Icle Type SSENGER CAR al Occs		D CLASS Total # Citations Issued 1	d	0	AUTOMOI Operating A	s Endorser Total Haz 0	Mat Types
Unit IN 7 Vehi PAS Tota 1	Status FRANSIT Icle Type SSENGER CAR al Occs	Direction Of Travel	Total # Citations Issued Pre CrashTire	d	0 Speed L	AUTOMOI Operating A	S Endorser Total Haz O Total Lan	Mat Types
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Unit IN 1 Vehi PAS Tota 1 Insu YES Mos MO Traf DIV Surf BLA NO	Status FRANSIT icle Type SSENGER CAR al Occs Irrance? Status FITOR VEH IN TRANSP FITOR HIN TRANSP FITOR HIN TRANSP FITOR OF HIN TRANSP FITOR	Direction Of Travel EASTBOUND With ORT FIC BARRIER (S)	Total # Citations Issued Pre CrashTire Mark Special Function NO SPECIAL FUNC Traffic Control NO CONTROL Road Curvature STRAIGHT Plate Type AUT - AUTOMOBI Make SUBARU Body Style SD - SEDAN Vehicle Damage	d e CTION	Steed Li 35	AUTOMOI Operating A itilers mit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED S' Model IMPREZA Bus Use	Total Haz O Total Lan 2 Motor Veh LICABLE rol Inopera	Mat Types es cle Use rive/Missing

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Towed Due To Damage		Vehicle Removed By			
		NOT TOWED	OPERATOR				
		What Driver Was Doing GOING STRAIGHT	[`	Vehicle Factors			
		Driver Prior Action Other		NOT APPLICABLE			
		PHYSI PHOI ACION OTHER					
		Driver Actions					
	Щ	FAILED TO YIELD RIGHT-OF	-WAY				
UNIT	ੁ						
⋾	VEHICLE						
	>						
		Owner Name		Owner Address			-
77	01	ANNETTE D LAUR					
0	0						
		Sequence Of Events					
		Event					
	07	PARKED MOTOR VEHICLE					
	02	Event					
		Event					
	ස						
	04	Event					
						···	
≒		Policy Holder					
UNIT		Insurance Company ALLSTATE-INS-CO		Individual ANNETTE LAUR			
	1	Individual					
		Driver		Citations Issued	Sex		
	بِ	ANNETTE D LAUR		1	FEMALE		
	INDIVIDUAL	,		Date of Birth	Race WHITE		
UNIT	Σ	Address		Driver License Number	<u> </u>		
	₫			STATE: WISCONSI	I COUNTRY: HAI	TED STATES	
	=			SIAIE. WISCONSI	4 COOMINI. OM	ILD SINILS	
		On Duty Cra	ash	Safety Equipment			
	Sat	fety Equipment	A-311	Salety Equipment			
		Row	Seat Position	SHOULDER & LAP	BELT		
		01 - FRONT ROW	07 - LEFT		, , , , , , , , , , , , , , , , , , ,		
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
07	001	Injury NO APPA	•	NON DEPLOYED			
	9	- - - - - - - - -	RENT INJURY	NON BEFEOTED		Trapped/Extricated	
			OT EJECTED/NOT APP	LICABLE		NOT TRAPPED	
		Medical Transport		EMS Agency Identifier		EMS Run #	
		NOT TRANSPORTED		Date of Death		Time of Death	
		Hospital		Date of Death			
		Distracted By NOT APP	By Source	ACTED)			
		Distracted By Action	LICABLE (NOT DISTRA			,	
		NOT DISTRACTED					
ı							

WISCONSIN MOTOR VEHICLE **CRASH REPORT**

		Non Motorist	Striking	Unit #	Location				_	
		Prior Action			l					
		Action								-
	AL.									
UNIT	INDIVIDUAL									
Ś										
	롣									
		Action Other		-						To/From School
			Suspect	ted Alcohol U		Suspected Drug Use				
	0	Orug & Alcohol	NO	tea Alcohol O	sc	NO				
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type	9			Alcohol Test	Results
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug T	est Results		
₽	001	Drug Type]			· · · · · ·
07	ŏ									
		Individual Condition								
		APPEARED NORM	MAL							
	Š	Violations	т-							
	01	UTC Number BG643002	Issue T 001	70? Stat 346	ute Number 5.072(1m)(a)	Description FAIL /CHANGE LAN	NE-PAS	SING STO	OP EMERG	VEH
		t Summary								
		Status EMERGENCY				Pehicle Operating As Class CLASS	sification		Unit Type AUTOMO	BILE
02	Vehi	cle Туре	101.5				s Endorsements			
	•	ORT) UTILITY VEH		rain/Bus # Re	corded	Total # Citations Issued		Total Traile	ers	Total HazMat Types
'	1					0			0	
L	tnsu: YES	rance?		rection Of Trans		Pre CrashTire Mark		Speed Lim 35	at .	Total Lanes 2
I S		Harmful Event: Collisi				Special Function NO SPECIAL FUNCTION			Emergency Motor Vehicle Use EMERGENCY OPERATOR, EMERGENC	
		TOR VEH IN TRAN: ic Way	SFORT			Fraffic Control				ol Inoperative/Missing
		DED HWY W/O TR	AFFIC I	BARRIER	_	NO CONTROL			NO Road Grade	
	1	ace Type ACKTOP (BITUMIN	OUS)			Road Curvature STRAIGHT			LEVEL	
	Truc	k Bus or HazMat							<u> </u>	
	МО									
ļ		Vehicle License Plate Number	er			Plate Type		St	Country of Is	suance
		E8900				OFF - MUNICIPAL OF	FICI	WI	UNITED ST	TATES
05	05	Vehicle Identification 1FM5K8AW3LGC				Make FORD		Year 2020	Model EXPLOREI	2
	J	Color	40004			Body Style			Bus Use	•
		BLK - BLACK				UT - SPORT UTILITY	VEHIC	LE		
		Initial Contact Point								
		09 - LEFT SIDE M	IDDLE							7 8 9 10 11

WISCONSIN MOTOR VEHICLE **CRASH REPORT**

١.	щ		[7	Vehicle Damage				
UNIT	VEHICLE			00 LEET OIDE MIDD	. =			
5	ᇤ	Extent Of Damage MINOR DAMAGE	['	09 - LEFT SIDE MIDD	LE			
	>	Towed Due To Damage		Vehicle Removed By				
ľ		NOT TOWED						
		What Driver Was Doing		OPERATOR Vehicle Factors				
		STOP IN TRAFFIC						
		Driver Prior Action Other		NOT APPLICABLE				
		Driver Actions	<u> </u>					
	ш	LOOKED BUT DID NOT SE	E					
느	VEHICLE							
UNIT	표							
	2							
		Owner Name		Owner Address				
		CITY OF WAUWATOSA		7725 W NORTH A				
05	05	(414) 471-8900		WAUWATOSA, WI	153213 , US			
		Sequence Of Events						
	01	Event MOTOR VEH IN TRANSPOR	रा					
	2	Event	-					
	02							
	03	Event						
	97	Event						
<u> </u>		Policy Holder	······································			_		
TIN S		Insurance Company		Government				
>		SELF-INSURED		SELF INSURED				
1		ndividual						
		Driver DEXTER J SCHLEIS		Citations Issued	Sex			
1	뒫	DEXTER 3 SCHLEIS		0 Date of Birth	MALE Race			
ᆫ	NDIMDUAL			Date of Birth	WHITE			
FINO	₹	Address		Driver License Number				
٦	9			STATE: WISCONSI	N COUNTRY: UN	ITED STATES		
	=			SixirE. Widdenton				
		On Duty C	rash	Safety Equipment				
1	Sat	ety Equipment POLICE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Salety Equipment				
		Row	Seat Position	NONE USED - VEH	ICLE OCCUPAN	Т		
		01 - FRONT ROW	07 - LEFT					
		Helmet Use		Helmet Compliance				
ł		Eye Protection		Tint Compliance				
		Eye Protection		Tint Compliance				
8	005	Injury NO APP	erity	Airbag		-		
	0		ection Path	NON DEPLOYED		Trapped/Extricated		
		1 -	NOT EJECTED/NOT APP	LICABLE		NOT TRAPPED		
		Medical Transport		EMS Agency Identifier		EMS Run #		
		NOT TRANSPORTED						
		Hospital		Date of Death		Time of Death		
1				<u> </u>		<u></u>		

WISCONSIN MOTOR VEHICLE CRASH REPORT

			Distracted By Source NOT APPLICABL	E (NOT DISTRAC	CTED)			
		Distracted By Action NOT DISTRACTED	D					
		Non Motorist	Striking Unit #	Location				
		Prior Action						
		Action						
	JAL							
LIND	INDIVIDUAL							
	<u>N</u>							
		Action Other						To/From School
	[Orug & Alcohol	Suspected Alcohol U NO	se	Suspected Drug Use NO			•
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN	ug Test Given Drug Test Type ST NOT GIVEN			Drug Test Results		
02	005	Drug Type						
		Individual Condition						
		APPEARED NORM	MAL					