CITY OF WAUWATOSA

7725 W. North Avenue Wauwatosa, WI 53213

RECEIVED

AUG 8 2023

	NOTICE OF CIRCUMST	ANCES OF CLAIM	Wauwatosa
D	C		City Attorney's Office
Name: REJEA Address	Cukry	Incident/Accide Date: 3/15 Time: 8:4	12005 1200
Phone: Email:		Place: 49 11 1	189mstract
	CIRCUMSTANCE	S OF CLAIM	
For auto damages, attach	describe the circumstances of a copy of police report, if ar corners if the accident occu or not medical attention wa he incident/accident.	ny, and a diagram of the a urred at an intersection. F	For bodily injury, indicate
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door even th	no on appor	unas in the	e mom
Davion Na	1 am nær	rated in	the recroom
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Davion sau	eventhing	that was	mppoing
Signed: Brendo	Carry	Date	e: \$\\ \(\partial \rangle 23
********	*********	*********	*********
CLAIM			
Circumstances of Claim vo	ed to make a claim at this ti u may file a claim with the Ci order for the City to formally and signed.	ty at any time consistent v	with the applicable statute
The undersigned hereby m the amount of \$ <u>703.0</u>	takes a claim against the City $\partial \underline{\partial}$.	arising out of the circums	tances described above in
To process this claim it is n	ecessary to detail all damage		0/ /00
Signed: 12rwul	- Clerry	Dat	e: 7/02/23

Address