

GL-13-20

PROGRESSIVE

Payment Address
24344 Network Place
Chicago, IL 60673-1243

Document Address
P.O. Box 512929
Los Angeles, Ca 90051
Phone: (877)818-0139
Fax: (888) 781-6947

7/24/2020 10:44:00 AM

Certified Mail 9489 0090 0027 6301 1270 53 Return Receipt Requested

KENOSHA COUNTY
COUNTY BOARD SUPERVISORS
1010 56TH STREET
KENOSHA, WI 53140

Your Client: SCIFRES, JONATHAN
Your Claim Number: 1603358
Our Insured: ISLAS, JEREMIAH
Our Claim Number: 20-6108323
Amount Subject to Reimbursement: 2,899.22
Amount of Insured's Deductible: 1,000.00



Please take this as formal notice of our subrogation rights relative to the above -captioned claim. We have completed our investigation into the facts of the above-captioned loss and find that your insured was the proximate cause of the accident.

Location of Loss: 60TH ST IN KENOSHA
Date and Time of Loss: 07-01-20 AT 9:45 AM

Description of Loss: OUR INSURED WAS TRAVELING AT 60TH ST & 49TH AVE IN KENOSHA WHEN A SHERIFF S VEHICLE WITH PLATE # 726BAX OPERATED BY SCIFRES, JONATHAN STRUCK OUR INSURED S VEHICLE. WE ARE SEEKING REIMBURSEMENT FOR OUR INSURED S VEHICLE DAMAGES

Please make your draft payable to Artisan and Truckers Casualty Company as subrogee of "ISLAS, JEREMIAH ", in the amount stated above and mail it to the attention of the undersigned at your earliest convenience.

All supporting documentation is enclosed. Thank you for your anticipated, prompt attention to this matter.

Ashley Adamik 7/24/20

Progressive Subrogation
Artisan and Truckers Casualty Company
Tel. 877-818-0139
Fax. 888-781-6947
GovernmentStatus@email.progressive.com

Claim Payment Detail (20-6108323)

Payment Information

Disbursement Number: 779734461
EFT Trace Number: 714130925
Pay to the Order of: ARMANDOS COLLISION CENTER
Mailing Address: 1718 63RD ST
KENOSHA, WI 53143-4470 USA
In Payment Of: Progressive Invoice Number: 73367038

Total Amount: \$1,899.22
Invoice Number: 73367038

Reviewed Summary

Issuing Rep: A123877
Issue Date: 07-16-20
Last Updated Rep: A123877

Approved By:
Review Date:
Reviewed By:

Bank Information

Type: Loss
Stop Reason:
Stop Date:

Bank Code: CTB
Cleared: 07-18-20

Exposure Detail: COLL

Party Name: ISLAS, JEREMIAH
Property Description: 14 CADILLAC XTS
Payment Type: FINAL PAYMENT

Amount Paid: \$1,899.22
Deductible Taken: \$1,000.00
Property Damage: \$0.00
Rental: \$0.00

Artisan and Truckers Casualty Co

Estimate ID
2929183
Original
Quote ID
70340866
Claim Number
20-6108323-01

Owner
JEREMIAH ISLAS

Insured
JEREMIAH ISLAS

Appraiser
GIOVANI ACEVEDO
(414) 316-0860 (Work)
giovani_acevedo@progressive.com

Classification
None

Artisan and Truckers Casualty Co

Claim Number 20-6108323-01	Adjuster CHRISTINA DEIGNAN (414) 944-5227 (Work) a139429@progressive.com	Deductible 1000.00 - Not Waived	Reported Date 07/01/2020
Loss Date 07/01/2020	Inspection Site ARMANDOS COLLISION CT R 1718 63rd St Kenosha, WI 53143		

2014 Cadillac XTS 4 Door Sedan 3.6L 6 Cyl Gas Injected 6 Speed Auto Trans AWD

Exterior Color BLUE	License WI-868ZCZ	VIN 2G61N5S39E9175244	Drivable Yes
Odometer 79938	Mitchell Service Code 911485		

Primary Point of Impact
Right Rear Corner (5)

Options

Adaptive Variable Suspension	Air Conditioning	Air Suspension	All Wheel Drive	Alum/Alloy Wheels
AM-FM Stereo	Anti-Lock Brake Sys. (ABS)	Auto Air Condition	Automatic Headlights	Auxiliary Input
Bluetooth Wireless Connectivity	CD Player	Cruise Control	Daytime Running Lights	Driver Seat With Power Lumbar Support
Driver-Front Air Bag	Dual A/C	Electric Defogger	Electronic Parking Aid	Electronic Stability Control
Exterior Memory Mirrors	First Row Bucket Seat	Front Cooled Seats	Front Heated Seats	Front Seats With Power Lumbar Support
Genuine Wood Trim	HD Radio	Heated Mirror	Heated Seats	High Intensity Discharge Headlights
Interior Automatic Day/Night Or Electrochromatic Mirror	Keyless Entry System	Leather Seats	Left-Curtain Air Bag	Limited Slip Differential
Memory Seats	MP3 Player	Passenger-Front Air Bag	Power Door Locks	Power Driver Seat
Power Passenger Seat	Power Remote Mirror	Power Steering	Power Windows	Premium Sound Sys.

Rain Sensing Wipers	Rear Bench Seat	Rearview Camera	Remote Vehicle Starter System	Satellite Radio
Side Airbags	Steering Wheel Mounted Audio Control	Telematic Systems	Theft Deterrent Sys.	Tilt Steering Wheel
Tire Pressure Monitoring System	Traction Control/Electronic	Universal Garage Door Opener		

JEREMIAH ISLAS | 2014 Cadillac XTS

Parts Profile
KENO WI All Part Types

Parts Profile Version
3.0

		LABOR				PART				
Line #		Description	Operation	Type	Total Units	Type	Number	Qty	Total Price	Tax
Wheel										
1	101768	Alloy Wheel	Remove/Replace	Body	0.3	Remanufactured	4696 APU	1	\$399.99	Yes
Rear Door										
2	100004	R Rear Door Outside	Blend	Refinish	0.9 C	Existing				
3	101747	R Rear Otr Door Belt Moulding	Remove/Install	Body	0.6#	Existing				
4	101749	R Rear Lwr Door Moulding	Remove/Install	Body	0.3	Existing				
5	101721	R Rear Otr Door Handle	Remove/Install	Body	0.3#	Existing				
Side Body										
6	102518	R Side Body Panel Assembly	Repair	Body	8.0#*	Existing				
7	AUTO	R Quarter Panel Outside	Refinish Only	Refinish	2.4 C	Existing				
8	101991	R Quarter Wheelhouse Liner	Remove/Install	Body	INC	Existing				
9	101169	R Rocker Moulding	Remove/Install	Body	0.4	Existing				
Quarter Glass										
10	101171	R Quarter Glass	Remove/Install	Glass	1.9#	Existing				
Rear Lamps										
11	101408	R Rear Combination Lamp	Remove/Install	Body	0.3	Existing				
Rear Bumper										
12	101411	Rear Bumper Cover Assy	Overhaul	Body	3.0#	Existing				
13	102013	Rear Bumper Cover	Repair	Body	3.0#*	Existing				
14	AUTO	Rear Bumper Cover	Refinish Only	Refinish	3.1 C					
15	100667	R Rear Bumper Bracket	Remove/Replace	Body	0.2#	New	22895320	1	\$22.34	Yes
16	102016	R Rear Otr Parking Sensor Unit	Remove/Install	Body	INC#	Existing				
17	AUTO	Rear Bumper Cover	Remove/Install	Body	INC#					
18	102017	L Rear Otr Parking Sensor Unit	Remove/Install	Body	INC#	Existing				
19	102018	R Rear Inr Parking Sensor Unit	Remove/Install	Body	INC#	Existing				
20	102019	L Rear Inr Parking Sensor Unit	Remove/Install	Body	INC#	Existing				
Additional Costs & Materials										
21	AUTO	Hazardous Waste Disposal	Additional Cost						\$3.00*	Yes
22	AUTO	Paint/Materials	Additional Cost						\$323.00*	Yes
Additional Operations										
23	931128	Post Repair Scan	Additional Operation	Mechanical	0.0				\$115.00*	
24	931127	Pre Repair Scan	Additional Operation	Mechanical	0.0				\$85.00*	
25	AUTO	Clear Coat	Additional Operation	Refinish	1.8				\$0.00	
Special / Manual Entry										
26	900500	COVID 19 Cleaning	Remove/Replace	Body*	1.0*	New		1	\$25.00*	Yes

LABOR				PART					
Line #	Description	Operation	Type	Total Units	Type	Number	Qty	Total Price	Tax
27 900500	Disconnect and Reconnect Battery	Remove/Install	Body*	0.3*	Existing				
28 900500	URETHANE KIT (ADHESIVE BONDED GLASS ONLY)	Remove/Replace	Glass*	0.0*	Sublet	Sublet	1	\$20.00*	Yes
29 900500	FLEX ADDITIVE	Repair	Body*	0.0*	Sublet	Sublet	1	\$7.00*	
30 900500	CORROSION PROTECTION	Refinish Only	Refinish*	0.3*	Sublet	Sublet	1	\$0.00*	Yes
31 900500	COVER CAR FOR OVERSPRAY	Refinish Only	Refinish*	0.0*	Aftermarket New	** A/M	1	\$8.00*	Yes
32 900500	MOUNT & BALANCE, VALVE STEM & DISP FEE	Additional Labor	Mechanical*	0.0*	Sublet	Sublet	1	\$20.00*	
33 900500	4 WHEEL ALIGNMENT	Remove/Replace	Body*	0.0*	Sublet	Sublet	1	\$89.95*	Yes

* Judgment Item

T Included in Two Tone Calculation

Labor Note Applies

d Discontinued by Manufacturer

C Included in Clear Coat Calculation

A Included in Clear Coat and Two Tone Calculation

r CEG R&R Time Used for this Labor Operation

Parts Vendors

Alloy Wheel Repair Specialist
3100 Medlock Bridge Road Suite 315
Norcross GA 30071
(844) 899-6146 (Work)

Line	Part #	Total Price
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1 4696 APU \$399.99

Supplier Notes: Quote#: 131594534937838

Notes: Wheel - Year:0 Conditions and Options:IQ

Recon Polished Units of Damage:0.0 COND: 0.0

PartRating: A Stock Number: 4696 / RM

Disclaimer: 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.

Estimate Totals

Labor	Units	Rate	Sublet Add'l Amount		Totals
Body Labor	17.7	\$58.00	\$7.00		\$1,033.60
Refinish Labor	8.5	\$58.00			\$493.00
Glass Labor	1.9	\$58.00			\$110.20
Mechanical Labor	0.0	\$72.00	\$20.00	\$200.00	\$220.00
Total Labor	28.1		\$20.00		\$1,856.80
				Taxable	\$1,856.80
				Tax (5.500)%	\$102.12
				Non-Taxable	\$0.00
				Labor Total	\$1,958.92
Parts		Amount			
Taxable Parts		\$565.28			\$565.28

Estimate Totals

		Parts Adjustments	\$0.00
		Tax (5.500)%	\$31.09
		Non-Taxable	\$0.00
		Parts Total	\$596.37
Costs	Amount		
Other Additional Costs	\$3.00		\$3.00
Paint Materials	\$323.00		\$323.00
		Taxable	\$326.00
		Tax (5.500)%	\$17.93
		Non-Taxable	\$0.00
		Costs Total	\$343.93
Gross Totals	Amount		
Gross Total	\$2,899.22		\$2,899.22
		Taxable	\$2,748.08
		Tax	\$151.14
		Non-Taxable	\$0.00
		Gross Total	\$2,899.22
Adjustments	Amount		
Deductible	-\$1,000.00		-\$1,000.00
Total Customer Responsibility			-\$1,000.00
		Net Estimate Total	\$1,899.22

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.

All manufacturers requirements regarding seat belt and supplemental restraint system replacement must be adhered to. If additional parts or operations are necessary to properly accomplish this, please contact the estimating claims rep.

This is a damage assessment only - Not an authorization to repair-based on damage visible or certain at the time it was written.

If frame or unibody repair is included on this estimate, the amount shown includes time or allowance for measuring before, during and after those repairs.

The owner of the vehicle may select the repair facility of his/her choice.

To ensure proper and prompt payment for additional damage discovered

during the course of repairs, contact Progressive for supplement handling procedures.

Progressive honors the prevailing labor market rate in your area for your property. If you choose a shop that charges in excess of the prevailing labor market rates, you will be responsible for the difference.

Lifetime guarantee for sheet metal and plastic body parts

The replacement parts written on the estimate are intended to return your vehicle to its pre-loss condition with proper installation. After repair, if any sheet metal or plastic body part included in the estimate fails to return your vehicle to its pre-loss condition (assuming proper installation), in terms of form, fit, finish, durability or functionality, Progressive will arrange and pay for the replacement of the part, to the extent not covered by a manufacturer's or other warranty. This service will be performed at no cost to you (including associated repair and rental car costs). To obtain service under this Guarantee, call Progressive at 1-800-274-4641. This Guarantee applies as long as you own or lease the vehicle. This Guarantee is not transferable and terminates if you sell or otherwise transfer your vehicle.

This guarantee does not cover normal wear and tear or damage caused by improper maintenance, neglect, abuse or subsequent accident. This guarantee is limited to arranging for the selection of repair parts that will return your vehicle to its pre-loss condition. Accordingly, Progressive will not be liable for any indirect, incidental or consequential damages that result from the installation or use of these parts.

Part Type Terms and Abbreviations

NEW and OEM or part number displayed - These refer to a new, original equipment manufacturer part.

A/M Certified: This refers to a new, certified non-original equipment manufacturer replacement part.

A/M: This refers to a new, non-original equipment manufacturer replacement part.

Recycled: This refers to a used OEM part.

Remanufactured and Recond. and Recore: These refer to recycled OEM parts that have been rebuilt or refurbished.

OE Discount: This refers to new OEM parts, that are excess inventory from the Original Equipment Manufacturer.

Recovered OE - This refers to parts removed from a new vehicle for various reasons.

Progressive's Lifetime Guarantee does not cover repairs you request the shop to make that are not related to this accident, including but

not exclusive to unrelated prior damage and pre-existing damage.

Repair shop's authorized representative's signature indicating agreement on cost to return the vehicle to pre-loss condition including tow/storage charges:

Shop Signature: _____ Est. completion Date: _____

Any person who, with intent to defraud or knowing that he/she is facilitating a fraud against an insurer, submits an application or file a claim containing a false or deceptive statement is guilty of insurance fraud.

Disclaimer: Any person who knowingly presents a false claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

Cycle Time Information

Due In 7/13/2020

Estimate Event Log

Job Created	7/14/2020 05:39 AM
Estimate Started	7/15/2020 08:56 AM
Estimate Printed	7/15/2020 01:12 PM
Estimate Committed	7/15/2020 01:12 PM



KRL0351TNH
000155-7441

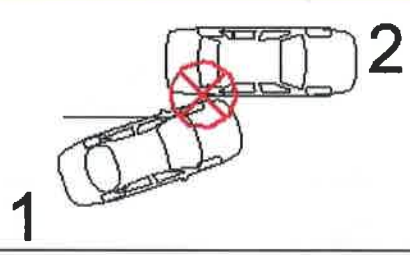
WISCONSIN MOTOR VEHICLE
CRASH REPORT

WI STATE PATROL SER/WKE
21115 HWY 16
WAUKESHA, WI 53186 2985
(262) 785-4700

KRL0351TNH

Document Number Override		Primary Crash Document #		Agency Crash Number 000155-7441		Investigating Officer/Deputy TROOPER D. THOMSON	
Crash Date 07/01/2020		Crash Time 09:45 AM		Date Arrived 07/01/2020		Time Arrived 10:15 AM	
Date Notified 07/01/2020		Time Notified 09:55 AM		Total Units 02		Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone	<input type="checkbox"/> Trailer or Towed	<input type="checkbox"/> Reporting Threshold		
<input type="checkbox"/> Government Property	<input type="checkbox"/> Active School Zone		School Bus Related NO		Tags		
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)			<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

Description

<p>Diagram</p> <p style="text-align: center;">000155-7441 BY: TPR THOMSON 241</p> 	Reconstruction By
	Photos By TPR. THOMSON #241
	Additional Information PHOTOS

☒ I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

UNIT1 IN LANE #2 EASTBOUND. UNIT2 IN LANE #1 EASTBOUND. UNIT1 PERFORMING LAW ENFORCEMENT FUNCTION. UNIT1 STARTED TO PERFORM U-TURN FROM LANE #2 TO GO WESTBOUND. UNIT1 DRIVER DID NOT SEE UNIT2 IN TIME. UNIT1 COLLIDED WITH UNIT2. BOTH UNIT1 AND UNIT2 SUSTAINED MINOR DAMAGE. NO INJURIES REPORTED.

KRL0351TNH
000155-7441

WISCONSIN MOTOR VEHICLE
CRASH REPORT

WI STATE PATROL SER/WKE
21115 HWY 18
WAUKESHA, WI 53186 2985
(262) 785-4700

Location

ON 60TH ST 110 FT W OF 50TH AVE IN THE CITY OF KENOSHA IN KENOSHA COUNTY	Latitude 42.58128708	Longitude -87.869044103
	X Coordinate 428686.34375	Y Coordinate 4714685
	Structure Type	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 07 - SIDESWIPE/SAME DIRECTION		Light Condition DAYLIGHT	
Road Surface Condition(s) DRY		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) CLEAR			
Animal Type		Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY		Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land		Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION	

Unit Summary

UNIT 01	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit	Total Lanes 4	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

Vehicle

UNIT 01 VEHICLE 01	License Plate Number 726BAX		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number 1FAHP2DW2AG155687		Make FORD	Year 2010	Model TAURUS SE	
	Color SIL - SILVER (ALUMINUM)		Body Style 4D - 4DR		Bus Use	
	Initial Contact Point 10 - LEFT SIDE FRONT		Vehicle Damage			
	Extent Of Damage MINOR DAMAGE		10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER			

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WISCONSIN MOTOR VEHICLE
CRASH REPORT

WI STATE PATROL SER/WKE
21115 HWY 18
WAUKESHA, WI 53186 2985
(262) 785-4700

UNIT	VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
		What Driver Was Doing U TURN		Vehicle Factors	
		Driver Prior Action Other		NOT APPLICABLE	
		Driver Actions LOOKED BUT DID NOT SEE			
01	01	Owner Name KENOSHA COUNTY SHERIFF'S OFFICE (262) 605-5100		Owner Address 1000 55TH ST #1 KENOSHA, WI 53140 , US	
		Sequence Of Events			
01	01	Event MOTOR VEH IN TRANSPORT			
		Event			
		Event			
		Event			
01	01	Policy Holder			
		Insurance Company WISCONSIN-MUNICIPAL-MUTUAL-INS-CO		Government KENOSHA COUNTY SHERIFF'S OFFICE	
01	01	Individual			
		Driver JONATHAN K SCIFRES (262) 605-5100		Citations Issued 0	Sex MALE
01	01	Date of Birth 12/19/1983		Race WHITE	
		Address 1000 55TH ST #1 KENOSHA, WI 53140 , US		Driver License Number S1624318345909 STATE: WISCONSIN COUNTRY: UNITED STATES	
01	01	Safety Equipment		On Duty Crash POLICE	
		Row 01 - FRONT ROW		Seat Position 07 - LEFT	
01	01	Helmet Use		Safety Equipment SHOULDER & LAP BELT	
		Eye Protection		Helmet Compliance	
01	01	Injury NO APPARENT INJURY		Airbag NON DEPLOYED	
		Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE	
01	01	Medical Transport NOT TRANSPORTED		Trapped/Extricated NOT TRAPPED	
		Hospital		EMS Agency Identifier EMS Run #	
01	01	Distracted By Distracted By Source EXTERNAL (TO VEHICLE/NON-MOTORIST AREA)		Date of Death	
		Distracted By Action OTHER ACTION (LOOKING AWAY FROM TASK ETC)		Time of Death	

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WISCONSIN MOTOR VEHICLE
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UNIT INDIVIDUAL 01 001	Non Motorist		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other				
	To/From School				
	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO	
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type		Alcohol Test Results
	Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results
	Drug Type				
	Individual Condition APPEARED NORMAL				

Unit Summary

UNIT 02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit	Total Lanes 4	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

UNIT VEHICLE 02 02	Vehicle				
	License Plate Number 868ZCZ		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 2G61N5S39E9175244		Make CADILLAC	Year 2014	Model XTS
	Color DBL - BLUE, DARK		Body Style SD - SEDAN		Bus Use
	Initial Contact Point 04 - RIGHT SIDE REAR		Vehicle Damage		
	Extent Of Damage MINOR DAMAGE		04 - RIGHT SIDE REAR		
	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR		

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WISCONSIN MOTOR VEHICLE
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21115 HWY 18
WAUKESHA, WI 53186 2985
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UNIT VEHICLE	What Driver Was Doing GOING STRAIGHT	Vehicle Factors	
	Driver Prior Action Other	NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION		
	Owner Name JEREMIAH J ISLAS (262) 748-2542		
02	Owner Address 6102 43RD AVE KENOSHA, WI 53142 , US		
Sequence Of Events			
UNIT INDIVIDUAL	01	Event MOTOR VEH IN TRANSPORT	
	02	Event	
	03	Event	
	04	Event	
Policy Holder			
UNIT INDIVIDUAL	Insurance Company PROGRESSIVE-ADVANCED-INSURANCE-CO		Individual APRIL ISLAS
	Individual		
	Driver APRIL MELISSA ISLAS (262) 748-2542		Citations Issued 0
	Sex FEMALE		Date of Birth 05/31/1978
Address 6102 43RD AVE KENOSHA, WI 53142 , US		Driver License Number I2420137869102 STATE: WISCONSIN COUNTRY: UNITED STATES	
Safety Equipment			
On Duty Crash		Safety Equipment	
Row 01 - FRONT ROW		Seat Position 07 - LEFT	SHOULDER & LAP BELT
Helmet Use		Helmet Compliance	
Eye Protection		Tint Compliance	
02 002	Injury		Airbag
	Injury Severity NO APPARENT INJURY		NON DEPLOYED
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier
Hospital		Date of Death	EMS Run #
Time of Death			
Distracted By			
Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			
Distracted By Action NOT DISTRACTED			
Non Motorist			
Striking Unit #		Location	

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000155-7441

WISCONSIN MOTOR VEHICLE
CRASH REPORT

WI STATE PATROL SER/WKE
21115 HWY 18
WAUKESHA, WI 53186 2985
(262) 785-4700

UNIT INDIVIDUAL 02 002	Prior Action			
	Action			
	Action Other			To/From School
	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	Alcohol Test Results
	Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results
	Drug Type			
	Individual Condition APPEARED NORMAL			

