GL-04-24



COUNTY CLERK

1010 - 56th Street Kenosha WI 53140 (262) 653-2552 Fax: (262) 653-2564

CLAIM AGAINST KENOSHA COUNTY

FULL NAME	E Jesse	Ulrich		53181	_DATE	2/8/3	24	
	E NUMBER:	Home: Work:	_	The Management of the Control of the		94		
DATE & TIM	WE OF ACCID	ENT OR I	LOSS	1/23/24	54	sam		
LOCATION	OF ACCIDEN	ľT _	331	11854	Tuin	Lakes W	3'	
was co	n start	assitan traffic	on s cc. R ahea	lespondin ud of ide an	road. S PO claiman d lost	Local Veh a- Hueh (PD Hampled CV) PD	
WITNESS:	Name							
	Address	-						
	Phone	-			****			
AMOUNT O	F CLAIM (dan	ages) \$	unk	10211				κ
CLAIMANT'	S SIGNATURI	lan C	Bester	Progressi	se Rep	16	2	
Please attach	ı receipts, estir	nates, and	or oth	er supporti	ng data to 1	this form.	668-286	
RETURN THIS FORM TO: KENOSHA COUNTY CLERK							claim# 24-7306129	

 $1010 - 56^{TH}$ STREET

KENOSHA WI 53140

Amanda Sorensen

From:

lan Bester <lan_Bester@progressive.com>

Sent:

Thursday, February 8, 2024 9:32 AM

To:

County Clerk

Subject:

Claim Request for Jesse Ulrich

Attachments:

A166104_HP_02082024_102730.pdf

Caution: This email originated from outside the organization. Do not click links or open attachments unless you recognize and trust the sender.

Good morning,

Please see the attached form needed to open a claim. The police report number I have for this incident is 2024-0030319. I am unsure of the department. The involved department is the Kenosha Sheriff department. I was told the writing department is WI State Patrol. I am unsure how accurate that is.

Thank you,

lan Bester

Claims Representative Progressive Group of Insurance Companies

Phone: 608-286-3713 Fax: 833-905-1742

Email: ian bester@progressive.com Hours: Mon-Fri 8am to 4pm CST 4100 Lexington Ave N, STE 200

Shoreview, MN 55126

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