

Pam M. Boyd

9390 Bunsen Parkway
Louisville, KY 40220

Telephone: (800) 868-6331
Fax: (502) 214-1016

Casualty Recovery Solutions

a division of Trover Solutions

March 27, 2013

WINNEBAGO COUNTY COURT CLERK
415 JACKSON ST
OSHKOSH WI 54901

RE: Defendants Name: ADAM GRISWOLD
Court Case #: 2012CF000526
Police Report #: unknown
Our Insured: Basler Auto Ltd
Insurance Company: AUTO-OWNERS INSURANCE COMPANY
Date of Loss: 5/29/2012
Amount Due: \$3899.23
File Number: TPCS - 2061606 - 3065447
File Open Date: 2/5/2013

Dear ,

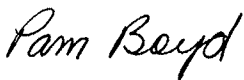
This firm represents AUTO-OWNERS INSURANCE COMPANY and its recovery services agent, TransPaC Solutions in the recovery of its subrogation interest arising out of damage/loss incurred by its insured as a result of the above dated incident.

Please allow this letter to be considered a formal request for restitution if the alleged tortfeasor is found guilty of the charges.

Enclosed please find the supporting documentation and proofs of payment made to or on behalf of our client's insured due to the incident referenced above.

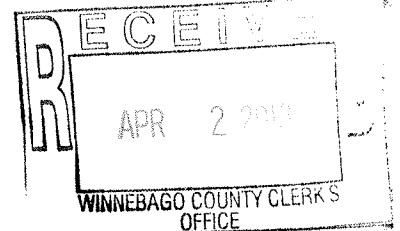
If restitution is ordered, please have check(s) made payable to TransPaC Solutions and mailed to TransPaC Solutions, P.O. Box 36220, Louisville, KY 40233-6200. Please include our Event Number 2061606-3065447 in the memo section of any and all payments.

Sincerely,



Pam M. Boyd
P&C RECOVERY REP
(800) 868-6331

This communication is from a debt collector and is an attempt to collect a debt. Any information obtained will be used for that purpose.



From:
 TransPaC Solutions
 P.O. Box 36220
 Louisville, Kentucky 40233-6220

Taxpayer ID : 61- 1141758

Contact Information:
 Examiner: Pam M. Boyd
 Phone: (800) 868-6331
 Fax: (502) 214-1016
 Email: pboyd@troversolutions.com
 Event # : TPCS-2061606-3065447

**REQUEST FOR PAYMENT
 CASE STATEMENT FOR COMPREHENSIVE
 Date of Loss: 5/29/2012**

**ATTENTION:
 AMOUNT IS SUBJECT TO CHANGE, PLEASE CONTACT TRANSPAC SOLUTIONS PRIOR TO
 SETTLEMENT.**

Statement sent to : WINNEBAGO COUNTY COURT CLERK					
Your Claim # : 023-0001557-2012-007COMP			Instructions:		
Insured : Basler Auto Ltd			<ul style="list-style-type: none"> Please include TPCS-2061606-3065447 on all payments and correspondence to expedite processing. 		
Policy # : 95-663972-05					
Claimant : BASLER AUTO LTD					
Payment Date	Service Dates		Payee	Check Number	Payment
	Start Date	End Date			

Type: INDEMNITY PAYMENTS

06/22/2012			BASLER AUTO LTD	351828028	\$4147.73
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Total Claims Paid for INDEMNITY PAYMENTS

\$4147.73

Type: SALVAGE RECOVERY

07/30/2012			SALVAGE		\$-748.50
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Total Claims Paid for SALVAGE RECOVERY

\$-748.50

Total Claims Paid	\$3,399.23
Recovered to Date	(\$0.00)
Deductible	\$500.00
Outstanding Amount	\$3,899.23

FootNote:

If an insured's deductible or out-of-pocket expenses are listed, we are requesting payment as a courtesy to our client's insured.

Client's Claim #:023-0001557-2012-007COMP