

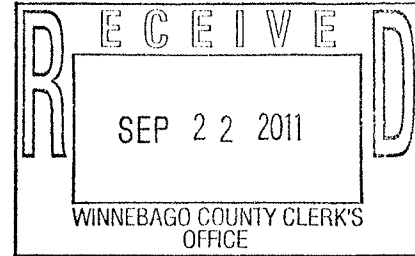


Risk Management Office
435 S. 95th Street
Milwaukee, WI 53214-1226

T: 414.678.0273
F: 210-893-0687
www.att.com

September 15, 2011

Winnebago County
County Clerk Office
415 Jackson Street, Room 110
Oshkosh, WI 54901



Our File No.: 25201108-50-0105

To Whom It May Concern:

We wish to advise you that on or about August 25, 2011, at or near 6915 County Trunk M, Winneconne, Wisconsin, your employee while performing excavation work, caused damage to our buried service wire. Our investigation shows that the service wire was located and marked accurately. Therefore, we are enclosing a copy of our claim.

If you were not insured at the time of this accident, please remit your check made payable to AT&T and forward to AT&T Risk Management Services, 909 Chestnut Street, Room 39-N-13, St. Louis, MO 63101-3099. In order to ensure proper credit, please include the bottom portion of the claim along with your payment

If you would like me to forward a copy of this claim to your insurance company, please contact me and provide your insurance carrier's name and address. I can be reached at 414 678-0273.

Thank you for your cooperation.

Sincerely,

Debbie Griffiths
Sr. Risk Specialist

Enclosure



Claim For Damages

To: WINNEBAGO COUNTY
COUNTY CLERK OFFICE
415 JACKSON, ROOM 10
OSHKOSH, WI 54901

Date: 09/15/2011
Page 1 of 1
Claim #: AMER-25-201108-50-0105-TYW

Charges for Damages to: WISCONSIN BELL INC., DBA AT&T- WISCONSIN
Occurred/Discovered On or About: 08/25/2011
Approximate Location: F 6915 CTY TK M, WINNECONNE VILLAGE, WI
How Damage Occurred: DROP CUT OFF AT GROUND.

The following amounts include direct and indirect costs covering repair of this damage including but not limited to personnel, equipment an

LABOR COST:	\$294.79
MATERIALS/UNIT COST ITEMS:	\$26.75
CONTRACTOR:	\$0.00
LOSS OF USE:	\$0.00
OTHER:	\$0.00
TOTAL AMOUNT DUE:	\$321.54

(**** PLEASE DO NOT PAY WITH TELEPHONE BILL ****)

Remit Payment to:
AT&T

909 Chestnut Street
Room 39-N-13

St. Louis, MO 63101-3099

** INQUIRIES 800-894-0374 or 800-363-3234 (FAX)

Return this section with payment

This payment is due upon receipt. If payment is not received within 30 days further collection action will be taken. IF A PAYMENT FOR LESS THAN THE FULL AMOUNT IS RECEIVED, IT WILL BE APPLIED AS A PARTIAL PAYMENT.

If you are covered by insurance, please forward this to your carrier for payment. Once your claim has been established with your insurance company, please contact us at 800-894-0374 with your claim information, and we will work with your insurance company to resolve.

AT&T accepts checks, money orders or credit card payments. We do not accept cash. Please complete the information below and return to the address above or you may call 800-894-0374 to pay by phone.

Credit Card number: _____

Three digit security number on back of card: _____

Name on Card: _____

Expiration Date: ___/___/_____

Amount to be charged to your card: \$ _____ SIGNATURE: _____

Claim #: AMER-25-201108-50-0105-TYW

(Please write claim number_