

WINNEBAGO COUNTY SHERIFF'S OFFICE CORRECTIONS DIVISION

Loss Claim Form

Inmate Name: Movales, Edvardo Inmate ID Number: 201200453
Inmate Name: 11 1010175, 10101700 Inmate in Number. 2012 00459
Contact Information:
Address 159 foster Ct
City Appleton State Wi Zip S4915 Phone (323) 557-6647
Date: 1-23-13 Value of item new: 110:94 current value (est.): 110-94
Item Description: The Biggie
☐ Damaged Property
Inmate Signature: Signature: Manual M
Brief summary of how loss/damage occurred:
I had a car packing
and I+ was given to someone else

Transmission of the information on this form is not intended to create, and receipt does not constitute, an automatic reimbursement. Neither the existence of this form, nor any content displayed at it, nor any response of an employee, is meant to, or does, create a reimbursement of any kind. If you are looking for a reimbursement you will need to write a letter and/or forward this form to the County Clerk's Office, PO Box 2808, Oshkosh, WI 54903.

Revision: September 29, 2006