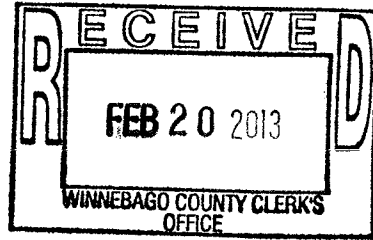
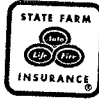


Lyndee Lewis, Agent

821 Witzel Avenue
Oshkosh, WI 54902-5552
Bus 920 231 9710
lyndee.lewis.quhv@statefarm.com
www.insuranceoshkosh.com



My insured hit a huge hole that was "cold-fixed" on 2/6/13 and then "fell apart again" on 2/7/13 when he went through it.

This was not marked.

Please find a complaint and corresponding bills. Please feel free to contact me as well.

Sincerely, Lyndee Lewis

To Whom It May Concern:

2.18.13

On Feb 7th, a little after 6 PM Central, I was traveling south on Hwy 41 just north of the Winneconne Ave Exit (Neenah, WI). The weather was a bit snowy so was traveling approximately 40-45 mph. I was in the center lane of this 3-lane section of Hwy 41.

Without warning, I hit an extremely large and deep pothole - feet in length and width - in the highway, causing my front tires to actually go down into the hole and as the front came out, the back tires did the same. Instantly, warning lights came on showing immediate loss of tire pressure and warning to take action to correct.

I exited on Winneconne Ave and drove slowly to the WalMart parking lot. I pushed my emergency button on OnStar and they located my car. They arranged for a tow truck who took my car to Bergstrom's Cadillac dealer.

-2-

TO Whom It May Concern, cont. 2.18.13

Bergstrom's fixed my car on Feb 8th and checked my entire car. Because of the major impact, I was cautioned to be aware of other concerns that may still develop.

William R. Murdy

W. R. Murdy

Feb 18, 2013

Customer Number: 61889

Invoice No: 89974

INVOICE

BILL MUNDY

6460 W WHITEFISH BAY RD

STURGEON BAY, WI 54225

Home: 920-209-2502 Bus:

Email:

Page 1 of 2

Cell: 920-209-2502



Bergstrom GM of Neenah Chevrolet Buick Cadillac
150 N. Green Bay Road · Neenah, WI 54956
(920) 722-1111 · Fax: (920) 967-0366
www.BergstromNeenah.com

SERVICE ADVISOR: 2482 SCOTT C ROGERS

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN / OUT	TAG
	11	CADILLAC CTS	1G6DS5ED2B0166837		25516 / 25516	T9763
DEL. DATE	PROD. DATE	WARR. EXP.	PROMISED	PO. NO.	RATE	PAYMENT
26MAY11			15:00 08FEB13			INV. DATE
R.O. OPENED	READY	REPAIR PERFORMED BY:			CASH	08FEB13
08FEB13	08FEB13				OPTIONS: ENG:3.6_Liter_SIDI	

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
------	--------	------	------	-------	------	-----	-------

A Towed in last night, Guest states hit large hole driving on hwy 41,
left front tire is flat, left rear showed was losing air
-Inspect for damages

DIAGS Steering and Suspension Diag services
1418 C

25516 Get car inside, raise and inspect underside for possible
damages, check steering and suspension, removed fat tire from rim, put
rim on RF machine, isn't bent. (noted tread on other 3 tires 2-4/32")

B** Per guest request - - MOUNT & BALANCE (4) TIRES
MB4 TIRE--MOUNT & BALANCE (4)
1418 C

4 19254030 TIRE

25516 mounted and balanced tires. Goodyear RS A2, P245/45R19

C** ALIGNMENT-(4) WHEEL

AL4 ALIGNMENT-(4) WHEEL custom weighted method
1418 C

25516 performed alignment check, adjusted 4 wheel alignment as
needed, road test

D** LOF--GOLD DEXOS OIL CHANGE - \$34.95 up to 5 quarts
CAUSE: lof

LOFG LOF--GOLD DEXOS OIL CHANGE - \$34.95 up to 5
quarts
1418 W

1 25177917 FILTER

5 19293000 DEXOS

25516 lof performed oil and filter change.

E** TIRE PROTECTION PACKAGE

TPP TIRE PROTECTION PACKAGE
1418 C

TPP TIRE PROTECTION PLAN

WARRANTY DISCLAIMER: ALL PARTS AND ACCESSORIES ARE SOLD AND ALL REPAIRS ARE PROVIDED BY THE DEALERSHIP AS-IS. THE DEALERSHIP HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES, EXPRESS AND IMPLIED, INCLUDING ANY IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE, AND NEITHER ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF PARTS OR PRODUCTS OR THE REPAIR. THE ONLY WARRANTIES ON PARTS AND ACCESSORIES OR REPAIRS ARE THOSE WHICH MAY BE OFFERED BY THE MANUFACTURER OR THE ORIGINAL PARTS DISTRIBUTOR AND ONLY SUCH MANUFACTURER OR DISTRIBUTOR SHALL BE ABLE FOR PERFORMANCE UNDER SUCH WARRANTIES. CUSTOMER SHALL NOT BE ENTITLED TO COVER FROM THE DEALERSHIP ANY CONSEQUENTIAL DAMAGES, DAMAGES TO PROPERTY, DAMAGES FOR LOSS OF USE, LOSS OF TIME, LOSS OF PROFIT OR INCOME, OR ANY OTHER INCIDENTAL DAMAGES.

By signing below, you acknowledge that you were notified of and authorized the dealership to perform the services/repairs itemized in this invoice and that you received the opportunity to inspect any replaced parts as requested by you. The vehicle being returned to you in exchange for your payment of the Amount Due.

DATE CUSTOMER SIGNATURE

AUTHORIZED DEALERSHIP REPRESENTATIVE SIGNATURE

*SHOP SUPPLY COSTS:

We have added a charge equal to 9% of the total cost of labor, not to exceed \$25.00, to the Repair Order for shop supplies used in connection with this repair.

ALL PARTS ARE NEW
UNLESS OTHERWISE
INDICATED.

DESCRIPTION	TOTALS
LABOR AMOUNT	
PARTS AMOUNT	
GAS, OIL, LUBE	
SUBLET AMOUNT	
MISC. CHARGES *	
TOTAL CHARGES	
LESS INSURANCE	
SALES TAX	
PLEASE PAY THIS AMOUNT	

Motor vehicle repair practices are regulated by chapter ATCP 132, Wis. Adm. Code, administered by the Bureau of Consumer Protection, Wisconsin Dept. of Consumer and Consumer Protection, P.O. Box 8911, Madison, Wisconsin 53708-8911.

R.O. #: 89974

VIN #: 1G6DS5ED2B0166837

Number: 61889

Invoice No: 89974

INVOICE



Bergstrom GM of Neenah Chevrolet Buick Cadillac
150 N. Green Bay Road · Neenah, WI 54956
(920) 722-1111 · Fax: (920) 967-0366
www.BergstromNeenah.com

MUNDY

Page 2 of 2

60 W WHITEFISH BAY RD
STURGEON BAY, WI 54225

Home: 920-209-2502 Bus:

Cell: 920-209-2502

Email:

SERVICE ADVISOR: 2482 SCOTT C ROGERS

COLOR		YEAR	MAKE/MODEL		VIN	LICENSE	MILEAGE IN / OUT		TAG
		11	CADILLAC CTS		1G6DS5ED2B0166837		25516 / 25516		T9763
DEL. DATE	PROD. DATE	WARR. EXP.	PROMISED		PO NO.	RATE	PAYMENT	INV. DATE	
26MAY11			15:00 08FEB13				CASH	08FEB13	
R.O. OPENED		READY		REPAIR PERFORMED BY:		OPTIONS:			
08FEB13		08FEB13				ENG:3.6_Liter_SIDI			

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
------	--------	------	------	-------	------	-----	-------

25516 tpp see attached sheet for details

CUSTOMER PAY SHOP SUPPLIES FOR REPAIR ORDER

4.58

1140.00 estimate approved

02/08/13 10:40am by B ill

Mundy

*
* [] CASH [] CHECK# [] CREDIT CARD [] CHARGE *
*
* [] INITIALS [] DATE *

"THANK YOU FOR YOUR BUSINESS"

R.O.#: 89974

VIN.#: 1G6DS5ED2B0166837

WARRANTY DISCLAIMER: ALL PARTS AND ACCESSORIES ARE SOLD AND ALL REPAIRS ARE PROVIDED BY THE DEALERSHIP AS-IS. THE DEALERSHIP HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES, EXPRESS AND IMPLIED, INCLUDING ANY IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE, AND NEITHER ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF PARTS OR PRODUCTS OR THE REPAIR. THE ONLY WARRANTIES ON PARTS AND ACCESSORIES OR REPAIRS ARE THOSE WHICH MAY BE OFFERED BY THE MANUFACTURER OR THE ORIGINAL PARTS DISTRIBUTOR AND ONLY SUCH MANUFACTURER OR DISTRIBUTOR SHALL BE LIABLE FOR PERFORMANCE UNDER SUCH WARRANTIES. CUSTOMER SHALL NOT BE ENTITLED TO RECOVER FROM THE DEALERSHIP ANY CONSEQUENTIAL DAMAGES, DAMAGES TO PROPERTY, DAMAGES FOR LOSS OF USE, LOSS OF TIME, LOSS OF PROFIT OR INCOME, OR ANY OTHER INCIDENTAL DAMAGES.

By signing below, you acknowledge that you were notified of and authorized the Dealership to perform the services/repairs itemized in this invoice and that you received (or had the opportunity to inspect) any replaced parts as requested by you. The vehicle is being returned to you in exchange for your payment of the Amount Due.

***SHOP SUPPLY COSTS:**

We have added a charge equal to 9% of the total cost of labor, not to exceed \$25.00, to the Repair Order for shop supplies used in connection with this repair.

ALL PARTS ARE NEW
UNLESS OTHERWISE
INDICATED.

DESCRIPTION	TOTALS
LABOR AMOUNT	\$ 192.25
PARTS AMOUNT	\$ 882.68
GAS, OIL, LUBE	\$ 0.00
SUBLET AMOUNT	\$ 0.00
MISC. CHARGES *	\$ 40.38
TOTAL CHARGES	\$ 1115.31
LESS INSURANCE	\$ 0.00
SALES TAX	\$ 55.76
PLEASE PAY THIS AMOUNT	\$ 1171.07

DATE

CUSTOMER SIGNATURE

AUTHORIZED DEALERSHIP REPRESENTATIVE SIGNATURE

RENTAL AGREEMENT NUMBER 524707525

RECEIPT

YOUR INFORMATION

Customer Name : MUNDY, WILLIAM
Loyalty Level : AVIS FIRST
Wizard Number : ***37J
Avis Worldwide Disc : WEST CORPORATION
Methods Of Payment : AMEX XX1003

YOUR VEHICLE INFORMATION

Avis Car Number : 1 2 0 4 1 7 5 0
Plate Number : WI 864UTP
Veh Grp Charged : Full-Size
Veh Grp Rented : Full-Size
Veh Description : SIL VOLKSWAGEN PASSAT SEDAN
Total Driven : 67 MIs Odometer In: 11677 MIs
Fuel Gauge Reading: Full

YOUR RENTAL

Pickup Date/Time : FEB 07, 2013 00:09 PM
Pickup Location : W6390 CHALLENGER DRIVE #213
APPLETON, WI, 54915, US

Return Date/Time : FEB 08, 2013 04:10 PM
Return Location : W6390 CHALLENGER DRIVE #213
APPLETON, WI, 54915, US

YOUR VEHICLE CHARGES:

MIN 1 DAY

RATE CHART

TIME AND MILEAGE

MIs : Unlimited

HRLY : 36.76

DAILY: 49.00

WKLY: 294.00

MONTHLY: 1176.00

MIN 1DY/4A/E 67FM + 49.00

Time & Mileage: 49.00

TAXABLE FEES

CUSTOMER FACILITY CHG 3.50 /D + 3.50

VEH LICENSE RECOUP .75 /DY + .75

ENERGY RECOVERY FEE .50 /DY + .50

12.35% Concession Recovery Fee + 6.21

Subtotal Charges: 59.96

Sales Tax 5.000% + 3.00

NON TAXABLE ITEMS

* 5% FEE + 3.00

Your Total Charges Paid: 65.96

Prepayment : .00

NET CHARGES: USD 65.96

Your Total Due: 0.00

Fuel service: .3404/MI 7.490/Gal

*WISCONSIN RENTAL CAR FEE

YOUR OPTIONAL PRODUCTS/SERVICES

RATE INCLUDES LDW ABOVE 3000.00

-----NOTICES-----AVIS SYSTEM LICENSEE-----NOTICES-----AVIS SYSTEM LICENSE-----NOTICES-----AVIS SYSTEM LICENSEE-----NOTICES-----

I agree to the rental charges above. I acknowledge additional charges could be added based on tolls, tickets, fines administrative charges and other fees which may be applicable. X

Thank you for renting with Avis.

If you have questions regarding this rental, call us at 920-730-7575

This vehicle was rented to you by CHELSEA

This vehicle was checked in for you by CHE KANG

BB MOBIL , 9632316
4328 W. Prospect
APPLETON, WI

02/08/2013 03:58:08 PM 148939972

AMEX XXXXXX1809 AMEX
MUNDY/WILLIAM R
INVOICE H1A2579
AUTH 563482

PUMP# 2	
Regular	2.621G
PRICE/GAL	3.649
FUEL TOTAL	\$ 9.38

Subtotal = \$	9.38
Tax = \$	0.00
Total = \$	9.38

CREDIT	\$ 9.38
Credit	

THANKS FOR SHOPPING BB MOBIL
920-738-5667

Accident Report**General Information**

Reportable Accident Yes	On Emergency	Amended	DOT Document Number CJ2R0HS	Document Override Number
Agency Accident Number 13-535			Police Number 13-535	
4 - Accident Date 2/7/2013	5 - Time of Accident (Military Time) 1625	6 - Total Units 1	7 - Total Injured 0	8 - Total Killed 0
2 - County WINNEBAGO - 70		3 - Municipality NEENAH - 05, Town		11 - Accident Location Non-Intersection
14 - On Hwy No. 041	14 - On Street Name SB	14 - Bus/Frnt/Rmp	15 - Est. Dist Ft/Mi 0.50 Miles	15 - Hwy. Dir SOUTH
16 - Fr/At Hwy No. BB		16 - From/At Street Name		16 - Business/Frontage/Ramp
17 - Structure Type	17 - Structure Number	12 - Latitude		13 - Longitude
80 - First Harmful Event Unknown		93 - Manner of Collision No Collision with Motor Vehicle in Transport		
112 - Access Control Full Control	113 - Road Curvature Straight	113 - Road Terrain Hill	Surface Type Concrete - 1	
115 - Traffic Way Divided-Highway-Median-Strip-With-Traffic-Barrier				
117 - Relation To Roadway On-Roadway				
114 - Light Condition Dark-Not-Lighted		116 - Road Surface Condition Snow/Slush		118 - Weather Snow
9 Hit and Run	9 Government Property Yes	9 Fire	9 Photos Taken	9 Trailer or Towed
9 Truck, Bus, or Hazardous Materials	9 Load Spillage	9 Construction Zone	9 Names Exchanged	

101 Supplemental Reports	102 Witness Statements	103 Measurements Taken	79 - EMS Number

Operator/Pedestrian 1

Unit Status	81 - Most harmful Event: Collision With Unknown	23 - Dir Of Travel SOUTH	24 - Speed Limit 65	
36 - Operating as Classified D Class	37 - Endorsements	35 Operating Commercial motor Vehicle		
29 - Drivers License Number	30 - State WI	31 - Expiration Year 2019	34 - On Duty Accident	
25 - Operator/Pedestrian Last Name MUNDY	25 - First Name WILLIAM	25 - Middle Initial R	25 - Suffix	
32 - Date Of Birth		33 - Sex Male		
26 - Address Street & Number 277 N WESTHAVEN DR APT 102		26 - PO Box		
27 - City OSHKOSH	27 - State WI	27 - Zip Code 54904	28 - Telephone Number 9202092502	
39 - Seat Position Front-Seat-Left-Side-(MC/Bike Driver, Train Conductor)		40 - Safety Equipment		
38 - Injury Severity N - No Apparent Injury	41 - Airbag Non-Deployed	42 - Ejected Not-Ejected	44 Medical Transport	
43 - Trapped/Extricated Not-Trapped	92 - Pedestrian Location	92 - Pedestrian Action		
119 - What Driver Was Doing Going-Straight	120 - Traffic Control No-Control	62 - No. of Citations Issued 0		
64 - 1st Statute No.	64 - 2nd Statute No.	64 - 3rd Statute No.	64 - 4th Statute No.	64 - 5th Statute No.
122 - Driver Factors Not-Applicable				
88 - Driver or Pedestrian Cond Not Observed		89 - Substance Presence Unknown		

90 - Alcohol Test
Test Not Given

90 - Alcohol Content

91 - Drug Test
Test-Not-Given

91 - Drugs reported

124 - Highway Factors
Rough-Pavement

Vehicle 1

21 - Unit Type
Automobile

Vehicle Type
Passenger-Car

22 - Total Occupants
1

56 - License Plate Number
W7359T

57 - Plate Type
SES

58 - State
WI

59 - Exp Year
2013

55 - Vehicle Identification Number
1G6DS5ED2B0166837

50 - Year
2011

51 - Make
CADI

52 - Model
CTS PREMIU

53 - Body Style
4D

54 - Color
BLK

100 - Skidmarks to Impact (Ft)

94 - Vehicle Damage

95 - Extent Of Damage

96 Vehicle Towed Due To Damage
Yes

97 - Vehicle Removed By
UNKNOWN

123 - Vehicle Factors
Not-Applicable

Vehicle Owner 1

45 Vehicle Owner Same As Operator
Yes

46 - Vehicle Owner Last Name
MUNDY

46 - First Name
WILLIAM

46 - Middle Initial
R

46 - Suffix

Date Of Birth

46 - Company Name

47 - Address Street & Number
277 N WESTHAVEN DR APT 102

47 - PO Box

48 - City

48 - State

48 - Zip Code

49 - Telephone Number

OSHKOSH	WI	54904	9202092502
---------	----	-------	------------

Insurance 1

63 - Liability Insurance Company STATE FARM	60 Policy Holder Same As Owner Yes
61 - Policy Holder Last Name MUNDY	61 - Policy Holder First Name WILLIAM
61 - Policy Holder Company	

School Bus 1

Bus Traveling to/from	School Name	Body Make	Seating Capacity
School District Contracted With			

Property Owner 1

Organization Type Government	84 - Property Owner Last Name	84 - First Name	84 - Middle Initial	84 - Suffix
84 - Company Name WISCONSIN DEPT OF TRANSPORTATION		Government Property Type Federal/State		
85 - Address Street & Number 944 VANDERPERREN WAY		85 - PO Box 28080		
86 - City GREEN BAY	86 - State WI	86 - Zip Code 543240080	87 - Telephone Number 9204925643	
83 - Government Damage Tag Number 253766				

Fixed Objects Struck

82 - Striking Unit 1	82 - Object Struck Unknown	82 - Striking Unit	82 - Object Struck
82 - Striking Unit	82 - Object Struck	82 - Striking Unit	82 - Object Struck
82 - Striking Unit	82 - Object Struck	82 - Striking Unit	82 - Object Struck

Diagram and Narrative**105 - PHOTOS BY**

UNIT 1 WAS TRAVILING SOUTH BOWD ON HWY 41 STRUCK A POT HOLE COUSING DAMAGE TO TIRES AND RIMS ON VEHICLE UNONE DAMAGE TO UNDERCARAGE

Officer Information

125 - Officer Last Name OLIG	125 - First Name NATHAN	125 - Middle Initial	131 - Officer ID W26
129 - Law Enforcement Agency No. 7100		130 - Law Enforcement Agency Name WINNEBAGO COUNTY SHERIFF	
126 - Law Enforcement Agency Address Street & Number 4311 JACKSON STREET			
127 - City OSHKOSH	127 - State WI	127 - Zip Code 54903	128 - Telephone Number 9202367300
132 - Date Notified 2/7/2013	133 - Time Notified (Military Time) 2100	134 - Time Arrived (Military Time) 2130	135 - Date Of Report 2/7/2013
Agency Accident Number 13-535	Police Number 13-535		19 - Special Study
18 - Agency Space			