NOTICE OF CIRCUMSTANCES OF CLAIM
PURSUANT TO § 893.80(1)(a), WIS. STATS.

TO: Joseph Olszewski
4445 Sherman Road
Oshkosh, WI 54901

Deborah A. Galeazzi
City of Menasha Clerk
140 Main Street
Menasha, WI 54952

RECEIVED
MAY 21 2012
CITY OF MENASHA
BY

PLEASE TAKE NOTICE:

1. Kathy L. Skibba is an adult citizen of the State of Wisconsin and resides at 3130 West First Avenue, Appleton, WI 54914.

2. Kathy L. Skibba was injured, on April 25, 2012, due to the negligence of, Joseph Olszewski, who was employed by the City of Menasha.

3. The circumstances of the injuries are as follows: On April 25, 2012, Kathy L. Skibba was operating her automobile traveling southbound on S. Commercial Street in Neenah, Wisconsin. While Kathy J. Skibba was stopped in traffic for a crossing guard at the intersection of E. Winneconne Avenue, Joseph Olszewski was operating a City of Menasha vehicle directly behind Ms. Skibba's vehicle and struck the rear of Ms. Skibba's vehicle.

4. At all times material hereto, Joseph Olszewski was operating a vehicle owned by the City of Menasha and was an employee/agent of the City of Menasha.

5. As a result of Joseph Olszewski's negligence, Kathy L. Skibba suffered personal injuries.

6. In addition to personal injuries, Kathy L. Skibba suffered property damage to her automobile (including but not limited to repair costs).

7. At all times material hereto, the above named parties had actual notice of the accident and the injuries that resulted from this accident.

8. Attached as Exhibit "A" is a true and accurate copy of the Wisconsin Motor Vehicle Accident Report for the above-described accident.

9. This document is a Notice of Circumstances of Claim served on the above parties in compliance with Wisconsin Law. This document is not a claim for damages. No claim for damages is being made at this time.

Dated at Appleton, Wisconsin this 17th day of May, 2012.

HABUSH HABUSH & ROTTIER S.C.®

Jacob R. Reis
State Bar #1045766
Attorney for Kathy L. Skibba

MAILING ADDRESS:

4100 Boardwalk Court
Appleton, WI 54914

Telephone: (920) 738-0900

PK2011

POLICE # 12-4976

ACCIDENT #

GENERAL INFORMATION

☒ Reportable Accident	☐ On Emergency	☐ Amended	DOT Document Number: CCXHLCK	Document Override Number:
Agency Accident Number:		Police Number: 12-4976		
4 - Accident Date: 04/25/2012	5 - Time of Accident (Military Time): 0800	6 - Total Units: 02	7 - Total Injured: 00	8 - Total Killed: 00
2 - County: WINNEBAGO - 70	3 - Municipality: NEENAH - 54, CITY		11 - Accident Location: INTERSECTION	
14 - On Hwy No.:	14 - On Street Name: S COMMERCIAL ST	14 - Bus/Frnt/Rmp:	15 - Est. Dist: / Ft/Mi	15 - Hwy. Dir:
16 - Fr/At Hwy No.:	16 - From/At Street Name: W WINNECONNE AVE	16 - Business/Frontage/Ramp:		
17 - Structure Type:	17 - Structure Number:	12 - Latitude:	13 - Longitude: -	
60 - First Harmful Event: MOTOR VEHICLE IN TRANSPORT	93 - Manner of Collision: REAR-END			
112 - Access Control: NO CONTROL	113 - Road Curvature: STRAIGHT	113 - Road Terrain: LEVEL/FLAT	Surface Type: CONCRETE - 1	
115 - Traffic Way: NOT-PHYSICALLY-DIVIDED-(2-WAY TRAFFIC)				
117 - Relation To Roadway: ON-ROADWAY				
114 - Light Condition: DAYLIGHT	116 - Road Surface Condition: DRY	118 - Weather: CLOUDY		
9 ☐ Hit and Run	9 ☐ Government Property	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 - E M S Number:	

Operator/Pedestrian

OPERATOR/PEDESTRIAN 01

Unit Status:	81 - Most Harmful Event: Collision With: MOTOR VEHICLE IN TRANSPORT	23 - Dir Of Travel: SOUTH	24 - Speed Limit: 30
36 - Operating as Classified: D CLASS	37 - Endorsements:	35 ☐ Operating Commercial Motor Vehicle	
29 - Driver's License Number: O4224806442207	30 - State: WI	31 - Expiration Year: 2017	34 - On Duty Accident: FIRE-FIGHTER
25 - Operator/Pedestrian Last Name: OLSZEWSKI	25 - First Name: JOSEPH	25 - Middle Initial:	25 - Suffix:
32 - Date Of Birth: 11/22/1964	33 - Sex: MALE		
26 - Address Street & Number: 4445 SHERMAN RD	26 - PO Box:		
27 - City: OSHKOSH	27 - State: WI	27 - Zip Code: 54901	28 - Telephone Number: (920) 886-6200 EXT.
39 - Seat Position: FRONT-SEAT-LEFT-SIDE-(MC/BIKE DRIVER, TRAIN CONDUCTOR)	40 - Safety Equipment: SHOULDER-BELT-AND-LAP-BELT-USED		
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: TRAFFIC-SIGNAL-OPERATING	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: FOLLOWING-TOO-CLOSE				
88 - Driver or Pedestrian Cond: APPEARED NORMAL	89 - Substance Presence: UNKNOWN			
90 - Alcohol Test: TEST NOT GIVEN	90 - Alcohol Content:	91 - Drug Test: TEST-NOT-GIVEN		

EXHIBIT A

91 - Drugs Reported

124 - Highway Factors
NOT-APPLICABLE

Vehicle

VEHICLE 01

21 - Unit Type	Vehicle Type	22 - Total Occupants
AUTOMOBILE	PASSENGER-CAR	1

56 - License Plate Number	57 - Plate Type	58 - State	59 - Exp Year	55 - Vehicle Identification Number
28370	MUN	WI		1GNFK16KXRJ33189

50 - Year	51 - Make	52 - Model	53 - Body Style	54 - Color	100 - Skidmarks to Impact (Ft)
1994	CHEV	1500	OT	WHI	

94 - Vehicle Damage
FRONT

95 - Extent Of Damage	96	97 - Vehicle Removed By
VERY-MINOR	☐ Vehicle Towed Due To Damage	OPERATOR

123 - Vehicle Factors
NOT-APPLICABLE

Vehicle Owner

VEH OWNER 01

45 ☐ Vehicle Owner Same As Operator

46 - Vehicle Owner Last Name	46 - First Name	46 - Middle Initial	46 - Suffix	Date Of Birth

46 - Company Name
MENASHA CITY

47- Address Street & Number	47 - PO Box
140 MAIN ST	

48 - City	48 - State	48 - Zip Code	49 - Telephone Number
MENASHA	WI	54952	(920) 886-6200 EXT.

Insurance

INS 01

63 - Liability Insurance Company	60
CITIES-&-VILLAGES-MUTUAL-INS-CO	☐ Policy Holder Same As Owner

61 - Policy Holder Last Name	61 - Policy Holder First Name

61 - Policy Holder Company
MENASHA CITY

School Bus

BUS 01

Bus Travelling to/from	School Name	Body Make	Seating Capacity
○ To ○ From			

School District Contracted With

Operator/Pedestrian

Unit Status	81 - Most Harmful Event: Collision With	23 - Dir Of Travel	24 - Speed Limit
	MOTOR VEHICLE IN TRANSPORT	SOUTH	30

36 - Operating as Classified	37 - Endorsements	35
D CLASS		☐ Operating Commercial Motor Vehicle

29 - Driver's License Number	30 - State	31 - Expiration Year	34 - On Duty Accident
S1005126763006	WI	2014	

25 - Operator/Pedestrian Last Name	25 - First Name	25 - Middle Initial	25 - Suffix
SKIBBA	KATHY	L	

32 - Date Of Birth	33 - Sex
04/10/1967	FEMALE

OPERATOR/PEDESTRIAN 02

26 - Address Street & Number: 3130 W 1ST AVE			26 - PO Box:
27 - City: APPLETON	27 - State: WI	27 - Zip Code: 54914	28 - Telephone Number: (920) 358-3639 EXT.
39 - Seat Position: FRONT-SEAT-LEFT-SIDE-(MC/BIKE DRIVER, TRAIN CONDUCTOR)		40 - Safety Equipment: SHOULDER-BELT-AND-LAP-BELT-USED	
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: SLOWING-OR-STOPPING	120 - Traffic Control: TRAFFIC-SIGNAL-OPERATING		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: APPEARED NORMAL	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: NOT-APPLICABLE			

Vehicle

VEHICLE 02

21 - Unit Type: AUTOMOBILE	Vehicle Type: PASSENGER-CAR			22 - Total Occupants: 1
56 - License Plate Number: 598MAR	57 - Plate Type: AUT	58 - State: WI	59 - Exp Year: 2013	55 - Vehicle Identification Number: 2CNDL63F98606308
50 - Year: 2008	51 - Make: CHEV	52 - Model: EQUINOX	53 - Body Style: OT	54 - Color: BLU / 100 - Skidmarks to Impact (Ft):
94 - Vehicle Damage: REAR				
95 - Extent Of Damage: MINOR	96 ☐ Vehicle Towed Due To Damage		97 - Vehicle Removed By: OPERATOR	
123 - Vehicle Factors: NOT-APPLICABLE				

Vehicle Owner

VEH OWNER 02

45 ☒ Vehicle Owner Same As Operator				
46 - Vehicle Owner Last Name: SKIBBA	46 - First Name: KATHY	46 - Middle Initial: L	46 - Suffix:	Date Of Birth: 04/10/1967
46 - Company Name:				
47- Address Street & Number: 3130 W 1ST AVE		47 - PO Box:		
48 - City: APPLETON	48 - State: WI	48 - Zip Code: 54914	49 - Telephone Number: (920) 358-3639 EXT.	

Insurance

INS 02

63 - Liability Insurance Company		60
PERKIN INSURANCE 920-738-5474		☒ Policy Holder Same As Owner
61 - Policy Holder Last Name	61 - Policy Holder First Name	
SKIBBA	KATHY	
61 - Policy Holder Company		

School Bus

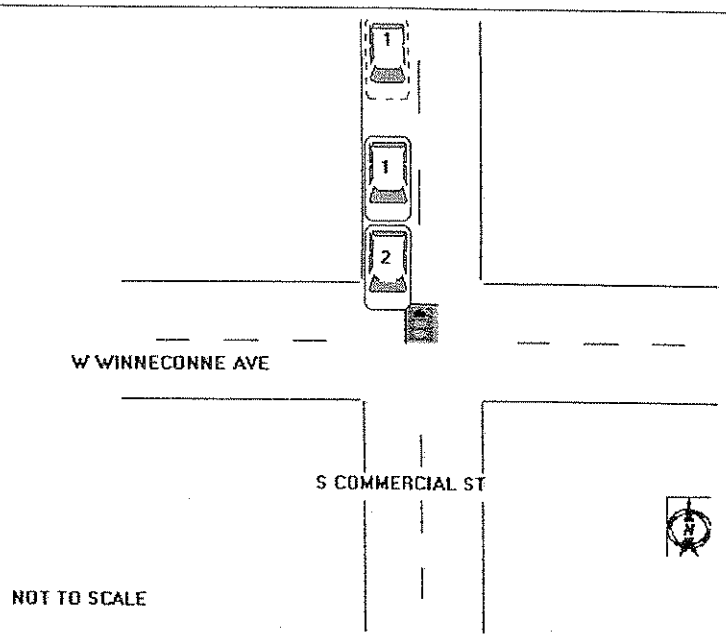
BUS 02

Bus Travelling to/from	School Name	Body Make	Seating Capacity
◯ To ◯ From			
School District Contracted With			

Diagram and Narrative

DIAGRAM AND NARRATIVE

105 - PHOTOS BY



UNIT #2 WAS TRAVELING SOUTH ON S COMMERCIAL ST AND HAD TO STOP FOR A CROSSING GUARD AT THE INTERSECTION OF W WINNECONNE AVE. UNIT #1 WAS TRAVELING SOUTH ON S COMMERCIAL ST BEHIND UNIT #2. BOTH WERE IN THE OUTSIDE LANE. UNIT #1 WAS FOLLOWING TOO CLOSELY AND WASN'T ABLE TO STOP IN TIME TO AVOID COLLIDING WITH THE REAR END OF UNIT #2. ALCOHOL WAS NOT A FACTOR FOR THE DRIVER OF UNIT #1.

Officer Information

OFFICER INFORMATION

125 - Officer Last Name	125 - First Name	125 - Middle Initial	131 - Officer ID
GONZALEZ	EDGARDO	A	N106
129 - Law Enforcement Agency No.	130 - Law Enforcement Agency Name		
7054	NEENAH POLICE DEPARTMENT		
126 - Law Enforcement Agency Address Street & Number			
2111 MARATHON AVENUE			
127 - City	127 - State	127 - Zip Code	128 - Telephone Number
NEENAH	WI	54956	(920) 886-6000 EXT.
132 - Date Notified	133 - Time Notified (Military Time)	134 - Time Arrived (Military Time)	135 - Date Of Report
04/25/2012	0800	0805	04/25/2012
Agency Accident Number	Police Number	19 - Special Study	
	12-4976		
18 - Agency Space			
12-4976			