



Legislation Details (With Text)

**File #:** 40842      **Version:** 1      **Name:** CLAIM: N. Grant, American Family Mutual Insurance Co. for D. Crocker - vehicle damage - amount greater than \$1.00.

**Type:** Claim      **Status:** Filed

**File created:** 11/16/2015      **In control:** Risk Manager

**On agenda:** 12/1/2015      **Final action:** 7/21/2017

**Enactment date:**      **Enactment #:**

**Title:** NOTICE OF CLAIM: N. Grant, American Family Mutual Insurance Co. for D. Crocker - vehicle damage - amount greater than \$1.00.

**Sponsors:**

**Indexes:**

**Code sections:**

**Attachments:**

Date	Ver.	Action By	Action	Result
7/21/2017	1	Risk Manager	Claim Filed	
12/1/2015	1	COMMON COUNCIL	Refer	Pass

**Title**  
NOTICE OF CLAIM: N. Grant, American Family Mutual Insurance Co. for D. Crocker - vehicle damage - amount greater than \$1.00.

**Body**  
Claim received 11/12/2015.