



## Legislation Details

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**File #:** 25663      **Version:** 1      **Name:** CLAIM: J. O'Connell, Dean Health Plan, Inc., P.O. Box 56099, Madison, 53705, for L. Fruin - personal injury - \$317.40.

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

**File created:** 3/14/2012      **In control:** Risk Manager

**On agenda:** 3/20/2012      **Final action:** 3/18/2013

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

**Title:** J. O'Connell, Dean Health Plan, Inc., P.O. Box 56099, Madison, 53705, for L. Fruin - personal injury - \$317.40.

**Sponsors:**

**Indexes:**

**Code sections:**

**Attachments:**

Date	Ver.	Action By	Action	Result
3/18/2013	1	Risk Manager	Statutory Disallowance	
3/20/2012	1	COMMON COUNCIL	Referred	