



RESOLUTION # 21-5/11

TO: HONORABLE MEMBERS OF THE LA CROSSE COUNTY BOARD OF SUPERVISORS

ITEM # 5-13

BOARD ACTION

Adopted:

For: 32

Against: -

Abstain: -

Abs/Excd: 3

Vote Req: _____

Other Action: _____

EXECUTIVE COMMITTEE ACTION

Adopted:

For: 8

Against: -

Abstain: -

Abs/Excd: 1

RE: CLAIM OF JOYCE JOSTAD AND WISCONSIN MUTUAL INSURANCE COMPANY

WHEREAS, Joyce Jostad and her insurance company, Wisconsin Mutual Insurance Company, have filed a claim alleging that on December 14, 2010 a La Crosse County Highway Department snow plow backed into Ms. Jostad's car on Hwy 16 resulting in damage to her vehicle in the total amount of \$3,556.31; and,

WHEREAS, Wisconsin Municipal Mutual Insurance Company (WMMIC) has reviewed the information, investigated the facts and determined that La Crosse County has no liability for this claim and recommends formal disallowance of the claim by the County Board; and,

WHEREAS, the above stated claims do not appear to be meritorious and should be disallowed.

NOW, THEREFORE BE IT RESOLVED, that the claim of Joyce Jostad and Wisconsin Mutual Insurance Company against La Crosse County, its officers, officials, employees, and agents is hereby disallowed and further be it required that notice of disallowance of this claim shall be served on the claimants by registered or certified mail and the receipts therefore, signed by the claimants, or the returned registered letters, shall be proof of service.

BE IT FURTHER RESOLVED, that the claimants are notified that no action on the claim against La Crosse County, nor against any of its officers, officials, agents, or employees, may be brought after 6 months from the date of service of this notice of disallowance.

FISCAL NOTE: The cost to La Crosse County for sending certified mail/restricted delivery to the claimants is \$20.18.

Date: May 11, 2011

[Signature]

EXECUTIVE COMMITTEE CHAIR

Date: 5/11/11

[Signature]

RECORDING CLERK

	Reviewed Only	Recommended	Not Recommended	
Co. Admin.	<u>SD</u>	_____	_____	Requested By: WMMIC Date Requested: April 20, 2011 Drafted By: Corporation Counsel
Fin. Director	<u>[Signature]</u>	_____	_____	
Corp. Counsel	_____	<u>WAS</u>	_____	
Board Chair	<u>SD/ma</u>	_____	_____	

Adopted by the La Crosse County Board this 19 Day of May, 2011

STATE OF WISCONSIN
 COUNTY OF LA CROSSE
 I, Ginny Dankmeyer, County Clerk of La Crosse County do hereby certify that this document is a true and correct copy of the original resolution required by law to be in my custody and which the County Board of Supervisors of La Crosse County adopted at a meeting held on the 19th day of May, 2011.

[Signature]
 Ginny Dankmeyer, La Crosse County Clerk