

Jim Doyle
Governor

Roberta Gassman
Secretary

Frances Huntley-Cooper
Division Administrator



State of Wisconsin

Department of Workforce Development

WORKER'S COMPENSATION

201 East Washington Avenue
P.O. Box 7901
Madison, WI 53707-7901
Telephone: (608) 266-1340
Imaging Server Fax: (608) 260-2503
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<http://www.dwd.state.wi.us/wc/>
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October 6, 2003

TEST INSURER 1
C/O TEST INSURER 1
ONE MAIN ST
MADISON WI 53703

WC CLAIM NO: 9999-999999
INJURY DATE: 05/01/98
EMPLOYEE: SIMPLE, SAMPLE
EMPLOYER: SAMPLE EMPLOYER INC
INSURER NO: 094CBD6S8646

IF YOU CALL OR WRITE US
PLEASE USE WC CLAIM NO.

This is a request for an overdue report.

For failing to file the required report, the Department is assessing you a \$100 forfeiture, payable to the State of Wisconsin pursuant to s.102.35(1), Wis. Stats. **Please do not pay now.** The Department will record each forfeiture you incur and invoice you annually for the total amount due.

We received a compromise or stipulation without the required WKC-13, Supplementary Report. Please send us a WKC-13 showing all worker's compensation payments to date and the dates for which these payments were made.

Failure to respond to this request within 30 days may result in further sanctions by the Worker's Compensation Division under ss. 102.28(2)(c) or 102.31(3), Wis. Stats., or by the Office of the Commissioner of Insurance, under s. 601.64 Wis. Stats., or both.

To find out what other reports are overdue and avoid forfeitures in the future, go to the Worker's Compensation web site's Insurer's Pending Reports at:
http://www.dwd.state.wi.us/wc/insurance/pending_rpts.htm

Sincerely,

Department of Workforce Development
Worker's Compensation Division

FWC86K (R. 4/2003)