

SAMPLE EMPLOYER INC  
201 E WASHINGTON AVE RM C100  
RM C100  
MADISON WI 53703

WC CLAIM NO: 9999-999999  
INJURY DATE: 05/01/85  
EMPLOYEE: SAMPLE-SIMPLES, SAMPLE  
EMPLOYER: SAMPLE EMPLOYER INC  
INSURER NO:

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

This employee has filed a claim under Section 102.57, Wisconsin Statutes, alleging that his/her injury was caused by your failure to comply with Section 101.11, Wis. Stats., or a safety regulation of the Department of Workforce Development.

It is your responsibility as the employer to defend this claim.

If it is established that you failed to comply with Section 101.11 or a safety regulation and this failure caused the accident, you, the employer, are liable for an additional 15 percent of any compensation paid to the employee. It is your responsibility and not your insurance carrier's to defend or pay this claim.

A hearing will be scheduled in due course. All parties will receive notice of the time and place no less than ten days before the date of hearing.

If you wish to retain an attorney to represent you, you should do so immediately. Contact us if you have any questions.

Division of Hearings and Appeals  
Office of Worker's Compensation Hearings

GL33A (R. 01/2016)

**Other parties receiving this notice:**

**Copy sent to:**  
SAMPLE SAMPLE SAMPLE-SIMPLES  
201 E WASHINGTON AVE RM # C100  
MADISON WI 53703