

EMPLOYER  
ADDRESS 1  
ADDRESS 2  
CITY STATE ZIP

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.

The employee, Sample Sample Sample-Simples, filed an application for hearing. The Division of Hearings and Appeals served this application on. Wis. Admin. Code § DWD 80.05(2) provides that an Admission to Service and Answer to Application shall be filed within 20 days after the application has been served.

According to our records the following parties have not filed an answer to the application with the Division for the above-referenced claim:

EMPLOYER

The above-named parties are hereby directed to file an answer within 20 days from the date of this letter. Failure to file an answer may result in the Division issuing an order by default without further notice or hearing, in accordance with the application, as provided by s. 102.18(1)(a), Wis. Stats. If the parties believe this letter has been issued in error, please notify the Division in writing and attach a copy of the Answer.

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

GL37E (R. 01/2016)

**Copy sent to:**