TEST INSURER 2 C/O TEST INSURER 2 RM C100 201 E WASHINGTON AVE MADISON WI 53703

WC CLAIM NO: 9999-999999 IF YOU CALL OR WRITE US
INJURY DATE: 05/01/85 PLEASE USE WC CLAIM NO.

EMPLOYEE: SAMPLE-SIMPLES, SAMPLE EMPLOYER: SAMPLE EMPLOYER INC

INSURER NO:

Under the provisions of Wisconsin Statutes, Sec. 102.22, interest payments as a result of the court appeal have become due as follows:

T0: , the sum of	\$
T0: , the sum of	\$
T0: , the sum of	\$
T0: , the sum of	\$
T0: , the sum of	\$
T0: , the sum of	\$
T0: , the sum of	\$

Please advise when the indicated payments have been made.

Department of Workforce Development Worker's Compensation Division

LastFirstALJintGL87

GL87 (R. 07/2003)

Copy sent to:

ATTORNEY PETERSON LAW OFFICES 2411 S BROADWAY MENOMONIE WI 54751

ATTORNEY WALTER D THUROW PO BOX 188 RIO WI 53960