

Wisconsin Department of Safety and Professional Services

Parties:	<input type="text"/>	
Date Filed:	<input type="text"/> / <input type="text"/> / <input type="text"/>	Date Resolved: <input type="text"/> / <input type="text"/> / <input type="text"/>
Court and Case No.	<input type="text"/>	Disposition: <input type="text"/>
Description of Legal Action or Claim:		

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