



OFFICE OF THE COUNTY COUNSEL

COUNTY OF SANTA CRUZ

GOVERNMENT CENTER (408)454-2040 FAX(408)454-2115

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DWIGHT L. HERR COUNTY COUNSEL

GOVERNMENT TORT CLAIM

DEBORAH STEEN SAMUEL TORRES, JR. CHIEF ASSISTANTS

RECOMMENDED ACTION

Agenda April 20, 1999

To: The Board of Supervisors

Re: Claim of Miguel

Original Document and associated materials are on file at the Clerk to the Board of Supervisors.

In regard to the above-referenced claim, this is to recommend that the Board take the following action:

1. Deny the claim of Miguel William Balderos, No. 899-107 and refer to County Counsel.

Deny the application to file a late claim on behalf of and refer to County Counsel.

Grant the application to file a late claim on behalf of and refer to County Counsel.

4. Approve the claim of in the amount of and reject it as to the balance, if any, and refer to County Counsel.

5. Reject the claim of as insufficiently filed and refer to County Counsel.

cc: Cecilia Espinola, Administrator Human Resources Agency

RISK MANAGEMENT

By Janet McKinley

COUNTY COUNSEL

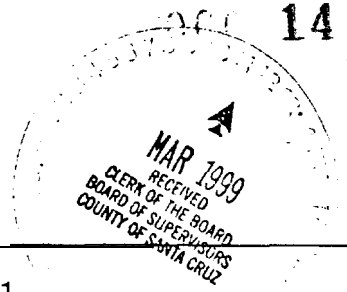
By [Signature]

LTR9.WPT

RECLAMO CONTRA EL CONDADO DE SANTA CRUZ  
(Segun Seccion 910 y Scguido de Codigo de Gobcmacion)

899-107

14



A: BOARD OF SUPERVISORS, COUNTY OF SANTA CRUZ  
ATTN: Clerk of the Board, 701 Ocean Street, Santa Cruz, CA 95060

1. Nombre de demandante Miguel William Balderos  
2. Direccion de demandante P.O Box 1694 Santa Cruz California, 95061

Número de telefono de demandante \_\_\_\_\_

Caja postal donde se pueden mandar las noticias same as above

3. Incidente Oppression and Malice

Fecha From November 1997 to 1998 Lugar Santa Cruz Public Guardian office

Circunstancias del incidente o transaccion que resulto de este reclamo I Started receiving SSI disability funds with the Santa Cruz public Guardian's office as my fidituary. They refused me things that would better my life and approved things that would not. They also refuse to pay me a single dime while I was In jail and after I got out with the Malicios intent to hurt

me by cutting off all my funds I had to eat out of the garbage cans to live while they withheld all my money for no other reason except to break me in mind, body and spirit. They are EVIL Nazis !!!!!

4. Descripcion general tocante sus deudas, obligaciones, lastimaduras, danos o perdidas que ha sufrido hasta la fecha Because these nazis would not give me any money I was force to live outdoors and I almost

got killed by some skinheads. They refuse to help me by giving me money and since I am 86 from most places, I had no choice but to steal food and eat out of garbage cans to survive. They Sat on my money as long as they could until the SSI people forced them to give it up By then the Damage was

5. Nombre(s) de empleado(s) publico(s) quien han causado lastimaduras, danos, o perdida si son reconocidas por el demandante The Head ( name unknown ) Public Guardian / 2 : A1 Amaya #3 Ellen

Chandler, 4 Sandi Schmidt 5. ET AL

6. Cantidad reclamada a hasta la fecha ..... \$ 7004.00

Estimacion de perdida futura (si sabe)..... \$ 6300.00

Total ..... \$ 13,304

7. Razones de tales calculaciones \$ 7004.00 Mis Manage Funds 9 x \$700.00 Money They CONTROL ed TO manipulate And CONTROL me

8. Indique la corte de jurisdiccion, si el reclamo es mas de \$ 10,000  
Any Dept Corte Municipal \_\_\_\_\_ Corte Superior.

Miguel W Balderos  
FIRMA DE DEMANDANTE

Nota Especial: Este reclamo tiene que ser presentada a: Clerk, Board of Supervisors, #500, 701 Ocean Street, Santa Cruz, antes de seis meses depues del acto que ha causado la perdida.

Preguntas sobre el Americans with Disabilities Act (Acta Americana de Incapacidades) o si necesita acomodaciones llame a la Coordinadora al # 454-2962 (TDD: 454-2 123).