

County of Santa Cruz

OFFICE OF THE COUNTY COUNSEL

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Assistants

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GOVERNMENT TORT CLAIM

RECOMMENDED ACTION

					Agenda	February	15,	2000	
То:	Board	of Supervisors							
Re:	Claim	ofOswaldo P	into,	No. 900-	091D				
Origin	al docui	nent and associate	ed mat	erials are o	on file at the Cl	erk to the Bo	ard of	Supervisors.	
In reg	ard to th	e above-reference	d clain	n, this is to	recommend th	nat the Board	take th	e following action:	
1 X	. •	Deny the claim of Counsel.	of	Oswaldo	Pinto, No. 9			and refer to County	
	2.	Deny the application to file a late claim on behalf of and refer to County Counsel.							
	3.	Grant the applica	tion to	file a late	claim on behal	lf of			
	_4.	and refer to Cour Approve the clair	•					in the amount of	
	_5.	Reject the claim to County County			the balance, if			unty Counsel. iently filed and refer	
cc: Rama Khalsa, Administator Health Services Agency			r	RISK MAI	NAGEMENT	· YKL.	ilar		
	Mark	Tracy, Sheriff	-Coro	ner	COUNTY	COUNSEL	<u>Pr x</u>	nert	
PER5 107 wp rev. 4/99					By Jamus Ton,				

GOVERNMENT CODE CLAIM Against:

COUNTY OF SANTA CRUZ (Class Claim)

1. The name and address of the class representatives are:

Dave Kelley 3350 San Marino San Jose CA 95127 Christopher St. Charles 1430 Harper Street Santa Clara CA 95062

Oswaldo Pinto 239 Dutchman Rd. Watsonville CA 95076

2. Claimant desires notices and communications be sent to:

Michael Mayron, HINKLE, JACHIMOWICZ & POINTER 2007 W. Hedding Street, Suite 100 San Jose CA 95128

3. The date, place and other circumstances of the occurrence, which gave rise to this claim are as follows:

On or about 11/2/99.

4. A general description of the indebtedness, obligation, injury, damage or loss incurred so far as it may be known at the time of presentation of this claim is as follows:

Humiliation, embarrassment, assault, battery, sexual battery, violation of civil rights.

5. The name(s) of the public employee or employees causing the injury, damage, or loss, if known is:

Ernesto Lopez

- 6. The amount claimed, including the estimated amount of any prospective or future loss, injury or damage is:
 - () \$_____ (if less that \$10,000.00 total sum);
 - 0 Within the jurisdiction of the Municipal Court; or
 - (X) Within the jurisdiction of the Superior Court.

Government	Code	Claim
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<u>-</u>									
Dated:	January	20,	2000	at	San Jos	se, Calif	Ornia		

By: <u>MICHAEL MAYRON</u> (Name)