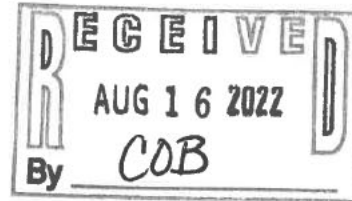


**BOARD OF SUPERVISORS OF CONTRA COSTA COUNTY
INSTRUCTIONS TO CLAIMANT**

- A. A claim relating to a cause of action for death or for injury to person or to personal property or growing crops shall be presented not later than six months after the accrual of the cause of action. A claim relating to any other cause of action shall be presented not later than one year after the accrual of the cause of action.
(Gov. Code § 911.2.)
- B. Claims must be filed with the Clerk of the Board of Supervisors at its office located at: County Administration Building, 1025 Escobar Street, 1st Floor, Martinez, CA 94553.
- C. If claim is against a district governed by the Board of Supervisors, rather than the County, the name of the District should be filed in.
- D. If the claim is against more than one public entity, separate claims must be filed against each public entity.
- E. Fraud- See penalty or fraudulent claims, Penal Code Sec. 72 at the end of this form.

RE: Claim By: _____)
 Mark Shepherd and Mary Shepherd)
 _____)
 _____)
 Against the County of Contra Costa)
 _____)
 _____ District)
 (Fill in the name))
 _____)
 _____)

Reserved for Clerk's filing stamp



The undersigned claimant hereby makes claim against the County of Contra Costa or the above-named district in the sum of \$ _____ and in support of the claim represents as follows:

1. When did the damage or injury occur? (Give exact date and hour)
 March 2, 2022 15:40
2. Where did the damage or injury occur? (Include city and county)
 Treat Blvd. intersection of Oak Rd. in unincorporated part of Contra Costa County/
 Longitude: 37.926600 Longitude: -122.057660
3. How did the damage or injury occur? (Give full details; use extra paper if required)
 Please see attachment
4. What particular act or omission on the part of county or district officers, servants or employees caused the damage or injury?
 Please see attachment.
5. What are the names of county or district officers, servants or employees causing the damage or injury?
 Contra Costa County, Contra Costa County Sheriff Department, Officer Brian Scott Sams
6. What damage or injuries do you claim resulted? (Give full extent of injuries or damages claimed. Attach two estimates for auto damage.)
 Please see attachment.

7. How was the amount claimed above computed? (Include the estimated amount of any prospective damage or injury.) Please see attachment.

8. Names and addresses of witnesses, doctors and hospitals:

Please see attachment

9. List the expenditures you made on account of the accident or injury:

DATE TIME AMOUNT

Please see attachment

) Gov. Code Sec. 9110.2 provides "The claim shall be
) signed by the claimant or by some person on his behalf.
)

SEND NOTICES TO: (Attorney))

Name and address of Attorney)

Charles C. Kelly, II (SBN 122253)
Hersh & Hersh, APC
1388 Sutter St., Suite 1210
San Francisco, CA 94109

Charles Kelly, II on behalf of Mark
Shepherd

(Claimant's Signature)

Mark and Mary Shepherd

(Address)

Telephone No. 415-441-5544)

Telephone No. [Redacted]

PUBLIC RECORDS NOTICE:

Please be advised that this claim form, or any claim filed with the County under the Tort Claims Act is subject to public disclosure under the California Public Records Act. (Gov. Code §§ 6500 et seq.) Furthermore, any attachments, addendums, or supplements attached to the claim form, including medical records, are also subject to public disclosure.

NOTICE:

Section 72 of the Penal Code provides:

Every person who, with intent to defraud, presents for allowance or for payment to any state board or officer, or to any county, city or district board or officer, authorized to allow or pay the same if genuine, any false or fraudulent claim, bill, account voucher, or writing, is punishable either by imprisonment in the County jail for a period of not more than one year, by a fine of not exceeding one thousand dollars (\$1000.00), or by both such imprisonment and fine, or by imprisonment in the state prison, by a fine of not exceeding ten thousand dollars (\$10,000.000, or by both such imprisonment and fine.

1 CHARLES C. KELLY, II, State Bar No. 122253
 2 NANCY HERSH, State Bar No. 49091
 3 KATE HERSH-BOYLE, State Bar No. 278864
 4 HERSH & HERSH
 5 A Professional Corporation
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 11 nhersh@hershlaw.com
 12 khershboyle@hershlaw.com
 13 Attorneys for Claimants
 14 Mark and Mary Shepherd

RE CLAIM

11 MARK AND MARY SHEPHERD,)
 12 individuals,)
 13 CLAIMANTS,)
 14 vs.)
 15)
 16 COUNTY OF CONTRA COSTA, public)
 17 entity;)
 18 RESPONDENT.)
 19)
 20)
 21)
 22)
 23)

ATTACHMENT TO CLAIM
FORM MARK AND MARY
SHEPHERD AGAINST THE
COUNTY OF CONTRA
COSTA

3. How did the damage or injury occur?

25 On March 2, 2022, Mark Shepherd (herein after "Claimant") waited at the North West
 26 Corner of the intersection of Treat Boulevard and Oak Road to cross Treat Blvd., until the last
 27 vehicle turned left from Oak Rd. and cleared the intersection on to west bound Treat Blvd. Claimant
 28

1 looked across the intersection at the crossing signal which showed a “white OK to cross” figure.
 2 Claimant proceeded into the crosswalk taking about 4 steps before he was struck on left hip and side
 3 by Officer Brian Scott Sams.
 4 Claimant rolled/slid along the right side of the vehicle until Claimant hit the outside mirror which
 5 knocked him down to the pavement in a spinning motion. Officer Brian Scott Sams came over saying
 6 “I am sorry, I did not see you” and repeated it. Claimant was on his left side and partly on his back
 7 with his back pack partly supporting him.

8 The driver, Officer Brian Scott Sams, of the Contra Costa County Sheriff Department, asked
 9 if Claimant was hurt and if Claimant could move to the curb. Claimant told him he could not move
 10 as Claimant was in too much pain and could not move his hip.

11 A fire truck arrived at the scene followed by an ambulance. The EMTs examined Claimant,
 12 cut off his shirt, took off his back pack, put him on a backboard and applied a neck brace. Claimant
 13 told the EMTs he was a Kaiser patient 3 times and wanted to go to Kaiser. The EMTs discussed
 14 where Claimant should go and decided to take him to John Muir Health, as it was a Trauma center.
 15 Claimant was admitted to John Muir Health on March 2, 2022 at approximately 4:10 P.M. and
 16 discharged at approximately 11:30 P.M.

17
 18 4. What particular act or omission on the part of county or district officers, servants or
 19 employees caused the damage or injury?

20 County of Contra Costa, by and through the Contra Costa County Sheriff Department is
 21 vicariously responsible for Officer Brian Scott Sams’ actions and for negligently hiring, training,
 22 and supervising employees, agents, and independent contractors. Officer Brian Scott Sams,
 23 employee of Contra Costa County, by and through the Contra Costa County Sheriff Department,
 24 was negligently hired, trained, and supervised. Officer Brian Scott Sams violated California Vehicle
 25 Code Section 21950(a)-Crosswalk, marked or not, pedestrian has the right of way causing injuries
 26 to Claimant Mark Shepherd and a loss of consortium for Mary Shepherd as a result of the accident
 27 on March 2, 2022.
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6. What damage or injuries do you claim resulted?

As a result of Officer Brian Scott Sams' negligence, employee of Contra Costa County by and through the Contra Costa County Sheriff Department, Claimant sustained injuries to his hips, pelvic and groin area, left shoulder, ribs, chest, left foot and Claimant's wife suffered loss of consortium damages. Claimant incurred medical expenses, lost wages, and pain, suffering and emotional distress damages.

7. How was the amount claimed above computed?

The amounts of damages for both claimants are continuing and are over \$25,000 and this is a non-limited civil case.

8. Names and addresses of witnesses, doctors and hospitals:

Claimant Mark Shepherd was transported by ambulance (American Medical Response) to John Muir Health. Thereafter, he received all his sequalae care from Kaiser Walnut Creek.

- American Medical Response- 2400 Bisso Lane, Ste.
Concord, California 94520/ Contra Costa Fire EMS Administrative Offices
4005 Port Chicago Highway, Suite 250 Concord, CA 94520
- John Muir Health- 1601 Ygnacio Valley Rd, Walnut Creek, CA 94598
- Kaiser Walnut Creek- 1425 S Main St, Walnut Creek, CA 94596

9. List the expenditures you made on account of the accident or injury:

Expenditures are continuing and include but are not limited to medical bills, and out-of-pocket medical bills.

Dated: August 12, 2022

Enclosure(s)

Attachment 1 John Muir Health Medical Records

Attachment 2 Kaiser Walnut Creek Records

Attachment 3 Equain Lien

Attachment 4 CHP Report