



**CITY OF RIALTO
LIABILITY
CLAIM FOR DAMAGES
TO PERSON OR PROPERTY**

CITY OF RIALTO
2023 JUN -1 PM 12:44
RECEIVED
CITY CLERK

CITY CLERK'S DATE STAMP
~~CITY OF RIALTO~~
~~2023 MAY 32 PM 12:43~~
~~RECEIVED~~ MZ
~~CITY CLERK~~

1. Claims for death, injury to person, or to personal property must be filed not later than six (6) months after the occurrence (Gov. Code §911.2).
2. Claims for damages to real property must be filed not later than one (1) year after the occurrence (Gov. Code §911.2).
3. READ ENTIRE CLAIM FOR BEFORE FILING
4. ATTACH SEPARATE SHEETS, IF NECESSARY, TO GIVE FULL DETAILS

RETURN TO:
Rialto City Clerk's Office
Mail: 150 S. Palm Ave., Rialto, CA 92376
Address: 290 W. Rialto Ave., Rialto, CA 92376

CLAIMANT INFORMATION:

Keana Darshell Baugh

FULL NAME

DATE OF BIRTH

5200 Chicago Ave., Apt. A-6, Riverside, CA 92507

HOME ADDRESS INCLUDING CITY, STATE & ZIP

HOME TELEPHONE NO.

BUSINESS ADDRESS INCLUDING CITY, STATE & ZIP

BUSINESS TELEPHONE NO.

ADDRESS AT WHICH CLAIMANT DESIRES TO RECEIVE
NOTICES OR COMMUNICATIONS REGARDING THIS CLAIM
(if different from home address provided above):

Law Office of Kennedy & Associates, Inc.

3576 Arlington Ave., Ste. 304, Riverside, CA 92506

1. WHEN DID DAMAGE OR INJURY OCCUR? DATE: January 2, 2023 TIME: 5:42 ☐ AM ☒ PM

2. PLACE OF ACCIDENT (OCCURRENCE) BE SPECIFIC – Describe fully and (if applicable) locate on diagram on reverse side of this sheet.
Where appropriate, give street names and addresses, measurements and landmarks.

This accident occurred on the South Riverside Avenue bridge between Miguel Bustamante Pkwy. and Key St.

3. HOW DID DAMAGE OR INJURY OCCUR?

Decedent Kenneth Andre Jamerson (claimant's husband) was struck and killed by a motor vehicle

4. WERE POLICE AT THE SCENE? ☒ YES ☐ NO WERE PARAMEDICS AT THE SCENE? ☐ YES ☒ NO

5. WHAT PARTICULAR ACT OR OMISSION DO YOU CLAIM CAUSED THE INJURY OR DAMAGES? Give the name of the city/town employee causing the injury or damage, if known.

City of Rialto controls the bridge where the incident happened. The bridge was designed in such a way as to create a trap for decedent, which led to the collision and caused his death. Also, agents for the City of Rialto negligently created a dangerous condition while working on the bridge that led to the accident.

6. GIVE TOTAL AMOUNT OF CLAIM Include estimate of amount of any prospective injury or damage \$ 12,672,000

HOW WAS THE ABOVE AMOUNT COMPUTED? Be specific, list doctor bills, repair estimates, etc. Please attach 2 estimates.

DAMAGES INCURRED TO DATE:

Item/Date: General damages due to loss of life

Amount: \$ 12,000,000

Item/Date: _____

Amount: \$ _____

TOTAL AMOUNT CLAIMED AS OF PRESENTATION OF THIS CLAIM:

\$ 12,000,000

ESTIMATED PROSPECTIVE DAMAGES, AS FAR AS KNOWN:

Item/Date: _____

Amount: \$ _____

Item/Date: Future economic loss

Amount: \$ 672,000

TOTAL ESTIMATED AMOUNT PROSPECTIVE DAMAGES:

\$ 672,000

7. WITNESSES TO DAMAGE OR INJURY *List all persons known to have information (attach additional pages, if necessary)*

NAME: Sam Skipper

NAME: Destynie Rivera

ADDRESS: Unknown

ADDRESS: _____

TELEPHONE: _____

TELEPHONE: _____

8. IF INJURED, PROVIDE NAME, CONTACT INFORMATION AND DATE/TIME DOCTOR(S) OR HOSPITAL(S) VISITED:

NAME: _____

NAME: _____

ADDRESS: _____

ADDRESS: _____

TELEPHONE: () _____

TELEPHONE: () _____

DATE: _____ TIME: _____ ☐ AM ☐ PM

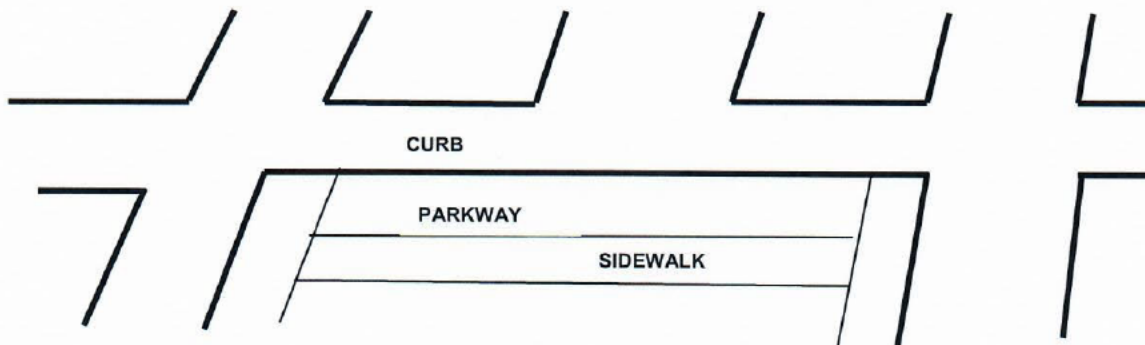
DATE: _____ TIME: _____ ☐ AM ☐ PM

9. PLEASE READ THE FOLLOWING CAREFULLY:

For all vehicle accident claims, place on the following diagram, the names of streets, including NORTH, EAST, SOUTH AND WEST directions. Indicate place of accident by "X" and by showing house numbers or distances to street corners.

If a city/town vehicle was involved, designate by letter "A" location of the City/Town vehicle when you first saw it, and by "B" location of yourself or your vehicle when you first saw City/Town vehicle; location of City/Town vehicle at time of accident by "A-1" and location of yourself or your vehicle at the time of the accident by "B-1" and the point of impact by "X".

⇒ **NOTE: IF THE DIAGRAM BELOW DOES NOT FIT THE SITUATION, PLEASE ATTACH A PROPER DIAGRAM SIGNED BY THE CLAIMANT.**



I HAVE READ THE FOREGOING CLAIM AND KNOW THE CONTENTS THEREOF; AND CERTIFY THAT THE SAME IS TRUE OF MY OWN KNOWLEDGE EXCEPT AS TO THOSE MATTERS WHICH ARE HEREIN STATED UPON MY INFORMATION AND BELIEF; AND AS TO THOSE MATTERS I BELIEVE THEM TO BE TRUE.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

William C. Kennedy
SIGNATURE OF CLAIMANT OR AGENT

William C. Kennedy

TYPE OR PRINT NAME

6/1/2023

DATE

Claimant's Attorney

RELATIONSHIP TO CLAIMANT

NOTE: PRESENTATION OF A FALSE CLAIM IS A FELONY (CA PENAL CODE 72)
RETURN CLAIM TO: RIALTO CITY CLERK'S OFFICE – 150 S. PALM AVE., RIALTO, CA 92376

ATTACHMENT 01

This claim is brought forth by claimant Keana Darshel Baugh as a survivor to Kenneth Andre Jamerson, who died as a result of events that occurred on January 2, 2023. It is submitted by her attorney, William C. Kennedy, Esq. of the Law Office of Kennedy & Associates.

Ms. Baugh claims that the City is responsible for the following reasons:

1. The City built and controls the South Riverside Avenue bridge between Miguel Bustamante Pkwy. and Key St.
2. Agents for the City designed it unsafely, without providing a pedestrian sidewalk, which led to decedent Jamerson having to walk in dangerous traffic.
3. Agents for the City designed it such that it was a trap.
4. Agents for the City were performing work on the bridge during the time period of the accident and had so negligently failed to direct traffic appropriately that decedent Jamerson was struck and killed by a motor vehicle.

Dated: June 1, 2023

WILLIAM C. KENNEDY, Esq.
Attorney for KEANA DARSHEL BAUGH

Attachment 02

MIGUEL BUSTAMANTE PKWY

↑
N
W E
S

SOUTH RIVERSIDE AVENUE



Dated: June 1, 2023

KEY ST.

William C. Kennedy

WILLIAM C. KENNEDY, Esq.

Attorney for KEANA DARSHIEL BAUGH