## CLAIM AGAINST COUNTY OF MONTEREY

ТО	: THE CLERK OF THE BOA County of Monterey, State of P.O. Box 1728 Salinas, CA 93902 (831) 755-5066				1850	
ma	rsuant to the provisions of the Sec de against the treasury of the Cou claim totals less than \$25,000). J	nty of Monterey, State of Ca	lifornia, in the a	mount of \$	= = = = = = = = = = = = = = = = = = =	
In s	support of said claim the following	g information is submitted.				
1.	Name of claimant:Fin	est	Middle		Last	
2.	Address of claimant:					
2		reet	City	Zip	Area Code & Telephone No.	
<ol> <li>4.</li> </ol>	Address to which claimant desires notice to be mailed (If different from item 2):					
	Street	City	Zip		Area Code & Telephone No.	
	Name of legal owner of damaged property upon which claim is based:					
	First	Midd	le	La	ast	
5.	Name of registered owner of dar	naged property or loss upon	which claim is b	based:		
	First	Midd	le	La	ast	
6.	Name of injured party(s):					
	First	Midd	le	La	ast	
	First	Midd	le	La	ast	
7.	Date alleged damage occurred:	Month		Davi	Year	
0	DI 1 11 1 1			Day	Teal	
8.	Place where alleged damage oc		Provide Street Number or Nearest Cross Streets			
9.	Time of day or night damage oc	curred:				
10.	Public officers or employees alle	ged to have knowledge:				
	· <del></del>					

Date:

11.	Name, address and t	telephone number of other witnesses if possible:
12.	computation thereof	mages occurred and nature, extent and amount of injury or damage claimed, together with basis of (set out in detail as per NOTE, shown below). If possible, please provide pictures, estimates, and any a that would substantiate your claim and amount of loss.
	•	That the above claim and the items as therein set out are true and correct; that no part thereof has been
	etofore paid, and that e that the cause of act	the amount therein is justly due this claimant, and that the claim is presented within 180 days from the tion occurred.
Dat	ed:	Claimant
	NOTE:	In presenting any claim not founded upon contract, full details as to the nature of the claim, the time and place when and where it arose, the public property and officers or employees alleged to be at fault, the nature, extent and amount of the injury or damage claimed, and all other details necessary to a full

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of the Government Code of the State of California.)

consideration of the merit and legality of such claim shall be stated in writing, signed by the claimant or someone authorized by him. (For further particulars regarding filing of the Claim, see Section 900 et seq.