CLAIMS AND ACTIONS AGAINST THE DISTRICT

EXHIBIT A

CLAIM FORM AGAINST THE SPRECKELS UNION SCHOOL DISTRICT Government Code Sections 910 and 910.2

***Note: AB 3000 (Ch. 1124, Statutes of 2002) amended Government Code 910.4 to require Districts, beginning on March 31, 2003, to provide a claim form for use by persons filing a claim against the District. The claim form must contain the information listed in Government Code 910 and 910.2. The following sample form contains the information specified in Government Code 910 and 910.2 and should be modified to reflect District practice. Districts are strongly encouraged to consult District legal counsel in developing this form. ***

Name of Claimant: Jessica Konen
Address:
Phone Number:(day)(evening)
Date the injury/damage occurred: Spring / Fall 2019
Place the injury/damage occurred: Buena Vista Middle
Describe how and under what circumstances the injury/damage
occurred: See attached Statement of Facts and Claims
What particular action by the District and/or its employees caused the alleged damage or injury: (List employee name(s), if known) See attached Statement of Facts and Claims. The employees involved are Lori Caldiera,
Kelly Baraki, and Katelyn Pagaran.
State the amount of the claim if it is less than \$10,000 s Greater than \$10,000 lnclude the estimated amount of any prospective injury, damage or loss insofar as it may be known at the time this claim is presented and list the basis for the computation of the amount claimed:

Spreckels Union School District

Business	
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If the dollar amount is more than \$10,000, no dollar amount shall be stated but please indicate whether the claim is a limited civil claim (total dollar amount less than \$25,000): Limited Civil Case: Yes _____No X____ Names, addresses and phone numbers of any witnesses, doctors, and hospitals: Lori Caldiera (address unknown), Kelly Baraki (address unknown), Katelyn Pagaran (address unknown). Jessica Konen (address above). (address above) Warning: It is unlawful to knowingly present or cause to be presented any false or fraudulent claim for payment of a loss or injury. Penal Code Section 500 provides that a person who files such a claim may be guilty of a felony punishable by imprisonment and by a fine not exceeding \$50,000 Signature:___

Date:___