CLAIM AGAINST THE CITY AND COUNTY OF SAN FRANCISCO

Before completing this form please read the instructions on the back. Untimely claims will be returned. Please submit this form and supporting documentation to the Controller's Office, Claims Division, 1390 Market Street, 7th Floor, San Francisco, CA 94102 in person or by mail.

* = REQUIRED ** = REG	UIRED IF KNOWN	DHSH		20-024	22	
1. Claimant's Name and Ho * Shawn Haw			Commence of the Commence of th	Official Notices and Correspondence to:	ula nato	
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City San Francia	SW State (4)	Zip	ity So	an Francisio State (A Zip 99	1105	
Telephone Daytime	Evening (elephor		0,1	
3. Date of Birth	Birth 4. Social Security Number		CO. G. T. LINE	of Incident 6. Time of Incident (AM of #* 9 A M	6. Time of Incident (AM or PM) ** 9 A M	
7. Location of Incident or Accident *** Jerrold + Rankin			8. Claimant Vehicle License Plate #, Type, Mileage, and Year ** ** ** ** ** ** ** ** ** *			
departments involved. Sta				lentify all persons, entities, property and City illeged injury, property damage or loss.		
Name, I.D. Number an		Type of City Ve	ehicle	Vehicle License Number and Bus or Train Num	ber	
of City Employee who allege	dly caused injury or loss	**		** Volume of a property of the control of the contr	rapid 0	
SPPD, DPW	N , 4			In the same and th		
* please see	attached	amage or loss		1. Amount of Claimant's property damage or loss method of computation. Attach supporting documentation. (See Instructions) ITEMS PLEASE SEE \$ AMACMED \$ \$		
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State of the state	TO PROBLEM SON IN	Para Persanda Plana ykenna Pan Pany ngasi s	-11	COTAL AMOUNT \$ 10,000 Court Jurisdiction: Limited (up to \$25,000) Unlimited (over \$25,000)	one Great Great	
12. Witnesses (if any) Nan 1.	ne Add	iress	n po	Telephone	3-11 10-22	
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* WADDA (* WADDA (Signature of Claimant or I VICTORA LAS Print Name CRIMINAL PENALTY FOR I FRAUDULENT CLAIM IS IM	PRESENTING A FALS		Do	AY 18 AM 11:1	TO STORY	
(PENAL CODE \$72)			CA	A/FORM 02/14	700. F	

Claim Against the City and County of San Francisco

Shawn Hail

9. Basis of Claim

On January 8, 2020, the City of San Francisco swept the encampment located next to the train tracks between Jerrold and Evans on Rankin. San Francisco Police Department and Department of Public Works as well as the Homeless Outreach Team were present. I refer to these departments collectively as the City in this claim form.

I was present when the sweep took place. I was not aware beforehand there was a sweep scheduled for that day. I had no warning. When the City arrived, I was under the impression I'd have 20-30 minutes to pack things up. However, the City immediately began throwing my things into the trash. They would not stop; I saw my belongings crushed, smashed, and broken.

The City did not follow its bag and tag procedures, nor its procedures regarding notice during this sweep.

10. Description of Claimant's injury, property damage or loss

Losing all of my belongings in this sweep was devastating. I lost items that were priceless to me and can never be replaced. Being homeless and having everything taken is really difficult to handle emotionally. I already feel like I have nothing, and having to start from nothing again is impossibly hard. The sweep on January 8 caused me so much anxiety and undue emotional distress; I lost almost all of my prized possessions, everything that meant anything to me.

11. Amount of Claimant's property damage of loss and method of computation.

These items were confiscated and destroyed by the City on January 8, 2020. Values were researched online or approximated when that was not possible.

ITEM	VALUE	
Marriage certificate	priceless	
Wallet	\$15	
Driver's License	\$35	
Social Security Card	Priceless	
Honda 2200 generator	\$1,049	
Tablet	\$99	
Specialized mountain bike	\$500	
Clothing	\$100	
Shoes	\$100	
Bedding	\$50	
Tent	\$40	
Emotional Distress of losing all belongings, especially those that are priceless		
TOTAL		