

**CITY OF CALISTOGA**  
**CITY CLERK****AUG - 7 2015**

**SVETLANA SHIRINOVA**  
**Attorney at Law**  
785 Market Street, 16Th Floor  
San Francisco, CA 94103  
Tel. 415-947-0703; Fax 415-947-0733  
E-mail:Svetlana@svetlaw.com

**RECEIVED**

August 3, 2015

**VIA FACSIMILE (707-942-0732), email: cityhall@ci.calistoga.ca.us**  
**AND FIRST CLASS U.S. MAIL**

1232 Washington Street  
Calistoga, CA 94515

**RE:** *Bella Koretsky – Late Claim Filing Request*

Dear City of Calistoga Officials:

This letter is a request to file a late claim against the city of Calistoga. I assisted Bella Koretsky in filing of her claim arising out of the events of January 25, 2015 against Napa County. The claim involved Calistoga's police offices' wrongful conduct; it was timely filed (enclosed please see the acknowledgement). I practice only in the city and county of San Francisco. At the time of helping Ms. Koretsky, I did not know the proper administrative structure in Napa County; and mistakenly assumed it was similar to the city and county of San Francisco's structure. I filed the claim against the city of Napa, believing that such filing takes care of the county and the city of Calisoga as well.

Bella Koretsky is a mentally disabled person. She is unable to do legal research and make decisions as to where to file her claim. Bella Koretsky will be prejudiced if the late filing is denied as a result of my inadvertence and/or excusable neglect. As soon as I had a chance to learn about the Napa County's administrative structure, I helped Ms. Koretsky to prepare and file the new claim (enclosed with this letter) There is less than 10 (ten) days delay in such new filing. Attached to this letter is correspondence, attesting to the facts stated herein. Please do not hesitate to contact me with any questions.

Sincerely,



Svetlana Shirinova

**CLAIM AGAINST PUBLIC ENTITY:**

**CITY OF CALISTOGA**

(City Use Only)

<b>Date Received:</b> <u>8/7/15</u>
<b>By:</b> <u>Kathy Flanson</u> City Clerk
<b>Claim Number:</b> <u>2015-04</u>

THE UNDERSIGNED HEREBY PRESENTS THE FOLLOWING CLAIM AGAINST THE CITY OF CALISTOGA IN ACCORDANCE WITH THE PROVISIONS OF GOVERNMENT CODE SECTION 910.

1. Name of Claimant: BELLA KORETSKY Date of Birth: \_\_\_\_\_

Address of Claimant: [REDACTED]  
Street City, State, Zip

Social Security Number: \_\_\_\_\_

Telephone Number: Work: [REDACTED] Home: \_\_\_\_\_

2. The address to which notices from the City are to be directed (if different than above):  
C/O Svetlana Shirinova, 785 Market street, 16th floor, San Francisco, CA, 94103

3. Date of Incident: 01/25/2015 Time of Incident: 8:47 am

4. Location of Incident: [REDACTED] Calistoga, CA 94515

5. Description of Incident or Accident, including your reason for believing the City is liable for your damages: Wrongful arrest, claimant was denied a chance to have her medication, abused by the police officers, the city is liable for the conduct of the incompetent, untrained and cruel police officers, evidence will be provided

**CLAIM AGAINST PUBLIC ENTITY:**

**CITY OF CALISTOGA**

6. Description of all damages you believe you have incurred as a result of the incident: \_\_\_\_\_  
Medical bill for more than \$4000 and mental damage confirmed by medical  
specialists' report

7. Name(s) of any public employee(s) causing the injury, damage or loss you are claiming:  
Police officers: Carolina Wiegers #137 and Mitchell Celaya #175

8. As of the date of the presentation of this claim, please indicate the following:

a)  The dollar amount of my claim is less than \$10,000 and I am claiming a total of  
\$ \_\_\_\_\_.

The dollar amount of my claim is more than \$10,000. The court that has jurisdiction over this  
claim is.

Municipal Court

Superior Court

9. If this is a claim for indemnity, on what date were you served with the underlying lawsuit?

\_\_\_\_\_

Bella Koretsky Bella Koretsky  
Type or Print Signature of Claimant or Representative

08/03/2015

\_\_\_\_\_  
Signature of Claimant or Representative

\_\_\_\_\_  
Date