

**OFFICE OF COUNTY COUNSEL
COUNTY OF PLACER**

TO: Board of Supervisors
FROM: Clayton Cook, Deputy County Counsel
DATE: September 27, 2016
SUBJECT: Claims against the County

REQUEST:

The following claim(s) against Placer County should be placed on the Board's Consent agenda for Tuesday, September 27, 2016:

<u>CLAIM#</u>	<u>CLAIMANT(s):</u>	<u>AMOUNT:</u>
16-093	Fosdick, Orion P. - (Personal Injury)	\$100

The offices of County Counsel and Risk Management recommend the above claim(s) be rejected.

PLACER COUNTY COUNSEL'S OFFICE

BY: _____

Clayton Cook, Deputy County Counsel

The above claim(s) were _____ at the Board of Supervisors' hearing held on Tuesday, September 27, 2016.

Clerk

FISCAL IMPACT:

None.

cc: Jim Kotey, Liability Manager, Risk Management

