CLAIM AGAINST THE COUNTY OF KERN
(Government Code §§ 910, 910.2 & 910.4)

This claim must be filed with the Clerk of the Board of Supervisors, 1115 Truxtun Ave., 5th Floor, Bakersfield, California 93301. If it is a claim for death, injury to person, injury to personal property, or injury to growing crops, it must be filed within six months after the accident or event giving rise to the claim. If it is a claim for any other cause of action, it must be filed within one year after the event(s) giving rise to the claim. You must complete both sides and sign the claim form for the claim to be valid. Complete information must be provided. If the space provided is inadequate, please use additional paper and identify information by paragraph number. Do not attach medical records or other confidential records to your claim. ANY COMPLETED CLAIM AND ALL ATTACHMENTS WILL BE TREATED AS A PUBLIC RECORD AND WILL BE AVAILABLE FOR VIEWING BY THE PUBLIC ON THE COUNTY'S WEB SITE.

1. State the name and mailing address of claimant:
   County Sweet Produce, Inc.           Val-Mar Farms, LLC
   5060 “B” Street                      2101 Mettler Frontage Road
   Bakersfield, CA 93307                Bakersfield, CA 93307

2. State the mailing address to which claimant desires notices from the County to be sent:
   Daniel T. Clifford, Esq.
   Clifford & Brown, P.C.
   1430 Truxtun Avenue, Suite 900
   Bakersfield, CA 93301

3. State the date, place and other circumstances of the accident or event(s) giving rise to the claim.
   On or about February 11, 2015, Claimant's crops were injured from spray drift, or other malfeasant application of agricultural chemicals, from one or more of Claimant's neighboring properties, which were applied inappropriately due, at least in part, to the malfeasance of: 1) Kern County representative(s) who authorized an exemption for said spray application, 2) the spray applicator and/or, 3) the owner of the fields to which said agricultural chemical were intended to be applied.

4. Provide a general description of the injury, damage or loss incurred so far as it may be known:
   See Report of Loss and Addition to Original Report of Loss - Attached. Claimant's affected onion crop was damaged.
5. Provide the name or names of the public employee or employees causing the injury, damage or loss, if known:

Claimant is informed and believes that the responsible public employee is Rick White, and/or others working under his direction and/or control; discovery and investigation continues.

6. Regarding the amount claimed (including estimated amount of any prospective injury, damage or loss known as of the time the claim is filed): $5 million

If less than ten thousand dollars ($10,000), state the amount: $ ________________

If more than ten thousand dollars, would the claim be a limited civil case (less than $25,000)? (Circle one)

Yes ☐ No ☐

7. Please state any additional information which may be helpful in considering this claim:

Claimant must date and sign below.

Signed this ___6___ day of August, 2015

CLAIMANT'S SIGNATURE

WARNING! IT IS A CRIMINAL OFFENSE TO FILE A FALSE CLAIM (Penal Code §72)
STATE OF CALIFORNIA
REPORT OF LOSS, NONPERFORMANCE OR DAMAGE
PR-ENF-006 (EST. 9/94) Page 1 of 2

TO: (AGRICULTURAL COMMISSIONER)
Ruben Arroyo

COUNTY
Kern

In accordance with Sections 11761 through 11766 of the Food and Agricultural Code, the following Report of Loss is submitted:

CLAIMANT'S NAME
Val-Mar Farms, I.I.C.

ADDRESS OR POST OFFICE BOX NO.
2101 Mettler Frontage Road East

CITY
Bakersfield

TELEPHONE NUMBER
(661) 838-2888

STATE
CA

ZIP CODE
93307

TYPE OF PROPERTY ALLEGEDLY INJURED OR DAMAGED
Fresh Market Onions, Fresh Market Carrots

ACRES OR UNITS
239.7 ac

FULLY DESCRIBE ALLEGED INJURY OR DAMAGE (include symptoms, when first noticed, etc.)
Show signs of burn and spotting on leaves of listed crops. Onions that were just emerged with 1 leaf, were burned entirely. Larger plants with 2-4 leaves have spots of burn marks on all leaves. Noticed weeds in fields (i.e clover) with same symptoms. Barley around perimeter of fields as a wind break also show same symptoms. Symptoms first noticed end of week of February 9th.

LOCATION OF PROPERTY ALLEGEDLY INJURED OR DAMAGED
Field # 18, 121, 188, 187, 185

SECTION
1, 12, 18

TOWNSHIP
11 N

RANGE
19W & 20W

BASE & MERIDIAN
SHRM

DATE THE ALLEGED INJURY OR DAMAGE OCCURRED
Aprox. 2/10/15 to Aprox 2/12/15

TIME
Sometime between the date range described

NAME OF PERSON OR FIRM ALLEGEDLY RESPONSIBLE FOR LOSS OR DAMAGE
Boswell

NAME OF OWNER OR OCCUPANT OF PROPERTY FOR WHOM SUCH PERSON OR FIRM WAS RENDERING LABOR OR SERVICES
Val-Mar Farms, LLC.

LOCATION OF SUCH PROPERTY
Perfield location per county map

ADDITIONAL INFORMATION

I declare under penalty of perjury that the above is true and correct.

CLAIMANT'S SIGNATURE: ___________________________

DATE
2/24/15

Filing Information on Reverse Side of Form
PROOF OF SERVICE

STATE OF CALIFORNIA COUNTY OF KERN:

I am a resident of the County aforesaid; I am over the age of eighteen years and not a
party to the within entitled action; my business address is 1430 Truxtun Avenue, Suite 900,
Bakersfield, California, 93301.

On August 7, 2015, I served the within CLAIM AGAINST THE COUNTY OF
KERN on the interested party in said action, as listed below:

Clerk of the Board of Supervisors
1115 Truxtun Avenue, 5th Floor
Bakersfield, CA 93301

( ) BY ELECTRONIC MAIL - Notice may be served by electronic service and any
accompanying documents may be authorized when a party has agreed to accept service
electronically in that action. Electronic service is complete at the time of transmission to
the addressee stated below.

( ) VIA FACSIMILE – [C.C.P. § 1013(e)]; - The telephone number of the sending
facsimile machine was (661) 322-3508. The telephone(s) number of the receiving
facsimile machine(s) is listed below. Pursuant to CRC, Rule 2.306(3), no error was
reported by the machine. The machine was caused to print a transmission record of the
transmission, a copy of which is attached hereto. California Rules of Court, Rule
2.306(4).

( ) VIA OVERNIGHT DELIVERY on the date below stated, pursuant to CCP
§1013(c)(d), I deposited such envelope with delivery fees fully prepaid with

( ) BY MAIL. I am readily familiar with the business' practice for collection and processing
of correspondence and documents for mailing with the United States Postal Service.
Under that practice, the correspondence and documents would be deposited with the
United States Postal Service that same day, with postage thereon fully prepaid, in the
ordinary course of business at Bakersfield, California.

(xx) BY PERSONAL SERVICE I caused such envelope to be delivered by hand to the
offices of the addressee.

I declare, under penalty of perjury under the laws of the State of California, that the
foregoing is true and correct.

Executed on August 7, 2015, at Bakersfield, California.

[Signature]
ROSEMARY MYERS

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