



THE MURRY LAW GROUP, P.C.

*Put on 7/26
Agenda*

Attorneys at Law

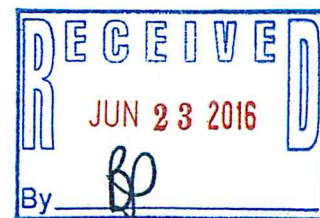
June 16, 2016

VIA CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Douglas S. Hollberg
Mayor of the City of Griffin
100 South Hill Street, 3rd Floor
Griffin, Georgia 30223

Kenny Smith
City Manager
100 South Hill Street, 3rd Floor
Griffin, Georgia 30223

Dick Morrow
Chairman of the Board of Commissioners
100 South Hill Street, 3rd floor
Griffin, Georgia 30223



*cc - Drew ✓
PD
Greg Poole*

Re:	Ante-Litem Notice of Claim
Claimant:	Rhonda Berry and Annie Jester
Date of Incident:	May 5, 2016
Location of Incident:	Griffin, Georgia

Dear Mayor, City Manager, and Chairman:

This is a statutory notice of claim pursuant to O.C.G.A. § 36-33-5

We represent Rhonda Berry and Annie Jester in their claims against the City of Griffin. Rhonda Berry is a 49 year old female. Annie Jester is a 76 year old female. Said claims arise out of (a) Emily Blackmon's failure to operate her vehicle in a safe manner; (b) Emily Blackmon's failure to maintain a proper lookout; and (c) Emily Blackmon's failure to yield to right of way traffic. The facts giving rise to said claim are as follows:

STATEMENT OF FACTS

On or about May 6, 2016, Emily Blackmon was a law enforcement officer employed with the City of Griffin Police Department. On or about May 6, 2016, Rhonda Berry and Annie Jester were injured when they were traveling on the North Expressway approaching Water Works Street in Griffin, Georgia. Officer Blackmon's vehicle collided with Ms. Berry's vehicle when Officer Blackmon failed to yield to right of way traffic and turned into the center lane where Ms. Berry was lawfully traveling. A copy of the Motor Vehicle Accident (MVA) report is enclosed for your review.

5300 Memorial Drive, Suite 130 • Stone Mountain, GA 30083
Telephone: (770) 450-0123 • Facsimile: (404) 581-5644
www.murrylawgroup.com

BASIS OF CLAIM

Emily Blackmon was negligent in the operation of her vehicle, by (a) Failing to maintain a proper lookout; (b) Failing to yield to right of way traffic; and (c) Failing to operate her vehicle in a safe manner. As a direct and proximate result of Emily Blackmon's negligence, Emily Blackmon collided with Ms. Berry's vehicle, resulting in a motor vehicle collision. Ms. Berry's mother, Annie Jester, was a passenger in the vehicle. Rhonda Berry suffered personal injuries, including, but not limited to, her right foot, right hip, left elbow, both sides of her back, and right knee. Annie Jester suffered personal injuries, including, but not limited to, both sides of her back and both legs.

DEMAND FOR COMPENSATION

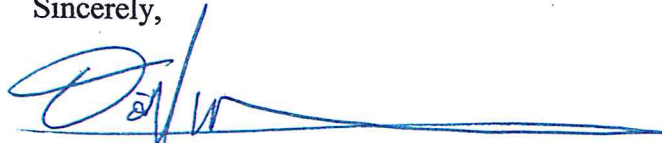
The negligent acts of Emily Blackmon and the City of Griffin led to the traffic collision and personal injuries of Rhonda Berry and Annie Jester. The actions of Emily Blackmon and the City of Griffin were with reckless disregard for other motorists and a conscious indifference for the safety of others. Rhonda Berry and Annie Jester have suffered at the hands of Emily Blackmon and the City of Griffin. Rhonda Berry has suffered physical injuries to her right knee, right hip, left elbow, and right foot. Annie Jester has suffered physical injuries to her back and legs. As a result of Officer Blackmon's negligence, Ms. Berry is still in treatment and experiences persistent pain in her right hip and elbow. As a result of Officer Blackmon's negligence, Ms. Jester continues to experience persistent pain in her back and weakness in her legs.

Due to Emily Blackmon's negligence and the City of Griffin's negligence, my clients have been greatly damaged. Emily Blackmon violated her duty to my clients by failing to operate her vehicle in a safe manner, failing to maintain a proper lookout, and failing to yield to right of way traffic. **In the spirit of compromise and in an effort to avoid the trouble and expense of litigation, Ms. Berry will accept \$100,000.00 in exchange for a full release. In the spirit of compromise and in an effort to avoid the trouble and expense of litigation, Ms. Jester will accept \$100,000.00 in exchange for a full release. This offer to compromise must be accepted by 2:00 p.m. on August 22, 2016.**

Should you wish to discuss this matter further, you can reach me at (770) 450-0123. If I do not hear from you by August 23, 2016, my clients will have no choice but to file a lawsuit.

Thank you for your attention.

Sincerely,




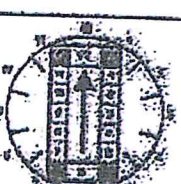
DORIAN MURRY



STATE OF GEORGIA TRAFFIC CRASH REPORT

Georgia State Patrol
Georgia Department of Public Safety
P.O. Box 1456
Atlanta, Georgia 30371-1456



Crash Number C000402316-01		Reporting Agency GEORGIA DEPARTMENT OF PUBLIC SAFETY		Reporting Agency Case Number C000402316-01		Reporting Agency CAD Number GSPD16CAD038101	
CRASH IDENTIFIERS							
County of Crash SPALDING		City or Place of Crash GRIFFIN		<input type="checkbox"/> City Limits		Crash Date/Time 05/05/2016 10:32 AM	
On Scene Date/Time 05/05/2016 10:50 AM		Cleared Scene Date/Time 05/05/2016 11:30 AM		Complete Date/Time 05/05/2016 12:01 PM		Reported Date/Time 05/05/2016 10:33 AM	
Dispatched Date/Time 05/05/2016 10:38 AM		Reason (if investigation not complete)		Source of Information LAW ENFORCEMENT AGENCY			
ROADWAY INFORMATION							
Roadway Description for Location of Occurrence NORTH EXPRESSWAY 30 FEET NORTH OF				Distance to City or Place of Crash		Latitude N 33 15.1727	
Intersecting Roadway Description for Location of Occurrence WATER WORKS STREET				Distance / Direction from Crash Location		Longitude W 84 17.2552	
Part of National Highway System NO		Roadway Functional Class Type URBAN		Roadway Functional Class Detail MINOR ARTERIAL		<input type="checkbox"/> Roadway Closed	
Type of Shoulder UNPAVED		Roadway Lighting SPOT ILLUMINATION ONE SIDE		Roadway Bikeway Facility NONE		Signed Bicycle Route NOT APPLICABLE	
Traffic Control Type at Intersection		Mileage Number of Lanes at Intersection		Side Road Number of Lanes at Intersection			
CRASH INFORMATION							
Light Condition DAYLIGHT		Weather Condition CLEAR		Roadway Surface Condition DRY		<input type="checkbox"/> Crash Pictures Taken	
First Harmful Event Type COLLISION NON-FIXED OBJECT				First Harmful Event Detail MOTOR VEHICLE IN TRANSPORT			
Total Counts		Vehicles		Injured		Fatalities	
2		2		2		0	
CMV		Motorists		Non-Motorists		Witnesses	
0		3		0		0	
Other Persons		Businesses		Violations		1	
0		0		0		0	
First Harmful Event's Relation to Junction NON-JUNCTION				Is First Harmful Event within Interchange Area NO			
Contributing Circumstances: Environment NONE				Contributing Circumstances: Environment NONE			
Contributing Circumstances: Road NONE				Contributing Circumstances: Road NONE			
School Bus Related NO				Work Zone Related NO			
Crash Location in Work Zone							
VEHICLE V01							
Motor Vehicle Type MOTOR VEHICLE IN TRANSPORT							
Year 2010		Make DODGE		Model CHARGER		Style 4S	
State GA		License Number GV12088		Registration Expires 7/25/17		<input type="checkbox"/> Permanent Registration	
VIN 2B3CA4CT6AH292589		Body Type Category PASSENGER CAR		Type of Bus Use NOT A BUS			
Special Function of Motor Vehicle in Transport NO SPECIAL FUNCTION				Emergency Motor Vehicle Use NO			
Owner First Name		Owner Middle Name		Owner Last Name		Owner Suffix	
Address 100 N HILL ST		Address Other		City GRIFFIN		State GA	
Owner Phone Number		Owner Phone Number (other)		Insurance Company GIRMA		Insurance Policy Number GR-1	
Vehicle Removal DRIVEN - NOT DISABLED		Vehicle Towed By		Wrecker Selection Method			
Direction of Travel Before Crash NORTHBOUND		Speed: Estimated 45		Roadway Type UNDIVIDED HIGHWAY		Total Lanes 4S	
Roadway Description TWO-WAY NOT DIVIDED		Traffic Control Device Type NO CONTROLS		Roadway Horizontal Alignment STRAIGHT		Roadway Grade LEVEL	
Roadway Description for Vehicle Travel NORTH EXPRESSWAY 30 FEET NORTH OF		Vehicle Maneuver Action (by this vehicle) MOVEMENTS ESSENTIALLY STRAIGHT AHEAD		Hit & Run (by this vehicle) NO DID NOT LEAVE SCENE		Damage Extent (for this vehicle) MINOR DAMAGE	
1st Sequence of Events Type (this vehicle) COLLISION NON-FIXED OBJECT		1st Sequence of Events Detail (this vehicle) MOTOR VEHICLE IN TRANSPORT		2nd Sequence of Events Type (this vehicle) COLLISION NON-FIXED OBJECT		2nd Sequence of Events Detail (this vehicle) MOTOR VEHICLE IN TRANSPORT	
Most Harmful Event Type (this vehicle) COLLISION NON-FIXED OBJECT		Most Harmful Event Detail (this vehicle) MOTOR VEHICLE IN TRANSPORT		Contributing Circumstances 1 (this vehicle) NONE		Contributing Circumstances 2 (this vehicle) NONE	
Area of Initial Impact				Most Damaged Area			
<input type="checkbox"/> Non Collision <input type="checkbox"/> Top <input type="checkbox"/> Undercarriage <input type="checkbox"/> Unknown				<input type="checkbox"/> Non Collision <input type="checkbox"/> Top <input type="checkbox"/> Undercarriage <input type="checkbox"/> Unknown			
Occupant Type DRIVER		Person Name (First Middle Last Suffix) EMILY BARTLETT BLACKMON		Injury Status NO INJURY(O)			
VEHICLE V02							
Motor Vehicle Type MOTOR VEHICLE IN TRANSPORT							
Year 2000		Make PONTIAC		Model GRAND AM GT		Style 4S	
State GA		License Number 3190XP		Registration Expires 2017		<input type="checkbox"/> Permanent Registration	
VIN 1G2NW52E6YM771050		Body Type Category PASSENGER CAR		Type of Bus Use NOT A BUS			
Special Function of Motor Vehicle in Transport NO SPECIAL FUNCTION				Emergency Motor Vehicle Use NO			
Owner First Name JERRY		Owner Middle Name LEE		Owner Last Name BERRY		Owner Suffix	
Address 246 S STEWART LN		Address Other		City GRIFFIN		State GA	
Owner Phone Number		Owner Phone Number (other)		Insurance Company ALLSTATE		Insurance Policy Number 805838023	

Crash Number C000402316-01		Reporting Agency GEORGIA DEPARTMENT OF PUBLIC SAFETY		Reporting Agency Case Number C000402316-01		Reporting Agency CAD Number GSPD16CAD030101	
Vehicle Removal DRIVEN - NOT DISABLED				Vehicle Towed By			
Direction of Travel Before Crash SOUTHBOUND		Speed	Estimated 45	Posted 45	Roadway Type UNDIVIDED HIGHWAY	Total Lanes 5	Roadway Horizontal Alignment STRAIGHT
Trafficway Description TWO-WAY NOT DIVIDED WITH A CONTINUOUS LEFT TURN LANE				Traffic Control Device Type OTHER		Roadway Grade LEVEL	
Roadway Description for Vehicle Travel NORTH EXPRESSWAY 30 FEET NORTH OF				Working Properly YES			
Vehicle Maneuver Action (by this vehicle) STOPPED IN TRAFFIC				Hit & Run (by this vehicle) NO DID NOT LEAVE SCENE		Damage Extent (for this vehicle) MINOR DAMAGE	
1st Sequence of Events Type (this vehicle) COLLISION NON-FIXED OBJECT				1st Sequence of Events Detail (this vehicle) MOTOR VEHICLE IN TRANSPORT			
Most Harmful Event Type (this vehicle) COLLISION NON-FIXED OBJECT				Most Harmful Event Detail (this vehicle) MOTOR VEHICLE IN TRANSPORT			
Contributing Circumstances 1 (this vehicle) NONE				Contributing Circumstances 2 (this vehicle) NONE			
Area of Initial Impact				Most Damaged Area			
<input type="checkbox"/> Non Collision <input type="checkbox"/> Top <input type="checkbox"/> Undercarriage <input type="checkbox"/> Unknown				<input type="checkbox"/> Non Collision <input type="checkbox"/> Top <input type="checkbox"/> Undercarriage <input type="checkbox"/> Unknown			
Occupant Type DRIVER PASSENGER		Person Name (First Middle Last Suffix) RHONDA BERRY J ANNIE ELLIS JESTER		Injury Status NON FATAL INJURY NON FATAL INJURY			
DRIVER V01							
Person Type DRIVER		NMIS	Vehicle V01	Person Type Detail			
First Name EMILY		Middle Name BARTLETT	Last Name BLACKMON		Suffix		
Address 888 WEST POPLAR STREET		Address Other		City GRIFFIN		State GA	Zip Code 30223
Phone Number		Phone Number (other)		Condition at Time of Crash APPARENTLY NORMAL			
Driver License Number 051715930		Class C	Expiry 2017	State GA	Jurisdiction 02	Type NON-CDL DRIVER'S LICENSE	Status VALID LICENSE
Commercial Motor Vehicle Endorsements		Drivers License Restrictions 1 NONE		Drivers License Restrictions 2 NONE		Drivers License Restrictions 3 NONE	
Driver Distracted By NOT DISTRACTED		Driver Vision Obstructions VISION NOT OBSCURED		Driver Actions at Time of Crash 1 (based on judgement of investigation officer) FAILED TO YIELD RIGHT-OF-WAY			
Driver Actions at Time of Crash 2 (based on judgement of investigation officer) NO CONTRIBUTING ACTION		Driver Actions at Time of Crash 3 (based on judgement of investigation officer) NO CONTRIBUTING ACTION		Driver Actions at Time of Crash 4 (based on judgement of investigation officer) NO CONTRIBUTING ACTION			
Motor Vehicle Seating Position: Row FRONT		Motor Vehicle Seating Position: Seat LEFT		Motor Vehicle Seating Position: Other NOT APPLICABLE		<input type="checkbox"/> Seating Position Unknown	
Restraint Systems SHOULDER AND LAP BELT USED		Air Bag Deployed NOT DEPLOYED		Trapped Extrication NOT TRAPPED		Injury Severity Level Type NO INJURY (0)	
Injury Severity Level Detail		Primary or Most Obvious of Body Area Injured During Crash					
Source of Transport to Medical Facility NOT TRANSPORTED		EMS Agency Name or ID		EMS Run Number		Medical Facility Transported To	
Law Enforcement Suspected Alcohol Use NO		Alcohol Test Type		Alcohol Tested TEST NOT GIVEN		Alcohol Test Result BAC	
Law Enforcement Suspected Drug Use NO		Drug Test Type		Drug Tested TEST NOT GIVEN		Drug Test Result	
Violation Type Issued TRAFFIC WARNING / FAULTY EQUIP		Number W20E40310		Violation Description (WARNING/OTHER VIOLATIONS)			
DRIVER V02							
Person Type DRIVER		NMIS	Vehicle V02	Person Type Detail			
First Name RHONDA		Middle Name	Last Name BERRY		Suffix		
Address 246 S STEWART LN		Address Other		City GRIFFIN		State GA	Zip Code 30224
Phone Number		Phone Number (other)		Condition at Time of Crash APPARENTLY NORMAL			
Driver License Number 055780365		Class C	Expiry 2018	State GA	Jurisdiction 02	Type NON-CDL DRIVER'S LICENSE	Status VALID LICENSE
Drivers License Restrictions 1 NONE		Drivers License Restrictions 2 NONE		Drivers License Restrictions 3 NONE			
Driver Distracted By NOT DISTRACTED		Driver Vision Obstructions VISION NOT OBSCURED		Driver Actions at Time of Crash 1 (based on judgement of investigation officer) NO CONTRIBUTING ACTION			
Driver Actions at Time of Crash 2 (based on judgement of investigation officer) NO CONTRIBUTING ACTION		Driver Actions at Time of Crash 3 (based on judgement of investigation officer) NO CONTRIBUTING ACTION		Driver Actions at Time of Crash 4 (based on judgement of investigation officer) NO CONTRIBUTING ACTION			
Motor Vehicle Seating Position: Row FRONT		Motor Vehicle Seating Position: Seat LEFT		Motor Vehicle Seating Position: Other NOT APPLICABLE		<input type="checkbox"/> Seating Position Unknown	
Restraint Systems SHOULDER AND LAP BELT USED		Air Bag Deployed NOT DEPLOYED		Trapped Extrication NOT EJECTED			

Crash Number C000402316-01		Reporting Agency GEORGIA DEPARTMENT OF PUBLIC SAFETY		Reporting Agency Case Number C000402316-01		Reporting Agency CAD Number GSPD16CAD036101	
Trapped Extraction NOT TRAPPED		Injury Severity Level Detail NON-INCAPACITATING (B)		Primary or Most Obvious of Body Area Injured During Crash SPINE			
Injury Severity Level Type NON FATAL INJURY		Injury Severity Level Detail NON-INCAPACITATING (B)		Primary or Most Obvious of Body Area Injured During Crash SPINE			
Source of Transport to Medical Facility EMS GROUND		EMS Agency Name or ID SPALDING EMS		EMS Run Number 6318		Medical Facility Transported To SPALDING REGIONAL	
Injury Description (Type of Injury Initiated to Primary or Most Obvious Body Area Injured during Crash. Can come from EMS / Hospital recording.) Driver had complaints of back pain.							
Law Enforcement Suspected Alcohol Use NO		Alcohol Test Type		Alcohol Tested TEST NOT GIVEN		Alcohol Test Result BAC	
Law Enforcement Suspected Drug Use NO		Drug Test Type		Drug Tested TEST NOT GIVEN		Drug Test Result	
PASSENGER V02							
Portion Type PASSENGER		PLM#		Vehicle V02		Person Type Detail	
First Name ANNIE		Middle Name ELLIS		Last Name JESTER		Date of Birth 11/18/39	
Address 422 DORA ST		Address Other		City GRIFFIN		State GA	
Phone Number		Phone Number (other)		Condition at Time of Crash APPARENTLY NORMAL		Age 76	
Motor Vehicle Seating Position: Row FRONT		Motor Vehicle Seating Position: Seat RIGHT		Motor Vehicle Seating Position: Other NOT APPLICABLE		Sex F	
Motor Vehicle Seating Position: Row FRONT		Motor Vehicle Seating Position: Seat RIGHT		Motor Vehicle Seating Position: Other NOT APPLICABLE		Zip Code 30223	
Shoulder Harness SHOULDER AND LAP BELT USED		Air Bag Deployed NOT DEPLOYED		Seatbelt Use NOT EJECTED		<input type="checkbox"/> Seating Position Unknown	
Trapped Extraction NOT TRAPPED		Injury Severity Level Type NON FATAL INJURY		Injury Severity Level Detail NON-INCAPACITATING (B)		Primary or Most Obvious of Body Area Injured During Crash UNSPECIFIED	
Source of Transport to Medical Facility EMS GROUND		EMS Agency Name or ID SPALDING EMS		EMS Run Number 6318		Medical Facility Transported To SPALDING REGIONAL	
Law Enforcement Suspected Alcohol Use NO		Alcohol Test Type		Alcohol Tested TEST NOT GIVEN		Alcohol Test Result BAC	
Law Enforcement Suspected Drug Use NO		Drug Test Type		Drug Tested TEST NOT GIVEN		Drug Test Result	
NARRATIVE: C000402316							

Vehicle #1 was attempting to turn left onto North Express Way from the city gas pumps. Vehicle #2 was traveling south in the center turning lane. The driver of vehicle #1 stated her vision was obscured by the A post of the vehicle and that she was unable to see vehicle #2. The vehicles made contact in the center turning lane. Both vehicles sustained minor damage and were driven from the scene.

This accident investigation was audio/video recorded on DVD #853-023-2016.

REPORTING OFFICER		APPROVING OFFICER (SUPERVISOR)	
Reporting Officer Name FLOURNOY, Y	Signature 	Approving Officer Name LOWE, K	Signature 
ID Number 0853	Rank TFC	ID Number 0724	Rank SFC
Org / Unit GSPD/POST		Org / Unit GSPD/POST	

Crash Number
C000402310-01Reporting Agency
GEORGIA DEPARTMENT OF PUBLIC SAFETYReporting Agency Case Number
C000402310-01Reporting Agency CAD Number
GSPD16CAD0038101

DIAGRAM OF ACCIDENT

