SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE HARBOR JUSTICE CENTER - NEWPORT BEACH FACILITY 4601 Jamboree Road, Suite 107, Newport Beach, CA 92660-2595

03HS01988

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- NOTICE TO DEFENDANT -YOU ARE BEING SUED BY PLAINTIFF

To protect your rights, you must appear in this court on the trial date shown in the table below. You may lose the case if you do not appear. The court may award the plaintiff the amount of the claim and the costs. Your wages, money, and property may be taken without further warning from the court.

- AVISO AL DEMANDADO -

SMALL CLAIMS NO .:

A USTED LO ESTAN DEMANDANDO

Para proteger sus derechos, usted debe presentarse ante esta corte en la fecha del juicio indicada en el cuadro que aparece a continuación. Si no se presenta, puede perder el caso. La corte puede decidir en favor del demandante por la cantidad del reclamo y los costos. A usted le pueden quitar su salario, su dinero, y otras cosas de su propiedad, sin aviso adicional por parte de esta corte. parte de esta corte.

PLAINTIFF/DEMANDANTE (Name, street address, and telephone number of each):	PLAINTIFF/DEMANDANTE (Name, street address, and telephone number of each):						
LAHAM, MICHAEL STEVEN P.O. BOX 5248							
ORANGE, CA 92863-5248							
OKANGE, CA 92003 3240							
Telephone No.: DEFENDANT/DEMANDADO	Telephone No.: DEFENDANT/DEMANDADO						
CITY OF IRVINE	T DEL ENDANTIBLIMANDADO						
ONE CIVIC CENTER PLAZA, P.O. BOX 19575							
IRVINE, CA 92623-9575							
Telephone No.: 949-724-6000	La Telephone No.:						
Fict. Bus. Name Stmt. No. Expires:	See attached sheet for additional plaintiffs and defendants.						
PLAINTIFF'							
Dft's police department maliciously prosec	not including court costs, because (describe claim and date)						
have committed in violation of CA Govt Cod	le 9149.22(c) 6-28-02						
b. I have had an arbitration of an attorney-client fee dispu	ite. (Attach, Attorney-Client Fee Dispute form (see form SC-101).)						
	with the agency. My claim was denied by the agency, or the agency						
did not act on my claim before the legal deadline. (See form							
3. a. XX I have asked defendant to pay this money, but it has not b	een paid.						
b. I have NOT asked defendant to pay this money because (
4. This court is the proper court for the trial because (In t							
"Venue Table" on the back of this sheet. If you select D, E, or F, spe	ecify additional facts in this space):						
—							
	laims action anywhere in California during this calendar year in						
which the amount demanded is more than \$2,500.							
6. I have have not filed more than 12 small claims, i	ncluding this claim, during the previous 12 months.						
a. I may talk to an attorney about this claim, but I cannot be repres	sented by an attorney at the trial in the small claims court						
b. I must appear at the time and place of trial and bring all witness							
c. I have no right of appeal on my claim, but I may appeal a clai	m filed by the defendant in this case.						
d. If I cannot afford to pay the fees for filing or service by a sheriff,							
8. I have received and read the information sheet explaining some im	portant rights of plaintiffs in the small claims court.						
9. No defendant is in the military service except (name):I declare under penalty of perjury under the laws of the State of Califo	ornia that the foregoing is true and correct						
Date:							
06/26/2003 MICHAEL STEVEN LAHAM	SIGNATURE ON FILE						
(TYPE OR PRINT NAME)	(SIGNATURE OF PLAINTIFF)						
ORDER TO DE							
You must appear in this court on the trial date and at the time LAST SHOWN IN THE BOX BELOW if you do not agree with the							

plaintiff's claim. Bring all witnesses, books, receipts, and other papers or things with you to support your case

TRIAL	1		DATE	DAY	TIME		PLACE	COURT USE
DATE		1.	08/01/2003	FRI	01:30 PM	Department H10	- second floor of the above entitled Court	
FECHA DEL JUICIO	7	2.				Department	- second floor of the above entitled Court	
JUICIO		3.				Department	- second floor of the above entitled Court	
Filed on (date): 06/26/2003					Alar	Slater, Clerk, by	P. BOWER	, Deputy

— The county provides small claims advisor services free of charge. Read the information on the reverse. —



June 19, 2003

Michael Laham P.O. Box 5248 Orange, CA 92863-5248

RE:

CLAIM FOR DAMAGES:

LAHAM, MICHAEL

FILE NUMBER:

S 139440 PC

DATE OF INCIDENT:

April 29, 2003

Dear Mr. Laham:

Notice is hereby given that the claim which you presented to the City of Irvine on May 1, 2003, was denied on June 19, 2003, by Operation of Law.

WARNING

Subject to certain exceptions, you have only six (6) months from the date this notice was personally delivered or deposited in the mail to file an action in the state court based upon a claim under state law. See Government Code Section 945.6. This limitation does not apply to actions filed under the Federal Civil Rights Act.

You may seek the advice of an attorney of your choice in connection with this matter. If you desire to consult an attorney, you should do so immediately.

Sincerely,

enty Clerk

JLS:gf

c: Manager of Human Resources

City Attorney

Director of Public Safety

Carl Warren & Company

PROOF OF SERVICE BY MAIL

STATE OF CALIFORNIA)	
)	SS
COUNTY OF ORANGE)	

I am employed in the county aforesaid, I am over the age of eighteen years; my business address is:

City of Irvine, City Clerk's Office One Civic Center Plaza, Irvine, CA 92606-5208 Post Office Box 19575, CA 92623-9575

On June 19, 2003, I served the within NOTICE OF DENIAL OF CLAIM OF LAHAM, MICHAEL, which was presented to the City of Irvine, by placing a true copy thereof enclosed in a sealed envelope with postage thereon fully prepaid in the United States mail at Irvine, California addressed as follows:

Michael Laham P.O. Box 5248 Orange, CA 92863-5248

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

Executed on June 19, 2003, at Irvine, California.

Title: City Clerk Specialist Department: City Clerk

MICHAEL STEVEN LAHAM P.O. BOX 5248 ORANGE, CA 92863 PHONE: (562) 982-6844 ATTORNEY FOR:

REF. NO: H0300000024184

HARBOR OC SUPERIOR COURT JUSTICE CENTER 4601 JAMBOREE BLVD.
NEWPORT BEACH, CA 92660

CASE NO: 03HS01988 PROOF OF SERVICE

PLAINTIFF: LAHAM, MICHAEL STEVEN DEFENDANT: CITY OF IRVINE

HEARING DATE: 08-01-03 TIME:

DEPT/DIV:

- AT THE TIME OF SERVICE I WAS AT LEAST 18 YEARS OF AGE AND NOT A PARTY TO THIS ACTION, AND I SERVED COPIES OF THE: PLAINTIFF CLAIM AND ORDER TO DEFENDANT
- CITY OF IRVINE SUSAN DAHLGREN OFFICER, AUTHORIZED AGT ONE CIVIC CENTER PLAZA, PO BOX 19575 IRVINE, CA 92623 A. PARTY SERVED: B. PERSON SERVED: C. ADDRESS: 2.
- I SERVED THE PARTY NAMED IN ITEM 2
 A. BY PERSONALLY DELIVERING THE COPIES
 (1) ON: 07-01-03
 (2) AT: 1500 HRS
- THE "NOTICE TO THE PERSON SERVED" (ON THE SUMMONS) WAS COMPLETED AS FOLLOWS:
- PERSON SERVING: Y. BROWN, #5924 HARBOR DIVISION A. FEE FOR SERVICE: \$30.00 4601 JAMBÖREE BOULEVARD, NEWPORT BEACH, CA 9266 (949) 476-4820 ROOM 108 CA 92660
- I AM A CALIFORNIA SHERIFF AND I CERTIFY THAT THE FOREGOING IS TRUE AND CORRECT.

DATE: 07-02-03

MICHAEL S. CARONA, SHERIFF-CORONER

ORIGINAL DOCUMENT **RETURNED TO COURT**

JUD. COUN. FORM, RULE 982(A)(23)