



**RESERVE FOR FILING STAMP**

Filed with the Kings County  
Clerk of the Board

SEP 17 2021

Received by:  
*Dhadisi*

**CLAIM FOR DAMAGES  
COUNTY OF KINGS**

This claim must be filed with the Clerk of the Board of Supervisors. When space is insufficient, please use additional paper and identify information by paragraph number. When claim is complete, mail to: Clerk of the Board of Supervisors, 1400 W. Lacey Blvd., Hanford, CA 93230.

KINGS COUNTY BOARD OF SUPERVISORS  
1400 W. LACEY BLVD.  
HANFORD, CA 93230

NAME Rebecca Campbell  
ADDRESS 752 Seabright Ave,  
Grover Beach, CA 93433

DATE OF BIRTH 4/16/1975  
TELEPHONE NO. (805) 458-5628

**BOARD MEMBERS:**

The undersigned respectfully submits the following claim and information:

1. Post Office address to which claimant desires notices to be sent if other than above:

\_\_\_\_\_

2. Date, place, and time of occurrence or transaction which claim arises from:

DATE: From 2018-June 2021      TIME: Multiple Instances over time

PLACE: Kings County, CA

3. Specify the particular act or omission and circumstances you claim caused injury and/or damage: I was informed that a whistleblower came forward disclosing that District Attorney Keith Fagundes was, without any factual or legal basis, initiating an investigation into me and three other highly placed, female County executives for purported "public corruption." The DA's actions constituted an abuse of prosecutorial discretion and an illegal conflict of interest targeted at me specifically. In addition, I was injured by the acts of certain Supervisors who intentionally and without basis, and with discriminatory and retaliatory intent, regularly publicly ridiculed and embarrassed me and attempted to harm my professional reputation.

5. Amount of reimbursement claimed as damages with computation and supporting paid bills, receipts, or estimates of cost (please attach papers to claim), or which is the appropriate Court of Jurisdiction [Govt. Code 910(f)]: \$25,000 (\$7500 attorneys fees and costs; \$7500 personal injury damages, and \$10,000 in moving expenses). I had to find employment quickly, and was forced to move in order to find an equivalent job. I am need of therapy over this and my new insurance does not cover the costs.
6. Name and addresses of eyewitnesses, doctors, hospitals, etc.

NAME	ADDRESS	TELEPHONE
1 Henie Ring, Kings County,	1400 W Lacey Blvd, Hanford, CA 93230	559-852-2533
2 Lee Burdick,	665 W 24 <sup>th</sup> St, Unit 104, San Pedro, CA 90731	619-972-4551
3 Robert Waggle,	Former Chief DA Investigator, address unknown,	559-477-5049

7. Description of personal injury. If there are no personal injuries, state **"None"**:

As a result of DA Fagundes' unprecedented abuse of prosecutorial discretion and his conflict of interest into initiating an entirely unfounded investigation into my performance as County CAO, I suffered traumatic stress caused by an extreme fear of job loss and also caused by public and private ridicule from select members of the Board of Supervisors.

8. Name of any other person injured: Lee Burdick and two others  
 Address of injured person: Address shown above

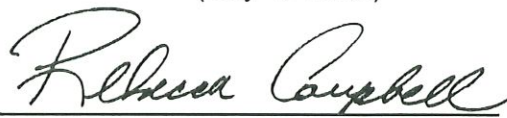
9. Description of property damaged: N/A

10. Owner of property damaged: N/A

11. Any additional information that might be helpful in considering this claim: As a result of DA Fagundes' abuse of prosecutorial discretion and illegal conflict of interest directed toward me, I was compelled to hire an attorney to advise me and potentially defend me in my role as CAO against him. Also, I have suffered severe emotional distress, which my treating therapist has characterized as PTSD, and I continue to suffer every time I think of how I was treated by certain Supervisors and DA Fagundes while I was employed by Kings County as CAO and the permanent impact it has had on me professionally.

I have read the matters and statements made in the above claim and I know the same to be true of my own knowledge, except as to those matters stated true. I certify under penalty of perjury that the foregoing is true and correct.

Signed this 17th day of September of 2021 at Grover Beach, CA  
 (City & State)

  
 Claimant's Signature

4. Name or names of any employee of the County you claim caused the injury, damage, or loss, if any: District Attorney Keith Fagundes and certain members of the Board of Supervisors.

cc: Co Counsel  
Administration