

CLAIM AGAINST THE CITY OF SANTA ANA
(For damages to person or personal property)

A claim against the City of Santa Ana must be filed with the City Clerk's Office of City of Santa Ana within **six (6) months** after which the incident or event occurred. Be sure your claim is against the City of Santa Ana, not another public entity. Where space is insufficient, please use additional paper and identify the paragraph(s) being answered.

Completed claims must be delivered or mailed to:

**City Clerk's Office, City of Santa Ana, 20 Civic Center Plaza, 8th Floor,
P.O. Box 1988, Santa Ana, CA 92701**

For Official Use Only

CLAIM NO: 2025-142

RESERVE FOR FILING STAMP

**SANTA ANA CITY CLERK
JUL 28 '25 PM 8:15**

Received via:

U.S. Mail Over the Counter
 Interoffice Mail/Tube

1. Claimant Information

Name of Claimant: Tony	Lawrence	Olson
First Name	Middle Name	Last Name
Post Office Address:		
	Street Address	City/State
Phone Number:		Zip Code
	Date of Birth	

2. Name and address to which notices should be sent, if other than above. If represented by an attorney, provide attorney information.

Name of Addressee: V. James DeSimone Law		
Post Office Address: 13160 Mindanao Way, Suite 280	Marina del Rey, California	90292
Street Address	City/State	Zip Code
Phone Number: 310-693-5561		

3. The date, place, and other circumstances of the occurrence or transaction from which the claim arises.

Date of Occurrence: June 9, 2025	Time of Occurrence: 10:15 - 10:30 pm
Location: W 4th St and N Broadway Santa Ana, CA 92701	
Circumstances giving rise to this claim: See Attachment.	

4. General description of the indebtedness, obligation, injury, damage or loss incurred so far as you now know.

See Attachment.

5. The name(s) of the public employee(s) or department causing the injury, damage, or loss, if known.

The County of Orange, the City of Santa Ana, the Santa Ana Police Department, Santa Ana Police Department officers, law enforcement officials, and Does 1-100.

6. If amount claimed totals less than \$10,000: Provide the amount claimed if it totals less than ten thousand dollars (\$10,000) as of the date of your claim, including the estimated amount of any related potential future injury, damage, or loss, insofar as it may be known as of the date of your claim, together with the basis of computation of the amount claimed (include copies of all bills, invoices, estimates, etc.).

Total amount claimed and basis for computation:

Limited Civil Case

Unlimited Civil Case

If amount claimed exceeds \$10,000: If the amount claimed exceeds ten thousand dollars (\$10,000), you need not provide a dollar amount in the claim. However, your claim must indicate whether it would be a limited civil case. A limited civil case is one where the recovery sought, exclusive of attorney fees, interest and court costs, does not exceed \$25,000. An unlimited case is one in which the recovery sought is more than \$25,000. (See CCP§86)

7. Medicare Secondary Payer Act: Effective January 1, 2010, the Medicare Secondary Payer Act (Federal Law) requires the City to report all claims involving payments for bodily injury and/or medical treatments. If you are seeking medical damages you must provide your social security number. The City will be unable to process your medical claim without this information.

Social Security Number:

8. Name, address and phone number of any witnesses to the occurrence or transaction from which the claim arises.

See Attachment.

9. If the claim involves medical treatment for a claimed injury, please provide the name, address, and phone number of any doctors or hospitals providing treatment. If applicable, please attach any medical bills or reports or similar documents supporting your claim.

Emergency Room Kaiser Permanente Orange County - Irvine Medical Center; 6640 Alton Pkwy, Irvine, CA 92618

Kaiser Permanente Orange County - Anaheim Medical Center; 3440 E La Palma Ave, Anaheim CA 92806

10. If the claim relates to an automobile accident, provide the following information:

Auto Insurance Company: _____ Phone Number: _____

Post Office Address: _____

Policy Number: _____

Insurance Broker/Agent: _____ Phone Number: _____

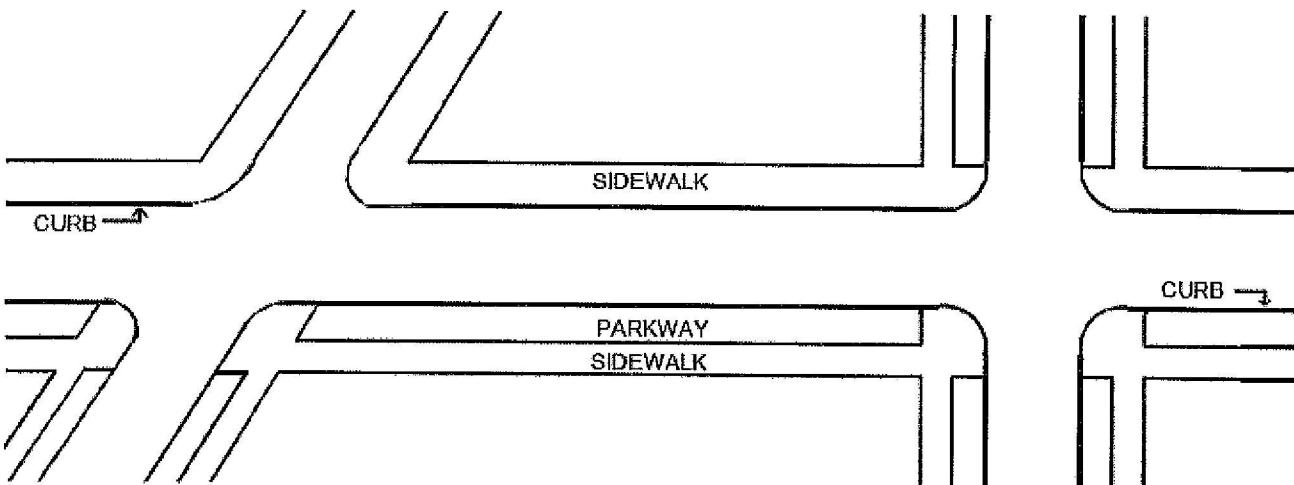
Post Office Address: _____

Vehicle License No.: _____ Vehicle Make/Model/Year: _____

Drivers License No.: _____ State Issued: _____ Expiration: _____

If applicable, please attach any repair bills, estimates or similar documents supporting your claim.

For all accident claims, complete the diagram showing the direction and position of autos or property involved. Please identify the street names, vehicle/pedestrian location, area of impact, etc. and indicate where North is on the diagram. Note: if the diagram below does not fit the situation, attach hereto a proper diagram signed by claimant.



WARNING: Presentation of a false claim is a felony (Penal Code §72). Pursuant to CCP§1038, The City may seek to recover all costs of defense in the event an action is filed which is later determined not to have been brought in good faith with reasonable cause.

Signature of Claimant

July 23, 2025

Date

LATE CLAIM: If you are filing a claim after six (6) months after the date of incident, but not exceeding one (1) year, you must file an "APPLICATION FOR LEAVE TO PRESENT A LATE CLAIM TO THE CITY OF SANTA ANA," which may be obtained from the City Clerk's Office or Risk Management.

#3, #4

***Circumstances giving rise to this claim/General description of the indebtedness, obligation, injury, damage or loss incurred so far as you now know**

On Monday, June 9, 2025, Tony Olson decided to peacefully participate in anti-ICE protests occurring around Southern California by joining a gathering in Santa Ana. Mr. Olson's day started around 9:00 pm when he arrived in downtown Santa Ana with his in-laws and niece. When they got there, Mr. Olson and his family joined the hundreds of others who were exercising their First Amendment rights by advocating against the human and civil rights violations engaged in by ICE by separating families and subjecting human beings to inhumane, torturous conditions of confinement. Not once during Mr. Olson's time in downtown Santa Ana did he ever pose any type of threat to any law enforcement personnel. Nor did most of the other advocates present while he was there.

Around 10:00 pm, Mr. Olson and his brother-in-law made their way to the far-right front of the crowd at the intersection of Broadway and 4th St. Across the street from the crowd were Orange County Sheriff's Department Deputies and the Santa Ana Police Department ("SAPD") Officers. It was approximately 10:15 pm when one individual on the far left of the crowd threw a firework at the law enforcement line. Instead of targeting the one individual who posed the threat, the deputies and officers responded by opening fire at everyone in the crowd with their less-lethal projectiles. By shooting openly and indiscriminately into the crowd, the deputies and officers were risking severe bodily injury or death to individuals who were posing no threat of harm to law enforcement or anyone else.

Mr. Olson started running east on 4th St to avoid being hurt. As he was running, on information and belief, a SAPD officer shot Mr. Olson in the upper right side of his head with a 40 mm less-lethal projectile shot from a 12-gauge shotgun. Mr. Olson was shot, despite the fact that he had not done anything to suggest any type of threat and was completely peaceful. Furthermore, Mr. Olson had not even been near the individual who threw the firework. Upon being hit, Mr. Olson's ears began ringing, his head was bleeding, his speech became impaired, he started experiencing double vision and he started to feel like he was losing consciousness. Fortunately, Mr. Olson made it to his brother-in-law's car where they immediately took him to the Emergency Room at Kaiser Permanente in Irvine. At the ER, Mr. Olson's large scalp laceration was stapled, and he underwent a medical evaluation. During his evaluation, the medical team discovered that Mr. Olson had suffered from a skull fracture, an 8mm subdural hematoma, and subarachnoid bleeding.

Mr. Olson was transferred by ambulance to Kaiser Permanente Anaheim Medical Center where the Neurology department could watch over him in case emergency surgery was needed. Mr. Olson was admitted to the ICU to be monitored for the next couple days. On Tuesday, a SAPD Officer came to visit Mr. Olson in the hospital. The officer wanted to hear about the events leading up to Mr. Olson being shot. The officer proceeded to apologize on behalf of all law enforcement for what had happened to Mr. Olson. Mr. Olson was then discharged from the hospital on Wednesday June 11, 2025, with a long road of recovery ahead of him.

As a result of the incident, Mr. Olson has endured physical pain and limitations, trauma, mental harm, and emotional distress. Since being discharged from the hospital, Mr. Olson has been experiencing dizziness, balance issues, nausea, double vision, headaches, memory issues, anxiety and depression. Additionally, Mr. Olson has been all consumed with fear about the long-term effects he may have from this injury and how it may impact his ability to take care of his wife and three children.

The SAPD intentionally and/or recklessly subjected Mr. Olson to physical injuries and pain by shooting these projectiles at him or indiscriminately in his direction when there was no one in his vicinity causing any imminent threat of harm, violating the Constitution of the United States and California, and SAPD policies, and basic humanity. Upon information and belief, the use of force was motivated by Mr. Olson and the surrounding individuals' exercise of their First Amendment rights and perceived political affiliation pertaining to immigration. The officers' use of these less-lethal weapons violated his Constitutional rights, California Civil Code Sections 43, 51.7, 52.1 and Penal Code Sections 835a and 13652. The officers involved are further responsible for his harm pursuant to California common law torts: battery, negligence, and negligent and intentional infliction of emotional distress. Furthermore, the SAPD has engaged in a policy and pattern of tolerating, condoning and encouraging excessive force and the intentional and negligent training of officers to use excessive force against peaceful protestors, causing constitutional and California Civil Code violations.

All officers were acting under the color of state law and in the course and scope of their employment when they intentionally and/or negligently caused harm to Mr. Olson.

#8 Witnesses

The doctors and medical staff in the Emergency Room at Kaiser Permanente Orange County- Irvine Medical Center

The doctors and medical staff at Kaiser Permanente Orange County – Anaheim Medical Center

The other individuals on 4th St and Broadway at the time Mr. Olson was shot whose contact information is unknown at this time

The OC Sheriff's Department Deputies who were present at the time Mr. Olson was shot whose contact information is unknown at this time

The SAPD Officers who were present at the time Mr. Olson was shot whose contact information is unknown at this time

SAPD Officer B. Mercado, Badge #3927 who interviewed Mr. Olson while he was in the hospital; 714-245-8665

Nancy Carter [REDACTED]

William Zetina [REDACTED]

Briana Cupp [REDACTED]

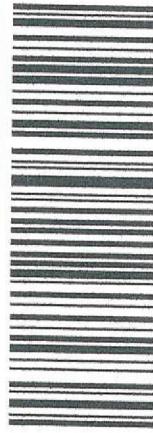
Jessica Zetina [REDACTED]

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL®



V. James DeSimone, Esq.
13160 Mindanao Way, Suite 280
Marina Del Rey, California 90292



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