HONORABLE DAVID KEENAN

Trial Date: November 27, 2023

IN THE SUPERIOR COURT OF THE STATE OF WASHINGTON

IN AND FOR THE COUNTY OF KING

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| GEBRU SIUM-WELDU, as an individual,Plaintiff,vs.BETA TRUCKING LLC, and DINESH CHANDRA AND JANE DOE CHANDRA, as husband and wife,Defendants. | No. 22-2-19657-2 KNTPLAINTIFF’S RESPONSE TO REQUEST FOR STATEMENT OF DAMAGES |

COMES NOW Plaintiff, Gebru Sium-Weldu, by and through counsel of record, and hereby submits his Objections, Answers, and Response to Defendant’s Requests for Statement Damages.

DATED this 25th day of March, 2023

/s/ Neftalem Habtemariam

Neftalem Habtemariam, WSBA #44117

Attorney for Plaintiff

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| SPECIAL DAMAGES | SOURCE |
| A. | Wage Loss | $20,991.18 | Superstar Trucking LLC\_\_\_\_\_(Name of Employer/source) |
| B. | Future Wage Loss | $ \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name of Employer/source) |
| C. | Medical Expenses (Please list expenses associated with each provider of health care and identify the name of the provider) |
| $ 2,698.41\_\_\_\_\_\_\_\_\_\_\_ | Rainier Chiropractic Accident & Injury Clinic(Name of health care provider) |
| $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name of health care provider) |
| $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name of health care provider) |
| $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name of health care provider) |
| $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name of health care provider) |
| $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name of health care provider) |
| $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name of health care provider) |
| $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name of health care provider) |
| D. | Future Medical Expenses:  |
| $ \_12,0000\_\_\_\_\_\_\_\_\_\_\_\_ | Rainier Chiropractic Accident & Injury Clinic(Name of health care provider) |
| $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name of health care provider) |
| $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name of health care provider) |
| E. | Other SpecialDamages | (Identify source of damages) |
| $ 2168\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Unpaid Property Damage (supplemental repair expenses) |
| $ 7500\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Diminished Value\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**GENERAL DAMAGES:**

Plaintiff suffered sprain and strain to his body (past, present and future), emotional and mental distress, loss and/or impairment of his capacity and ability to enjoy life and its pleasures, loss of enjoyment, loss of activities and opportunity, restricted physical activities, and other damages, all of which will be proven at the time of trial herein.

From a subjective standpoint, plaintiff does not believe that there is any monetary amount that will compensate him from the hardship and loss that he has undergone and the effects of his injuries on his life and the lives of his loved ones. In a good faith effort to respond to this interrogatories, for purposes of settlement negotiations, and assisting Defendant in setting insurance reserves, Plaintiff’s attorney, based upon verdicts and settlements in similar cases, estimates Plaintiff’s general damages in the rage of $200,000 would not be unreasonable, should the jury so award.

DATED this 25rd day of March 2023.

/s/ Neftalem Habtemariam

 Neftalem Habtemariam WSBA#44117

 Attorney for Plaintiff