



## DEPARTMENTAL SUBMISSION

DEPARTMENT: Law  
FILE NUMBER: Law-2579

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**\* RE:**

Submitting reso. auth. Settlement in Lawsuit of Yolanda Bryant, Northland Radiology Inc, and Gilead Traumatic Brain & Back Rehab, LLC v City Of Detroit

**\* SUMMARY:**

Case Number: 23-015347-NF File Number: L23-00674 (CAB) (DDOT) (A20000) in the amount of three drafts in the total of **(\$68,000.00)**; The *first draft* in that amount of **(\$26,500.00)** The *second draft* in the amount of **(\$13,500.00)** The *third draft* in the amount of **(\$28,000.00)** payable to in full payment for any and all claims which Yolanda Bryant may have against the City of Detroit and any other City of Detroit employees by reason of alleged injuries sustained on or about **March 26, 2023**

**\* RECOMMENDATION:**

**RESOLVED**, that settlement of the above matter be and is hereby authorized in the amount of **(\$68,000.00)**; and be it further

**RESOLVED**, that the Finance Director be and is hereby authorized and directed to draw a warrant upon the proper account in favor of **(\$68,000.00)** and that Your Honorable Body direct the Finance Director to issue three drafts. The *first draft* in that amount of **(\$26,500.00)** payable to **YOLANDA BRYANT and HER attorneys, ABDALLAH RAHAL, PLLC**. The *second draft* in the amount of **(\$13,500.00)** payable to **NORTHLAND RADIOLOGY, INC and its attorneys, HAAS & GOLDSTEIN, P.C.** The *third draft* in the amount of **(\$28,000.00)** payable to **GILEAD TRAUMATIC BRAIN & BACK REHAB, LLC and its attorneys, GARY R. BLUMBERG, P.C.** in full payment for any and all claims which Yolanda Bryant may have against the City of Detroit and any other City of Detroit employees by reason of alleged injuries sustained on or about **March 26, 2023**, and otherwise set forth in Case No.23-015347-NF, that said amount be paid upon

receipt of properly executed Releases, Stipulation and Order of Dismissal entered in Lawsuit No. 23-015347-NFand, where deemed necessary by the Law Department a properly executed Medicare/CMS Final Demand Letter.

**\* DEPARTMENTAL CONTACT:**

Name: Deanna Denby

Position: Paralegal

**\*=REQUIRED**