



DEPARTMENTAL SUBMISSION

DEPARTMENT: Law

FILE NUMBER: Law-2675

*** RE:**

Submitting Reso. Autho. Settlement In Lawsuit of Southfield Transportation Services, Inc. and Southfield Pt, Inc. (Tramaine Ross) v City Of Detroit

*** SUMMARY:**

CASE NO: 24-004425-NF FILE NO: L24-00851 (CB) (A20000) to draw two separate warrants; the *first warrant* upon the proper account in favor of **SOUTHFIELD TRANSPORTATION SERVICES, INC and THEIR attorneys, KAS-MIKHA LEGAL GROUP, P.L.L.C** in the amount of **(\$7,500.00)**. The *second warrant* upon the proper account in favor of **SOUTHFIELD PT, INC and THEIR attorneys, AW LAW GROUP, P.L.L.C.**, in the amount of **(\$10,225.00)** in full payment for any and all claims which **SOUTHFIELD TRANSPORTATION SERVICES, INC and SOUTHFIELD PT, INC**, may have against the City of Detroit and any other City of Detroit employees by reason of alleged injuries sustained on or about **02/04/2024**

*** RECOMMENDATION:**

RESOLVED, that settlement of the above matter be and is hereby authorized in the amount of **(\$17,725.00)**; and be it further

RESOLVED, that the Finance Director be and is hereby authorized and directed to draw two separate warrants. The first warrant upon the proper account in favor of **SOUTHFIELD TRANSPORTATION SERVICES, INC and THEIR attorneys, KAS-MIKHA LEGAL GROUP, P.L.L.C** in the amount of **(\$7,500.00)**. The second warrant upon the proper account in favor of **SOUTHFIELD PT, INC and THEIR attorneys, AW LAW GROUP, P.L.L.C.**, in the amount of **(\$10,225.00)** in full payment for any and all claims which **SOUTHFIELD TRANSPORTATION SERVICES, INC and SOUTHFIELD PT, INC**, may have against the City of Detroit and any other City of Detroit employees by reason of alleged injuries sustained on or about **02/04/2024**, and otherwise set forth in Case No. 24-004425-NF, that said amount be paid upon receipt of properly executed Releases, Stipulation and Order of Dismissal entered in Lawsuit No.24-004425-NF and, where deemed necessary by the Law Department a properly executed Medicare/CMS Final Demand Letter.

*** DEPARTMENTAL CONTACT:**

Name: Deanna Denby

Position: Paralegal

***=REQUIRED**