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Superior Court of California
County of Fresno
By: B. Ramirez, Deputy

6 Attorney for Plaintiff, Felicia Thompson

7
8 **SUPERIOR COURT OF THE STATE OF CALIFORNIA**
9 **COUNTY OF FRESNO**

10 JENNIE ROSE NELSON, as successor in
11 interest of DONNA BETH NELSON,
12 Plaintiff,
13 vs.
14 COUNTY OF FRESNO, DOES 1through 5,
15 Defendants.

Case No. [26CECG00698](#)

COMPLAINT FOR

1. **Negligence**
2. **Negligent Supervision**

16 **INTRODUCTION**

17 1. This action arises out of the failure to return personal property of Donna Beth Nelson.
18 Ms. Nelson was held for a short period of time at the Fresno County Jail. Valuable
19 items including an original piece of artwork and jewelry were taken from her and
20 never returned to Ms. Nelson after her release from jail.

21 **PARTIES**

22 2. Plaintiff Jennie Rose Nelson is a resident of Sacramento, California. She is the adult
23 daughter of Donna Beth Nelson. She brings this action as the successor in interest of
24 Donna Beth Nelson. *See* Exhibit A, Declaration of by Person Bringing this Action as
25 Decedent's Successor in Interest.

COMPLAINT

- 1 3. The events giving rise to this lawsuit took place in late May and early June of 2024.
2 Donna Beth Nelson died on July 14, 2025, for reasons not connected with the
3 allegations in this lawsuit.
- 4 4. Defendant County of Fresno is a governmental unit. The County is vicariously liable
5 for the negligent or other wrongful acts committed by its employees in the course and
6 scope of their official duties as County employees.
- 7 5. Defendant John Doe No. 1 is, on information and belief, a Correctional Sergeant who
8 supervised the booking of Donna Beth Nelson into the Fresno County Jail. Plaintiff is
9 otherwise unaware of the true name and capacity of this Defendant, and will amend
10 her complaint upon obtaining this information.
- 11 6. Defendant John Does Nos. 2 through 5 are other Jail personnel who may have been
12 involved in the supervision or the handling of the property of persons incarcerated in
13 the Jail. Plaintiff is otherwise unaware of the true names and capacities of these
14 Defendants, and will amend her complaint upon obtaining this information.

15 **CONDITIONS PRECEDENT**

- 16 7. All conditions precedent to the file of this action have been performed.
- 17 8. On or about May 29, 2025, Donna Beth Nelson, through counsel, presented an
18 Application for Leave to Present a Late Claim for Damages and a Government Claim
19 to Fresno County.
- 20 9. The County assigned number 11461 to this claim. The Board granted the Late Claim
21 Application, and rejected the Government Claim and notified Plaintiff of its action in
22 rejecting the claim in a letter dated August 13, 2025.
- 23 10. This action is timely in that it is brought within six months of the mailing of the
24 denial letter.
25

1 **STATEMENT OF FACTS**

- 2 11. The incidents described in this complaint including the acts and omissions of the
3 Defendants occurred in Fresno County, California.
- 4 12. Donna Beth Nelson was born in 1960 and grew up in New York City. Her father, an
5 attorney, did legal work for an artist named Robert Henry De Niro. As payment for
6 his legal services, Donna’s father accepted artwork, including the oil painting “Still
7 Life with Two Pitchers” (“the painting”). After Donna’s father acquired the artwork,
8 Mr. De Niro became more famous and his work increased in value. This was no
9 doubt due at least in part to the fact that the artist’s son became a famous and highly
10 successful motion picture actor. Donna inherited the painting when her mother died.
- 11 13. By January 2024, Donna Nelson was 63 years old and living in Vallejo, California.
12 She had a history of Bipolar II disorder which was being managed with prescribed
13 medications. Sometime during January 2024, she discontinued taking her medication.
14 She began exhibiting symptoms of severe psychiatric decompensation, including
15 psychosis, hallucinations, and disorganized thinking. She was placed on at least one
16 involuntary psychiatric hold. After being released from this hold, she continued to
17 refuse treatment and medication and her incapacity continued.
- 18 14. At some point between January and late May of 2024, Donna removed the artwork
19 from its frame, and wrapped it in clothing, keeping it with her in her vehicle.
- 20 15. On or about May 31, 2024, at least one California Highway Patrol officer arrested
21 Donna Beth Nelson in Fresno County following a vehicle pursuit. The officer took
22 her to the Fresno County Jail.
- 23 16. On information and belief, a Fresno County Correctional Sergeant processed and
24 booked Ms. Nelson into the Jail, and took possession of her personal property. This
25 property included the valuable piece of original artwork and two bags of jewelry.

1 17. Ms. Nelson was released from the custody of the Fresno County Jail on or about June
2 2, 2026. No criminal charges were ever filed against her as a result of this arrest. Her
3 property, including the De Niro painting and the jewelry, were never returned to her.

4 **FIRST CAUSE OF ACTION**

5 **Negligence**

6 *(Against all Defendants)*

7 18. Plaintiff realleges and incorporates by reference all preceding paragraphs as if set
8 forth in full, and alleges:

9 19. The County and its employees were negligent in failing to return Donna Nelson's
10 property to her. They owed her a duty to hold her property in safekeeping during her
11 incarceration and to return all of her property to her upon her release. Defendants
12 breached that duty and caused her harm, the loss of valuable personal items of great
13 value and sentimental value.

14 **SECOND CAUSE OF ACTION**

15 **Negligent Supervision**

16 *(Against all Defendants)*

17 20. Plaintiff realleges and incorporates by reference all preceding paragraphs as if set
18 forth in full, and alleges:

19 21. The County and its supervisory employees were negligent in supervising the
20 operation of the Jail in such a manner as allowed Donna Nelson's property to be lost
21 and never returned to her. They owed her a duty to see that her property was held in
22 safekeeping during her incarceration and to return all of her property to her upon her
23 release. Defendants breached that duty and caused her harm, the loss of valuable
24 personal items of great value and sentimental value.

25 **RELIEF SOUGHT**

26 22. WHEREFORE, Plaintiff prays for judgment against Defendants and each of them as
27 follows:

- 1 23. For compensatory, general, and special damages against each Defendant, jointly and
2 severally, in the amount proven at trial;
3 24. In the alternative, for specific performance of the return of the lost items to Plaintiff;
4 25. For costs of suit as provided by law;
5 26. For such other relief as the Court may deem proper.

6
7 JURY DEMAND - Plaintiff demands trial of this matter by jury.

8 Date: February 13, 2026

Respectfully submitted,

9 */S/ Carter C. White*

10 _____
11 Carter C. White

12 *Attorney for Plaintiff,*
13 *Jennie Rose Nelson*

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7 Attorney for all Plaintiffs

8 **SUPERIOR COURT OF THE STATE OF CALIFORNIA**
9 **COUNTY OF FRESNO**

10 **IN RE: DONNA BETH NELSON**

11 **DECLARATION BY A PERSON**
12 **BRINGING THIS ACTION AS**
13 **DECEDENT'S SUCCESSORS IN**
14 **INTEREST**

15 Pursuant to California Code of Civil Procedure section 377.32, Plaintiff submits this
16 declaration in support of bringing this action as decedent's successors in interest.

17 I, Jennie Rose Nelson, declare as follows:

18 1. The claims in this action arise out of the death of the decedent, Donna Beth
19 Nelson.

20 2. Donna Beth Nelson died on July 14, 2025 in Solano County, California.

21 3. No proceeding is now pending in California or elsewhere for administration
22 of the decedent's estate.

23 4. There was no administration of the decedent's estate.

24 5. Declarant, Jennie Rose Nelson, was the daughter of decedent, Donna Beth
25 Nelson, and a next of kin. Declarant, Jennie Rose Nelson, is a successor in interest as
26 defined in section 377.11 of the California Code of Civil Procedure and succeeds to the
27 decedent's interest in this action.

28 6. No other person has a superior right to commence this action or proceeding
or to be substituted for Donna Beth Nelson in the pending action or proceeding.

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8. A certified copy of Donna Beth Nelson’s death certificate is attached to this declaration.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed this 12th day of February, 2026 at Sacramento, California.



Jennie Rose Nelson, Declarant

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF SOLANO

HEALTH AND SOCIAL SERVICES DEPARTMENT

3052025152132

CERTIFICATE OF DEATH

3202548001987

STATE FILE NUMBER		STATE OF CALIFORNIA USE BLACK INK ONLY / NO ERASURES, WHITEOUTS OR ALTERATIONS VS-11 (REV 7/24)				LOCAL REGISTRATION NUMBER													
1. NAME OF DECEDENT- FIRST (Given) DONNA		2. MIDDLE BETH		3. LAST (Family) NELSON		4. DATE OF BIRTH mm/dd/ccyy 11/03/1960		5. AGE Yrs. 64		6. SEX F									
AKA. ALSO KNOWN AS - Include full AKA (FIRST, MIDDLE, LAST)		9. BIRTH STATE/FOREIGN COUNTRY NY		10. SOCIAL SECURITY NUMBER [REDACTED]		11. EVER IN U.S. ARMED FORCES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK		12. MARITAL STATUS/SRDP* (at Time of Death) DIVORCED		7. DATE OF DEATH mm/dd/ccyy 07/14/2025		8. HOUR (24 Hour) 1205							
13. EDUCATION - Highest Level/Degree (see worksheet on back) HS GRADUATE		14/15. WAS DECEDENT HISPANIC/LATINO(A)/SPANISH? (if yes, see worksheet on back) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		16. DECEDENT'S RACE - Up to 3 races may be listed (see worksheet on back) WHITE		17. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED ARTIST		18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.) CERAMICS		19. YEARS IN OCCUPATION 50									
20. DECEDENT'S RESIDENCE (Street and number, or location) 1924 SERENO DRIVE		21. CITY VALLEJO		22. COUNTY/PROVINCE SOLANO		23. ZIP CODE 94589		24. YEARS IN COUNTY 7		25. STATE/FOREIGN COUNTRY CA									
26. INFORMANT'S NAME, RELATIONSHIP DANIELLE C. NELSON, DAUGHTER		27. INFORMANT'S MAILING ADDRESS (Street and number, or rural route number, city or town, state and zip) 275 EAST J STREET, BENICIA, CA 94510		28. NAME OF SURVIVING SPOUSE/SRDP*-FIRST -		29. MIDDLE -		30. LAST (BIRTH NAME) -		31. NAME OF PARENT-FIRST ROY		32. MIDDLE LOUIS		33. LAST (BIRTH NAME) WEISS		34. BIRTH STATE NY			
35. NAME OF PARENT-FIRST ANN		36. MIDDLE JUDITH		37. LAST (BIRTH NAME) BURACK		38. BIRTH STATE MA		39. DISPOSITION DATE mm/dd/ccyy 07/16/2025		40. PLACE OF FINAL DISPOSITION FERNWOOD 301 TENNESSEE VALLEY ROAD, MILL VALLEY, CA 94941		41. TYPE OF DISPOSITION(S) BURIAL		42. SIGNATURE OF EMBALMER ▶ NOT EMBALMED		43. LICENSE NUMBER -			
44. NAME OF FUNERAL ESTABLISHMENT FERNWOOD		45. LICENSE NUMBER FD1281		46. SIGNATURE OF LOCAL REGISTRAR ▶ BELA MATYAS MD, MPH		47. DATE mm/dd/ccyy 07/15/2025		101. PLACE OF DEATH RESIDENCE		102. IF HOSPITAL, SPECIFY ONE <input type="checkbox"/> IP <input type="checkbox"/> ERVOP <input type="checkbox"/> DOA <input type="checkbox"/> Hospice <input type="checkbox"/> Nursing Home/LTC <input checked="" type="checkbox"/> Decedent's Home <input type="checkbox"/> Other		103. IF OTHER THAN HOSPITAL, SPECIFY ONE <input type="checkbox"/> IP <input type="checkbox"/> ERVOP <input type="checkbox"/> DOA <input type="checkbox"/> Hospice <input type="checkbox"/> Nursing Home/LTC <input checked="" type="checkbox"/> Decedent's Home <input type="checkbox"/> Other		104. COUNTY SOLANO		105. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location) 1924 SERENO DRIVE		106. CITY VALLEJO	
107. CAUSE OF DEATH Enter the chain of events --- diseases, injuries, or complications --- that directly caused death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. IMMEDIATE CAUSE (Final disease or condition resulting in death) (A) PANCREATIC CANCER Sequentially, list conditions, if any, leading to cause on Line A. Enter UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST (B) (C) (D)		108. DEATH REPORTED TO CORONER? Time Interval Between Onset and Death (AT) MTHS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO REFERRAL NUMBER		109. BIOPSY PERFORMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		110. AUTOPSY PERFORMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		111. USED IN DETERMINING CAUSE? <input type="checkbox"/> YES <input type="checkbox"/> NO		112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107 NONE		113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (if yes, list type of operation and date) NO		113A. DECEDENT PREGNANT IN LAST YEAR? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK					
114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. Decedent Attended Since: (A) mm/dd/ccyy 07/07/2025 (B) mm/dd/ccyy 07/14/2025		115. SIGNATURE AND TITLE OF CERTIFIER ▶ RAYMOND SUN HA, MD		116. LICENSE NUMBER A123101		117. DATE mm/dd/ccyy 07/15/2025		118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE RAYMOND SUN HA, MD 5099 COMMERCIAL CIRCLE #210, CONCORD, CA 94520		119. I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. MANNER OF DEATH <input type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Could not be determined		120. INJURED AT WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK		121. INJURY DATE mm/dd/ccyy		122. HOUR (24 Hours)			
123. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)		124. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)		125. LOCATION OF INJURY (Street and number, or location, and city, and zip)		126. SIGNATURE OF CORONER / DEPUTY CORONER		127. DATE mm/dd/ccyy		128. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER									

STATE REGISTRAR A B C D E FAX AUTH.# CENSUS TRACT

CERTIFIED COPY OF VITAL RECORDS
STATE OF CALIFORNIA, COUNTY OF SOLANO



This is a true and exact reproduction of the document officially registered and placed on file in the office of the Solano County Health and Social Services Department, Public Health Division.

By [Signature], Deputy. DATE ISSUED **JUL 18 2025**

[Signature]
BELA MATYAS, MD, MPH
HEALTH OFFICER AND LOCAL REGISTRAR

This copy is not valid unless prepared on an engraved border displaying the seal, date of issuance and the original signature of the Deputy.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

