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 7 Employees of the City of Stockton, Shelley Green,
 Patricia Hernandez, Reed Hogan, Glenn E.
 8 Matthews, Patrick L. Samsell, Alfred J. Siebel,
 Brenda Jo Tubbs, and Teri Williams on Behalf of
 Themselves and Others Similarly Situated

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 10 **UNITED STATES BANKRUPTCY COURT**
 11 **EASTERN DISTRICT OF CALIFORNIA – SACRAMENTO DIVISION**

12 In re:
 13 CITY OF STOCKTON, CALIFORNIA,
 14 Debtor.

Case No. 12-32118
 Chapter 9

15 ASSOCIATION OF RETIRED EMPLOYEES
 16 OF THE CITY OF STOCKTON, a nonprofit
 California corporation, SHELLEY GREEN,
 17 PATRICIA HERNANDEZ, REED HOGAN,
 GLENN E. MATTHEWS, PATRICK L.
 18 SAMSELL, ALFRED J. SIEBEL, BRENDA
 JO TUBBS, TERI WILLIAMS, on Behalf of
 19 Themselves and Others Similarly Situated,

Adv. No.
 DECLARATION OF TERI WILLIAMS IN
 SUPPORT OF APPLICATION FOR
 TEMPORARY RESTRAINING ORDER
 OR RELIEF FROM STAY

20 Plaintiffs,

21 vs.

22 CITY OF STOCKTON, CALIFORNIA,
 23 Defendant.

1 I, Teri Williams, declare:

2 1. I have personal knowledge of the facts set forth in this declaration and, if called as
3 a witness, I could and would testify competently to these facts under oath.

4 2. I was born on January 3, 1957 and am 55 years old. I live at 947 Ponderosa
5 Street, Jackson, CA 95642.

6 3. I was hired by the City in 1975 and retired in June of 2011 as a Project Manager.
7 In between those dates I worked in various part time and full time positions.

8 4. My spouse is 47 and is my dependent on the City Health Plan. Neither I nor my
9 spouse will be eligible for Medicare.

10 5. My CALPERS retirement check is \$2,926. My net annual household income is
11 \$41,900.

12 6. I am informed and believe the City has adopted a monthly premium for retiree
13 health benefits. If required to pay the premium to receive City Health Plan benefits, even with

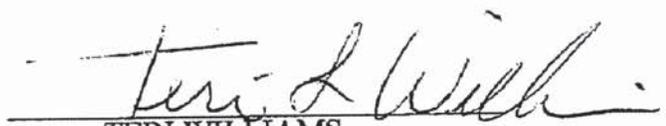
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1 the \$450 subsidy offered by the City for one year, my premium would be \$1,126.66 monthly, or
2 \$13,519.92 annually. That would represent 32% of my annual income.

3 7. I have two dependents and I am the sole provider for my family. My income is
4 limited and my house is in foreclosure. I had an unforeseen surgery and the increase in co-pays
5 has blown my limited income. My dependent daughter who is not on the City Plan had some
6 emergency room visits that must be paid. Loss of the City's Health Plan is catastrophic for me.

7 I declare under penalty of perjury under the law of the United States of America that the
8 foregoing is true and correct and that this declaration was executed in Jackson, CA on

9 June 24, 2012.

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11 TERI WILLIAMS

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