DOCKET NUMBER

Trial Court of Massachusetts



CIVIL ACTION COVER SHEET	00 83 6450	~ 7 R	The Superior Court COUNTY Norfolk Superior Court (Dedham)			
	33 gg (n oo	ひろひ				
Plaintiff Joanne Delapa, of Delapa Realty Trust		Defendant:	Town of Westwoo	Town of Westwood Conservation Commission		
ADDRESS: P.O. Box 277		ADDRESS:	50 Carby Street			
Norwood, MA 02062		Westwood, MA 020290				
				NA A	1/12/2)
Plaintiff Attorney: Matthew Watsky / Rachel Watsky		Defendant Attorney:				
ADDRESS: 30 Eastbrook Road, Suite 301		ADDRESS: RECEIVED & FILED				
Dedham, MA 02026		CLERK OF THE COURTS				
DDO: 540000 (704040		NORFOLK COUNTY				
BBO: 546308 / 704043			instructions section below	 -		
CODE NO. TYPE OF ACTION A					BEEN MADE?	
E03 Certiorari Action, G.L. c. 249 section 4		X				
*If "Other" please describe:						
Is there a claim under G.L. c.	93A?		Is there a class action		s. R. Civ. P. 23	?
YES NO			☐ YES 🛛 NO)		
	ENT OF DAMAGES PL					
The following is a full, itemized and detailed statement of the For this form, disregard double or treble damage claims; in	ne facts on which the ur dicate single damages TORT C	only.	laintiff or plaintiff's counsel re	elies to dete	ermine money da	amages.
A. Documented medical expenses to date	101(10	<u> </u>				
1. Total hospital expenses						
2. Total doctor expenses						_
Total chiropractic expenses		,	•			
Total physical therapy expenses			•			
5. Total other expenses (describe below)		BET WE				_
B. Documented lost wages and compensation to date			Subtotal (1-5): \$0.00		_	
C. Documented property damages to date						_
D. Reasonably anticipated future medical and hospital exp	penses					_
E. Reasonably anticipated lost wages						_
F. Other documented items of damages (describe below)						
			TOTAL (A-F): \$0.00			
G. Briefly describe plaintiff's injury, including the nature ar	nd extent of injury:					_
			,			
	CONTRAC					
This action includes a claim involving collection of a	a debt incurred pursuan	t to a revolvi	ng credit agreement. Mass. I	R. Civ. P. 8		
Item# D	etailed Description of E	ach Claim			Amount	
1.						
				Total	 	
Signature of Attorney/Unrepresented Plaintiff: X Rachel	Watsky, Esq.			Date:	January 12	2, 2022
RELATED ACTIONS: Please provide the case number, of		of any relate	ed actions pending in the Sup	erior Cour	t.	
Learning and the state of Pule 5	RTIFICATION PURSU	ourt Uniform I	Rules on Dispute Resolution (SJ0	C Rule 1:18)	requiring that I pro	vide my
I hereby certify that I have complied with requirements of Rule s clients with information about court-connected dispute resolution	n services and discuss with	them the adv	rantages and disadvantages of th	e various m	ethods of dispute r	esolution.
Signature of Attorney/Unrepresented Plaintiff: X Rachel Watsky, Esq.				Date: January 12, 2022		