

Amended

RECEIVED

IN THE UNITED STATES DISTRICT COURT FOR THE WESTERN DISTRICT OF MISSOURI
WESTERN DIVISION

AUG 10 PM 3:27
CLERK U.S. DIST. COURT
WEST. DIST. OF MO
KANSAS CITY, MO.

Tanya M. Teegarden

Complaint for a Civil Case

Case No. 4:18-CV-00554-SRB

(to be filled in by the Clerk's Office)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-against-

Gold Crown Mgmt LLC

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

REQUEST FOR TRIAL BY JURY

Plaintiff requests trial by jury. Yes No

X

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name Tanya M. Teegarden
Street Address ~~3001 W. 118th St.~~
City and County Kansas City ~~MO~~, Clay
State and Zip Code Missouri 64119
Telephone Number ~~913-526-5050~~
E-mail Address ~~[REDACTED]~~

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name Vijay Dewar
Job or Title (if known) Owner
Street Address 3001 W. 118th St.
City and County Leawood, Johnson-
State and Zip Code ~~Leawood~~ Kansas, ~~Johnson~~ Leawood
Telephone Number 913-526-5050
E-mail Address (if known) ~~[REDACTED]~~

Defendant No. 2

Name Newin Dewar-
Job or Title (if known) Owner-
Street Address 3008 W. 117th St.
City and County Leawood, Johnson

State and Zip Code Leawood 66211
Telephone Number 913-636-8080
E-mail Address (if known) ~~XXXXXXXXXXXXXXXXXXXX~~

II. Basis for Jurisdiction

Federal courts are courts of limited jurisdiction (limited power). Generally, only three types of cases can be heard in federal court. Provide the designated information for this type of case. (Check all that apply)

Federal question

List the specific federal statutes, federal treaties, and/or provisions of the United States Constitution that are at issue in this case.

Title VII of the Civil Rights Act
of 1964, ADA, ADEA

Suit against the Federal Government, a federal official, or a federal agency

List the federal officials or federal agencies involved, if any.

Diversity of Citizenship

These are cases in which a citizen of one State sues a citizen of another State or nation and the amount at stake is more than \$75,000. In a diversity of citizenship case, no defendant may be a citizen of the same State as any plaintiff.

A. The Plaintiff(s)

The plaintiff, (name) Tanya Teegarden is a citizen of the State
of (name) Missouri.

(If more than one plaintiff is named in the complaint, attach an additional page providing the same information for each additional plaintiff.)

B. The Defendant(s)

1. If the defendant is an individual

The defendant, (name) Vijay Dewar, is a citizen of the State of (name) KANSAS. Or is a citizen of (foreign nation) _____.

2. If the defendant is a corporation

The defendant, (name) Vijay Dewar is incorporated under the laws of the State of (name) KANSAS, and has its principal place of business in the State of (name) KANSAS. Or is incorporated under the laws of (foreign nation) KANSAS, and has its principal place of business in (name) Leawood Kansas,

(If more than one defendant is named in the complaint, attach an additional page providing the same information for each additional defendant.)

C. The Amount in Controversy

The amount in controversy----the amount the plaintiff(s) claims the defendant(s) owes or the amount at stake----is more than \$75,000, not counting interest and costs of court, because (explain):

They owe me commissions on
\$1.8 million sale \$80,000.
They owe a commission on a \$85,000
Contract.

III. Statement of Claim

Write a short and plain statement of FACTS that support your claim. Do not make legal arguments. You must include the following information:

- What happened to you? in was verbally attacked, by
- What injuries did you suffer? Both father and son daily
my mental health was deteriorating daily
- Who was involved in what happened to you?
Vijay Dewar / Nevin Dewar
David Stelby, Tetwana Dewar -

- How were the defendants involved in what happened to you?
They both were vicious and controlling of me
- Where did the events you have described take place?
Missouri and Kansas properties
my mental health
- When did the events you have described take place?
at work, Jan 08, 2016, Dec 20, 2017, also multiple days in 2018.

If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

1) Jan, 08 2016 I was terminated for no reason.

2) Dec 2017 I was attacked by both owners @ 2 property occasions

3) I was harassed daily. Called names by owners throughout my employment with owners April 2016, Jan 8, 2018.

IV. Relief

State briefly and precisely what damages or other relief you want from the Court. Do not make legal arguments.

I want to be compensated for my work in the sale of Villas Apts Sold for millions dollars. I want my \$100,000 commission, I want 50

Do you claim the wrongs alleged in your complaint are continuing to occur at the present time?

Yes No

Do you claim actual damages for the acts alleged in your complaint?

Yes No

Do you claim punitive monetary damages?

Yes No

If you indicated that you claim actual damages or punitive monetary damages, state the amounts claimed and the reasons you claim you are entitled to recover these damages.

~~#80,000~~ ^{to be pd.} Sale of Property 8.9 million ^{to be pd.}
~~#85,000~~ ^{#85,000} Contract. New York Commission
Ranch the Business for 3 years was never
fully compensated. Also, 900,500.00 for Compensation
for my mental health
Abuse - ADA, ADEA.

V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: Aug 10, 2018

Signature of Plaintiff
Printed Name of Plaintiff

Danya Begarden

UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF MISSOURI

Tanya M. Teegarden
Plaintiff

vs.

Gold Clown Mgmt LLC
Defendant

Case No. _____

AFFIDAVIT OF FINANCIAL STATUS

I, Tanya M. Teegarden, declare that I am the plaintiff in this case, that because of my poverty I am unable to pay the costs of these proceedings, and that I believe I am entitled to relief.

I further swear that the responses which I have made to the questions below and the information I have given relating to my ability to pay the costs of commencing and prosecuting this action are true.

I. MARITAL STATUS AND PERSONAL DATA

A. Single: ___ Married: ___ Separated: ___ Divorced:

B. Name of Spouse: _____

C. Age of plaintiff, petitioner or complainant: 49

D. Age of spouse: _____

E. Address of plaintiff, petitioner or complainant: ~~_____~~

Ave Kansas City, Mo. 64119

Telephone: ~~_____~~

F. Address of spouse: _____

Telephone: _____

G. State name or names of dependents who live with you, their age, address, relationship, and how much of their monthly support you provide:

N/A

II. EMPLOYMENT

A. Name of employer: Unemployed-

Address of employer: _____

Employer's telephone: _____ Length of employment: _____

Job title or description: _____

Net Income: Monthly \$ _____ Weekly \$ _____

Gross Income: Monthly \$ _____ Weekly \$ _____

Does employer provide health insurance: Yes _____ No _____

If employer provides health insurance, describe coverage: _____

B. Previous employment (Answer only if presently unemployed)

Name of employer: Gold Crown Mgmt LLC-

Address of employer: 3001 W. 118th St. Leawood KS 66211

Employer's telephone: 913-526-5050 Length of employment: 8/2015 - Jan 2016
4/2016 - 1/2018

Job title or description: leasing agent / Volunteer / Dist Mgr.

Net Income: Monthly \$ _____ Weekly \$ _____

Gross Income: Monthly \$ _____ Weekly \$ _____

It was as an employee - then as a consultant.

C. Employment of spouse:

Name of employer: UN/A-

Address of employer: _____

Employer's telephone: _____ Length of employment: _____

Job title or description: _____

Net Income: Monthly \$ _____ Weekly \$ _____

Gross Income: Monthly \$ _____ Weekly \$ _____

III. FINANCIAL STATUS

(Answer questions on behalf of both the plaintiff, petitioner or complainant and spouse).

A. Owner of real property? Yes _____ No

If yes - Description: _____

Address: _____

In whose name? _____

Estimated value: _____

Total amount owed: _____

Owed to: _____

Annual income from property: _____

B. Owner of automobile: Yes No _____

If yes - Number of automobiles owned: 2

Make Dodge Model Caravan Year 2001

Make Ford Model Freestyle Year 2006

In whose name registered? Tanya Hogarden

Present value: \$235 on Van, \$1500 Freestyle

Amount owed on the automobile(s): N/A

Owed to: _____

Monthly payment(s): _____

C. Cash on hand: (Include checking and savings accounts)

\$ 20.00 Checking \$10.00 Savings

List names and addresses of banks and associations: US Bank

Please do not state account numbers.

D. Have you received within the past 12 months any money from any of the following sources:

	Yes	No
Rent payments, interest or dividends?	—	X
Pensions, trust funds, annuities or life Insurance payments?	—	X
Gifts or inheritances?	—	X
Welfare Payments?	—	X
ADC or other governmental child support?	—	X
Unemployment benefits?	—	X
Social Security Benefits	X	—
Other sources?	—	—

E. If the answer to any item in D above was "Yes", describe each source of money and state the amount received from each during the past 12 months:

\$924.00 from Social Security Disability.

IV. OBLIGATIONS

- A. Monthly rental on house or apartment: \$234.00-
- B. Monthly mortgage payments on house: N/A
 Amount of equity in house: N/A
- C. Monthly mortgage payments on other properties: \$ N/A
 Amount of equity in other properties: \$ N/A
- D. Household expenses: 100.00

Monthly grocery expense: \$50.00

Monthly utilities:

Gas: 25.00

Electric: \$200.00

Water: 85.00

Other: (Specify) Pets - \$150- a month-

E. Other debts and miscellaneous monthly expenses:

TO WHOM OWED AND FOR WHAT REASON INCURRED?	MONTHLY PAYMENTS	BALANCE DUE
Cell phone-	40.00 -	
Car ins.	\$156.00 -	
JCPennys-	25.00	100.00
Capital One -	35.00	1500.00
Discover-	35.00	1000.00
walmart-	35.00	850.00 -

V.

OTHER INFORMATION PERTINENT TO FINANCIAL STATUS

(Include information regarding stocks, bonds, savings bonds, either individually or jointly owned).

N/A-

I understand that a false statement or answer to any question in this affidavit will subject me to penalties of perjury.

Danya M. Deegarden
Signature of Plaintiff

VERIFICATION

State of _____)
County of _____)

I, being first duly sworn under oath, state that I know the contents of this affidavit and that the information contained in the affidavit is true to the best of my knowledge and belief.

Danya M. Deegarden
Signature of Plaintiff or Plaintiffs

All parties must verify

SUBSCRIBED AND SWORN TO before me this _____ day of _____, 20 _____

Notary Public

My Commission Expires