SMITH, Carl Shannon

CM3-2023-00163 Q (Low Back+Abdomen; L Groin, Abdomen)

SS# XXX-X2-4380 City Council Date 8/13/24

Atty: Nicole Bell

Trial Date: N/A Order Date: N/A

DOH: 12/5/05 Separation: Retired 12/16/22

RTW: N/A MMI: 1/2/24

Date of Injury: 6/7/22 (SI) PPD Wage: \$360

Memo

Resolution R-2425-29 Purchase Requisitions

Permanent Partial Disability Settlement	:	\$22,032.00	17% Low Back	
		\$0.00	0% Abdomen	
		\$0.00	0% L Groin, Abdomen	
Disfigurement		\$5,000.00		
Total Award (PPD & Disfigurement)		\$27,032.00	•	
Attorney Fees (20% of PPD)	\$	(5,406.40)		
Net Settlement (Less Atty Fees)		\$21,625.60	Vendor	
Oklahoma Child Support (Net Settlement)		(\$7,914.96)	5735	
Net to Claimant		\$13,710.64	_	
Attorney Fees (20% of PPD)		\$5,406.40		
Total PPD Settlement		\$19,117.04	-	
Multiple Injury Trust Fund (3% of PPD-After 7/1/19)		(\$660.96)	11739	43330102-42134
Net to Attorney & Claimant (Less Child Support & MITF)	\$18,456.08		-	43330102-42131
City's Settlement Costs (953-092)				
Workers Comp. Admn. Fund (2% of PPD)	\$	440.64	2267	43330102-42133
Occupational & Health Trust Fund (0.75%)	\$	202.74	1950	43330102-42135
Filing Fee - Workers Compensation Commission	\$	140.00	12122	43330102-44704
	\$	783.38	-	
Filing Fee - Cleveland County District Court	\$	154.14	434	43330102-44703

Total Settlement Cost (PPD, Disfigurement, Costs)

\$27,969.52

937.52

Settlement forms:	<u>Copies</u>	Filed in WCC	Filed in Dist.Ct.
IF Compromise Settlement	11	x	
Affidavit of Foreign Judgment	4		X
Assignment of Judgment	4		X
Checks with case name on them	1		
Certificate of Mailing	3	x	

File Closing procedure

Send Tax Roll Memo to Finance (1st) w/Agenda Approval Send in Taxes to Tax Commission

Send filing fee to Comp Court

Mail Certified Copy of JP or CS - Maill to all providers

File Affidavit & Assigment in District Court

Send Tax Roll Memo to Finance (1nd) w/Aff & Assignment

Final Letter to Attorney (Sending Aff/Assignment)

Log onto Legal's tracking spreadsheet (Legal/WC/Audits)

Index in file list & place in storage

Send Closing Letter to Claimant's Attorney

Completion

Date