

ERICKSEN, Tammy L.

CM 2021-06871 E (R. Hip, R. Knee, R. Shldr, &amp; Back)

SS# XXX-X4-9323

City Council Date 9/13/22

Atty:Bob Burke

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

DOH:7/13/98 Separation (if applicable): 1/27/22 (Retired)

RTW: NA MMI: 6/22/21 (Bk), 11/4/21 (R. Shldr), R Hip (9/16/21) &amp; Knee (10/28/21)

Date of Injury: 8/12/20 (SI)

PPD Wage: \$350

Memo

Resolution R-2223-33

Purchase Requisitions

## Permanent Partial Disability Settlement

\$16,380.00	13% Body as a Whole (R. Hip)
\$16,380.00	13% Body as a Whole (R. Knee)
\$15,120.00	12% Body as a Whole (R. Shldr)
\$18,900.00	15% Body as a Whole (Back)
\$3,220.00	CMM

Total PPD

\$70,000.00

Attorney Fees

\$ 10,043.00

Net to Claimant

(\$59,957.00)

Total PPD Settlement

\$70,000.00

Multiple Injury Trust Fund (3% of PPD-After 7/1/19)

(\$2,100.00)

Net to Attorney &amp; Claimant (Less MITF)

67,900.00

43330102-42134

43330102-42131

City's Settlement Costs (953-092)

Workers Comp. Admn. Fund ( 2% of PPD)

\$ 1,400.00

Occupational &amp; Health Trust Fund (0.75%)

\$ 525.00

Filing Fee - Workers Compensation Commission

\$ 140.00

\$ 2,065.00

Filing Fee - Cleveland County District Court

\$ 154.14

\$2,219.14

Total Settlement Cost (PPD, TTD, Costs)

\$72,219.14

Settlement forms:Copies

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

Completion

Date

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 - Mail to all providers

File Affidavit &amp; Assignment in District Court

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

Final Letter to Attorney (Sending Aff/Assignment)

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

Index in file list &amp; place in storage

Send Closing Letter to Claimant's Attorney