David L. Faught

CM3-2023-03668 L (Chest, Pectoral & Tricep Tendon)

SS# XXX-X2-9995

City Council Date 8/27/24

Atty: Jeffrey Cooper

Order Date: N/A Trial Date:7/24/24 DOH: 10/18/99 Separation: N/A

RTW: N/A MMI:11/28/23 Memo

Resolution

Date of Injury: 4/14/23 (SI)

**Purchase Requistions** 

Permanent Partial Disability Settlement

Total Award (PPD)

Attorney Fees (20% of PPD)

Net Settlement (Less Atty Fees)

**Total PPD Settlement** 

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

Net to Attorney & Claimant (Less Child Support & MITF)

City's Settlement Costs (953-092)

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

Occupational & Health Trust Fund (0.75%)

Filing Fee - Workers Compensation Commission

Filing Fee - Cleveland County District Court

Total Settlement Cost (PPD, Disfigurement, Costs)

**Settlement forms:** 

IF Compromise Settlement

Affidavit of Foreign Judgment

Assignment of Judgment

Checks with case name on them

Certificate of Mailing

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

PPD Wage: \$360

R-2425-33

\$23,328.00 18% R. Shoulder

\$7,920.00 8% R. Arm

\$31,248.00

(6,249.60)

\$24,998.40 Vendor

\$31,248.00

(\$937.44)

11739

43330102-42134 43330102-42131

\$30,310.56 22135

43330102-42133

43330102-44703

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624.96 2267

> 234.36 140.00

1950 43330102-42135 12122 43330102-44704

\$ \$ 999.32 \$ 154.14

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1,153.46

\$32,401.46

Copies

	Filed in WC	C Filed	in Dist.Ct.
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Completion

Date