CREWS, William "Will" Bryan

CM 2021-04762 Q (Back, Neck, L. Shldr, Arm, Hand)

SS# XXX-X8-1352 City Council Date 5/24/22 Atty:Marcus Gowens

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

DOH:7/14/00 Separation (if applicable): 7/14/21

MMI: 12/14/20 RTW: NA

Permanent Partial Disability Settlement

Amount Payable to Claimant & Attorney Attorney Fees (20% of PPD)

Net to Claimant

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

Net to Attorney & Claimant

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

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

Date of Injury: 10/26/20 (SI) PPD Wage: \$350

Memo

R-2122-121 Resolution **Purchase Requistions**

\$10,080.00 8% Body as a Whole (Back)

\$5,040.00 4% Body as a Whole (Neck)

\$2,520.00 2% Body as a Whole (L. Shldr)

\$0.00 0% (L. Arm)

\$0.00 0% (L. hand

\$17,640.00 \$ (3,528.00) \$14,112.00

\$17,640.00

43330102-42134 (\$529.20)

\$17,110.80 43330102-42131

Vendor

\$ 352.80 2267 43330102-42133 \$ 132.30 1950 43330102-42135 \$ 140.00 12122 43330102-44704

625.10

\$ 154.14 434 43330102-44703

\$779.24

\$18,419.24

\$

Copies Filed in WCC Filed in Dist.Ct.

> 11 4 Х

4 Х

1 3 Х

Completion

Date