2023 SEP 13 AMII: 26

EUSK TANK MOORE COUNTY CLERK

8Y_____OEPUTY

CITY/TOWN OF DUNCAN, OKLAHOMA

SINKING FUND SCHEDULES

DATE - SEPTEMBER 12, 2023

AND

SINKING FUND

ESTIMATE OF NEEDS

FOR

FISCAL YEAR ENDING

DATE - DECEMBER 31, 2022

APPROVED BY THE DUNCAN CITY COUNCIL AT A PUBLIC HEARING HELD ON SEPTEMBER 12, 2023

Robert Armstrong,

Mayor City of Duncan

Attest: RIF

Christina Johnson,
City Clerk 195

State Auditor & Inspector

MEMORANDUM

TO:

Lyn Pro

MAYOR AND COUNCIL

FROM:

KIMBERLY MEEK, CITY MANAGER

DATE:

SEPTEMBER 12, 2023

PURPOSE:

TO CONSIDER FOR APPROVAL PLACING THE SUM OF \$67,300.20 ON THE AD VALOREM TAX ROLLS FOR THE PAYMENT OF MUNICIPAL JUDGMENTS FOR FISCAL YEAR 2022.

BACKGROUND:

State Statutes mandate that the Officers of each Municipality levy taxes each year for a Sinking Fund. Judgments against a Municipality are to be paid from the Sinking Fund. Fiscal Year 2022 Judgments against the City of Duncan total \$67,300.20. Ad Valorem taxes are collected by the County, the City must comply with their schedule for submission of the City's Sinking Fund Estimate of Needs; the deadline for submission is September 14, 2023.

RECOMMENDATION:

It is recommended that Mayor and City Council approve the Sinking Fund Estimate of Needs for Fiscal Year 2022.

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Form SF-1

SINKING FUND DATE - DECEMBER 31, 2022

Line No.

Balance Sheets	New Sinking Fund Detail	Extension	Industrial Development Bonds Detail	174-
1. Cash Balance (Form SF-2-Line 17)	\$ -0-	<u> </u>		Extension
2. Investments (Form SF-4, Col 6)	-0-		\$	
3				
4				
				
5				
6. Total Assets Liabilities		<u>s -0-</u>		\$
7. Matured Bonds outstanding (Form SF-3, Col 13)	\$		<u>\$</u>	
8. Accrual on unmatured bonds (Form SF-3, Col 14)	\$		<u>s</u>	
9. Accrual on final coupons (Form SF-3, Col 19)				
10. Unpaid interest coupon accrued (Form SF-3, Col 25)				
11. Fiscal agency commission on above				
12. Judgments and interest levied				
13				
14				
15				
16. Total		\$ -0-		s
17. Excess of assets over Liability (Page 4-Line 2)		\$ -0-		<u>s</u>
Estimate of Sinking Fund Needs - Next Year				
18. Interest required on bonds (Form SF-3, Col 21)	<u>\$</u>		<u>\$</u>	
19. Accrual on bonds (Form SF-3, Col 8)				
20. Accrual on judgments (Form SF-4, Line 13)				
21. Interest accruals on judgments (Form SF-4, Line 14)				
22. Commissions - Fiscal agencies	•			
23				
24				
25. Total Sinking Fund Provision (To Pg 4 Ln 1 Col 2)				

Form SF-2

SINKING FUND STATEMENT OF CASH ACCOUNTS, DISBURSEMENTS AND BALANCES For the Fiscal Year Ended - December 31, 2022

	L	Ù	n	e
•	N	'n		

	New Sinking Fund Detail	Extension	Industrial Development Bonds Detail	Extension
1. Cash Balance - Beginning of year,	<u>\$ -0-</u>		<u>s</u>	
2. Investments liquidated during year (Form SF4, Col. 3)				
Receipts and Apportionments				
3. Current year ad valorem tax				
4. Prior year's ad valorem tax				
5. Resale property distribution				
6				
7				
8				
9. Total receipts and apportionments		<u>\$ -0-</u>		<u>s</u>
10. Balance		<u>\$ -0-</u>		<u>\$</u>
<u>Disbursements</u>				
11. Interest coupons paid (Form SF3, Col. 24)				
12. Bonds paid (Form SF3, Col. 12)				
13. Commission paid fiscal agency				
14. Judgment				
15. Interest paid on judgments	•			
16. Investments purchased (FormSF4, Co. 2)				
17				
18				
19				
20. Total disbursements		\$ -0-		\$
21. Cash balance - End of Year		\$ -0- (To Form SFI, Line	e 1)	<u>\$</u>

SINKING FUND STATEMENT OF INVESTMENTS For the Fiscal Year Ended - December 31, 2022

<u>Line</u> <u>No.</u>

Liquidation of Investments

_	T	Liquidation of Investments					
		Investment on Hand Beginning of Years (1)	Purchases (2)	Collection (3)	Amount of Premium Paid (4)	Barred by Court Order (5)	Investment on Hand End of Year (6)
1.	Municipal Bonds	-0-					-0-
2.	U.S. Bonds and Certificates						
3.	Warrants 20						
4.	Warrants 20						
5.	Warrants 20						
6.							
7.							
8.							
9.	Judgments	-0-	-0-	-0-	-0-	-0-	-0-
10.	Total						
			To Form SF-2, Line 16	To Form SF-2 Line 2			To Form SF-1 Line 2

JUDGMENT INDEBTEDNESS AFFECTING HOMESTEADS

Exhibit S		D	escription
	In Favor of - David Martin		
2.	By whom owned - City of Duncan		
3.	Purpose of Judgment - Workers Compensation Claim		
4.	Case Number - CM-2019-06419R		
5.	Name of Court - Workers Compensation Court		
6.	Date of Judgment - 05/20/2022		
7.	Principal Amount of Judgment	52,250.00	
8.	Tax Levies Made	-0-	
9.	Principal Amount to be provided for by	52,250.00	
10.	Principal Amount Provide for in	-0-	
11.	Principal Amount not Provided for	52,250.00	
12.	Amount to Provide by Tax Levy Fiscal Year	52,250.00	
12.A	Principal To SF-1, Line 20		
12.B	Interest To SF-2, Line 21		
	TOTAL	52,250.00	
	FOR ONLY THOSE JUDGMENTS HELD BY OWNERS OR ASSIGNS		
13.	Levied for but Unpaid Judgment Obligations Outstanding		
13.A	Principal		
13.B	Interest		
	TOTAL		
14.	Judgment Obligations Since Levied For		
14.A	Principal		
14.B	Interest		
	TOTAL		
15.	Judgment Obligations Since Paid		
15.A	Principal		
15.B	Interest		
	TOTAL		
16.	Levied for but Unpaid Judgment Obligations Outstanding		
16.A	Principal		
16.B	Interest		
	TOTAL		

JUDGMENT INDEBTEDNESS AFFECTING HOMESTEADS

Exhibi	t SF-5	D	escription
1.	In Favor of - Cade Roth		
2.	By whom owned - City of Duncan		
3.	Purpose of Judgment - Workers Compensation Claim		
4.	Case Number - CM-2021-04371Y		
5.	Name of Court - Workers Compensation Court		
6.	Date of Judgment - 05/29/2012		
7.	Principal Amount of Judgment	9,625.00	
8.	Tax Levies Made	-0-	
9.	Principal Amount to be provided for by	9,625.00	
10.	Principal Amount Provide for in	-0-	
11.	Principal Amount not Provided for	9,625.00	
12.	Amount to Provide by Tax Levy Fiscal Year	9,625.00	
12.A	Principal To SF-1, Line 20		
12.B	Interest To SF-2, Line 21		
	TOTAL	9,625.00	
	FOR ONLY THOSE JUDGMENTS HELD BY OWNERS OR ASSIGNS		
13.	Levied for but Unpaid Judgment Obligations Outstanding		
13.A	Principal		
13.B	Interest		
	TOTAL		
14.	Judgment Obligations Since Levied For		
14.A	Principal		
14.B	Interest		
	TOTAL		
15.	Judgment Obligations Since Paid		
15.A	Principal		
15.B	Interest		
	TOTAL		
16.	Levied for but Unpaid Judgment Obligations Outstanding		
16.A	Principal		
16.B	Interest		
	TOTAL		

JUDGMENT INDEBTEDNESS AFFECTING HOMESTEADS

	: SF-5	De	scription
<u> 1. </u>	In Favor of - Joshua Billings		
2.	By whom owned - City of Duncan		
3.	Purpose of Judgment - Workers Compensation Claim		
4.	Case Number - CM-2021-01973H		
5.	Name of Court - Workers Compensation Court		
6.	Date of Judgment - 04/06/2019		
7.	Principal Amount of Judgment	3,465.00	
8.	Tax Levies Made	-0-	
9.	Principal Amount to be provided for by	3,465.00	
10.	Principal Amount Provide for in	-0-	
11.	Principal Amount not Provided for	3,465.00	
12.	Amount to Provide by Tax Levy Fiscal Year	3,465.00	
12.A	Principal To SF-1, Line 20		
12.B	Interest To SF-2, Line 21		
	TOTAL	3,465.00	
	FOR ONLY THOSE JUDGMENTS HELD BY OWNERS OR ASSIGNS		
13.	Levied for but Unpaid Judgment Obligations Outstanding		
13.A	Principal		
13.B	Interest		
	TOTAL		
14.	Judgment Obligations Since Levied For		
14.A	Principal		
14.B	Interest		
	TOTAL		
15.	Judgment Obligations Since Paid		
15.A	Principal		
15.B	Interest		
	TOTAL		
16.	Levied for but Unpaid Judgment Obligations Outstanding		
16.A	Principal		
16.B	Interest		
	TOTAL		

Exhibit SF - 6

STATEMENT OF UNEXPENDED BOND PROCEEDS

Purp	pose of Bond Issue N/A				
				-	
1.	Balance Cash as of June 30, 20				
	Add:				
2.	Proceeds of Bond Sale				
3.	• · · · · · · · · · · · · · · · · · · ·				
4.					
5.	Total Available	•			
	Deduct:		<u> </u>		
6.	Warrants Paid	-			
7.	Reserve for Warrants Outstanding	-		 	
8.	Contracts Pending	-			
9.		-			
10.		-			
11.	TOTAL DEDUCTIONS	-			
12.	Unexpended Bond Proceeds as of June 30,				
					

CITY OF DUNCAN, OKLAHOMA

SINKING FUND COUNTY EXCISE BOARD APPROPRIATION OF INCOME AND REVENUES DECEMBER 31, 2022 ESTIMATE OF NEEDS

1.	To Finance Approved Budget in Sum of (From Forms SF-1 - Line 25)	\$65,340.00
	Appropriation Other Than 20 Tax	
2.	Excess of Assets Over Liabilities (From Forms SF-1 - Line 17)	
3.	Other Deductions - Attach Explanation	
4.	Balance Required to Raise (Line 1 Less 2 & 3)	
5.	Add 3.0 % for Delinquent Tax	\$1,960.20
6.	Gross Balance of Requirements Appropriated From 2020 Ad Valorem Tax	<u>\$67,300.20</u>

CITY OF DUNCAN, COUNTY OF STEPHENS

We certify that the total assessed valuation of the property subject to ad valorem taxes, excluding Homestead Exemptions approved in the municipality as finally equalized and certified by the State Board of Equalization for the current year is as follows:

REAL PROPERTY		125,229,700		
PERSONAL PROPERTY		51,532,515		
PUBLIC SERVICE PROPERTY		5 d=0 ==.		
TOTAL				
and that the assessed valuations herei and the proceeds thereof as aforesaid; to be raised by ad valorem taxation, follows:	in certified hav	e been used in computi	ng the rates of mill le	evies
GENERAL FUND	Mills,	BUILDING FUND		Mills
SINKING FUND 0.39	Mills,	TOTAL	0.39	Mills
We do hereby order the above to the County Assessor of said county said levies upon the tax rolls for the y may be filed against any levies, as req appropriation and mill rate levies, as	y, in order tha year uired by <i>68 O.</i> .	t the County Assessor is without r. without r. S., 1991 § 3014. We fu	may immediately ex egard to any protest rther certify that the	tend
Dated at Duncan, Oklahoma, this	25_ day o	f_Sept.	20 <u>23</u> .	
MEMBER MEMBER	OUNTY CL	CHAIRMAN, COUN SECRETARY, COU		

Pursuant to 11 O.S. 1991, §17-208, "The municipal governing body shall hold a public hearing on the proposed budget no later than fifteen (15) days prior to the beginning of the budget year. Notice of date, time and place of hearing, together with the proposed budget summary, shall be published in a newspaper of general circulation in the municipality not less than five (5) days before the date of the hearing."

Please attach proof of publication.

AFFIDAVIT OF **PUBLICATIO**

County of Stephens, State of Oklahoma

The Duncan Banner

PO Box 1268 Duncan, OK 73534 580-255-5354

I, Crystal Childers, of lawful age, being duly sworn ments owed. The following the upon oath, deposes and says that I am the General amount contained in the Manager of The Duncan Banner, a daily publication Appropriation of Income that is a "legal newspaper" as that phrase is defined and Estimate of Needs.

Cash Balance in Sinking in 25 O.S. § 106, as amdended to date, for the City Fund: \$0.00 of Duncan, for the County of Stephens in the State of Funds Needs: \$65,340.00 Oklahoma. The attachment hereto contains a true Accrual on Judgments:

David Martin v. City of and correct copy of what was published in the regu-Duncan, Oklahoma Compensation lar edition of said newspaper, and not in a supple-Court, Case No. CMment, in consecutive issues on the following dates:

PUBLICATION DATES:

August 31, 2023

Signed and sworn to before me

20 23 on this 31st day of August

My commission expires: March 11, 2025

Commission # _21003394

ruplat (hilder

PUBLICATION FEE: \$ 50.15



(Published the Thrursday edition of The Duncan Banner, August 31, 2023 - 1 time) NOTICE BY

PUBLICATION

A public hearing will be held on the 12th day of September, 2023 at 5:15 o'clock p.m., to consider approval of the Sinking Fund Estimate of Needs for the Fiscal Year Ending December 31, 2022, for the City of Duncan, Oklahoma. The purpose of sald hearing is to consider approval of the Sinking Fund Estimate of Needs and request for levies on ad valorem taxes for ludg-Sinking Fund,

Estimate of Sinking

2019-06419R, \$52,250.00;

Cade Roth v. City of Duncan, Oklahoma Workers Compensation Court, Case No. CM-2021-4371 Y, \$9,625.00; Joshua Billings v. City of Oklahoma Duncan, Workers Compensation Court, Case No. CM-2021-01973H, \$3,465.00;

Delinquent Tax Rate (3%): \$1,960.20

Total: \$67,300.20 The City of Duncan has approved that said sum be collected by the tax levies at the following rate of 0.37 Mills, as approved by the Stephens County Excise Board to be levied on the tax rolls for the year of December 31, 2023 to be used to satisfy said Judgments.

You may appear at a public hearing on the 12th day of September, 2023, at 5:15 o'clock p.m., at the City of Duncan, City Council Chambers, located at 18 South 7th Street, in Duncan, Oklahoma, wherein the City will have a hearing on sald matter and vote to consider approval said budget and estimate of needs. David W. Hammond Hammond & Archer, PLLC 1102 W. Maple Duncan, Oklahoma 73533 580-252-9033 Telephone

580-252-6251

Attorney for the City of Duncan

CC-JOINT PETITION

Claimant's Full Harre (injured Employee)

David Martin

XXX-X 2-2822

Name of Employer

Own Risk

City of Duncan

Send original and a copies to the Workers' Componsition Commission

Injured Employee's Social Security Murriber (LAST 5 DIGITS ONLY)

(Please type or Print ALL information legibly in Iris.

Employer's Insurance Carrier, Fermit # for Individual Self-Insured or Own Risk Group, Linnaured

WORKERS' COMPENSATION COMMISSION **1915 NORTH** OKLAH

7-16-2018

III TION TON TON TONION	
STILES AVENUE STE 231	
OMA CITY, OK 73105	

Commiss	on File!	SOUTH DOT	
CM 20	119-08	419 R	

Date of b	pry		

Any person who commits workers' compensation fraud, upon conviction, shall be guilty of a felony, punishable by imprisonment, a fine or both.

THIS SPACE FOR COMMISSION LINE ONLY

ORDER FILED

MAY 20 2022

WORKERS COMPENSATION COMMISSION

JOINT PETITION SETTLEMENT

below, each party affirms that they have read and understand its provisions, declares under penalty of perjury that all statements are true and accurate to the best of their knowledge and belief, and understands that the agreement, if approved by the Workers' Compensation Commission, is conclusive,

This agreement is prepared and submitted pursuant to the Administrative Workers' Compensation Act, Title 85A of the Oklahoma Statutes. By signing final and binding on all the parties involved. BY THIS AGREEMENT, the parties settle upon and determine (check one): ALL ISSUES AND MATTERS IN THE CLAIM SOME, BUT NOT ALL, ISSUES AND MATTERS IN THE CLAIM - Attach (Settlement and Resolution of Claim With Full Release) appendix of all outstanding issues. The appendix is subject to approval by the Workers' Compensation Commission. It MUST accompany the CC-JOINT PETITION. and be dated and signed by all parties under penalty of periury. 1. It is hereby agreed by and between the above named parties that the claimant alleges to have sustained a compensable accidental injury or occupational disease or illness on or about July 26 while in the employ of the employer, causing the following injury (describe 2018 nature of injury Neck, Back and Left Shoulder any other known or unknown injuries from the July 16, 2018 accident claimant's average weekly wage before the injury entities the claimant to a compensation rate of \$ for Temporary Total Disability and for Permanent Partial Disability 2. A claim for compensation was filed by the claimant for the injury, or, if the claimant is not represented by an attorney, a First Report of Injury was filed according to the Commission's rules pertaining to electronic data interchange, or an Employer's First Notice of Injury (CC-Form-2) was filed by the employer for the injury, and the Workers' Compensation Commission has jurisdiction in this matter. 3. This is an agreement in which the claimant agrees to accept \$ 52,250.00 in full and final settlement of all claims for: (describe injury) Neck and Left Shoulder any other known or unknown injuries from the July 16, 2018 accident result of the accident referred to above, including any claim by the claimant for past, present and future compensation for temporary total disability, temporary partial disability, permanent partial disability or permanent total disability, statutory medical treatment, physical and vocational rehabilitation benefits, or loss of wage earning capacity, as a result of any and all injuries sustained in the accident. This sum is in addition to any previous amount(s) paid to the claimant, and an amount(s) for authorized, reasonable and necessary medical and rehabilitative expenses previously incurred by the claimant due to the injury. Of said sum, \$ 52,250.00 shall be paid for permanent partial disability(20 %) to Left Shoulder App. 26.22% Neck and S shall be paid for 4. The sum of \$ 10,450,00 shall be deducted from this settlement and paid to the claimant's attorney pursuant to the workers' compensation laws of the state 5. For Social Security offset purposes, and if applicable, the claimant agrees to accept and the employer/carrier agrees to pay a lump sum of for permanent impairment that will affect the claimant for the rest of the claimant's life. The claimant's remaining life expectancy is months. Therefore, even though paid in a lump sum, claimant's benefit (after deduction of attorney fees and expenses) shall be considered to be _ months, beginning The respondent agrees to pay all costs, taxes and assessments, as followers \$140,00 to the Workers' Compensation Commission The following spaces for calculation are for informational purposes only. prescribed by 85A O.S. § 118, unless previously pold; the Special Occupational freelin and Selety Tex prescribed by 40 O.S. § 418(1) In the event of any miscelculation entered in these spaces, the strikulary amounts set specified in paragraph 6 shall control, and no representing three fourths of one percent (0.75%) of the joint petition settlement amount, excluding medical payments and temporary lots despitity compensation. If a Commission approved OWN RISK employer or group self-insurance association, the Workers, Compensation Fund corrected Joint Petition Settlement form need be re-processed assessment prescribed by 85A O.S. § 96(2), representing 2% of the joint publics bestlement amount pertaining to bermanent total clusted by OSHA Tax \$391.88 permanent partial disability, and death benefits; and, in addition to other amounts, if UNINSURED, a Multiple tripling Found assesses OMERISK Tex \$1,045.00 prescribed by 65A O.S. § 21(A)(6), representing 5% of the joint patition settlement amount. For equines occurring on or after 7/11/9. (c) Athlay of MITTE Tax (Uninsuled) N/A agrees in pay taxes and assessments as follows. Multiple Injury Trust Fund assessment prescribed by 85A O.S. § 31(Au71b), representing these percent (3%) of the joint petition settlement amount absolutable to permanent percel disability or permanent total disability shall be MITT Tax (Claimant) N/A occurred from the settlement amount and paid by the employer tion Act, 85A O.S. § 6(A)(1)(a): "Any person or entity who makes any meterial take statement or representation, who willfully and knowledly omits or conceals any nuterial information, or who employs any device, scheme, or artifice, or who sids and abets any person for the purpose of: (1) alterning any banefit of payment... shall be guilty of a felony." David Martin City of Duncan CLAMANT NAME - PLEASE PRIN EMPLOYER NAME -- PLEASE PRINT 185877 Falcon Road, Comanche OK 73529 Matthew J. Graves 12960 CLEANINT ADMINES NAME OF EMPLOYER CARRIER'S ATTORNEY - PLEASE PRINT OBLE WIT-SIGNATURE DATE Own Risk Darren Derryberry 14542 CARRIER OR OWN RISK GROUP - PLEASE PRINT NAME OF EMPLOY OF CLAMANT DI FASE PRINT EMPLOYER CARRY H ATTORNEY - SIGNATURE CLAMANT ATTORNEY - SIGNATURE SETTLEMENT: The Workers' Compensation Commission, having reviewed the evidence, files and records in this

ORDER APPROVING JOINT PETITION matter and being fully advised in the premises, approved the above Joint Petrion Settlement, including attorney fees, if any, and the attached appendix to the Joint Petrion Settlement, is any, which Joint Pelition Settlement and appendix are incorporated herein by reference and made a part hereof. If a child support lien were filed in this workers' compensation case, the employer/carrier shall include the name of the person or government agency asserting the lien on any check for temporary total disability, permanent partial disability or permanent total disability. The employer/carrier shall comply with this order within twenty (20) days from the file stamped date of the order. In that event, and if the Joint Petition Settlement determined all

issues and matters in the claim, this cause shall be fully and finally closed and resolved, and the Commission divested of further jurisdiction therein.

DONE this day of day of au

ned was mailed by Unit BY ORDER OF date to all attentions of record and unrepresented protect

Revised 1/1/2021

I, Deputy Clerk of the Workers' Compensation
Commission, do hereby certify that I have compared the foregoing copy of Compensation
with the original now on file in this office, and the same is a full, true and exact copy thereof.

In witness whereof, I have hereunto set my hand and affixed the official seal of this Commission this are the seal of the Commission this are the seal of the Commission this are the seal of the Commission this are the commission than the commission that the commissi

Deputy Clerk, Oklahoma Vorkers' Compensation Commission

OF OKLAHOWE OF OKLAHOWE

CC-JOINT PETITION THIS SPACE FOR COMMESSION LISE DILY **WORKERS' COMPENSATION COMMISSION** Send original and 6 copies to the Workers' Compensation Commission 1915 NORTH STILES AVENUE STE 231 OKLAHOMA CITY, OK 73105 (Please type of Print ALL Information legitity in Irsk.) ORDER FILED mant's Full Name (Intered Employee) Commission File March 2021-04 Cade Roth Injured Employee's Social Security Number (LAST 5 DIGITS ONLY) JUL 29 2021 XXX-X 2-9340 Name of Employer 5/12/20 **WORKERS'** Any person who commits workers City of Duncan COMPENSATION COMMISSION usation traud, upon convict Employer's Industrial Carrier, Pennik 9 for Industrial Sall-Insured or Own Place Group, Uninsured shall be guilty of a felony, punishable Own Risk by imprisonment, a fine or both. JOINT PETITION SETTLEMENT

This agreement to prepared and submitted pursuant to the Administrative Workers' Compensation Act, Title 85A of the Okishoma Statutes. By signing below, each party affirms that they have read and understand its provisions, declares under possity of perjury that all statements are true and accurate to the best of their knowledge and belief, and understands that the agreement, if approved by the Workers' Compensation Commission, is conclusive. final and binning on all the parties involved. BY THIS ARE REMENT, the parties settle upon and determine (check one): SOME BUT NOT ALL, ISSUES AND MATTERS IN THE CLAIM -- Attach MALL ISSUES AND MATTERS IN THE CLAIM appendix of all outstanding issues. The appendix is subject to approval by the (Septembry and Resolution of Claim With Full Release) Workers' Compensation Commission. It MUST accompany the CC-JOINT PETITION, and be dated and signed by all parties under penalty of perjury. 1. If is across agreed a, and between the above named parties that the claimant alleges to have sustained a compensable accidental injury or occupational disease or thiess on or about May 12 2020 white in the employ of the employer, causing the following injury (describe nature of the employer), causing the following injury (describe nature of the employer). cizimant's in the restly vogo before the injury entities the cialment to a compensation rate of \$ \$350.00 for Primarient Partial Disability. for Temporary Total Disability and 2. A car in the compensation was filed by the claimant for the injury, or, if the claimant is not represented by an attorney, a First Report of Injury was filed according to the Commission's rules portaining to electronic data interchange, or an Employer's First Notice of Injury (CC-Form-2) was filed by the employer for the injury or " the Works of Compensation Commission has jurisdiction in this matter. 3. This claim is surrent in which the deliment agrees to accept \$ 9,625.00 in full and final settlement of all claims for: (describe injury) letts the all stown and unknown injuries from the May, 12, 2020 accident a sa beniateua The first to above, including any claim by the claiment for past, present and future compensation for temporary total disability, temporary partial disability communications in particular or permanent total disability, statutory medical treatment, physical and vocational rehabilitation benefits, or loss of wage learner recent, the a result of any and all injuries sustained in the accident. This sum is in addition to any previous emount(s) paid to the claimant, and any amounge) for put or fined in recessary metrical land rehabilitative expenses previously incurred by the claimant due to the injury. Of said sum, \$9.625.00 shall be paid for permanent partial disability 10 _%) to <u>left lea</u> Stud S shall be paid for 10 10 a caducied from 10 is caltternent and paid to the claimant's attorney pursuant to the workers' compensation laws of the state. 5. At Social Country a measurement applicable, the citiment agrees to accept and the employer/carrier agrees to pay a lump sum of in permanent importment that was affect the claiment for the rest of the claiment's life. The claiment's remaining life expectancy is Transport over though paid in a tump sum, claimant's benefit (after deduction of extorney fees and expenses) shall be considered to be _a month tor _____ months, beginning 6. The respondure agrees to pay \$2 costs, (ID) is \$1.0 assessments, as followed \$140,00 to the Workers' Completion Contribution The following spaces for culturation are for informational purposes only presented by No. 1991 St. Street productly parantic Science Occupations Health pro-Salety Tax presented by 40 O.S. § 418(1). In the event of any scientification entered in these apaces, the statutory executio set specified in puragraph 6 shell central, and no conscied Joint Patitics Selberrant force need be re-presessed. representation of the second control of the part of the part person podiament amount, excluding medical payments and temporary total CESSORY SET OF THE PROPERTY OF THE PROPERTY OF SECTION OF SECTION AND SECTION OF SECTION OF THE OCHA Tex: 72.19 grandition from a galdering interpretation of the first per la MR of the contract of the galdering of the contract of the galdering of the gal permanent pure thank you and the refer to take control of other amounts, if UM could be a Micros Fluy Trink Fund esse OWN RISK TIME 192.50 procedure by \$1.4 0 \$ \$ \$ 1 (4) \$ 1, respective 5% of majorit process, solitations broken for injuries occurring on ar star 7/1/18: CLAISANT MITE Tex Blobswadt NA agreed to the corner continuence and countries to the partition of the first factor of the comment of the continuence of the co area port of the or the orange state of the entrem of the artifact that port or the partial contribution to area. 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 In the course of the course of the control of the course of SI JADEN CF

Bertred 1/1/2021

I, Deputy Clerk of the Workers' Compensation
Commission, do hereby certify that I have compared
the foregoing copy of Compensation
with the original now on file in this office, and
the same is a full, true and exact copy thereof.

In witness whereof, I have hereunto set my hand and affixed the official seal of this Commission this

day of

Deputy Clerk, Oklahoma Workers' Compensation Commission

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A. Smelistin

I, Deputy Clerk of the Workers' Compensation
Commission, do hereby certify that I have compared
the foregoing copy of Compensation
with the original now on file in this office, and
the same is a full, true and exact copy thereof.

In witness whereof, I have hereunto set my hand and affixed the official seal of this Commission this

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Deputy Clerk, Oklahoma O Workers' Compensation Commission