BEFORE THE WORKERS' COMPENSATION COURT OF THE STATE OF OKLAHOMA

In re claim of:		WORKERS' COMPENSATION COURT
		STATE OF OKLAHOMA
		August 28, 2013
JOEL BOLENBAUGH	1	Joyce Sanders
21 M - A)	COURT CLERK
Claimant)	
)	Court Number: 2012-13808Y
CITY OF NORMAN)	
Respondent)	
-)	Claimant's Social Security
CITY OF NORMAN (OWN RISK #10970))	Number: xxx-xx-0894
Ins. Carrier)	

EII ED

ORDER DETERMINING COMPENSABILITY AND AWARDING PERMANENT PARTIAL IMPAIRMENT BENEFITS

Now on this 22nd day of AUGUST, 2013, this cause came on for consideration pursuant to regular assignment and hearing on AUGUST 15, 2013, before JUDGE WILLIAM R FOSTER, at Oklahoma City, Oklahoma, at which time claimant appeared in person and by counsel, DANIEL M DAVIS and respondent and insurance carrier appeared by counsel, JEANNE SNIDER.

The Court having considered the evidence and records on file, and being well and fully advised in the premises FINDS AND ORDERS AS FOLLOWS:

-1-

THAT claimant was employed by the above named respondent and such employment was subject to and covered by the provisions of the Workers' Compensation Act of the State of Oklahoma; and on NOVEMBER 26, 2012, claimant became aware he/she had sustained accidental personal injury as a result of cumulative trauma to the RIGHT LEG (KNEE) arising out of and in the course of claimant's employment. Claimant's last injurious exposure to said trauma was on NOVEMBER 26, 2012.

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THAT at time of injury, claimant's wages were sufficient to establish the rates of compensation at \$678.76 per week for temporary total disability and \$323.00 per week for permanent partial impairment.

THAT as a result of said injury, claimant sustained 20 percent permanent partial impairment to the RIGHT LEG (KNEE)(SURGERY - LOSS OF RANGE OF MOTION - WEAKNESS - LOSS OF FUNCTION), for which claimant is entitled to compensation for 55 weeks at \$323.00 per week, or the total amount of \$17,765.00 of which 17 weeks have accrued and shall be paid in a lump sum of \$5,491.00.

- 4 -

THAT respondent and/or insurance carrier shall pay all reasonable and necessary medical expenses incurred by claimant as a result of said injury.

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THAT respondent or insurance carrier shall pay claimant the accrued portion of the award herein in lump sum of \$5,491.00 and pay the balance of said award at the rate of \$323.00 per week until the total award of \$17,765.00 (less attorney fee) has been paid to claimant.

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THAT respondent or insurance carrier shall pay court costs; Special Occupational Health and Safety Fund Tax shall be paid in the sum of \$133.24, representing three-fourths of one percent (0.75%). Respondent, if Own Risk, shall pay \$355.30 to the Workers' Compensation Administration Fund, representing two percent (2%) of the permanent disability award herein.

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THAT pursuant to Title 85 O.S. Section 368, a final award fee of one hundred forty dollars (\$140.00) is taxed as a cost in this matter, and shall be paid by respondent to the Court Administrator.

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THAT the sum of \$3,553.00 shall be deducted from the award herein and paid in lump sum to claimant's attorney as a fair and reasonable attorney fee; within twenty (20) days from the date of filing of this order, respondent or insurance carrier shall comply herewith.

BY ORDER OF:

WILLIAM R FOSTER, JUDGE

jp/CRichardson

A copy of the above and foregoing Court Order was mailed, by regular or Certified United States Mail, on this filed stamped date to:

Claimant's Attorney:

DANIEL M DAVIS

300 N WALNUT AVE

OKLAHOMA CITY, OK 73104-

Respondent's Attorney:

JEANNE SNIDER

PO BOX 370

NORMAN, OK 73070-

I do hereby certify that the above and foregoing is a true and correct copy of the original order signed by the Judge herein. Witness by my hand and the official seal of this court on this date.

SEAL

Court Clerk

August 28, 2013