BEFORE THE WORKERS' COMPENSATION COURT OF EXISTING CLAIMS STATE OF OKLAHOMA

In re claim of:	WORKERS' COMPENSATION COURT STATE OF OKLAHOMA
THOMAS J GRADY Claimant	February 24, 2017 Katrina Stephenson COURT CLERK
CITY OF NORMAN) Court Number: 2014-05405A
Respondent)
CITY OF NORMAN (OWN RISK #10970) Ins. Carrier) Claimant's Social Security) Number: xxx-xx-2831

EII ED

ORDER AWARDING THE NATURE AND EXTENT OF PERMANENT PARTIAL IMPAIRMENT BENEFITS

Now on this 15th day of FEBRUARY, 2017, this cause came on for consideration pursuant to regular assignment and hearing on FEBRUARY 13, 2017, before JUDGE CARLA SNIPES, at Oklahoma City, Oklahoma, at which time claimant appeared in person and by counsel, JOHN R COLBERT 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 on SEPTEMBER 2, 2013, claimant was employed by the above named respondent and such employment was subject to and covered by the provisions of the Workers' Compensation Code of the State of Oklahoma; and on said date claimant sustained accidental personal injury to the RIGHT LEG and RIGHT FOOT arising out of and in the course of claimant's employment.

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THAT at time of injury, claimant's wages were sufficient to establish the rates of compensation at \$771.00 per week for temporary total disability and \$323.00 per week for permanent partial impairment.

THAT as a result of said injury, claimant sustained 0 percent permanent partial impairment to the RIGHT LEG, 38 percent permanent partial disability to the RIGHT FOOT, for which claimant is entitled to compensation for 83.6 weeks at \$323.00 per week, or the total amount of \$27,002.80 of which 52 weeks have accrued and shall be paid in a lump sum of \$16,796.00.

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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 \$16,796.00 and pay the balance of said award at the rate of \$323.00 per week until the total award of \$27,002.80 (less attorney fee) has been paid to claimant.

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THAT Respondent shall pay court costs; Special Occupational Health and Safety Fund Tax of three-fourths of one percent (0.75%) of the amounts paid in lump sum of \$202.52 is levied against the Respondent; three-fourths of one percent of the continuing benefits awarded in this case shall be computed and paid as the same comes due. Pursuant to 85 O.S., Section 407, as amended by Laws 2013, HB 2201, c. 254, Section 49, eff. January 1, 2015, Respondent, if Own Risk, shall pay \$540.06 to the Workers' Compensation Administration Fund created by 85 O.S. Section 407, to be used for the costs of administering the Workers' Compensation Code as applicable to the Oklahoma Workers' Compensation Court of Existing Claims, 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.

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THAT the sum of \$5,400.56 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:

CARLA SNIPES, JUDGE

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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:

JOHN R COLBERT

PO BOX 1421

ARDMORE, OK 73402-1421

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

February 24, 2017

Kathina Suplenson