EXHIBIT D.06b

State Claims Commission

JUL 0 7 2020

Do Not Write in These Spaces

Please print in ink or type

BEFORE THE STATE CLAIMS COMMISSION

MMr.

Of the State of Arkansas

Mrs.		Claim No.		
Ms. R. Victor Harper		Date Filed		N ₄
Miss Matt Simmons	, Claimant		(Month) (Day)	(Year)
±		Amount of C	laim \$	
VS.				
tate of Arkansas, Respondent		Fund		
	COMPLAIN	T		
R. Victor Harper				
Matt Simmons the abo	ove named Claimant, of	(Street or R.F.	D & No.)	(City)
		(Street of R.F.	D. & No.)	(City)
	nty of rej	oresented by	gal Counsel, if any, for Cl	aim)
(State) (Zip Code) (Daytime Phone No.)		(LG	gar counsel, it any, for cr	auii)
(City)	(State) (Zip Code	(Phone)	No.)(F	ax 1\\$99,381.34
		MZ	ATT SIMMONS:	\$99,381.34
tate agency involved: <u>Dept. of Finance &</u>	Administration	Amount sought: R	. VICTOR HAI	(PEK: \$21,805.
Month, day, year and place of incident or service:				
Explanation:				
SEE ATTACHA	MENTS			
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As parts of this complaint, the claimant makes the statements, and ans	swers the following questions, as indica	ited: (1) Has claim bee	n presented to any state dep	partment or officer thereof?
Yes ; when?	to whom? Attornov	Conoral		
(Yes or No) (Month) (Day) (Yes	ear) A	greement	Department)	ees to
	iowing decicit was calcul aller com	greemene	co bubilito 1	702 00
claims commission for payment	•		V	
and that \$ was paid thereon: (2) Has	any third person or corporation an inte	erest in this claim?	NO ; if so	o, state name and address
25	treet or R.F.D. & No.)	City)	(State)	(Zip Code)
(Name) (St and that the nature thereof is as follows:	GBA OF K.F.D. & NO.)	CRy)	(otale)	(-4)
Self-control of the control of the c	: and was acquired on			_, in the following manner:
	/	1		
THE UNDERSIGNED states on oath that he or she is	familiar with the matters and thing	s set forth in the abo	ove complaint, and that	he or she verily believes
	familiar with the matters and days	1	111	
that they are true. R. Victor Harper	11.7/	-1/	alled	nonna
Matt Simmons	- //	(Signature)	of Claimant/Represen	stative)
(Print Claimant/Representative Name)) (Oigimus)	\	\cap Ω
SWORN TO a	nd subscribed before me at	star (1	TY	TK
MARY A. BURNS			(City)	(State)
NOTARY PUBLIC-STATE OF ARICANSAS	M 1	Tuly	G 85	2020
(SEAL) LINCOLN COUNTY on this_	day of _	July	A	-1
My Commission Expires 03-10-2025 Commission # 12402895	(Date)	0 2	(Month)	(Year)
AND THE RESERVE OF THE PARTY OF	Thouse	W/	downt	
	7))	(Notary Public)	
SF1- R7/99	'	2	(Totaly I dolle)	25
My Com	mission Expires:		10	
		(Month)	(Day)	(Year)
at a				

Claimants are attorneys who represented Carpenter Farms Medical Group, LLC in litigation against the ADFA – Medical Marijuana Commission. The attorneys were successful in asserting claims in the trial court concerning the wrongful denial and/or refusal to consider the score given to Carpenter in the decision to award a cultivation license. DF&A appealed to the Arkansas Supreme Court. That Court affirmed major issues in favor of Carpenter. Based on that decision, the Attorney General's Office entered into a settlement agreement which allowed the submission of Carpenter's costs and attorney's fees incurred due to the DF&A-MMC actions. A copy of the settlement agreement is attached.

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

CARPENTER FARMS MEDICAL GROUP, LLC

CLAIMANT

V.

CLAIM NO. 210021

ARKANSAS DEPARTMENT OF FINANCE AND ADMINISTRATION

RESPONDENT

ORDER

Now before the Arkansas State Claims Commission (the "Claims Commission") is the agreed settlement signed by the attorney for Carpenter Farms Medical Group, LLC (the "Claimant") and the attorney for the Arkansas Department of Finance and Administration.

Based upon a review of the pleadings and the settlement agreement, the Claims Commission hereby APPROVES the settlement agreement.

As such, the Claims Commission refers the total award of \$121,186.34 to the General Assembly for review and placement on an appropriations bill pursuant to Ark. Code Ann. § 19-10-215(b).

IT IS SO ORDERED.

Lewy C. Kinslow

ARKANSAS STATE CLAIMS COMMISSION

Courtney Baird Dexter Booth Henry Kinslow, Co-Chair Paul Morris, Co-Chair Sylvester Smith

DATE: June 23, 2021

Notice(s) which may apply to your claim

- (1) A party has forty (40) days from the date of this Order to file a Motion for Reconsideration or a Notice of Appeal with the Claims Commission. Ark. Code Ann. § 19-10-211(a)(1). If a Motion for Reconsideration is denied, that party then has twenty (20) days from the date of the denial of the Motion for Reconsideration to file a Notice of Appeal with the Claims Commission. Ark. Code Ann. § 19-10-211(a)(1)(B)(ii). A decision of the Claims Commission may only be appealed to the General Assembly. Ark. Code Ann. § 19-10-211(a)(3).
- (2) If a Claimant is awarded less than \$15,000.00 by the Claims Commission at hearing, that claim is held forty (40) days from the date of disposition before payment will be processed. *See* Ark. Code Ann. § 19-10-211(a). Note: This does not apply to agency admissions of liability and negotiated settlement agreements.
- (3) Awards or negotiated settlement agreements of \$15,000.00 or more are referred to the General Assembly for approval and authorization to pay. Ark. Code Ann. § 19-10-215(b).