

Please Read Instructions on Reverse Side of Yellow copy

Please print in ink or type

Arkansas
State Claims Commission

APR 20 2018

BEFORE THE STATE CLAIMS COMMISSION
Of the State of Arkansas

RECEIVED

☐ Mr.
☐ Mrs.
☐ Ms.
☐ MissMalcolm Howard Claimant

vs.

State of Arkansas, Respondent

Do Not Write in These Spaces

Claim No. _____

Date Filed _____
(Month) (Day) (Year)

Amount of Claim \$ _____

Fund _____

COMPLAINT

Malcolm Howard, the above named Claimant, of 1317 West 23rd Pine Bluff
(Name) (Street or R.F.D. & No.) (City)Arkansas 71603 (870) 550-5834 County of Jefferson represented by _____
(State) (Zip Code) (Daytime Phone No.) (Legal Counsel, if any, for Claim)of _____, says:
(Street and No.) (City) (State) (Zip Code) (Phone No.) (Fax No.)State agency involved: Arkansas Community Correction Amount sought: _____Month, day, year and place of incident or service: November 2007 through March 2018

Explanation: _____

SalaryDifferentialforCCDPCredential

As parts of this complaint, the claimant makes the statements, and answers the following questions, as indicated: (1) Has claim been presented to any state department or officer thereof?

_____; when? _____; to whom? _____
(Yes or No) (Month) (Day) (Year) (Department)

_____; and that the following action was taken thereon: _____

and that \$ _____ was paid thereon: (2) Has any third person or corporation an interest in this claim? _____; if so, state name and address

(Name) (Street or R.F.D. & No.) (City) (State) (Zip Code)

and that the nature thereof is as follows: _____; and was acquired on _____, in the following manner: _____

THE UNDERSIGNED states on oath that he or she is familiar with the matters and things set forth in the above complaint, and that he or she verily believes that they are true.

Malcolm Howard
(Print Claimant/Representative Name)Malcolm Howard
(Signature of Claimant/Representative)SWORN TO and subscribed before me at Pine Bluff, Arkansas
(City) (State)(SEAL) JEANNINE B. WEST
Notary Public-Arkansas
Jefferson County
My Commission Expires 05-01-2026
Commission # 12697301on this 18th day of April, 2018
(Date) (Month) (Year)Jeannine B. West
(Notary Public)My Commission Expires: May 01 2026
(Month) (Day) (Year)

SF1- R7/99

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

MALCOLM HOWARD

CLAIMANT

V.

CLAIM NO. 180867

ARKANSAS COMMUNITY CORRECTION

RESPONDENT

ORDER

This claim was filed by Malcolm Howard against Arkansas Community Correction (the “Respondent”) for salary due in an unspecified amount.

Respondent filed an answer on May 7, 2018, admitting liability in the amount of \$16,246.27.

The Arkansas State Claims Commission (the “Claims Commission”) sent correspondence to Claimant on May 8, 2018, advising Claimant that Respondent admitted liability in the amount of \$16,246.27. In that correspondence, Claimant was given fifteen (15) calendar days to request a hearing and was advised that if Claimant did not request a hearing within fifteen (15) days, the claim would be processed for the amount admitted by Respondent. Claimant was also advised that his claim for any other amounts would be dismissed for failure to respond. To date, Claimant has not responded to the Claims Commission’s May 8, 2018, correspondence.

The Claims Commission unanimously allows this claim in the amount of \$16,246.27, as recommended by Respondent, and refers this claim 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.

Henry C. Kinslow

ARKANSAS STATE CLAIMS COMMISSION

Dexter Booth
Henry Kinslow, Co-Chair
Bill Lancaster
Sylvester Smith
Mica Strother, Co-Chair

DATE: July 19, 2018

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(b). 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(b)(3). A decision of the Claims Commission may only be appealed to the General Assembly. Ark. Code Ann. § 19-10-211(a).
- (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(b). 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).

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Henry C. Kinslow

ARKANSAS STATE CLAIMS COMMISSION

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