EXHIBIT B.3

ARKANSAS STATE CLAIMS COMMISSION -Claim Form-

Please note that all sections must be completed, or this form will be returned to you, which will delay the processing of your claim.

1. Claimant's Legal Counsel - proceed to section 2)	☐ (If represer	nting yourself (Pr	ro Se) please c	heck this box and
Verkamp	John P.	jν	verkamp@sbc	global.net
(last name)	(first name)	(er	nail)
1811 East Main Street	Charleston	AR	72933	(479) 965-2224
(address)	(city)	(state)	(zip)	(primary phone)
Arkansas Bar Number:		•	•	n Arkansas, please for more information.
2. Claimant Franklin Sebastian Public Wat	er Authority	lavo	city@pinncom	.com
(title/last name/first name or	company)		(email)	
Post Office Box 3	Lavaca	AR	72941	(479) 674-5616
(address)	(city)	(state)	(zip)	(primary phone)
Arkansas Military Department (state agency involved) 4. Incident Date	••			
8/5/2020				
5. Claim Type NegligenceProperty Damage				
Please provide a brief explanate additional statements to this f	•	. If additional sp	ace is required	d please attach
An employee of Fort Chaffee E fire break along Highways 255 water.	•			•
5a. Check here if this claim in	volves damage to	a motor vehicle	e. 🗆	
5b. Check here if this claim in	volves damage to	property other	than a motor	vehicle.
All property damage claims re motor vehicle at the time of d		our insurance de	eclarations cov	vering the property or
did not have insurance cover	ing my property/r	notor vehicle at	the time of da	mage.
All muomoutu domogo eleime ua	Aurina ONE of the	following /place	o ottock).	

All property damage claims require ONE of the following (please attach):

- 1. Invoice(s) documenting repair costs, OR
- 2. Three (3) estimates for repair of the damaged property, OR
- 3. An explaination why repair bill(s) or estimate(s) cannot be provided.

6. Was a state vehicle involved? (If Yes, please complete the f	ollowing section)	
(type of state vehicle involved)	(license number)	(driver)	
7. Check here if this claim involves	s personal injury.		
All personal injury claims require a at the time of the incident.	copy of your medical insura	nce information in place	
I do not have health insurance			
8. Amount Sought: \$29,092.96			
(Signature)		(Date)	

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

FRANKLIN SEBASTIAN PUBLIC WATER AUTHORITY

CLAIMANT

V.

CLAIM NO. 210602

ARKANSAS DEPARTMENT OF THE MILITARY

RESPONDENT

ORDER

This claim was filed by Franklin Sebastian Public Water Authority (the "Claimant") against the Arkansas Department of the Military (the "Respondent") for property damage in the amount of \$29,092.96.

Respondent filed an answer on December 31, 2020, admitting liability in the amount of \$29,092.96.

As such, the Arkansas State Claims Commission (the "Claims Commission") unanimously allows this claim in the amount of \$29,092.96 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.

Lewy C. Kinslow

ARKANSAS STATE CLAIMS COMMISSION

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

DATE: January 8, 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).