

Arkansas  
State Claims Commission  
JUL 01 2019

Please print in ink or type

BEFORE THE STATE CLAIMS COMMISSION  
Of the State of Arkansas

Mr.  
 Mrs.  
 Ms.  
 Miss **Fidelity Information Services Inc.** Claimant

Do Not Write in These Spaces		
Claim No.	RECEIVED	
Date Filed	(Month)	(Day) (Year)
Amount of Claim \$	<b>\$19,308.00</b>	
Fund	<b>DFA/RD</b>	

vs.  
State of Arkansas, Respondent  
**AR Dept. of Finance & Administration**

COMPLAINT Reissuance of Warrant (Check)

**Fidelity Information Services Inc.**, the above named Claimant, of **601 Riverside Ave., Jacksonville, FL 32204**  
(Name) (Street or R.F.D. & No.) (City)

County of \_\_\_\_\_ represented by \_\_\_\_\_  
(State) (Zip Code) (Daytime Phone No.) (Legal Counsel, if any, for Claim)

of \_\_\_\_\_ any:  
(Street and No.) (City) (State) (Zip Code) (Phone No.) (Fax No.)

State agency involved: \_\_\_\_\_ Amount sought: \_\_\_\_\_

Month, day, year and place of incident or service: \_\_\_\_\_

Explanation: This claim is being filed for the reissuance of warrant [redacted] date 11-16 payable to **Fidelity Information Services Inc.** in the amount of **\$19,308.00** payable from **AR Dept. of Finance & Administration**. This warrant was not presented to the state treasurer for redemption during the legal redemption period.

Warrant or necessary papers for reissuing lost warrant(s)/check(s) is/are attached to and made a part of this complaint.

Completed paperwork for reissuance of this warrant was received in this office on April 26, 2019.

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? \_\_\_\_\_ (Department)  
(Yes or No) (Month) (Day) (Year)

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 verify believes that they are true.  
**Fidelity Information Services Inc** (Signature of Claimant/Representative)  
(Print Claimant/Representative Name)



SWORN TO and subscribed before me at **Jacksonville** (City) **Florida** (State)

on this **27th** day of **June**, **2019**  
(Date) (Month) (Year)

**Kimberly H. Reeder** (Notary Public)  
My Commission Expires: **10** (Month) **1** (Day) **2019** (Year)

**BEFORE THE ARKANSAS STATE CLAIMS COMMISSION**

**FIDELITY INFORMATION SERVICES INC.**

**CLAIMANT**

**V.**

**CLAIM NO. 191188**

**ARKANSAS DEPARTMENT OF  
FINANCE AND ADMINISTRATION**

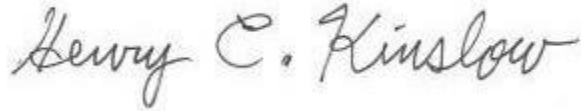
**RESPONDENT**

**ORDER**

This claim was filed by Fidelity Information Services Inc. requesting reissuance of outdated warrant no [REDACTED] (the “Warrant”) in the amount of \$19,308.00 payable from Arkansas Department of Finance and Administration The Warrant is still outstanding, and no duplicate has been issued.

The Claims Commission unanimously allows this claim in the amount of \$19,308.00, 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.



---

ARKANSAS STATE CLAIMS COMMISSION

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

DATE: August 22, 2019

**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).