

Arkansas
State Claims Commission

FEB 21 2018

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Please print in ink or type

BEFORE THE STATE CLAIMS COMMISSION
Of the State of Arkansas

- Mr.
- Mrs.
- Ms.
- Miss

Lerain Sheppard Claimant

vs.

State of Arkansas, Respondent

Do Not Write in These Spaces		
Claim No.	_____	
Date Filed	(Month)	(Day) (Year)
Amount of Claim \$	_____	
Fund	_____	

COMPLAINT

Lerain Sheppard the above named Claimant, of 433 County Road 4809 Atlanta
(Name) (Street or R.F.D. & No.) (City)
Texas 75551 903-691-8687 County of Cass represented by NA
(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 Correctional Amount sought: \$22,800.00

Month, day, year and place of incident or service: 7-1-2008

Explanation: Agency Audit indicated that there was a Certification differential of 6% pay increase lacking in salary. I am submitting this claim for this deficiency.

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 the following action was taken thereon: _____

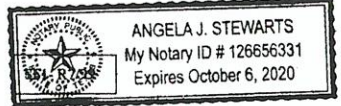
and that \$ _____ was paid thereon: (2) Has any third person or corporation an interest in this claim? _____; if so, state name and address
 _____ (Name) _____ (Street or R.F.D. & No.) _____ (City) _____ (State) _____ (Zip Code)
 and that the nature thereof is as follows: _____ and was acquired on _____, 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.

Lerain Sheppard (Print Claimant/Representative Name) Lerain Sheppard (Signature of Claimant/Representative)

SWORN TO and subscribed before me at TEXARKANA TEXAS
(City) (State)

(SEAL) on this 16 day of FEBRUARY, 2018
(Date) (Month) (Year)



Angela J Stewarts (Notary Public)
 My Commission Expires: 10 6 20
(Month) (Day) (Year)

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

LERAIN SHEPPARD

CLAIMANT

V.

CLAIM NO. 180665

**ARKANSAS COMMUNITY
CORRECTION**

RESPONDENT

ORDER

This claim was filed by Lerain Sheppard against Arkansas Community Correction (the “Respondent”) for salary due in the amount of \$22,800.00.

Respondent filed an answer on March 13, 2018, admitting liability in the amount of \$19,178.23. In electronic correspondence to the Claims Commission, Claimant agreed to accept \$19,178.23 as the total award for this claim.

The Arkansas State Claims Commission (the “Claims Commission”) unanimously allows this claim in the amount of \$19,178.23, as recommended by Respondent and agreed by Claimant, 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: May 1, 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).