

Please Read Instructions on Reverse Side of Yellow copy

Please print in ink or type

BEFORE THE STATE CLAIMS COMMISSION
Of the State of Arkansas

Arkansas State Claims Commission
OCT 16 2018
RECEIVED

- Mr.
Mrs.
Ms.
Miss

River Cement Sales Company

Claimant

vs.

State of Arkansas, Respondent

Do Not Write in These Spaces
Claim No.
Date Filed (Month) (Day) (Year)
Amount of Claim \$ 24,684.20
Fund DFA/RD

AR Dept. of Finance and Administration

COMPLAINT

Reissuance of Warrant (Check)
1610714107

River Cement Sales Company

the above named Claimant, of

100 Brodhead Road, Ste. 230, Bethlehem, PA 18017-8935

(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

(Street and No.)

(City)

(State)

(Zip Code)

(Phone No.)

(Fax No.)

says:

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 #1610714107 dated 4-6-16 payable to River Cement Sales Company in the amount of \$24,684.20, payable from AR Dept. of Finance and 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 August 31, 2018.

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 office thereof?

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

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.

Rosary Baiardi (Print Claimant/Representative Name)

(Signature of Claimant/Representative)

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

COMMONWEALTH OF PENNSYLVANIA
NOTARIAL SEAL
Michael Warren Knight, Notary Public
Hanover Twp., Northampton County
My Commission Expires June 14, 2021
MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

SF1- R7-99

My Commission Expires: (Month) (Day) (Year)

# ARKANSAS STATE CLAIMS COMMISSION

(501) 682-1619  
FAX (501) 682-2823



KATHRYN IRBY  
DIRECTOR

101 EAST CAPITOL AVENUE  
SUITE 410  
LITTLE ROCK, AR 72201-3823

September 14, 2018

River Cement Sales Company  
100 Brodhead Road  
Suite 230  
Bethlehem, Pennsylvania 18017-8935

RE: **Claim No. 190354** – Reissuance of Warrant No. 1610714107

To Whom It May Concern,

This will acknowledge receipt of a request for reissuance of the above listed warrant.

We have completed and enclosed a Complaint Form for your convenience in having this warrant (otherwise known as a check) reissued. Please sign the form before a Notary Public and return it to this office for filing.

Upon receipt of the Complaint Form, properly signed and notarized, we will then file your claim to be presented to the State Claims Commission for consideration. Please note that it generally takes six to eight weeks for the new check to be reissued once we have received the completed Complaint Form.

Sincerely,

  
Kathryn Irby

KI/msh  
Enclosure

**BEFORE THE ARKANSAS STATE CLAIMS COMMISSION**

**RIVER CEMENT SALES COMPANY**

**CLAIMANT**

**V.**

**CLAIM NO. 190354**

**ARKANSAS DEPARTMENT OF  
FINANCE AND ADMINISTRATION**

**RESPONDENT**

**ORDER**

This claim was filed by River Cement Sales Company requesting reissuance of outdated warrant no. 1610714107 (the "Warrant") in the amount of \$24,684.20 payable from Arkansas Department of Finance and Administration. The Warrant is still outstanding, and no duplicate has been issued.

The Arkansas State Claims Commission (the "Claims Commission") unanimously allows this claim in the amount of \$24,684.20 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*

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ARKANSAS STATE CLAIMS COMMISSION

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

DATE: October 18, 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).