

Arkansas
State Claims Commission

Please Read Instructions on Reverse Side of Yellow copy

Please print in ink or type

AUG 10 2018

BEFORE THE STATE CLAIMS COMMISSION
Of the State of Arkansas

RECEIVED

- Mr.
- Mrs.
- Ms.
- Miss

William D. Hurley and Melodie G. Hurley Claimant

vs.

State of Arkansas, Respondent

AR Dept. of Finance & Administration

Do Not Write in These Spaces		
Claim No.	_____	
Date Filed	_____	
	(Month)	(Day) (Year)
Amount of Claim \$	<u>\$15,871.00</u>	
Fund	DFA/RD	

COMPLAINT Reissuance of Warrant (Check)
1610937149

William D. Hurley and Melodie G. Hurley above named Claimant, of Post Office Box 1229, Farmington, AR 72730-1229
(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 _____ says:
(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 #1610937149 dated 06-15-16 payable to **William D. Hurley & Melodie G. Hurley** in the amount of **\$15,871.00**, 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 July 23, 2018.

Should the Arkansas State Claims Commission authorize reissuance of the warrant referenced herein, **William D. Hurley and Melodie G. Hurley**, by execution of this document, authorizes the Arkansas State Claims Commission to pay those funds over to the Arkansas Department of Finance and Administration Individual Income Tax to satisfy any tax debt of the **William D. Hurley and Melodie G. Hurley**, including on account no. **24514277-III**, with any remainder issued to **William D. Hurley and Melodie G. Hurley**.

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 \$ _____ 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.

William D. Hurley (Print Claimant/Representative Name) [Signature] (Signature of Claimant/Representative)

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

(SEAL) BOBBI SLIGAR Notary Public - Arkansas
Benton County on this 7th day of August, 2018
My Commission Expires 07-30-2024 (Date) (Month) (Year)
Commission # 12400187
Bobbi Sligar (Notary Public)

SF1-R7-99 My Commission Expires: July 30, 2024
(Month) (Day) (Year)

BEFORE THE ARKANSAS STATE CLAIMS COMMISSION

**WILLIAM D. HURLEY AND
MELODIE G. HURLEY**

CLAIMANTS

V.

CLAIM NO. 190154

**ARKANSAS DEPARTMENT OF
FINANCE AND ADMINISTRATION**

RESPONDENT

ORDER

This claim was filed by William D. Hurley and Melodie G. Hurley (collectively, the “Claimants”) requesting reissuance of outdated warrant no. 1610937149(the “Warrant”) in the amount of \$15,871.00 payable from Arkansas Department of Finance and Administration. Claimants asserted in the claim that if reissued, the Warrant should be paid over to Arkansas Department of Finance and Administration–Individual Income Tax (the “Respondent”) to be applied to Claimants’ tax bill.

Respondent confirmed that the Warrant is still outstanding and that no duplicate has been issued.

The Arkansas State Claims Commission (the “Claims Commission”) unanimously allows this claim in the amount of \$15,871.00 and hereby directs the Claims Commission clerk to reissue the Warrant payable to Claimants and Respondent and to send the Warrant to Respondent to be applied to Claimants’ tax bill.

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: September 17, 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).