

Agenda Item Number

October 11, 2010

Date _____

WHEREAS, Danny Rivas, a Public Works employee, suffered left carpal tunnel injury as a result of his job duties; and

WHEREAS, Mr. Rivas has now received a permanency rating of 5% to the upper extremity; and

WHERAS, the City is required to pay the rating; and

WHEREAS, it is the opinion of the Legal Department that payment of the rating would be in the best interest of the City of Des Moines; NOW, THEREFORE,

BE IT RESOLVED by the City Council of the City of Des Moines, Iowa:

That payment of \$8,430.72 to Danny Rivas be made and the same is hereby approved and the Finance Director is authorized and directed to draw a warrant accordingly under Fund Codes 529810 GE001 PWK070400.

FORM APPROVED:

MOVED BY _____ TO ADOPT

Angela T. Althoff

Assistant City Attorney

| COUNCIL ACTION | YEAS | NAYS | PASS | ABSENT | CERTIFICATE |
|----------------|---|------|---|---------|--|
| COWNIE | | | | | I, DIANE RAUH, City Clerk of said City hereby |
| COLEMAN | | | | | |
| GRIESS | | | | | certify that at a meeting of the City Council of said City of Des Moines, held on the above date, |
| | mong other proceedings the above was adopted. | | | | |
| MAHAFFEY | | | | | |
| MEYER | | | | | IN WITNESS WHEREOF, I have hereunto set my |
| MOORE | | | hand and affixed my seal the day and year first above written. | | |
| TOTAL | | | | | |
| MOTION CARRIED | | | A | PPROVED | |
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| | | | | | |
| | Mavor | | | | City Clerk |