WHEREAS, John Stewart has a workers' compensation claim against the City arising out of a cumulative injury, dated September 15, 2007; and

WHEREAS, Mr. Stewart incurred these injuries within the course and scope of his employment; and

WHEREAS, Mr. Stewart has been assigned an impairment rating of 8% to the upper extremities, which has not yet been paid; and

WHEREAS, it is the opinion of the Legal Department that payment of the extremity rating and interest 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 \$33,653.93 to John Stewart 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 EN002 AIR040700.

FORM APPROVED:

MOVED BY

TO ADOPT

Angela Althoff

Assistant City Attorney

| COUNCIL ACTION | YEAS | NAYS | PASS | ABSENT | |
|-----------------|-----------------|------|------------|--------|--|
| COWNIE | V | | | | |
| COLEMAN | 1 | | | | |
| HENSLEY | - | | | | |
| KIERNAN | | | | | |
| MAHAFFEY | _ | | | | |
| MEYER | - | | | | |
| VLASSIS | / | | | | |
| TOTAL | 1 | | | | |
| MOTION CAPPIED. | OTTON CARRIED A | | - APPROVED | | |

walker Counce Mayor

D'ar Dat

I, Diane Rauh, City Clerk of said City hereby certify that at a meeting of the City Council of said City of Des Moines, held on the above date, among other proceedings the above was adopted.

CERTIFICATE

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal the day and year first above written.

Diane Fauch