

THE STATE OF SOUTH CAROLINA
In the Court of Appeals

APPEAL FROM THE SOUTH CAROLINA
WORKERS' COMPENSATION COMMISSION
APPELLATE PANEL

Appellate Case No. 2013-002228
W.C.C. File No. 1014463

George Glover, Employee,Appellant,

v.

Piggly Wiggly, Employer, and Constitution State Service Company as
TPA for Greenbax Enterprise, Inc., Carrier, Respondents.

INITIAL BRIEF OF RESPONDENTS

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JAN 15 2014

SC Court of Appeals

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STATEMENT OF ISSUES ON APPEAL

- I. DID THE UNAPPEALED ORDER OF COMMISSIONER WILLIAMS BECOME THE LAW OF THE CASE PURSUANT TO THE DOCTRINE OF *RES JUDICATA*, THEREBY PRECLUDING FURTHER REVIEW OF APPELLANT'S CLAIM FOR WORKERS' COMPENSATION BENEFITS?

- II. DID APPELLANT'S FAILURE TO FILE A TIMELY FORM 30, REQUEST FOR COMMISSION REVIEW, DEPRIVE THE APPELLATE PANEL OF THE FULL COMMISSION OF APPELLATE JURISDICTION AND BAR FURTHER REVIEW OF APPELLANT'S CLAIM FOR WORKERS' COMPENSATION BENEFITS?

STATEMENT OF THE CASE

Appellant George Glover (“Glover”) commenced this action with the filing of his Form 50, Notice of Claim, with the South Carolina Workers Compensation Commission on or about November 8, 2010. In this Form 50, Glover sought temporary total disability compensation benefits for injury to his spine, left shoulder, left arm, and hand allegedly sustained in a work-related incident that occurred September 27, 2010. (November 8, 2010 Form 50, Notice of Claim) Glover filed his Form 50, Request for Hearing, on or about June 13, 2011, in which he sought disability compensation benefits and continued medical monitoring and treatment stemming from his alleged September 27, 2010 injuries. (June 13, 2011 Form 50, Request for Hearing) In their Form 51 dated July 13, 2011, Employer’s Answer, Respondents Piggly Wiggly (“Employer”) and Constitution State Service Company as TPA for Greenbax Enterprises, Inc. (“Carrier”) (collectively “Respondents”) admitted notice of the injury but denied the claim on the basis that Glover made false representations in his application for employment, thereby barring his claim pursuant to *Cooper v. McDevitt & Street Co.*, 260 S.C. 463, 196 S.E.2d 833 (1973). (July 13, 2011 Form 51, Employer’s Answer)

Following a hearing on November 28, 2011, Commissioner Derrick L. Williams (“Commissioner Williams”) issued his January 12, 2012 Order denying compensation benefits. Commissioner Williams made specific determinations that Glover was not a credible witness, that he knowingly and willfully misrepresented his physical condition when he completed Employer’s pre-placement medical questionnaire, that Employer relied upon the medical questionnaire, and that Employer’s reliance was a “substantial factor when deciding whether to hire” Glover. (January 12, 2012 Order, pp. 8-9, ¶¶ 1, 6)

Glover did not appeal the January 12, 2012 Order, opting instead to file a successive Form 50, Request for Hearing, dated February 9, 2013. Proceeding *pro se*, Glover once again sought disability compensation for the injuries allegedly sustained in the incident that occurred September 27, 2010. (February 9, 2013 Form 50, Request for Hearing) Respondents filed their Form 51, Employer's Answer, in which they denied Glover's claim on the grounds that his successive Form 50 was barred by the doctrine of *res judicata* given his failure to file a timely Form 30, Request for Commission Review, in response to Commissioner Williams' January 12, 2012 Order. (March 13, 2013 Form 51, Employer's Answer)

Following a second hearing on May 7, 2013, Commissioner Avery B. Wilkerson, Jr. ("Commissioner Wilkerson"), issued his June 6, 2013 Order in which he found as fact that Glover did not appeal the earlier order denying benefits and that "*res judicata* bars re-litigation of this case." (June 6, 2013 Order, p. 4, ¶ 4) Commissioner Wilkerson also concluded that the law of the case, as set forth in Commissioner Williams' January 12, 2012 Order, "remains that [Glover's] claim is barred based on *Cooper v. McDevitt & Street Co.*, 260 S.C. 463, 196 S.E.2d 833 (1973) for fraud in the application of employment." (*Id.*, p. 5, ¶ 4)

Glover, again proceeding *pro se*, filed a Form 30, Request for Commission Review, raising two issues for review. First, Glover contended that Commissioner Wilkerson erred in concluding the doctrine of *res judicata* barred re-litigation of his claim. Second, Glover argued Commissioner Wilkerson erred in declining to address the merits of the underlying claim. (June 11, 2013 Form 30, Request for Commission Review) In its September 19, 2013 Order, the unanimous Appellate Panel of the Full

Commission affirmed Commissioner Wilkerson's June 6, 2013 Order denying benefits in its entirety and without "any new findings, changes, or amendments. . . ." (September 19, 2013 Order of Appellate Panel, p. 4) Thereafter, Glover filed his Notice of Appeal in this Court, followed by his Initial Brief and Designation of Matter to be Included in the Record on Appeal, both dated November 1, 2013.

STATEMENT OF THE FACTS

Glover is approximately 58 years old and resides in Denmark, South Carolina. (Glover Dep., p. 7, lines 16-25; November 28, 2011 Hr'g Trans., p. 7, lines 9-14) He is divorced, lives alone, and has a high school diploma. (Glover Dep., p. 8, lines 3-22) Following high school, he went to work for Sunbeam for two years, followed by 30 years of service as a forklift operator at Dixie-Narco in Williston, South Carolina. (*Id.*, p. 9, lines 10-25) He left Dixie-Narco after the Williston plant was sold and went to work part-time at Advance Auto Parts ("Advance Auto") and for Employer. (*Id.*, p. 10, lines 1-11) He eventually assumed full-time status at Advance Auto in 2008 and continued his part-time work for Employer. (*Id.*, p. 1-8)

Glover had two prior workers' compensation claims while working for Advance Auto. The first occurred in 2003 when a battery exploded and injured his right hand. (Glover Dep., p. 4, line 12 – p. 5, line 6; November 28, 2011 Hr'g Trans. p. 8, lines 9-21) Glover received a settlement in reference to that claim. (Glover Dep., p. 6, lines 4-9; November 28, 2011 Hr'g Trans., p. 9, lines 3-5) Glover had a second workers' compensation claim in either 2005 or 2006 when he fell from a ladder at Advance Auto, injuring his lower back and left leg. (November 28, 2011 Hr'g Trans., p. 9, lines 8-15) Glover also settled this claim. (*Id.*, p. 9, lines 24-25) Following his 2008 injury at Advance Auto, Glover treated with Dr. Blake Moore, who assigned a 35 percent impairment rating relative to the whole person in relation to the right arm, cervical spine, and lumbar spine. (Defendants' APA 15; November 28, 2011 Hr'g Trans., p. 39, lines 5-13) He also had carpal tunnel syndrome release to the left hand in 2003; however, he responded "no" to Employer's health questionnaire regarding carpal tunnel syndrome.

(*Id.*, p. 41, lines 2-16; Glover Dep., Exhibit 1)

Glover also testified that he injured his low back in a car accident in 2008, underwent six weeks of chiropractic therapy, but that the injury “wasn’t serious.” (Glover Dep., p. 17, line 10 – p. 18, line 25) At the November 28, 2011 hearing before Commissioner Williams, however, Glover testified that his head hit the roof of the car and that he sustained injury to his lower back and his left shoulder. (November 28, 2011 Hr’g Trans., p. 10, lines 17-19) Glover denied injury to other body parts in connection with the 2008 auto accident, as well as any low back injury prior to the accident. (Glover Dep., p. 20, lines 1-21) He also denied prior injury or medical treatment to his left side, left shoulder, or neck. (*Id.*, p. 20, line 22 – p. 21, line 25) Commissioner Williams recognized the inconsistency in Glover’s testimony and questioned him extensively regarding his testimony relating to his extensive prior injuries and treatment. (November 28, 2011 Hr’g Trans., p. 11, line 15 – p. 12, line 13) In response to Commissioner Williams’ direct examination, Glover admitted that his answers to deposition questions relating to his prior injuries and course of treatment were not truthful. (*Id.*, p. 14, lines 23-25)

Michelle Johnson, the co-operator of the Piggly Wiggly store in Bamberg, South Carolina, testified that she hired Glover. (November 28, 2011 Hr’g Trans., p. 52, lines 3-23) At the time she hired Glover, Johnson gave him a pre-placement medical history questionnaire to complete. (*Id.*, p. 52, line 24 – p. 53, line 9) Johnson remained in the room with Glover as he answered the medical questionnaire and observed him complete and sign the form on May 28, 2009. (*Id.*, p. 53, line 13 – p. 54, line 4) Johnson testified that had Glover answered truthfully regarding his prior injuries, she would have been

required to submit his employment application to Employer's risk management department to determine whether Glover could perform the job duties for which he sought employment. (*Id.*, p. 54, lines 8-15) She further testified that Employer relied upon his answers, which were a substantial factor in its decision to hire Glover. (*Id.*, p. 54, lines 16-21)

David Benenhaley, Employer's director of risk management, also testified that an applicant who had been recommended for an MRI of the cervical or lumbar spine or presented with Glover's prior history of physical injuries would be required to provide additional details or obtain a medical clearance before Employer could determine whether or not to hire the applicant. (November 28, 2011 Hr'g Trans., p. 58, lines 25 – p. 59, line 21) Benenhaley also indicated Employer relied on Glover's responses to the questionnaire and that those answers were a substantial factor in Employer's decision to hire him. (*Id.*, p. 60, lines 12-17) He further testified that Glover was terminated for his failure to provide truthful responses to Employer's questionnaire, which is grounds for termination. (*Id.*, p. 60, lines 1-6)

Employer hired Glover in May 2009 as a part-time employee averaging between 21 and 25 hours per week. (Glover Dep., p. 25, lines 9-24) Glover was hired as a grocery clerk with an hourly wage of \$7.50. (*Id.*, p. 26, line 23 – p. 27, line 1) His duties included putting up stock, buffing the floor, assisting customers, and retrieving grocery buggies from the store parking lot. (November 28, 2011 Hr'g Trans., p. 8, lines 1-8) He testified that while he was given some paperwork, Employer did not ask him about his prior medical history and injuries at the time he was hired. (Glover Dep., p. 39, line 9 – p. 40, line 13) Nevertheless, Glover agreed he checked and/or responded "no" in

response to all questions and then signed Employer's medical history questionnaire on May 29, 2009. (*Id.*, p. 41, line 14 – p. 42, line 19; Glover Dep., Exhibit 1)

On the day of his alleged injury, it was raining as Glover was pushing approximately six grocery carts in the store parking lot. (Glover Dep., p. 27, lines 7-9) He tried to stop the carts as a car was approaching, was unable to do so, and fell onto his left side. (*Id.*, p. 27, lines 10-19) No witnesses to the event came forward, and Glover reported it to the closing manager, Terrell Blanchard. (*Id.*, p. 27, line 20 – p. 28, line 3; November 28, 2011 Hr'g Trans., p. 16, line 25 – p. 17, line 5) Glover went home and then reported to the emergency room the next day with complaints of left shoulder, neck, left hand, and low back pain. (Glover Dep., p. 28, lines 11-21; November 28, 2011 Hr'g Trans., p. 16, lines 6-12) Thereafter, Glover treated with Dr. Padgett, who referred him for physical therapy. (*Id.*, p. 16, lines 13-22) He was "put out" of work for "a couple of months" and then released to light duty work. (Glover Dep., p. 28, line 22 – p. 29, line 6) As of the date of his deposition, Glover remained on light duty for Employer, handing out fliers and answering the phone, until the date of his termination. (*Id.*, p. 30, lines 13-23)

ARGUMENT

During the November 28, 2011 hearing, Commissioner Williams specifically advised Glover of his right to appeal any adverse ruling to the Appellate Panel of the Full Commission within fourteen days of receipt of a written order. (November 28, 2011 Hr'g Trans., p. 4, lines 15-21) Disregarding this admonition from the single commissioner, Glover neglected to file a timely Form 30, Request for Commission Review, within the jurisdictional fourteen days provided by statute. As such, Commissioner Wilkerson and the Appellate Panel correctly concluded that Commissioner Williams' order became the law of the case. For this reason, as discussed more fully below, this Court lacks appellate jurisdiction to further consider the relative merits of Glover's underlying claim and should affirm the orders below finding that the January 12, 2012 Order is entitled to preclusive effect.

I. THE UNAPPEALED ORDER OF COMMISSIONER WILLIAMS BECAME THE LAW OF THE CASE PURSUANT TO THE DOCTRINE OF *RES JUDICATA*, THEREBY PRECLUDING FURTHER REVIEW OF APPELLANT'S CLAIM FOR WORKERS' COMPENSATION BENEFITS.

The doctrine of *res judicata* precludes re-litigation of issues previously decided between the same parties for the same claims and bars further consideration of Glover's request for benefits stemming from his alleged September 27, 2010 work injury. "The doctrine requires three essential elements: (1) the judgment must be final, valid and on the merits; (2) the parties in the subsequent action must be identical to those in the first; and (3) the second action must involve matter properly included in the first action." *Owenby v. Owens Corning Fiberglass*, 313 S.C. 181, 183, 437 S.E.2d 130, 131 (Ct. App. 1993) (internal citation omitted). Further, the South Carolina Supreme Court has

clarified that “under the doctrines of *res judicata* and collateral estoppel, the decision of an administrative tribunal precludes the re-litigation of the issues addressed by that tribunal in a collateral action.” *Bennett v. South Carolina Department of Corrections*, 305 S.C. 310, 312, 408 S.E.2d 230, 231 (1991).

In this case, Commissioner Williams issued his January 12, 2012 Order denying Glover’s claim for benefits based upon Respondents’ defense of fraud in the application for employment, and the Commission’s file is void of any evidence Glover initiated a timely appeal of that order. Moreover, identity of the parties in this appeal is identical to the parties at the hearing before Commissioner Williams on November 28, 2011. Similarly, the issue – whether or not Glover is entitled to workers’ compensation benefits for work-related injuries he allegedly sustained on September 27, 2010 – was the precise issue presented to and decided by Commissioner Williams. As such, Commissioner Wilkerson correctly concluded that Glover’s second attempt to obtain workers’ compensation benefits pursuant to the successive Form 50, Request for Hearing, was barred by application of the doctrine of *res judicata*.

Inasmuch as the doctrine of *res judicata* barred re-litigation of the identical issues presented in Glover’s successive Form 50, Request for Hearing, Commissioner Wilkerson and the Appellate Panel correctly refrained from addressing the relative merits of Glover’s claims. Permitting Glover to re-litigate Commissioner Williams’ unappealed Order would amount to an impermissible second bite of the apple and instead required Glover to file a timely appeal. This he did not do. As a result, and for the additional reasons expressed in Section II of this Brief, the Appellate Panel reached the correct result in affirming the denial of benefits. This Court should affirm that order and refrain

from any further appellate review of Glover's underlying claim for workers' compensation benefits.

II. APPELLANT'S FAILURE TO FILE A TIMELY FORM 30, REQUEST FOR COMMISSION REVIEW, DEPRIVED THE APPELLATE PANEL OF THE FULL COMMISSION OF APPELLATE JURISDICTION AND BARS FURTHER REVIEW OF APPELLANT'S CLAIM FOR WORKERS' COMPENSATION BENEFITS.

Implicit in the of the Appellate Panel's application of the doctrine of *res judicata* is its recognition that it lacked appellate jurisdiction to address the relative merits of Glover's claim for benefits. This is so because Glover's only recourse following issuance of Commissioner Williams' Order was the timely filing of a Form 30, Request for Commission Review. Because he failed to file a timely Form 30, Request for Commission Review, all subsequent reviewing tribunals, including this Court, lack appellate jurisdiction to review Commissioner Williams' adverse determination of the compensability question.

In order to perfect a timely appeal of a workers' compensation matter, the appealing party must file a Form 30, Request for Commission Review, within fourteen days of receiving notice of the single commissioner's order. *See* S.C. Code Ann. 41-17-50 (Supp. 2012); 25A S.C. Code Reg. 67-701 (2012). The South Carolina Supreme Court has addressed the precise question presented here. First, the court has explained "this issue is properly couched as one of appellate jurisdiction rather than subject matter jurisdiction." *Allison v. W.L. Gore & Associates*, 394 S.C. 185, 188, 714 S.E.2d 547, 549 (2011) (citation omitted). Turning to the merits, the *Allison* Court also observed that the Commission "lacks the authority to extend the fourteen days permitted for the filing of an appeal from the decision of a single commissioner." *Id.*, 394 S.C. at 188-189, 714 S.E.2d

at 549. Thus, the court held that appellant's untimely application for review deprived the Commission of appellate jurisdiction and required that the court vacate the intermediate appellate rulings below.

Numerous opinions from this Court recognize the jurisdictional nature of Section 42-17-50. *See, e.g., Brunson v. American Koyo Bearings*, 367 S.C. 161, 166, 623 S.E.2d 870, 872 (Ct. App. 2005) ("Only issues within the application for review under S.C. Code Ann. § 42-17-50 (1976) are preserved for appeal to the commission."), quoting *Green v. City of Columbia*, 311 S.C. 78, 80, 427 S.E.2d 685, 687 (Ct. App. 1993); *Lloyd v. AT & T Nassau Metals Corp.*, 299 S.C. 207, 383 S.E.2d 257 (Ct. App. 1989) ("the proper remedy is a timely appeal to the full Commission and then to the courts."), citing S.C. Code Ann. §§ 42-17-50 and -60. As a jurisdictional limitation imposed by enactment of the General Assembly, the fourteen day requirement can neither be waived by the parties nor expanded, modified, or selectively enforced by the Commission. *South Carolina Coastal Conservation League v. South Carolina Department of Health and Environmental Control*, 380 S.C. 349, 376-377, 669 S.C. 899, 913-914 (Ct. App. 2008), *reh'g denied* (Dec. 19, 2008).

Where the filing deadline is clear and unambiguous, only clear compliance will preserve appellate jurisdiction. Conversely, the failure to comply with the deadline will divest the appellate court of jurisdiction. *See Skinner v. Westinghouse Electric Corporation*, 380 S.C. 91, 94, 668 S.E.2d 795, 796 (2008) ("[t]he failure of a party to comply with the procedural requirements for perfecting an appeal may deprive the court of 'appellate' jurisdiction over the case. . . ."); *Canal Ins. Co. v. Caldwell*, 338 S.C. 1, 5-6, 524 S.E.2d 416, 418 (Ct. App. 1999) (holding that failure to file a timely notice of

appeal deprives the appellate court of jurisdiction); *South Carolina Coastal Conservation*, 380 S.C. at 376-377, 669 S.C. at 913-914 (“Compliance with statutory time periods for filing appeals is a prerequisite for an appellate entity to have jurisdiction . . .”).

Like the board at issue in *South Carolina Coastal Conservation League*, the Commission in this case lacked “authority to extend or expand the period in which appeals requests could be timely filed and was limited to the . . . filing window enacted by the General Assembly.” 380 S.C. at 376, 669 S.E.2d at 913. (Emphasis added) A similar conclusion is wholly supported in this case by the plain language of S.C. Code Ann. § 42-17-50, as well as by the Commission’s own regulatory provision accurately describing the fourteen day period as “jurisdictional.” *See* 25A S.C. Code Regs. § 67-701 (Supp. 2009). To hold otherwise and to proceed to the merits of Glover’s underlying claim for benefits would result in direct contravention of legislative intent and render the fourteen day provision nugatory.

The original Order of Commissioner Williams indicates it was served upon Glover via regular and certified mail on January 12, 2012. (January 12, 2012 Order, p. 10) Glover did not appeal this order, opting instead to file a subsequent Form 50, Request for Hearing, on or about February 9, 2013, for the exact same claim. In response to Glover’s attempt to re-litigate his claims, Commissioner Wilkerson’s June 6, 2013 Order specifically confirms “[t]he Commission did not receive notice of appeal from Claimant with regard to Commissioner Williams’ Order.” (June 6, 2013 Order, p. 4, ¶ 4) The Appellate Panel affirmed this finding and specifically declined to make “any new findings, changes, or amendments to the Decision and Order of the Single Commissioner,

dated June 6, 2013. (September 19, 2013 Order of the Appellate Panel, p. 4) Thus, the Appellate Panel correctly recognized the preclusive effect of Commissioner Williams' order and appropriately denied benefits. (*Id.*) This result should be affirmed.

CONCLUSION

For all of the reasons stated herein, Respondents submit the January 12, 2012 Order of the single commissioner is entitled to preclusive effect pursuant to the doctrine of *res judicata*, that the September 19, 2013 Order of the Appellate Panel was correctly decided and should be affirmed, and that this Court and the Full Commission lack appellate jurisdiction to consider further the underlying merits of Glover's claim for benefits.

TURNER, PADGET, GRAHAM & LANEY, P.A.

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George Glover, Employee,Appellant,

v.

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TPA for Greenbax Enterprise, Inc., Carrier, Respondents.

PROOF OF SERVICE

I certify this 15th day of January 2014 that I have served copies of the INITIAL BRIEF OF RESPONDENTS and RESPONDENTS' DESIGNATION OF MATTER TO BE INCLUDED IN THE RECORD ON APPEAL by mailing same, postage prepaid in the United States mail, addressed to the following:

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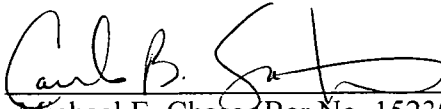
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