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THE STATE OF SOUTH CAROLINA
In The Court of Appeals

APPEAL FROM THE SOUTH CAROLINA
WORKERS' COMPENSATION COMMISSION

WCC File No. 0710622

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SC Court of Appeals

Antonio Lazaro, by and
through his GAL Decidora Lazaro, Claimant..... Respondent,

v.

Burriss Electrical, Employer,
and
CompTrust AGC of the Carolinas Appellants.

RECORD ON APPEAL

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APPELLATE PANEL
DECISION AND ORDER
OF THE
SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION
WCC FILE NO. 0710622

ANTONIO LAZARO,
BY AND THROUGH HIS GAL
DECIDORA LAZARO,

EMPLOYEE,
CLAIMANT/RESPONDENT,

v.

BURRISS ELECTRICAL, INC.,

EMPLOYER,

AND

COMPTRUST AGC OF THE CAROLINAS,

CARRIER,
DEFENDANTS/APPELLANTS.

Appellate Panel Review held in Columbia,
South Carolina on February 23, 2011 per
notices timely and properly served on all
parties of interest

Appellate Panel Decision and Order filed

4/20, 2011.

APPERANCES:

Claimant/Respondent represented by Preston F.
McDaniel, Esquire of Columbia, South
Carolina and John E. Duncan, Esquire of Lexington,
South Carolina.

Defendants/Appellants represented by Landon
Hughey, Esquire of McAngus, Goudelock & Courie,
Columbia, South Carolina.

Based on the hearing held on July 28, 2010, the Hearing Commissioner issued his Order on October 14, 2010 containing the following Findings of Fact, Conclusions of Law and Decision:

FINDINGS OF FACT

1. That Antonio Lazaro is in a vegetative state due to anoxic brain injury and is permanently and totally disabled and is entitled to an award for such. While the Defendants denied his condition was permanent and counsel for Claimant had to prepare for this position, they have now admitted this at the hearing.

2. That Mrs. Decidora Lazaro who has been appointed the Guardian and Guardian ad Litem for Antonio Lazaro makes a request for benefits on his behalf.

3. That having determined and found that Mr. Antonio Lazaro is totally and permanently disabled due to physical brain damage, he is entitled to weekly compensation benefits payable to him for life and to lifetime medical care. It is agreed that weekly compensation benefits are currently being paid and that all necessary medical care is being provided. Having determined his condition is permanent, the benefits to which he is entitled become the property of the Claimant.

4. That the Claimant has submitted evidence establishing the mortgage on their home, the need for an automobile and various debts as set out in the financial declaration and that it is in the best interest of the Claimant and his dependents that

these debts be paid in full and that up to \$30,000.00 be expended for a vehicle for the Claimant and his dependents. I find, however, that this money shall not be paid to the Guardian of the Claimant but that it should be paid to Claimant's counsel to pay off these debts and to purchase an automobile and that any balance remaining should then be returned to the insurance company.

5. That in making the partial lump sum award in this case, I find that all the other information and basis for requesting an additional award is speculative at this point but that the dependants and/or the Claimant may request a further lump or lump sums at any time in the future pursuant to a determination at that time as to what is in the best interest of the Claimant and/or his dependents.

6. That it is in the best interest of the Claimant and his dependents to make the partial lump sum award that is made in this matter. I have taken into consideration in making the partial lump sum payment in this matter the arguments of the Defendants and especially the insurance company that the award made should not result in an unjust enrichment to the Claimant and his dependents and that the Claimant may very well die well short of his life expectancy and that the insurance carrier is paying weekly benefits and is paying for all the needs of Mr. Lazaro and that it is not in the best interest of the insurance

company at this point in time to make a larger award. I have also taken into consideration the argument of the insurance company that who knows whether or not Mrs. Lazaro will stay with Mr. Lazaro or will separate in the future and that although she has been appointed his Guardian and is responsible to report to the Court that she will utilize these funds granted to her in the best interest of the dependents and/or Mr. Lazaro.

7. That the Lazaro Family has three (3) automobiles at this time (only one of which is safe to drive out of town and has less than 100,000 miles), a 1991 Aerostar Van, a 1996 Honda Civic, and a 2004 Dodge Durango. Two (2) vehicles has 125,000 and 145,000 miles on them.

8. That the financial statement as to the payment of the debts as allowed by this Order is attached hereto and incorporated herein by reference.

9. That all the other issues that have not been presented to this Commission for decision in this case are held in abeyance for further decision by the Commission.

CONCLUSIONS OF LAW

Under S.C. Code §42-17-50, the following Conclusions of Law are made and apply in this matter:

1. Under S.C. Code §42-9-10, the Decision is made as to the Claimant's entitlement to lifetime disability benefits as a result of his total and permanent disability due to physical

brain injury and under that Section and under S.C. Code §42-9-301, the decision is made as to a granting of a partial lump sum in this matter.

2. Under the stipulation of the parties, jurisdiction and venue are stipulated.

3. Under S.C. Code §42-15-60, the determination is made as to the Claimant's entitlement to lifetime medical care having been declared totally and permanent disabled.

4. Under S.C. Code §19-1-150, the Mortality Tables, r. Lazaro's life expectancy is established.

5. Under S.C. Code §42-9-330, the Guardian of the Claimant may on behalf of the Claimant and his dependents assert any rights to which the Claimant is entitled under the Workers' Compensation Act and this Commission may make payment of benefits to the Claimant's Guardian.

6. Under the issues before this Commissioner for decision and the information submitted, this decision is made at the time, and all other issues are held in abeyance.

ORDER AND AWARD

THEREFORE IT IS ORDERED that the Claimant through his Guardian, Mrs. Decidora Lazaro, is found to be entitled to a partial lump sum payment in the amount of \$152,568.75. Said amount shall be payable not to the Guardian but to Claimant's Counsel to be put into their trust account to pay off the

mortgage on the Lazaro home, to purchase an automobile up to the amount of \$30,000.00 and to pay off other debts as reflected in the financial declaration filed with the Commission and attached to this Order. Claimant's Counsel is directed to pay off the debts as set forth above in this Order and to purchase a vehicle for the family and if there is any balance left over, they are directed to refund that to the insurance company.

All other issues are held in abeyance.

AND IT IS SO ORDERED.

GROUNDS FOR REVIEW

By way of an Application for Review the Employer/Carrier as Appellants have raised the following grounds for review:

1. Did the Commissioner err in determining as a finding of fact that the Claimant's debts to include the cost of a new \$30,000.00 vehicle be paid by the Carrier as a partial lump-sum payment against lifetime benefits?
2. Did the Commissioner err as a conclusion of law granting the Claimant a partial lump-sum payment in this matter?
3. Did the Commissioner err in ordering the Defendants to make a partial lump-sum payment in the amount of \$152,568.75?
4. Did the Commissioner err in ordering that the Claimant be allowed up to \$30,000.00 in order to purchase a new car?

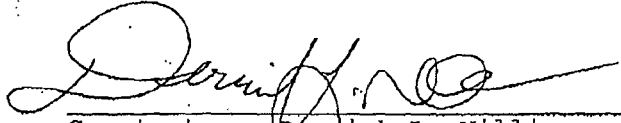
DECISION AND ORDER OF THE COMMISSION ON APPEAL

This matter was heard before the South Carolina Workers' Compensation Full Commission Appellate Panel on February 23, 2011 pursuant to S.C. Code §42-17-50 and the Commission Regulations. The Panel has considered this matter and after review of the Record, the Briefs and the arguments of the parties, the Panel has found and has made a Full Affirmation of the Single Commissioner's Decision and Order;

THEREFORE IT IS ORDERED AND FOUND that the Decision of the Hearing Commissioner shall be and hereby is affirmed.

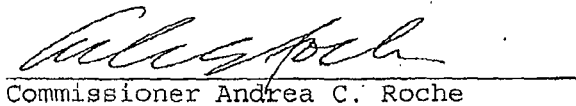
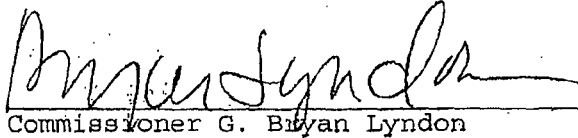
AND IT IS SO ORDERED.

SC WORKERS' COMPENSATION COMMISSION



Commissioner Derrick L. Williams
for the Panel

I CONCUR:


Commissioner Andrea C. Roche
Commissioner G. Bryan Lyndon

CERTIFICATE OF SERVICE

This is to certify that the undersigned has this date served this order in the above entitled action upon all parties to this cause by depositing a copy hereof, postage paid, in the United State mail addressed to the attorney or attorneys for said parties.

This 20 day of April, 2011
By Valerie D. Oller

Administrative Assistant to the Commissioner

Preston F. McDaniel
Carson Hughes
John E. Duncan

ORDER AND AWARD

OF THE

SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION

WCC FILE NO. 0710622

Antonio Lazaro,

Employee/Claimant by
and through his Guardian
and Guardian ad litem,
Mrs. Decidora Lazaro,

v.

Burriss Electrical, Inc.

Employer,

and

CompTrust AGC of South Carolina,

Carrier,

Defendant(s).

HEARING:

Date: July 28, 2010

Location: Columbia, South Carolina

APPEARANCES:

Claimant represented by
Preston F. McDaniel, Esquire
John E. Duncan, Esquire

Defendant(s) represented by
John McIntyre Tolar, Esquire

PURPOSE OF HEARING:

This matter came before the Commissioner
on a Form 50 and 51

COMMISSIONER:

T. Scott Beck

FILED:

October 14, 2010

STIPULATIONS

The parties have stipulated to jurisdiction and venue. The Commission File with the exception of self-serving declarations and unstipulated medicals is made a part of the Record.

STATEMENT OF THE CASE

Prior to opening the Record and taking testimony, a pre-hearing conference was held and at that pre-hearing conference, APA Submissions were submitted to this Commissioner pursuant to the Administrative Procedures Act and the Rules of this Commission which included records from the following: Palmetto Health Richland; Dr. Charmaine M. George; Ms. Denise Salyer, RN, CCM; and a financial declaration of Decidora Lazaro. The Defendants submitted documents purported to be from MetLife, John Hancock, Pacific Life Annuity Company and Prudential Insurance companies. Also, at the pre-hearing conference, an amended financial declaration was submitted due to some miscalculations or some numbers not being accurately recorded. The Claimant submitted without objection a projected financial needs statement for the family and offered documents on the estimated college costs per year. The information concerning the estimated college costs per year was objected to by the Defendants and was not received by this Commissioner. The Claimant objected to the information submitted by the Defendants from the various insurance companies and I advised the parties that I would admit

those over objection of the Claimant but that I would give it such weight as I felt appropriate. The Defendants took the position that these documents represented the calculation of Mr. Lazaro's ratable age/life expectancy and were based on a review of medical records. After review, I do not find them to be as purported by the Defendants and after review I advised the parties that I would give them little weight due to their hearsay nature and since based on my review they did not contain the information as purported by the Defendants.

The extensive pre-hearing conference held in this matter lasted for approximately an hour and a half, during which I allowed the parties to argue their positions and state what the testimony and evidence would show. At the conclusion of the conference, I advised the parties of my opinion based on the information that had been presented which was based on the assumption that this is what the evidence, if I were to take testimony, would have shown from Ms. Lazaro, her two sons and several witnesses. I would note that I was advised and verily believe that the family is highly respected in the Irmo area and that numerous witnesses including many teachers and friends especially from the Irmo soccer community wanted to be present to testify but that Claimants' Counsel would have limited the testimony to Ms. Lazaro, her two sons, and several witnesses. I advised the parties at the conclusion of their presentations and

arguments on their positions and what the evidence would show that I did not believe hearing testimony, assuming it established everything that was argued, would change my decision. Therefore based on their consent I have made my decision based upon the arguments and representations of the parties with the assumption that the testimony would support the arguments made.

Before setting forth my opinion and decision concerning the request for a partial lump sum, I note from the Record and the position of the Defendants that the Defendants take the position at this hearing that this is an accepted brain injury case and that they agree that Mr. Lazaro is totally and permanently disabled due to that brain injury. The Claimant took the position that this hearing only became necessary after the Defendants had refused to enter into a Form 16 settlement agreeing that Mr. Lazaro's vegetative state and brain injury were permanent. After being advised that they would not consent to that and agreeing to change his position from that of being temporary to permanent, the Form 50 was filed asking for a decision of total and permanent disability due to physical brain injury and also asking for a partial lump sum of benefits in the best interest of Mr. Lazaro and his dependents. I note from the Record, the Form 50 and from a review of the Form 51, that while the Defendants now admit that the Claimant sustained a physical traumatic brain injury, they specifically denied in their Form 51

that he is permanently and totally disabled. In their Form 58, Pre-Hearing Brief, is the first time that I can see in the Record that the Defendants admit that the Claimant's condition is permanent. Therefore, I do not find according to the Record that the Defendants have admitted that the condition of the Claimant was permanent until 10 days prior to this hearing and that their refusal to admit to his condition being permanent resulted in the necessity of this hearing.

Next, after review of the information submitted to this Commissioner and the arguments of the parties, it is my opinion that the Claimant is entitled to a partial lump sum in the maximum amount of \$152,568.75. This money should not be paid directly to the Claimant's wife, who has been appointed his Guardian and Guardian ad Litem, that being Mrs. Decidora Lazaro; but should be paid to Claimants' Counsel and that any monies that are not used for the purposes allowed by my decision concerning a partial lump sum should be refunded to the insurance company.

First, it is clear from the medical evidence submitted that Mr. Antonio Lazaro is in a vegetative state and has been in a vegetative state ever since the accident and that this condition is most probably permanent in nature. There is a 10% chance of some recovery but only to where he may gain some control of bodily functions at a maximum. However, it is also very clear from the medical evidence submitted that outside of Mr. Lazaro

being in a permanent vegetative state due to the anoxic brain injury he sustained, he is otherwise healthy. If one were to look at him in the bed, it would be as if he was asleep and otherwise a healthy, 41 year old gentleman having turned age 41 on July 4th, 2010, with a date of birth of July 4, 1969. The medical records from his treating physician at the Brian Center Nursing Care Center state that Mr. Lazaro due to his young age is likely to remain in his condition for many years without any improvement expected in his overall clinical condition. Contrary to the position of the Defendants, there is nothing to support that outside of his vegetative state and anoxic brain injury that he is in poor health.

As noted above, from the paperwork in the file and the representations of counsel, his wife, Ms. Decidora Lazaro, has been appointed as both his Guardian ad Litem and general Guardian. It appears from the information provided that Mrs. Decidora Lazaro and husband, Antonio, and their oldest son are legal immigrants to the United States moving to the United States in the late 1980's and early 1990's and are all now naturalized American citizens. Their oldest son, Antonio, is age 17 and they have a younger son, Oliver, 16 years old, who was born in the United States, and who is also obviously an American citizen.

In reference to the request for a partial lump sum and as to the lump sum I will grant I find all of the information

speculative at this point as to granting the Lazaro Family a larger lump sum than that which I have granted. The lump sum granted is based upon paying off the Claimant's home mortgage, paying off existing debts as set forth in Mrs. Lazaro's financial declaration, and allowing them up to \$30,000.00 to purchase a reliable automobile. As to all other issues, I have advised Claimant's Counsel that they may come back at any time with additional evidence of and information college costs and/or other needs and request an additional partial lump sum of benefits.

In reference to the partial lump sum payment request, the Defendants argue that all of Mr. Lazaro's needs from a medical and maintenance standpoint are being taken care of at the nursing home in his vegetative state. They argue Mr. Lazaro may die tomorrow and that to grant any lump sum would result in an unjust enrichment at the expense of the Carrier to Mr. Lazaro and his family. They also argue that if I should grant a partial lump sum I should not apply the South Carolina Mortality Tables but should apply the rated age calculations as calculated by the various insurance companies that were submitted. The Claimant on the other hand argues that the law intends that this Commission should only consider the best interests of the Claimant and his Defendants and apply the Mortality Tables and that the Commission should grant a lump sum to the family to address various needs of

the family; Mr. Lazaro's dependants.

While I agree with the Claimant that under our S.C. Supreme Court decisions and the statutory law that the mortality tables are to be used for determining the total value of a claim and the granting of a lump sum and while I agree that the law provides that I must provide and order a lump sum where it is in the best interest of the Claimant and/or his dependants, at this point I find the information and evidence submitted for granting a partial lump sum more than to pay off the home, grant money to buy one car and to pay off the debts as listed in the financial declaration to be not convincing to transfer Mr. Lazaro's benefits from the insurance company to his Guardian.

In reference to several arguments made, I take note of the fact and recognize that the two boys are both 16 and 17 years old and are both members and starters on the Irmo Soccer Team which is one of the premier soccer programs in the State which regularly play for State championships. I recognize that they are also members of various private soccer clubs and that before the injury Mr. Lazaro and/or Mrs. Lazaro would attend their soccer games and would provide transportation to and from all the soccer related events. I also recognize that both boys are excellent students with grades between "B" and "B+" in advanced courses and that the older son has had contact by several colleges for possible soccer scholarships and that both boys are

in college preparatory courses and that the testimony would be that they intend to enroll in college upon graduation. However, I have decided not to give the family any money at this point in reference to looking at colleges or to set aside money for college education, clothing and other essentials that the children need. Again, when more definitive information is provided concerning looking for colleges and expenses in that regard and the expenses of college and the needs of the children, then the family may come back and request additional money through an additional partial lump sum payment.

Next, the evidence would show that they have 3 cars at this time, only one of which is actually safe to drive out of town and only one of which has less than 100,000 miles on that vehicle and that the other two vehicles have over 125,000 and 145,000 miles respectively. The three vehicles involved are a 1991 Ford Aerostar Van, a 1996 Honda Civic, and a 2004 Dodge Durango. I find that it is in the best interest of the family to purchase one new car and that \$30,000.00 should be set aside for that purpose. Claimant's Counsel argues that they would like to have money included in the partial lump to buy cars for the boys but I noted that I do not drive a new car and that most children in most families drive "hand-me-downs". Counsel argues that he does not know how to present information to this Commission as to "hand-me-down" automobiles and that they are not asking for the

partial lump at this point to actually buy the cars, but to simply set it aside so that the money will be available when that becomes necessary. Further whether or not the boys go to college and as to their other needs in my opinion is speculative at this point but again they may come back at a later date and request an additional partial lump sum with additional information. Also, I believe and it is my opinion and Order that any funds that are not expended on the purchase of a new car should be returned to the Defendants as there is no reason that this family should have the benefit of that extra money instead of the insurance company.

Further, in reference to the other debts that are listed on the financial declaration, I have made the decision to Order that these be paid off but the Defendants have asked that the pay off of debts be limited to just those listed on the financial declaration. They argue Mrs. Lazaro could very well run out and incur a lot of additional debt or divorce the Claimant and that the Defendants should not be responsible for that. I agree and therefore by this Order will order that only those debts in the amounts as reflected in the financial declaration should be paid.

Next, based on the information submitted, it appears that Mrs. Lazaro works every day Monday through Friday at her full-time job and Saturday and Sunday at the flea market. Mrs. Lazaro leaves her full-time job at 3:00 pm and drives to the nursing home to see her husband daily for half an hour. She then goes

home to prepare dinner, before her children get home from school. She assists her children with their Homework and their other needs. She then returns to the nursing home to read to her husband. She drives back home to do housework and prepare for bed herself. As noted above, prior to this injury, either she or her husband attended all of the boys' soccer games but at this time due to his injury, even on Saturdays and Sundays she is unable to attend because her husband had started a flea market booth which he operated to try to make additional income for the family prior to his tragic accident and now she has to operate that to try to make ends meet with the help of her sons.

The Claimant also made other various arguments in reference to the economic loss to the family and the devastating effect the injury has had on their personal life and the effect that a partial lump sum payment could have from an economic standpoint as far as helping the family and Mrs. Lazaro with the children. While I applaud the Irmo community and the teachers of Irmo High School for their assistance to the Lazaro family in attending parent-teacher conferences and other school related functions because of Ms. Lazaro's inability to attend those and the assistance that they have provided in making sure the boys have transportation to and from all the various out of town and local functions in reference to their school and school team and their other soccer teams and while it is sad that Mrs. Lazaro has to

work Saturdays and Sundays, and while she is Catholic and can no longer attend Catholic Church but has to attend a Lutheran church which is near to the flea market on Saturday evenings, many people have to work secondary jobs to make ends meet. I have noted to the parties that I am not impressed with the economic loss argument at this point particularly as to my finding that college and these other expenses are speculative at this point. Again, I have advised Counsel for the Claimant that they may request additional lump sums to meet the needs of the family at any time with additional information.

The Claimant also has asked that I take into consideration the fact that Mr. Lazaro in less than 5 years had gone from a salary of \$10.00 per hour to over \$14.50 per hour and the fact that he was operating a flea market booth to generate additional income. The Claimant does not ask me at this point to consider this in reference the compensation rate but simply asks that I consider it in reference to the effect that this has had on the Lazaro family from an economic standpoint. Again, I am not impressed at this point with the economic arguments but again the Claimant may request additional lump sums and may submit more information to support the requests at that point. It should also be pointed out that the Defendants argue that Mrs. Lazaro could get this money and then leave Mr. Lazaro and not use it for his benefit.

Based on all of the above, as noted I have made the decision to grant a partial lump sum of benefits in the best interest of the family only to the extent of paying off the mortgage on their home, providing money for one vehicle up to \$30,000.00 and paying off other existing debts as set forth in the financial declaration. Therefore, based upon my review of the information submitted, I find that the Claimant through his Guardian has established by a preponderance of the evidence that she is entitled to a partial lump sum in the maximum amount of \$152,568.75, which shall be paid to her Counsel.

FINDINGS OF FACT

Based upon this, I have made the following findings of salient fact:

1. That Antonio Lazaro is in a vegetative state due to anoxic brain injury and is permanently and totally disabled and is entitled to an award for such. While the Defendants denied his condition was permanent and counsel for Claimant had to prepare for this position, they have now admitted this at the hearing.
2. That Mrs. Decidora Lazaro who has been appointed the Guardian and Guardian ad Litem for Antonio Lazaro makes a request for benefits on his behalf.
3. That having determined and found that Mr. Antonio Lazaro is totally and permanently disabled due to physical brain damage, he is entitled to weekly compensation benefits payable to

him for life and to lifetime medical care. It is agreed that weekly compensation benefits are currently being paid and that all necessary medical care is being provided. Having determined his condition is permanent, the benefits to which he is entitled become the property of the Claimant.

4. That the Claimant has submitted evidence establishing the mortgage on their home, the need for an automobile and various debts as set out in the financial declaration and that it is in the best interest of the Claimant and his dependents that these debts be paid in full and that up to \$30,000.00 be expended for a vehicle for the Claimant and his dependents. I find, however, that this money shall not be paid to the Guardian of the Claimant but that it should be paid to Claimant's counsel to pay off these debts and to purchase an automobile and that any balance remaining should then be returned to the insurance company.

5. That in making the partial lump sum award in this case, I find that all the other information and basis for requesting an additional award is speculative at this point but that the dependants and/or the Claimant may request a further lump or lump sums at any time in the future pursuant to a determination at that time as to what is in the best interest of the Claimant and/or his dependents.

6. That it is in the best interest of the Claimant and his

dependents to make the partial lump sum award that is made in this matter. I have taken into consideration in making the partial lump sum payment in this matter the arguments of the Defendants and especially the insurance company that the award made should not result in an unjust enrichment to the Claimant and his dependents and that the Claimant may very well die well short of his life expectancy and that the insurance carrier is paying weekly benefits and is paying for all the needs of Mr. Lazaro and that it is not in the best interest of the insurance company at this point in time to make a larger award. I have also taken into consideration the argument of the insurance company that who knows whether or not Mrs. Lazaro will stay with Mr. Lazaro or will separate in the future and that although she has been appointed his Guardian and is responsible to report to the Court that she will utilize these funds granted to her in the best interest of the dependents and/or Mr. Lazaro.

7. That the Lazaro Family has three (3) automobiles at this time (only one of which is safe to drive out of town and has less than 100,000 miles), a 1991 Aerostar Van, a 1996 Honda Civic, and a 2004 Dodge Durango. Two (2) vehicles has 125,000 and 145,000 miles on them.

8. That the financial statement as to the payment of the debts as allowed by this Order is attached hereto and incorporated herein by reference.

9. That all the other issues that have not been presented to this Commission for decision in this case are held in abeyance for further decision by the Commission.

CONCLUSIONS OF LAW

Under S.C. Code §42-17-50, the following Conclusions of Law are made and apply in this matter:

1. Under S.C. Code §42-9-10, the Decision is made as to the Claimant's entitlement to lifetime disability benefits as a result of his total and permanent disability due to physical brain injury and under that Section and under S.C. Code §42-9-301, the decision is made as to a granting of a partial lump sum in this matter.

2. Under the stipulation of the parties, jurisdiction and venue are stipulated.

3. Under S.C. Code §42-15-60, the determination is made as to the Claimant's entitlement to lifetime medical care having been declared totally and permanent disabled.

4. Under S.C. Code §19-1-150, the Mortality Tables establishes Mr. Lazaro's life expectancy is established.

5. Under S.C. Code §42-9-330, the Guardian of the Claimant may on behalf of the Claimant and his dependents assert any rights to which the Claimant is entitled under the Workers' Compensation Act and this Commission may make payment of benefits to the Claimant's Guardian.

6. Under the issues before this Commissioner for decision and the information submitted, this decision is made at the time, and all other issues are held in abeyance.

ORDER AND AWARD

THEREFORE IT IS ORDERED that the Claimant through his Guardian, Mrs. Decidora Lazaro, is found to be entitled to a partial lump sum payment in the amount of \$152,568.75. Said amount shall be payable not to the Guardian but to Claimant's Counsel to be put into their trust account to pay off the mortgage on the Lazaro home, to purchase an automobile up to the amount of \$30,000.00 and to pay off other debts as reflected in the financial declaration filed with the Commission and attached to this Order. Claimant's Counsel is directed to pay off the debts as set forth above in this Order and to purchase a vehicle for the family and if there is any balance left over, they are directed to refund that to the insurance company.

All other issues are held in abeyance.

AND IT IS SO ORDERED.

SOUTH CAROLINA WORKERS'
COMPENSATION COMMISSION



T. Scott Beck, Commissioner

CERTIFICATE OF SERVICE

McDANIEL LAW FIRM
ATTORNEYS AND COUNSELORS AT LAW
1315 ELMWOOD AVENUE
COLUMBIA, SOUTH CAROLINA 29201

Proudly representing injured workers
for over 25 years.

Preston F. McDaniel
OF COUNSEL:
Daniel E. Peagler, P.C.
Michael Johnson, P.C.

Telephone (803) 771-7211
Facsimile (803) 252-0709

April 16, 2010

Virginia L. Crocker, Judicial Director
SC Workers' Compensation Commission
Post Office Box 1715
Columbia, South Carolina 29202

RE: Antonio Lazaro v. Burris Electric and c/o CompTrust
AGC of the Carolinas
Date of Accident: 7/6/2007
WCC File No.: 0710622

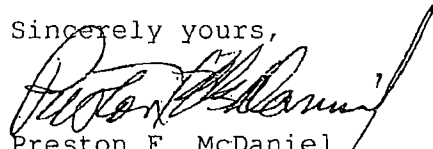
Dear Ms. Crocker:

Enclosed herewith is my Form 50 requesting a hearing with regards to the above-referenced matter along with my proof of service upon the carrier and/or opposing counsel in this matter. I have also enclosed this firm's check in the amount of \$25.00 representing the appropriate filing fee.

I am requesting that this matter be set for hearing as soon as the Commission calendar will permit.

I hope this is sufficient for filing with the Commission. Should you require anything further, kindly advise.

Sincerely yours,


Preston F. McDaniel

PFM/rdb
Enclosure

cc: John McIntyre Tolar, Esquire.
John E. Duncan, Esquire

RECEIVED
APR 19 2010

BY: 20441.08057

South Carolina Workers' Compensation Commission
1333 Main Street, Suite 500 • Post Office Box 2715
Columbia, South Carolina 29202-1715
(803) 737-5723
www.wcc.sc.gov



WCC File #: 0710622
Carrier File #: _____
Carrier Code #: _____
Employer FEIN #: _____

Claimant's Name: Decidora Lazaro, Guardian ad Litem for Antonio Lazaro SSN: _____ Employer's Name: Burrís Electric, Inc.
Address: _____ Address: 1251 N. Lake Drive
City: Columbia State: SC Zip: 29221 City: Lexington State: SC Zip: 29072
Home Phone: () - Work Phone: () - Insurance Carrier: CompTrust
Preparer's Name: Preston F. McDaniel Law Firm: McDaniel Law Firm Preparer's Phone #: (803) 771 - 7211

Complete each information blank. To request a hearing, check Box 13b, indicate the kinds of benefits claimed by checking the box(es) at Lines 6, 7, 8, and 9, and file this form in duplicate.

A claim for workers' compensation benefits is made based on the following grounds: Date of Injury or Illness: 7/6/2007
 Injury Illness Repetitive Trauma

- 1a. The claimant sustained an injury to brain (Part(s) of Body Injured) on 7/6/2007 (Month/Day/Year) in Florence county, state of SC.
- 1b. Body part(s) affected are: brain
Briefly describe how the accident occurred. See Attachment
2. Both the claimant and the employer were subject to the South Carolina Workers' Compensation Act at the time of injury.
3. The relationship of employer and employee existed at the time of injury.
4. At the time of the injury the claimant was performing services arising out of and in the course of employment.
5. Notice of the accidental injury was given to the Employer on 7/6/2007 (Month/Day/Year) in the following manner:
Employer and supervisors were eyewitnesses to the accident. ACCEPTED CASE
6. Due to injury, the claimant is in need of (check one):
 (a) medical examination and treatment for: anoxic brain injury. Not an Issue. Treatment being provided at Brian Center Nursing Care. ACCEPTED CASE
 (b) additional medical examination and treatment for: _____
7. Due to injury, the claimant requests temporary total disability benefits because of lost compensable time from work and wages for the period of:
TTD being paid.
8. Due to the injury, the Claimant has permanent disability of the following nature and extent (check one):
 (1) General Disability: Total Partial (2) Specific Disability: Total Partial
 (3) Wage Loss Partial
9. Due to the injury, the Claimant has a serious bodily disfigurement consisting of:

10a. At the time of the injury, the Claimant was paid weekly wages of \$Form 20 Requested, and demands accounting of days worked and wages earned as provided by law.
- 10b. Give names and addresses of all employers for whom the Claimant has worked since the date of the accident:
N/A
- 11a. Further grounds or unusual aspects of claim:
Determination of permanent and total disability due to traumatic brain injury and entitlement to partial lump sum. See Attachment
- 11b. List names and addresses of all physicians or other medical specialists who have seen or treated the Claimant as a result of the accident:
Brian Center Nursing Care - Columbia, SC; Palmetto Health Richland - Columbia, SC; Lake City Community Hospital - Lake City, SC; Inter Medical Hospital of SC - Columbia, SC
- 11c. To the best of your knowledge, did you have any prior permanent disability? N/A
If yes, describe: _____
12. Appropriate benefits as provided in the Act for the above grounds and other relief as the Workers' Compensation Commission may direct as just and proper.
- 13a. I am filing a claim. I am not requesting a hearing at this time.
- 13b. I am requesting a hearing. A \$25 fee is required.
14. Estimated time needed for hearing: 1 hour

I verify the contents of this form are accurate and true to the best of my knowledge.

Preparer's Signature: Preston F. McDaniel Attorney for the Claimant: mcdaniellaw@hotmail.com Date: April 16, 2010
Title: _____ Email: _____

Refer to R.67-204 through R.67-210 and R.67-601 through R.67-615. Questions about the use of this form may be directed to the Commission's Claims Department.

ATTACHMENT TO FORM 50

Antonio Lazaro v. Burris Electric and c/o CompTrust AGC of
the Carolinas

WCC File No.: 0710622

1b. While doing major renovations to a school, Claimant was installing light fixtures on a tall ladder when he was electrocuted by high voltage electricity. When fellow employees saw what was happening one kicked the ladder out from under the Claimant causing the Claimant to fall 12 feet to the floor with his heart stopped for a long time. The Claimant suffers from anoxic brain injury and is in a vegetative state. ACCEPTED CASE

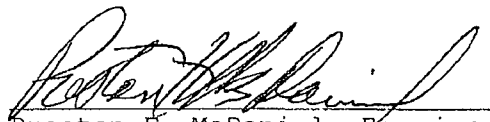
11a. The Claimant, Mr. Antonio Lazaro, is in a vegetative state suffering from anoxic brain injury, which brain injury is profound and which is reported by the medical professionals caring for him as having an eighty percent (80%) chance of no recovery or permanent vegetative state and a ten percent (10%) chance of little recovery and there is no question that he will not be able to return to work and that he is permanently and totally disabled.

The Claimant through his Guardian Ad Litem requests a determination that his condition is permanent and that he is entitled to lifetime benefits for permanent and total disability having sustained profound physical brain injury placing him in a vegetative state.

Upon a determination of total and permanent disability with entitlement to lifetime weekly benefits the Guardian Ad Litem requests a partial lump sum payment of those benefits be ordered to be paid pursuant to S.C. Code § 42-9-301 and under S.C. Code § 42-9-330 to his general guardian, Mrs. Decidora Lazaro, his wife for the use and benefit of the Claimant and his dependents including his wife and two teenage sons. While such payment is not contrary to the best interests of the employee or his dependents and is required to be made pursuant to the statute without explanation, the request is made in the best interest of the employee and his dependents to pay off the employee's house and all other current debts; to provide for the

increased expenses and costs of living of the family since his accident; to set aside money for the payment of college expenses for the children; to provide transportation for the dependents of the employee; to compensate for the loss of and to provide for health benefits to the employee's dependents and to set aside and invest funds for the health and welfare of the employee and his dependents. The Guardian Ad Litem would request a partial lump sum payment be made in an amount of not less than two-thirds (2/3) and not more than ninety percent (90%) of the residual lifetime weekly benefits. Under the life expectancy tables, S.C. Code § 19-1-150, the commuting fraction in a lifetime benefits claims, Mr. Lazaro is 40 years old and has a life expectancy of 38.33 years.

Respectfully submitted,



Preston F. McDaniel, Esquire
Attorney for Mr. Lazaro.

April 16, 2010
Columbia, South Carolina



ATTORNEYS AT LAW

Reply To
JOHN MCINTYRE "MAC" TOLAR
Direct Dial: (803) 227-4916
mtolar@mgclaw.com
COLUMBIA

RECEIVED
MAY 14 2010
May 14, 2010

VIA HAND DELIVERY

Virginia Crocker, Judicial Director
S. C. WORKERS' COMPENSATION COMMISSION
1333 Main Street, Suite 500
Columbia, South Carolina 29201

FRONT DESK

RE: Antonio Lazaro v. Burris Electric and CompTrust AGC of the Carolinas
Date of Accident: July 6, 2007
WCC File No.: 0710622
Our File No.: 20441.08051
Claim No.: S266-07-01390

Dear Ms. Crocker:

Please find enclosed the Form 51 on behalf of the employer and carrier in the above matter for filing in your office.

By copy of this letter, we are serving a copy of the Form 51 on the Claimant's attorney, Preston F. McDaniel, Esquire.

With kind regards, I am

Very truly yours,

John McIntyre "Mac" Tolar

JMT/rd
Enclosures

cc: Preston F. McDaniel, Esquire (w/enc)
Jennifer D. Little, CompTrust AGC of the Carolinas (w/enc)
Christi Burriss, Burriss Electrical (w/enc)

SC Workers' Compensation Commission
 333 Main Street, suite 500 • Post Office Box 171
 Columbia, South Carolina 29202-1715
 803)737-5723



WCC File #: 0710622

Carrier File #: S266-07-01390

Carrier Code #: _____

Employer FEIN #: _____

Antonio Lazaro
 Claimant's Name SSN _____
Columbia, South Carolina 29212
 Address City State Zip
(803) 798-8731
 Home Phone # Work Phone #
John McIntyre "Mac" Tolar
 Preparer's Name Law Firm

Burriss Electrical
 Employer's Name
1251 N. Lake Drive
Lexington, South Carolina 29072
 Address City State Zip
CompTrust AGC of the Carolinas
 Insurance Carrier
803 324 4918
 Phone Number

RECEIVED

MAY 14 2010

Date of Accident: 7/6/07

FRONT DESK

Complete each information blank. Specify clearly when contentions are admitted in part and denied in part. The employer-insurance carrier in answer to the claim, respectfully shows:

1. It is admitted that the employee sustained an injury on or about the date set forth in the application. The reasons for denial are: The Claimant sustained a physical traumatic physical brain injury.
2. It is admitted that both the employer and employee were subject to the Workers' Compensation Act at the time in question. The reasons for denial are: See Number 1 above.
3. It is admitted that the relationship of employer and employee existed at the time in question. The reasons for denial are: See Number 1 above.
4. It is admitted that at the time in question the employee was performing service growing out of and incidental to his employment. The reasons for denial are: See Number 1 above.
5. It is admitted that notice of injury was given to the employer. The reasons for denial are: See Number 1 above.
6. It is admitted that the employee needs/is entitled to additional medical care as a result of the injury. The reasons for denial are: See Number 1 above.
7. It is admitted that the employee is entitled to temporary total disability for the period(s) of: See Number 1 above.
8. It is denied that the employee is permanently disabled. The reasons for denial are: Pending further investigation.
9. It is denied that the employee has a serious disfigurement.
10. It is contended that an average weekly wage of \$609.66 applies, according to attached accounting of employee's earnings as provided by law.
11. Further contentions or grounds of defense are: All defenses available under the Act and other applicable law, including but not limited to the affirmative defenses set forth in Regulation 67-603. Defendants deny the Claimant is entitled to a partial lump-sum payment, pending investigation.
12. Estimated time needed for hearing: 45 minutes.

I certify that I have served this document pursuant to R.67-211 by delivering a copy to:

Preston F. McDaniel, Esquire
 The McDaniel Law Firm
 1315 Elmwood Avenue
 Columbia, South Carolina 29201

on the 14th day of May, 2010 by first class mail; personal service; certified mail.

I verify the contents of this form are accurate and true to the best of my knowledge.

Preparer's Signature _____ Attorney for Employer/Carrier mtolar@mccclaw.com Date May 14, 2010
 Title _____ Email _____ Date _____

Refer to R.67-204 through R.67-210 and R.67-601 through R.67-615. Questions about the use of this form may be directed to the Commission's Judicial Department. Pursuant to R.67-606, a Form 20 must be filed with the Claims Department at least 30 days from the date of filing this form.

McDANIEL LAW FIRM
ATTORNEYS AND COUNSELORS AT LAW
1315 ELMWOOD AVENUE
COLUMBIA, SOUTH CAROLINA 29201

Proudly representing injured workers
for over 25 years.

Preston F. McDaniel
OF COUNSEL:
Daniel E. Peagler, P.C.
Michael Johnson, P.C.

Telephone (803) 771-7211

Facsimile (803) 252-0709

July 13, 2010

Commissioner T. Scott Beck
SC Workers Compensation Commission
Post Office Box 1715
Columbia, South Carolina 29202

RE: Antonio Lazaro v. Burriss Electrical Inc.
WCC File No.: 0710622

Dear Commissioner Beck:

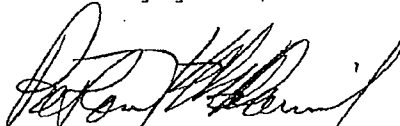
Please find enclosed a copy of the Claimant's Pre-Hearing Brief in the above referenced matter.

By copy of this letter, with enclosures, we are forwarding a copy of our Pre-Hearing Brief and APA submissions to opposing counsel on this date.

I hope this is sufficient for filing this matter with the Commission. However, if additional information is needed, please feel free to contact me at your convenience.

I look forward to seeing you at the hearing and to a resolution in the best interest of all parties concerned.

Sincerely yours,



Preston F. McDaniel

PFM/rdb
Enclosures

cc: John M. Tolar, Esquire

RECEIVED
JUL 14 2010
BY: 20441-08051

South Carolina Workers' Compensation Commission
1333 Main Street, Suite 500
P.O. BOX 1715
Columbia, SC 29202-1715
(803) 737-5739
www.wcc.sc.gov



PRE-HEARING BRIEF
WCC File No: 0710622

Claimant's Name: Decidora Lazaro, Guardian ad Litem for Antonio Lazaro Employer's Name: Burriss Electric, Inc.
Address: _____ Address: 1251 N. Lake Drive
City: Columbia State: SC Zip: 29221 City: Lexington State: SC Zip: 29072
Home Phone: () - _____ Work Phone: () - _____ Carrier: CompTrust
Preparer's Name: Preston F. McDaniel Preparer's Phone #: (803) 771-7211

A claim for workers' compensation benefits is made based on the following grounds:

Injury Illness Repetitive Trauma

1. Compensation Rate: \$406.46 2. AWW: \$609.66 Date of Injury: 07/06/2007
3. Type of injury and body part(s): Brain
4. Facts in controversy: See Attachment
5. Legal issues involved: See Attachment
6. Unusual aspects: _____
7. Witnesses (designate if expert):* Decidora Lazaro; employer representative of Burriss Electrical; any witnesses listed by the Defendants; and other lay witnesses to be named
8. Exhibits: Claimant requests that WCC File Number 0710622 be made a part of the Record; Financial Declaration of Mrs. Decidora Lazaro
9. Medical evidence (indicate report pursuant to R.67-612; deposition or appearance):
Palmetto Health Richland; Lake City Community Hospital; Inter Medical Hospital of SC; Denise Salyer, RN, CCM; Dr. Charmaine George
10. Name, address, and specialty, if any, of the treating physician: Dr. Charmaine George, Brian Center Nursing Care - 3514 Sidney Road, Columbia, South Carolina 29210
11. Impairment rating(s); body part(s); physician and date of opinion: On 7/12/10 Dr. George states that the Claimant is permanently disabled
12. I am amending my Form 50/51 in the following manner: _____

I verify the contents of this form are accurate and true to the best of my knowledge.

Signature: *Preston F. McDaniel* Email: mcdaniellaw@hotmail.com

Date of hearing: July 28, 2010 Time needed for hearing: 2 hours

On behalf of Claimant Employer

File this form and proof of service on the opposing party according to R.67-611 and R.67-212. Do not send medical reports.
* Commissioners reserve the right to admit expert witnesses at hearings.

ATTACHMENT TO FORM 58

Antonio Lazaro v. Burriss Electrical Inc.

WCC FILE NO: 0710622

4. a. The Claimant, Mr. Antonio Lazaro, is in a vegetative state suffering from anoxic brain injury, which brain injury is profound and which is reported by the medical professionals caring for him as having an eighty percent (80%) chance of no recovery, or permanent vegetative state and a ten percent (10%) chance of little recovery and there is no question that he will not be able to return to work and that he is permanently and totally disabled.

The Claimant through his Guardian Ad Litem requests a determination that his condition is permanent and that he is entitled to lifetime benefits for permanent and total disability having sustained profound physical brain injury placing him in a vegetative state.

b. Upon a determination of total and permanent disability with entitlement to lifetime weekly benefits the Guardian Ad Litem requests a partial lump sum payment of those benefits be ordered to be paid pursuant to S.C. Code § 42-9-10(D) and under S.C. Code § 42-9-330 to his general guardian, Mrs. Decidora Lazaro, his wife for the use and benefit of the Claimant and his dependents including his wife and two teenage sons. While such payment is not contrary to the best interests of the employee or his dependents and is required to be made pursuant to the statute without explanation, the request is made in the best interest of the employee and his dependents to pay off the employee's house and all other current debts; to provide for the increased expenses and costs of living of the family since his accident; to set aside money for the payment of college expenses for the children; to provide transportation for the dependents of the employee; to compensate for the loss of and to provide for health benefits to the employee's dependents and to set aside and invest funds for the health and welfare of the employee and his dependents. The Guardian Ad Litem would request a partial lump sum payment be made in an amount of not less than two-thirds (2/3) and not more than ninety percent (90%) of the residual lifetime weekly benefits, under the life expectancy tables, S.C. Code § 19-1-150, which is the commuting fraction in a lifetime benefits claims. Mr.

Lazaro is 40 years old and has a life expectancy of 38.33 years or 1,993.16 weeks. The total value of lifetime benefits is \$810,139. 81.

c. Claimant's entitlement to lifetime medical care.

5. IN CORRELATION WITH RESPONSES UNDER NUMBER 4:

a. §42-9-10 and §42-1-120 defines total disability under §42-9-10 and subsection (D) provides for lifetime benefits for physical brain injury; Coleman v. Quality Concrete Products, Inc., 245 S.C. 645, 142 S.E.2d 43 (1965); Colvin v. E.I. Dupont DeNemours Co., 227 S.C. 465, 88 S.E.2d 581 (1955); Stephenson v. Rice Services, 323 S.C. 113, 473 S.E.2d 699;

b. 1) § 42-9-10 (D) provides for a partial lump sum payment of weekly benefits; Thompson v. S.C. Steel Erectors, 369 S.C. 606, 632 S.E. 2d 874 (S.C. App 2006) reh. denied, cert. denied; Cox v. Bell South Telecommunications Inc., 356 S.C. 468, 589 S.E. 2d 766 (S.C. App 2003) reh. denied, cert. denied

2) § 42-9-330 provides for payment of benefits to the Claimant's guardian;

3) § 19-1-150 establishes for the mortality table; and

c. Claimant's entitlement to lifetime medical care under §42-15-60

Respectfully Submitted,



Preston F. McDaniel
Attorney for Claimant

¹³
7/9/10, 2010

STATE OF SOUTH CAROLINA)
) BEFORE THE SOUTH CAROLINA
) WORKERS' COMPENSATION COMMISSION
) WCC File No: 0710622
 Antonio Lazaro,)
 By and Through his GAL)
 Decidora Lazaro)
)
 Employee-Claimant,)
)
 v.) NOTICE OF WITNESSES AND
) WRITTEN REPORT(S)/PHYSICIAN
 Burriss Electrical Inc.,) OR OTHER EVIDENCE TO BE
) INTRODUCED ON BEHALF OF
 as Employer and) CLAIMANT
)
 CompTrust)
 Defendants.)

TO: SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION AND
 JOHN M. TOLAR, ATTORNEY FOR THE EMPLOYER/CARRIER.

YOU ARE HEREBY NOTIFIED THAT THE Claimant pursuant to
 the provisions of the South Carolina Workers' Compensation
 Act and South Carolina Code §1-23-330 (1976, as amended),
 herewith submits the following reports/physician or other
 evidence on behalf of the claimant, to wit:

<u>NAME OF REPORT(S) /PHYSICIAN OR OTHER EVIDENCE</u>	<u>DATE OF REPORT(S)</u>	<u>PAGE NUMBER(S)</u>
1. Palmetto Health Richland	7/7/07-7/10/07	1-4
2. Dr. Charmaine M. George	7/12/10	5
3. Denise Salyer, RN, CCM	6/4/10	6-7
4. Financial Declaration of Decidora Lazaro		8-14

YOU ARE FURTHER HEREBY NOTIFIED that you have the right
 to cross-examination; and, should you desire to exercise
 said right, you are to forthwith schedule the deposition(s)
 of any of the physicians or other person(s), whose reports
 are submitted, for the purposes of cross-examination.

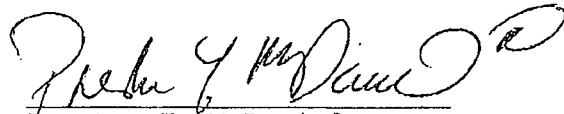
YOU ARE FURTHER NOTIFIED that the originals of the
 documents referred herein, or photocopies received from said
 physicians/others, are being herewith forwarded to the South

Carolina Workers' Compensation Commission for insertion in the file of the South Carolina Workers' Compensation Commission and inclusion into evidence on behalf of the claimant.

YOU ARE FURTHER NOTIFIED that the following witnesses may be called on behalf of the claimant:

Decidora Lazaro, Guardian ad Litem; employer representative of Burriss Electrical Inc.; any witness listed by the Defendants; and other lay witnesses to be named.

McDaniel Law Firm



Preston F. McDaniel
Attorney for Claimant
1315 Elmwood Avenue
Columbia, South Carolina 29201

7/13, 2010

CERTIFICATE OF SERVICE BY MAIL

I hereby certify that I have on this day served the following in the matter of Antonio Lazaro v. Burriss Electrical Inc. with a copy of the Claimant's Pre Hearing Brief and APA Submissions by depositing the same in the United States Mail, with adequate postage thereon, addressed as follows:

SC Workers' Compensation Commission
Attn: Commissioner T. Scott Beck
Post Office Box 1715
Columbia, SC 29201-1715


John McIntyre Tolar, Esquire
McAngus Goudelock & Courie, LLC
Post Office Box 12519
Columbia, SC 29211

I also hereby certify that a regular communication by mail exists.


Robin Clary

SWORN TO BEFORE ME this

12th day of July, 2010.


Notary Public for South Carolina

(L.S.)

My Commission Expires: 12/28/10

STATE OF SOUTH CAROLINA)
) BEFORE THE SOUTH CAROLINA
) WORKERS' COMPENSATION COMMISSION
) WCC File No: 0710622
 Antonio Lazaro,)
 By and Through his GAL)
 Decidora Lazaro)
)
 Employee-Claimant,)
)
 v.) DATE OF HEARING: 07/28/10
) APA SUBMISSIONS
 Burriss Electrical Inc.,)
)
 as Employer and)
)
 CompTrust)
 Defendants.)
 _____)

TO: SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION AND
 JOHN MCINTYRE TOLAR, ATTORNEY FOR THE EMPLOYER/CARRIER.

YOU ARE HEREBY NOTIFIED THAT THE Claimant pursuant to
 the provisions of the South Carolina Workers' Compensation
 Act and South Carolina Code §1-23-330 (1976, as amended),
 herewith submits the following reports/physician or other
 evidence on behalf of the claimant, to wit:

<u>NAME OF REPORT(S) /PHYSICIAN OR OTHER EVIDENCE</u>	<u>DATE OF REPORT(S)</u>	<u>PAGE NUMBER(S)</u>
1. Palmetto Health Richland	7/7/07-7/10/07	1-4
2. Dr. Charmaine M. George	7/12/10	5
3. Denise Salyer, RN, CCM	6/4/10	6-7
4. Financial Declaration of Decidora Lazaro		8-14

EEG

TRAUMA, M070489 - R013455024

Result Type: EEG
Result Date: 07 July 2007 13:19
Result Status: Auth (Verified)
Result Title: EEG
Performed By: Hwang MD, Te Long on 07 July 2007 13:19
Verified By: Hwang MD, Te Long on 10 July 2007 11:13
Encounter info: R0718701165, Richland, IPR-Inpatient, 7/6/2007 -

EEG

DISCUSSION: Patient is a 38-year-old male who suffers from electrocution. This EEG is to assess the possibility of questionable seizure.

This is an 18-channel digital EEG recording using both bipolar and referential montages. The electrode placement is in accordance with the standard international 10/20 system. EKG monitoring is also available.

Throughout the entire recording, the background activity consists of extremely low-voltage and mostly less than 5 mcV with occasional over 10 mcV, diffusely slowing wave within theta range. A lot of electro-artifact is observed. Photic stimulation produced no significant abnormality. The EEG pattern is compatible with severely diffuse brain dysfunction which can be seen in patient with severe brain injury or encephalopathy. There is no of epileptiform discharge.

IMPRESSION: This electroencephalogram is compatible with severe brain dysfunction which can be seen in patient with severe brain injury or encephalopathy. There is no evidence of epileptiform discharge.

TLH:hs

D: 07/07/2007 12:55 P T: 07/07/2007 1:19 P
Job# 000715355 T Job # 599383 Doc # 1050382
cc: Stephen Fann, MD
Te Long Hwang, MD

Signature Line

Electronically Signed & Verified on 07/10/2007 11:13
by Hwang MD, Te Long MD

Completed Action List:

Printed by: White RN, Diane T
Printed on: 7/11/2007 9:35

Page 1 of 2
(Continued)


Date / Time 7/10/07 1000

Trauma

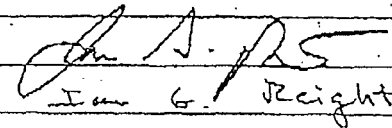
CC	Electroconvulsive Therapy Failure		10	3346/3580	Ca 1.29 Phos 2
24-Hr Course:	next week		149	109	21
Interval PMH/PSH/FF	<input checked="" type="checkbox"/> no change from yesterday <input type="checkbox"/> unable to obtain		3.5	3.7	0.6
Interval ROS	<input checked="" type="checkbox"/> no change from yesterday <input type="checkbox"/> unable to obtain				
PE:	VS: Tmax: 101'	BP: 120/85	HR: 128	RR: 28	<input type="checkbox"/> x-ray attending read:
HEENT	PERRL <input checked="" type="checkbox"/> trach midline <input type="checkbox"/> No JVD				
Neuro	E 1 V 1 M 2 <input type="checkbox"/> chemically paralyzed <input type="checkbox"/> c-collar		<input type="checkbox"/> change in neuro status		
Resp	<input checked="" type="checkbox"/> intubated <input type="checkbox"/> trach collar <input type="checkbox"/> BBS clear <input type="checkbox"/> BBS w/ rhonchi				
Vent Mgmt	<input type="checkbox"/> SIMV <input checked="" type="checkbox"/> CPAP TV / STV Rate / SRR FIO2 PEEP PS Phigh Plow Thigh Tlow		40% 8 15		
ABG	pH 7.458 CO2 36.6 O2 75.9 HCO3 25.5 BE +2.2 Sat 96% ETCO2				
Cardiac	<input type="checkbox"/> NSR <input checked="" type="checkbox"/> ST Hemodynamics: PAOP CVP CO/CI SVR LVSV		<input type="checkbox"/> no murmurs, gallop, or rub <input type="checkbox"/> DO2 VO2 <input type="checkbox"/> Fluid bolus required last 24 hrs. reason:		
GI	<input checked="" type="checkbox"/> abdomen soft <input type="checkbox"/> non-tender <input type="checkbox"/> incision clean, dry & intact <input type="checkbox"/> NGT				
GU	<input type="checkbox"/> foley <input type="checkbox"/> clear, yellow urine				
Musculo-skeletal	<input type="checkbox"/> motor grossly intact <input type="checkbox"/> sensory grossly intact <input checked="" type="checkbox"/> arm, well perfused <input type="checkbox"/> no spine tenderness				
Integumentary	<input type="checkbox"/> skin intact, no breakdown <input type="checkbox"/> no rashes				
Psych	<input type="checkbox"/> agitated <input type="checkbox"/> cooperative <input type="checkbox"/> oriented to person, place, time				
A/P:	1. Anoxic Brain Injury - supratentorial <input type="checkbox"/> new <input type="checkbox"/> worsening <input checked="" type="checkbox"/> stable				
	2. Deep Fatigue - vit. management <input type="checkbox"/> new <input type="checkbox"/> worsening <input checked="" type="checkbox"/> stable				
	3. Injured Hands - splinting, plastic cast <input type="checkbox"/> new <input type="checkbox"/> worsening <input checked="" type="checkbox"/> stable				
	4. Social - speak to family assist <input type="checkbox"/> new <input type="checkbox"/> worsening <input checked="" type="checkbox"/> stable				
	5. Prognosis - carafate / SCD's <input type="checkbox"/> new <input type="checkbox"/> worsening <input checked="" type="checkbox"/> stable		Resident/PA/NP Signature: [Signature]		
Attending Attestation:	<input checked="" type="checkbox"/> reviewed note by Dr./PA/NP [Signature] <input type="checkbox"/> reviewed note dated _____ by Dr./PA/NP				
	<input checked="" type="checkbox"/> I examined the patient on multidisciplinary ICU rounds and discussed the care plan with the resident and team.				
	<input checked="" type="checkbox"/> Plan discussed with Case Management <input type="checkbox"/> Plan discussed with family				
	<input checked="" type="checkbox"/> I am providing global care and coordinating care with consultants. <input type="checkbox"/> Neuro <input type="checkbox"/> Ortho <input type="checkbox"/> Maxillo-facial <input type="checkbox"/>				
	<input type="checkbox"/> In addition to care plan, I manage the medical decisions for the following:				
	<input checked="" type="checkbox"/> Pain Control	<input checked="" type="checkbox"/> Glycemic Control	<input type="checkbox"/> DVT prophylaxis	<input checked="" type="checkbox"/> Stress Ulcer prophylaxis	<input type="checkbox"/> Nutritional Support
	<input checked="" type="checkbox"/> Parenteral Meds	<input checked="" type="checkbox"/> IV Insulin Drip	<input type="checkbox"/> Lovenox	<input checked="" type="checkbox"/> Carafate	<input type="checkbox"/> Enteral Feeding
	<input checked="" type="checkbox"/> Pain Meds	<input type="checkbox"/> Mgmt. of central lines	<input type="checkbox"/> Heparin	<input checked="" type="checkbox"/> PPI	<input type="checkbox"/> Parenteral Nutrition
	<input type="checkbox"/> Decision for Surgery	<input type="checkbox"/> Mgmt. of central lines	<input checked="" type="checkbox"/> SCD's	<input type="checkbox"/> Infectious Disease	<input type="checkbox"/> PT/OT/SLT
			<input checked="" type="checkbox"/> ABX	<input type="checkbox"/> Cultures	
Attending	[Signature]				
Time with Patient	[Signature]				

Raymond P. Bynoe, M.D. Pager: 115-1048 Stephen Fann, MD Pager: 355-8148 James E. Morrison, MD Pager: 355-9067 MD

PALMETTO HEALTH RICHLAND

TRAUMA, M070488
 0718701185
 MR 013455024 FANN, STEPHEN A
 07/04/69 38Y M


(ADDRESSOGRAPH)

DATE	NOTES SHOULD BE SIGNED BY PHYSICIAN
7/19/07	<p>Critical Care Surgery on call:</p> <p>after reviewing the chart and discussing the patient with team had a long conversation to family in their native language regarding events/feelings and the abnormal prognosis. Family is considering comfort care but has not made a decision have advised them that chance of a recovery is essentially non-existent.</p> <p style="text-align: right;">  J. N. Reight </p>

PROGRESS NOTE

100160Rmr R 7/03

P: 8/13

10: 97494152

03

JUL-18-2007 00:52 FROM: 7E TRAUMA SURGERY 803 434 7017

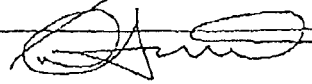
041

PALMETTO HEALTH RICHLAND

TRAUMA, M070489
 0718701165
 MR 013455024 FANN, STEPHEN A
 07/04/68 38Y M
 (ADDRESSOGRAPH)

DATE	NOTES SHOULD BE SIGNED BY PHYSICIAN
7/6/07	<p><u>Neurology Consultation</u></p> <p>Requested by Dr. Harrison re: electrical injury + arrest with probable hypoxic brain injury</p> <p>38yo man, high voltage current and a fall of at least 12 feet. CP resuscitation ~ 20-30 minutes</p> <p>± rhythm/pulse returned CT O&H reported (head)</p> <p>Pfght unknown + indeterminate ROS indeterminate</p> <p>Exam: Intubated Breaths some above vent.</p> <p>140/110 106 No arousal to voice or tactile noxious. Pupils small + poorly reactive. Corneals present. Slight roving. eye movements suggested some slow deviation of R eye to the R = vestibuloocular but absent on the L side</p> <p>Muscul spasm around of L UE, but w/ withdrawal, w/ posturing to stimulation. DTR's present + normal in UE bilat, absent in LE bilat, Plantar mute (B).</p> <p>Imp: 1. Electrical Injury 2. Hypoxic brain 3. Trauma, with unknown extent of head, neck, back injury. Loss of reflexes in lower extremities suggests spinal injury needs to be ruled out.</p> <p>Recs: ① Routine EEG to rule stroke. ② Imaging of C/T/L spine. Repeat head CT or more advanced = MRI if tolerated. ③ Based on admission exam, approx. 80% chance of no recovery or vegetative state, only 10% or less for moderate to good recovery. This will need reassessment w/lt follow.</p>

PROGRESS NOTE.



100160Rmr R 7/03

P: 7/13

10: 97494152

JUL-18-2007 00:52 FROM: 7E TRAUMA SURGERY 003 434 7017

H

042



Brian Center St. Andrews
Nursing Care
3514 Sidney Road
Columbia, South Carolina 29210
(803) 256-4107 Phone

RE: Antonio Lazaro
DOB: 07-04-1969

Dear Mr. McDaniel:

With regard to our conversation last week pertaining to Mr. Lazaro. As you know he is a 41 year old Hispanic male who suffered an electrocution resulting in anoxic brain injury. This occurred in July 2007 and patient has been in a persistent vegetative state since.

Given his relatively young age this patient is likely to remain in this condition for many years, without any improvement expected in his overall clinical condition. It is my medical opinion to a reasonable degree of medical certainty that his condition is most probably permanent and that he is permanently disabled from gainful employment.

Charmaine George
Charmaine George, MD

7/12/10
Date



SOUTHERN REHABILITATION NETWORK, INC.

9370 Falls of Neuse
Suite 101
Raleigh, NC 27615

Phone No.: 919/781-3149 or 1-800-772-8914
Fax No.: 919/781-8593 or 1-800-782-8593
E-mail: main.office@southernrehab.net

PROGRESS REPORT

DATE: June 04, 2010
CARRIER: CompTrust
ADJUSTER: Jennifer Little
CARRIER CLAIM #: S266-07-01390
CASE MANAGER: Denise Salyer, RN, CCM
SUPERVISOR: Donna Irby RN, CCM
INSURED: Burriss Electrical, Inc.
SRN NUMBER: SR15493C
DATE OF INJURY: 7/06/2007
INJURED WORKER: Antonio Lazaro

INJURY DESCRIPTION

Anoxic brain injury resulting from electrocution-supportive care
Electricution at 227 volts; resuscitated at scene
Anoxic brain injury resulting from electrocution-supportive care
Respiratory failure-ventilator management
Burn wounds to both hands

OVERVIEW/EDUCATION

Mr. Lazaro was visited at Bryan Center by the case manager on 6/2/10 and the Case Manager met with the nurse.

The nurse helped turn the Injured Worker and no pressure sores or other skin problems were noted. Mr. Lazaro appeared well care for as the room, bed linens and Mr. Lazaro were clean and neat.

Education/Medication/Durable Medical Equipment:

Duragesic patch 25 MCG one patch every 3 days for pain, Ferrous Sulfate 30 mg 7.5 ml daily, Previcid Solutab 30 mg daily, Theragra liquid 10 ml daily, Transderm-Scop 1.5 MG/7 every 72 hours, Robitussin Syrup 100 mg/5 ml twice daily, Baclofen 10 mg three time day, Cardizem 60 mg every 8 hours, Valium 5 mg every night, Albuterol .83 mg one vial via nebulizer every 6 hours. Humidified room air per compressor at all times. Education is not needed for Mr. Lazaro.

DATE OF SERVICE

04/14/2010 Call from the attorney's office in regards to the name of the nursing facility Mr. Lazaro is in.

05/28/2010 Medical records request to Lexington Orthopedics.

06/02/2010 The Case Manager traveled to The Brian Center in Columbia, SC for a visit with Mr. Lazaro.

The Case Manager met Mr. Lazaro's nurse. The nurse stated that she had just completed an evaluation of Mr. Lazaro's skin and it looked good. While there, we examined the skin and there were no open sores or reddened pressure points noted. Mr. Lazaro looked well care for as the room, bed linens and Mr. Lazaro were clean and neat.

06/03/2010 Swift Response Note to the adjuster and attorney

06/04/2010 Progress report completed.

VOCATIONAL STATUS

Mr. Lazaro will not return to work.

PROJECTIONS

Maximum Medical Improvement/ Permanent Partial Impairment:

Mr. Lazaro's recovery potential was reported as an 80% chance of no recovery or vegetative state and 10% chance of little recovery.

Projected/Anticipated Future Needs:

Mr. Lazaro's future needs will depend on his ability to remain stable and free from infection.
Mr. Lazaro has been placed in Bryan Center nursing facility.

Estimated Case Management Time:

Case manager time including travel over next report period: 2 hours.

PLAN

Short Term Goals:

Mr. Lazaro will remain in stable condition and be free from infection and skin breakdown over the next 3 months.

Long Term Goals:

Mr. Lazaro will continue to receive optimal custodial care and medical treatment in order to prevent complications from profound brain injury over the remainder of his lifetime.

Case Management Interventions:

The Case Manager will visit Mr. Lazaro at the Bryan Center every 3 months to note his status and perform a visual examination of his skin. Next visit planned for 9/10.

Denise Salyer, RN, CCM
Medical Case Manager

CC: Preston McDaniel, Attorney at Law
McDaniel Law Firm
1315 Elmwood Ave.
Columbia SC 29201
803/252-0709 (Fax)

John E. Duncan, Attorney at Law
Co counsel for Plaintiff
137 East Butler Street, Suite 3
Lexington SC 29072
803-951-2389 (Fax)

Anne Brozik
CompTrust
PO Box 30277
Charlotte NC 28230
704/334-3902 office (Fax)

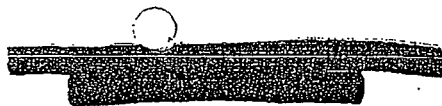
Dictated but not read

STATE OF SOUTH CAROLINA)
 COUNTY OF)

Decidora Lazaro)

Plaintiff,)

Defendant.)



FINANCIAL DECLARATION
 OF

Case No: _____ - DR - _____

HUSBAND/FATHER

Address
 Age
 Occupation
 Employer
 Employer
 Address

WIFE/MOTHER

Address Columbia, SC 29212
 Age 42
 Occupation machine operator
 Employer American Solid Woven
 Employer 807 Bluff Rd. , Columbia, SC 29201
 Address

Gross Monthly Income	Husband/Father	Wife/Mother
Principal Earnings from Employment ¹		\$1664.00
Overtime, Tips, Commission, Bonuses ²		\$0.00
Pensions, Retirement, and Annuities income		\$0.00
Additional Employment income		
Social Security Benefits (SSA) and VA Benefits	\$535 for Antonio , \$26 for the kids	
Disability and Worker's Compensation Benefits	\$1,624.00	
Unemployment and AFDC		
Spousal or Child Support (from other marriage/relationship)		
Dividends, Interest, Trust Income, and Capital Gains		
Rental Income and Business Profits		
Other (Specify):		
TOTAL GROSS MONTHLY INCOME	\$2,185.00	\$1,664.00

Payroll Deductions from Monthly Income	Husband/Father	Wife/Mother
Federal Income Tax ³		\$4.48
State Income Tax		\$56.98
Social Security and Medicare Tax (FICA)		\$127.28
Self-Employment Tax		
Health and Dental Insurance (Adult)		
Health and Dental Insurance (Child)		
Union Dues		
Voluntary Retirement Contribution (401(k), 457, IRA)		
Mandatory Retirement Contribution		
Savings Plan		
Other (Specify):		
TOTAL MONTHLY DEDUCTIONS		\$188.74
NET MONTHLY INCOME ⁴	\$2,185.00	\$1,475.26

Estimate monthly expenses: (Specify which party is the custodial parent and list name and relationship of all members of household whose expenses are included.)

MONTHLY EXPENSES ⁵	Husband/Father	Wife/Mother
Residential Rent Payment		
Note or Mortgage Payment on Residence(s)		\$744.00
Food and Household Supplies ⁶		\$800.00
Utilities, Water, and Garbage Collection		\$305.00
Telephone and Cellular Phone		\$212.00
Medical, Dental and Disability Insurance Premiums (not deducted from paycheck)		
Child Support (from other relationship)		
Work Related Day Care		
Spousal Support (from prior marriage)		
Auto Payment		\$384.48
Auto Insurance, taxes, gasoline, and maintenance ⁷		\$150.50 (\$903.00 every six months)
SUBTOTAL:		
\$2,595.98		
Real Property Tax on Residence(s)		\$51.09 (\$613.06 for 2009)
Maintenance for household ⁸		
Adult Clothing		\$100.00
Children's Clothing ⁹		\$300.00
Cable Television, Satellite, and Internet/Online Services		\$167.95
Laundry and Dry Cleaning ¹⁰		\$55.00
Medical and Dental Expenses (not paid by insurance)		
Prescriptions, Glasses, and Contacts (not paid by insurance)		\$30.00
Children's incidental expenses ¹¹		\$200.00
School lunches, supplies, field trips, and fees ¹²		\$50.00
Entertainment ¹³		\$100.00
Adult Incidental expenses ¹⁴		
All Installment payments ¹⁵		
SUBTOTAL:		
\$1,054.04		
TOTAL MONTHLY EXPENSES		\$3,650.02

Installment Loan Payments Section

Creditor	For	Monthly Payment	Balance	Owed by ¹⁶
Citimortgage	House mortgage	\$744.00	\$93,311	May 2033
Santander Consumer USA	Car	\$383.00	\$12,975	2013
Bank of America	Credit Card	\$15.00	\$395.00	Revolving

Other Debts and Obligations *not* payable in monthly installments

Creditor	For	Date Payable	Balance	Owed by ¹⁶
Arrow Financial Services LLC			\$3,038.98	
LVNV Funding, LLC	JC Penny		\$12,848.77	

Are you currently in Bankruptcy? YES NO

Are any obligations listed above, including mortgage and note payments, in arrears? YES NO

If yes, please list the obligations in arrears.

All Marital Property Known to Parties

Assets	Husband/Father	Wife/Mother	Joint
Cash and Money in Checking Account(s) ¹⁷		\$300.00	\$150.00
Money in Savings Account(s), Credit Union, Money Mkt, or Cert. of Dep.			
Value of Voluntary Retirement Account(s)			
Value of Pension Account			
Value of Publicly Held Stocks, Bonds, Securities, Mutual Funds ¹⁸			
Value of Privately Held Stocks and Other Business			
Value of Real Estate - Net of Mortgage Balances ¹⁹	****		\$113,460 (house)
Value of All Other Property ¹⁷			\$23,008.00 (car)
TOTAL ASSETS			

Any Non Marital Property Known to Parties

Description of Asset	Title Owner	Date of Acquisition	Source of Funds to Acquirer	Estimate Present market Value

If total assets are less than \$300,000.00, sign and have notarized.

If total assets are greater than \$300,000.00, itemize assets by completing additional sections below and sign and have notarized.

Financial Accounts Section¹⁸

Owner	Name of Institution	Type of Account	Balance
Decidora Lazaro	Bank of America	checking	\$300.00
Antonio & Decidora Lazaro	Bank of America	checking	\$150.00

Voluntary Retirement Accounts and Pension Accounts Section

Type of Account	Value

Publicly Held Stocks, Bonds, Securities, Mutual Funds Section (Non-Retirement)¹⁹

Name of Company	Number of Shares/Type of Account	Value

Real Estate Section²⁰

Owner	Address	Value	Mortgage Balance	Mortgage Equity
Antonio & Decidora Lazaro	101 Rolling Rock Rd. Columbia, SC 29212	\$113,460	\$93,000	

Decidora Lazaro
Signature

Sworn to before me this 30 of May
2010

[Signature] (SEAL)
Notary Public for South Carolina
My commission expires: 5/28/19

COUNTY OF LEXINGTON, SOUTH CAROLINA

Current Tax Year					Previous Tax Year				
Classification	Acres/Lots	Market Value	X Ratio	= Assessment	Acres/Lots	Market Value	X Ratio	= Assessment	
Owner Occupied		113,460	.04	4,540					
Other Property		0		0				0	
Market Value Ag.		0		0				0	
Use Value Ag.		0		0				0	

Owner Name: LAZARO, ANTONIO & DECIDORA
 Mailing Address: _____
 December 31, 2008 Owner: LAZARO, ANTONIO & DECIDORA
 Legal Description: THE RAPIDS I
 Legal Description Cont: _____
 Property Location: _____

Bill Number: 2009-072618-104
 TMS Number: _____
 Tax Year: 2009
 Tax District: District 5 Fire PD
 Property Type: Real Estate
 Legal Residence: Yes

Current Tax Year						Previous Tax Year					
2009 Assessment: 4,540						2008 Assessment: 4,540					
Homestead Assessment: 0						Homestead Assessment: 0					
Tax Relief: 0						Tax Relief: 0					
Taxing Agency	2009 Millage	2009 Taxes	Homestead Exempt	Tax Credits	Net Taxes	2008 Millage	2008 Taxes	Homestead Exempt	Tax Credits	Net Taxes	
SCHOOL											
School Operations	212.300	964.73	0.00	0.00	964.73	212.300	964.73	0.00	0.00	964.73	
School Tax Credit	0.000	0.00	0.00	-166.75	-166.75	0.000	0.00	0.00	0.00	0.00	
School Bonds	37.500	256.35	0.00	-148.63	63.72	37.500	256.35	0.00	-148.63	63.72	
Subtotal School	265.000	1,207.10	0.00	-115.38	89.70	265.000	1,207.10	0.00	-115.38	89.70	
Percent Of Total Bill	89.87%				16.13%						
COUNTY											
County Ordinary	22.202	100.80	0.00	0.00	100.80	22.202	100.80	0.00	0.00	100.80	
Law Enforcement	20.558	149.55	0.00	0.00	149.55	20.558	149.55	0.00	0.00	149.55	
Indigent Care	0.304	1.40	0.00	0.00	1.40	0.304	1.40	0.00	0.00	1.40	
Library Operations	6.330	28.74	0.00	0.00	28.74	6.330	28.74	0.00	0.00	28.74	
Solid Waste	8.040	36.50	0.00	0.00	36.50	8.040	36.50	0.00	0.00	36.50	
County Notes & Bonds	1.000	13.62	0.00	0.00	13.62	1.000	13.62	0.00	0.00	13.62	
Library Bonds	0.800	3.73	0.00	0.00	3.73	0.800	3.73	0.00	0.00	3.73	
Capital Backlog	3.004	13.10	0.00	0.00	13.10	3.004	13.10	0.00	0.00	13.10	
Subtotal County	74.228	320.94	0.00	0.00	320.94	74.228	320.94	0.00	0.00	320.94	
Percent Of Total Bill	23.52%				34.86%						
AGENCY											
Truro/Chapin Rec Opn	13.655	62.38	0.00	0.00	62.38	13.655	62.38	0.00	0.00	62.38	
Truro/Chapin Rec Bonds	4.802	22.16	0.00	0.00	22.16	4.802	22.16	0.00	0.00	22.16	
Midland Tech Operation	3.013	13.72	0.00	0.00	13.72	3.013	13.72	0.00	0.00	13.72	
Midland Tech Capital	1.415	6.45	0.00	0.00	6.45	1.415	6.45	0.00	0.00	6.45	
Riverbank Park Bonds	0.700	3.18	0.00	0.00	3.18	0.700	3.18	0.00	0.00	3.18	
Riverbank Park Oper.	1.088	4.84	0.00	0.00	4.84	1.088	4.84	0.00	0.00	4.84	
Mental Health	0.828	3.84	0.00	0.00	3.84	0.828	3.84	0.00	0.00	3.84	
Fire Service SPD & SIFD	15.588	10.77	0.00	0.00	10.77	15.588	10.77	0.00	0.00	10.77	
Subtotal Agency	61.024	286.90	0.00	0.00	286.90	61.024	286.90	0.00	0.00	286.90	
Percent Of Total Bill	10.79%				30.01%						
BILLING TOTALS											
	380.272	1,778.54	0.00	-1,133.21	613.06	380.272	1,778.54	0.00	-1,133.21	613.06	

A mortgage company and/or tax service has requested and been provided with your property tax information.

If you are over age 65, 100% disabled, or legally blind, and this is your full time legal residence, you may qualify for Homestead Tax Exemption. For more information, call the County Auditor's Office at (803) 785-8940 or visit the Auditor's web page at www.lex-co.com/auditor.

Discover, MasterCard, and Visa accepted for online payment on Lexington County's Web Site www.lex-co.com. Credit card payments cannot be made by mail, at the counter, or by phone.

Detach Here ↓

Rev: 09/29/2009
 Printed: 05/20/2010

COUNTY OF LEXINGTON, SOUTH CAROLINA

OFFICIAL RECEIPT UPON VALIDATION

Bill Number: 2009-072618-104
 TMS #: _____
 Type: Real Estate
 Tax Year: 2009
 District: District 5 Fire PD
 Description: THE RAPIDS I
 Description Cont: _____
 Land: 720
 Improvement: 3,820
 Total Assessment: 4,540
 L/R: Yes H/S:No

Pay This Amount

Due Date for Payment: 01/15/2010	613.06
3% Penalty from 03/16/2010 Thru 07/01/2010	631.45
1st Penalty from 02/02/2010 Thru 03/16/2010	674.37
1st Penalty & Cost from 03/17/2010 Thru 06/30/2010	710.02
Additional Execution Cost After 06/30/2010	725.02
Additional Execution Cost After 07/31/2010	750.02

Return this portion with payment and make checks payable to: County of Lexington

LAZARO, ANTONIO & DECIDORA
 COLUMBIA SC 29212-3018

PAID Paid on: 12/14/2009
 Amount Paid: 613.06

0907261810400000613061001150000063145100201000006743710031600000710029



Citizens Bank

154 P 247,459,465

Check No.



02 11 09 7 PHILADELPHIA, PA

2052 79869098

2052 79869098 28043000 S1 G P



Pay to the order of DECI DORA LAZARO FOR ANTONIO LAZARO 98

SOC SEC FOR JAN

\$****535*00

COLUMBIA SC 29212-3018



⑆000000518⑆ 79869098 ⑆080209

AMERICAN SOLID WOVEN CORPORATION

EMPLOYEE B I SOCIAL SEC. NO.

PAY RATE

PERIOD END

CHECK NO. 234189
234189

03-0004742 LAZARO, D

10.400 HB

2/21/2010

EARNINGS	HOURS	AMOUNT	YTD	DEDUCTION	AMOUNT	YTD
REGULAR	80.00	832.00	3,078.40	Federal W/H	2.24	4.48
HOLIDAY PAY	0.00	0.00	83.20	FICA	51.58	196.02
				Medicare	12.06	45.84
				SC State W/H	28.49	103.48

GROSS EARNINGS: 832.00 3,161.60
NET EARNINGS: 737.63

TOTAL DEDUCT: 94.37 349.82



ATTORNEYS AT LAW

Reply To
JOHN MCINTYRE "MAC" TOLAR
Direct Dial: (803) 227-4916
mtolar@mgclaw.com
COLUMBIA

July 16, 2010

VIA HAND DELIVERY

Commissioner T. Scott Beck
S. C. WORKERS' COMPENSATION COMMISSION
1333 Main Street, Suite 500
Columbia, South Carolina 29201

RE: Antonio Lazaro v. Burris Electric and CompTrust AGC of the Carolinas
Date of Accident: July 6, 2007
WCC File No.: 0710622
Our File No.: 20441.08051
Claim No.: S266-07-01390

Dear Commissioner Beck:

Please find enclosed our Pre-Hearing Brief and Notice of Witnesses and Written Medical Reports for filing in the above captioned matter.

By copy of this letter to Preston F. McDaniel, Esquire, the Claimant's attorney, we are notifying him of these submissions and serving copies of the same upon him by mail.

With kind regards, I am

Very truly yours,

John McIntyre "Mac" Tolar

JMT/rd
Enclosures

cc: Preston F. McDaniel, Esquire (w/enc)
Jennifer D. Little, CompTrust AGC of the Carolinas (w/enc)
Christi Burriss, Burriss Electrical (w/enc)

SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION

W.C.C. FILE NO: 0710622

ANTONIO LAZARO, }
 }
Employee, }
 }
Claimant, }
 }
vs. }
 }
BURRISS ELECTRICAL, }
 }
Employer, }
 }
AND }
 }
COMPTRUST AGC OF THE CAROLINAS, }
 }
Carrier, }
 }
Defendants. }

CERTIFICATE
OF
SERVICE

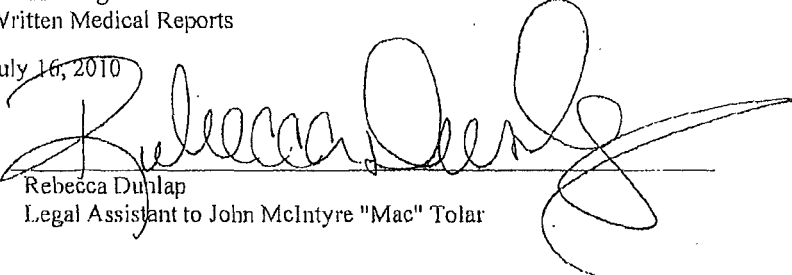
The undersigned certifies that she is an employee at MCANGUS GOUDELOCK & COURIE, and that she has served, on the date set forth below, a copy of the document described below, in the above entitled action to the following persons, pursuant to Section 15-9-930 and Section 15-9-940 of the Code of Laws of South Carolina, 1976, by depositing a copy of same in the United States Mail, postage prepaid, addressed to:

TO: Preston F. McDaniel, Esquire
The McDaniel Law Firm
1315 Elmwood Avenue
Columbia, South Carolina 29201

VIA HAND DELIVERY
S. C. WORKERS' COMPENSATION
COMMISSION
1333 Main Street, Suite 500
Columbia, South Carolina 29201

DOCUMENT: Pre-Hearing Brief and Notice of Witnesses and
Written Medical Reports

DATE OF MAILING: July 16, 2010


Rebecca Dunlap
Legal Assistant to John McIntyre "Mac" Tolar

South Carolina Workers' Compensation Comm. in
 1333 Main Street, Suite 500
 Post Office Box 1715
 Columbia, South Carolina 29202-1715
 (803) 737-5739
 www.wcc.sc.gov



PRE-HEARING BRIEF
 WCC File No: 0710622

Antonio Lazaro	608-16-1807	Burriss Electrical
Claimant's Name	SSN	Employer's Name
101 Rolling Rock Rd.		1251 N. Lake Drive
Columbia, South Carolina 29212		Lexington, South Carolina 29072
Address City State Zip		Address City State Zip
(803) 798-8731		CompTrust AGC of the Carolinas
Home Phone #	Work Phone #	Insurance Carrier
	John McIntyre "Mac" Tolar	(803) 227-4916
	Preparer's Name	Phone Number

A claim for workers' compensation benefits is made based on the following grounds:

Injury Illness Repetitive Trauma

1. Comp. Rate: \$406.46 2. AWW: \$ 609.66 Date of Injury July 6, 2007
3. Type of injury and body part(s): Defendants have admitted since date of accident that Claimant sustained a permanent physical brain injury.
4. Facts in controversy: Is Claimant's Guardian ad Litem entitled to a partial lump-sum payment of Claimant's lifetime benefits?
5. Legal issues involved: See Number 4 above.
6. Unusual aspects: None.
7. Witnesses (designate if expert) Decidora Lazaro (Claimant's wife).
8. Exhibits: Rated Age Quotes – MetLife, John Hancock, Pacific Life, and Prudential (dated 5/5/10-5/14/10)(consisting of 4 pages).
9. Medical evidence: (Indicate report pursuant to R.67-612; deposition or appearance) Defendants intend to rely on evidence submitted by the Claimant.
10. Name, address, and specialty, if any, of the treating physician: Dr. Charmaine George, The Brian Nursing Center, 3514 Sydney Road, Columbia, SC 29201.
11. Impairment rating(s); body part(s); physician and date of opinion: Claimant is permanent and totally disabled.
12. I am amending my Form 50/51 in the following manner: Not applicable.

I verify the contents of this form are accurate and true to the best of my knowledge.

SIGNATURE _____

Email: mtolar@mgclaw.com

DATE OF HEARING: July 28, 2010

Time needed for hearing: 1 hour

On behalf of Claimant Employer

File this form and proof of service on the opposing party according to R.67-611 and R.67-212. Do not send medical reports. Commissioners reserve the right to admit expert witnesses at hearings.

SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION

W.C.C. FILE NO: 0710622

ANTONIO LAZARO, }
Employee, }
 }
Claimant, }
vs. }
BURRISS ELECTRICAL, }
Employer, }
AND }
COMPTRUST AGC OF THE CAROLINAS, }
Carrier, }
Defendants. }

**NOTICE OF WITNESSES AND
WRITTEN MEDICAL REPORTS
TO BE INTRODUCED AS
DIRECT EVIDENCE ON BEHALF
OF DEFENDANT**

TO: SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION AND
PRESTON F. MCDANIEL, ESQUIRE:

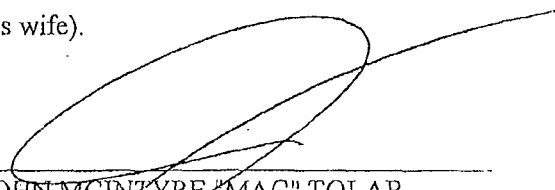
YOU ARE NOTIFIED that the Defendants, pursuant to the provisions of the South Carolina Workers' Compensation Act and Section 1-23-330 of the South Carolina Code of Laws (Cum. Supp. 1988) submit the following medical records and other documents as evidence:

APA#	DOCTOR/EXHIBITS	DATES	PAGES
5.	Rated Age Quotes	5/5/10-5/14/10	15-18

YOU ARE FURTHER NOTIFIED that you have the right to cross-examine or otherwise oppose this evidence and, should you desire to exercise this right, you are to promptly schedule the deposition of any provider whose records are submitted, for the purposes of cross-examination, or otherwise promptly submit opposing medical records into evidence.

YOU ARE FURTHER NOTIFIED that these records, or photocopies of the same, will be provided to the South Carolina Workers' Compensation Commission for insertion in their file and for consideration as evidence on behalf of the Defendants.

YOU ARE FURTHER NOTIFIED that the following witnesses may be called on behalf of the Defendants: Decidora Lazaro (Claimant's wife).



JOHN MCINTYRE "MAC" TOLAR
MCANGUS GOUDELICK & COURIE, L.L.C.
Post Office Box 12519, Capitol Station
700 Gervais St. Suite 300
Columbia, South Carolina 29211-2519
(803) 779-2300
Attorneys for the Employer/Carrier

Columbia, South Carolina
July 16, 2010

200 Park Avenue, New York, NY 10166
Phone: 1-800-638-0051, prompt 4
Fax: 1-908-552-3101
Email: rateage@metlife.com



RATED AGE QUOTE

TO: RINGLER ASSOCIATES, INCORPORATED
FAX: (704) 544-6556
DATE: May 14, 2010

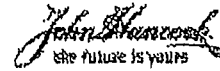
Thank you for your recent Rated Age request. Please find the result for the individual cited below.

NAME: ANTONIO LAZARO
DOB: July 4, 1969
RESULT: The rated age is: 61.

PLEASE NOTE THE FOLLOWING:

- ✓ THIS RATED AGE IS BASED ON THE ABOVE DATE OF BIRTH.
- ✓ AGE RATING IS VALID FOR 12 MONTHS FROM THE DATE OF THIS COMMUNICATION.

If you received this correspondence in error or have questions regarding the result, please call 800-638-0051 and select prompt 4.



Structured Settlement Underwriting Rated Age Quote

Date of Quote: 05/06/2010

Broker: Charlotte - Ringler (F: (704) 544-6556)

Name: Antonio Lazaro

DOB: 07/04/1969

Gender: Male

Rated Age: 63

The rated age expiration date is 11/06/2010

Comments:

Arnilda Panopio, BSN
Medical Underwriter
603-531-4908

John Hancock Structured Settlements
1-866-ASK-JHSS (phone)
1-617-450-8145 (fax)
www.settlementsense.com

Insurance products are underwritten by John Hancock Life Insurance Company (U.S.A.) (Not licensed in New York), Boston MA 02117 and John Hancock Life Insurance Company of New York, Valhalla NY 10595.

For Financial Professional Use Only. Not For Use With The Public

0000:SS0028

@ John Hancock, Proprietary & Confidential. The information transmitted is intended only for the person or entity to which it is addressed and may contain confidential and/or privileged material. Any review, retransmission, dissemination, or other use of, or taking of any action in reliance upon, this information by persons or entities other than the intended recipient is prohibited. If you received this in error, please contact the sender and delete the material.

**PACIFIC LIFE
& ANNUITY COMPANY**

STRUCTURED SETTLEMENTS

700 Newport Center Drive
Newport Beach, CA 92660

Toll-free: 877-784-0622 FAX: 877-219-8784

Medical Underwriting Review

Date: 05/11/2010 17:41
Claimant Name: Antonio Lazaro
Sex: M
DOB: 7/4/1969
Age: 41
Rated Age: 63
Comments:
Rated age expires: 11/6/2010
Sent To: RIN NC, Chart;

This information is being provided to an appointed broker for the exclusive use of pricing a claimant's qualified structured settlement annuity offered by Pacific Life & Annuity Company.

The rated age is not valid for non-qualified or attorney fee quotes.

Any further distribution or other use of this information is strictly prohibited.

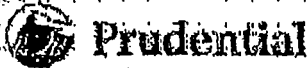
The information in this facsimile and any attachments are for the sole use of the intended recipient and may contain privileged and confidential information. If you are not the intended recipient, any use, disclosure, copying, or distribution of this message or attachment, is strictly prohibited. If you believe that you have received this facsimile in error, please contact the sender immediately and destroy this facsimile and all of its attachments.

063

NO. 678 P. 4

- 17 - RINGLER CHARLOTTE

MAY 20 2010 11:56AM



Structured Settlement Unit
200 Wood Avenue South
Iselin, NJ 08830-2706
Tel: 800-521-5774
Fax: 800-658-5280

May 5, 2010

Ringler Associates, Inc.
10801 Johnston Road, Suite 112
Charlotte, NC 28226

Re: Antonio Lazaro
Sex: M
Date of Birth: 07/04/1969

From our underwriting review we have determined that the following age should be used in pricing this case.

SIXTY-FIVE [65]

This age is good for SIX MONTHS from the date shown above. The Prudential reserves the right to change the rated age if we receive additional medicals which indicate a change in the claimant's condition, or we discover an error in the calculation. In that case we will notify you in writing of the new rated age.

Please note that rated ages should not be used when pricing life contingent lump sums. Actual age (age nearest birthday) should be used instead.

When purchasing a substandard annuity, please include a copy of this letter with the application.

Medical Desk
Structured Settlement Unit

Decision Date: 05-05-2010 02:47PM

THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS CONFIDENTIAL INFORMATION INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT OR AN AGENT RESPONSIBLE FOR DELIVERING IT TO THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY REPERMATION, DISTRIBUTION OR COPY OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US BY MAIL. THANK YOU.

[REDACTED]

064

South Carolina Workers' Compensation Commission

WCC Form

0710622

P.O. Box 1715 • 1333 Main Street, Suite 500

Carrier File #

S266-07-01390

Columbia, South Carolina 29202-1715

Carrier Code #

(803) 737-5700

Employer FEIN

Antonio Lazaro 608-16-1807
 Claimant's Name SSN
 101 Rolling Rock Rd.
 Columbia, South Carolina 29212
 Address City State Zip
 (803) 798-8731
 Home Phone #
 Work Phone #
 John McIntyre "Mac" Tolar
 Preparer's Name

Burriss Electrical
 Employer's Name
 1251 N. Lake Drive
 Lexington, South Carolina 29072
 Address City State Zip
 CompTrust AGC of the Carolinas
 Insurance Carrier
 (803) 227-4916
 Phone Number

Request for Commission Review by claimant employer (check one)

The undersigned makes application for review of the findings of the Commissioner in the above captioned case. The request for review is based on the following grounds: (State the grounds of your appeal in the form of questions presented. Each question presented must contain a concise statement of one proposition of law or fact. Refer to evidence by title and exhibit number. Use additional pages, if necessary).

1. Did the Commissioner err in determining as a finding of fact that the Claimant's debts to include the cost of a new \$30,000.00 vehicle be paid by the Carrier as a partial lump-sum payment against lifetime benefits?
2. Did the Commissioner err as a conclusion of law granting the Claimant a partial lump-sum payment in this matter?
3. Did the Commissioner err in ordering the Defendants to make a partial lump-sum payment in the amount of \$152,568.75?
4. Did the Commissioner err in ordering that the Claimant be allowed up to \$30,000.00 in order to purchase a new car?

Check one) Oral argument is is not requested. Appellant's request for oral argument is waived if not indicated on this form.

certify that I have served this document pursuant to R.67-211 by delivering a copy to:

Preston F. McDaniel, Esquire
 The McDaniel Law Firm
 1315 Elmwood Avenue
 Columbia, South Carolina 29201

RECEIVED

OCT 27 2010

FRONT DESK
SC Workers' Comp Comm

on the 27th day of October, 2010 by first class mail; personal service; certified mail.

Preparer's Signature

Attorney for Employer/Carrier
Title

October 27, 2010
Date

Check this box if you are not represented by an attorney.

If the claimant appeals and is representing himself or herself, the Judicial Department will prepare the additional copies of this form and serve this form on the opposing party. R.67-701B. Otherwise, file the original and 4 copies of this form with the Judicial Department. The appeal must be postmarked no later than 14 days from the date of service of the Hearing Commissioner's decision. R.67-701 and R.67.205. Attach the filing fee to this form. Attach a Form 32 if you are unable to pay the filing fee. Refer to R.67-701 through R.67-711 for additional information.

STATE OF SOUTH CAROLINA
WORKERS' COMPENSATION COMMISSION
FILE NO.: 0710622

ANTONIO LAZARO,)	
CLAIMANT)	HEARING BEFORE
vs.)	
)	FULL COMMISSION
BURRIS ELECTRICAL, INC,)	
EMPLOYER)	PANEL A
)	
COMPTRUST AGC OF THE)	
CAROLINAS,)	
CARRIER)	

COPY

WORKERS' COMPENSATION COMMISSION HEARING TAKEN
BEFORE NADINE A. GARRETT, A NOTARY PUBLIC IN AND FOR THE
STATE OF SOUTH CAROLINA, COMMENCING AT THE HOUR OF 9:29 AM
ON FEBRUARY 23, 2011, AT SOUTH CAROLINA WORKERS'
COMPENSATION COMMISSION, 1333 MAIN STREET, COLUMBIA, SOUTH
CAROLINA.

A P P E A R A N C E S:

FOR THE CLAIMANT
PRESTON F. MCDANIEL, ESQUIRE
MCGOWAN HOOD FELDER & JOHNSON, LLC
1405 CALHOUN STREET
COLUMBIA, SOUTH CAROLINA 29202
(803) 779-0100

FOR THE EMPLOYER/CARRIER
LONDON "ROCKY" HUGHEY, ESQUIRE
MCANGUS GOUDELOCK & COURIE, LLC
POST OFFICE BOX 12519
COLUMBIA, SOUTH CAROLINA 29211
(803) 779-2300

INDEX

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CERTIFICATE	21

1 home, it looks like to me there 93,000 left on it?

2 MR. HUGHEY: That's correct.

3 COMMISSIONER LYNDON: And if he's retiring high
4 interest debt, that, in effect, is income; is it not?

5 MR. HUGHEY: We'd agree with that, Your Honor.

6 COMMISSIONER LYNDON: And then if the
7 automobile, rather than \$30,000, was let's say
8 between 20 and 25,000, would that be -- can he get in
9 a car?

10 MR. MCDANIEL: He's in a permanent vegetative
11 state, Commissioner.

12 COMMISSIONER LYNDON: If it was something less
13 than 30,000 and I see the Bank of America, Airline
14 Financial, apparently these are loan companies, I
15 would assume that's high interest debt. Penny's is a
16 big bill there. But if the 139,282.75 came exactly
17 to the number of -- I realize it does not match the
18 152,000 or whatever it came out to, would we be here?
19 You see what I'm saying? It seems to me retiring the
20 high interest debt, I don't know what his mortgage
21 interest rate is, but that, in effect, is like
22 getting -- in my mind at least, like having a higher
23 comp rate check, simply because of not having to pay
24 it out. Or Social Security Disability, whatever he's
25 got, that would be net money. The automobile, if

1 COMMISSIONER WILLIAMS: In all fairness, though,
2 I mean, whether or not this stuff is paid off or not,
3 it appears that the order on page 8 does make note he
4 has two sons, 16 and 17. They both are it looks like
5 to be pretty good soccer players. Their grades are
6 actually very good, B and B+ in advanced courses.
7 They're going to be going to college soon. So,
8 paying off some of this stuff and with the vehicle --
9 and I have another question about the vegetative
10 state. Is he in a coma like state or is he --

11 MR. MCDANIEL: He's basically brain dead. He's
12 in a permanent vegetative state.

13 COMMISSIONER WILLIAMS: I mean, it's obviously
14 retiring some of these debt issues is going to help
15 when these kids go to college. Would you agree with
16 that?

17 MR. HUGHEY: I'd agree with that, Your Honor.

18 COMMISSIONER LYNDON: He'll have one or two
19 choices, as I see it. If he doesn't get his house
20 paid off, he has to down size to a trailer. If he's
21 in a vegetative state, he can't do that. I'm not
22 advocating. I'm just saying it seems to me -- the
23 first thing you mentioned was the price of the car.
24 I mean, surely the good -- I don't know he can get
25 too much for less than 25,000 if he has to be put in

1 it lying down. I don't know.

2 COMMISSIONER ROCHE: This is a car for his
3 family. This is not a car for the Claimant; is that
4 --

5 MR. MCDANIEL: It's a car for the family.

6 COMMISSIONER ROCHE: It's not a car for the
7 Claimant ever to be in.

8 COMMISSIONER LYNDON: Right. Can he not ride at
9 all?

10 COMMISSIONER ROCHE: No.

11 COMMISSIONER LYNDON: He's in a bed?

12 MR. MCDANIEL: He's in Brian Center and will be
13 there for the remainder of his life.

14 COMMISSIONER ROCHE: He doesn't live in the
15 house?

16 MR. MCDANIEL: He's being fed by tube feed,
17 physical therapy. Brain dead.

18 COMMISSIONER LYNDON: Okay. I understand.

19 MR. HUGHEY: Your Honor, in sum, again, it's our
20 position that certainly if the Lazaro's do need
21 another vehicle, again, they have -- unfortunately
22 they have one less person driving in the family.
23 They have two children that it sounds like go to the
24 same school, Irmo High School. We think certainly
25 they can be provided with reasonable transportation

STATE OF SOUTH CAROLINA)
 COUNTY OF)

Decidora Lazaro)

Plaintiff,)

Defendant.)

IN THE FAMILY COURT OF THE)
 JUDICIAL CIRCUIT)

FINANCIAL DECLARATION)
 OF)

COPY

Case No: _____ - DR - _____

HUSBAND/FATHER

Address
 Age
 Occupation
 Employer
 Employer
 Address

WIFE/MOTHER

Address I. Columbia, SC 29212
 Age 42
 Occupation machine operator
 Employer American Solid Woven
 Employer 807 Bluff Rd., Columbia, SC 29201
 Address

Gross Monthly Income	Husband/Father	Wife/Mother
Principal Earnings from Employment ¹		\$1664.00
Overtime, Tips, Commission, Bonuses ²		\$0.00
Pensions, Retirement, and Annuities income		\$0.00
Additional Employment income		
Social Security Benefits (SSA) and VA Benefits	\$425 for Antonio, \$26 for the kids	
Disability and Worker's Compensation Benefits	\$1,624.00	
Unemployment and AFDC		
Spousal or Child Support (from other marriage/relationship)		
Dividends, Interest, Trust Income, and Capital Gains		
Rental Income and Business Profits		
Other (Specify):		
TOTAL GROSS MONTHLY INCOME	\$2,075.00	\$1,664.00

Payroll Deductions from Monthly Income	Husband/Father	Wife/Mother
Federal Income Tax ³		\$4.48
State Income Tax		\$56.98
Social Security and Medicare Tax (FICA)		\$127.28
Self-Employment Tax		
Health and Dental Insurance (Adult)		
Health and Dental Insurance (Child)		
Union Dues		
Voluntary Retirement Contribution (401(k), 457, IRA)		
Mandatory Retirement Contribution		
Savings Plan		
Other (Specify):		
TOTAL MONTHLY DEDUCTIONS		\$188.74
NET MONTHLY INCOME⁴	\$2,075.00	\$1,475.26

Estimate monthly expenses: (Specify which party is the custodial parent and list name and relationship of all members of household whose expenses are included.)

MONTHLY EXPENSES ⁵	Husband/Father	Wife/Mother
Residential Rent Payment		
Note or Mortgage Payment on Residence(s)		\$744.00
Food and Household Supplies ⁶		\$800.00
Utilities, Water, and Garbage Collection		\$305.00
Telephone and Cellular Phone		\$212.00
Medical, Dental and Disability Insurance Premiums (not deducted from paycheck)		
Child Support (from other relationship)		
Work Related Day Care		
Spousal Support (from prior marriage)		
Auto Payment		\$384.48
Auto Insurance, taxes, gasoline, and maintenance ⁷		\$150.50 (\$903.00 every six months)
SUBTOTAL:		
	\$2,595.98	
Real Property Tax on Residence(s)		\$51.09 (\$613.06 for 2009)
Maintenance for household ⁸		\$0.00
Adult Clothing		\$100.00
Children's Clothing ⁹		\$250.00
Cable Television, Satellite, and Internet/Online Services		\$167.95
Laundry and Dry Cleaning ¹⁰		\$55.00
Medical and Dental Expenses (not paid by insurance)		
Prescriptions, Glasses, and Contacts (not paid by insurance)		\$30.00
Children's incidental expenses ¹¹		\$200.00
School lunches, supplies, field trips, and fees ¹²		\$50.00
Entertainment ¹³		\$100.00
Adult Incidental expenses ¹⁴		
All Installment payments ¹⁵		\$540.00
SUBTOTAL:		
	\$1,594.04	
TOTAL MONTHLY EXPENSES		\$4,190.02

Installment Loan Payments Section

Creditor	For	Monthly Payment	Balance	Owed by ¹⁶
Bank of America	Credit Card	\$15.00	\$395.00	Revolving
Arrow Financial Services		\$125.00	\$3,038.98	
LVNV Funding, LLC	JC Penny Credit Card	\$400.00	\$12,848.77	

Other Debts and Obligations *not* payable in monthly installments

Creditor	For	Date Payable	Balance	Owed by ¹⁶

Are you currently in Bankruptcy? YES NO

Are any obligations listed above, including mortgage and note payments, in arrears? YES NO

If yes, please list the obligations in arrears:

All Marital Property Known to Parties

Assets	Husband/Father	Wife/Mother	Joint
Cash and Money in Checking Account(s) ¹¹		\$300.00	\$150.00
Money in Savings Account(s), Credit Union, Money Mkt, or Cert. of Dep.			
Value of Voluntary Retirement Account(s)			
Value of Pension Account			
Value of Publicly Held Stocks, Bonds, Securities, Mutual Funds ¹⁸			
Value of Privately Held Stocks and Other Business			
Value of Real Estate - Net of Mortgage Balances ¹⁹	****		\$20,460.00 (house)
Value of All Other Property ¹⁷			\$10,965.00 (car)
TOTAL ASSETS			

Any Non Marital Property Known to Parties

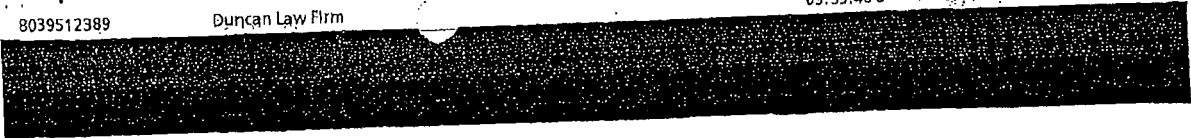
Description of Asset	Title Owner	Date of Acquisition	Source of Funds to Acquirer	Estimate Present market Value

If total assets are less than \$300,000.00, sign and have notarized.

If total assets are greater than \$300,000.00, itemize assets by completing additional sections below and sign and have notarized.

Financial Accounts Section¹⁸

Owner	Name of Institution	Type of Account	Balance
Decidora Lazaro	Bank of America	checking	\$300.00
Antonio & Decidora Lazaro	Bank of America	checking	\$150.00



Voluntary Retirement Accounts and Pension Accounts Section

Type of Account	Value

Publicly Held Stocks, Bonds, Securities, Mutual Funds Section (Non-Retirement)¹⁹

Name of Company	Number of Shares/Type of Account	Value

Real Estate Section²⁰

Owner	Address	Value	Mortgage Balance	Mortgage Equity
Antonio & Decidora Lazaro	Columbia, SC 29212	\$113,460	\$93,000	

Decidora Lazaro
Signature

Sworn to before me this 19th of June
2010

Danielle C. Johnson (SEAL)
Notary Public for South Carolina
My commission expires: 5/29/2019

HILTON LAZARO

Decidora-Lazaro

United States Treasury ¹⁵⁻⁵¹ ₀₀₀ P 339,739,084

06 09 10 7 PHILADELPHIA, PA 2055.16607232

2055 16607232 28043000 S1 G P

Pay to the order of **DECIDORA LAZARO FOR ANTONIO LAZARO** 32

COLUMBIA SC 29212-3018

SOC SEC FOR MAY VOID AFTER ONE YEAR *****425*00

000154

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⑈ 20559 ⑈ ⑆000000518⑆ 166072324 ⑈ 080610

7/8

10:00:08 a 07-20-2010

Duncan Law Firm

8039512389



United States Treasury

15-51
000

P 326,688,259



Pay to
the order of

04 14 10 82 PHILADELPHIA, PA
2055 12265908 28043000 S1 G P
DECIDORA LAZARO FOR 08
OLIVER A LAZARO
RD
COLUMBIA SC 29212-3018

Check No.

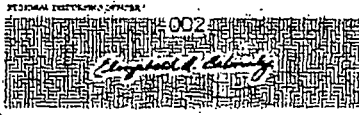


2055 12265908

VOID AFTER ONE YEAR

SOC SEC
FOR MAR

\$*****13*00



⑈20559⑈ ⑆000000518⑆ 12265908⑆ 080410

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10:00:18 07-20-2010

Duncan Law Firm

8039512389



United States Treasury

15-51
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P 326,688,260

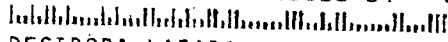
Check No.



2055 12265909

04 14 10 72 PHILADELPHIA, PA
2055 12265909 28043000 S1 G P

Pay to
the order of



DECIDORA LAZARO FOR 09
ANTONIO D LAZARO
COLUMBIA SC 29212-3018

SOC SEC
FOR MAR

VOID AFTER ONE YEAR

\$*****13*00

BY DIGITAL OVERPRINTING OFFICES



⑈ 20559 ⑈

⑆000000518⑆ 122659097⑈ 080410

077

16/07

Decidota 42
Antonio 17
~~FAZINA~~
Oliver 10

Present / 5-10 years Financial Needs of Family

Compensation Rate = \$406.46

Name of I. <u>Expense</u>	<u>Amount</u>	<u>Weeks</u>	<u>Years of Benefits</u>
1. Home	\$94,000.00	(232 wks)	4.5 yrs
2. Loans	\$16,000.00	(39 wks)	0.75 yrs
3. Cars - 3x	\$30,000.00 \$25,000.00 <u>\$25,000.00</u> \$80,000.00	(197 wks)	3.8 yrs
4. College \$25,000.00 x 2 x 4yrs	\$200,000.00	(493 wks)	9.5 yrs
5. Health Insurance:			
Wife	\$		
Children	\$		
Total	\$390,000.00		18.6 yrs

II. Loss Gross Income til Oliver Age 25 = 9years

At \$609.66/wk	(\$31,702.32) x 9	=	\$285,320.08
At > 10%/year	\$48,568.00 x 9	=	\$437,112.00

THE STATE OF SOUTH CAROLINA
In The Court of Appeals

APPEAL FROM THE SOUTH CAROLINA
WORKERS' COMPENSATION COMMISSION

WCC File No. 0710622

Antonio Lazaro, by and
through his GAL Decidora Lazaro, Claimant..... Respondent,

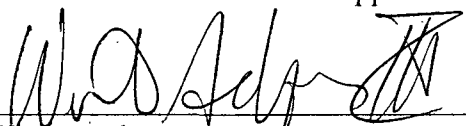
v.

Burriss Electrical, Employer,
and
CompTrust AGC of the Carolinas Appellants..

PROOF OF COMPLIANCE

The undersigned hereby certifies that the Record on Appeal filed in this matter contains all the material proposed to be included by the parties to this matter and does not include any other material. The undersigned further certifies that the Record on Appeal filed in this matter complies with the South Carolina Supreme Court's August 13, 2007 Order re: Interim Guidance Regarding Personal Data Identifiers and Other Sensitive Information in Appellate Court Filings.

December 6, 2012



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