## State of Nebraska Department of Administrative Services: Risk Management Division Tort Claim Payments for Calendar Year 2020 Pursuant to Neb. Rev. Statue 81-8,226

Claimant Name: Claim Number: Organization: Description:	Jerry and Krista Welch 2020-19850 Game & Parks Commission Claimant alleges that a front mount r Weigand Campground.	Resolution Date: January 6, 2020 Resolution: Risk Manager Approval Resolution Amount: \$65.00 mower hit the side of their camper while camping at the Lewis and Clark
Claimant Name: Claim Number: Organization: Description:	Wayne Miller/Schiffermiller Law 2018-17436 Dept of Correctional Services Claimant alleges the State neglgentl	Resolution Date: January 9, 2020 Resolution: Settlement Resolution Amount: \$20,000.00 y failed to provide him with prompt and appropriate medical care and treatment.
Claimant Name: Claim Number: Organization: Description:	-	Resolution Date: January 16, 2020 Resolution: Risk Manager Approval Resolution Amount: \$210.00 was driving on Hwy 50 between Giles Rd and Chandler Rd, workers were using a r the bride, when a big piece of concrete flew and hit the right side mirror of her vehicle.
Claimant Name: Claim Number: Organization: Description:	Michael Conroy Inmate #87686 2019-19143 Dept of Correctional Services Claimant alleges that his canteen wa	Resolution Date: January 23, 2020 Resolution: Risk Manager Approval Resolution Amount: \$59.71 as lost due to staff negligence.
Claimant Name: Claim Number: Organization: Description:	Deanna Biesecker 2020-19955 Department of Transportation Claimant alleges that while driving of causing it to break.	Resolution Date: January 23, 2020 Resolution: Board Approval Resolution Amount: \$1,201.80 n highway 385 under I-80 bridge, near Chappell NE, an object fell and hit her windshield
Claimant Name: Claim Number: Organization: Description:	with a sample of salmonella bacteria	Resolution Date: January 31, 2020 Resolution: Risk Manager Approval Resolution Amount: \$2,511.38 biology class at Wayne State College, a group of students were conducting a lab experiment a grown in fecal water. She alleges that a student pushed on the syringe and caused it to to go to the hospital and was treated for severe dehydration and salmonella poisoning.

Claimant Name:	Dale Lee Grant	Resolution Date: February 3, 2020
Claim Number:	2020-19814	Resolution: Risk Manager Approval
Organization:	Dept of Health & Human Services	Resolution Amount: \$132.95
Description:	Claimant alleges that during a room	In search, some of his personal property was damaged by staff.
Claimant Name: Claim Number: Organization: Description:	Jerry Tlamka 2020-20138 Dept of Correctional Services. Claimant alleges that his leg brace the x-ray machine.	Resolution Date: February 3, 2020 Resolution: Risk Manager Approval Resolution Amount: \$1,153.37 was broken by the Nebraska State Penitentiary while they were running it through
Claimant Name:	Clarence Moore	Resolution Date: February 11, 2020
Claim Number:	2020-20198	Resolution: Risk Manager Approval
Organization:	Dept of Dept of Health & Human	Resolution Amount: \$29.99
Description:	Claimant alleges due to negligent s	taff, personal property was damaged.
Claimant Name:	Columbus Board of Real	Resolution Date: February 11, 2020
Claim Number:	2020-20199	Resolution: Risk Manager Approval
Organization:	State Patrol	Resolution Amount: \$110.00
Description:	Claimant alleges their realators lock	K box was broken by State Patrol.
Claimant Name:	Charles B Gray Inmate #86242	Resolution Date: February 12, 2020
Claim Number:	2019-19465	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services	Resolution Amount: \$8.01
Description:	Claimant alleges that he received s	ome extra canteen and sent it back but didn't get the refund.
Claimant Name:	Cecil Guerra III Inmate #76565	Resolution Date: March 9, 2020
Claim Number:	2019-19511	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services	Resolution Amount: \$18.98
Description:	Claimant alleges loss of personal p	roperty due to staff negligence.
Claimant Name: Claim Number: Organization: Description:	State Farm Insurance 2020-19870 Dept of Correctional Services Claimant alleges that a big metal na to her front bumper.	Resolution Date: March 9, 2020 Resolution: Risk Manager Approval Resolution Amount: \$820.31 ail sticking out of a parking block was caught under her front bumper which caused damage

Claimant Name: Claim Number: Organization: Description:	1 1	Resolution Date: March 10, 2020 Resolution: Risk Manager Approval Resolution Amount: \$3.25 63.25 for the loss of laundry detergent.
Claimant Name: Claim Number: Organization: Description:		Resolution Date: April 17, 2020 Resolution: Settlement Resolution Amount: \$2,000.00 that the State failed to disable the traffice signals at the construction site resulting in
Claimant Name: Claim Number: Organization: Description:	•	Resolution Date: April 30, 2020 Resolution: Risk Manager Approval Resolution Amount: \$105.09 f NDCS staff, property was stolen from cell.
Claimant Name: Claim Number: Organization: Description:		Resolution Date: May 5, 2020 Resolution: Risk Manager Approval Resolution Amount: \$54.05 ce of NDCS staff his property was stolen from his locker.
Claimant Name: Claim Number: Organization: Description:	•	Resolution Date:May 12, 2020Resolution:Risk Manager ApprovalResolution Amount:\$30.16630.16 for an order that was allegedly received by prison staff but not delivered to Claimant.
Claimant Name: Claim Number: Organization: Description:		Resolution Date: May 18, 2020 Resolution: Board Approval Resolution Amount: \$39.89 sonal items were not returned to him after he was placed in isolation.
Claimant Name: Claim Number: Organization: Description:	Scott Shannon Inmate #72262 2019-19064 Dept of Correctional Services Claimant alleges loss of property due	Resolution Date:May 27, 2020Resolution:Risk Manager ApprovalResolution Amount:\$520.47to staff negligence.

Claimant Name: Claim Number: Organization: Description:	Austin Reyes Jr. Inmate #89722Resolution Date: May 27, 20202020-19954Resolution: Risk Manager ApprovalDept of Correctional ServicesResolution Amount: \$23.39Claimant alleges that he was charged \$23.00 from the Diagnostic and Evaluation Center after he was transferred to NSP, a and never got his money back.
Claimant Name: Claim Number: Organization: Description:	William Reed Inmate #85697Resolution Date:May 27, 20202020-19959Resolution:Risk Manager ApprovalDept of Correctional ServicesResolution Amount:\$53.50Claimant alleges that while he was placed in Segregation someone signed for him, but he never received his canteen.
Claimant Name: Claim Number: Organization: Description:	Samuel J. Johnson Inmate #87712Resolution Date:May 29, 20202019-19010Resolution:Risk Manager ApprovalDept of Correctional ServicesResolution Amount:\$7.77Claimant alleges loss of one of his t.shirts due to staff negligence
Claimant Name: Claim Number: Organization: Description:	Tyler J. Robinson Inmate #210496Resolution Date:May 29, 20202020-20164Resolution:Risk Manager ApprovalDept of Correctional ServicesResolution Amount:\$53.25Claimant alleges he never received his canteen ordder due to staff negligence.
Claimant Name: Claim Number: Organization: Description:	Luis Genchis Cortes Inmate #65818Resolution Date:May 29, 20202020-20283Resolution:Risk Manager ApprovalDept of Correctional ServicesResolution Amount:\$88.24Claimant alleges that property was damaged by dog.
Claimant Name: Claim Number: Organization: Description:	Daniel Mangiameli Inmate #77366Resolution Date:May 29, 20202020-20312Resolution:Risk Manager ApprovalDept of Correctional ServicesResolution Amount:\$100.00Claimant alleges that due to the negligence of NDCS staff, his tv was stolen from his cell.
Claimant Name: Claim Number: Organization: Description:	Tralan DJD Carr Inmate #78511Resolution Date:May 29, 20202020-20406Resolution:Risk Manager ApprovalDept of Health & Human ServicesResolution Amount:\$53.50Claimant alleges that due to negligence of staff at Norfolk Regional Center, they lost 2 pairs of his shorts that were sent to laundry.
Claimant Name: Claim Number: Organization: Description:	Eric Lozano Inmate #77098Resolution Date:May 30, 20202019-18830Resolution:Risk Manager ApprovalDept of Correctional ServicesResolution Amount:\$10.53Claimant alleges loss of property due to staff negligence.

Claimant Name: Claim Number: Organization: Description:	•	Resolution Date: May 30, 2020 Resolution: Risk Manager Approval Resolution Amount: \$3.96 I for a couple items by did not receive them.
Claimant Name:	Michael Exley Inmate # 81599	Resolution Date: May 30, 2020
Claim Number:	2019-19183	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services.	Resolution Amount: \$13.25
Description:	Claimant alleges that he did not receiv	ve his canteen but was charged for it.
Claimant Name:	Melicio Camacho-Dejesus	Resolution Date: May 30, 2020
Claim Number:	2019-19192	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services	Resolution Amount: \$9.94
Description:	Claimant alleges that he did not receiv	ve his canteen.
Claimant Name:	Darren Smith Inmate # 83720	Resolution Date: May 30, 2020
Claim Number:	2019-19368	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services.	Resolution Amount: \$85.59
Description:	Claimant alleges that he ordered a tal	blet and paid for it, but never received it.
Claimant Name:	Timothy Reyes Inmate #89328	Resolution Date: May 30, 2020
Claim Number:	2019-19577	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services	Resolution Amount: \$88.87
Description:	Claimant alleges loss of his personal	property due to staff negligence.
Claimant Name: Claim Number: Organization: Description:	•	Resolution Date: May 30, 2020 Resolution: Risk Manager Approval Resolution Amount: \$24.29 noved from his account without his knowledge.
Claimant Name:	Tyrod Lee Inmate # 87305	Resolution Date: May 30, 2020
Claim Number:	2019-19597	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services.	Resolution Amount: \$6.15
Description:	Claimant alleges that he did not receiv	ve his canteen after he was charged.
Claimant Name:	Ramona Stubben Inmate #99257	Resolution Date: June 3, 2020
Claim Number:	2019-18820	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services	Resolution Amount: \$90.00
Description:	Claimant alleges that her television wa	as broked due to staff negligence.

Claimant Name:	Kory Pierce Inmate # 83158	Resolution Date: June 3, 2020
Claim Number:	2019-19200	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services	Resolution Amount: \$41.73
Description:	Claimant alleges that money was tal	ken out of his account but did not receive his canteen.
Claimant Name:	Madeline Brooke Inmate #99803	Resolution Date: June 4, 2020
Claim Number:	2019-18730	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services	Resolution Amount: \$79.99
Description:	Claimant alleges that her tablet was	broken due to staff negligence.
Claimant Name: Claim Number: Organization: Description:	Jerald Burgess, Jr. Inmate #87056 2019-18880 Dept of Correctional Services Claimant alleges his dentures were lab for adjustments.	Resolution Date: June 4, 2020 Resolution: Risk Manager Approval Resolution Amount: \$1,083.00 lost when the dental staff at Omaha Correctional Center took them to their
Claimant Name:	Chaz Hill Inmate # 84507	Resolution Date: June 5, 2020
Claim Number:	2019-18453	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services.	Resolution Amount: \$22.22
Description:	Claimant alleges that he was charge	ed but did not receive his commissary.
Claimant Name:	Derek W. Dixon Inmate #36413	Resolution Date: June 5, 2020
Claim Number:	2019-18801	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services	Resolution Amount: \$16.50
Description:	Claimant alleges that he paid for a h	nat in advance but never received it.
Claimant Name:	Samuel Johnson Inmate #87712	Resolution Date: June 5, 2020
Claim Number:	2019-19038	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services	Resolution Amount: \$5.68
Description:	Claimant allegeshe was charged for	a canteen items that he never received.
Claimant Name:	Anthony Lavallie Inmate #87286	Resolution Date: June 5, 2020
Claim Number:	2019-19072	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services	Resolution Amount: \$31.22
Description:	Claimant alleges that he did not rece	ive his order after he was moved to a different housing unit.

Claimant Name:	Carrie Hammers	Resolution Date: June 22, 2020
Claim Number:	2017-17188	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services	Resolution Amount: \$283.00
Description:	Claimant alleges their vehicle was da	amaged after a NDCS employee forced a box into their vehicle that didn't fit.
Claimant Name:	Mark Beckwith Inmate #72986	Resolution Date: June 29, 2020
Claim Number:	2020-20259	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services	Resolution Amount: \$42.00
Description:	Claimant alleges that due to negliend	ce of NDCS Staff, he has not received his earbuds that were ordered.
Claimant Name:	Jacey Anderson	Resolution Date: July 17, 2020
Claim Number:	2020-20276	Resolution: Risk Manager Approval
Organization:	Dept of Health & Human Services	Resolution Amount: \$1,000.00
Description:	Claimant seeking the reimbursement that resulted in the theft of Claimant's	t of insurance deductible due to an incident involving two escaped youth from YRTC s vehicle.
Claimant Name:	Kenneth Buckingham Inmate #88755	Resolution Date: July 17, 2020
Claim Number:	2020-20390	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services	Resolution Amount: \$8.16
Description:	Claimant alleges that a NDCS mainte	enace worker caused damages to Claimant's headphones.
Claimant Name:	Barney Miller	Resolution Date: July 17, 2020
Claim Number:	2020-20459	Resolution: Risk Manager Approval
Organization:	State Patrol	Resolution Amount: \$105.00
Description:	Claimant alleges that there was a hig	gh speed chase and that tire spikes were set out and hit his semi causing damages.
Claimant Name:	Timothy Reyes Inmate #89328	Resolution Date: July 21, 2020
Claim Number:	2020-20324	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services	Resolution Amount: \$52.89
Description:	Claimant alleges he ordered a necklace through a company and did not receive the necklace after it was received by central warehouse.	
Claimant Name:	Sandra Allen	Resolution Date: July 22, 2020
Claim Number:	2020-20305	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services	Resolution Amount: \$30.00
Description:	Claimant alleges that due to negliger son at NSP went missing and son d	nce of NDCS staff, a money order in the amount of \$120.00 that was intended for her id not receive the money order.
Claimant Name:	Matthew Schopke Inmate #88925	Resolution Date: July 27, 2020
Claim Number:	2020-20440	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services	Resolution Amount: \$14.98
Description:	Claimant alleges that due the neglige	ence of NDCS staff, puchased property was not delivered to him.

Claimant Name:	Thomas E. Freeman Inmate	Resolution Date: July 30, 2020
Claim Number:	2020-20233	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services	Resolution Amount: \$31.73
Description:	Claimant alleges that due to neglige	ence of NDCS staff, Claimant's canteen order went missing.
Claimant Name: Claim Number: Organization: Description:	<b>e</b>	Resolution Date: July 30, 2020 Resolution: Risk Manager Approval Resolution Amount: \$4,941.32 down North HWY 50, a metal sign had fallen off from a State pick up truck, and the the Claimant struck it, causing damages to vehicle.
Claimant Name:	Scott Hayes Inmate #81908	Resolution Date: July 31, 2020
Claim Number:	2019-19601	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services	Resolution Amount: \$53.82
Description:	Claimant alleges that he was charge	ed but did not receive his purchase.
Claimant Name:	Michael David Grossman Inmate	Resolution Date: July 31, 2020
Claim Number:	2020-19843	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services	Resolution Amount: \$107.89
Description:	Claimant alleges that his JP5 music	a tablet was to be released to his mother but in between transit, it was lost.
Claimant Name:	Daniel Arriaga Inmate #87421	Resolution Date: July 31, 2020
Claim Number:	2020-19889	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services	Resolution Amount: \$12.37
Description:	Claimant alleges that during a room	search Case Worker Gilbert broke his lamp.
Claimant Name:	Matthew Heffley	Resolution Date: August 10, 2020
Claim Number:	2020-20478	Resolution: Risk Manager Approval
Organization:	Department of Transportation	Resolution Amount: \$684.00
Description:	Claimant allegesthat equipment fell	out of the back of a State truck and caused damage to vehicle.
Claimant Name:	Billie Kothe	Resolution Date: August 10, 2020
Claim Number:	2020-20491	Resolution: Risk Manager Approval
Organization:	State Patrol	Resolution Amount: \$4,210.41
Description:	Claimant alleges that when travelling	g on I-80 he came upon some stop sticks and ran over them causing damage.

Claimant Name: Claim Number: Organization: Description:	Jessica Russell Inmate #99625Resolution Date: August 18, 20202020-20418Resolution: Risk Manager ApprovalDept of Correctional ServicesResolution Amount: \$54.70Claimant alleges that she sent out books from the facility to her brother, who states never received the books. Claimant seeking reimbursement for lost property.
Claimant Name: Claim Number: Organization: Description:	Kevin Asbury Inmate #210816Resolution Date:August 18, 20202020-20488Resolution:Risk Manager ApprovalDept of Correctional ServicesResolution Amount:\$12.50Claimant alleges that he did not order phone time and was charged for it on his canteen.
Claimant Name: Claim Number: Organization: Description:	David PetrResolution Date: August 18, 20202021-20514Resolution: Risk Manager ApprovalDept of Health & Human ServicesResolution Amount: \$12.95Claimant alleges that a team member of the Room Search Respond Team took a catalog of books when a room search was done, and is now missing.
Claimant Name: Claim Number: Organization: Description:	Pam GrutelResolution Date: August 20, 20202019-19515Resolution: Board ApprovalDept of Health & Human ServicesResolution Amount: \$2,400.00Claimant is requesting reimbursement for expenses of a foster child from 12/13/2017 to 5/21/18.
Claimant Name: Claim Number: Organization: Description:	Allen Chilen Inmate #79147Resolution Date: August 20, 20202020-20201Resolution: Board ApprovalDept of Correctional ServicesResolution Amount: \$33.99Claimant alleges that he paid for a canteen order that he did not receive.
Claimant Name: Claim Number: Organization: Description:	Nicole ElikerResolution Date: August 31, 20202021-20508Resolution: Risk Manager ApprovalDept of Correctional Services.Resolution Amount: \$181.80Claimant alleges that when an employee was mowing the lawn, a rock was thrown from the mower and shattered back driver side window.
Claimant Name: Claim Number: Organization: Description:	William ShammelResolution Date:August 31, 20202021-20524Resolution:Risk Manager ApprovalDepartment of Transportation,Resolution Amount:\$400.00Claimant alleges that due to the spacing of snow fences, his calf got his head stuck and died.

Claimant Name: Claim Number: Organization: Description:	Rick BurleighResolution Date: August 31, 20202021-20526Resolution: Risk Manager ApprovalDepartment of TransportationResolution Amount: \$373.73Claimant alleges that while driving on US HWY 27 near Gordon, NE, they came upon road construction where a pilot truck shot a rock towards Claimant's vehicle causing damages to windshield.
Claimant Name: Claim Number: Organization: Description:	Donna ChambersResolution Date:September 8, 20202020-20381Resolution:Risk Manager ApprovalGame & Parks CommissionResolution Amount:\$340.00Claimant alleges that a crew was mowing and a mower threw a rock hitting the front of camper and causing damages.
Claimant Name: Claim Number: Organization: Description:	Kyle Whiteeyes Inmate #88700Resolution Date:September 8, 20202021-20541Resolution:Risk Manager ApprovalDept of Correctional ServicesResolution Amount:\$13.20Claimant alleges that \$13.20 was debited for a canteen order he did not receive.
Claimant Name: Claim Number: Organization: Description:	Jamie Mowell Inmate # 57874Resolution Date:September 14, 20202020-20439Resolution:Risk Manager ApprovalDept of Correctional Services.Resolution Amount:\$43.66Claimant alleges that due to the negligence of NDCS staff, his canteen order was not delivered to him.
Claimant Name: Claim Number: Organization: Description:	Shelley ChristensenResolution Date:September 14, 20202021-20519Resolution:Risk Manager ApprovalDept of Correctional Services.Resolution Amount:\$110.00Claimant seeking reimbursement for a holiday gift, that was intended for son who is incarcerated, but did not receive the package at NSP as directed.Image: Content of the package at NSP as directed.
Claimant Name: Claim Number: Organization: Description:	MarkLaBouchardiereResolution Date:September 15, 20202021-20588Resolution:Risk Manager ApprovalDept of Health & Human ServicesResolution Amount:\$1,376.59Claimant alleges that when he was out for a break he noticed his car had been damaged and broken glass was all over the vehicle.
Claimant Name: Claim Number: Organization: Description:	Ruth Cecetka c/o Powers Law, AttorneyResolution Date:September 16, 20202017-16279Resolution:Legislative ApprovalDept of Health & Human ServicesResolution Amount:\$385,000.00Claimant alleges personal injury due to Staff negligence.

Claimant Name: Claim Number: Organization: Description:	inmate escaped from custody and atta	
Claimant Name: Claim Number:	Cynthia Allen 2018-18150	Resolution Date: September 16, 2020 Resolution: Legislative Approval
Organization:		Resolution Amount: \$425,000.00
Description:	•	ical pain, mental and emotional suffering, and permanent impairment after a NDCS
Claimant Name:	Nicholas Christopher Iwersen Inmate	Resolution Date: September 23, 2020
Claim Number:	2021-20641	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services	Resolution Amount: \$9.57
Description:	Claimant alleges that when he was ser	nt to segregation, his property was not secured properly by staff and was stolen.
Claimant Name:	Jamar Wells Inmate #210348	Resolution Date: September 24, 2020
Claim Number:	2021-20520	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services	Resolution Amount: \$47.47
Description:	Claimant alleges that he did not receiv	e his canteen order of \$47.47. It was stolen by another inmate from the canteen.
Claimant Name:	Roman D Jennings Inmate #210535	Resolution Date: September 28, 2020
Claim Number:	2020-20403	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services	Resolution Amount: \$85.79
Description:	Claimant alleges that due to the neglig	ence of NDCS staff, he has not received property that was ordered and paid for.
Claimant Name:	Central Valley AG Transport	Resolution Date: September 28, 2020
Claim Number:	2021-20605	Resolution: Risk Manager Approval
Organization:		Resolution Amount: \$3,700.00
Description:	Claimant alleges that vehicle has oil ar	n tar from an armor coating project on Hwy 35 east of Wayne, NE.
Claimant Name:	Marcus Wheeler Inmate #89951	Resolution Date: September 28, 2020
Claim Number:	2021-20607	Resolution: Risk Manager Approval
Organization:	Dept of Correctional Services	Resolution Amount: \$65.00
Description:	Claimant alleges that while in segregat	tion, his property was put in holding but when released, his property was missing.

Claimant Name: Claim Number: Organization: Description:	<b>v</b>	Resolution Date: October 2, 2020 Resolution: Risk Manager Approval Resolution Amount: \$12.79 a second learner's permit when she was supposed to be sent a Provisional Operator's simbursed for the cost of the incorrect permit so she can reapply for the correct permit.
Claimant Name: Claim Number: Organization: Description:	Quincy James Hall 2021-20596 Dept of Health & Human Services Claimant alleges that his shirt that wa	Resolution Date: October 6, 2020 Resolution: Risk Manager Approval Resolution Amount: \$10.00 as turned in for laundry was returned dyed and discolored.
Claimant Name: Claim Number: Organization: Description:	Nancy Frazier 2021-20560 Dept of Health & Human Services Claimant is asking for reimburseme	Resolution Date: October 7, 2020 Resolution: Risk Manager Approval Resolution Amount: \$30.00 nt for shirts that are allegedly missing.
Claimant Name: Claim Number: Organization: Description:	John Runnion Inmate #69294 2020-20314 Dept of Correctional Services Claimant alleges that due to the neg tv remote was not returned.	Resolution Date: October 15, 2020 Resolution: Risk Manager Approval Resolution Amount: \$202.13 ligence of NDCS staff, his tv was returned cracked and not functioning. Also,
Claimant Name: Claim Number: Organization: Description: Claimant Name: Claim Number: Organization:	Wiegert Trucking - Scott Wiegert 2021-20706 Department of Transortation Claimant alleges flag personnel at a tar and gravel which caused damag Henry Lee Jones Inmate #85142 2020-20196 Dept of Correctional Services	Resolution Date: October 29, 2020 Resolution: Risk Manager Approval Resolution Amount: \$4,838.61 road resurfacing project instructed him and many other cars to proceed through fresh ges to his vehicle. Resolution Date: November 6, 2020 Resolution: Risk Manager Approval Resolution Amount: \$50.00
Description: Claimant Name: Claim Number: Organization: Description:	Claimant seeking reimbursement fo Marcy Krolikowski 2021-20705 Department of Transportation	r canteen order that was not received. <b>Resolution Date:</b> November 9, 2020 <b>Resolution:</b> Risk Manager Approval <b>Resolution Amount:</b> \$238.61 she approached 60th and I-80 ramp and a rock hit her windshield from a SON

Claimant Name:	Luxury Auto Mall of Sioux Falls	Resolution Date: November 23, 2020
Claim Number:	2021-20817	Resolution: Risk Manager Approval
Organization:	State Patrol	Resolution Amount: \$742.40
Description:	Claimant alleges their vehicle was damaged due to the Nebraska State Patrol putting out spike stirps to stop another vehicle they were in pursuit of. They would like to be reimbursed \$742.40 for the tow to the repair shop and for the replacement of two tires.	
Claimant Name:	Laurie Hofmeister	Resolution Date: November 23, 2020
Claim Number:	2021-20832	Resolution: Risk Manager Approval
Organization:	State Patrol	Resolution Amount: \$628.04
Description:	Claimant alleges they were traveling into Omaha when they hit stop sticks that the State Patrol had put down to catch a a person that they were chasing. They claimant is asking to be reimbursed for the towing and the repairs.	
Claimant Name:	Joshua Himes	Resolution Date: November 24, 2020
Claim Number:	2019-19146	Resolution: Risk Manager Approval
Organization:	Dept of Health & Human Services	Resolution Amount: \$23.95
Description:	Claimant alleges that staff damaged one of his books.	