State of New Jersey
Department of Labor and Workforce Development
DIVISION OF WORKERS' COMPENSATION

WC(DO)-370 Interactive(r. 4/24/13)

ORDER APPROVING SETTLEMENT WITH DISMISSAL
N.J.S.A. 34:15-20

CASE NO'S.: 2018 - 6200

VICINAGE: Camden

PETITIONER
NAME: Robert Helveston
DATE OF BIRTH: 12/03/1978 MEDICARE ELIGIBLE: ☒ YES ☐ NO
ADDRESS: [redacted]

vs

RESPONDENT
NAME: Borough of Lindenwold
ADDRESS: 15 North White Horse Pike, Lindenwold, NJ 08021

ATTORNEY FOR RESPONDENT
NAME: Brown & Connery
ADDRESS: 20 Tanner Street, P.O. Box 10, Haddonfield, NJ 08033
TELEPHONE NUMBER (AREA CODE): (856) 428-7600
APPEARING: Karen McGuinness, Esquire

ATTORNEY FOR PETITIONER
FEDERAL EMPLOYER NUMBER: 22-272-1090
NAME: Aronberg, Kouser, Snyder & Lindemann, P.A.
ADDRESS: 430 Route 70 West, Cherry Hill, NJ 08002
TELEPHONE NUMBER (AREA CODE): (856) 429-1700
APPEARING: Jeremy D. Lindemann

INSURANCE CARRIER
NAME: Amerihealth Casualty Services ☐ SELF-INSURED ☐ TPA
ADDRESS: 1700 Market Street, Suite 700, Philadelphia, PA 19103
CLAIM NUMBER: 650-117-10553

This is a lump sum settlement between the parties in the amount of $ 2,000.00 pursuant to N.J.S.A. 34:15-20 which has the effect of a dismissal with prejudice, being final as to all rights and benefits of the petitioner and is a complete and absolute surrender and release of all rights arising out of this/these claim petitions(s). The payment hereunder shall be recognized as a payment of workers' compensation benefits for insurance rating purposes only.

The parties agree that this settlement [☐ does (complete page 2) / ☒ does not] contemplate a complete and absolute surrender and release of any and all rights by the petitioner's dependents as defined by N.J.S.A. 34:15-13 arising out of this/these claim petition(s).

☐ **Order for Child Support Attached** ☐ **Addendum attached**

☐ **Further Agreed:** _____

ALLOWANCES	REIMBURSE	TAX IDENTIFICATION NUMBER	TOTAL AMT. ALLOWED	PAYABLE BY PETITIONER	PAYABLE BY RESPONDENT
MEDICAL FEE ALLOWED: *(report and/or testimony)*					
ATTORNEY(S) FEE: Aronberg, Kouser, Snyder & Lindemann, P.A.	Pet. Attny.	22-272-1090	400	400	
STENOGRAPHIC SERVICE: State Shorthand Reporting Service P.O. Box 227 | Allenhurst | 07711			$90.00		$90.00
MISCELLANEOUS: 22-2088893					

Reason(s) for Section 20 (check all that apply):
Contested issues regarding: ☐ JURISDICTION ☒ LIABILITY ☒ CAUSAL RELATIONSHIP ☐ DEPENDENCY

WE HEREBY CONSENT TO THE ENTRY AND FORM OF THIS ORDER AND ACKNOWLEDGE RECEIPT OF COPY.

PETITIONER'S ATTORNEY

PETITIONER (where applicable)

RESPONDENT'S ATTORNEY

After considering the circumstances, I find this settlement fair and just.

JUDGE OF COMPENSATION — DATE 10-23-18

Hon. E. Elaine Voyles, JWC
JUDGE'S NAME

THE ORIGINAL OF THIS DOCUMENT, SIGNED BY THE JUDGE OF COMPENSATION, WILL BE MAINTAINED ON FILE IN THE DIVISION OF WORKERS' COMPENSATION, PURSUANT TO N.J.S.A. 34:15-121 et. seq.