SUNRISE, FLORIDA

RESOLUTION NO. _____

A RESOLUTION OF THE CITY OF SUNRISE, FLORIDA, APPROVING A WORKERS' COMPENSATION SETTLEMENT RELATED TO CLAIMANT FOR CLAIM NUMBER 1319395; AUTHORIZING THE CITY'S WORKERS' COMPENSATION COUNSEL AND RISK MANAGER, OR DESIGNEE, TO FINALIZE AND EXECUTE NECESSARY DOCUMENTS; PROVIDING FUNDING; AND PROVIDING AN EFFECTIVE DATE.

NOW THEREFORE, BE IT RESOLVED BY THE CITY COMMISSION OF THE CITY OF SUNRISE, FLORIDA:

Section 1. A workers' compensation settlement in the amount of one hundred seventy-five thousand dollars ($175,000.00) to be paid to claimant to settle all liabilities and verified claims including all claims for past and future medical expenses, lost wages, attorney's fees, and lien and release costs related to Claim Number 1319395, is hereby approved.

Section 2. The City's workers' compensation counsel and Risk Manager, or designee, are authorized to finalize and execute all necessary documents for this settlement.

Section 3. Effective Date. This Resolution shall be effective immediately upon its passage.

PASSED AND ADOPTED this _____ DAY of _____, 2026.

_____
Mayor Michael J. Ryan

Authentication:

_____
Felicia M. Bravo
City Clerk

MOTION: _____
SECOND: _____

CLARKE: ____
GUZMAN: ____
KERCH: ____
SCUOTTO: ____
RYAN: ____

Approved by the City Attorney
as to Form and Legal Sufficiency

_____
Thomas P. Moss