WC-M371
Rev. 2-89

Employer's Response to Petition for Lump-Sum Settlement

West Virginia Workers' Compensation Fund

Claim No. _____

Claimant _____

The above claimant filed an application for a lump-sum settlement of claim for compensation awarded as a result of injury sustained on the _____ day of _____, 19____, while in your employ.

Will you please set forth your reasons below whether it is for the best interests of this claimant that the compensation, if any, which is now due, or which is to become due on the account of said claim, be paid in a lump sum. In giving reasons for the payment, or non-payment of a lump sum, please give the present financial condition of the petitioner, mode of living, etc., and any other pertinent information which will be helpful to the Workers' Compensation Commissioner in considering this petition.

Date _____ Signature _____

Address _____

_____

INTERNET