

Crime Victims Reparations Board  
State of Louisiana

JOHN BEL EDWARDS  
GOVERNOR



JIM CRAFT  
EXECUTIVE DIRECTOR

Louisiana Commission on Law Enforcement  
[www.lcle.la.gov/cvr](http://www.lcle.la.gov/cvr)  
P.O. Box 3133 ♣ Baton Rouge, Louisiana 70821-3133 ♣ (225) 342-1749 ♣ 1-888-6-VICTIM (NATIONWIDE) ♣ Fax (225) 342-1672  
An Equal Opportunity Employer

## BOARD MEETING MINUTES

# Tuesday, June 11, 2019

### Louisiana Commission on Law Enforcement

#### Member Attendees

Linda Gautier, Gary "Stitch" Guillory, Angela Henderson, Carla Shorty, Carolyn Stapleton, Audrey Thibodeaux, Amanda Tonkovich, Tameka White

#### Member Absentees

Rena Hebert, Lisa Kiper, Catalene Theriot

#### Staff Attendees

Bob Wertz, Carla Trahan, Lakisha Harris

#### Guest Attendees

Erich Duchmann, Tanya Savell, Jane Wood

#### CALL TO ORDER

Ms. Tonkovich called the Board meeting to order at 9:20 a.m.

#### APPROVAL OF MINUTES OF PREVIOUS MEETING

Mr. Guillory made a motion to approve the minutes of the previous meeting. Ms. White seconded the motion and the motion passed unanimously.

[www.lcle.la.gov/cvr](http://www.lcle.la.gov/cvr)

# CRIME VICTIMS REPARATIONS BOARD

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Parish	CVR #	Claim #	Resolution
Ascension	ASCE16-002	160358	Claim Eligibility APPROVED. Payment of \$10,000.00 APPROVED for to Our Lady of the Lake Regional Medical Center
Beauregard	BEAU16-018	160958	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for Funeral to Chaddick Funeral Home
BIENVILLE	BIEN19-300	190545	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to Forensic Nurse Examiners
BIENVILLE	BIEN19-331	190646	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to Forensic Nurse Examiners
BIENVILLE	BIEN19-332	190733	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to Forensic Nurse Examiners
BIENVILLE	BIEN19-333	190736	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to Forensic Nurse Examiners
Bossier	BOSS15-011	150027	Claim Eligibility APPROVED. Payment of \$26.04 APPROVED for to Claimant Payment of \$485.41 APPROVED for to Claimant Payment of \$500.07 APPROVED for to University Health - Anesthesia (S'port) Payment of \$600.51 APPROVED for to Claimant
Bossier	BOSS16-008	160860	Claim Eligibility APPROVED. Payment of \$3,429.79 APPROVED for to Willis Knighton Medical Center
Bossier	BOSS17-005	171736	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for Funeral to Claimant EMERGENCY Payment of \$500.00 APPROVED for Funeral to Claimant
BOSSIER	BOSS17-739	190469	Claim Eligibility APPROVED. Payment of \$68.51 APPROVED for to Claimant Payment of \$788.08 APPROVED for to Claimant
BOSSIER	BOSS18-311	190791	Claim Eligibility APPROVED. Payment of \$1,497.60 APPROVED for to Claimant
BOSSIER	BOSS19-005	190513	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for to Claimant
BOSSIER	BOSS19-310	190543	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
BOSSIER	BOSS19-311	190541	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
BOSSIER	BOSS19-312	190540	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners

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BOSSIER	BOSS19-313	190539	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
BOSSIER	BOSS19-314	190538	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
BOSSIER	BOSS19-315	190537	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
BOSSIER	BOSS19-316	190536	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
BOSSIER	BOSS19-317	190535	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
BOSSIER	BOSS19-318	190534	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
BOSSIER	BOSS19-319	190533	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
BOSSIER	BOSS19-320	190532	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
BOSSIER	BOSS19-321	190531	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
BOSSIER	BOSS19-357	190735	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
BOSSIER	BOSS19-751	190649	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
BOSSIER	BOSS19-752	190650	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
BOSSIER	BOSS19-753	190653	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
BOSSIER	BOSS19-754	190654	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
BOSSIER	BOSS19-755	190655	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
BOSSIER	BOSS19-756	190659	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
BOSSIER	BOSS19-759	190775	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to University Medical Center Mgt Corp



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Parish	CVR #	Claim #	Resolution
Caddo	CADD15-057	150649	Claim Eligibility APPROVED.
Caddo	CADD15-069	150690	Claim Eligibility APPROVED. Payment of \$2,144.00 APPROVED for to University Health Shreveport
Caddo	CADD15-075	150815	Claim Eligibility APPROVED. Payment of \$61.25 APPROVED for to University Health Shreveport Payment of \$113.75 APPROVED for to Claimant Payment of \$35.00 APPROVED for to Claimant
Caddo	CADD16-004	160176	Claim Eligibility APPROVED. Payment of \$1,147.85 APPROVED for to WK Pierremont Health Center Payment of \$5,720.00 APPROVED for to Shreveport Bossier Family Dental Care
Caddo	CADD16-010	160285	Claim Eligibility APPROVED. Payment of \$130.00 APPROVED for to Claimant Payment of \$151.80 APPROVED for to LSUHSC Shreveport Faculty Group Practice Payment of \$40.00 APPROVED for to Claimant
Caddo	CADD16-015	160404	Claim Eligibility APPROVED. Payment of \$807.78 APPROVED for to LSUHSC Shreveport Faculty Group Practice
CADDO	CADD16-018	190854	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for Funeral to Claimant
Caddo	CADD16-023	160403	Claim Eligibility APPROVED. Payment of \$1,611.50 APPROVED for to LSUHSC Shreveport Faculty Group Practice Payment of \$4,050.41 APPROVED for to Ochsner LSU Health Shreveport
CADDO	CADD16-027	190853	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for Funeral to Claimant
Caddo	CADD16-034	160566	Claim Eligibility APPROVED. Payment of \$3,396.75 APPROVED for Funeral to Claimant
Caddo	CADD16-035	160026	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for Funeral to Precious Memories Mortuary
Caddo	CADD16-036	160683	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for Funeral to Claimant
Caddo	CADD16-041	160718	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for Funeral to Heavenly Gates Funeral Home
Caddo	CADD16-049	161014	Claim Eligibility APPROVED. Payment of \$495.00 APPROVED for to City of Shreveport EMS Payment of \$56.00 APPROVED for to City of Shreveport EMS



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Caddo	CADD16-050	161013	Claim Eligibility APPROVED.
Caddo	CADD16-051	161075	Claim Eligibility APPROVED. Payment of \$2,079.00 APPROVED for to Willis Knighton Medical Center Payment of \$399.00 APPROVED for to LSUHSC Shreveport Faculty Group Practice Payment of \$7,522.00 APPROVED for to Ochsner LSU Health Shreveport
Caddo	CADD16-056	161217	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for Funeral to Heavenly Gates Funeral Home
Caddo	CADD17-019	170977	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for Funeral to Claimant
Caddo	CADD17-023	171067	Claim Eligibility APPROVED. Payment of \$519.69 APPROVED for to Claimant
Caddo	CADD17-784	171127	Claim Eligibility APPROVED. Payment of \$546.96 APPROVED for to Claimant
CADD0	CADD19-018	190512	Claim Eligibility APPROVED. EMERGENCY Payment of \$300.00 APPROVED for to Claimant
CADD0	CADD19-019	190762	Claim Eligibility DENIED - Not a Compensable Expense.
CADD0	CADD19-020	190757	Claim Eligibility DENIED - Not a Compensable Expense.
CADD0	CADD19-021	190763	Claim Eligibility APPROVED.
CADD0	CADD19-023	190555	Claim Eligibility DENIED - Lack of Cooperation.
CADD0	CADD19-024	190780	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for to Claimant
CADD0	CADD19-307	190530	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
CADD0	CADD19-308	190544	Claim Eligibility APPROVED. Payment of \$339.90 APPROVED for to Ochsner LSU Health Shreveport Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
CADD0	CADD19-309	190546	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
CADD0	CADD19-310	190547	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners

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Parish	CVR #	Claim #	Resolution
CADD0	CADD19-311	190549	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
CADD0	CADD19-312	190550	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
CADD0	CADD19-313	190551	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
CADD0	CADD19-314	190552	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
CADD0	CADD19-315	190554	Claim Eligibility APPROVED. Payment of \$339.90 APPROVED for to Ochsner LSU Health Shreveport Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
CADD0	CADD19-316	190556	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
CADD0	CADD19-401	190660	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
CADD0	CADD19-402	190662	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
CADD0	CADD19-403	190663	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
CADD0	CADD19-404	190664	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
CADD0	CADD19-405	190666	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
CADD0	CADD19-406	190668	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
CADD0	CADD19-407	190669	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
CADD0	CADD19-408	190734	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
CADD0	CADD19-411	190776	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners
CADD0	CADD19-412	190777	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for to Forensic Nurse Examiners

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Parish	CVR #	Claim #	Resolution
Calcasieu	CALC15-093	150752	Claim Eligibility APPROVED. Payment of \$120.00 APPROVED for to Claimant Payment of \$219.30 APPROVED for to Claimant Payment of \$40.00 APPROVED for to Claimant Payment of \$410.85 APPROVED for to Orthopaedic Spec. (Oak Park)
Calcasieu	CALC15-111	150881	Claim Eligibility APPROVED. Payment of \$3,343.00 APPROVED for to Claimant
Calcasieu	CALC16-080	161019	Claim Eligibility APPROVED.
Calcasieu	CALC16-081	161035	Claim Eligibility APPROVED.
Calcasieu	CALC16-084	161031	Claim Eligibility APPROVED.
Calcasieu	CALC16-093	160666	Claim UNABLE TO PROCESS - .
Calcasieu	CALC16-094	161257	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for Funeral to King's Funeral Home -- Lake Charles
CALCASIEU	CALC16-755	190595	Claim Eligibility APPROVED.
Calcasieu	CALC17-001	170287	Claim Eligibility DENIED - Felony Conviction. Payment of \$1,706.96 DENIED for to Lake Charles Memorial Hospital
Calcasieu	CALC17-004	170384	Claim Eligibility APPROVED. Payment of \$145.75 APPROVED for to Acadian Ambulance Payment of \$300.00 APPROVED for to Acadian Ambulance Payment of \$9,554.25 APPROVED for to Christus St. Patrick Hospital
Calcasieu	CALC17-065	171747	Claim Eligibility APPROVED. Payment of \$4,779.57 APPROVED for to Lake Charles Memorial Hospital
Calcasieu	CALC17-071	172335	Claim Eligibility APPROVED. Payment of \$300.00 APPROVED for to Acadian Ambulance Payment of \$4,498.00 APPROVED for Funeral to Claimant
Calcasieu	CALC17-609	171518	Claim Eligibility APPROVED. Payment of \$1,725.00 APPROVED for to Family Plus Counseling
CALCASIEU	CALC18-611	190621	Claim Eligibility APPROVED. Payment of \$1,098.57 APPROVED for to Lake Charles Memorial Hospital
Calcasieu	CALC18-617	181702	Claim Eligibility APPROVED. Payment of \$833.69 APPROVED for to Lake Charles Memorial Hospital



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Calcasieu	CALC18-618	181701	Claim Eligibility APPROVED. Payment of \$833.69 APPROVED for to Lake Charles Memorial Hospital
Calcasieu	CALC18-619	181500	Claim Eligibility APPROVED. Payment of \$1,062.27 APPROVED for to Lake Charles Memorial Hospital
Calcasieu	CALC18-623	181505	Claim Eligibility APPROVED. Payment of \$446.97 APPROVED for to Lake Charles Memorial Hospital
Calcasieu	CALC18-634	181734	Claim Eligibility APPROVED. Payment of \$1,180.28 APPROVED for to Lake Charles Memorial Hospital
Calcasieu	CALC18-655	182153	Claim Eligibility APPROVED. Payment of \$1,648.81 APPROVED for to Lake Charles Memorial Hospital
CALCASIEU	CALC18-667	190488	Claim Eligibility APPROVED. Payment of \$1,268.26 APPROVED for to Lake Charles Memorial Hospital
CALCASIEU	CALC19-010	190617	Claim Eligibility APPROVED. Payment of \$1,237.14 APPROVED for to Lake Charles Memorial Hospital
CALCASIEU	CALC19-315	190594	Claim Eligibility APPROVED. Payment of \$1,237.14 APPROVED for to Lake Charles Memorial Hospital
CALCASIEU	CALC19-316	190614	Claim Eligibility APPROVED. Payment of \$0.00 APPROVED for to Lake Charles Memorial Hospital
CALCASIEU	CALC19-317	190620	Claim Eligibility APPROVED. Payment of \$833.69 APPROVED for to Lake Charles Memorial Hospital
CALCASIEU	CALC19-327	190797	Claim UNABLE TO PROCESS - . Payment of \$431.97 DENIED for to Lake Charles Memorial Hospital
Claiborne	CLAI15-003	150010	Claim Eligibility APPROVED. Payment of \$1,195.90 APPROVED for to Claiborne Family Medical Clinic Payment of \$300.00 APPROVED for to Pafford Emergency Medical Svcs. - Hope, AR Payment of \$63.71 APPROVED for to Claimant Payment of \$8,140.39 APPROVED for to University Health - Shreveport
CLAIBORNE	CLAI19-301	190557	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to Forensic Nurse Examiners
CLAIBORNE	CLAI19-302	190737	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to Forensic Nurse Examiners
Concordia	CONC16-005	160119	Claim Eligibility APPROVED. Payment of \$4,995.00 APPROVED for Funeral to Young's Funeral Home
Concordia	CONC16-006	160189	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for Funeral to Young's Funeral Home

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Parish	CVR #	Claim #	Resolution
E. FELICIANA	EFEL19-001	190462	Claim Eligibility DENIED - Non-Compensable Vehicle Acctd.
East Baton Rouge	EBAT16-022	160297	Claim Eligibility APPROVED. Payment of \$5,205.06 APPROVED for to Our Lady of the Lake Regional Medical Center
East Baton Rouge	EBAT16-026	160371	Claim Eligibility APPROVED. Payment of \$9,500.00 APPROVED for to Our Lady of the Lake Regional Medical Center
East Baton Rouge	EBAT16-027	160366	Claim Eligibility APPROVED. Payment of \$1,450.00 APPROVED for to Resolutions Counseling Services
East Baton Rouge	EBAT16-038	160536	Claim Eligibility APPROVED. Payment of \$1,709.00 APPROVED for Funeral to Claimant Payment of \$2,791.00 APPROVED for Funeral to MJR Friendly Service Funeral Home, Inc. Payment of \$500.00 APPROVED for to St. Augustine Catholic Church
East Baton Rouge	EBAT16-042	160550	Claim Eligibility APPROVED. Payment of \$9,139.51 APPROVED for to Our Lady of the Lake Regional Medical Center
East Baton Rouge	EBAT16-057	160716	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for Funeral to A. Hamilton Platinum Funeral Services
East Baton Rouge	EBAT16-060	160863	Claim Eligibility APPROVED. Payment of \$1,769.90 APPROVED for Funeral to Charlet Funeral Home, Inc.
East Baton Rouge	EBAT16-063	160833	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for Funeral to A. Hamilton Platinum Funeral Services
East Baton Rouge	EBAT16-071	161003	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for to Our Lady of the Rosary Cemetery
East Baton Rouge	EBAT16-077	161039	Claim Eligibility APPROVED. Payment of \$754.00 APPROVED for Funeral to Wilson-Wooddale Funeral Home & Cremation Services
East Baton Rouge	EBAT16-088	161094	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for Funeral to MJR Friendly Service Funeral Home, Inc.
East Baton Rouge	EBAT16-090	161167	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for Funeral to A. Hamilton Platinum Funeral Services
East Baton Rouge	EBAT16-103	161270	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for Funeral to Wilson-Wooddale Funeral Home & Cremation Services
East Baton Rouge	EBAT16-110	160067	Claim Eligibility APPROVED. Payment of \$10,000.00 APPROVED for to Our Lady of the Lake Regional Medical Center
East Baton Rouge	EBAT17-015	170698	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for Funeral to Cook-Richmond Funeral Home, Inc.

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East Baton Rouge	EBAT17-052	171018	Claim Eligibility APPROVED. Payment of \$10,000.00 APPROVED for to Our Lady of the Lake Regional Medical Center
East Baton Rouge	EBAT17-074	171114	Claim Eligibility APPROVED. Payment of \$1,200.00 APPROVED for Funeral to Wright & Calvey Funeral Home
East Baton Rouge	EBAT18-010	180118	Claim Eligibility APPROVED.
East Baton Rouge	EBAT18-030	180566	Claim Eligibility APPROVED. Payment of \$1,340.00 APPROVED for Funeral to Claimant
East Baton Rouge	EBAT18-034	180605	Claim Eligibility APPROVED. Payment of \$225.00 APPROVED for to Dayne Narretta, LCSW, BCD, CGP
East Baton Rouge	EBAT18-103	190001	Claim Eligibility APPROVED.
East Baton Rouge	EBAT18-411	182029	Claim Eligibility APPROVED. Payment of \$969.02 APPROVED for to Ochsner Health System
East Baton Rouge	EBAT19-002	190188	Claim Eligibility APPROVED. Payment of \$9,500.00 APPROVED for to Claimant
East Feliciana	EFEL17-009	172391	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for Funeral to Claimant
EBR	EBAT16-017	190837	Claim Eligibility APPROVED. Payment of \$2,203.23 APPROVED for Funeral to A. Hamilton Platinum Funeral Services Payment of \$2,296.77 APPROVED for Funeral to Claimant
EBR	EBAT18-673	190689	Claim Eligibility APPROVED. Payment of \$0.00 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
EBR	EBAT19-006	190199	Claim Eligibility APPROVED. Payment of \$167.50 APPROVED for to Brandon P. Romano & Associates Payment of \$225.00 APPROVED for to Brandon P. Romano & Associates
EBR	EBAT19-011	190344	Claim Eligibility APPROVED.
EBR	EBAT19-013	190748	Claim Eligibility APPROVED.
EBR	EBAT19-014	190415	Claim Eligibility APPROVED.
EBR	EBAT19-015	190407	Claim Eligibility APPROVED.



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EBR	EBAT19-024	190466	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for to Claimant
EBR	EBAT19-026	190508	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for Funeral to Richardson Funeral Home of Clinton
EBR	EBAT19-027	190509	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for to Claimant
EBR	EBAT19-029	190517	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for Funeral to A. Hamilton Platinum Funeral Services
EBR	EBAT19-030	190519	Claim Eligibility APPROVED. EMERGENCY Payment of \$300.00 APPROVED for to Carlo Cuneo, LCSW
EBR	EBAT19-031	190518	Claim Eligibility APPROVED. EMERGENCY Payment of \$300.00 APPROVED for to Brandon P. Romano & Associates
EBR	EBAT19-032	190528	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for Funeral to A. Hamilton Platinum Funeral Services
EBR	EBAT19-034	190524	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for to Maison Roulez of Port Allen, LLC
EBR	EBAT19-035	190553	Claim Eligibility APPROVED. EMERGENCY Payment of \$283.22 APPROVED for to Claimant
EBR	EBAT19-037	190558	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for Funeral to Beckwith Golden Gate Funeral Home
EBR	EBAT19-038	190624	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for Funeral to Hall Davis & Sons Funeral Service, LLC
EBR	EBAT19-350	190601	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to East Baton Rouge Parish Coroner's Office
EBR	EBAT19-351	190607	Claim Eligibility APPROVED. Payment of \$1,000.00 APPROVED for to East Baton Rouge Parish Coroner's Office
EBR	EBAT19-352	190609	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to East Baton Rouge Parish Coroner's Office
EBR	EBAT19-353	190615	Claim Eligibility APPROVED. Payment of \$650.00 APPROVED for to East Baton Rouge Parish Coroner's Office
EBR	EBAT19-354	190622	Claim Eligibility APPROVED. Payment of \$650.00 APPROVED for to East Baton Rouge Parish Coroner's Office

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Parish	CVR #	Claim #	Resolution
EBR	EBAT19-361	190845	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to East Baton Rouge Parish Coroner's Office
EBR	EBAT19-362	190844	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to East Baton Rouge Parish Coroner's Office
EBR	EBAT19-363	190843	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to East Baton Rouge Parish Coroner's Office
EBR	EBAT19-364	190842	Claim Eligibility APPROVED. Payment of \$1,000.00 APPROVED for to Our Lady of the Lake RegMedCent
EBR	EBAT19-365	190841	Claim Eligibility APPROVED. Payment of \$650.00 APPROVED for to University Medical Center
EBR	EBAT19-366	190839	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to East Baton Rouge Parish Coroner's Office
EBR	EBAT19-600	190525	Claim Eligibility APPROVED. EMERGENCY Payment of \$217.60 APPROVED for to Claimant
EBR	EBAT19-601	190526	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for to Claimant Payment of \$240.00 APPROVED for to Claimant
EBR	EBAT19-602	190527	Claim Eligibility APPROVED. EMERGENCY Payment of \$147.80 APPROVED for to Claimant Payment of \$60.00 APPROVED for to Claimant
EBR	EBAT19-603	190561	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to East Baton Rouge Parish Coroner's Office
EBR	EBAT19-604	190560	Claim Eligibility APPROVED. Payment of \$650.00 APPROVED for to East Baton Rouge Parish Coroner's Office
EBR	EBAT19-608	190589	Claim Eligibility APPROVED. Payment of \$650.00 APPROVED for to East Baton Rouge Parish Coroner's Office
Iberia	IBER16-004	160329	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for Funeral to Pellerin Funeral Home (New Iberia)
Iberia	IBER16-016	160645	Claim Eligibility APPROVED.
IBERVILLE	IBEV19-002	190573	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for Funeral to Pugh's Mortuary LLC
JEFFERSON	JEFF18-761	190626	Claim UNABLE TO PROCESS - . Payment of \$598.30 DENIED for to CARE Center

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JEFFERSON	JEFF18-763	190625	Claim UNABLE TO PROCESS - . Payment of \$797.06 DENIED for to CARE Center
JEFFERSON	JEFF19-005	190464	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for Funeral to Affordable Funeral Homes
JEFFERSON	JEFF19-006	190459	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to Claimant
JEFFERSON	JEFF19-007	190591	Claim Eligibility APPROVED.
JEFFERSON	JEFF19-009	190812	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for Funeral to Majestic Mortuary Service, Inc. Payment of \$2,139.00 APPROVED for Funeral to Majestic Mortuary Service, Inc.
JEFFERSON DAVI	JEFD17-007	190616	Claim UNABLE TO PROCESS - .
JEFFERSON DAVI	JEFD17-008	190599	Claim Eligibility APPROVED. Payment of \$1,000.00 APPROVED for to Lake Charles Memorial Hospital
JEFFERSON DAVI	JEFD19-003	190772	Claim Eligibility APPROVED.
JEFFERSON DAVI	JEFD19-004	190572	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for to Claimant Payment of \$9,500.00 APPROVED for to Claimant
Lafayette	Lafa16-013	161157	Claim Eligibility APPROVED. Payment of \$300.00 APPROVED for to Acadian Ambulance Payment of \$167.25 APPROVED for to Acadian Ambulance Payment of \$548.12 APPROVED for to Parish Anes of Lafayette Payment of \$907.15 APPROVED for to Coolidge Emergency Group LLC Payment of \$7,481.60 APPROVED for to Lafayette General Medical Center Payment of \$595.88 APPROVED for to Surgical Hospital Management System
LAFAYETTE	Lafa18-026	190467	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for to IMALW, LLC
LAFAYETTE	Lafa19-005	190521	Claim Eligibility APPROVED. EMERGENCY Payment of \$248.66 APPROVED for to Claimant
Lafourche	LAFO17-010	172648	Claim Eligibility APPROVED. Payment of \$2,000.00 APPROVED for to Claimant Payment of \$2,218.50 APPROVED for to Claimant Payment of \$436.76 APPROVED for to Claimant Payment of \$743.90 APPROVED for to Physicians Surgical Specialty Hospital



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Lafourche	LAFO17-605	171708	Claim Eligibility APPROVED. Payment of \$4,502.00 APPROVED for to Joshua Hafford, DDS
Lafourche	LAFO18-011	182139	Claim Eligibility APPROVED.
LINCOLN	LINC19-302	190565	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to Forensic Nurse Examiners
LINCOLN	LINC19-303	190559	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to Forensic Nurse Examiners
LINCOLN	LINC19-401	190671	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to Forensic Nurse Examiners
Livingston	LIVI15-007	150183	Claim Eligibility APPROVED. Payment of \$1,709.40 APPROVED for to Our Lady of the Lake Regional Medical Center Payment of \$101.75 APPROVED for to Williamson Eye Center Payment of \$132.55 APPROVED for to Our Lady of the Lake Regional Medical Center Payment of \$55.00 APPROVED for to LSUHN Billing LLC Payment of \$86.16 APPROVED for to Our Lady of the Lake Regional Medical Center
LIVINGSTON	LIVI19-008	190490	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for Funeral to Church Funeral Services LLC (walker)
LIVINGSTON	LIVI19-310	190611	Claim Eligibility APPROVED. Payment of \$843.05 APPROVED for to CARE Center
LIVINGSTON	LIVI19-325	190846	Claim Eligibility APPROVED. Payment of \$0.00 APPROVED for to North Oaks Health System
LIVINGSTON	LIVI19-326	190847	Claim Eligibility APPROVED. Payment of \$598.30 APPROVED for to CARE Center
NATCHITOCHE	NATC19-002	190750	Claim Eligibility APPROVED. Payment of \$1,564.75 APPROVED for to Central LA Surgical Hospital Payment of \$79.28 APPROVED for to Claimant Payment of \$75.36 APPROVED for to Claimant Payment of \$3,903.87 APPROVED for to Claimant Payment of \$167.75 APPROVED for to Red River Anesthesia of Alexandria
NATCHITOCHE	NATC19-302	190567	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to Forensic Nurse Examiners
NATCHITOCHE	NATC19-303	190568	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to Forensic Nurse Examiners

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NATCHITOCHE	NATC19-401	190673	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to Forensic Nurse Examiners
NATCHITOCHE	NATC19-402	190674	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to Forensic Nurse Examiners
ORLEANS	ORLE11-163	190852	Claim Eligibility APPROVED. Payment of \$7,741.12 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
Orleans	ORLE16-020	160270	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for Funeral to Charbonnet-Labat-Glapion Funeral Homes, Inc.
Orleans	ORLE16-023	160321	Claim Eligibility APPROVED. Payment of \$3,439.00 APPROVED for Funeral to Professional Funeral Services Inc.
Orleans	ORLE16-034	160565	Claim Eligibility APPROVED. Payment of \$1,927.00 APPROVED for Funeral to Professional Funeral Services Inc.
Orleans	ORLE16-054	160192	Claim Eligibility APPROVED. Payment of \$3,547.00 APPROVED for Funeral to Claimant
Orleans	ORLE16-058	160964	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for Funeral to Charbonnet-Labat-Glapion Funeral Homes, Inc.
Orleans	ORLE16-070	161220	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for Funeral to Charbonnet-Labat-Glapion Funeral Homes, Inc.
Orleans	ORLE16-099	160324	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for Funeral to Claimant
Orleans	ORLE16-101	160612	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for Funeral to Robinson Family Funeral Home
Orleans	ORLE16-105	160103	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for Funeral to Little John's Funeral Home
Orleans	ORLE18-022	180938	Claim Eligibility APPROVED. Payment of \$4,295.44 APPROVED for to Claimant
ORLEANS	ORLE18-601	190718	Claim Eligibility APPROVED. Payment of \$591.36 APPROVED for to University Medical Center Mgt Corp
ORLEANS	ORLE18-602	190719	Claim Eligibility APPROVED. Payment of \$3,021.94 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-603	190723	Claim Eligibility APPROVED. Payment of \$213.76 APPROVED for to University Medical Center Mgt Corp

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ORLEANS	ORLE18-604	190725	Claim UNABLE TO PROCESS - . Payment of \$843.05 DENIED for to CARE Center
ORLEANS	ORLE18-605	190726	Claim UNABLE TO PROCESS - . Payment of \$843.05 DENIED for to CARE Center
ORLEANS	ORLE18-606	190727	Claim Eligibility APPROVED. Payment of \$1,186.59 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-607	190728	Claim Eligibility APPROVED. Payment of \$1,472.86 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-608	190729	Claim Eligibility APPROVED. Payment of \$1,000.00 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay Payment of \$980.00 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-609	190731	Claim Eligibility APPROVED. Payment of \$1,732.05 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-610	190732	Claim Eligibility APPROVED. Payment of \$115.50 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay Payment of \$1,700.15 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-611	190738	Claim Eligibility APPROVED. Payment of \$36.19 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-612	190741	Claim Eligibility APPROVED. Payment of \$2,480.72 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-613	190742	Claim Eligibility DENIED - No Pecuniary Loss. Payment of \$1,666.60 DENIED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-614	190743	Claim Eligibility APPROVED. Payment of \$2,004.30 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-615	190744	Claim Eligibility APPROVED. Payment of \$2,089.69 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-616	190717	Claim Eligibility APPROVED. Payment of \$1,776.88 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-617	190746	Claim Eligibility APPROVED. Payment of \$2,323.85 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay



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ORLEANS	ORLE18-618	190702	Claim Eligibility APPROVED. Payment of \$2,192.68 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-619	190703	Claim Eligibility APPROVED. Payment of \$1,792.31 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-620	190705	Claim Eligibility APPROVED. Payment of \$1,572.28 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-621	190706	Claim Eligibility APPROVED. Payment of \$1,964.43 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-650	190629	Claim Eligibility APPROVED. Payment of \$1,455.68 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-651	190630	Claim Eligibility APPROVED. Payment of \$1,451.83 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-653	190632	Claim Eligibility APPROVED. Payment of \$1,980.00 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-659	190634	Claim Eligibility APPROVED. Payment of \$1,606.65 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-660	190635	Claim Eligibility APPROVED. Payment of \$2,234.48 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-662	190636	Claim Eligibility APPROVED. Payment of \$1,712.53 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-664	190638	Claim Eligibility APPROVED. Payment of \$3,065.15 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-667	190639	Claim Eligibility DENIED - No Pecuniary Loss. Payment of \$954.35 DENIED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-668	190640	Claim Eligibility APPROVED. Payment of \$1,509.44 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-670	190641	Claim Eligibility APPROVED. Payment of \$400.28 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-671	190643	Claim Eligibility APPROVED. Payment of \$1,819.71 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay

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Parish	CVR #	Claim #	Resolution
ORLEANS	ORLE18-672	190644	Claim Eligibility APPROVED. Payment of \$1,000.00 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-674	190688	Claim Eligibility APPROVED. Payment of \$2,233.96 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-675	190686	Claim Eligibility APPROVED. Payment of \$757.62 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-676	190685	Claim Eligibility APPROVED. Payment of \$213.76 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-677	190683	Claim UNABLE TO PROCESS - . Payment of \$598.30 DENIED for to CARE Center
ORLEANS	ORLE18-678	190684	Claim UNABLE TO PROCESS - . Payment of \$613.75 DENIED for to CARE Center
ORLEANS	ORLE18-679	190690	Claim Eligibility APPROVED. Payment of \$1,460.49 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-681	190692	Claim Eligibility APPROVED. Payment of \$1,119.11 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay Payment of \$1,974.88 APPROVED for to University Medical Center Mgt Corp Payment of \$115.50 APPROVED for to University Medical Center Mgt Corp
ORLEANS	ORLE18-683	190696	Claim Eligibility APPROVED. Payment of \$115.50 APPROVED for to University Medical Center Mgt Corp Payment of \$2,112.79 APPROVED for to University Medical Center Mgt Corp
ORLEANS	ORLE18-684	190698	Claim Eligibility APPROVED. Payment of \$2,224.99 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-685	190712	Claim Eligibility APPROVED. Payment of \$1,057.65 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay Payment of \$1,597.66 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay Payment of \$3,471.33 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE18-686	190700	Claim Eligibility APPROVED. Payment of \$1,505.04 APPROVED for to University Medical Center Mgt Corp
ORLEANS	ORLE18-687	190701	Claim Eligibility APPROVED. Payment of \$2,837.28 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay Payment of \$2,005.54 APPROVED for to University Medical Center Mgt Corp

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ORLEANS	ORLE18-688	190745	Claim Eligibility APPROVED. Payment of \$3,791.94 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
Orleans	ORLE18-825	181978	Claim Eligibility APPROVED. Payment of \$1,673.33 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay Payment of \$115.50 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
Orleans	ORLE19-011	190185	Claim Eligibility DENIED - Contribution. Payment of \$9,500.00 DENIED for to Claimant
Orleans	ORLE19-012	190216	Claim Eligibility APPROVED. Payment of \$1,929.90 APPROVED for to Claimant
ORLEANS	ORLE19-035	190489	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for to Claimant
ORLEANS	ORLE19-036	190471	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for Funeral to Dennis Funeral Home
ORLEANS	ORLE19-037	190510	Claim Eligibility APPROVED. EMERGENCY Payment of \$370.64 APPROVED for to Claimant
ORLEANS	ORLE19-038	190511	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for Funeral to Littlejohn's Funeral Home
ORLEANS	ORLE19-039	190515	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for Funeral to Littlejohn's Funeral Home
ORLEANS	ORLE19-040	190548	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for to Claimant
ORLEANS	ORLE19-043	190645	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for Funeral to Boyd-Brooks Funeral Service
ORLEANS	ORLE19-045	190730	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for to Jason Morrow
ORLEANS	ORLE19-046	190658	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for Funeral to Charbonnet-Labat-Glapiion Funeral Homes, Inc.
ORLEANS	ORLE19-049	190833	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for to Claimant
ORLEANS	ORLE19-302	190285	Claim Eligibility APPROVED. Payment of \$1,771.65 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-303	190286	Claim Eligibility APPROVED. Payment of \$1,656.15 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay



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ORLEANS	ORLE19-307	190849	Claim Eligibility APPROVED. Payment of \$4,583.53 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-320	190597	Claim Eligibility APPROVED. Payment of \$1,000.00 APPROVED for to Tulane University Hospital & Clinic
ORLEANS	ORLE19-332	190831	Claim Eligibility APPROVED. Payment of \$1,000.00 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-333	190832	Claim Eligibility APPROVED. Payment of \$928.15 APPROVED for to ACC SANE Inc
ORLEANS	ORLE19-334	190835	Claim Eligibility APPROVED. Payment of \$2,120.49 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-335	190838	Claim Eligibility APPROVED. Payment of \$1,576.13 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-691	190802	Claim Eligibility APPROVED. Payment of \$1,443.03 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-692	190803	Claim UNABLE TO PROCESS - . Payment of \$3,200.00 DENIED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-693	190804	Claim Eligibility APPROVED. Payment of \$1,981.34 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-694	190805	Claim UNABLE TO PROCESS - . Payment of \$1,452.10 DENIED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-695	190806	Claim Eligibility APPROVED. Payment of \$1,486.34 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-696	190850	Claim Eligibility APPROVED. Payment of \$7,889.30 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-697	190807	Claim Eligibility APPROVED. Payment of \$2,569.16 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-698	190808	Claim Eligibility APPROVED. Payment of \$3,576.34 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-699	190809	Claim Eligibility APPROVED. Payment of \$2,502.60 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay

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ORLEANS	ORLE19-700	190810	Claim Eligibility APPROVED. Payment of \$1,400.26 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-701	190811	Claim UNABLE TO PROCESS - . Payment of \$1,000.00 DENIED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-702	190813	Claim Eligibility APPROVED. Payment of \$1,948.61 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-703	190817	Claim Eligibility APPROVED. Payment of \$3,903.04 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-704	190819	Claim Eligibility APPROVED. Payment of \$2,476.89 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-705	190820	Claim Eligibility APPROVED. Payment of \$25.00 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-706	190821	Claim Eligibility APPROVED. Payment of \$1,510.95 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-707	190822	Claim Eligibility APPROVED. Payment of \$1,822.25 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-708	190801	Claim Eligibility APPROVED. Payment of \$2,214.26 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-710	190824	Claim Eligibility APPROVED. Payment of \$0.00 APPROVED for to CARE Center
ORLEANS	ORLE19-711	190825	Claim Eligibility APPROVED. Payment of \$1,265.79 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-712	190826	Claim Eligibility APPROVED. Payment of \$1,459.80 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-713	190827	Claim Eligibility APPROVED. Payment of \$2,720.95 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-714	190828	Claim Eligibility APPROVED. Payment of \$0.00 APPROVED for to CARE Center
ORLEANS	ORLE19-715	190829	Claim Eligibility APPROVED. Payment of \$2,243.14 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay

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ORLEANS	ORLE19-716	190830	Claim Eligibility APPROVED. Payment of \$1,815.93 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-718	190756	Claim UNABLE TO PROCESS - . Payment of \$1,000.00 DENIED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-719	190755	Claim Eligibility APPROVED. Payment of \$1,511.36 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-720	190752	Claim Eligibility APPROVED. Payment of \$2,239.98 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-721	190800	Claim Eligibility APPROVED. Payment of \$24.64 APPROVED for to CARE Center
ORLEANS	ORLE19-722	190798	Claim Eligibility APPROVED. Payment of \$1,326.56 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-723	190796	Claim Eligibility APPROVED. Payment of \$0.00 APPROVED for to CARE Center
ORLEANS	ORLE19-724	190787	Claim UNABLE TO PROCESS - . Payment of \$1,301.95 DENIED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-725	190785	Claim Eligibility APPROVED. Payment of \$1,608.99 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-726	190786	Claim Eligibility APPROVED. Payment of \$1,115.91 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-728	190792	Claim Eligibility APPROVED. Payment of \$1,580.94 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-729	190793	Claim Eligibility APPROVED. Payment of \$1,942.02 APPROVED for to Our Lady of the Lake Regional Medical Center
ORLEANS	ORLE19-731	190795	Claim Eligibility APPROVED. Payment of \$1,026.95 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-732	190761	Claim Eligibility APPROVED. Payment of \$1,982.03 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-733	190770	Claim Eligibility APPROVED. Payment of \$1,520.30 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay



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ORLEANS	ORLE19-734	190773	Claim Eligibility APPROVED. Payment of \$2,403.88 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-735	190774	Claim Eligibility APPROVED. Payment of \$1,399.44 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-736	190778	Claim Eligibility APPROVED. Payment of \$2,101.24 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-737	190779	Claim Eligibility APPROVED. Payment of \$2,621.26 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-738	190781	Claim Eligibility APPROVED. Payment of \$1,000.00 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-739	190783	Claim Eligibility APPROVED. Payment of \$1,883.71 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
ORLEANS	ORLE19-740	190784	Claim Eligibility APPROVED. Payment of \$1,503.66 APPROVED for to UMCMC-New Orleans ATTN: Hospital Commercial Pay
Ouachita	OUAC15-005	150353	Claim Eligibility APPROVED. Payment of \$32.89 APPROVED for to LSU Health - Shreveport Payment of \$300.00 APPROVED for to Metro Ambulance Service, Inc. Payment of \$250.00 APPROVED for to Pafford Emergency Medical Svcs. - Hope, AR Payment of \$122.89 APPROVED for to Metro Ambulance Service, Inc.
Plaquemines	PLAQ16-016	161254	Claim Eligibility APPROVED. Payment of \$1,920.23 APPROVED for Funeral to Mothe Funeral Homes, Inc. (N.O.)
Plaquemines	PLAQ16-018	161101	Claim Eligibility APPROVED. Payment of \$74.99 APPROVED for to Claimant Payment of \$120.83 APPROVED for to Claimant
PLAQUEMINES	PLAQ19-601	190608	Claim Eligibility APPROVED. Payment of \$547.30 APPROVED for to CARE Center
RAPIDES	RAPI16-710	190610	Claim Eligibility APPROVED. Payment of \$1,000.00 APPROVED for to Christus St. Frances Cabrini Hospital
RAPIDES	RAPI19-021	190740	Claim Eligibility APPROVED. Payment of \$853.48 APPROVED for to Christus St. Frances Cabrini Hospital
RED RIVER	REDR19-300	190569	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to Forensic Nurse Examiners

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Parish	CVR #	Claim #	Resolution
RED RIVER	REDR19-301	190566	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to Forensic Nurse Examiners
St. Charles	CHAR16-045	161264	Claim Eligibility APPROVED.
St. Charles	CHAR16-046	161263	Claim Eligibility APPROVED.
St. Charles	CHAR16-048	161206	Claim Eligibility APPROVED.
St. Charles	CHAR16-049	161105	Claim Eligibility APPROVED.
St. Charles	CHAR17-021	171742	Claim Eligibility APPROVED. Payment of \$150.00 APPROVED for to YNG Counseling/Consulting
ST. CHARLES	CHAR17-027	190580	Claim Eligibility APPROVED.
St. Charles	CHAR17-029	172408	Claim Eligibility APPROVED. Payment of \$225.00 APPROVED for to YNG Counseling/Consulting
St. Charles	CHAR18-005	180604	Claim Eligibility APPROVED. Payment of \$375.00 APPROVED for to YNG Counseling/Consulting
St. Charles	CHAR18-006	180603	Claim Eligibility APPROVED. Payment of \$375.00 APPROVED for to YNG Counseling/Consulting
St. Charles	CHAR18-016	181797	Claim Eligibility APPROVED. Payment of \$375.00 APPROVED for to YNG Counseling/Consulting
St. Charles	CHAR18-017	181729	Claim Eligibility APPROVED. Payment of \$375.00 APPROVED for to YNG Counseling/Consulting
ST. CHARLES	CHAR18-025	190383	Claim Eligibility APPROVED. Payment of \$375.00 APPROVED for to YNG Counseling/Consulting
ST. CHARLES	CHAR18-028	190815	Claim Eligibility APPROVED.
ST. CHARLES	CHAR18-600	190602	Claim Eligibility APPROVED. Payment of \$255.00 APPROVED for to Douglas S. Pool M.D. Payment of \$1,134.00 APPROVED for to Claimant Payment of \$1,100.00 APPROVED for to Claimant
ST. CHARLES	CHAR19-011	190754	Claim Eligibility APPROVED.

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Parish	CVR #	Claim #	Resolution
St. Martin	MART15-002	150044	Claim Eligibility APPROVED. Payment of \$104.48 APPROVED for to Claimant Payment of \$178.50 APPROVED for to Acadian Ambulance Payment of \$300.00 APPROVED for to Acadian Ambulance Payment of \$60.50 APPROVED for to Radiology Associates of Acadiana Payment of \$75.62 APPROVED for to Iberia Comprehensive Community Health Center
St. Martin	MART16-001	160396	Claim Eligibility APPROVED. Payment of \$2,389.00 APPROVED for Funeral to Claimant Payment of \$2,611.00 APPROVED for Funeral to Claimant
St. Martin	MART16-005	160034	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for Funeral to Pellerin Funeral Homes, Inc.
St. Tammany	TAMM18-383	181944	Claim Eligibility APPROVED. Payment of \$1,000.00 APPROVED for to Slidell Memorial Hospital
ST. TAMMANY	TAMM19-303	190562	Claim Eligibility APPROVED. Payment of \$691.00 APPROVED for to CARE Center
ST. TAMMANY	TAMM19-311	190623	Claim Eligibility APPROVED. Payment of \$586.71 APPROVED for to CARE Center
Tangipahoa	TANG17-002	170582	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for Funeral to Claimant Payment of \$4,500.00 APPROVED for Funeral to N.A. James Funeral Home
TANGIPAHOA	TANG19-021	190739	Claim Eligibility APPROVED. Payment of \$4,117.02 APPROVED for to North Oaks Health System
Vermilion	VERM17-002	170703	Claim Eligibility APPROVED. Payment of \$425.00 APPROVED for Funeral to B&B Burial Vaults EMERGENCY Payment of \$500.00 APPROVED for Funeral to Claimant Payment of \$4,075.00 APPROVED for Funeral to Fletcher Funeral Home (ABBY)
Washington	WASH17-001	170877	Claim Eligibility APPROVED. Payment of \$6,318.00 APPROVED for to St. Tammany Parish Hospital Payment of \$1,326.00 APPROVED for to Covington Orthopaedic Clinic Payment of \$1,156.00 APPROVED for to Riverside Medical Center Payment of \$1,200.00 APPROVED for to Claimant
WASHINGTON	WASH19-002	190522	Claim Eligibility APPROVED. Payment of \$10,000.00 APPROVED for to Claimant
WEBSTER	WEBS19-301	190570	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to Forensic Nurse Examiners



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WEBSTER	WEBS19-302	190571	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to Forensic Nurse Examiners
WEBSTER	WEBS19-401	190676	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to Forensic Nurse Examiners
WEBSTER	WEBS19-402	190678	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to Forensic Nurse Examiners
WEST BATON RO	WBAT19-001	190542	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for Funeral to A. Hamilton Platinum Funeral Services Payment of \$4,500.00 APPROVED for Funeral to Colonial Funeral Home & Chapel, Inc.
WEST BATON RO	WBAT19-005	190627	Claim Eligibility APPROVED. EMERGENCY Payment of \$500.00 APPROVED for Funeral to Church Funeral Services LLC (walker)
WEST BATON RO	WBAT19-403	190848	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for to East Baton Rouge Parish Coroner's Office

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## ADJOURNMENT / OTHER BUSINESS

The Board members agreed to schedule the next Board meeting on Tuesday, August 6, 2019.

Mr. Wertz discussed the change set by the legislature to discontinue using a victim's criminal history as a denial