

**Crime Victims Reparations Board**  
State of Louisiana

**JOHN BEL EDWARDS**  
GOVERNOR



**JIM CRAFT**  
EXECUTIVE DIRECTOR

**BOARD MEETING MINUTES**  
**Tuesday, December 12, 2023**

**Louisiana Commission on Law Enforcement**

**Member Attendees**

Angela Henderson, Audrey Thibodeaux, Carla Shorty, Catalene Theriot, Laneceya Russ, Linda Gautier, Stitch Guillory

**Member Absentees**

Amanda Tonkovich, Judy Dupuy, Lisa Kiper, Tameka White

**Staff Attendees**

Bob Wertz, Danielle Lax, Jason Eastin, Kristi Ambacher

**Guest Attendees**

Dr. Erich Duchmann, Stephanie Minto-Gibson, Taja Kenney, Andrea Howard, Sachiri Henderson

**CALL TO ORDER**

Ms. Shorty called the meeting of the Crime Victims Reparations Board to order at 9:28 a.m.

**ROLL CALL**

Program Manager Danielle Lax called the roll and confirmed a quorum of members.

**APPROVAL OF MINUTES FROM PREVIOUS MEETING**

Ms. Theriot made a motion to approve the minutes of the previous meeting. Ms. Henderson seconded the motion and the motion was approved unanimously.

**APPROVAL OF EMERGENCY AWARDS**

Ms. Russ made a motion to confirm the emergency awards processed since the previous meeting and to waive repayment of the awards because of undue hardship. Ms. Thibodeaux seconded the motion and the motion was approved unanimously.



# CRIME VICTIMS REPARATIONS BOARD

## Board Minutes

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EMERGENCY			
Parish	CVR #	Claim #	Resolution
ASCENSION	ASCE23-013	240329	Claim Eligibility APPROVED. EMERGENCY Payment of \$300.00 APPROVED for MENTAL HEALTH to Michele Hornsby, LCSW
CALCASIEU	CALC23-0046	240555	Claim Eligibility APPROVED. EMERGENCY Payment of \$71.47 APPROVED for Relocation to Claimant
EAST BATON ROUEBAT23-0134		240394	Claim Eligibility APPROVED. EMERGENCY Payment of \$1,000.00 APPROVED for FUNERAL to Claimant
EAST BATON ROUEBAT23-0136		240400	Claim Eligibility APPROVED. EMERGENCY Payment of \$1,000.00 APPROVED for FUNERAL to MJR Friendly Service Funeral Home, Inc.
EAST BATON ROUEBAT23-0138		240512	Claim Eligibility APPROVED. EMERGENCY Payment of \$1,000.00 APPROVED for FUNERAL to Desselle Funeral Home
EAST BATON ROUEBAT23-0139		240591	Claim Eligibility APPROVED. EMERGENCY Payment of \$1,000.00 APPROVED for FUNERAL to Church Funeral
EAST BATON ROUEBAT23-0140		240605	Claim Eligibility APPROVED. EMERGENCY Payment of \$1,000.00 APPROVED for FUNERAL to Carney Mackey Funeral Home
EAST BATON ROUEBAT23-0141		240631	Claim Eligibility APPROVED. EMERGENCY Payment of \$1,000.00 APPROVED for FUNERAL to Southern Memorial Gardens
NATCHITOCHE	NATC23-007	240464	Claim Eligibility APPROVED. EMERGENCY Payment of \$1,000.00 APPROVED for FUNERAL to Jenkins Funeral Home
ORLEANS	ORLE23-1306	240580	Claim Eligibility APPROVED. EMERGENCY Payment of \$270.00 APPROVED for Relocation to Claimant
ORLEANS	ORLE23-1319	240640	Claim Eligibility APPROVED. EMERGENCY Payment of \$522.07 APPROVED for WAGE to Claimant
ORLEANS	ORLE23-1324	240573	Claim Eligibility APPROVED. EMERGENCY Payment of \$1,000.00 APPROVED for Relocation to Claimant
ORLEANS	ORLE23-1325	240610	Claim Eligibility APPROVED. EMERGENCY Payment of \$1,000.00 APPROVED for FUNERAL to New Orleans Funeral and Cremation Service
ORLEANS	ORLE23-290	240296	Claim Eligibility APPROVED. EMERGENCY Payment of \$1,000.00 APPROVED for Relocation to James Smith Payment of \$0.00 APPROVED for WAGE to Claimant Payment of \$1,325.00 APPROVED for Relocation to Claimant
ORLEANS	ORLE23-293	240384	Claim Eligibility APPROVED. EMERGENCY Payment of \$1,000.00 APPROVED for FUNERAL to Duplain W. Rhodes Funeral Home, Inc.

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### EMERGENCY

Parish	CVR #	Claim #	Resolution
ORLEANS	ORLE23-294	240385	Claim Eligibility APPROVED. EMERGENCY Payment of \$1,000.00 APPROVED for FUNERAL to Duplain W. Rhodes Funeral Home, Inc.
ORLEANS	ORLE23-295	240386	Claim Eligibility APPROVED. EMERGENCY Payment of \$1,000.00 APPROVED for FUNERAL to Duplain W. Rhodes Funeral Home, Inc.
ORLEANS	ORLE23-296	240387	Claim Eligibility APPROVED. EMERGENCY Payment of \$1,000.00 APPROVED for FUNERAL to Gertrude Geddes Willis Funeral Home
ORLEANS	ORLE23-297	240650	Claim Eligibility APPROVED. EMERGENCY Payment of \$1,000.00 APPROVED for FUNERAL to Professional Funeral Services
ORLEANS	ORLE23-298	240451	Claim Eligibility APPROVED. EMERGENCY Payment of \$675.75 APPROVED for WAGE to Claimant EMERGENCY Payment of \$176.00 APPROVED for Relocation to Claimant
ORLEANS	ORLE23-317	240511	Claim Eligibility APPROVED. EMERGENCY Payment of \$1,000.00 APPROVED for Relocation to Claimant
ORLEANS	ORLE23-318	240535	Claim Eligibility APPROVED. EMERGENCY Payment of \$1,000.00 APPROVED for WAGE to Claimant
OUACHITA	OUAC23-019	240409	Claim Eligibility APPROVED. EMERGENCY Payment of \$1,000.00 APPROVED for FUNERAL to Mitchell Funerals and Cremations
ST. CHARLES	CHAR23-0013	240238	Claim Eligibility APPROVED. EMERGENCY Payment of \$1,000.00 APPROVED for Relocation to Claimant
ST. MARTIN	MART23-017	240584	Claim Eligibility APPROVED. EMERGENCY Payment of \$1,000.00 APPROVED for MEDICAL to Claimant
ST. MARTIN	MART23-018	240448	Claim Eligibility APPROVED. EMERGENCY Payment of \$1,000.00 APPROVED for FUNERAL to Claimant
TANGIPAHOA	TANG23-066	240537	Claim Eligibility APPROVED. EMERGENCY Payment of \$1,000.00 APPROVED for WAGE to Claimant

### FME

Parish	CVR #	Claim #	Resolution
LIVINGSTON	LIV123-3092	240441	Claim Eligibility APPROVED. Payment of \$481.00 APPROVED for Sexual Assault Forensic Exams to Children's Hospital Care Center
ORLEANS	ORLE23-3002	240516	Claim Eligibility APPROVED. Payment of \$1,000.00 APPROVED for Sexual Assault Forensic Exams to Children's Hospital New Orleans
ORLEANS	ORLE23-3227	240115	Claim Eligibility APPROVED. Payment of \$908.00 APPROVED for Sexual Assault Forensic Exams to Children's Hospital New Orleans

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STANDARD			
Parish	CVR #	Claim #	Resolution
ALLEN	ALLE21-001	231723	Claim Eligibility APPROVED. Payment of \$0.00 APPROVED for MEDICAL to Robinson Dental Group Payment of \$5,000.00 APPROVED for FUNERAL to Claimant
BOSSIER	BOSS23-0011	240328	Claim Eligibility APPROVED. Payment of \$217.69 APPROVED for FUNERAL to Claimant Payment of \$934.00 APPROVED for FUNERAL to Claimant
CALCASIEU	CALC21-602	220864	Claim Eligibility APPROVED. Payment of \$160.00 APPROVED for MENTAL HEALTH to Claimant
CALCASIEU	CALC22-016	222492	Claim Eligibility APPROVED. Payment of \$227.70 APPROVED for MENTAL HEALTH to Claimant
CALCASIEU	CALC23-0030	240411	Claim Eligibility APPROVED.
CALCASIEU	CALC23-0037	240417	Claim Eligibility APPROVED.
CALCASIEU	CALC23-0040	240514	Claim Eligibility APPROVED.
CALCASIEU	CALC23-0042	240494	Claim Eligibility APPROVED.
CALCASIEU	CALC23-0044	240497	Claim Eligibility APPROVED.
CALCASIEU	CALC23-0045	240498	Claim Eligibility APPROVED.
EAST BATON ROUEBAT19-088		191502	Claim Eligibility APPROVED. Payment of \$3,589.02 APPROVED for FUNERAL to Claimant
EAST BATON ROUEBAT23-0058		240645	Claim Eligibility APPROVED. Payment of \$4,000.00 APPROVED for FUNERAL to Legacy Funeral Directors
EAST BATON ROUEBAT23-0087		232260	Claim Eligibility APPROVED. Payment of \$2,000.00 APPROVED for FUNERAL to Claimant
EAST BATON ROUEBAT23-0087		240636	Claim Eligibility APPROVED. Payment of \$1,700.00 APPROVED for FUNERAL to Claimant
JEFFERSON	JEFF23-014	232162	Claim Eligibility APPROVED. Payment of \$6,500.00 APPROVED for FUNERAL to Claimant
JEFFERSON	JEFF23-021	240628	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
JEFFERSON	JEFF23-022	240629	Claim Eligibility DENIED - Incomplete Information. Payment of \$0.00 DENIED for MEDICAL to Hope Community Health Center

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JEFFERSON	JEFF23-023	240630	Claim Eligibility DENIED - Incomplete Information. Payment of \$0.00 DENIED for MEDICAL to Hope Community Health Center
JEFFERSON	JEFF23-025	240641	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
JEFFERSON	JEFF23-026	240642	Claim Eligibility DENIED - Not a Compensable Expense. Payment of \$0.00 DENIED for MEDICAL to Hope Community Health Center
JEFFERSON	JEFF23-027	240643	Claim Eligibility DENIED - Incomplete Information. Payment of \$0.00 DENIED for MEDICAL to Hope Community Health Center
JEFFERSON	JEFF23-028	240646	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
JEFFERSON	JEFF23-029	240649	Claim Eligibility DENIED - Incomplete Information. Payment of \$0.00 DENIED for MEDICAL to Hope Community Health Center
JEFFERSON	JEFF23-030	240653	Claim Eligibility DENIED - Incomplete Information. Payment of \$0.00 DENIED for MEDICAL to Hope Community Health Center
JEFFERSON	JEFF23-031	240655	Claim Eligibility DENIED - Incomplete Information. Payment of \$0.00 DENIED for MEDICAL to Hope Community Health Center
JEFFERSON	JEFF23-032	240656	Claim Eligibility DENIED - Incomplete Information. Payment of \$0.00 DENIED for MEDICAL to Hope Community Health Center
JEFFERSON	JEFF23-033	240657	Claim Eligibility DENIED - Not a Compensable Expense. Payment of \$0.00 DENIED for MEDICAL to Hope Community Health Center
JEFFERSON	JEFF23-034	240658	Claim Eligibility DENIED - Incomplete Information. Payment of \$0.00 DENIED for MEDICAL to Hope Community Health Center
JEFFERSON	JEFF23-035	240659	Claim Eligibility DENIED - Incomplete Information. Payment of \$0.00 DENIED for MEDICAL to Hope Community Health Center
JEFFERSON	JEFF23-036	240660	Claim Eligibility DENIED - Incomplete Information. Payment of \$0.00 DENIED for MEDICAL to Hope Community Health Center
JEFFERSON	JEFF23-037	240661	Claim Eligibility DENIED - Contribution. Payment of \$0.00 DENIED for MEDICAL to Hope Community Health Center
JEFFERSON	JEFF23-038	240662	Claim Eligibility DENIED - Incomplete Information. Payment of \$0.00 DENIED for MEDICAL to Hope Community Health Center
JEFFERSON	JEFF23-039	240663	Claim Eligibility APPROVED. Payment of \$1,805.00 APPROVED for MEDICAL to Hope Community Health Center
JEFFERSON	JEFF23-040	240664	Claim Eligibility DENIED - Incomplete Information. Payment of \$0.00 DENIED for MEDICAL to Hope Community Health Center
JEFFERSON	JEFF23-041	240665	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center

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STANDARD			
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JEFFERSON	JEFF23-042	240666	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
JEFFERSON	JEFF23-043	240667	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
JEFFERSON	JEFF23-044	240668	Claim Eligibility DENIED - Claim Not Filed Timely. Payment of \$0.00 DENIED for MEDICAL to Hope Community Health Center
JEFFERSON	JEFF23-045	240669	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
JEFFERSON	JEFF23-046	240670	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
JEFFERSON	JEFF23-047	240675	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
JEFFERSON	JEFF23-049	240567	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for FUNERAL to Claimant
LAFAYETTE	LAF23-0017	240577	Claim Eligibility APPROVED. Payment of \$1,516.00 APPROVED for FUNERAL to Claimant Payment of \$3,484.00 APPROVED for FUNERAL to Kinchen Funeral Home, Inc.
ORLEANS	ORLE19-128	200307	Claim Eligibility APPROVED. Payment of \$390.00 APPROVED for MEDICAL to New Orleans Family Justice Center
ORLEANS	ORLE21-0300	240525	Claim Eligibility DENIED - No Pecuniary Loss. Payment of \$0.00 DENIED for FUNERAL to Claimant
ORLEANS	ORLE22-630	240530	Claim Eligibility APPROVED. Payment of \$2,706.00 APPROVED for MENTAL HEALTH to Claimant Payment of \$59.00 APPROVED for MENTAL HEALTH to Claimant Payment of \$2,235.00 APPROVED for MENTAL HEALTH to Claimant
ORLEANS	ORLE22-900	232008	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE22-923	240336	Claim Eligibility APPROVED. Payment of \$415.64 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE22-937	240620	Claim Eligibility DENIED - Contribution. Payment of \$0.00 DENIED for FUNERAL to Claimant
ORLEANS	ORLE22-939	240539	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for FUNERAL to Claimant
ORLEANS	ORLE23-0259	240333	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center

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ORLEANS	ORLE23-0301	240556	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-0302	240571	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-0304	240572	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-0305	240501	Claim UNABLE TO PROCESS - Closed/Unable to Process. Payment of \$0.00 APPROVED for FUNERAL to Claimant
ORLEANS	ORLE23-0310	240552	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-032	231203	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for FUNERAL to Claimant
ORLEANS	ORLE23-032	233041	Claim Eligibility APPROVED.
ORLEANS	ORLE23-093	232021	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-130	231903	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for FUNERAL to Claimant
ORLEANS	ORLE23-151	240500	Claim Eligibility APPROVED. Payment of \$5,360.00 APPROVED for FUNERAL to Claimant
ORLEANS	ORLE23-159	232218	Claim Eligibility APPROVED. Payment of \$620.90 APPROVED for MEDICAL to Hope Community Health Center Payment of \$959.95 APPROVED for MEDICAL to University Medical Center New Orleans
ORLEANS	ORLE23-188	232386	Claim Eligibility APPROVED. Payment of \$6,500.00 APPROVED for FUNERAL to Claimant
ORLEANS	ORLE23-202	232459	Claim Eligibility APPROVED. Payment of \$500.50 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-215	240540	Claim Eligibility APPROVED. Payment of \$2,053.75 APPROVED for FUNERAL to Claimant
ORLEANS	ORLE23-233	240652	Claim Eligibility APPROVED. Payment of \$4,057.70 APPROVED for FUNERAL to Claimant
ORLEANS	ORLE23-234	233096	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-237	233147	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center



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STANDARD			
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ORLEANS	ORLE23-238	233148	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-239	233149	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-240	233150	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-243	240031	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-244	240032	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-245	240033	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-246	240034	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-247	240035	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-248	240036	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-249	240037	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-250	240038	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-251	240039	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-252	240040	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-259	240085	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-260	240086	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-261	240065	Claim UNABLE TO PROCESS - Closed/Unable to Process. Payment of \$0.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-267	240529	Claim Eligibility APPROVED. Payment of \$3,749.40 APPROVED for FUNERAL to Claimant
ORLEANS	ORLE23-268	240505	Claim Eligibility APPROVED. Payment of \$6,500.00 APPROVED for FUNERAL to Claimant

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STANDARD			
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ORLEANS	ORLE23-271	240222	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-273	240223	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-274	240221	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-275	240220	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-276	240187	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-277	240184	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-278	240219	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-279	240185	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-282	240671	Claim UNABLE TO PROCESS - Closed/Unable to Process. Payment of \$0.00 APPROVED for FUNERAL to Claimant
ORLEANS	ORLE23-286	240506	Claim UNABLE TO PROCESS - Closed/Unable to Process. Payment of \$0.00 APPROVED for FUNERAL to Claimant
ORLEANS	ORLE23-288	240252	Claim Eligibility APPROVED. Payment of \$3,004.57 APPROVED for Relocation to Claimant
ORLEANS	ORLE23-289	240508	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for FUNERAL to Claimant
ORLEANS	ORLE23-313	240565	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-314	240553	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-315	240566	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-316	240554	Claim Eligibility APPROVED. Payment of \$500.00 APPROVED for MEDICAL to Hope Community Health Center
ORLEANS	ORLE23-3266	240282	Claim Eligibility APPROVED. Payment of \$316.40 APPROVED for MEDICAL to Hope Community Health Center
OUACHITA	OUAC23-015	240633	Claim Eligibility APPROVED. Payment of \$15,000.00 APPROVED for WAGE to Claimant

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### STANDARD

Parish	CVR #	Claim #	Resolution
OUACHITA	OUAC23-020	240504	Claim Eligibility APPROVED. Payment of \$6,500.00 APPROVED for FUNERAL to Richardson Funeral Home, Inc.
ST. BERNARD	BERN21-002	232949	Claim Eligibility APPROVED. Payment of \$400.00 APPROVED for WAGE to Claimant
ST. MARTIN	MART23-010	232913	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for FUNERAL to Fletcher Funeral Home (NI)
VERNON	VERN23-0001	240313	Claim Eligibility DENIED - Not a Compensable Expense. Payment of \$0.00 DENIED for MEDICAL to Rapides Regional Medical Center

### VOID/REISSUE

Parish	CVR #	Claim #	Resolution
ORLEANS	ORLE19-051	190924	Claim Eligibility APPROVED. Payment of \$26.83 APPROVED for MEDICAL to Claimant
OUACHITA	OUAC23-010	232590	Claim Eligibility APPROVED. Payment of \$24.63 APPROVED for FUNERAL to Claimant

### LATE ADDITION

Parish	CVR #	Claim #	Resolution
CADD0	CADD21-006	210788	Claim Eligibility APPROVED. Payment of \$4,500.00 APPROVED for FUNERAL to Precious Memories Mortuary
CALCASIEU	CALC23-018	240737	Claim Eligibility APPROVED. Payment of \$1,000.00 APPROVED for FUNERAL to Claimant
EAST BATON ROUEBAT23-0128		240053	Claim Eligibility APPROVED. Payment of \$1,468.70 APPROVED for FUNERAL to A. Hamilton Platinum Funeral Services Payment of \$2,531.30 APPROVED for FUNERAL to Claimant
ORLEANS	ORLE23-290	240296	Claim Eligibility APPROVED. EMERGENCY Payment of \$1,000.00 APPROVED for Relocation to James Smith Payment of \$0.00 APPROVED for WAGE to Claimant Payment of \$1,325.00 APPROVED for Relocation to Claimant
OUACHITA	OUAC23-011	232580	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for FUNERAL to Claimant
OUACHITA	OUAC23-012	232589	Claim Eligibility APPROVED. Payment of \$509.00 APPROVED for FUNERAL to Claimant
OUACHITA	OUAC23-013	232583	Claim Eligibility APPROVED. Payment of \$5,000.00 APPROVED for FUNERAL to Claimant
ST. TAMMANY	TAMM23-003	240635	Claim Eligibility APPROVED. Payment of \$1,344.98 APPROVED for CRIME EVIDENCE to Claimant Payment of \$5,000.00 APPROVED for FUNERAL to Claimant

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### LATE ADDITION

Parish	CVR #	Claim #	Resolution
TANGIPAHOA	TANG23-3045	240710	Claim Eligibility APPROVED. Payment of \$306.79 APPROVED for MEDICAL to St. Tammany Health System Payment of \$865.90 APPROVED for MEDICAL to St. Tammany Emergency Physicians Group LLC

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## ADJOURNMENT / OTHER BUSINESS

Ms. Shorty invited public comments to be addressed to the board. No public comments were given.

The Board discussed Act. No. 393 of the 2023 Regular Session.

The Board agreed to schedule the next meeting for January 11, 2023 at 9:00 a.m.

Ms. Gautier made a motion to adjourn the meeting. Ms. Thibodeaux seconded the motion. Ms. Shorty adjourned the meeting at 11:58 a.m.

CVR Action: The board approved 99 payments.

EXPLANATION: As approved at the 12/12/2023 meeting, the CVR Board requests the LCLE Fiscal Department to prepare 99 claims for checks totaling \$175,227.52 as specified in the summary below.

### SUMMARY:

FME FUNDS: 10 CLAIMS; \$9,038.09  
FEDERAL FUNDS: 2 CLAIMS; \$6,524.63  
JRI FUNDS: 87 CLAIMS; \$159,664.80  
TOTALS: 99 CLAIMS; \$175,227.52

### TOTAL FUNDS AWARDED FROM JULY 1, 2023 TO December 15, 2023:

FME FUNDS: \$1,087,236.73  
FEDERAL FUNDS: \$710,716.80  
JRI FUNDS: \$349,008.97  
STATE FUNDS: \$148,267.79  
TOTALS: \$2,295,230.29