

# NOTICE OF INTENT TO APPEAL

STATE OF MAINE  
WORKERS' COMPENSATION BOARD  
APPELLATE DIVISION  
1037 FOREST AVE, STE 11  
PORTLAND, MAINE 04103-3382

CASE NAME: Brian Van Camp  
WCB FILE# or AIU CASE#: 92021644F  
ISSUANCE DATE OF DECISION: May 25, 2017  
MAIL DATE OF DECISION: May 26, 2017

<b>CHECK ONE:</b> <input type="checkbox"/> Non-testimonial hearing. No <input type="checkbox"/> APPELLANT HAS ORDERED TRANSCRIPT transcript FROM _____ (please notify Appellate Division when you receive transcript) <input type="checkbox"/> TRANSCRIPT HAS ALREADY BEEN PREPARED <input type="checkbox"/> REQUEST HAS BEEN MADE TO REGIONAL OFFICE TO ORDER TRANSCRIPT
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APPELLANT:  
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APPELLEE:  
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REPRESENTING: Brian Van Camp  
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**Please include the same information about additional parties on a separate sheet.**

## NOTICE

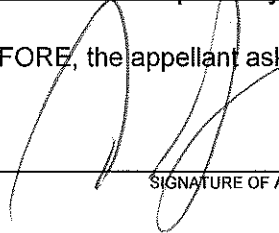
A party in interest may file with the Appellate Division a notice of appeal of a decision by an administrative law judge pursuant to 39-A M.R.S.A. §318 within 20 days after receipt of notice of issuance of the decision by the administrative law judge. When filing this notice, the appellant also shall file with the clerk a copy of the decision appealed.

1. On May 30, 2017, S.D. Warren Company/CCMSI received notice of the issuance of a decision by Administrative Law Judge Evelyn Knopf in the above captioned case.

2. The appellant appeals the following issue(s):

Whether the Board erred in its interpretation of Section 221 of the Act when granting the Petition to Compel Payment?

THEREFORE, the appellant asks the Appellate Division to review the decision pursuant to 39-A M.R.S.A. §321-B.

  
SIGNATURE OF APPELLANT

DATED: May 31, 2017

### FILING INSTRUCTIONS

1. Mail original notice to the clerk of the Appellate Division at the above address by regular mail, or hand deliver to any regional Board office.
2. Mail one (1) copy by certified mail, return receipt requested to each other party named above.
3. Keep one (1) copy for yourself and keep the green certified mail cards when returned to you by the U.S. Post Office.

The State of Maine provides equal opportunity in employment and programs. Auxiliary aids and services are available to individuals with disabilities upon request. For assistance with this form, contact the ADA Coordinator at the Maine Workers' Compensation Board. Telephone: (888) 801-9087 or TTY Maine Relay 711.

WCB-240 (eff. 1/1/13, rev. 10/21/16)