

ATTORNEY PETERSON LAW OFFICES
2411 S BROADWAY
MENOMONIE WI 54751

WC CLAIM NO: 9999-999999 IF YOU CALL OR WRITE US
INJURY DATE: 01/01/98 PLEASE USE WC CLAIM NO.
EMPLOYEE: SIMPLES-SAMPLER, TESTER SAMPLE
EMPLOYER: SAMPLE EMPLOYER
INSURER NO:

You have filed an Application for Review of Compromise. Under Wisconsin Statutes 102.16(1), the review of compromise is discretionary with the Department. You are requested to submit copies of the medical reports on which you rely and the name of the witnesses you would produce, together with either their affidavits or a summary of the testimony each witness would offer.

Based upon the medical reports and the affidavits or summaries, the Department will determine whether or not a hearing should be held for review of the compromise or if the compromise should be confirmed. If the Department determines a hearing should be held, the parties will be notified.

Ordinarily, a compromise will not be set aside unless:

- There was fraud or overreaching at the time of the compromise; or
- There have been developments well beyond the reasonable expectation of the parties at the time of the compromise; or
- Some facts have come to light which the parties could not reasonably have known at the time of the compromise.

Department of Workforce Development
Division of Worker's Compensation

GL31 (R. 08/2001)