

## Board of Commissioners of Cook County

## Legislation Details (With Text)

File #:	20-2	682	Version:	1	Name:	Workers' Compensation Cla 2020	im Payments - May
Туре:	Workers' Compensation Claims (Risk Management)				Status:	Filed	
File created:	6/3/2020				In control:	Finance Committee	
On agenda:	6/18/2020				Final action:	6/18/2020	
Title:	Department: Risk Management Report Title: Receive and File - Workers' Compensation Claim Payments Report Period: 5/1/2020 - 5/31/2020						
	Summary: The Department of Risk Management is submitting for your information Workers' Compensation Claim Payments for the month ending May 2020. Payments total \$1,050,563.51						
Sponsors:							
Indexes:	DEANNA ZALAS, Director, Department of Risk Management						
Code sections:							
Attachments:							
Date	Ver.	Action By	,		Act	tion	Result
6/18/2020	1	Board of	Commission	ers	rec	ceive and file	Pass

**Department:** Risk Management

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