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CLIENT INFORMATION SHEET

CONTACT INFORMATION

8/24-1965

Name: Donnie Rakestraw DOB Donnie SSN: 494-78-4402

Address: 15739 Whispering Oaks drive paola kansas 66071

Telephone: 913-202-9521 Email: Supertech007@gmail.com

ACCIDENT/INJURY INFORMATION

Date of Accident: 3- 28-2024 Body Parts Injured: Right foot

Please provide a brief description of how the injury occurred: _____

Reported to work and I was instructed to special projects. The floor is solid concrete and we were not provided t

Where did the injury occur? (place/county) Edgerton kansas usa

*With the mats.
standing w/o
refined mats. Ulcerated
foot*

EMPLOYER INFORMATION

Ditts

Name & Address of Employer: Ditts pretzels 32180 w 191st st edgerton kansas 66030

Job Title: Fork truck driver Wage: 19.00 hr Full Time/Part Time: Full

How many hours worked per week? 36 to 40 Average Overtime: 0

Benefits: Health

My attorney told me workers' compensation was my only remedy and affirmatively excluded all others. I trusted that advice, which concealed my federal rights and caused delayed discovery, mandating equitable tolling.