

BEFORE THE WORKERS' COMPENSATION BOARD

STATE OF OREGON

In the Matter of the Compensation ) WCB Case No. \_\_\_\_\_  
 ) Claim No. \_\_\_\_\_  
 of ) DOI: \_\_\_\_\_  
 ) WCD File No. \_\_\_\_\_  
 )  
 \_\_\_\_\_, Claimant ) REQUEST FOR BOARD REVIEW

\_\_\_\_\_ requests Board review of ALJ \_\_\_\_\_'s order  
dated \_\_\_\_\_. Review is requested because

\_\_\_\_\_  
Payment of compensation awarded by the ALJ's order ☐ will / ☐ will not  
be stayed under ORS 656.313.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Attorney for \_\_\_\_\_

*[Also attach certificate of service by mail, fax, or e-mail.]*