

APPEAL NO. 210093  
FILED APRIL 5, 2021

This appeal arises pursuant to the Texas Workers' Compensation Act, TEX. LAB. CODE ANN. § 401.001 *et seq.* (1989 Act). A contested case hearing was held on December 8, 2020, in (city), Texas, with (administrative law judge) presiding as the administrative law judge (ALJ). The ALJ resolved the disputed issue by deciding that the respondent (claimant) had disability as a result of the compensable injury of (date of injury), from September 5, 2019, through February 7, 2020.

The appellant (carrier) appealed the ALJ's disability determination. The appeal file does not contain a response from the claimant to the carrier's appeal.

DECISION

Reversed and remanded for reconstruction of the record.

The ALJ's decision and order states that the following exhibits were admitted into evidence: ALJ's Exhibit 1; claimant's Exhibits 1 through 6, and carrier's Exhibits A through H. The carrier's exhibit list states that Exhibit G contains 1 page; however, the case file sent for review does not contain a carrier Exhibit G. Because the record is incomplete, it must be remanded for the addition or reconstruction of the missing exhibit. See Appeals Panel Decision (APD) 030543, decided April 18, 2003. Additionally, we note that Stipulation 1.A. and Conclusion of Law No. 2 state that venue is proper is the (city) Office, instead of the (city) Field Office.

Pending resolution of the remand, a final decision has not been made in this case. However, since reversal and remand necessitate the issuance of a new decision and order by the ALJ, a party who wishes to appeal from such new decision must file a request for review not later than 15 days after the date on which such new decision is received from the Texas Department of Insurance, Division of Workers' Compensation, pursuant to Section 410.202 which was amended June 17, 2001, to exclude Saturdays and Sundays and holidays listed in Section 662.003 of the Texas Government Code in the computation of the 15-day appeal and response periods. See APD 060721, decided June 12, 2006.

The true corporate name of the insurance carrier is **TEXAS MUTUAL INSURANCE COMPANY** and the name and address of its registered agent for service of process is

**RICHARD J. GERGASKO, PRESIDENT  
2200 ALDRICH ST.  
AUSTIN, TEXAS 78723.**

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Cristina Beceiro  
Appeals Judge

CONCUR:

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Carisa Space-Beam  
Appeals Judge

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Margaret L. Turner  
Appeals Judge