



SUPREME COURT OF NEVADA
OFFICE OF THE CLERK
ELIZABETH A. BROWN, CLERK
201 SOUTH CARSON STREET, SUITE 201
CARSON CITY, NEVADA 89701-4702

Telephone
(775) 684-1600

September 20, 2021

Aimee Morrison
1801 S. Decatur, #26764
Las Vegas, NV 89126

Re: Morrison vs. O'Neil, Supreme Court Case No. 83389

Dear Ms. Morrison:

Pro se parties are not permitted to file an appendix to their briefs unless ordered to do so by this court. NRAP 30(i). Therefore, we are returning the appendix, unfiled.

Sincerely,

D. Richards
Deputy Clerk

Enclosures



SOCIAL SECURITY **RETURNED
UNFILED**

Refer to:
S9H: SSA-2020-002711

May 12, 2020

SEP 20 2021

ELIZABETH A. BROWN
CLERK OF SUPREME COURT
BY DEPUTY CLERK

Aimee O'Neil
6500 W Charleston Blvd
#268
Las Vegas, NV 89146

We have received your request for records and a disability determination. According to our records, you were found to have a favorable physical disability determination on December 16, 1994. At this time we have no such evidence or findings of a mental impairment, learning impairment, or any other such limitation. There was never a disability decision for any such impairment according to federal records and findings. Case number (SSA-2020-002711). After a recent fact finding hearing at the Denver office it was determined that you no longer are eligible for any such physical disability benefits as per request of your Dr.

Mary Ann Zimmerman
Privacy Officer



4700 E. Hale Pkwy • Suite 550
Denver, CO 80220
303.370.2699
FAX 303.321.8814

Andrew W. Pomeroy, M.D. Refills during office hours only: 8:30 A.M. to 4:00 P.M., Monday - Friday.

Eric J. Lindberg, M.D.
For: Amiee O'Neil Date: 5/12/21

Joshua Gonzalez, M.D. Address _____

Leslie E. Vidal, M.D.

Scott J. Meadows, D.O.

Brian J. Lounsbury, M.D.

Thomas F. McElhinney, M.D.

Kathleen Stoeber, P.A.-C

Rachelle Block, P.A.-C

Ruth Donnelly, P.A.-C

Tamara Rastvor, P.A.-C

Wendy Ewaldson Olson, P.A.-C

Sharon S. Cameron, P.A.-C

R No Disability
Return to work!

Label 2 3 4 5
General use may be used unless checked ☒
Authorized Signature: _____
Reg. _____

If any part of this prescription is illegible or not understood, it is your duty to call the doctor for clarification.