

# WORKERS' COMPENSATION APPEALS BOARD

STATE OF CALIFORNIA

Donald Meidinger *Applicant*

VS.

San Joaquin County Mosquito Abatement District  
and  
Keenan and Associates, Administrators  
*Defendants*

Case No. **STK 110783**  
**Stipulations**  
**with Request**  
**for Award**

The parties hereto stipulate to the issuance of an Award and/or Order, based upon the following facts, and waive the requirements of Labor Code Section 5313:

1. Donald Meidinger, born \_\_\_\_\_, while  
(Employee) Mosquito Control  
employed within the State of California as Technician on 2-4-92,  
(Occupation) (Date of Injury)  
by San Joaquin County Mosquito Abatement District whose compensation insurance carrier was  
(Employer)  
self-insured sustained injury arising out of and in the course of employment thigh, back, neck  
(Parts of body injured)

2. The injury caused temporary disability for the period no lost time  
through \_\_\_\_\_ for which indemnity is payable at \$ \_\_\_\_\_ per  
week, less credit for such payments previously made.

3. The injury caused permanent disability of 0:0 %, for which indemnity is payable at \$ \_\_\_\_\_  
per week beginning \_\_\_\_\_, in the sum of \$ 0, less credit for such  
payments previously made.

An informal rating ~~has~~ has not been previously issued.  
(Select one)

4. There ~~is~~ is not ~~may be~~ need for medical treatment to cure or relieve from the effects of said injury.  
(Select one)

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5. Medical-legal expenses are payable by defendant as follows:

N/A

6. Applicant's attorney request a fee of \$0

7. Liens against compensation are payable as follows:

N/A

8. Other stipulations:

N/A

X 4/13/95  
Dated

Donald Meidinger X [Signature]  
Applicant

\_\_\_\_\_  
Social Security Number of Applicant

5503 S. Airport Way, Stockton, CA 95206  
Address of Employer

\_\_\_\_\_  
Address of Applicant

392D Connors Ct., Chico, CA 95926  
Address of Insurance Company

[Signature]  
Christopher E. Bailey  
Attorney for Applicant

[Signature]  
Paul R. Geiser MARY ANNE VIGLANTI  
~~Attorney for~~ Authorized Representative for Defendant

1912 I Street, Ste 102, Sacramento, CA 95814  
Address of Attorney for Applicant

same as above  
Address of ~~Attorney for~~ or Authorized Representative

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**AWARD**

STK 110783

AWARD IS MADE in favor of Donald Meidinger against  
San Joaquin County Mosquito Abatement District of:

- (A) Temporary disability indemnity in accordance with paragraph 2 above,
- (B) Permanent disability indemnity in accordance with paragraph 3 above.

Less the sum of \$ 0 payable to applicant's attorney as the reasonable value of services rendered.

Less liens in accordance with Paragraph 7 above,

- (C) Further medical treatment in accordance with Paragraph 4 above,
- (D) Reimbursement for medical-legal expenses in accordance with Paragraph 5 above,

(E) *There was no disability attributable to the injury.  
The Request for Sanctions by Both parties is  
inappropriate and denied.*

*4/20/95*

Dated:



Referee

WORKERS' COMPENSATION APPEALS BOARD

Copy served on all persons listed on  
 Official Address Record. *APPL ATTY 4/20/95*  
*DEF ATTY 4/20/95*  
 Date: \_\_\_\_\_

*DEF ATTY TO SERVE ALL PARTIES*  
 NOT PRESENT THIS DATE. \_\_\_\_\_