

WORKERS' COMPENSATION APPEALS BOARD

STATE OF CALIFORNIA

Tom Beard

Applicant

Case No. STK 124216, 124214

Stipulations

with Request

for Award

vs.

San Joaquin Mosquito Abatement
Dist. (Permissibly Self-Insured)

Defendants

RECEIVED
JUN 30 1997
DIVISION OF
WORKERS COMPENSATION
STOCKTON OFFICE

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. Tom Beard (Employee), born 9-24-49, while

employed within the State of California as Mosquito Control Tech. on 5-22-95, 1-18-96 CT
(Occupation) (Date of Injury)

by San Joaquin Mosquito Abatement (Employer) whose compensation insurance carrier was
Dist. (Permissibly Self-Insured)
Keenan & Assoc. sustained injury arising out of and in the course of employment left knee
(Parts of body injured)

2. The injury caused temporary disability for the period 1-18-96

through 5-14-96 for which indemnity is payable at \$406.00 per
week, less credit for such payments previously made.

3. The injury caused permanent disability of 15:1 ~~*13:1~~ %, for which indemnity is payable at \$ 140.00 ~~154.00~~ ^{154.00}

per week beginning 5-15-96, in the sum of \$ 6,892.50 ~~6,055.00~~, less credit for such
payments previously made. * Less previous Award of 9:3 (\$4095.00) $\frac{1}{2}$ less PDA \$812.00

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)

DEPARTMENT OF INDUSTRIAL RELATIONS
DIVISION OF INDUSTRIAL ACCIDENTS

WORKERS' COMPENSATION APPEALS BOARD

STATE OF CALIFORNIA

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

6. Applicant's attorney request a fee of \$ 450⁰⁰ (1290 of 3797.50)

7. Liens against compensation are payable as follows: N/A

8. Other stipulations:

Interest will be included if Award is paid within twenty-five (25) days of of date approved.

Less permanent disability advances to date of \$812.00 and previously Awarded disability of 9:3, or \$4,095.00, STK 98489.

Dated June 26, 1997
Tom Beard

Applicant
Tom Beard
558-76-6159
Social Security Number of Applicant
2937 Toyon Drive #2
Stockton, CA 95203
Address of Applicant

David Belden
Attorney for Applicant
David Belden
P.O. Box 160467
Address of Attorney for Applicant
Sacramento, CA 95816-0467

7759 S. Airport Way
Stockton, CA 95206
Address of Employer
392 D Connors Ct.
Chico, CA 95926
Address of Insurance Company

Michael H Powers
Attorney or Authorized Representative for Defendant
~~Elena Piazzisi~~ Michael Powers
~~392 D Connors Ct.~~ MEF-SAC
Address of Attorney or Authorized Representative
Chico, CA 95926

WORKERS' COMPENSATION APPEALS BOARD

STATE OF CALIFORNIA

STK 124216, 124219
JOINT AWARD

AWARD IS MADE in favor of Tom Beard against
San Joaquin Mosquito Abatement Dist. (Permissibly Self-Insured) 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 \$ 450.00 payable to applicant's attorney as the reasonable value of services rendered.

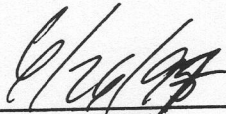
Less liens in accordance with Paragraph 7 above.


(C) Further medical treatment in accordance with Paragraph 4 above,

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

(E) Interest will be included if Award is paid within twenty-five (25) days of date approved, pursuant to paragraph 8 above.

Less permanent disability advances to date of \$812.00 and previously Awarded permanent disability of 9:3, or \$4,095.00, STK 98489, pursuant to paragraph 8 above.


Dated: _____


Workers' Compensation Judge
WORKERS' COMPENSATION APPEALS BOARD

Copy served on all persons listed on
Official Address Record.

Date: 6/26/17

By: Michael N Powers
(Signature)

WORKERS' COMPENSATION APPEALS BOARD OF THE STATE OF CALIFORNIA
MINUTES OF HEARING

Tom Beards
Applicant,
v.
San Joaquin Mosquito
Abt. Kenneth Dist
(PSU)
Defendant.

CASE NO.: STK 126216
126214

- TRIAL CALENDAR
- MSC CALENDAR
- CONFERENCE CALENDAR
- OTHER:

Place and Time: Date: 6/26/97 Time: 8:30 Judge: Bovett

APPEARANCES: [Print names legibly]

Applicant present? () yes () no* Same address? () yes () no* [*if no, explain below]

Applicant's Attorney: David Belden, Farrell et al

Defendant's Attorney: Mike Powers, M & F

Other (Lien clmt., Interp., etc.):

DISCUSSION:


DO NOT WRITE BELOW THIS LINE

DISPOSITION:

- C&R STIPULATIONS submitted this date for approval [Approved? yes () no]
- _____ DAYS TO SUBMIT () C&R () STIPS ; Otherwise, off calendar
- CONTINUED to: () TRIAL [estimated time: (1 hr) (2 hr) (4 hr) (6 hr) (8 hr)]
() MSC () CONFERENCE () OTHER: [see notes]
- on _____ at _____ before Judge _____
- Matter is Ordered off calendar (see attached sheet)
- OTHER: [if checked, see notes below.]

NOTES:

Date: 6/26/97


DAVID D. BOVETT
Workers' Compensation Judge

IS HEREBY ORDERED TO SERVE
 NOTICE OF THE NEXT HEARING
 A COPY OF THIS DOCUMENT
ON ALL PARTIES/LIEN CLAIMANTS WITH A PROOF OF
SERVICE TO BE RETAINED IN HIS/HER FILE.

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STK 0124216

WORKERS' COMPENSATION APPEALS BOARD
STATE OF CALIFORNIA

MANDATORY SETTLEMENT CONFERENCE
NOTICE OF HEARING CANCELLATION AND RE-SCHEDULE

APPLICANT: TOM G. BEARD
EMPLOYER: SAN JOAQUIN MOSQUITO AND VECTOR CTL
INSURER: KEENAN & ASSOCIATES

..
** RE-SCHEDULE **

WCAB CASE NUMBER: STK 0124216

HEARING DATE: 06/26/97 THURSDAY *MANDATORY SETTLEMENT CONF*

HEARING TIME: 8:30 A.M

PLACE: 31 E. CHANNEL STREET #344
STOCKTON CA. 95202-2314

JUDGE: DAVID BOVETT
(209) 948-7759

..
NOTICE IS HEREBY GIVEN TO THE PARTIES IN THE ABOVE ENTITLED CASE THAT
THE HEARING HERETOFORE SCHEDULED FOR 06/10/97 HAS BEEN CANCELLED.
YOU ARE HEREBY NOTIFIED THAT THE ABOVE ENTITLED CASE HAS BEEN
RE-SCHEDULED.

NOTICE

NOTICE TO INSURED EMPLOYER: YOUR ATTENDANCE AT THIS HEARING MAY NOT BE
NECESSARY. PLEASE CHECK WITH YOUR INSURANCE COMPANY.