



DIVISION OF WORKERS' COMPENSATION

WORKERS' COMPENSATION APPEALS BOARD

NOTICE OF HEARING

DATE OF SERVICE: 02/13/2014

EAMS CASE NBR(s): ADJ7004227

EMPLOYEE: TIFFANY ANDERSON

EMPLOYER: SAN JOAQUIN COUNTYIF MOSQUITO AND VECTOR CONTROL DISTRICT

INSURER: ACCLAMATION SACRAMENTO

TYPE OF HEARING: Expedited Hearing

DATE OF HEARING: 03/12/2014 WEDNESDAY

TIME OF HEARING: 01:30 P.M.

HEARING LENGTH (HOURS):

LOCATION: 31 E. CHANNEL STREET
#344
STOCKTON CA 95202

Map available at: <http://www.dir.ca.gov/dwc/dir2.htm>

JUDGE: W. Kearse McGill
209 948-7759

SPECIAL COMMENTS/INSTRUCTIONS:

You are hereby notified that the above entitled case is set for hearing before the Division of Workers' Compensation of the State of California. Continuances are not favored and will be granted only upon clear showing of good cause. Please arrive before scheduled appearance time.

NOTICE TO PARTIES: **Disability Accommodation is available upon request.** Individuals with a disability requiring a reasonable accommodation (such as an auxiliary aid or service or a modification of policies or procedures) to ensure effective communication and access to the programs of the Division of Workers' Compensation, should contact the **Disability Accommodation Coordinator** at the local District Office of the DWC, or the **Statewide Disability Accommodation Coordinator** at 1-866-681-1459 (toll free) or through the **California Relay Service**, by dialing 711 or 1-800-735-2929 (TTY) or 1-800-855-3000 (TTY-Spanish).

Accommodations can include reasonable modifications of procedures or the provision of auxiliary aids or services including, but not limited to, assistive listening devices (ALD), Computer-Aided Realtime Translation (CART), sign language interpreters, documents in alternative formats, magnifiers, and audio cassette recordings. **Accommodation requests should be made as soon as possible and at least five (5) days before the hearing, especially for requests for an ALD, a sign language interpreter, or CART.**

NOTICE TO INSURER : The employer will not receive Notice of Hearing.

WC01



DIVISION OF WORKERS' COMPENSATION

WORKERS' COMPENSATION APPEALS BOARD

NOTICE OF HEARING

DATE OF SERVICE: 02/13/2014

EAMS CASE NBR(s): ADJ7010682

EMPLOYEE: TIFFANY ANDERSON

EMPLOYER: SAN JOAQUIN MOSQUITO AND VECTOR CTL

INSURER: ACCLAMATION SACRAMENTO

TYPE OF HEARING: Expedited Hearing

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WC01



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WORKERS' COMPENSATION APPEALS BOARD

NOTICE OF HEARING

DATE OF SERVICE: 02/13/2014

EAMS CASE NBR(s): ADJ9066508

EMPLOYEE: TIFFANY ANDERSON

EMPLOYER: SAN JOAQUIN COUNTY MOSQUITO AND VECTOR CONTROL

INSURER: ACCLAMATION SACRAMENTO

TYPE OF HEARING: Expedited Hearing

DATE OF HEARING: 03/12/2014 WEDNESDAY

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WORKERS' COMPENSATION APPEALS BOARD

NOTICE OF HEARING

DATE OF SERVICE: 02/13/2014

EAMS CASE NBR(s): ADJ7004221

EMPLOYEE: TIFFANY ANDERSON

EMPLOYER: SAN JOAQUIN COUNTY MOSQUITO AND VECTOR CONTROL DISTRICT

INSURER: ACCLAMATION SACRAMENTO

TYPE OF HEARING: Expedited Hearing

DATE OF HEARING: 03/12/2014 WEDNESDAY

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NOTICE OF HEARING

DATE OF SERVICE: 02/13/2014

EAMS CASE NBR(s): ADJ7976768

EMPLOYEE: TIFFANY ANDERSON

EMPLOYER: SAN JOAQUIN MOSQUITO AND VECTOR CONTROL DISTRICT

INSURER: ACCLAMATION SACRAMENTO

TYPE OF HEARING: Expedited Hearing

DATE OF HEARING: 03/12/2014 WEDNESDAY

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