

AIMSTM
ACCLAMATION INSURANCE
MANAGEMENT SERVICES

07/08/2008

Tiffany Anderson
1416 Iris Drive #7
Lodi, CA 95242

Claim Number: VE0700184
Employee: Tiffany Anderson
Employer: San Joaquin County MVCD
Date of Injury: 06/19/2008

Dear Ms. Anderson:

Acclamation Insurance Management Services is the Workers' Compensation administrator for Employer: San Joaquin County Mosquito Vector Control District.

We are sorry to learn of your recent injury at work. We have enclosed a pamphlet, "Facts for Injured Workers," which explains your workers' compensation benefits.

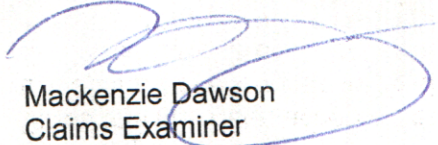
Since this has been accepted as a work related injury, you are entitled to reimbursement for transportation expenses to obtain medical treatment at .505 cents per mile, pursuant to California Labor Code Section 4600. To have this expense reimbursed to you, please complete and return the enclosed form to us. We will then review it for payment. Please make sure the reimbursement request is clearly and accurately itemized and is signed and dated by you.

Please note that all treatment you receive from your doctor will be subject to mandatory Utilization Review to ensure the doctors course of treatment complies with standards as passed into law by the State of California, effective March 22, 2004.

We wish you a speedy recovery.

If you have any question or wish additional information, please contact our office by calling 916-563-1900.

Sincerely,


Mackenzie Dawson
Claims Examiner

P.O. Box 269120
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