

TIFFANY ANDERSON

*Claimant/Applicant*

VS.

MOSQUITO & VCD SAN JOAQUIN COUNTY

*Employer/Insurance Carrier/Defendant*

CASE NO: ADJ7004221

(IF APPLICATION HAS BEEN FILED, CASE NUMBER MUST BE INDICATED.  
REGARDLESS OF DATE OF INJURY.)

### SUBPOENA DUCES TECUM

(When records are mailed, identify them by using the above  
Case No. or attaching a copy of the subpoena)

Where no application has been filed for injuries on or after  
January 1, 1990 and before January 1, 1994, subpoena will  
be valid without a case number, but subpoena must be served  
on claimant and employer and/or insurance carrier.

**See Instructions Below.\***

*The People of the State of California Send Greetings to:*

**KAISER PERMANENTE HOSPITAL/PMG, SOUTH SACRAMENTO  
6600 BRUCEVILLE ROAD, SACRAMENTO, CA 95823**

WE COMMAND YOU to appear before **COMPEX LEGAL SERVICES**  
1824 TRIBUTE ROAD, SUITE J, SACRAMENTO, CA 95815 (916) 646-9028

on Oct 24, 2011, at 08:45 AM, to testify in the above-entitled matter and to bring with you and produce the following described documents,  
papers, books and records:

**ALL DOCUMENTS, RECORDS, PRESCRIPTIONS AND OTHER MEMORANDA PERTAINING TO THE ISSUANCE AND SALE OF  
PRESCRIPTION DRUGS TO THE PERSON NAMED BELOW, ALL ORIGINAL DOCTOR'S PRESCRIPTION FORMS AND ANY OTHER  
PHARMACY RECORDS PERTAINING TO THE PERSON NAMED BELOW FROM THE FIRST DATE TO THE PRESENT.**

RECORDS OF: ANDERSON, TIFFANY

AKA:

DATE OF BIRTH: 08/22/70

SOCIAL SECURITY #: 549-23-5133

For failure to attend and/or produce said documents you may be deemed guilty of a contempt and liable to pay to the parties aggrieved all  
losses and damages sustained thereby and forfeit one hundred dollars in addition thereto.

This subpoena is issued at the request of the person making the declaration which is served herewith.

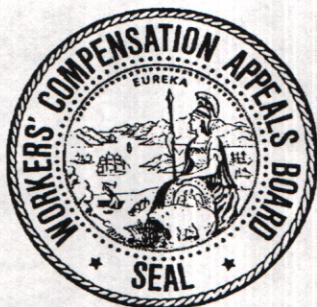
Date: September 21, 2011

WORKERS' COMPENSATION APPEALS BOARD

By

*Robert E. Welch*

Secretary, Assistant Secretary, Referee, Judge



**\*FOR INJURIES OCCURRING ON OR AFTER JANUARY 1, 1990  
AND BEFORE JANUARY 1, 1994:**

You are directed to make the original records available for inspection and copying at the  
address of the Deposition Officer given above or, with the consent of the Deposition Officer,  
at your place of business during normal business hours in accordance with California  
Evidence Code Section 1560(e). Do not release the requested records to the Deposition  
Officer prior to the date and time stated above.

SEE ATTACHED - (SUBPOENA INVALID WITHOUT DECLARATION)

This subpoena does not apply to any member of the Highway Patrol, Sheriff's Office or City Police Department unless accompanied by  
notice from this Board that deposit of the witness fee has been made in accordance with Govt Code 68097.2 et seq.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): ERIC G. HELPHREY (195614) STOCKWELL, HARRIS, WOOLVERTON & MUEHL 1545 RIVER PARK DRIVE, SUITE 330 SACRAMENTO, CA 95815 TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): MOSQUITO & VCD SAN JOAQUIN COUNTY	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN JOAQUIN STREET ADDRESS: 31 EAST CHANNEL STREET, SUITE 344 MAILING ADDRESS: _____ CITY AND ZIP CODE: STOCKTON, CA 95202 BRANCH NAME: W.C.A.B. STOCKTON	
PLAINTIFF/ PETITIONER: TIFFANY ANDERSON DEFENDANT/ RESPONDENT: MOSQUITO & VCD SAN JOAQUIN COUNTY	CASE NUMBER: CASE #ADJ7004221
NOTICE TO CONSUMER OR EMPLOYEE AND OBJECTION (Code Civ. Proc., §§ 1985.3, 1985.6)	

NOTICE TO CONSUMER OR EMPLOYEE

TO (name): TIFFANY ANDERSON

1. PLEASE TAKE NOTICE THAT **REQUESTING PARTY (name): MOSQUITO & VCD SAN JOAQUIN COUNTY** SEEKS YOUR RECORDS FOR EXAMINATION by the parties to this action on (specify date): 10/24/11

The records are described in the subpoena directed to **witness (specify name and address of person or entity from whom records are sought): KAISER PERMANENTE HOSPITAL/PMG, SOUTH SACRAMENTO**

A copy of the subpoena is attached.

2. IF YOU OBJECT to the production of these records, YOU MUST DO ONE OF THE FOLLOWING BEFORE THE DATE SPECIFIED. IN ITEM a. OR b. BELOW:

a. If you are a party to the above-entitled action, you must file a motion pursuant to Code of Civil Procedure section 1987.1 to quash or modify the subpoena and give notice of that motion to the **witness** and the **deposition officer** named in the subpoena at least five days before the date set for production of the records.

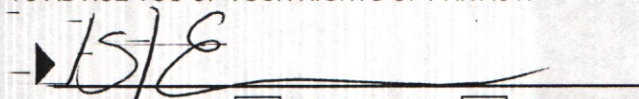
b. If you are not a party to this action, you must serve on the **requesting party** and on the **witness**, before the date set for production of the records, a written objection that states the specific grounds on which production of such records should be prohibited. You may use the form below to object and state the grounds for your objection. You must complete the Proof of Service on the reverse side indicating whether you personally served or mailed the objection. The objection should **not** be filed with the court. **WARNING: IF YOUR OBJECTION IS NOT RECEIVED BEFORE THE DATE SPECIFIED IN ITEM 1, YOUR RECORDS MAY BE PRODUCED AND MAY BE AVAILABLE TO ALL PARTIES.**

3. YOU OR YOUR ATTORNEY MAY CONTACT THE UNDERSIGNED to determine whether an agreement can be reached in writing to cancel or limit the scope of the subpoena. If no such agreement is reached, and if you are not otherwise represented by an attorney in this action, YOU SHOULD CONSULT AN ATTORNEY TO ADVISE YOU OF YOUR RIGHTS OF PRIVACY.

Date: 09/22/2011

ERIC G. HELPHREY

(TYPE OR PRINT NAME)

  
 (SIGNATURE OF  REQUESTING PARTY  ATTORNEY)

OBJECTION BY NON-PARTY TO PRODUCTION OF RECORDS


1.  I object to the production of all of my records specified in the subpoena.

2.  I object only to the production of the following specified records: \_\_\_\_\_

3. The specific grounds for my objection are as follows:

Date:

\_\_\_\_\_  
 (TYPE OR PRINT NAME)

  
 (SIGNATURE)

(Proof of service on reverse)

PLAINTIFF/PETITIONER: TIFFANY ANDERSON DEFENDANT/RESPONDENT: MOSQUITO & VCD SAN JOAQUIN COUNTY	CASE NUMBER: CASE #ADJ7004221
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**PROOF OF SERVICE OF NOTICE TO CONSUMER OR EMPLOYEE AND OBJECTION**  
(Code Civ. Proc., §§ 1985.3, 1985.6)

Personal Service  Mail

1. At the time of service I was at least 18 years of age and not a party to this legal action.
2. I served a copy of the *Notice to Consumer or Employee and Objection* as follows (check either a or b):

a.  **Personal service.** I personally delivered the *Notice to Consumer or Employee and Objection* as follows:

(1) Name of person served: \_\_\_\_\_ (3) Date served: \_\_\_\_\_  
(2) Address where served: \_\_\_\_\_ (4) Time served: \_\_\_\_\_

b.  **Mail.** I deposited the *Notice to Consumer or Employee and Objection* in the United States mail, in a sealed envelope with postage fully prepaid. The envelope was addressed as follows:

(1) Name of person served: TIFFANY ANDERSON/IN PRO PE (3) Date of mailing: 09/23/2011  
(2) Address: \_\_\_\_\_ (4) Place of mailing (city and state): TORRANCE, CA  
2 North Avena Avenue, Lodi, CA 95240

(5) I am a resident of or employed in the county where the *Notice to Consumer or Employee and Objection* was mailed.  
c. My residence or business address is (specify): 325 MAPLE AVENUE, TORRANCE, CA 90503

d. My phone number is (specify): (310) 782-1801

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.  
Date: 09/22/2011

SARA NILES

(TYPE OR PRINT NAME OF PERSON WHO SERVED)

(SIGNATURE OF PERSON WHO SERVED)

**PROOF OF SERVICE OF OBJECTION TO PRODUCTION OF RECORDS**  
(Code Civ. Proc., §§ 1985.3, 1985.6)

Personal Service  Mail

1. At the time of service I was at least 18 years of age and not a party to this legal action.
2. I served a copy of the *Objection to Production of Records* as follows (complete either a or b):

a. ON THE REQUESTING PARTY

(1)  **Personal service.** I personally delivered the *Objection to Production of Records* as follows:

(i) Name of person served: \_\_\_\_\_ (iii) Date served: \_\_\_\_\_  
(ii) Address where served: \_\_\_\_\_ (iv) Time served: \_\_\_\_\_

(2)  **Mail.** I deposited the *Objection to Production of Records* in the United States mail, in a sealed envelope with postage fully prepaid. The envelope was addressed as follows:

(i) Name of person served: \_\_\_\_\_ (iii) Date of mailing: \_\_\_\_\_  
(ii) Address: \_\_\_\_\_ (iv) Place of mailing (city and state): \_\_\_\_\_

(v) I am a resident of or employed in the county where the *Objection to Production of Records* was mailed.

b. ON THE WITNESS

(1)  **Personal service.** I personally delivered the *Objection to Production of Records* as follows:

(i) Name of person served: \_\_\_\_\_ (iii) Date served: \_\_\_\_\_  
(ii) Address where served: \_\_\_\_\_ (iv) Time served: \_\_\_\_\_

(2)  **Mail.** I deposited the *Objection to Production of Records* in the United States mail, in a sealed envelope with postage fully prepaid. The envelope was addressed as follows:

(i) Name of person served: \_\_\_\_\_ (iii) Date of mailing: \_\_\_\_\_  
(ii) Address: \_\_\_\_\_ (iv) Place of mailing (city and state): \_\_\_\_\_

(v) I am a resident of or employed in the county where the *Objection to Production of Records* was mailed.

3. My residence or business address is (specify): \_\_\_\_\_

4. My phone number is (specify): \_\_\_\_\_

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.  
Date: \_\_\_\_\_

(TYPE OR PRINT NAME OF PERSON WHO SERVED)

(SIGNATURE OF PERSON WHO SERVED)

**PROOF OF SERVICE OF SUBPOENA (WCAB)**

I am employed in SACRAMENTO County, California. I am over the age of 18 and not a party to the within action; my business address is: 1824 TRIBUTE ROAD, SUITE J  
SACRAMENTO, CA 95815

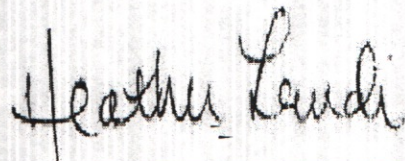
On 09/23/11, I gave notice to: SEE SERVICE LIST BELOW

On the above date, I served true copies of the following documents;  
Subpoena Duces Tecum

To each party appearing in this action, at the address below, by placing true copies thereof enclosed in a sealed envelope with postage fully pre-paid, in the United States mail at 1824 TRIBUTE ROAD, SUITE J  
SACRAMENTO, CA 95815

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct, and that this declaration was executed on 09/23/11.

SIGNED: \_\_\_\_\_



Heather Landi

TIFFANY ANDERSON/IN PRO PER  
TIFFANY ANDERSON/IN PRO PE  
2 NORTH AVENA AVENUE  
LODI, CA 95240