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CARMEN BLASK
PARALEGAL

October 5, 2009

Personnel Manager
San Joaquin County.- Mosquito and Vector Control District
7759 South Airport Way
Stockton, CA 95206

Re: **Workers' Compensation Claim**
My Client: Tiffany Anderson
Date of Injury: 06/19/2008

Dear Personnel Manager:

This is to inform and apprise you that this office has been retained to represent Tiffany Anderson for this workers compensation claim. Enclosed herein is the Employee's Claim for Workers' Compensation Benefits, a copy of the Disclosure Statement and a copy of the Application for Adjudication of Claim that is being filed with the Workers' Compensation Appeals Board.

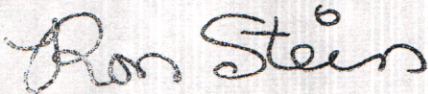
Please complete the section of the Claim form marked "Employer" and forward all the forms to your workers' compensation insurance carrier, with a copy to our office.

Also, please forward to our office a job description of the work that the Applicant was engaged in at the time of the industrial injury. If the applicant is not working this office will be asking the treating doctor to determine in his/her opinion whether this individual may return to his/her usual and customary work. Your cooperation in sending a detailed job description is appreciated.

Thank you for your prompt attention hereto.

Very truly yours,

RONALD M. STEIN, INC.
Professional Law Corporation



Ronald M. Stein
RMS/elc

Enclosure

cc: Tiffany Kay Anderson