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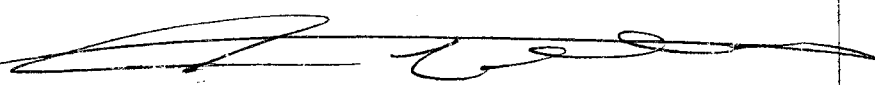
BEFORE THE WORKERS' COMPENSATION APPEALS BOARD  
OF THE STATE OF CALIFORNIA

Tiffany Anderson,	)	WCAB No.: 1) ADJ7004221; 2) ADJ7004227;
	)	3) ADJ7010682; 4) ADJ7976768; 5)
	)	ADJ9066508
Applicant,	)	
vs.	)	<b>ORDER COMPELLING THE</b>
	)	<b>APPLICANT'S ATTENDANCE AT PQME</b>
San Joaquin County MVCD; AIMS Insurance,	)	<b>EVALUATION</b>
	)	
	)	
Defendant.	)	

Pursuant to the defendant's Petition to Compel the applicant's attendance at the  
PQME Re-Evaluation, and GOOD CAUSE APPEARING,

It is ordered that the applicant, Tiffany Anderson, present herself for a re-  
evaluation with Dr. Tabaddor on 5/9/16 at:

333 San Carlos Way, Suite B  
Stockton, California 95207

Dated: 2-23-16   
WORKERS' COMPENSATION JUDGE

STATE OF CALIFORNIA  
DEPARTMENT OF INDUSTRIAL RELATIONS  
DIVISION OF WORKERS' COMPENSATION

02-23-2016

OFFICIAL ADDRESS RECORD

**Case Number:** ADJ9066508-E

ACCLAMATION  
SACRAMENTO

Insurance Company, PO BOX 269120 SACRAMENTO CA 95826

SAN JOAQUIN  
COUNTY MOSQUITO  
AND VECTOR  
CONTROL

Self Insured Employer, 7759 SOUTH AIRPORT WAY STOCKTON CA 95206

STOCKWELL HARRIS  
SACRAMENTO

Law Firm, 1545 RIVER PARK DR STE 330 SACRAMENTO CA 95815,  
KALIE\_WIKEL@SHWW.COM

TIFFANY ANDERSON

Injured Worker, 1900 LAKESHORE DR LODI CA 95242

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**STATE OF CALIFORNIA  
DEPARTMENT OF INDUSTRIAL RELATIONS  
DIVISION OF WORKERS' COMPENSATION**

02-23-2016

**OFFICIAL ADDRESS RECORD**

**Case Number:** ADJ7976768-E

ACCLAMATION  
SACRAMENTO

Insurance Company, PO BOX 269120 SACRAMENTO CA 95826

CHRISTOPHER ELEY  
STOCKTON

Law Firm, 343 E MAIN ST STE 710 STOCKTON CA 95202,  
ELEYLAW@GMAIL.COM

SAN JOAQUIN  
MOSQUITO AND  
VECTOR CONTROL  
DISTRICT

Employer, 7759 S AIRPORT WAY STOCKTON CA 95206

STOCKWELL HARRIS  
SACRAMENTO

Law Firm, 1545 RIVER PARK DR STE 330 SACRAMENTO CA 95815,  
KALIE\_WIKEL@SHWW.COM

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TIFFANY ANDERSON

Injured Worker, 1900 LAKESHORE DR LODI CA 95242

**STATE OF CALIFORNIA  
DEPARTMENT OF INDUSTRIAL RELATIONS  
DIVISION OF WORKERS' COMPENSATION**

02-23-2016

**OFFICIAL ADDRESS RECORD**

**Case Number:** ADJ7010682-E

ACCLAMATION  
SACRAMENTO

Insurance Company, PO BOX 269120 SACRAMENTO CA 95826

ARS LEGAL WHITTIER

Lien Claimant, 13925 WHITTIER BLVD WHITTIER CA 90605,  
michelle.castillo@arslegal.com

SAN JOAQUIN  
MOSQUITO AND  
VECTOR CTL

Employer, 7759 SOUTH AIRPORT WAY STOCKTON CA 95206

STOCKWELL HARRIS  
SACRAMENTO

Law Firm, 1545 RIVER PARK DR STE 330 SACRAMENTO CA 95815,  
KALIE\_WIKEL@SHWW.COM

TIFFANY ANDERSON

Injured Worker, 1900 LAKESHORE DR LODI CA 95242

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STATE OF CALIFORNIA  
DEPARTMENT OF INDUSTRIAL RELATIONS  
DIVISION OF WORKERS' COMPENSATION

02-23-2016

OFFICIAL ADDRESS RECORD

Case Number: ADJ7004227-E

ACCLAMATION  
SACRAMENTO

Insurance Company, PO BOX 269120 SACRAMENTO CA 95826

ARS LEGAL WHITTIER

Lien Claimant, 13925 WHITTIER BLVD WHITTIER CA 90605,  
michelle.castillo@arslegal.com

SAN JOAQUIN  
COUNTY IF MOSQUITO  
AND VECTOR  
CONTROL DISTRICT

Employer, 7759 SOUTH AIRPORT WAY STOCKTON CA 95206

STOCKWELL HARRIS  
SACRAMENTO

Law Firm, 1545 RIVER PARK DR STE 330 SACRAMENTO CA 95815,  
KALIE\_WIKEL@SHWW.COM

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TIFFANY ANDERSON

Injured Worker, 1900 LAKESHORE DR LODI CA 95242

**STATE OF CALIFORNIA  
DEPARTMENT OF INDUSTRIAL RELATIONS  
DIVISION OF WORKERS' COMPENSATION**

02-23-2016

**OFFICIAL ADDRESS RECORD**

**Case Number:** ADJ7004221-E

**ACCLAMATION  
SACRAMENTO**

Insurance Company, PO BOX 269120 SACRAMENTO CA 95826

**SAN JOAQUIN  
COUNTY MOSQUITO  
AND VECTOR  
CONTROL DISTRICT**

Employer, 7759 SOUTH AIRPORT WAY STOCKTON CA 95206

**STOCKWELL HARRIS  
SACRAMENTO**

Law Firm, 1545 RIVER PARK DR STE 330 SACRAMENTO CA 95815,  
**KALIE\_WIKEL@SHWW.COM**

**TIFFANY ANDERSON**

Injured Worker, 1900 LAKESHORE DR LODI CA 95242

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PROOF OF SERVICE BY MAIL

I, Kimberly Port, certify that the following is true and correct:

I am employed in the city of Stockton, and county of San Joaquin, California. I am over the age of eighteen years, and am not a party to the within entitled cause.

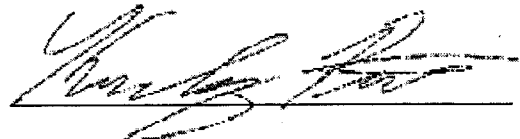
My business address is 31 E. Channel Street #344, Stockton, California 95202. On 2/23/16, I served the **ORDER COMPELLING THE APPLICANT'S ATTENDANCE AT PQME EVALUATION AND OFFICIAL ADDRESS RECORDS FOR CASE ADJ7004221, ADJ7004227, ADJ7010682, ADJ7976768 AND ADJ9066508** by causing true copies thereof, enclosed in sealed envelopes with postage thereon fully prepaid, to be placed in the United States Post Office mail box at Stockton, California, addressed to the following parties:

STOCKWELL HARRIS SACRAMENTO	Law Firm, 1545 RIVER PARK DR STE 330 SACRAMENTO CA 95815, KALIE_WIKEL@SHWW.COM
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**Who, pursuant to Rule 10500 is designated to serve this/these document(s) forthwith on all parties shown on the Official Address Record.**

I am readily familiar with the business practice at my place of business for collection and processing of correspondence for delivery by mail. Correspondence so collected and processed is deposited with the United States Postal Service on the same day in the ordinary course of business. On the above date, the said envelopes were collected for the United States Postal Service following ordinary business practices.

I declare under penalty of perjury that the foregoing is true and correct, and that this declaration was executed on 2/23/2016 at Stockton, California.



Kimberly Port

3 146  
Uniform Assigned Name: STOCKWELL HARRIS SACRAMENTO  
EAMS Administrator Name: KALIE WIKEL  
EAMS Administrator's Phone: (916) 924-1862  
EAMS Administrator's Email: Kalie\_Wikel@shwhlaw.com

**RE: ANDERSON, TIFFANY VS. SAN JOAQUIN COUNTY MOSQUITO  
& VECTOR CONTROL**

WCAB NO.: 1) ADJ7004221; 2) ADJ7004227; 3) ADJ7010682; 4)  
ADJ7976768; 5) ADJ9066508  
CLAIM NO.: VE0700184  
OUR FILE NO.: 300141-040

**PROOF OF SERVICE**

STATE OF CALIFORNIA

COUNTY OF SACRAMENTO

I am in the County of Sacramento, State of California. I am over the age of 18 years and not a party to the within action. My business address is 1545 River Park Drive, Suite 330, Sacramento, California 95815-4616.

On March 1, 2016, I served the foregoing document described as: **ORDER COMPELLING APPLICANT'S ATTENDANCE AT PQME WITH DR. TABADDOR ON 5/9/16** on all interested parties in this action by placing a true copy thereof enclosed in a sealed envelope with postage thereon fully prepaid in the United States mailed at Sacramento, California, addressed as follows:

Mr. Christopher Eley  
Christophr Eley Attorney at Law  
221 Tuxedo Court, Suite E  
Stockton, CA 95201

ARS Legal (Whittier)  
13925 Whittier Boulevard  
Whittier, CA 90605

Ms. Nancy Urton  
AIMS Insurance (Sacramento)  
P.O. Box 269120  
Sacramento, CA 95826  
BY FAX ONLY (916) 563-1919

Mr. Michael Christian  
Jackson Lewis, LLP  
801 K Street, Suite 2300  
Sacramento, CA 95814



Uniform Assigned Name: STOCKWELL HARRIS SACRAMENTO

EAMS Administrator Name: KALIE WIKEL

EAMS Administrator's Phone: (916) 924-1862

EAMS Administrator's Email: Kalie\_Wikel@shwhlaw.com

Ms. Tiffany Anderson  
1900 Lakeshore Drive  
Lodi, Ca 95242

I certify, under penalty of perjury, that the foregoing is true and correct.

Executed on March 1, 2016, at Sacramento, California.

By: Heidi Valentine  
Heidi Valentine