

3-21-16

STATE OF CALIFORNIA  
WORKERS' COMPENSATION APPEALS BOARD

ADJ 7976768

Case No. ADJ 7004221, ADJ 7004277

Tiffany Andersen

Applicant

San Joaquin County

Defendants.

MINUTES OF HEARING  
and/or ORDER & DECISION on CONTINUANCE  
or ORDER TAKING OFF CALENDAR REQUEST  
and/or NOTICE OF HEARING

☐ BEFORE ☒ AT  
☐ TRIAL ☒ MSC ☐ WALK THRU  
☐ CONF. ☐ EXP HEARING ☐ LIEN CONF

DATE OF: HEARING \_\_\_\_\_ REQUEST \_\_\_\_\_

## APPEARANCES

APPLICANT ☒ PRESENT ☒ NOT PRESENTAPPLICANT REPRESENTED BY (NAME & FIRM) Sara Skolnik - by phone☒ ATTORNEY☐ HEARING REP.

DEFENDANT REPRESENTED BY (NAME &amp; FIRM) \_\_\_\_\_

☐ ATTORNEY☐ HEARING REP

OTHERS APPEARING (NAME &amp; FIRM) \_\_\_\_\_

☐ ATTORNEY☐ HEARING REP

INTERPRETER (NAME &amp; FIRM) \_\_\_\_\_

CERTIFICATION NO. \_\_\_\_\_

[PARTIES ARE NOT TO WRITE BELOW HERE]

PARTY MAKING REQUEST: ☒ JOINT☐ APPLICANT☐ DEFENDANT☐ OTHER \_\_\_\_\_REQUEST FOR: ☐ CONTINUANCE ☒ OTOC REQUEST BY: ☐ LETTER☐ TELEPHONEPOSITION OF OPPOSING PARTY: ☒ AGREE☐ OPPOSE☐ UNREACHABLE☐ UNKNOWN

## REASON FOR REQUEST

## BOARD REASON

- ☐ FURTHER DISCOVERY: ☐ APP MED ☐ DEFENDANT MED ☐ AME ☐ DEPO ☐ INSUFFICIENT TIME ☐ TO START ☐ TO FINISH  
☐ CALENDAR CONFLICT: ☐ APPLICANT ☐ DEFENSE ☐ L.C. ☐ REASSIGNMENT: ☐ REFUSED ☐ NOT AVAILABLE  
☐ SETTLEMENT PENDING ☐ REPORTER ☐ INTERPRETER ☐ NOT AVAILABLE  
☐ IMPROPER/INSUFFICIENT NOTICE BY PARTY ☐ WCJ NOT AVAILABLE ☐ RECUSAL  
☐ IMPROPER DECLARATION OF READINESS/VALID OBJECTION ☐ UEF ISSUES ☐ SERVICE DEFECTIVE ☐ BANKRUPTCY  
☐ NON-APPEARANCE ☐ APP ☐ DEF ☐ LIEN CLAIMANT ☐ WITNESS ☐ PENDING  
☐ APPLICANT ☐ DEF. COUNSEL ☐ VACATION ☐ ILLNESS ☐ DEFECTIVE WCAB NOTICE  
☐ UNAVAILABILITY OF WITNESSES ☐ APP ☐ DEFENSE ☐ ARBITRATION  
☐ DISPUTE RESOLVED BY AGREEMENT ☐ NO ISSUE PENDING ☐ OTHER COMMENTS A to grant videographer  
☐ JOINDER ☐ CONSOLIDATION ☐ VENUE ☐ NEW APPLICATION to Tabador eval. All issues of state,  
☐ AUTO RE-ASSIGN ☐ DISQUALIFY ☐ APP ☐ DEFENDANT Sandra & penalties are deferred.  
☐ APPLICANT NOW REPRESENTED ☐ REQUESTS REPRESENTATION  
☐ CHANGE OF CIRCUMSTANCES

GOOD CAUSE APPEARING, IT IS ORDERED THAT THE REQUEST FOR ☐ CONT ☒ OTOC IS ☒ GRANTED ☐ DENIED\_\_\_\_\_ DAYS FOR ☐ C&R ☐ STIPS, OTHERWISE: ☐ OTOC ☐ RESET \_\_\_\_\_☐ OTOC ☐ C&R/STIPS SUBMITTED FOR APPROVAL ☐ C&R/STIPS APPROVED ☐ STIP & ORDER☐ LIEN STIPS AND ORDER APPROVED ☐ N.O.I. TO ISSUE☐ SET FOR ☐ MSC ☐ CONF ☐ TRIAL ☐ LIEN TRIAL ☐ CONTD TESTIMONY TIME ☐ 1 HR ☐ 2 HRS ☐ 4 HRS ☐ \_\_\_\_\_ DAYSET ON \_\_\_\_\_ AT \_\_\_\_\_ LOCATION Stockton BEFORE JUDGE \_\_\_\_\_☐ SUPPLEMENTAL PAGES ATTACHED \_\_\_\_\_ PAGESDATE 3-21-16

ALVIN R. WEBBER  
WORKERS' COMPENSATION JUDGE

NOTICE TO I & A

Pursuant to Rule 10500 you are designated to serve this/these document(s) on all parties as shown on the Official Address Record. Service on designated server with a copy of the official address record.  
 Date 3-21-16 By WAT

☐ Served on parties and lien claimants present



PROOF OF SERVICE BY MAIL

I, Sheree Langenes, certify that the following is true and correct:

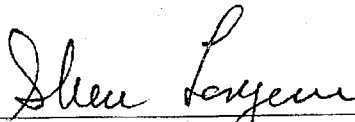
I am employed in the City of Stockton and County of San Joaquin, California am over the age of eighteen years, and am not a party to the within entitled cause.

My business address is 31 E Channel Street Room 344, Stockton, CA 95202. On ~~3/21/2016~~ I served **Minutes of Hearing on ADJ7976768; ADJ7004221; ADJ7004271**, 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, CA, addressed to the following parties:

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
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

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 **3/21/16** at Stockton, CA

  
Sheree Langenes



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 23, 2016, I served the foregoing document described as: **MINUTES OF HEARING** 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:

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

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 23, 2016, at Sacramento, California.

By: Heidi Valentine  
Heidi Valentine

