



ACCLAMATION INSURANCE
MANAGEMENT SERVICES
Loss Portfolio Management®

P.O. Box 269120 Sacramento, CA 95826

www.aims4claims.com

February 24, 2017

Tiffany Anderson
2856 Applewood Dr.
Lodi, CA 95242

RE: Injured Worker: Tiffany Anderson
Date of Injury: 03/26/2009
Claim Number: VE090000018
Employer: San Joaquin County Mosquito Vector Control District

NOTICE REGARDING TEMPORARY DISABILITY BENEFITS

TERMINATION

AIMS is handling your workers' compensation claim on behalf of the above named employer. This notice is to advise you of the status of disability benefits for your workers' compensation injury on the date shown above.

Payments are ending because we paid the retro temporary disability payment due.

Benefits paid to you total \$10,330.11. Benefits were paid to you as temporary total disability:

Period(s) paid were from 11/28/11 through 03/27/12 at \$602.59 per week. Please see the attached detailed payment record for specific periods and amount paid.

If you are represented by an attorney, you may contact your attorney with any questions.

The State of California requires that you be given the following information:

You have a right to disagree with decisions affecting your claim. If you have any questions about the information provided to you in this notice, please call me, Patti Triska. You also have the right to be represented by an attorney of your choice. However, if you are represented by an attorney, you should call your attorney, not me, Patti Triska.

Additional information may be found in the publication *Workers' Compensation in California: A Guidebook for Injured Workers*. A complete copy of the Guidebook may be obtained on the Division of Workers' Compensation website (see URL below) or by contacting an Information and Assistance (I&A) Officer of the Division of Workers' Compensation. Temporary Disability is discussed in chapter 5 of the Guidebook.

Guidebook for Injured Workers:

<http://www.dir.ca.gov/InjuredWorkerGuidebook/InjuredWorkerGuidebook.html>

Chapter 5: Temporary Disability: <http://www.dir.ca.gov/InjuredWorkerGuidebook/Chapter5.pdf>

Chapter 4: Resolving Problems with Medical Care & Medical Reports
<http://www.dir.ca.gov/InjuredWorkerGuidebook/Chapter4.pdf>

For information about the workers' compensation claims process and your rights and obligations, go to www.dir.ca.gov or contact an Information and Assistance (I&A) Officer of the State Division of Workers' Compensation. For recorded information and a list of offices, call (800)736-7401.

If you have any questions, please give me a call at (916)563-1900 ext. 242.
If you are represented, you may contact your attorney with any questions.

Keep this notice. It contains important information about your workers' compensation benefits.

Sincerely,



Patti Triska
Sr. Claims Examiner

cc: San Joaquin County Mosquito Vector Control District (via email)
Guy A. Medford 306 E. Main St. Ste. 304 Stockton, CA 95202
Stockwell Harris Widom & Woolverton, 1545 River Park Drive Suite 330, Sacramento, CA 958154616

Enc.:

- Payment record



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NOTICE REGARDING TEMPORARY DISABILITY BENEFITS

PAYMENT START

AIMS is handling your workers' compensation claim on behalf of the above named employer. This notice is to advise you of the status of disability benefits for your workers' compensation injury on the date shown above.

Payment for retro temporary disability is starting and is sent separately for the period starting 11/28/11 through 03/27/2012, in the amount of \$10,330.11 and will continue until you are able to return to work or your medical condition becomes permanent and stationary. Your weekly compensation rate is \$602.59 based on your earnings of \$ 903.88 per week.

Payments will be sent to you every two weeks on Friday.

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Chapter 5: Temporary Disability: <http://www.dir.ca.gov/InjuredWorkerGuidebook/Chapter5.pdf>

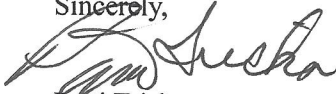
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Sincerely,

A handwritten signature in cursive script, appearing to read "Patti Triska".

Patti Triska

Sr. Claims Examiner

cc: San Joaquin County Mosquito Vector Control District (via email)
Guy A. Medford 306 E. Main St. Ste. 304 Stockton, CA 95202
Stockwell Harris Widom & Woolverton, 1545 River Park Drive Suite 330, Sacramento, CA
95815-4616

Vector-JPA

P.O. Box 269120 Sacramento, CA 95826 - Phone: (916) 563-1900 FAX: (916) 563-1919

Remitted to	Vendor ID	Check Number	Date	Internal Reference	Total Remitted	Page	1
TIFFANY ANDERSON		0000023183	02/24/17		\$10,330.11		
Claim No: VE090000018	Name: Anderson, Tiffany K	Date of Loss: 03/26/2009					

Service Period: 11/28/2011 - 03/27/2012**Payment Type:** Temp Total Disabiliy**Comments:****TOTAL REMITTANCE****\$10,330.11**

WARNING: You are required to report to your employer or the insurance company any money that you earned for work during the time covered by this check, and before cashing this check. If you do not follow these rules, you may be in violation of the law and the penalty may be jail or prison, a fine, and loss of benefits.

ADVERTENCIA: Es necesario que usted le avise a su patron o a su compania de seguro todo dinero que usted ha ganado por trabajar, durante el tiempo cubierto por este cheque, y antes de cambiar este cheque. Si usted no sigue estos reglamentos, Usted puede estar en violacion de la ley y el castigo podria ser carcel o prision, una multa, y perdida de beneficios.