

STATE OF CALIFORNIA DIVISION OF WORKERS' COMPENSATION WORKERS' COMPENSATION APPEALS BOARD

DECLARATION OF READINESS TO PROCEED TO EXPEDITED HEARING (TRIAL)

[Labor Code section 5502(b)]

	NOTICE: Any objection to the proceedings requested by a Declaration of Readiness to proceed shall be filed and served within ten (10) days after service of the Declaration.		
CASE No		10) days after service of the Declarati	UII.
Applica	ant		
First Nan	ame	MI	
Last Nar	ame VS yer Information		
Employe	er Name (Please leave blank spaces between numbers, names of	or words)	
Employe	er Street Address/PO Box (Please leave blank spaces between i	numbers, names or words)	
City		State	Zip Code
The Decl	clarant requests that this case be set for expedited hearing and c	lecision on the following issue:	s:
	Entitlement to Medical Treatment per Labor Code, section 46	00.	
	Entitlement to Temporary Disability, or Disagreement on Amo	unt of Temporary Disability.	
	Appeal from Determination of the Rehabilitation Unit finding entitlement to or terminating liability for rehabilitation services, or enforcement of an Order of the Rehabilitation Unit.		
	Entitlement to Compensation in Dispute because of Disagree	ment between Employers and/	or Carriers.
Declarar	ant states under penalty that he or she has made the followir	ng specific, genuine, good fa	aith efforts to
resolve t	e the dispute(s) listed above:		

Declarant states under penalty of	if perjury that there is a bona fide dis	spute; that ne/sne is presently ready	to proceed to nearing
that his/her discovery is complete	e on said issues.		
Declarant's Signature			
Name and Law Firm(Print or Typ	ne)		
Address (Please leave blank spa	aces between numbers, names or w	vords)	
	Date		
Phone Number	MM/DD/Y	YYY	

