WORKERS' COMPENSATION APPEALS BOARD
STATE OF CALIFORNIA

JAVONA THOMAS, ***Applicant***

vs.

OAKMONT MANAGEMENT GROUP, LLC;
TRAVELERS PROPERTY CASUALTY COMPANY OF AMERICA, ***Defendants***

Adjudication Number: ADJ11333212
Oakland District Office

OPINION AND ORDER GRANTING PETITION FOR RECONSIDERATION

Defendant seeks reconsideration of the Findings and Award (F&A) issued on September 3, 2025, by the workers' compensation administrative law judge (WCJ). The WCJ found, in pertinent part, that applicant, while employed by defendant on February 5, 2018, as a medication technician, sustained injury arising out of and in the course of employment (AOE/COE) to her left shoulder and neck, and claims to have sustained injury to her back, upper extremities, and injury in the form of Chronic Regional Pain Syndrome (CRPS). The WCJ further found that applicant's injury caused permanent disability of 100%.

Defendant contends that the Trial Judge erred in (1) failing to meet Labor Code § 4660 requirements, and (2) finding Applicant 100% permanent disabled where the admissible medical evidence and vocational expert reporting does not support such a finding. Further petitioner argues that the WCJ failed to develop the record after the Independent Medical Examiner report (IME) indicated the need for further treatment.

We did not receive an Answer from applicant.

The WCJ issued a Report and Recommendation (Report) recommending that the Petition be granted solely to amend Finding of Fact No. 1 to include that applicant sustained industrial injury in the form of chronic pain syndrome in addition to injury to the left shoulder, neck, and otherwise be denied.

We have considered the Petition and the contents of the Report. Based upon our preliminary review of the record, we will grant defendant's Petition for Reconsideration. Our order granting Reconsideration is not a final order, and we will order that a final decision after reconsideration is deferred pending further review of the merits of the Petition and further consideration of the entire record in light of the applicable statutory and decisional law. Once a final decision after reconsideration is issued by the Appeals Board, any aggrieved person may timely seek a writ of review pursuant to Labor Code section 5950 et seq. [1]

I.

Former section 5909 provided that a petition for reconsideration was deemed denied unless the Appeals Board acted on the petition within 60 days from the date of filing. (Lab. Code, § 5909.) Effective July 2, 2024, section 5909 was amended to state in relevant part that:

> (a) A petition for reconsideration is deemed to have been denied by the appeals board unless it is acted upon within 60 days from the date a trial judge transmits a case to the appeals board.
>
> (b)
>
> (1) When a trial judge transmits a case to the appeals board, the trial judge shall provide notice to the parties of the case and the appeals board.
>
> (2) For purposes of paragraph (1), service of the accompanying report, pursuant to subdivision (b) of Section 5900, shall constitute providing notice. (Lab. Code, § 5909.)

Under section 5909(a), the Appeals Board must act on a petition for reconsideration within 60 days of transmission of the case to the Appeals Board. Transmission is reflected in Events in the Electronic Adjudication Management System (EAMS). Specifically, in Case Events, under Event Description is the phrase "Sent to Recon" and under Additional Information is the phrase "The case is sent to the Recon board."

Here, according to Events, the case was transmitted to the Appeals Board on October 22, 2025, and 60 days from the date of transmission is Sunday December 21, 2025. The next business day that is 60 days from the date of transmission is Monday, December 22, 2025. (See Cal. Code

[1] All further statutory references are to the Labor Code, unless otherwise noted.

Regs., tit. 8 § 10600(b).)[2] This decision is issued by or on Monday, December 22, 2025, so that we have timely acted on the petition as required by section 5909(a).

Section 5909(b)(1) requires that the parties and the Appeals Board be provided with notice of transmission of the case. Transmission of the case to the Appeals Board in EAMS provides notice to the Appeals Board. Thus, the requirement in subdivision (1) ensures that the parties are notified of the accurate date for the commencement of the 60-day period for the Appeals Board to act on a petition. Section 5909(b)(2) provides that service of the Report and Recommendation shall be notice of transmission.

Here, according to the proof of service for the Report, the Report was served on October 22, 2025, and the case was transmitted to the Appeals Board on October 22, 2025. Service of the Report and transmission of the case to the Appeals Board occurred on the same day. Thus, we conclude that the parties were provided with the notice of transmission required by section 5909(b)(1) because service of the Report in compliance with section 5909(b)(2) provided them with actual notice as to the commencement of the 60-day period on October 22, 2025.

II.

Preliminarily, we note the following in our review.

On July 31, 2024, this case went to trial, which resulted in a Findings and Order, in pertinent part, that found applicant sustained industrial injury AOE/COE while employed by defendant, to her left shoulder and neck, and that the record was in need of further development as to whether or not applicant also sustained a claimed injury in the form of Chronic Regional Pain Syndrome (CRPS). The WCJ issued an Order appointing Steven Feinberg, M.D. as an Independent Medical Examiner (IME) pursuant to Labor Code 5701, to report on the issue of CRPS. Thereafter, the matter returned to trial on July 01, 2025. Evidence for the second trial date, July 01, 2025, included prior admitted exhibits, and two additional medical reports admitted into evidence from IME Dr. Feinberg, dated February 04, 2025 and March 19, 2025. The record does not appear to contain a final report from AME Dr. Mandell reviewing Dr. Feinberg's final reporting.

On September 3, 2025, an F&A issued, which found, in pertinent part:

[2] WCAB Rule 10600(b) (Cal. Code Regs., tit. 8, § 10600(b)) states that: Unless otherwise provided by law, if the last day for exercising or performing any right or duty to act or respond falls on a weekend, or on a holiday for which the offices of the Workers' Compensation Appeals Board are closed, the act or response may be performed or exercised upon the next business day.

1) Applicant, Javonna Thomas, while employed on February 5, 2018, as a medication technician, at Alameda, California, by Oakmont Management Group, LLC, sustained injury arising out of and in the course of employment to her left shoulder and neck; and claims[3] to have sustained injury arising out of and in the course of employment to chronic regional pain syndrome, back, and bilateral upper extremities.

2) Applicant's injury caused permanent disability of 100%.

3) Applicant is in need of further medical treatment to cure or relieve from the effects of the injury.

(F&A, at pp. 1-2.)

The WCJ issued an Award in favor of applicant against defendant as follows:

Permanent total disability of 100%, with permanent total disability indemnity, beginning on April 21, 2020 in an amount to be adjusted by the parties with jurisdiction reserved, and subject to COLA increases pursuant to Labor Code section 4659(c), less credit for benefits previously paid, and less 15% to be withheld pending an award of attorney fees after the filing of a supplemental petition requesting such award; and Further medical treatment to cure or relieve from the effects of the injury.

(F&A, at p. 2.)

It is from this F&A that defendant seeks reconsideration.

III.

In his Opinion, the WCJ summarized his finding of 100% disability as follows:

The Agreed Medical Examiner (AME), Dr. Peter Mandell, has provided numerous reports. He found her to be permanent and stationary in his report of October 1, 2020 (Exh. 107) and addressed the permanent impairment of 8% Whole Person Impairment (WPI) for the left shoulder and 14% WPI for the cervical spine, with no apportionment of permanent disability. In his December 19, 2020 report (Exh. 105), Dr. Mandell clarified that applicant is totally disabled "due to a combination of her orthopedic and CRPS problems." He also recommended that she see a neurologist or specialist in CRPS. In his latest report of August 17, 2023 (Exh. 101), Dr. Mandell noted at p. 6 that her reviewed conflicting medical opinions regarding the CRPS diagnosis and indicated that she "probably" does have CRPS. He then stated at p. 7 that she is 100% unemployable, due to a combination of her musculoskeletal problems and her CRPS.

[3] The WCJ requested in his Report that Reconsideration be granted solely to amend Finding of Fact No.1 to add injury AOE/COE in the form of chronic regional pain syndrome as well as left shoulder and neck.

Dr. Mandell had his deposition taken on May 8, 2024 (Exh. M), during which he stated at p. 11 that whether she has CRPS should be determined by the trier of fact. He restated this at p. 27, testifying that there is a question about whether or not she has CRPS.

(Opinion, at p.5.)

…

Following the trial in July of 2024, I found that because of the complexity of this diagnosis and the differing opinions of Dr. Shen, Dr. Cheng and Dr. Emad on the issue of the disputed CRPS diagnosis, the record was in need of further development. I appointed Dr. Steven Feinberg as an Independent Medical Examiner to address the CRPS issue.

Dr. Feinberg issued his initial report on February 4, 2025 (Exh. 112), wherein he found that applicant has some type of neuropathic pain in addition to a cervical radiculopathy and left shoulder structural abnormalities. He further asserted that it is more probable than not that there is a CRPS like component to her presentation. He further stated that he agrees with Dr. Mandell that she could not reengage in the open labor market. With respect to the WPI, Dr. Mandell found 45% WPI on the strict application of the AMA Guides, but he posited that the most accurate AMA Guides rating is 60% WPI.

(Opinion, at pp.7-8.)

The WPI according to Dr. Mandell is 8% for the left shoulder and 14% for the cervical spine, with no apportionment. When considering Dr. Feinberg's assessment of 60% WPI for the disability related to CRPS, the rating of the permanent disability, *before consideration of the evaluating physician's assessment of her employability,* is as follows:

L Shoulder: 16.02.02.00 – 8% [1.4] 11% - 220G – 13% - 15%
Cervical Spine: 15.01.00.00 – 14% [1.4] 20% - 220E – 18% - 20%
CRPS: 13.11.01.01 – 60% - [1.4] – 84% - 220G – 85% - 87%
Combined Values Chart = 92%

Of course, both Dr. Mandell and Dr. Feinberg are in agreement that applicant is unemployable, which supports a finding of permanent total disability.

Dr. Mandell is of the opinion that she is totally disabled as a result of the combination of her orthopedic and CRPS problems, and Dr. Feinberg stated that her neuropathic pain CRPS condition alone would be 100% labor disabling.

> I do not find that the record is inadequate for a final determination of all issues raised at trial. Dr. Feinberg did note that applicant has not had adequate medical attention for her condition, but he does not indicate that the appropriate treatment would impact her level of permanent impairment, or her ability to function in the work place.

(Opinion, at pp.8-9.)

A.

Preliminarily we note the following evidentiary discrepancies in the record:

1. EAMS lists duplicate Exhibit(s) 107 for both the reporting of AME Dr. Cheng, and AME Dr. Peter Mandell.
2. Although referenced by the WCJ, it does not appear that Exhibit, K, L, M, and N, which were previously marked for identification, were ever admitted into evidence, although the Minutes of Hearing (MOH) dated July 1, 2025 indicate that "remain admitted".

   (MOH, 7/1/25, p. 3.)

We observe that "[i]t is the responsibility of the parties and the WCJ to ensure that the record of the proceedings contains at a minimum, the issues submitted for decision, the admissions and stipulations of the parties, and the admitted evidence." (*Hamilton v. Lockheed Corporation* (2001) 66 Cal.Comp.Cases 473, 475 (Appeals Board en banc).) As required by section 5313 and explained in *Hamilton*, "the WCJ is charged with the responsibility of referring to the evidence in the opinion on decision, and of clearly designating the evidence that forms the basis of the decision." (*Hamilton*, supra, at p. 475.) WCAB Rule 10759, states, in pertinent part: "Each exhibit listed must be clearly identified by author/provider, date, and title or type (e.g., "the July 1, 2008 medical report of John Doe, M.D. (3 pages)"). Each medical report, medical-legal report, medical record, or other paper or record having a different author/provider and/or a different date is a separate "document" and must be listed as a separate exhibit". (Cal. Code Regs., tit. 8, § 10759(c), emphasis added.)

The use of the same identifier for different exhibits makes meaningful review of a decision difficult. In any further proceedings it is recommended that the parties and the WCJ properly identify each joint and proponent exhibit sequentially to avoid confusion.

B.

AME, Dr. Mandell, issued eleven reports, and was deposed one occasion, over the period 2018 -2024.

Dr. Mandell opined that applicant is totally disabled due to a combination of her orthopedic and CRPS problems. He also noted the merit of Dr. Cheng's suggestion that the CRPS rating would be an alternative to the orthopedic rating, and thereafter concluded that Ms. Thomas does have a 100% disability impairment based on the CRPS but does not appear to have finalized total PD impairment. He referred a final diagnosis and impairment to another specialist.

Dr. Feinberg opines that a psychiatric evaluation is necessary with respect to applicant's CRPS, and further states that due to overlap, combining (impairment) is medically appropriate..

> My examination of Ms. Thomas took place 7 years post injury. My 50+ years of experience after examining her suggest that there are both physical and nonphysical aspects to her presentation. It is not possible, absent a quality psychiatric evaluation, to tease out these factors from my one-time examination of her. I do believe that while she probably has, at a minimum, neuropathic pain, if not complex regional pain syndrome, there are significant nonphysiological factors at play as well.
>
> I agree with the opinion of Dr. Mandell that Ms. Thomas could not reengage in the open labor market. Dr. Mandel states that this is a combination of orthopedic disability and CRPS, but the fact is that the neuropathic pain CRPS, by itself, would be 100% labor-disabling.
>
> I have already commented above regarding further evaluation and treatment, although her prognosis is guarded after so many years in her current state. As to what has further requested a "CRPS" description of her disability and an impairment rating. She has a disability related to her CRPS limiting her left upper extremity to at best, use as a "helper hand." Using a standard approach to the AMA Guides, Table 13–22, criteria for rating impairment related to chronic pain in one upper extremity, provides 4 classes.
>
> Given that she cannot use his nondominant left hand for self-care and daily activities, she fits into a class 4, 45% WPI. When considering all factors, this is not the most accurate impairment rating. Each upper extremity has a maximum impairment value of 60% yet Table 13–22, provides a lower rating for the nondominant left extremity. Ms. Thomas has lost more than 75% of her left upper extremity function, such that a 45% WPI is not the most accurate. There is a reasonable argument that because she has chronic pain and a useless left limb, she is worse off than someone with an amputation.
>
> In this particular situation, the most accurate impairment rating would be loss of use of the left upper extremity, which equates to a 60% WPI. This is the most accurate impairment rating. I will defer to Dr. Mandell as the AME to consider the issue of adding or combining the cervical and the shoulder impairments or whether to utilize the 60% WPI as covering the entirety of her impairments.

> My own opinion is that there is considerable overlap and thus combining is medically appropriate.
>
> After careful consideration of all information available including any letters, medical records, the patient's given history and the physical examination and based on my education, training, and experience, this report and all of the opinions/conclusions within are based on a reasonable medical probability.

(Ex. 112 pp. 23-25.)

Dr. Feinberg appears to defer to Dr. Mandell regarding the issue of adding or combining the cervical and the shoulder impairments or utilize the 60% WPI as including the entirety of applicant's impairments.

C.

We consider a variety of legal principals in the evaluation of impairment and rebutting the Permanent Disability Rating Schedule (PDRS).

The *Fitzpatrick* case allows a party to rebut the PDRS. (*Department of Corrections & Rehabilitation v. Workers' Comp. Appeals Bd.*, (*Fitzpatrick*), (2018) 27 Cal. App. 5th 607, [83 Cal.Comp.Cases 1680].)

The scheduled rating (or component parts of the rating) may be rebutted based on the specific circumstances of a case. (See *Ogilvie v. Workers' Comp. Appeals Bd.*, 197 Cal.App.4th at pp. 1266–1276; *Contra Costa County v. Workers' Comp. Appeals Bd.* (2015) 240 Cal.App.4th 746, 755–761 [193 Cal. Rptr. 3d 7]; *Milpitas Unified School Dist. v. Workers' Comp. Appeals Bd***.**, 187 Cal. App. 4th 808, 115 Cal. Rptr. 3d 112.

Fitzpatrick established that Labor Code section 4660 governs how a finding and award of permanent total disability (PTD) is made "in accordance with the fact" under Labor Code § 4662, subdivision (b). It clarified that section 4662(b) does **not** provide an independent, alternative path to a finding of PTD that bypasses the permanent disability rating schedule (PDRS) and its requirement to use the Combined Values Chart (CVC).

The court determined that section 4662(b), which allows for PTD to be found "in accordance with the fact" for injuries not listed as presumed total in section 4662(a), must still follow the rating process outlined in section 4660. This means a Workers' Compensation Judge (WCJ) cannot simply ignore the scheduled rating (which uses the CVC to combine multiple disabilities) and find

a worker 100% disabled based solely on a physician's opinion without substantial justification or proper rebuttal evidence.

Here, the WCJ opined that before consideration of the evaluating physician's assessment of her employability, the applicant's permanent disability utilizing the CVC rated to 92%. utilizing the WPI from both Dr. Mandell Dr. Feinberg's reporting, although evident, it is unclear as to the specific medical and documentary evidence supporting the WCJ's findings that applicant is unemployable, and has rebutted the Rating Schedule..

IV.

Any decision of the WCAB must be supported by substantial evidence. (Lab. Code, § 5952(d); *Lamb v. Workmen's Comp. Appeals Bd.* (1974) 11 Cal.3d 274, 281 [520 P.2d 978, 113 Cal. Rptr. 162] [39 Cal.Comp.Cases 310]*; Garza v. Workmen's Comp. Appeals Bd.* (1970) 3 Cal.3d 312, 317 [475 P.2d 451, 90 Cal. Rptr. 355] [35 Cal.Comp.Cases 500]; *LeVesque v. Workmen's Comp. Appeals Bd.* (1970) 1 Cal.3d 627, 635 [463 P.2d 432, 83 Cal. Rptr. 208] [35 Cal.Comp.Cases 16].)

The WCJ's decision must "set [] forth clearly and concisely the reasons for the decision made on each issue, and the evidence relied on," so that "the parties, and the Board if reconsideration is sought, [can] ascertain the basis for the decision[.] . . . For the opinion on decision to be meaningful, the WCJ must refer with specificity to an adequate and completely developed record." (*Id*. at p. 476 (citing *Evans v. Workmen's Comp. Appeals Bd.* (1968) 68 Cal. 2d 753, 755 [33 Cal.Comp.Cases 350]).)

The Appeals Board has the discretionary authority to develop the record when the record does not contain substantial evidence or when appropriate to provide due process or fully adjudicate the issues. (§§ 5701, 5906; *Tyler v. Workers' Comp. Appeals Bd.* (1997) 56 Cal.App.4th 389, 394 [65 Cal. Rptr. 2d 431, 62 Cal.Comp.Cases 924] ["The principle of allowing full development of the evidentiary record to enable a complete adjudication of the issues is consistent with due process in connection with workers' compensation claims."]; see *McClune v. Workers' Comp. Appeals Bd.* (1998) 62 Cal.App.4th 1117 [72 Cal. Rptr. 2d 898, 63 Cal.Comp.Cases 261]; *Rucker v. Workers' Comp. Appeals Bd.* (2000) 82 Cal.App.4th 151, 157-158 [65 Cal.Comp.Cases 805]; *Gangwish v. Workers' Comp. Appeals Bd.* (2001) 89 Cal.App.4th 1284, 1295 [66 Cal.Comp.Cases 584].)

The Appeals Board also has a constitutional mandate to "ensure substantial justice in all cases." (*Kuykendall v. Workers' Comp. Appeals Bd.* (2000) 79 Cal.App.4th 396, 403 [65 Cal.Comp.Cases 264].) The Board may not leave matters undeveloped where it is clear that additional discovery is needed. (*Id.* at p. 404.) Here, Dr. Mandell's reports remain unclear and/or incomplete regarding analysis of applicant's permanent disability analysis. Similarly, Dr. Feinberg's reporting may need further clarification as to whether the 60% WPI is applied solely to the CRPS or to all AOE/COE body parts. For these reasons, additional discovery appears necessary to obtain a complete and substantial medical opinion regarding the applicant's CRPS.As such, it appears that the existing record may not properly set forth all relevant issues and include all evidence sufficient to support the decision, findings, award, and legal conclusions of the WCJ, and thus further development of the record may be necessary with respect to the issues noted above.

V.

Finally, we observe that under our broad grant of authority, our jurisdiction over this matter is continuing.

A grant of reconsideration has the effect of causing "the whole subject matter [to be] reopened for further consideration and determination" (*Great Western Power Co. v. Industrial Acc. Com.* (*Savercool*) (1923) 191 Cal.724, 729 [10 I.A.C. 322]) and of "[throwing] the entire record open for review." (*State Comp. Ins. Fund v. Industrial Acc. Com.* (*George*) (1954) 125 Cal.App.2d 201, 203 [19 Cal.Comp.Cases 98].)

Thus, once reconsideration has been granted, the Appeals Board has the full power to make new and different findings on issues presented for determination at the trial level, even with respect to issues not raised in the petition for reconsideration before it. (See Lab. Code, §§ 5907, 5908, 5908.5; see *Gonzales v. Industrial Acci. Com.* (1958) 50 Cal.2d 360, 364, ["[t]here is no provision in chapter 7, dealing with proceedings for reconsideration and judicial review, limiting the time within which the commission may make its decision on reconsideration, and in the absence of a statutory authority limitation none will be implied."; see also generally Lab. Code, § 5803, "The WCAB has continuing jurisdiction over its orders, decisions, and awards. . . . At any time, upon notice and after an opportunity to be heard is given to the parties in interest, the appeals board may rescind, alter, or amend any order, decision, or award, good cause appearing therefore.].)

"The WCAB . . . is a constitutional court; hence, its final decisions are given res judicata effect." (*Azadigian v. Workers' Comp. Appeals Bd.* (1992) 7 Cal.App.4th 372, 374 [57

Cal.Comp.Cases 391; see *Dow Chemical Co. v. Workmen's Comp. App. Bd*. (1967) 67 Cal.2d 483, 491 [62 Cal.Rptr. 757, 432 P.2d 365]; *Dakins v. Board of Pension Commissioners* (1982) 134 Cal.App.3d 374, 381 [184 Cal.Rptr. 576]; *Solari v. Atlas-Universal Service, Inc*. (1963) 215 Cal.App.2d 587, 593 [30 Cal.Rptr. 407].) A "final" order has been defined as one that either "determines any substantive right or liability of those involved in the case" (*Rymer v. Hagler* (1989) 211 Cal.App.3d 1171, 1180; *Safeway Stores, Inc. v. Workers' Comp. Appeals Bd*. (Pointer) (1980) 104 Cal.App.3d 528, 534-535 [45 Cal.Comp.Cases 410]; *Kaiser Foundation Hospitals v. Workers' Comp. Appeals Bd. (Kramer)* (1978) 82 Cal.App.3d 39, 45 [43 Cal.Comp.Cases 661]), or determines a "threshold" issue that is fundamental to the claim for benefits. Interlocutory procedural or evidentiary decisions, entered in the midst of the workers' compensation proceedings, are not considered "final" orders. (*Maranian v. Workers' Comp. Appeals Bd.* (2000) 81 Cal.App.4th 1068, 1070, 1075 [65 Cal.Comp.Cases 650].) ["interim orders, which do not decide a threshold issue, such as intermediate procedural or evidentiary decisions, are not 'final' "]; *Rymer,* supra, at p. 1180 ["[t]he term ['final'] does not include intermediate procedural orders or discovery orders"]; Kramer, supra, at p. 45 ["[t]he term ['final'] does not include intermediate procedural orders"].)

> Section 5901 states in relevant part that: "No cause of action arising out of any final order, decision or award made and filed by the appeals board or a workers' compensation judge shall accrue in any court to any person until and unless the appeals board on its own motion sets aside the final order, decision, or award and removes the proceeding to itself or if the person files a petition for reconsideration, and the reconsideration is granted or denied. …"

Thus, this is not a final decision on the merits of the Petition for Reconsideration, and we will order that issuance of the final decision after reconsideration is deferred. Once a final decision is issued by the Appeals Board, any aggrieved person may timely seek a writ of review pursuant to sections 5950 et seq.

VI.

Accordingly, we grant defendant's Petition for Reconsideration, and order that a final decision after reconsideration is deferred pending further review of the merits of the Petition for Reconsideration and further consideration of the entire record in light of the applicable statutory and decisional law.

While this matter is pending before the Appeals Board, we encourage the parties to participate in the Appeals Board's voluntary mediation program. Inquiries as to the use of our mediation program can be addressed to WCABmediation@dir.ca.gov.

For the foregoing reasons,

IT IS ORDERED that defendant's Petition for Reconsideration of the Findings of Fact and Order issued on September 3, 2025, is **GRANTED**.

IT IS FURTHER ORDERED that a final decision after reconsideration is **DEFERRED** pending further review of the merits of the Petition for Reconsideration and further consideration of the entire record in light of the applicable statutory and decisional law.

WORKERS' COMPENSATION APPEALS BOARD

/s/ ANNE SCHMITZ, DEPUTY COMMISSIONER

I CONCUR,

/s/ JOSEPH V. CAPURRO, COMMISSIONER

/s/ KATHERINE A. ZALEWSKI, CHAIR

DATED AND FILED AT SAN FRANCISCO, CALIFORNIA

DECEMBER 22, 2025

SERVICE MADE ON THE ABOVE DATE ON THE PERSONS LISTED BELOW AT THEIR ADDRESSES SHOWN ON THE CURRENT OFFICIAL ADDRESS RECORD.

JAVONA THOMAS
ROBERT WOOD
LAURA CHAPMAN

VC/bp

I certify that I affixed the official seal of the Workers' Compensation Appeals Board to this original decision on this date.
BP