

STATE OF CALIFORNIA WORKERS' COMPENSATION APPEALS BOARD

vs.	<i>Applicant</i>
	<i>Defendants.</i>

Case No. _____

DECLARATION OF DEFENDANT RE: RESOLUTION OF LIENS

I, _____, am the attorney or representative for defendant
_____ in the above-entitled matter.

I have made the following good faith efforts to resolve each of the liens in this case. List ALL lien claims below. Use supplemental pages as necessary.

Lien Claimant	Nature and Date of Lien Resolution Efforts	Result
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I declare under penalty of perjury that the foregoing is true and correct and that this affidavit was executed at

_____, California on _____

Supplemental Page _____ Re: Resolution of Liens

Case No. _____

Lien Claimant

Nature and Date of Lien Resolution Efforts

Result

I declare under penalty of perjury that the foregoing is true and correct and that this affidavit was executed at

, California, on _____
