

DECLARATION PURSUANT TO LABOR CODE SECTION 4906(G)

● THIS FORM WILL BE PROVIDED TO THE FAIR BY CFSA WHEN A CASE IS BEING BROUGHT BEFORE THE WORKERS' COMPENSATION APPEALS BOARD (WCAB) ●

1. When a case is being submitted to the Board, we will fax or mail a copy of this form to you that will have the applicant and defendant information pre-printed. The authorized employer representative must sign and date this form.

As the form states, by signing, you are declaring that you have not violated the Labor Code and that you have not offered, delivered, received, or accepted any rebate, refund, commission, preference, patronage, dividend, discount or other consideration, whether in the form of money or otherwise, as compensation or inducement for any referral examination or evaluation.

2. THE SAME DAY, return the signed form via FAX to CFSA at (916) 263-6159 and mail the hard copy with the original signature to CFSA.

**BY COMPLETING THIS FORM, YOU ARE NOT ADMITTING LIABILITY
BUT SIMPLY COMPLYING WITH THE LAW. *A sample is attached.***