STATE OF CALIFORNIA
DEPARTMENT OF INDUSTRIAL RELATIONS
DIVISION OF INDUSTRIAL RELATIONS
WORKERS' COMPENSATION APPEALS BOARD

Bonnie Jackson *Applicant* vs. Standard Homeopathic Company; State Compensation Insurance Fund *Defendants*	Case No. SDO 345671 Verification of Answer to Petition for Reconsideration

STATE OF CALIFORNIA
ss.
COUNTY OF San Diego

I, the undersigned, say that I am lien claimant, Michael Blott, D.C., respondent in the above-entitled action. I have read the foregoing petition for reconsideration and know the contents thereof, and that the same is true of my own knowledge, except as to the matters which are therein stated upon my information or belief, and as to those matters that I believe it to be true.

I declare under penalty of perjury, that the foregoing is true and correct.
Executed on June 4, 2007 , at Poway, California.

_____
Respondent

(NOTE: If verification is by attorney or officer of a corporation it must comply with Section 446 Code of Civil Procedure.)

Copy mailed to: State Compensation Insurance Fund
PO Box 65005
Pinedale CA 93650

Date of Mailing: June 4, 2007

By:_____
(Signature)