

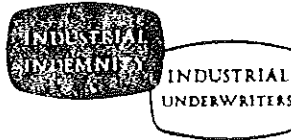
# WORKMEN'S COMPENSATION ACCIDENT/LOSS RECORD

**PALO VERDE FARMS INC**

NAME OF INSURED

PRODUCER

**EDWARD KANDAL  
P O BOX 531  
EL CENTRO CALIF 92243**



**1 07 74826 CB6638144**  
CO DIV PRODUCER POLICY NUMBER  
**INDUSTRIAL INDEMNITY CO**  
POLICY PERIOD

**03 00 0017 4/ 1/70 4/ 1/71**  
GOV CLASS EFFECTIVE EXPIRING

**12,611 10,775 11.5 US 7/31/71**  
E A P PREMIUM TO DATE LOSS RATIO AA OB DATE

CIDENT/LOSS DATE	CLAIM NUMBER	CLASS CODE	CLAIMANT	CAUSE	NATURE	RESERVE OR CLOSING COST
6/14/70	70 23 12709	8209	JORDAN W	SLIPPED	LOW BACK	48
6/12/70	70 23 43960	2108	GUILIN L	F B	L EYE	18
6/27/70	70 23 44497	0017	ARROYO S	FALL	HIP & BACK	92
5/25/70	70 23 46554	8209	HIGLEY J	CLEANING	RT KNEE	21
7/20/70	70 23 46626	0017	RODRIGUEZ M	STRUCK	ABDOMEN	51
0/29/70	70 23 47839	0017	KATA J S	FELL/TRACTOR	RIGHT RIB	75
3/ 8/71	71 07 15209	0017	OLSON K	HITBY CNTNR	INJ GENITAL	299
1/26/71	71 07 47473	8209	HAGER C H	STEPPON FOOD	SPRAIN BACK/L	122
8/30/70	71 23 15642	0017	DELGATO G	FEL ON TRACTOR	FRACT TEETH	520
				# OF CLAIMS	9	726.1,244

**PREMIUM TO DATE** INCLUDES ANY EARNED PREMIUM BILLED PLUS THE AMOUNT ESTIMATED TO BE EARNED TO DATE OF THIS REPORT.  
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DES - AA S = SCHEDULED R = REQUESTED B = BOTH SCHEDULED AND REQUESTED BLANK = NOT APPLICABLE  
C = CLOSING COST F = FREQUENCY P = BOTH SCHEDULED AND FREQUENCY

# 10,774

# WORKMEN'S COMPENSATION ACCIDENT/LOSS RECORD

**PALO VERDE FARMS, INC.**

NAME OF INSURED

PRODUCER

**DWARD KANDAL**  
**P O BOX 531**  
**EL CENTRO CALIF 92243**



INDUSTRIAL  
UNDERWRITERS

23

12,611

F.A.D.

*Comp. Fill*  
1 07 74826 CB6683352

CO DIV PRODUCER POLICY NUMBER

INDUSTRIAL INDEMNITY CO  
POLICY PERIOD

0017

SOV CLASS

7,357

PREMIUM TO DATE

4/ 1/71

EFFECTIVE

4.7 US

LOSS RATIO

4/ 1/72

EXPIRING

7/31/72

DATE

ACCIDENT/LOSS DATE	CLAIM NUMBER	CLASS CODE	CLAIMANT	CAUSE	NATURE	RESERVE OR CLOSING COST
6/12/71	71 23 17139	0017	GARCIA R	BURN ONPREM	BURN FACE	44
6/22/71	71 23 92686	8209	CAVANAGH J P	OPRATE MATERL	PUNCT WRIST	17
6/16/71	71 23 52767	0017	SERRANO G H	CUT BY UNK	LAC KNEE	44
7/ 2/71	71 23 53026	8209	GILKISON H W		ABRAS LEG	22
9/23/71	71 23 55338	0017	NOWLAND M R	BEND HOLE	STRAIN BACK/L	62
9/20/71	71 23 55339	0017	BENNETT T O	FEL IN HOLE	STRAIN BACK/L	62
2/ 8/72	72 78 7574	0017	MCACREE R	LIFT EQUIP	STRAIN BACK/L	26
3/ 9/72	72 78 14166	0017	VEGA A G	CONTAC DEBRIS	F B EYES	72
				# OF CLAIMS	8	350

NOV - 1 1972

\$7,356.51

PREMIUM TO DATE INCLUDES ANY EARNED PREMIUM BILLED PLUS THE AMOUNT ESTIMATED TO BE EARNED TO DATE OF THIS REPORT.  
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CODES - AA S = SCHEDULED; R = REQUESTED. B = BOTH SCHEDULED AND REQUESTED. BLANK = NOT APPLICABLE  
S = SEVERITY. F = FREQUENCY. B = BOTH SEVERITY AND FREQUENCY. BLANK = NOT APPLICABLE

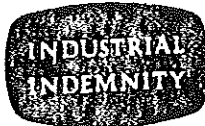
# WORKMEN'S COMPENSATION ACCIDENT/LOSS RECORD

**PALO VERDE FARMS INC**

NAME OF INSURED

PRODUCER

WARD KANDAL  
P O BOX 531  
EL CENTRO CALIF 92243



1 07 74826 CB7037416  
CO DIV PRODUCER POLICY NUMBER

INDUSTRIAL INDEMNITY CO  
POLICY PERIOD

23

0017  
CLASS

4/ 1/73  
EFFECTIVE

4/ 1/74  
EXPIRING

10,304

10,259

15.9 S

4/30/74

F.A.P.

PREMIUM TO DATE

LOSS RATIO AA LB

DATE

IDENT/LOSS DATE	CLAIM NUMBER	CLASS CODE	CLAIMANT	CAUSE	NATURE	RESERVE OR CLOSING COST
1/11/73	73 78 51178	0017	VILLASIS J	LIFT PRODUCT	SPRAIN BACK/L	42
1/ 7/73	73 78 67063	8209	BENNETT T	INGEST HOLE	INJ BACK/L	91
1/26/74	74 07 24910	8209	FOWLER D A	HITBY CNTNR	INJ CERV BAC	750 R
1/11/74	74 07 24931	0017	SALDANA F	CUT BY SHARPOBLAC	FINGER	750 R
				747821488		
				# OF CLAIMS	4	1,633

MAY 20 1974

112,320.00

PREMIUM TO DATE INCLUDES ANY EARNED PREMIUM BILLED PLUS THE AMOUNT ESTIMATED TO BE EARNED TO DATE OF THIS REPORT  
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OR LB = SEVERITY F = FREQUENCY E = BOTH SEVERITY AND FREQUENCY BLANK = NOT APPLICABLE

# ACCIDENT/LOSS RECORD

MARIO SAIKHON INC 6/OR

NAME OF INSURED

INDUSTRIAL  
INDEMNITY

INDUSTRIAL  
UNDERWRITERS

1 07 74826 CB6301373  
CO DIV PRODUCER POLICY NUMBER

PRODUCER

EDWARD KANDAL  
P O BOX 531  
EL CENTRO CALIF 92243

JAN 28 1968

POLICY PERIOD

0017 1/ 1/68 1/ 1/69  
GOV CLASS EFFECTIVE EXPIRING

10,000

23,791

10.2 5

12/31/68

E A F

PREMIUM TO DATE

LOSS RATIO

AA OB

DATE

ACCIDENT/LOSS DATE	CLAIM NUMBER	CLASS CODE	CLAIMANT	CAUSE	NATURE	RESERVE OR CLOSING COST
1/ 2/68	68 07	1 0017	MENDOZA C	KNIFE	CUT FINGER	22
1/13/68	68 07	2 0017	ARAIZA F	JUMPING	SPR BACK	523
2/24/68	68 07	3 0017	CONES H	NEEDLE	PUNCT FINGER	29
3/ 4/68	68 07	4 0017	BARRAZA A P	FALL OBJ	LUMBAR SPASH	209
3/ 4/68	68 07	5 8209	ENCINAS R	SLIPPED	BUMP HEAD	53
4/ 8/68	68 07	6 8209	STILES C	LIFTING	LACER FGR	89
4/11/68	68 07	7 0017	ELIODORO H	BEE STING	STING FINGER	19
5/23/68	68 07	8 0017	ONTIVEROS T	DITCH FALL	CONT KNEE	4
5/23/68	68 07	9 0017	ONTIVERAS T	JUMPING/FALL	CONTUS KNEE	76
6/ 5/68	68 07	10 0017	PIERCE M	NAIL	PUNC FOOT	15
6/ 4/68	68 07	11 0017	HERNANDEZ M	FALL OBJ	ABRA LEG	29
6/17/68	68 07	12 0017	OLIVIAS E	FALL OBJ	FRAC HAND	1,130
6/11/68	68 07	13 0017	RAMIREZ F	SPLINTER	RIGHT HIP	18
6/17/68	68 07	14 0017	RAMIREZ F	TRIPPED	ANKLE	40
6/19/68	68 07	15 0017	AGUILAR H	SCRAPING	FINGER	21
6/ 7/68	68 07	16 0017	SALCIDO G	SLIP/FALL	RIGHT KNEE	25
6/24/68	68 07	17 0017	COURTNEY C	LIFTING	STRAIN BACK	28
6/ 3/68	68 07	18 0017	HERNANDEZ A	LIFTING	STRAIN BACK	61
7/ 5/68	68 07	19 0017	ESPANOSA R	LIFTING	STRAIN BACK	61
				# OF CLAIMS	19	2,444

Mailed to (Assured)  
(Loss Payee)

Date

7-10-68



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CODES - AA S - SCHEDULED, R - REQUESTED B - BOTH SCHEDULED AND REQUESTED BLANK - NOT APPLICABLE  
OB S - SEVERITY F - FREQUENCY K - BOTH SEVERITY AND FREQUENCY BLANK - NOT APPLICABLE

22,366.76

MARIO SAIKHON INC 6/OR

NAME OF INSURED

## ACCIDENT/LOSS RECORD

1 07 74826 CB6410314

CO DIV PRODUCER POLICY NUMBER

PRODUCER

EDWARD KANDAL  
P O BOX 531  
EL CENTRO CALIF 92243

OCT 20 1969

INDUSTRIAL  
INDEMNITYINDUSTRIAL  
UNDERWRITERS

POLICY PER OD

0017 1/ 1/69 1/ 1/70

GOV CLASS EFFECTIVE EXPIRING

22,337 21,697 17.4 S 9/30/69

E A P PREMIUM TO DATE LOSS RATIO AA CB DATE

CCIDENT/LOSS DATE	CLAIM NUMBER	CLASS CODE	CLAIMANT	CAUSE	NATURE	RESERVE OR CLOSING COST
1/18/69	69 07	1	0017 CASTILLAS R	WORKING	SPR SHLDR	11
2/10/69	69 07	2	0017 ALEJO A	KNIFE	LAC FINGER	31
3/ 6/69	69 07	3	0017 POEHLS R	STRUCK	LAC ELBOW	40
3/13/69	69 07	4	0017 CONTRERAS R	KNIFE	LAC FINGER	46
3/ 7/69	69 07	5	0017 GARCIA I	KNIFE	LAC FINGERS	39
5/ 2/69	69 07	6	0017 ABARRIGA L	AUTO ACC	MULTIPL CONTUS	510 R
6/13/69	69 07	7	0017 GUTIERREZ B	FALL	FRACT ARM	2,410 R
6/13/69	69 07	8	0017 MYERS C	BLADE	LAC FINGER	77
6/13/69	69 07	9	0017 HERNANDEZ R	SMASHED	LAC WRIST	69
7/ 1/69	69 07	10	0017 HERNANDEZ R	HIT	RIBS	+
7/ 1/69	69 07	11	0017 HERNANDEZ R	STRUCK	CONT RIBS	500 R
6/26/69	69 07	12	0017 LACUESTA J	FALL	LAC HEAD	49

# OF CLAIMS 12 3,782

*Check out Gutierrez. He  
should have been working  
Check to MS they sent stopped  
it to him - find  
out if he is working  
He can  
return  
to light  
work*

*6900  
Jan 11  
197*

420,924.62

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MARIO SAIKHON INC &amp;/OR

## ACCIDENT/LOSS RECORD

1 07 74826 CB6617317  
CO DIV PRODUCER POLICY NUMBER

NAME OF INSURED

PRODUCER

EDWARD KANDAL

P O BOX 531

EL CENTRO CALIF 92243

JAN 21 1977

INDUSTRIAL  
UNDERWRITERSINDUSTRIAL INDEMNITY CO  
POLICY PERIOD

03 00

0017

1/ 1/70

1/ 1/71

GOV CLASS

EFFECTIVE

EXPIRING

20,925

25,240

68.3 S

12/31/70

E A P.

PREMIUM TO DATE

LOSS RATIO

AA OB

DATE

CIDENT/LOSS DATE	CLAIM NUMBER	CLASS CODE	CLAIMANT	CAUSE	NATURE	RESERVE OR CLOSING COST
7/17/70	70 05 12715	0017	PALACIOS J	MACHINE	INJ SCALP	129
7/11/70	70 05 44247	0017	MENDOZA F	SLIPPED/FELL	ABRAS LF LEG	40
7/14/70	70 05 44248	0017	RODRIGUEZ T	SLIPPED/FELL	CONTUS RT ABDO	17
2/22/70	70 07 10820	0017	CENDEJAS G	STRUCK	INJ R EYE	12,500 R
2/27/70	70 07 10842	0017	BRAVO J	FALL OBJ	CONTUS R RIBS	468
6/19/70	70 07 12205	0017	MANIX J	GLASS	LAC FNGR	264
6/25/70	70 07 12249	0017	BEAR P	HEAT	HEAT PROST	1,800 R
9/16/70	70 07 14041	0017	ESPINOZA C	LIFTING	STRN BACK	1,485 R
1/22/70	70 07 40752	0017	CONSINO R	UNKNOWN	NOSEBLEED	24
2/18/70	70 07 41083	0017	PANALES J	LIFTING	SIDE	12
3/25/70	70 07 41966	0017	BARAJAS L	LIFTING	SIDES	12
4/ 2/70	70 07 42240	0008	FLORES A	LIFTING	L SIDE	19
5/20/70	70 07 42256	0017	MYERS J	AMMONIA	BURN RT ARM	26
5/21/70	70 07 42504	0017	DIAZ L	ALLERGY	HANDS	25
5/16/70	70 07 42508	0017	QUESADA T R	SLIPPED/FELL	ABDOMINAL	141
4/28/70	70 07 42754	0017	GIL M	LIFTING	CHEST	30
5/24/70	70 07 43337	0017	RAMIREZ S	HEAT	HEAT EXHAUS	49
12/70	70 07 43548	0017	PINA A	WOOD	R FNGR	37
1/12/70	70 07 43549	0017	SANCHEZ A	JUMPED	R ANKLE	54
6/12/70	70 07 43550	0017	JIMINEZ O	MACHINERY	INFECTION THUMB	65
6/27/70	70 07 43940	0017	HERNANDEZ A	NAIL	PUNCT/R WRIST	33
7/ 1/70	70 07 43941	0017	RODRIGUEZ C	FALL	SPRAIN/L FOOT	29
				# OF CLAIMS	22	17,257

Open

5000

6575  
5  
11,600

Going to hearing  
in one of the  
court during windy day  
2/28/71

26,346.20

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MARIO SAKHON INC

## ACCIDENT/LOSS RECORD

1 07 74826 CB6703878

NAME OF INSURED

INDUSTRIAL  
INDEMNITYINDUSTRIAL  
UNDERWRITERS

INDUSTRIAL INDEMNITY CO

PRODUCER

EDWARD KANDAL

P O BOX 531

EL CENTRO CALIF 92243

03 00 0017

POLICY PERIOD 1/ 1/71 1/ 1/72

26,346

GOV CLASS 29,610

EFFECTIVE 9.0 US

EXPIRING 4/30/72

E A P

PREMIUM TO DATE

LOSS RATIO

AA OB

DATE

ACCIDENT/LOSS DATE	CLAIM NUMBER	CLASS CODE	CLAIMANT	CAUSE	NATURE	RESERVE OR CLOSING COST
3/ 1/71	71 07 14975	0017	BARRIGA F	SLIP CUTINST	LAC THUMB	216
3/24/71	71 07 15214	0017	BRAVO J	HITBY AUTO	CONTUS KNEE	281
1/ 4/71	71 07 46873	0017	PALACIAS P	USE H TOOL	STRAIN HAND	29
1/ 2/71	71 07 46874	0017	LEDESHA D	FEL ON UNK	STRAIN SHLDS	49
5/ 7/71	71 07 48743	0017	JIMENEZ E		INJ HAND	24
2/ 1/71	71 07 49095	0017	NAKANO R S	WALK/R	SPRAIN ANKLE	36
3/22/71	71 07 49096	0008	VALDEZ A	LIFT CNTNR	INJ GROIN	20
6/ 8/71	71 07 49217	0017	ONTIVEROS T	FEL ON UNK	ABRAS FOOT	36
5/31/71	71 07 49397	0017	FIGORE C	JUMPED	STRAIN BACK/L	137
6/22/71	71 07 49483	0017	BARRIGA J	FEL FR TRUCK	INJ LEG	16
6/14/71	71 07 49484	0017	ARREDONDO F		INJ NOSE	62
6/23/71	71 07 49633	0017	PRIGET W	HITBY PRODUCT	CONTUS KNEE	41
6/28/71	71 07 49634	0017	HUERTA M	CUT BY SHARPOB	LAC THUMB	31
7/ 7/71	71 07 49822	0017	WRIGHT L		STRAIN ARM	20
7/ 8/71	71 07 49823	0017	COOPER J	BIT BY INSECTS	INJ ANKLE	16
6/21/71	71 07 49824	0017	CANTU F R		INJ THUMB	38
9/10/71	71 07 51160	0017	CARDENAS S	CONTAC CHEM	INJ EYE	20
11/ 5/71	72 07 17776	0017	MEZA J V	HITBY AUTO	FRACT FINGER	1,500
1/15/71	72 78 5429	0017	BARRIGA R		INJ KNEE	30
1/17/71	72 78 6055	0017	SANCHEZ J C	CARRY CNTNR	INJ BACK/L	78
				# OF CLAIMS	20	2,678

29,607.50

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 OB S = SEVERITY, F = FREQUENCY B = BOTH SEVERITY AND FREQUENCY BLANK = NOT APPLICABLE

# ACCIDENT/LOSS RECORD

MARIO SAIKHON INC.

NAME OF INSURED

DOUCER

EDWARD KANDAL

P O BOX 531

EL CENTRO CALIF 92243



INDUSTRIAL  
UNDERWRITERS

1 07 74826 CB6851243  
CO DIV PRODUCER POLICY NUMBER

INDUSTRIAL INDEMNITY CO  
POLICY PERIOD

23

0017

GRV CLASS

1/ 1/72

EFFECTIVE

1/ 1/73

EXPIRING

26,426

E A P

34,027

PREMIUM TO DATE

29.5 US

LOSS RATIO AA OB

4/30/73

DATE

ACCIDENT/LOSS DATE	CLAIM NUMBER	CLASS CODE	CLAIMANT	CAUSE	NATURE	RESERVE OR CLOSING COST
1/10/72	72 07 18034	0017	MENDOZA R	LIFT EQUIP	STRAIN BACK/L	177
6/ 2/72	72 07 19281	0017	AVENDANO M	CAUGHT MACH	AMPUTA FINGER	6,070 R
6/ 1/72	72 07 19406	0017	ORTEGA T	FEL FR TRUCK	SPRAIN BACK/L	236
6/14/72	72 23 21637	0017	JONES S	CAUGHT TRUCK	LAC FINGER	2,960 R
1/13/72	72 78 14998	0017	JIMINEZ F	CUT BY SHARPO	INFECT FINGER	45
2/29/72	72 78 17201	0037	GONZALES D	CUT BY CUTINS	TLAC FINGER	64
2/26/72	72 78 17835	0037	PALACIAS P	USE CNTNR	INJ BACK/L	33
6/ 2/72	72 78 31162	0017	CERDA L	CONTAC PRODUCT	SPRAIN ANKLE	31
6/ 5/72	72 78 31428	0017	GARDENHIRE B J	CONTAC DEBRIS	INJ EYE	55
5/31/72	72 78 32021	0017	PEREZ O	CUT BY SHARPO	BLAC FINGER	30
5/30/72	72 78 32389	0017	VALENZUELA L M	BUMPED WOOD	ABRAS KNEE	41
6/22/72	72 78 40544	0017	AGUIRRE R	BIT BY INSECT	SBITE FACE	46
6/15/72	72 78 41956	0017	WILLIAMS D	CONTAC WOOD	F B FINGER	35
5/17/72	72 78 48927	0017	ESPERICUETA V	LIFT EQUIP	INJ BACK/L	117
8/15/72	72 78 50597	0017	SILVA F D	BIT BY INSECT	SBITE	11
0/13/72	72 78 55219	0017	AGUILERA R	HITBY TRAILER	SPRAIN FOOT	28
6/10/72	72 78 65137	0017	MELONDEZ A		SPRAIN KNEE	#
12/28/72	72 78 65293	0017	SILVA F D	DROP MATERL	CONTUS THUMB	26
1/18/72	73 07 55195	0017	CERDA F	CUT BY SHARPO	BLAC FINGER	19
6/10/72	73 07 55579	0017	MELONDEZ A		SPRAIN KNEE	26
2/24/72	73 78 9348	0017	FLORES A H	CONTAC SHARPO	INFECT THUMB	5
				# OF CLAIMS	21	10,052 9158

\$2,673.45

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CODES - AA S = SCHEDULED R = REQUESTED B = BOTH SCHEDULED AND REQUESTED BLANK = NOT APPLICABLE  
CB S = SEVERITY F = FREQUENCY B = BOTH SEVERITY AND FREQUENCY BLANK = NOT APPLICABLE

MARIO SAIKHON INC

NAME OF INSURED

PRODUCER

WARD KANDAL  
P O BOX 531  
EL CENTRO CALIF 92243

WORKMEN'S COMPENSATION  
ACCIDENT/LOSS RECORD



1 07 74826 CB7037077

CO DIV PRODUCER POLICY NUMBER  
INDUSTRIAL INDEMNITY CO

POLICY PERIOD

23 0017 1/ 1/73 1/ 1/74

GOV CLASS EFFECTIVE EXPIRING  
26,457 41,098 210.1 S 12/31/73

E A P PREMIUM TO DATE LOSS RATIO AA OB DATE

ACCIDENT/LOSS DATE	CLAIM NUMBER	CLASS CODE	CLAIMANT	CAUSE	NATURE	RESERVE OR CLOSING COST
/ 2/73	73 07 21514	0017	RAMOS G	LOAD/U FOOD	STRAIN BACK/L	213
/24/73	73 07 21891	0017	PLASCENCIA J J	SLIP MATERL	SPRAIN BACK/L	1,050
/17/73	73 07 21899	0017	PICENO E	SLIP UNK	STRAIN GROIN	629
/12/73	73 07 21963	0017	RODRIGUEZ F	A COLL TRUCK	FRACT RIBS	339
/12/73	73 07 21985	0017	GALINDO R	A HIT TRUCK	AMPUTA FOOT	44,930 R
/13/73	73 07 21993	0017	ARREDONDO J	LIFT HEAT EQ	SPRAIN BACK/L	832
/27/73	73 07 22478	0017	CEJA E	CARRY CNTNR	INJ BACK/L	8,450 R
730755815						
/20/73	73 07 22479	0017	CEJA E	RTSTRN CNTNR	INJ BACK/L	+
/15/73	73 07 22942	0017	MORALES I	CUT BY SHARPO	BLAC EYE	387
/16/73	73 07 23900	0017	GONSALEZ A D	A COLL TRUCK	FRACT BACK/IN	29,100 R
42 GONSALEZ						
/13/73	73 54 53775	0006	COSTA D		FINGER	+
/28/73	73 54 58107	0017	RUBEN A	CUT BY H TOOL	LAC WRIST	+
/ 2/73	73 78 10756	0017	BARRON B C	LOAD/U PRODUCT	INFECT FINGER	82
/19/73	73 78 14414	0017	GARCIA F X	CONTAC TRUCK	LAC HAND	23
/12/73	73 78 19509	0017	BARRIEGA R	OPRATE EQUIP	F B EYE	23
/13/73	73 78 24343	0017	CASTRO D	CONTAC SHARPO	BLAC HAND	+
/17/73	73 78 26335	0017	SANTANA B B	CUT BY SHARPO	BLAC FINGER	16
/12/73	73 78 30740	0017	BARRIEGA R	CONTAC DEBRIS	F B EYE	+
/18/73	73 78 34650	0017	MENDOZA F	PUNC BY SHARPO	BUNCT HAND	22
/ 2/73	73 78 51699	0017	FORNASERO M	STEPON SHARPO	BUNCT FOOT	21
/25/73	73 78 51731	0017	GARZA F A	LOAD/U MATERL	INJ BACK/L	28
/10/73	73 78 52354	0017	PEREZ G L	FEL FR TRUCK	INJ KNEE	33
/ 6/73	73 78 65776	0017	GOTTI L	PUSH EQUIP	STRAIN BACK/UP	13
/26/73	73 78 68895	0017	PATTERSON D	LIFT MATERL	STRAIN ELBOW	44
/21/73	73 78 69807	0017	AREDONDO J	FEL IN HOLE	INJ ANKLE	45
/ 5/73	73 78 69832	0017	BARREN B			4
/22/73	73 78 75158	0017	GOTTI L	HITBY MATERL	CONTUS HAND	41
/12/73	73 78 77589	0017	MARTINEZ N	HITBY MATERL	INJ FOOT	56
/22/73	73 78 79360	0017	SILVA A	CUT BY MATERL	INJ THUMB	+
/12/73	73 78 79366	0017	SMITH F	STEPON SHARPO	BUNCT FOOT	+
/ 1/73	73 78 80497	0017	AVENDANO M	LIFT MATERL	INJ BACK/L	+
/22/73	73 78 81143	0017	SILVA A	CUT BY SHARPO	BLAC THUMB	+

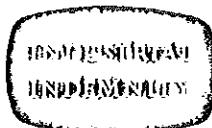
# OF CLAIMS 32 86,391

PREMIUM TO DATE INCLUDES ANY EARNED PREMIUM BILLED PLUS THE AMOUNT ESTIMATED TO BE EARNED TO DATE OF THIS REPORT.  
RESERVE OR CLOSING COST IS THE INCURRED VALUE AS OF THE DATE OF THIS REPORT. OPEN CLAIMS WITH RESERVES REPRESENTING ESTIMATED FINAL CO  
SIGNATED "R". COMPENSATION CLAIMS WITH NO AMOUNT SHOWN (+) ARE UNPAID MEDICAL. ONLY CLAIMS ESTIMATED TO AVERAGE \$45 EACH THEY.  
ADDED IN CLAIM COUNT BUT NOT IN LOSS RATIO. DIFFERENCE BETWEEN MANUAL TOTAL OR LISTED CLAIMS COST AND PRINTED TOTAL IS DUE TO INDIVIDU  
NO SHOWN IN WHOLE DOLLARS.  
DES - AA S = SCHEDULED R = REQUESTED B = BOTH SCHEDULED AND REQUESTED BLANK = NOT APPLICABLE  
OB S = SEVERITY F = FREQUENCY B = BOTH SEVERITY AND FREQUENCY BLANK = NOT APPLICABLE

# WORKMEN'S COMPENSATION ACCIDENT/LOSS RECORD

ARMED SALEMOR INC

NAME OF INSURED



1-07 74326 007067114  
CO. DIV. PRODUCER POLICY NUMBER

INDUSTRIAL LIABILITY CO  
POLICY PERIOD

PRODUCER

EDWARD KAGHAL INSURANCE  
P.O. BOX 1940  
EL CERRILLO CA 92243

23 0017 1/ 1/74 1/ 1/75  
GOV. CLASS EFFECTIVE EXPIRING  
26,457 45,344 9.1 5 12/31/74  
E.A.P. PREMIUM TO DATE LOSS RATIO AA QB DATE

ACCIDENT/LOSS DATE	CLAIM NUMBER	CLASS CODE	CLAIMANT	CAUSE	NATURE	RESERVE OR CLOSING COST
5/21/74	74 07 24418	0017	REYANA J	USE EQUIP	SPRAIN ANKLE	119
6/ 9/74	74 07 25547	0017	CHARLES L	FEL ON TRUCK	INJ ELBOW	422
11/22/74	74 07 26839	0017	SANCHEZ R	LOAD/UN	SPRAIN BACK/L	3,600
6/10/74	74 07 26217	0017	GRIFFIN L	DOOR	INFECT FOOT	+
6/14/74	74 07 26218	0017	BARRIGA L	BURN EQUIP	BURN FACE	56
6/18/74	74 07 26219	0017	ALONZO J	LIFT CNTRK	INJ BACK/L	78
7/12/74	74 07 26327	0017	DOUGLAS R	HITBY EQUIP	F B FACE	13
5/11/74	74 78 20279	0017	CHAVEZ J	CUT BY SHARPOULAC	FINGER	49
5/11/74	74 78 20823	0017	RODRIGUEZ C	HITBY PRODUCTION	THUMB	29
1/19/74	74 78 23489	0017	SOSA A	CUT BY SHARPOULAC	FINGER	97
4/ 1/74	74 78 23830	0017	SILVA F D	LIFT EQUIP	SPRAIN BACK/L	82
6/14/74	74 78 49356	0017	FLORIS J S	LAUGHT MATERL	CONTUS HAND	29
6/10/74	74 78 49443	0017	GUTIEL	HITBY DOOR	INJ FOOT	53
6/13/74	74 78 52615	0017	MARTINEZ R	HITBY MATERL	INJ FOOT	36
5/ 5/74	74 78 53598	0017	PALMA L L	FEL ON TRUCK	INJ ELBOW	60
6/12/74	74 78 61933	0017	DIAS M	CONTACT TRACTOR	F B EYE	+
6/ 9/74	74 78 62639	0017	POYOT I	FEL ON TRACTOR	CONTUS KNEE	5
6/21/74	74 78 62649	0017	KAMUS J	FEL ON TRACTOR	INJ CHEST	+
1/1/74	74 78 66192	0017	BENITO B S			2
7/12/74	74 78 66471	0017	FABELA F	WELD MATERL	INJ LEG	+
N OF CLAIMS					20	4,731

PREMIUM TO DATE INCLUDES ANY EARNED PREMIUM BILLED PLUS THE AMOUNT ESTIMATED TO BE EARNED TO DATE OF THIS REPORT.  
 RESERVE OR CLOSING COST IS THE INCURRED VALUE AS OF THE DATE OF THIS REPORT. OPEN CLAIMS WITH RESERVES REPRESENTING ESTIMATED FINAL COST ARE DESIGNATED  
 (PENALTY) CLAIMS WITH NO AMOUNT SHOWN (+) ARE UNPAID MEDICAL - ONLY CLAIMS ESTIMATED TO AVERAGE \$35 EACH. THEY ARE INCLUDED IN CLAIM COUNT BUT NOT IN L  
 IO. DIFFERENCE BETWEEN MANUAL TOTAL OR LISTED CLAIMS COST AND PRINTED TOTAL IS DUE TO INDIVIDUAL COSTS BEING SHOWN IN WHOLE DOLLARS.  
 RES - AA S - SCHEDULED; R - REQUESTED; B - BOTH SCHEDULED AND REQUESTED; BLANK - NOT APPLICABLE  
 OB S - SEVERITY; F - FREQUENCY; B - BOTH SEVERITY AND FREQUENCY; BLANK - NOT APPLICABLE

**WAPES PRODUCE CO**

NAME OF INSURED

**WORKMEN'S COMPENSATION  
ACCIDENT/LOSS RECORD**

INDUSTRIAL  
INDEMNITY

INDUSTRIAL  
UNDERWRITERS

**1 07 74826 CP 716806**

CO. DIV PRODUCER POLICY NUMBER

POLICY PERIOD

**0017 10/ 1/65 10/ 1/66**

GOV. CLASS EFFECTIVE EXPIRING

**11,351 11,351 10.6 R 4/30/67**

E A P PREMIUM TO DATE LOSS RATIO AA CB DATE

CIDENT/LOSS DATE	CLAIM NUMBER	CLASS CODE	CLAIMANT	CAUSE	NATURE	RESERVE OR CLOSING COST
1/19/65	65 01 82730	0017	ORDONO B	NAIL	PUNCT FOOT	23
1/17/65	65 01 82731	0017	ORDONO B	BANGED TOOLS	LACR THUMB	41
2/10/65	65 01 83038	0017	ORDONO B	LIFTING	SPRN BACK	17
9/27/66	66 01 1	8209	SOLANO T	STACK BOXES	INJ ELBOW	62
2/ 4/66	66 01 10531	8209	EASTER E	SLIPPED	INJ CHEST	685
5/ 2/66	66 01 11085	0017	HURTADO A I	KNIFE	LACR FGR	127
9/15/66	66 01 11880	0017	MARISCAL C	DIG DITCH	STR BACK	166
6/22/66	66 01 87801	8209	HAURTE F	HOOK CGHT	LACR FGR	46
7/ 6/66	66 01 88169	8209	PIERCE J L	SLIP/BELT	CONT ANKLE	18
9/27/66	67 02 1	0017	SOLANO T	FELL	SPR ELBOW	26
				# OF CLAIMS	10	1,211

Mailed to Assured  
Loss Payee

Date 7-31-67

PREMIUM TO DATE INCLUDES ANY EARNED PREMIUM BILLED PLUS THE AMOUNT ESTIMATED TO BE EARNED TO DATE OF THIS REPORT.  
RESERVE OR CLOSING COST IS THE INCURRED VALUE AS OF THE DATE OF THIS REPORT. OPEN CLAIMS WITH RESERVES REPRESENTING ESTIMATED FINAL COST ARE  
SIGNATED "R". COMPENSATION CLAIMS WITH NO AMOUNT SHOWN (±) ARE UNPAID MEDICAL. ONLY CLAIMS ESTIMATED TO AVERAGE \$30 EACH. THEY ARE IN-  
CLUDED IN CLAIM COUNT BUT NOT IN LOSS RATIO. DIFFERENCE BETWEEN MANUAL TOTAL OR LISTED CLAIMS COST AND PRINTED TOTAL IS DUE TO INDIVIDUAL COSTS  
ING SHOWN IN WHOLE DOLLARS.

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AUG 25 1967

WORKMEN'S COMPENSATION  
ACCIDENT/LOSS RECORD

MAPES PRODUCE CO

NAME OF INSURER

INDUSTRIAL  
INDEMNITYINDUSTRIAL  
UNDERWRITERS1 07 74826 CP 719234  
CO DIV PRODUCER POLICY NUMBER

PRODUCER

EDWARD KANDAL INSURANCE  
P O BOX 531  
EL CENTRO CALIF

POLICY PERIOD

0017 10/ 1/66 10/ 1/67  
GOV CLASS EFFECTIVE EXPIRING

11,351

9,944

21.5 S

7/31/67

E A P.

PREMIUM TO DATE

LOSS RATIO

AA OB

DATE

ACCIDENT/LOSS DATE	CLAIM NUMBER	CLASS CODE	CLAIMANT	CAUSE	NATURE	RESERVE OR CLOSING COST
10/ 1/66	66 01	1 8029	STANLEY A	JUNPING	HURT SPINE	48
12/ 1/66	66 07	1 8209	ORDUNO B	ROLLER	CONTUS HAND	120
12/ 7/66	66 07	2 8209	ORDUNO B	JUMPED	ANKLE	150
5/22/67	67 01	2 0017	HIGIERA J	FB	CONJUNG EYE	2
6/28/67	67 01	3 0017	RUIZ J	HOOK	CRUSHD FINGR	230 R
12/19/66	67 07	3 8209	ASUNCION S	CUTTING	CUT FINGER	49
3/ 7/67	67 07	4 8209	ARUIZO J N	LIFTING	BACK STR	340 R
3/31/67	67 23	1 0017	THRELKELD M W	SLIPPED	LEFT ING HERNI	1,200 R
				# OF CLAIMS	8	2,138

DAILY

Said  
10-5-67

10-5-67

Date

X  
9/1/67

PREMIUM TO DATE INCLUDES ANY EARNED PREMIUM BILLED PLUS THE AMOUNT ESTIMATED TO BE EARNED TO DATE OF THIS REPORT.

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# WORKMEN'S COMPENSATION ACCIDENT/LOSS RECORD

**HAPES PRODUCE CO**

NAME OF INSURED

INDUSTRIAL  
INDEMNITY

INDUSTRIAL  
UNDERWRITERS

1 07 74826 CB6278602  
CO DIV PRODUCER POLICY NUMBER

PRODUCER

EDWARD KANDAL  
P O BOX 531  
EL CENTRO CALIF 92243

DEC 4 1968

13,588

E A P.

0017

GOV CLASS

5,190

PREMIUM TO DATE

10/ 1/67 10/ 1/68

EFFECTIVE

74.1 S S

LOSS RATIO AA OB

DATE

POLICY PERIOD

IDENT/LOSS DATE	CLAIM NUMBER	CLASS CODE	CLAIMANT	CAUSE	NATURE	RESERVE OR CLOSING COST
2/14/67	67 07	1 0017	DUARTE R A	KNIFE	CUT FINGERS	26
3/24/68	68 01	3 0017	HAPES D	CRANK/SLIPPED	FRACT WRIST	1,830 R
3/28/68	68 01	4 0017	SALAS R	TRACTOR WHEEL	MULTI ABRAS	1,780 R
9/24/68	68 01	5 0017	OLMEDO L	BOX HIT	CONT FACE	*
1/18/68	68 07	2 0017	WILLIAMS U L	TRANS TO	68-07-003	*
1/18/68	68 07	3 0017	WILLIAMS U L	HIT	BACK STR	57
2/14/68	68 07	4 0017	LOPEZ E	LIFTING	BACK SPR	115
1/ 7/68	68 07	5 0017	JULATON I	FALL	R ANKLE/FOOT	41
				# OF CLAIMS	8	3,849

Mailed to (Assured)  
(Loss Payee)

Date .....

12-11-68

PREMIUM TO DATE INCLUDES ANY EARNED PREMIUM BILLED PLUS THE AMOUNT ESTIMATED TO BE EARNED TO DATE OF THIS REPORT.  
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16,223.50

# WORKMEN'S COMPENSATION ACCIDENT/LOSS RECORD

**HAPES PRODUCE CO**

NAME OF INSURED

DEC 1 1969

INDUSTRIAL  
INDEMNITY

INDUSTRIAL  
UNDERWRITERS

1 07 74826 CB6400421  
CO DIV PRODUCER POLICY NUMBER

PRODUCER

EDWARD KANDAL  
P. O. BOX 531  
EL CENTRO CALIF 92243

POLICY PERIOD

0017 10/ 1/68 10/ 1/69  
GOV CLASS EFFECTIVE EXPIRING

20,880 12,101 3.5 S 10/31/69

E A P. PREMIUM TO DATE LOSS RATIO AA OB DATE

ACCIDENT/LOSS DATE	CLAIM NUMBER	CLASS CODE	CLAIMANT	CAUSE	NATURE	RESERVE OR CLOSING COST
10/ 7/68	68 01	1 0017	ROJAS M H	MACHINE	INJ BACK	28
1/14/69	69 01	2 8209	HAPES D	TOOL SLIPPED	PUNCT HAND	22
6/27/69	69 01	3 8209	STANLEY A	JUMPING	SPR SHOULDERS	74
6/17/69	69 01	4 0017	KING J	BURNING WEEDS	BURNT LET ARM	31
7/ 8/69	69 01	5 0016	VALDEZ M A C	FELL/O LADDER	LAC FGR	69
7/ 3/69	69 01	6 0016	RIOS M	SLIP/OLADDER	SPR ANKLE	26
7/ 5/69	69 01	7 0016	OLIVAREZ S	THISTED/O ROCK	SPR ANKLE	4
12/28/68	69 07	1 0017	COUNCE K	SLIP/FALL	BACK STR	186
				# OF CLAIMS	8	435

Mailed to Assured  
(Loss Payee)

Date: 12-1-69

113,068.86

PREMIUM TO DATE INCLUDES ANY EARNED PREMIUM BILLED PLUS THE AMOUNT ESTIMATED TO BE EARNED TO DATE OF THIS REPORT.  
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OB S = SEVERITY F = FREQUENCY E = BOTH SEVERITY AND FREQUENCY BLANK = NOT APPLICABLE

# ACCIDENT/LOSS RECORD

MAPES PRODUCE CO

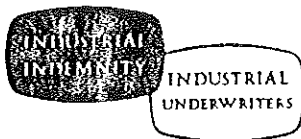
NAME OF INSURED

PRODUCER

EDWARD KANDAL

P O BOX 531

EL CENTRO CALIF 92243



1 37 74320 086615056  
CO DIV. PRODUCER POLICY NUMBER

INDUSTRIAL INDEMNITY CO  
POLICY PERIOD

03 00 0017 10/ 1/69 15/ 1/70  
GOV CLASS EFFECTIVE EXPIRING

16,465 16,465 167.9 US 1/31/72

E A P PREMIUM TO DATE LOSS RATIO AA GB DATE

ACCIDENT/LOSS DATE	CLAIM NUMBER	CLASS CODE	CLAIMANT	CAUSE	NATURE	RESERVE OR CLOSING COST
10/25/69	69 01	2 0017	JIMENEZ Y C	SLIP/FELL	CONT HAND	107
10/ 7/69	69 01	3 0017	LIARDE F S	CUT LETTUCE	INFECT WRIST	1,208
11/ 3/69	69 01	4 0017	CABEBE P	BOX OF LETTUCE	CONTUS/SHOULDER	4
11/ 3/69	69 01	5 0017	ARQUERO S	CUT LETTUCE	FRGN BODY EYE	61
2/10/70	70 01 10397	0017	VILLARREAL F	PICK-UP TRUCK	CONTUS RIB	8,791
6/19/70	70 01 12252	0017	RUIZ J	INSECT BITE	INFECT LEG	76
8/30/70	70 01 13683	0017	JEFFERS C	STUMBLE	HERNIA	12
4/ 2/70	70 01 21062	0017	GALVAN R	FELL/O LADDER	HERNIA	1,197
5/ 9/70	70 01 53596	0017	HASSLI A	LIFTING	SPRAIN BACK	18
6/22/70	70 01 54530	0017	RAMIREZ J	LOAD BOXES	INJ SIDE	42
6/29/70	70 01 54794	0017	ORDUNA B	FELL	CONTUS SHLDR	126
7/ 1/70	70 01 55184	0017	HASSLI A	WEED OIL	F/B EYE	16
8/26/70	70 01 56301	0017	CORTEZ J	DIRT	CONJUNCT EYE	70
1/27/70	70 07 10568	0017	SMITH R T	LOADING	INJ FNGR	43
1/15/70	70 07 12219	0017	MENDOZA R	UNKNOWN	DEATH	5,000
1/ 6/70	70 07 40262	0017	WILLIAMS U L	LOST BALANCE	BACK	42
1/20/70	70 07 40735	0017	TAPIA M	STAPLE GUN	FINGER	17
1/14/70	70 23 10633	0017	SMITH T	PALLETS	LT INX FNGR	312
12/ 7/69	70 23 10824	0017	CABUNOC S	LIFTING	BACK	10,140
3/24/70	70 23 11590	0017	JIMENEZ Y C	CRATE	BACK	121
1/18/70	70 41 20292	0017	BYARS C	LIFTING	FRAC RIBS	73
1/24/70	70 41 43494	0017	ABELLIA C	LIFTING	STRAIN BACK	72
6/ 9/70	70 41 44178	0017	DE MAYO V	HARVESTING	RASH	99
# OF CLAIMS					23	27,647

16,465.47

PREMIUM TO DATE INCLUDES ANY EARNED PREMIUM BILLED PLUS THE AMOUNT ESTIMATED TO BE EARNED TO DATE OF THIS REPORT  
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CODES - AA S = SCHEDULED R = REQUESTED B = BOTH SCHEDULED AND REQUESTED BLANK = NOT APPLICABLE  
GB S = SEVERITY F = FREQUENCY B = BOTH SEVERITY AND FREQUENCY BLANK = NOT APPLICABLE

# MAPES PACKING CORPORATION

NAME OF INSURED

PRODUCER

EDWARD KANDAL

P O BOX 531

EL CENTRO CALIF 92243



INDUSTRIAL UNDERWRITERS

1 07 74826 CB6665495  
CO. DIV. PRODUCER POLICY NUMBER

INDUSTRIAL INDEMNITY CO  
POLICY PERIOD

03 00 0017 4/ 1/70 10/ 1/70  
GOV CLASS EFFECTIVE EXPIRING

22,500 22,500 20.4 US 1/31/71  
E A P. PREMIUM TO DATE LOSS RATIO AA OB DATE

ACCIDENT/LOSS DATE	CLAIM NUMBER	CLASS CODE	CLAIMANT	CAUSE	NATURE	RESERVE OR CLOSING COST
8/19/70	70 41 11763	0017	AMADOR J A	LIFTING	STRN BACK	4,590 R
				# OF CLAIMS	1	4,590

7,485.21

DATE INCLUDES ANY EARNED PREMIUM BILLED PLUS THE AMOUNT ESTIMATED TO BE EARNED TO DATE OF THIS REPORT  
 FOR CLOSING COST IS THE INCURRED VALUE AS OF THE DATE OF THIS REPORT OPEN CLAIMS WITH RESERVES REPRESENTING ESTIMATED FINAL COST ARE  
 TED "R". COMPENSATION CLAIMS WITH NO AMOUNT SHOWN (±) ARE UNPAID MEDICAL - ONLY CLAIMS ESTIMATED TO AVERAGE \$30 EACH. THEY ARE IN.  
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 OB S = SEVERITY, F = FREQUENCY, B = BOTH SEVERITY AND FREQUENCY, BLANK = NOT APPLICABLE

70075-RS (8-69)

# WORKMEN'S COMPENSATION ACCIDENT/LOSS RECORD

MAPES PACKING CORPORATION

NAME OF INSURED

PRODUCER

EDWARD KANDAL

P O BOX 531

EL CENTRO CALIF 92243



INDUSTRIAL  
UNDERWRITERS

1 07 14826 CB6682552  
CO DIV PRODUCER POLICY NUMBER

INDUSTRIAL INDEMNITY CO  
POLICY PERIOD

03 00 0017 10/ 1/70 10/ 1/71  
GIV CLASS EFFECTIVE EXPIRING

22,500 16,598 3.6 US 1/31/72  
E A P PREMIUM TO DATE LOSS RATIO AA OB DATE

ACCIDENT/LOSS DATE	CLAIM NUMBER	CLASS CODE	CLAIMANT	CAUSE	NATURE	RESERVE OR CLOSING COST
10/ 5/70	70 01 14221	0017	PADILLA A	LIFTING	SPR BACK	260
12/10/70	70 23 14763	0017	JIMENEZ I	TRIPPED	LT FOOT	217
10/13/70	70 41 46777	0017	CABREROS V	UNKNOWN	DERMATITIS	10
10/13/70	71 01 64474	0017	CABREROS V	CONTAC FORSUB	DERMAT HAND	*
9/27/71	71 01 64908	0017	DE MAYO V	CONTAC FORSUB	DERMAT	56
2/ 1/71	71 07 47233	0017	GARCIA F	HITBY MACH	CONTUS SHLDS	71
				# OF CLAIMS	6	612

\$ 16,598.32

PREMIUM TO DATE INCLUDES ANY EARNED PREMIUM BILLED PLUS THE AMOUNT ESTIMATED TO BE EARNED TO DATE OF THIS REPORT.  
RESERVE OR CLOSING COST IS THE INCURRED VALUE AS OF THE DATE OF THIS REPORT. OPEN CLAIMS WITH RESERVES REPRESENTING ESTIMATED FINAL COST ARE DESIGNATED "R". COMPENSATION CLAIMS WITH NO AMOUNT SHOWN (+) ARE UNPAID MEDICAL. ONLY CLAIMS ESTIMATED TO AVERAGE \$40 EACH. THEY ARE INCLUDED IN CLAIM COUNT BUT NOT IN LOSS RATIO. DIFFERENCE BETWEEN MANUAL TOTAL OR LISTED CLAIMS COST AND PRINTED TOTAL IS DUE TO INDIVIDUAL COST BEING SHOWN IN WHOLE DOLLARS

CODES - AA S = SCHEDULED. R = REQUESTED. B = BOTH SCHEDULED AND REQUESTED. BLANK = NOT APPLICABLE  
OB S = SEVERITY. F = FREQUENCY. B = BOTH SEVERITY AND FREQUENCY. BLANK = NOT APPLICABLE

# ACCIDENT/LOSS RECORD

**HAFES PRODUCE CO**

NAME OF INSURED

PRODUCER

**EDWARD KANDAL**

**P O BOX 531**

**EL CENTRO CALIF 92243**



INDUSTRIAL  
UNDERWRITERS

1 07 14326 025672491  
CO DIV. PRODUCER POLICY NUMBER

INDUSTRIAL INDEMNITY CO  
POLICY PERIOD

03 00

0017

10/ 1/70

10/ 1/71

CCY CLASS

EFFECTIVE

EXPIRING

16,465

6,801

100.4 US

1/31/72

E A P

PREMIUM TO DATE

LOSS RATIO

AA OB

DATE

ACCIDENT/LOSS DATE	CLAIM NUMBER	CLASS CODE	CLAIMANT	CAUSE	NATURE	RESERVE OR CLOSING COST
10/ 8/70	70 01 14303	0017	URIAN L	BENDING	STR BACK	504
10/ 7/70	70 01 58083	0017	AZARES P	LETTUCE	DERMATITIS	15
4/ 5/71	71 01 16771	0017	HOSSIT A	LIFT MATERL	STRAIN ABDOMEN	1,361
9/23/71	71 01 19311	0017	DEL REAL R	CAUGHT MACH	FRACT FINGER	4,740
7/ 9/71	71 01 63026	0017	RUIZ A		ALLERGY	21
7/19/71	71 01 63319	0017	RUIZ A	BIT BY ANIMAL	INJ LEG	15
1/15/71	71 54 11666	0006	GONZALES J L	LIFT EQUIP	CRUSH FINGER	149
7/ 3/71	71 54 46292	0006	GONZALES J	HITBY CHEM	DERMAT ARM	25
				ALL OF CLAIMS	8	6,831

6,800.78

PREMIUM TO DATE INCLUDES ANY EARNED PREMIUM BILLED PLUS THE AMOUNT ESTIMATED TO BE EARNED TO DATE OF THIS REPORT.

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OB S = SEVERITY; F = FREQUENCY; B = BOTH SEVERITY AND FREQUENCY; BLANK = NOT APPLICABLE

# NAPES PACKING CORPORAT. N

NAME OF INSURED

PRODUCER

EDWARD KANDAL  
P O BOX 531  
EL CENTRO CALIF 92243

## ACCIDENT/LOSS RECORD



INDUSTRIAL  
UNDERWRITERS

23

16,598

E A P.

1 07 74826 CB6835675  
CO. DIV. PRODUCER POLICY NUMBER

INDUSTRIAL INDEMNITY CO  
POLICY PERIOD

0017 10/ 1/71 10/ 1/72  
GOV CLASS EFFECTIVE EXPIRING

22,311 1.1 S 10/31/72

PREMIUM TO DATE LOSS RATIO AA OB

DATE

ACCIDENT/LOSS DATE	CLAIM NUMBER	CLASS CODE	CLAIMANT	CAUSE	NATURE	RESERVE OR CLOSING COST
10/ 9/71	71 01 65029	0017	DUARTE J	FEL ON FLOOR	STRAIN GROIN	31
10/ 4/71	71 01 65090	0017	CORTEZ P	HITBY CNTNR	INJ BACK/L	51
11/ 1/71	71 01 66201	0017	VEGA A	CARRY CNTNR	STRAIN SHLDS	40
11/24/71	71 23 19059	0017	HOWERY W T	LOAD/U TRUCK	HERNIA GROIN	12
11/29/71	72 07 55399	0017	TABALAN C		ALERGY	3
2/ 9/72	72 78 12449	0006	PREAL M	CONTAC PLANT	DERMAT FACE	38
12/30/71	72 78 18043	0006	RUIZ A	LIFT PRODUCT	SPRAIN BACK/L	93
				# OF CLAIMS	7	268
NOV 15 1972						
20,216.20						

PREMIUM TO DATE INCLUDES ANY EARNED PREMIUM BILLED PLUS THE AMOUNT ESTIMATED TO BE EARNED TO DATE OF THIS REPORT  
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# MAPES PRODUCE CO.

NAME OF INSURED

PRODUCER

EDWARD KANDAL  
W O BOX 531  
EL CENTRO CALIF 92243

## ACCIDENT/LOSS RECORD



INDUSTRIAL  
UNDERWRITERS

1 07 74826 CB6839757  
CO DIV PRODUCER POLICY NUMBER

INDUSTRIAL INDEMNITY CO  
POLICY PERIOD

23

0017 10/ 1/71 10/ 1/72  
GOV CLASS EFFECTIVE EXPIRING

6,800

6,120 162.5 S 10/31/72

E A P

PREMIUM TO DATE

LOSS RATIO

AA OB

DATE

ACCIDENT/LOSS DATE	CLAIM NUMBER	CLASS CODE	CLAIMANT	CAUSE	NATURE	RESERVE OR CLOSING COST
10/ 2/71	71 01 65216	0017	JEFFERS J C	BUMPED MACH	INJ ELBOW	36
8/14/72	72 01 25590	0008	ARREG T B	RTBEND UNK	STRAIN BACK/L	1,630 R
3/25/72	72 54 12695	0008	FLORES M	LIFT EQUIP	STRAIN BACK/L	8,250 R
6/24/72	72 78 32942	0017	JEFFERS J C	FEL FR TRACTOR	CONTUS LEG	28
				# OF CLAIMS	4	9,944
NOV 15 1972						
11,214.54						

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OB S = SEVERITY, F = FREQUENCY B = BOTH SEVERITY AND FREQUENCY BLANK = NOT APPLICABLE

# WORKMEN'S COMPENSATION ACCIDENT/LOSS RECORD

MAPES PRODUCE CO

NAME OF INSURED

PRODUCER

JWARD KANDAL  
P O BOX 531  
EL CENTRO CALIF 92243



23

NOV 17 1973

9,013

E.A.P.

1 07 74826 CB6047325  
CO DIV. PRODUCER POLICY NUMBER

INDUSTRIAL INDEMNITY CO  
POLICY PERIOD

0017 10/ 1/72 10/ 1/73  
GOV CLASS EFFECTIVE EXPIRING

9,159 55.9 5 10/31/73

PREMIUM TO DATE

LOSS RATIO

AA OB

DATE

ACCIDENT/LOSS DATE	CLAIM NUMBER	CLASS CODE	CLAIMANT	CAUSE	NATURE	RESERVE OR CLOSING COST
3/20/72	72 78 58180	0017	BEAVERS S		INJ KNEE	63
6/12/73	73 01 29589	0017	ORDUNA B		INJ BACK/L	47
7/ 8/73	73 07 22774	0017	HILL A	OVTRN TRUCK	FRACT BACK/L	2,800 R
7/ 8/73	73 07 22906	0017	ORDUNA F	HITBY MACH	INJ BACK/L	485 R
7/20/73	73 54 15114	0017	MADRIGAL A P	CAUGHT ELEC	EQLAC FINGER	300 R
7/ 8/73	73 54 35461	0008	ORDUNA F		BACK/L	+
7/ 8/73	73 54 35878	0008	HILL A		BACK/L	+
1/23/73	73 57 10379	0017	MENDEZ J R	BEND H TOOL	INJ BACK/L	208
7/20/73	73 57 10842	0008	MADRIGAL P	CUT BY CONVEY	LAC THUMB	1,220 R
# OF CLAIMS					9	5,122

\$13,422.88

PREMIUM TO DATE INCLUDES ANY EARNED PREMIUM BILLED PLUS THE AMOUNT ESTIMATED TO BE EARNED TO DATE OF THIS REPORT.  
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CODES - AA S = SCHEDULED. R = REQUESTED. B = BOTH SCHEDULED AND REQUESTED BLANK = NOT APPLICABLE  
OB S = SEVERITY. F = FREQUENCY. B = BOTH SEVERITY AND FREQUENCY BLANK = NOT APPLICABLE

# WORKMEN'S COMPENSATION ACCIDENT/LOSS RECORD

MAPES PACKING CORPORATION

NAME OF INSURED



1 07 74826 CB5047324  
CO. DIV. PRODUCER POLICY NUMBER

INDUSTRIAL INDEMNITY CO  
POLICY PERIOD

PRODUCER

SHARD KANDAL  
P O BOX 531  
EL CENTRO CALIF 92243

NOV 17 1973

23

0017 10/ 1/72 10/ 1/73  
GOV CLASS EFFECTIVE EXPIRING

33,680

34,277 12.3 S 10/31/73  
PREMIUM TO DATE LOSS RATIO AA OB DATE

E.A.P.

PREMIUM TO DATE

LOSS RATIO

AA OB

DATE

ACCIDENT/LOSS DATE	CLAIM NUMBER	CLASS CODE	CLAIMANT	CAUSE	NATURE	RESERVE OR CLOSING COST
6/72	72 78 58687	0017	ORDAS C	BEND UNK	STRAIN BACK/L	115
7/20/72	72 79 64603	0017	SAGUN E M	CUT BY SHARPOBLAC	FINGER	31
7/29/72	73 07 21596	0006	JIMENEZ Y	BIT BY INSECTS	INFECT FINGER	3,250 R
				73-07-5657		
7/25/73	73 07 21719	0017	LABRADOR P L	CUT BY SHARPOBLAC	FINGER	99
7/30/72	73 54 13978	0006	JIMENEZ Y	BIT BY INSECTS	UNK HAND	+
7/19/73	73 62 5127	0017	VARGAS N	SLIP UNK	STRAIN KNEE	500 R
7/18/72	73 78 3646	0017	CABRERA A	CONTAC FORSUB	DERMAT MULT	20
7/18/72	73 78 4176	0017	TABALAN C	CONTAC FORSUB	DERMAT MULT	20
7/17/73	73 78 7044	0017	MENDOZA R	CONTAC EQUIP	STRAIN BACK/UP	73
7/19/73	73 78 12802	0017	ILARDE F	SLIP EQUIP	INJ TOE	64
7/19/73	73 78 60215	0017	CARLTON F	CONTAC CNTNR	STRAIN BACK/L	65
7/28/73	73 78 71293	0017	PELTON B J	FEL FR TRUCK	FRACT RIBS	+
				# OF CLAIMS	12	4,236

27,577.32

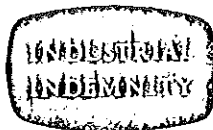
MIUM TO DATE INCLUDES ANY EARNED PREMIUM BILLED PLUS THE AMOUNT ESTIMATED TO BE EARNED TO DATE OF THIS REPORT.

ERVE OR CLOSING COST IS THE INCURRED VALUE AS OF THE DATE OF THIS REPORT. OPEN CLAIMS WITH RESERVES REPRESENTING ESTIMATED FINAL COST ARE  
GNATED "R". COMPENSATION CLAIMS WITH NO AMOUNT SHOWN (+) ARE UNPAID MEDICAL. ONLY CLAIMS ESTIMATED TO AVERAGE \$48 EACH THEY ARE IN-  
DED IN CLAIM COUNT BUT NOT IN LOSS RATIO. DIFFERENCE BETWEEN MANUAL TOTAL OR LISTED CLAIMS COST AND PRINTED TOTAL IS DUE TO INDIVIDUAL COSTS  
IG SHOWN IN WHOLE DOLLARS.

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OB S = SEVERITY F = FREQUENCY. B = BOTH SEVERITY AND FREQUENCY. BLANK = NOT APPLICABLE

# ACCIDENT/LOSS RECORD

**MAPES PRODUCE CO**  
NAME OF INSURED



**1 07 74826 CB7048868**  
CO DIV. PRODUCER POLICY NUMBER

**INDUSTRIAL INDEMNITY CO**  
POLICY PERIOD

PRODUCER

**THAKU KANDAL INSURANCE**  
**PO BOX 1948**  
**EL CENTRO CA 92243**

**23**

**0017**  
GOV. CLASS

**10/ 1/73**  
EFFECTIVE

**10/ 1/74**  
EXPIRING

**10,000**  
E.A.P.

**22,178**  
PREMIUM TO DATE

**199.6**  
LOSS RATIO

**US 1/31/75**  
AA OB DATE

IDENT/LOSS DATE	CLAIM NUMBER	CLASS CODE	CLAIMANT	CAUSE	NATURE	RESERVE OR CLOSING COST
1/ 8/73	73 54 15610	0008	OSEGUERO Y	PULL BLDGMAT	LAC FINGER	+
1/29/74	74 01 65273	0008	MORALES J A	DROP EQUIP	CONTUS FOOT	51
1/27/73	74 07 24020	0017	AGUINALDO L A	LAST-DETAIL-LI	TRANSFERRED TO	139
1/29/74	74 07 25007	0008	MENDEZ J M	DROP EQUIP	SPRAIN ANKLE	266
1/13/73	74 54 15970	0008	WILLIAMS O	LIFT FOOD	STRAIN BACK/L	+
1/28/74	74 54 16498	0008	MENDEZ J	HITBY MACH	STRAIN ANKLE	+
1/12/73	74 54 59700	0051	MENDOZA I H	HITBY CHEM	BURN EYE	45
1/13/74	74 54 62313	0051	RAMIREZ J M			+
1/20/73	74 57 11292	0017	VIERA J	RIVERSIDE	74-62-15483	34,090 R
1/14/74	74 57 11834	0017	RODRIGUEZ G L	CUT BY SHARPOBLAC	HAND	117
1/28/74	74 57 11851	0037	PEREDES B	JUMPED EQUIP	FRACT ANKLE	7,210 R
1/23/74	74 62 16999	0037	HERNANDEZ V	CUT BY CUTINST	LAC HAND	106
1/27/74	74 62 17168	0017	PADILLA A	LIFT CNTNR	STRAIN BACK/L	1,700 R
1/22/74	74 78 22458	0017	SALCIDO B	CONTAC PRODUCT	INJ EYE	78
1/ 3/73	74 78 26775	0017	CHAPPELL G			16
1/29/74	74 78 37678	0017	ORDUND B	FEL FR TRUCK	SPRAIN BACK/L	206
1/14/74	74 78 38200	0037	FERNANDEZ C S	CONTAC DUST	F B EYE	30
1/ 5/74	74 78 51272	0017	GILLUM K	CONTAC PRODUCT	UNK UNK	94
15/74	74 78 55461	0017	GARCIA V	CONTAC DEBRIS	PUNCT KNEE	51
1/ 5/74	74 78 69426	0017	RODRIGUEZ A	CONTAC DOOR	INJ FINGER	70
1/11/74	75 78 3949	0017	OSEGUERO Y	WELD UNK	INJ EYES	25
				# OF CLAIMS	21	44,288

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COMPENSATION CLAIMS WITH NO AMOUNT SHOWN (+) ARE UNPAID MEDICAL - ONLY CLAIMS ESTIMATED TO AVERAGE \$55 EACH. THEY ARE INCLUDED IN CLAIM COUNT BUT NOT IN  
DIFFERENCE BETWEEN MANUAL TOTAL OR LISTED CLAIMS COST AND PRINTED TOTAL IS DUE TO INDIVIDUAL COSTS BEING SHOWN IN WHOLE DOLLARS.

DES - AA S - SCHEDULED: R - REQUESTED: B - BOTH SCHEDULED AND REQUESTED: BLANK - NOT APPLICABLE  
OB S - SEVERITY: F - FREQUENCY: B - BOTH SEVERITY AND FREQUENCY: BLANK - NOT APPLICABLE

Exhibit "3"

A. MARKARIAN, M. D.

ORTHOPAEDIC SURGERY

A. MARKARIAN, M. D.  
A MEDICAL CORPORATION  
237 NORTH 8TH STREET  
EL CENTRO, CALIFORNIA 92243  
—  
TELEPHONE 352-3201

March 20, 1975

Mr. Alan A. Wharff  
District Manager  
1309 State Street  
San Diego, California 92101

Dear Mr. Wharff:

I am writing to you in regard to the Public Hearing on the use and effects of the short handled hoe.

I am an Orthopaedic Surgeon and have been practicing here in El Centro in the Imperial Valley for more than eight years now. I handle a large number of work injuries or "compensation cases" and many of them are back injuries that range across the entire spectrum of mild injuries to severe injuries. Most of these back problems that we see are associated with some type of accident, sustained usually in the field. Most such back injuries that we do see are associated with lifting injuries and with falls. Another fair sized group of injuries has to do with twisting injuries, due often to slipping or misstepping for various reasons. It is quite unusual for me to see a patient with back complaints associated with work using a short handled hoe. In the few cases of these that I do see, most of them are associated with an injury such as misstepping, twisting or stepping on something. It is very unusual to see a patient for back complaints that have simply started in the course of his normal work using the short handled hoe. To sum up, it is my opinion that the use of the short handled hoe cannot be connected with the production of back injuries or back problems. It would be my estimation that if a statistical survey were taken among field workers using the short handled hoe that the spontaneous onset of low back pain, not associated with specific injury to the low back, would be no higher than that of a normal population and possibly even lower.

Concerning degenerative changes in the lumbar spine, this occurs with such frequency in the normal or asymptomatic population that it must be considered, at least to some degree, a normal aging process. These changes are seen in a small percentage of people in the third decade and by age 65 or 70, is seen in almost 100% of the population.

For the record, I have been a Board Certified Orthopaedic Surgeon since 1966.

A. MARKARIAN, M. D.  
A MEDICAL CORPORATION  
237 NORTH 8TH STREET  
EL CENTRO, CALIFORNIA 92243  
—  
TELEPHONE 352-3201

Mr. Alan A. Wharff  
March 20, 1975  
Page Two

If you have other specific questions, I will be happy to try to answer them. I hope this information is helpful to you.

Very truly yours,

A handwritten signature in cursive script, appearing to read 'A. Markarian'.

A. Markarian, M.D.

AM/mmg

Exh let 4"

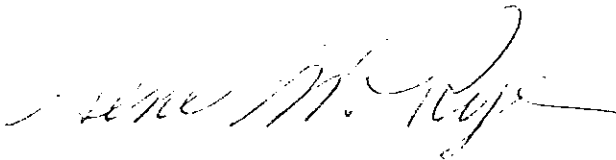
Industrial Safety Department  
March , 1975  
San Diego, California

MY NAME IS GENE RYE. I AM SECRETARY-MANAGER FOR IMPERIAL COUNTY FARM BUREAU.

TO BAN THE SHORT HANDLED HOE WOULD NOT BE IN THE BEST INTERESTS OF FARM WORKERS NOR OF AGRICULTURE. IN MANY INSTANCES, BOTH SHORT AND LONG HANDLED HOES HAVE BEEN MADE AVAILABLE AND THE CHOICE OF THE WORKERS HAS BEEN TO USE THE SHORT HANDLED INSTRUMENT.

SINCE NO CLAIMS OF BACK INJURIES ARE BEING MADE BECAUSE OF BENDING OVER DURING HARVEST OPERATIONS IN LETTUCE, CANTALOUPE, WATERMELONS, ASPARAGUS AND OTHER CROPS, AND SINCE THE INDUSTRIAL SAFETY DEPARTMENT IS NOT CONSIDERING A BAN ON ALL BENDING, IT SEEMS UNWISE TO SINGLE OUT THE SHORT HOE AND CALL IT DANGEROUS AND BAN ITS USE IN AGRICULTURE.

THANK YOU.



Gene W. Rye  
Secretary-Manager  
Imperial County Farm Bureau  
P. O. Box 645  
El Centro, California 92243

Exhibit 54

IMPERIAL FARMS, INC.

754 DESERT GARDENS DRIVE  
EL CENTRO, CALIFORNIA 92243

FRED M. JENKINS  
PRESIDENT

March 24, 1975

STATEMENT BY FRED M. JENKINS AT HEARING TO BAN THE SHORT-HANDLED HOE

My name is Fred M. Jenkins. I have been a farmer in the Imperial Valley since 1950 growing vegetables, cotton, sugar beets, grain, and hay. At present, besides my farming activities, I am representing the more than 1200 farm families and agri-business firms operating in the valley as president of the Imperial County Farm Bureau. The results from the findings of this hearing today will have a far reaching effect on the agricultural cropping programs in my area. The growers I represent vigorously protest any action that would ban the use of the short handled hoe in the valley and in fact all of California. For more than 20 years I have personally worked crews in fields where the short handled hoe has been used to thin and weed crops. Certainly, there has been evidence of strained muscles from non use, the same as when workers start up on other farm jobs such as cutting of asparagus and lettuce, picking of nuts and fruit, and the packing of the many vegetables that so bountifully grace the tables of the American housewife today. But never have I seen a worker, male or female, hurt or otherwise immobilized or in any way inhibited from working in my fields or those of my neighbors due to any injury from using the short handled hoe.

However, I would not advocate that every man or woman was suited physically for short handled hoe work the same way that I would be.

# IMPERIAL FARMS, INC.

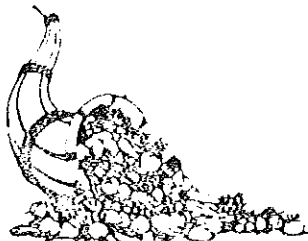
754 DESERT GARDENS DRIVE  
EL CENTRO, CALIFORNIA 92243

FRED M. JENKINS  
PRESIDENT

-2-

hesitant to hire every job applicant to buck 145 pound hay bales out of my alfalfa field or load 100 pound sacks of grain from harvester to field truck. Still, the work is important at all levels of activity; mechanization, while developing fast on field and farm, is not complete at this time to replace all hard labor, and my farm bureau grower members ask that the short handled hoe be allowed to remain as a tool to be used productively in our fields to remain as an integral part in our cultural operations to continue to bring food and fiber forth to the citizens of this state and nation in the ample supply and for the reasonable price that has prevailed for so long compared to all other products of industry. The agricultural worker compensation insurance rates of California dramatically bear out my belief that injuries of any kind resulting from the use of the short handled hoe is exceptionally minimal when compared to any other farm worker activity as exemplified by their rates: Feed Yard- and Stock Farms - all operations devoted to raising beef cattle, sheep, and horses - \$11.67 per \$100.00 of payroll; Field Crops - hay, alfalfa, grains - \$10.40; Dairy Farms - \$6.73; Orchards - all tree crops - \$5.47; Potato Crops, peanuts, sugar beets - \$3.26; Truck Farms - vegetables, melons, etc. - \$3.26. Only Nurserymen and Florists are lower at \$3.00 and \$2.32 respectively. These companies are paying the claims of worker injuries in California. These statistics are hard facts, concrete evidence of how the workman compensation insurance companies rate or evaluate their farm worker risks in this state. Thank you.

Exhibit "6"



## Imperial Valley Vegetable Growers Association

Post Office Box 358  
EL CENTRO, CALIFORNIA 92243

### 1975 BOARD OF DIRECTORS

ED MCGREW  
PRESIDENT

TOM BRADY  
VICE-PRESIDENT

DON BARIONI  
SECRETARY

BOB HAWK  
TREASURER

BEN ABATTI

DON ANDREWS

JACK FLEMING

DICK GRAESER

LOU HAUSMANN

JOHN D. JACKSON, JR.

MATT LABRUCHERIE

NIAZ MOHAMMED

NICK PRICOLA

JACK THORNBURG

JON VESSEY

R. Wilkins, Chief  
Division of Industrial Safety  
State of California

Dear R. Wilkins,

The following is the Imperial Valley Vegetable Growers Association's position on the "short handled" hoe issue. We have kept our comments brief and to the point. We hope that you will seriously consider our viewpoint before arriving at a decision.

If you have any questions, feel free to contact us at any time.

Sincerely,

*William F. Macklin*  
William F. Macklin  
Manager

The Imperial Valley Vegetable Growers Association firmly believes that the "short handle" hoe is a safe hand tool. We are in complete agreement with your original findings, i.e. that there isn't any inherent physical defect in the tool and that prohibition of the use of the hoe "would be arbitrary and unreasonable".

The tool itself is free from any defect in design or manufacture. The tool when properly used, as it has been in the Imperial Valley, is a safe and very useful instrument. A ruling that would ban all use of the hoe under all circumstances and conditions would be unreasonable, capricious and devastating to the agricultural industry in our area.

The misuse of any instrument, no matter how simple in design, may result in some injury. As the California Supreme Court so aptly stated in Carmona v. Division of Industrial Safety, "The determination of whether a tool is impermissibly 'unsafe', however, involves more than a simple decision as to whether it causes some injuries; the heavy head of a traditional hammer, for example, may inevitably cause many sore thumbs but that in itself does not demonstrate that the hammer is unsafe."

Testimony has been given by workers with alledged back injuries that clouds the issue at hand. The fact that some workers may suffer back injuries during their life span goes unquestioned. But to conclusively conclude that there is a causal relationship between a farm worker's back injury and the use of a short handle hoe is unsound reasoning.

A person performs many varied tasks when employed as a farm worker. A back injury may result from improper lifting, an accidental fall, a severe blow to the spine or any of many other numerous possibilities. As was stated in the testimony of Larry Bratton, an insurance claims adjuster, there hasn't been any claim filed that attributed back injury to the short handle hoe.

To single out the short handle hoe as the sole cause of an alledged back problem is mere speculation based on faulty reasoning.

It is important that the Division of Industrial Safety establish a clear and concise definition as to what constitutes a short handle hoe. Defining the short hoe as a hoe that requires any bending or stooping in its use is unsatisfactory. As you well know from personal experience, all hoes no matter what the length of the handle require some bending of the back.

We suggest that you adopt the definition used by the California Supreme Court in the above case. "The short handle hoe is approximately 12 inches long. . ."

It is also important to note that any contemplated ruling should not restrict the worker's freedom to voluntarily choose the use of the short handle hoe.

The contention that all work currently being done with the short handle hoe can be done as well with the longer hoe is completely false. Only those individuals totally unaware of our agricultural conditions could make such a statement.

The Imperial Valley is a unique agricultural area. Once a barren desert wasteland, it is now a bountiful farming region. This was all made possible by an ingenious irrigation system and extensive agricultural innovations.

Our growing methods require the use of the short handle hoe. The long handle hoe is unacceptable in meeting our particular needs. In our area, the short handle hoe is the "traditional" instrument used for thinning and weeding.

For you to ban the use of the disputed hoe is to undermine the basic foundation of our agricultural industry. We mention this so you will understand the magnitude of your decision.

To briefly summarize our position:

1. We feel that the short handle hoe is a safe and useful tool,
2. that it is being used in a safe and reasonable manner in the Imperial Valley and,
3. that in any decision arrived at by the Division of Industrial Safety, the hoe should be defined as being 12 inches in length,
4. that under no circumstances should the freedom of the employee to choose his tools be restricted, and
5. that the decision of the Division of Industrial Safety be written in clear and concise language setting forth constructive definitions.

William F. Macklin  
Manager  
Imperial Valley Vegetable  
Growers Association