

Attn: Mr. George Parisotto  
Hearing Request  
Acting Administrative Director  
Division of Workers' Compensation  
1515 Clay Street, Suite 1800  
Oakland, California 94612

cc: Hearing Request  
Legal Unit, Division of Worker's Compensation  
1515 Clay Street, Suite 1800  
Oakland, California 94612

October 4, 2017

## REQUEST FOR HEARING

Dear Mr. Parisotto,

I, David Ming Pon, M.D., have received the Notice of Provider Suspension - Workers' Compensation dated Sept. 29, 2017. I am responding within the 10 calendar days as required to request a hearing. I hereby request a hearing.

My current mailing address is: David Ming Pon, M.D.  
FCI - Camp, Unit F  
P.O. Box 699  
Estill, SC 29918

I do not believe Labor Code Section 139.21(a)(1) is applicable to me because of the following:

Through my legal counsel at Winston and Strawn, LLP, of the Washington DC offices, we filed timely notices of appeal of said conviction to the 11th Circuit Court of Appeals. This direct appeal is now

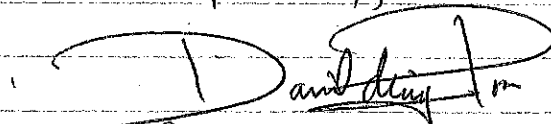
pending, but I fully expect to be exonerated, the judgement to be vacated, and the conviction to be reversed so that I will not have any conviction whatsoever. The licensing issues as well as suspension from the Federal Medicare or Medicaid will also be resolved as a result.

I am currently incarcerated and therefore unable to attend the hearing within 30 days unless the appeals' process finishes sooner than that time frame. Also, as a result of being incarcerated, I am unable to access any of the websites referred to in your letter of Sept. 29, 2017 regarding proof of service or suspension procedure since the BOP here at Estill, SC does not permit access to the web or computer use.

If I was physically able to attend the hearing, I would present the above information. I respectfully request that the Division of Workers' Compensation abate any further action until my appeals' process is fully exhausted.

I request that the Division of Workers' Compensation award such other and further relief as is just and equitable under the circumstances.

Respectfully,

  
DAVID MING PON, M.D.

### CERTIFICATE OF SERVICE BY MAIL:

I am over the age of 18 years. My current address is:

David Ming Pon, M.D.

FCI - Camp, Unit F

P.O. Box 699

Estill, SC 29918

I served the following documents:

- REQUEST FOR HEARING

on the following person(s)/entities at the following addresses:

Mr. George Parisotto  
Hearing Request  
Acting Administrative Director  
Division of Workers' Compensation  
1515 Clay Street, Suite 1800  
Oakland, California 94612

Hearing Request  
Legal Unit, Division of Workers' Compensation  
1515 Clay Street, Suite 1800  
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The documents were served by the following means:

- (X) (by U.S. Mail) I enclosed the documents in a seal envelope or package addressed to the person(s) and/or entities listed above and
- (X) Placed the envelope or package for collection and mailing directly into the hands of the BOP corrections officer responsible for legal mail pickup to be date stamped by the BOP and mailed according to normal business practice with the U.S. Postal Service with the postage prepaid fully.

I declare under penalty of perjury under the laws of State of California that the above is true and correct to the best of my knowledge.

Executed on 4th day of October, 2017

Respectfully,

  
David Ming Pan, M.D.