

Your information:

Name:

Address:

City, State, ZIP:

Telephone number:

Identify your role:

LABOR AND INDUSTRIAL RELATIONS APPEALS BOARD

STATE OF HAWAI'I

_____)		_____
Claimant,)	AB No.:	
)		
vs.)	DCD No.:	
)		
)	Accident	
)	Date:	
)		
_____)		
Employer,)		
)		
and)		
)		
)		
_____)		
Insurance Carrier.)		
_____)		

STIPULATION TO CONTINUE CONFERENCE

AND

APPROVAL AND ORDER

The parties hereby stipulate and agree that the following conference in this case be continued to the date and time noted below:

Type of conference to be continued:

Old Date/Time:

New Date/Time:

Agreed on behalf of Claimant:

Dated: _____

Signed: _____

Print name: _____

Agreed on behalf of Employer:

Dated: _____

Signed: _____

Print name: _____

(continued on next page)

APPROVED AND SO ORDERED by
LABOR AND INDUSTRIAL
RELATIONS APPEALS BOARD:

DANNY J. VASCONCELLOS, Chair

MELANIE S. MATSUI, Member

DAVID A. PENDLETON, Member