

DOR Paper Trail

Garrett Madden — California Department of Rehabilitation
Capitol Mall Branch Office, Sacramento — DOR Case No. 577053

October 2025 through October 2026 — sourced directly from
gmadden79@gmail.com and garrettmadden479@gmail.com

Fair Hearing SHN-105316215, scheduled Monday, October 12, 2026

Compiled October 9, 2026

1. Tue, 21 Oct 2025 — IPE Amended- Travel and Maintenance Support
2. Tue, 21 Oct 2025 — RE: ABC NorCal Apprenticeship Program Status Update
3. Tue, 21 Oct 2025 — Follow-Up: ABC NorCal Apprenticeship Transportation
4. Fri, 24 Oct 2025 — IPE Amendment and Transportation Support for ABC NorCal Appren
5. Fri, 24 Oct 2025 — RE: IPE Amendment and Transportation Support for ABC NorCal Ap
6. Mon, 20 Apr 2026 — RE: Urgent assistance - Transportation
7. Tue, 21 Apr 2026 — RE: Urgent assistance - Transportation
8. Thu, 23 Apr 2026 — Transportation Support for Training (April–June)
9. Wed, 29 Apr 2026 — Follow-Up Regarding Your Transportation Request
10. Thu, 30 Apr 2026 — Request to Schedule a Check-In Meeting Regarding Transportatio
11. Mon, 4 May 2026 — Follow-Up on Transportation Request and Information Needed
12. Tue, 5 May 2026 — RE: Follow-Up on Transportation Request and Next Steps
13. Tue, 26 May 2026 — Admin Review Decision
14. Wed, 24 Jun 2026 — Concerning your new authorization from the Department of Rehab
15. Thu, 2 Jul 2026 — Concerning your new authorization from the Department of Rehab
16. Thu, 16 Jul 2026 — Concerning your new authorization from the Department of Rehab
17. Thu, 23 Jul 2026 — Travel Reimbursement Request
18. Fri, 31 Jul 2026 — Concerning your new authorization from the Department of Rehab
19. Tue, 11 Aug 2026 — RE: Travel Reimbursement Request
20. Thu, 8 Oct 2026 — Fair Hearing Statement of Position & Exhibits

Source: gmadden79@gmail.com

Subject: IPE Amended- Travel and Maintenance Support
From: Somalal, Gladsona@DOR <Gladsona.Somalal@dor.ca.gov>
To: Garrett Madden <gmadden79@gmail.com>
Date: Tue, 21 Oct 2025 17:29:09 +0000

Hi Garret,

I've amended your Individualized Plan for Employment (IPE) to include travel and maintenance services to support your participation in the ABC NorCal Apprenticeship Program.

Please keep me updated and let me know as soon as an opportunity in Livermore becomes available. Also, be sure to send me **documentation from ABC NorCal confirming your placement or status-** this can be a letter or any official proof.

Once I receive that, I'll be able to move forward with authorizing your request **by referring you to a DOR-approved vendor** who can assist you with travel and transportation needs.

Let me know if you have any questions.

Best,

Gladsona Somalal

Senior Vocational Rehabilitation Counselor, QRP

Department of Rehabilitation

Northern Sierra District

721 Capitol Mall, Suite 110

Sacramento, CA 95814

Office: (916) 558-5335

Fax: (916) 558-5323

CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this

message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

From: Garrett Madden gmadden79@gmail.com

Sent: Tuesday, October 21, 2025 9:05 AM

To: Somalal, Gladsona@DOR Gladsona.Somalal@dor.ca.gov

Subject: Fwd: ABC NorCal Apprenticeship Program Status Update

Good morning Gladsona. This is the only email I have from ABC NORCAL regarding my status

----- Forwarded message -----

From: **Intake Coordinator** <intake@abcnorcal.org>

Date: Wed, Aug 27, 2025, 2:56 PM

Subject: ABC NorCal Apprenticeship Program Status Update

To: <gmadden79@gmail.com>



Associate

Good afternoon, Garrett,

CONGRATULATIONS! You've successfully completed your ABC NorCal Intake process and have been added to the Out-of-Work List. Our dispatcher has received your information and is working to place you on your first job assignment.

Please call our office with any questions. Looking forward to welcoming you to the program soon!

Thank you,

ABC NorCal Apprenticeship Team

Copyright © All rights reserved. | [Manage email preferences](#)

[4577 Las Positas Rd, Unit C Livermore, CA 94551](#)

Source: gmadden79@gmail.com

Subject: RE: ABC NorCal Apprenticeship Program Status Update
From: Somalal, Gladsona@DOR <Gladsona.Somalal@dor.ca.gov>
To: Garrett Madden <gmadden79@gmail.com>
Date: Tue, 21 Oct 2025 17:15:44 +0000

Hi Garret,

Thank you for sending over the information I requested- I appreciate your quick response.

Best regards,

Gladsona Somalal

Senior Vocational Rehabilitation Counselor, QRP

Department of Rehabilitation

Northern Sierra District

721 Capitol Mall, Suite 110

Sacramento, CA 95814

Office: (916) 558-5335

Fax: (916) 558-5323

CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

From: Garrett Madden gmadden79@gmail.com

Sent: Tuesday, October 21, 2025 9:05 AM

To: Somalal, Gladsona@DOR Gladsona.Somalal@dor.ca.gov

Subject: Fwd: ABC NorCal Apprenticeship Program Status Update

Good morning Gladsona. This is the only email I have from ABC NORCAL regarding my status

----- Forwarded message -----

From: **Intake Coordinator** <intake@abcnorcal.org>

Date: Wed, Aug 27, 2025, 2:56 PM

Subject: ABC NorCal Apprenticeship Program Status Update

To: <gmadden79@gmail.com>



Associate

Good afternoon, Garrett,

CONGRATULATIONS! You've successfully completed your ABC NorCal Intake process and have been added to the Out-of-Work List. Our dispatcher has received your information and is working to place you on your first job assignment.

Please call our office with any questions. Looking forward to welcoming you to the program soon!

Thank you,

ABC NorCal Apprenticeship Team

Copyright © All rights reserved. | [Manage email preferences](#)

[4577 Las Positas Rd, Unit C Livermore, CA 94551](#)

Source: gmadden79@gmail.com

Subject: Follow-Up: ABC NorCal Apprenticeship Transportation
From: Somalal, Gladsona@DOR <Gladsona.Somalal@dor.ca.gov>
To: gmadden79@gmail.com <gmadden79@gmail.com>
Date: Tue, 21 Oct 2025 15:51:00 +0000

Hi Garrett,

Please send me the following as soon as possible:

1. Confirmation of your registration in the ABC NorCal program.
2. A letter from your instructor confirming your training location(s) and schedule.
3. Any documentation related to past DUI history (if applicable).

We will not be using Turo. If rental assistance is approved, **it will be through a DOR-approved vendor**. I'll follow up once I receive the documents.

Best,

Gladsona Somalal

Senior Vocational Rehabilitation Counselor, QRP

Department of Rehabilitation

Northern Sierra District

721 Capitol Mall, Suite 110

Sacramento, CA 95814

Office: (916) 558-5335

Fax: (916) 558-5323

CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

Source: gmadden79@gmail.com

Subject: IPE Amendment and Transportation Support for ABC NorCal Apprenticeship
From: Somalal, Gladsona@DOR <Gladsona.Somalal@dor.ca.gov>
To: gmadden79@gmail.com <gmadden79@gmail.com>
Date: Fri, 24 Oct 2025 16:56:45 +0000

Hi Garrett,

I'm writing to confirm that your Individualized Plan for Employment (IPE) has been amended to include **travel and maintenance support** related to your participation in the ABC NorCal Apprenticeship Program.

As opportunities arise for you to work in Livermore, please notify me as soon as possible. Once I receive confirmation, I can begin the process of authorizing a rental vehicle through a **DOR-approved vendor**.

Please note:

- **Turo is not an approved vendor** and cannot be used.
- Rentals are typically authorized **Monday through Friday only**. You will need to return the vehicle for the weekend unless otherwise approved.
- **Fuel costs** may be covered depending on the rental agency's policy-I'll confirm this once we identify the vendor.
- You are expected to **bring your own lunch** during training/work-related travel.
- If you have a **DUI history**, please submit any related documentation as soon as possible.

To move forward, please provide the following documentation:

1. A **letter from your instructor** confirming Livermore as your training location along with schedule.
2. Any **DUI-related documentation**, if applicable.

Once I receive the required documents and confirm your assignment, please allow **2–3 weeks** for us to complete the necessary research, reservation, and itinerary planning. **We ask for at least 2–3 weeks' notice before your travel date.**

Once finalized, I will refer your case to Esther Keller, DOR Service Coordinator for further coordination.

Let me know if you have any questions.

Best regards,

Gladsona Somalal

Senior Vocational Rehabilitation Counselor, QRP

Department of Rehabilitation

Northern Sierra District

721 Capitol Mall, Suite 110

Sacramento, CA 95814

Office: (916) 558-5335

Fax: (916) 558-5323

CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

Source: gmadden79@gmail.com

Subject: RE: IPE Amendment and Transportation Support for ABC NorCal Apprenticeship
From: Somalal, Gladsona@DOR <Gladsona.Somalal@dor.ca.gov>
To: Garrett Madden <gmadden79@gmail.com>
Date: Fri, 24 Oct 2025 17:04:44 +0000

You are welcome!

Gladsona Somalal

Senior Vocational Rehabilitation Counselor, QRP

Department of Rehabilitation

Northern Sierra District

721 Capitol Mall, Suite 110

Sacramento, CA 95814

Office: (916) 558-5335

Fax: (916) 558-5323

CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

From: Garrett Madden gmadden79@gmail.com

Sent: Friday, October 24, 2025 9:58 AM

To: Somalal, Gladsona@DOR Gladsona.Somalal@dor.ca.gov

Subject: Re: IPE Amendment and Transportation Support for ABC NorCal Apprenticeship

Thank you for your help!

On Fri, Oct 24, 2025, 9:56 AM Somalal, Gladsona@DOR <Gladsona.Somalal@dor.ca.gov> wrote:

Hi Garrett,

I'm writing to confirm that your Individualized Plan for Employment (IPE) has been amended to include **travel and maintenance support** related to your participation in the ABC NorCal Apprenticeship Program.

As opportunities arise for you to work in Livermore, please notify me as soon as possible. Once I receive confirmation, I can begin the process of authorizing a rental vehicle through a **DOR-approved vendor**.

Please note:

- **Turo is not an approved vendor** and cannot be used. - Rentals are typically authorized **Monday through Friday only**. You will need to return the vehicle for the weekend unless otherwise approved. - **Fuel costs** may be covered depending on the rental agency's policy-I'll confirm this once we identify the vendor. - You are expected to **bring your own lunch** during training/work-related travel. - If you have a **DUI history**, please submit any related documentation as soon as possible.

To move forward, please provide the following documentation:

1. A **letter from your instructor** confirming Livermore as your training location along with schedule. 2. Any **DUI-related documentation**, if applicable.

Once I receive the required documents and confirm your assignment, please allow **2–3 weeks** for us to complete the necessary research, reservation, and itinerary planning. **We ask for at least 2–3 weeks' notice before your travel date.**

Once finalized, I will refer your case to Esther Keller, DOR Service Coordinator for further coordination.

Let me know if you have any questions.

Best regards,

Gladsona Somalal

Senior Vocational Rehabilitation Counselor, QRP

Department of Rehabilitation

Northern Sierra District

[721 Capitol Mall, Suite 110]([https://www.google.com/maps/search/721+Capitol+Mall,+Suite+110+%0D%0A+Sacramento,+CA+95814+%0D%0A+Office:+\(916?entry=gmail&source=g](https://www.google.com/maps/search/721+Capitol+Mall,+Suite+110+%0D%0A+Sacramento,+CA+95814+%0D%0A+Office:+(916?entry=gmail&source=g))

[Sacramento, CA 95814]([https://www.google.com/maps/search/721+Capitol+Mall,+Suite+110+%0D%0A+Sacramento,+CA+95814+%0D%0A+Office:+\(916?entry=gmail&source=g](https://www.google.com/maps/search/721+Capitol+Mall,+Suite+110+%0D%0A+Sacramento,+CA+95814+%0D%0A+Office:+(916?entry=gmail&source=g))

Office: [\(916\) 558-5335](tel:9165585335)

Fax: (916) 558-5323

CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

Source: gmadden79@gmail.com

Subject: RE: Urgent assistance - Transportation
From: Somalal, Gladsona@DOR <Gladsona.Somalal@dor.ca.gov>
To: Garrett Madden <gmadden79@gmail.com>
Date: Mon, 20 Apr 2026 17:39:25 +0000

Hi Garrett,

Thank you for your email and for being proactive in strengthening your carpentry skills. It's great to see you taking steps to stay on track with your employment goals.

Since transportation support is included in your Individualized Plan for Employment (IPE), we can assist with this. To move forward, please provide the following documentation:

- **A letter from your instructor confirming your training location along with your class schedule.**

Please remember that we require at least 2 to 3 weeks' notice before your travel date in order to complete the transportation planning, research, and reservation process.

Once I receive the required documents and confirm your assignment, I will refer your case to Esther Keller, DOR Service Coordinator, for further coordination.

Let me know if you have any questions.

Best regards,

Gladsona Somalal

Senior Vocational Rehabilitation Counselor, QRP

Department of Rehabilitation

Northern Sierra District

721 Capitol Mall, Suite 110

Sacramento, CA 95814

Office: (916) 558-5335

Fax: (916) 558-5323

CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

From: Garrett Madden gmadden79@gmail.com

Sent: Tuesday, April 14, 2026 9:00 AM

To: Somalal, Gladsona@DOR Gladsona.Somalal@dor.ca.gov

Subject: Urgent assistance

[EXTERNAL EMAIL] This email originated outside DOR. Use caution when clicking links or opening attachments, especially if the sender is unknown or the message is unexpected.

Helpful Resource:

Refer to the IT Service Center KB article titled '*How to Identify Phishing Emails*' for guidance on recognizing phishing attempts.

Dear Gladsona

I hope you are doing well.

I am writing to urgently request transportation assistance. Since my Construction Laborer apprenticeship program hasn't started yet, I have enrolled in the Build Strong pre apprenticeship program for carpentry. I still do not have access to reliable transportation, and there are no bus routes available in my area, which makes it extremely difficult for me to attend required activities.

My classes are scheduled to begin on April 27th, and I am concerned about being able to attend without transportation support in place. I understand that these requests can take time to process, which is why I am reaching out as soon as possible to ask for assistance and guidance on how to move forward quickly.

Having transportation is critical for me to stay on track with my program and continue making progress toward my employment goals. I would greatly appreciate any help you can provide or any steps I can take to expedite this process.

Please let me know if you need any additional information from me.

Thank you very much for your time and support.

Sincerely, Garrett Madden

Source: gmadden79@gmail.com

Subject: RE: Urgent assistance - Transportation
From: Somalal, Gladsona@DOR <Gladsona.Somalal@dor.ca.gov>
To: Garrett Madden <gmadden79@gmail.com>
Date: Tue, 21 Apr 2026 22:31:43 +0000

Hi Garrett,

I don't see a letter from your instructor in the attachments you sent. Please resend it so I can review it before authorizing your transportation.

The cohort notice states your orientation is on April 27th, but to support transportation, I need an official letter from your instructor that includes:

- Training location
- Class schedule (start/end time)
- Number of days per week
- Start date and duration

Please send this as soon as possible.

Thank you,

Gladsona Somalal

Senior Vocational Rehabilitation Counselor, QRP

Department of Rehabilitation

Northern Sierra District

721 Capitol Mall, Suite 110

Sacramento, CA 95814

Office: (916) 558-5335

Fax: (916) 558-5323

CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If

you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

From: Garrett Madden gmadden79@gmail.com

Sent: Monday, April 20, 2026 10:54 AM

To: Somalal, Gladsona@DOR Gladsona.Somalal@dor.ca.gov; Zapanta, Kamie@DOR Kamie.Zapanta@dor.ca.gov; Keller, Esther@DOR Esther.Keller@dor.ca.gov

Subject: Re: Urgent assistance - Transportation

Hi Gladsona,

Please see the attached and I would like to know if this can be expedited as you have been out of office, I was referred to this program by the DOR after the original program never started. An email from the instructor is attached.

Thank you!

Garrett Madden

On Mon, Apr 20, 2026, 10:39 AM Somalal, Gladsona@DOR <Gladsona.Somalal@dor.ca.gov> wrote:

Hi Garrett,

Thank you for your email and for being proactive in strengthening your carpentry skills. It's great to see you taking steps to stay on track with your employment goals.

Since transportation support is included in your Individualized Plan for Employment (IPE), we can assist with this. To move forward, please provide the following documentation:

- **A letter from your instructor confirming your training location along with your class schedule.**

Please remember that we require at least 2 to 3 weeks' notice before your travel date in order to complete the transportation planning, research, and reservation process.

Once I receive the required documents and confirm your assignment, I will refer your case to Esther Keller, DOR Service Coordinator, for further coordination.

Let me know if you have any questions.

Best regards,

Gladsona Somalal

Senior Vocational Rehabilitation Counselor, QRP

Department of Rehabilitation

Northern Sierra District

[721 Capitol Mall, Suite 110]([https://www.google.com/maps/search/721+Capitol+Mall,+Suite+110+%0D%0A+Sacramento,+CA+95814+%0D%0A+Office:+\(916?entry=gmail&source=g](https://www.google.com/maps/search/721+Capitol+Mall,+Suite+110+%0D%0A+Sacramento,+CA+95814+%0D%0A+Office:+(916?entry=gmail&source=g))

[Sacramento, CA 95814]([https://www.google.com/maps/search/721+Capitol+Mall,+Suite+110+%0D%0A+Sacramento,+CA+95814+%0D%0A+Office:+\(916?entry=gmail&source=g](https://www.google.com/maps/search/721+Capitol+Mall,+Suite+110+%0D%0A+Sacramento,+CA+95814+%0D%0A+Office:+(916?entry=gmail&source=g))

Office: (916) 558-5335

Fax: (916) 558-5323

CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

From: Garrett Madden <gmadden79@gmail.com>

Sent: Tuesday, April 14, 2026 9:00 AM

To: Somalal, Gladsona@DOR <Gladsona.Somalal@dor.ca.gov>

Subject: Urgent assistance

[EXTERNAL EMAIL] This email originated outside DOR. Use caution when clicking links or opening attachments, especially if the sender is unknown or the message is unexpected.

Helpful Resource:

Refer to the IT Service Center KB article titled '*How to Identify Phishing Emails*' for guidance on recognizing phishing attempts.

Dear Gladsona

I hope you are doing well.

I am writing to urgently request transportation assistance. Since my Construction Laborer apprenticeship program hasn't started yet, I have enrolled in the Build Strong pre apprenticeship

program for carpentry. I still do not have access to reliable transportation, and there are no bus routes available in my area, which makes it extremely difficult for me to attend required activities.

My classes are scheduled to begin on April 27th, and I am concerned about being able to attend without transportation support in place. I understand that these requests can take time to process, which is why I am reaching out as soon as possible to ask for assistance and guidance on how to move forward quickly.

Having transportation is critical for me to stay on track with my program and continue making progress toward my employment goals. I would greatly appreciate any help you can provide or any steps I can take to expedite this process.

Please let me know if you need any additional information from me.

Thank you very much for your time and support.

Sincerely, Garrett Madden

Source: gmadden79@gmail.com

Subject: Transportation Support for Training (April–June)
From: Somalal, Gladsona@DOR <Gladsona.Somalal@dor.ca.gov>
To: Garrett Madden <gmadden79@gmail.com>
Date: Thu, 23 Apr 2026 16:01:19 +0000

Hi Garrett,

Thank you for providing the supporting documentation regarding your transportation assistance request.

Since your training is located in Sacramento, and in accordance with our transportation assistance policy, you are eligible to receive \$50 per month for three months- covering the training period from April through June. The check will be mailed to the address you have on file with DOR.

You are welcome to use this assistance toward gas/fuel expenses or public transportation. Please allow 2 to 3 weeks for the check to arrive. If you do not receive it within that timeframe, let me know and I will follow up.

Wishing you all the best with your training.

Kind regards,

Gladsona Somalal

Senior Vocational Rehabilitation Counselor, QRP

Department of Rehabilitation

Northern Sierra District

721 Capitol Mall, Suite 110

Sacramento, CA 95814

Office: (916) 558-5335

Fax: (916) 558-5323

CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this

message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

From: Garrett Madden gmadden79@gmail.com

Sent: Wednesday, April 22, 2026 4:13 PM

To: Zapanta, Kamie@DOR Kamie.Zapanta@dor.ca.gov; Somalal, Gladsona@DOR Gladsona.Somalal@dor.ca.gov

Subject: BSA letter

[EXTERNAL EMAIL] This email originated outside DOR. Use caution when clicking links or opening attachments, especially if the sender is unknown or the message is unexpected.

Helpful Resource:

Refer to the IT Service Center KB article titled '*How to Identify Phishing Emails*' for guidance on recognizing phishing attempts.

Here is a copy of my letter for the Build Strong Academy

Source: gmadden79@gmail.com

Subject: Follow-Up Regarding Your Transportation Request

From: Somalal, Gladsona@DOR <Gladsona.Somalal@dor.ca.gov>

To: gmadden79@gmail.com <gmadden79@gmail.com>

Date: Wed, 29 Apr 2026 17:53:28 +0000

Hi Garrett,

I attempted to reach you by phone today and left a message. I am following up with you via email since we were not able to connect.

I have reviewed your request for a car rental to commute from your address at 3610 Duckhorn Dr. #1003, Sacramento, CA 95834 to your training location at 9332 Tech Center Drive, Sacramento.

Based on the California Code of Regulations (CCR), DOR is required to use the least costly transportation mode that meets the individual's needs.

As per CCR §7161(c), 'the mode of transportation provided shall be the least costly mode which meets the special needs of the individual'.

Public transit, such as SacRT buses and light rail, is listed as one of the standard transportation modes under this section. Because public transit is available for your route, it is considered the least-cost comparable option DOR can support at this time.

Regarding your concern about the SacRT monthly pass costing approximately \$100, I want to share information that may help reduce your out-of-pocket expenses:

SacRT Disability Discount Monthly Pass

- Discounted monthly pass: \$50
- Must apply in person for the disability photo ID and sticker
- Location:

SacRT Customer Service Center

1225 R Street, Sacramento, CA 95811

Hours: Monday to Friday, 9:00 a.m. to 5:30 p.m. - Phone: (916) 321-2877 - Website: <https://www.sacrt.com/fares/>

At this time, based on my review of available comparable transportation options, public transit remains the least costly mode that meets policy requirements. If you agree, I can proceed with authorizing the previously approved \$50 per month for April through June.

To give you time to complete the SacRT disability discount application, **I can additionally approve an extra \$50 for the month of May.**

Please let me know how you would like to proceed, and I will continue to support you accordingly.

Thank you,

Gladsona Somalal

Senior Vocational Rehabilitation Counselor, QRP

Department of Rehabilitation

Northern Sierra District

721 Capitol Mall, Suite 110

Sacramento, CA 95814

Office: (916) 558-5335

Fax: (916) 558-5323

CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

Source: gmadden79@gmail.com

Subject: Request to Schedule a Check-In Meeting Regarding Transportation Determination

From: Somalal, Gladsona@DOR <Gladsona.Somalal@dor.ca.gov>

To: gmadden79@gmail.com <gmadden79@gmail.com>

Date: Thu, 30 Apr 2026 22:54:14 +0000

Hi Garrett,

Thank you for your detailed email and for outlining your concerns and requests so clearly. I want to ensure that I gather sufficient information and fully understand the urgency of your situation so that I can support you in the best possible way.

To do that, I would like to schedule a 30-minute check-in meeting with you by phone. Since you are in training from 8:00 a.m. to 4:00 p.m., I can offer the following options:

- Monday, May 4th at 12:00 p.m. during your lunch break, or
- Tuesday, May 5th at 4:15 p.m. after your training hours.

Please let me know which option works best for you. Once confirmed, I will set aside the time so we can discuss your transportation needs in more depth and explore how DOR can best support you moving forward.

Thank you, and I look forward to speaking with you.

Sincerely,

Gladsona Somalal

Senior Vocational Rehabilitation Counselor, QRP

Department of Rehabilitation

Northern Sierra District

721 Capitol Mall, Suite 110

Sacramento, CA 95814

Office: (916) 558-5335

Fax: (916) 558-5323

CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

Source: gmadden79@gmail.com

Subject: Follow-Up on Transportation Request and Information Needed

From: Somalal, Gladsona@DOR <Gladsona.Somalal@dor.ca.gov>

To: gmadden79@gmail.com <gmadden79@gmail.com>

Date: Mon, 4 May 2026 19:08:02 +0000

Dear Garrett,

I am following up regarding your transportation request. I am writing in response to your email dated April 29, 2026, and to address the questions and concerns you raised regarding transportation assistance.

I previously offered to connect by phone outside of your training hours; however, I understand you prefer to proceed via email, and I will continue to work with you in this format. I want to acknowledge your concern about reliable transportation to support your participation in your training program, and you requesting clarification.

Under California Code of Regulations (CCR), Title 9 §7161(c), the Department of Rehabilitation is required to authorize the least costly transportation option that meets an individual's rehabilitation needs. In making this determination, CCR §7162(b)(2) requires consideration of proximity, availability/frequency of transportation options, and whether the option creates an undue hardship.

Based on the current review:

- Your residence (Duckhorn Drive, Sacramento) and training site (Tech Center Drive, Sacramento) are both located within the Sacramento area.
- SacRT bus and light rail services are available for this route.
- Based on typical routing, the commute is estimated at approximately 60 to 90 minutes each way depending on transfers and schedule timing.

Because public transit is available, it is currently considered the least costly comparable transportation option under DOR policy. The previously authorized \$50 monthly support was based on the SacRT discounted monthly pass and the expected duration of your training program.

You referenced a prior authorization for a rental vehicle in a different case. That determination was based on the specific circumstances at that time, including the location and travel requirements. Transportation decisions are made individually based on current program conditions and available comparable options.

To fully evaluate your current request and your statement that public transportation creates an undue hardship, I need additional clarification from you. Please respond to the following:

1. What specific barriers prevent you from using available public transportation?

2. What do you mean by “undue hardship” in your situation?
3. Are there any functional limitations or other factors that impact your ability to use transit?
4. Are there specific timing or reliability concerns that impact your ability to consistently attend training?
5. Why do you believe a car rental is necessary to meet your participation needs compared to other available options?

This information is necessary to complete an individualized assessment under CCR requirements and determine whether the current transportation plan meets your needs or whether an alternative option is appropriate.

Once I receive your response, I will complete my review and provide you with a written determination. Your request for Administrative Review will also be processed in accordance with DOR procedures.

Thank you, and I look forward to your response.

Sincerely,

Gladsona Somalal

Senior Vocational Rehabilitation Counselor, QRP

Department of Rehabilitation

Northern Sierra District

721 Capitol Mall, Suite 110

Sacramento, CA 95814

Office: (916) 558-5335

Fax: (916) 558-5323

CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

Source: gmadden79@gmail.com

Subject: RE: Follow-Up on Transportation Request and Next Steps

From: Somalal, Gladsona@DOR <Gladsona.Somalal@dor.ca.gov>

To: Garrett Madden <gmadden79@gmail.com>

Date: Tue, 5 May 2026 23:04:32 +0000

Dear Garrett,

I am writing in response to your email dated May 4, 2026, and the additional information you provided regarding transportation.

You noted that this process has involved back - and - forth communication and delays. I would like to clarify that transportation options were provided; however, no option has been selected, and additional information has been necessary to complete the transportation assessment.

Your request for Administrative Review is currently being processed in accordance with Department of Rehabilitation (DOR) procedures.

Below is a response to the concerns you outlined:

1. Distance to Bus Stop and Route Structure

Public transportation is available from your identified location. While the route requires approximately a 38 - minute walk and scheduled transfers, these factors alone do not preclude the use of public transit under CCR § 7161(c). Many Sacramento - area routes involve similar conditions. You also indicated you are experiencing homelessness and utilizing a general area as your starting point. This has been noted. Transportation determinations are based on options available within the area from which services are accessed.

1. Commute Time and Bus Frequency

You expressed concerns about commute duration, bus frequency, and transfer requirements. Fixed - route transit systems do require planning around established schedules, including early departures when needed to meet required arrival times. These factors are part of the overall transportation assessment.

1. Medical Conditions

You reported that diabetes, asthma, and depression impact your ability to complete the commute. This constitutes new information that requires clarification to ensure your services and employment goal are appropriate and aligned with your functional abilities.

Because you indicated that walking, air quality, and fatigue present significant challenges, I also need to understand how these factors may affect your ability to perform the essential duties of your chosen occupation. Many jobs require extended standing, walking, or outdoor exposure. If short walking distances, poor air quality, or routine activities are difficult, it is important to clarify whether the physical and emotional demands of the job- and the typical pressures of maintaining employment- are compatible with your current functional abilities. This information will help determine whether the employment goal and training activities remain appropriate.

To support this assessment, **please provide medical documentation from your treating provider** that includes:****

- Your current functional limitations
- Any restrictions related to walking, physical exertion, or environmental exposure
- Any recommendations related to transportation or work - related activities

This information is necessary to determine appropriate services and to evaluate the suitability of your current employment goal in relation to your stated limitations.

1. Attendance Concerns

You noted a prior tardy and concerns regarding potential program dismissal. If you would like assistance, DOR can contact your training provider to explore any available flexibility or reasonable accommodation regarding attendance. Please let me know if you would like to proceed with a Release of Information (ROI).

1. Request for Car Rental

A rental vehicle represents a significantly higher - cost transportation option. Under CCR § 7161(c), DOR is required to authorize the least costly transportation method that meets the individual ' s needs. Based on the information currently available, public transportation continues to be the comparable and appropriate option.

Because you indicated that you currently lack transportation support, I have authorized \$100 in transportation assistance while options continue to be reviewed. I remain available to meet outside your training hours if you would like to discuss this further.

Given the information you have provided, please submit the requested medical documentation by May 12, 2026, so I may continue the assessment and determine next steps.

Sincerely,

Gladsona Somalal

Senior Vocational Rehabilitation Counselor, QRP

Department of Rehabilitation

Northern Sierra District

721 Capitol Mall, Suite 110

Sacramento, CA 95814

Office: (916) 558-5335

Fax: (916) 558-5323

CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

From: Garrett Madden gmadden79@gmail.com

Sent: Monday, May 4, 2026 1:10 PM

To: Somalal, Gladsona@DOR Gladsona.Somalal@dor.ca.gov

Cc: Zapanta, Kamie@DOR Kamie.Zapanta@dor.ca.gov

Subject: Re: Follow-Up on Transportation Request and Information Needed

[EXTERNAL EMAIL] This email originated outside DOR. Use caution when clicking links or opening attachments, especially if the sender is unknown or the message is unexpected.

Helpful Resource:

Refer to the IT Service Center KB article titled '*How to Identify Phishing Emails*' for guidance on recognizing phishing attempts.

My apologies. I am trying to do this during my breaks. Although I have already sent information like this, I am sending it again. Question 1: What specific barriers prevent you from using available public transportation?

Several specific, documented barriers make public transit unworkable for this route:

- ****Walking distance to the nearest bus stop: **** The nearest SacRT bus stop to my current location (Starbucks, 3610 Duckhorn Drive, Sacramento 95834) is Truxel Rd & Natomas Crossing Dr (SB), which is 3,175 yards away. Transit data from Moovit confirms this as a 38-minute walk each way. This

walk must occur before boarding any vehicle -- in the morning before training begins, and again at the end of a full training day.

- ****Training schedule is fixed with no flexibility:** ** Training runs from 8:00 AM to 4:00 PM. The program has a strict attendance policy: two tardies result in dismissal. I was already tardy once in the past week due to transit delays. I cannot absorb another late arrival without losing my place in the program entirely.
- ****Bus service frequency on this route is 45 minutes:** ** Routes 11 and 13, the only SacRT routes serving North Natomas, operate on a 45-minute headway -- the lowest frequency in the SacRT system. To arrive by 8:00 AM, I must leave no later than 5:45 AM to account for the walk, the wait, the bus to downtown, the light rail transfer, and the final walk to the training site. A single missed connection turns a 108-minute minimum commute into a 153-minute or longer one.
- ****No direct route exists:** ** There is no single bus or train connecting North Natomas (95834) to Tech Center Drive, Rosemont (95826). A minimum of two transfers is required. Each transfer point is a new opportunity for a delay that cascades into a tardy -- and under this program's policy, a second tardy ends my enrollment.
- ****I have told you this before but I am currently experiencing homelessness:** ** I do not have a fixed residence. I use the Starbucks at 3610 Duckhorn Drive as my stable daily anchor point. Although I get help from friends, I truly do not have a residence of my own.

Question 2: What do you mean by "undue hardship" in your situation?

Under CCR §7162(b)(2), undue hardship includes transportation that -- due to proximity, availability, or frequency -- functionally prevents consistent attendance. My situation meets this standard on multiple grounds:

The 38-minute walk to the bus stop is itself a hardship. This is not a short walk to a corner stop. Nearly two miles of pedestrian travel, in the early morning and again after a full training day, is physically demanding for anyone. For someone managing Type 2 Diabetes, major depression, and asthma, it is a documented medical risk (see Question 3).

The 45-minute bus frequency removes any margin for error. DOR's estimate of 60-90 minutes assumes ideal conditions and does not account for walking time or wait time. The real best-case commute is 108 minutes each way. The real worst case, when a connection is missed, is over 3 hours each way. A 6+ hour daily transit burden on top of an 8-hour training day is not a comparable option -- it is an obstacle to program completion.

I have already experienced a tardy because of this route. That is not a projection of future risk. It is documented evidence that the current transit plan has already failed to support consistent attendance once, and I have only one remaining tardy before dismissal.

I left my previous employment, a custodial position specifically to participate in this training program. Transportation failure means program dismissal. Program dismissal means the loss of the vocational rehabilitation investment DOR has already made, and the loss of my path to employment.

Question 3: Are there any functional limitations or other factors that impact your ability to use transit?

Yes. I have three diagnosed medical conditions that are directly relevant to the transit demands of this route: Depression as registered with the DOR, asthma and type 2 diabetes.

- **Type 2 Diabetes:** A nearly two-mile walk to a bus stop, taken twice daily in variable weather, creates real physiological risk. Blood sugar management in people with diabetes is directly affected by exertion, irregular meal timing, heat, and stress. A 38-minute walk before a full training day, with no guarantee of the return commute timing, makes consistent blood sugar management extremely difficult. Diabetic fatigue is a documented symptom that can affect cognitive performance, which directly impacts training outcomes.
- **Major Depression:** Depression affects executive function, motivation, and the ability to sustain routine under adverse conditions. A commute that requires a 5:45 AM departure, two transfers, and 38 minutes of walking with the constant knowledge that any single delay results in dismissal creates a chronic stress load that is clinically incompatible with depression management and recovery. And on top of that, I am on anti-depressants that cause me to be extremely tired. The structure and predictability of reliable transportation is not a convenience for someone managing depression. It is part of the treatment environment.
- **Asthma:** Extended outdoor exertion is a documented asthma trigger. A 38-minute walk in morning air, particularly in Sacramento's climate which includes poor air quality days and wildfire smoke seasons, presents a real respiratory risk. An asthma episode during a commute could result in missed training regardless of intent or effort.

Each of these conditions individually creates a functional limitation relevant to a 38-minute walking commute. Combined, they constitute a documented pattern of medical vulnerability to the specific transit demands of this route.

Question 4: Are there specific timing or reliability concerns that impact your ability to consistently attend training?

Yes. The timing concerns are specific and documented:

- **Required departure time is 5:45 AM:** To arrive at 9332 Tech Center Dr by 8:00 AM via SacRT, I must leave my anchor location no later than 5:45 AM. This allows for the 38-minute walk, a bus wait of up to 45 minutes (Route 11 or 13), the bus ride to downtown, a light rail transfer, and the final wal

Source: garrettmadden479@gmail.com

Subject: Admin Review Decision

From: Rubalcava, Leslie D@DOR <Leslie.Rubalcava@dor.ca.gov>

To: Garrett Madden <garrettmadden479@gmail.com>

Date: Tue, 26 May 2026 14:18:00 +0000

Dear Garrett,

It was a pleasure meeting with you on Wednesday, May 20th, regarding the Administrative Review you requested, which I received via email on May 6th, 2026. Although we could not meet the original deadline due to scheduling conflicts, the purpose of our meeting was to provide you with the opportunity to clarify your concerns and the resolution you are seeking. This letter serves as the Administrative Review decision concerning your complaint.

Issues

You are requesting assistance with reliable transportation to participate in the Department of Rehabilitation (DOR)—sponsored pre-apprenticeship program.

Resolution Requested

You requested a car rental to attend the training.

Background and Decision

On April 14th, you emailed your Rehabilitation Counselor (RC), Gladsona Somalal, requesting transportation assistance for the BuildingStrong Academy pre apprenticeship program, which you began on April 27th. The program runs Monday through Friday, from 8:00 a.m. to 5:00 p.m., and is located at 9332 Tech Center Drive, Sacramento, CA 95826—approximately 16 miles from your home.

You shared that you are currently a full-time student and had to leave a stable job to attend this training. You do not own a personal vehicle and rely on family and friends for transportation. You stated that public transportation is not a viable option due to your health conditions of diabetes, asthma, and depression. You also noted that using public transportation would take approximately 108 to 194 minutes per trip and include about 38 minutes of walking. You stated that this would create undue hardship and requested that DOR provide a car rental.

On April 29th, the RC informed you that a car rental could not be approved due to DOR regulations, which require the least costly mode of transportation be used (CCR § 7161(c)). She explained that public transportation is considered an available option for attending your training. She also provided information on obtaining a reduced fare disability pass through SacRT and advised that you would be issued 50 dollars per month in transportation support.

Decision

In accordance with Cal. Code Regs. tit. 9, § 7161(c), the mode of transportation provided must be the least costly option that meets your disability related needs. SacRT offers several routes that would get you to your training location, including one departing at 5:57 a.m. and arriving at 7:27 a.m. A monthly nondisabled pass costs \$100.

Based on this information and to support your participation in the program, I am directing your counselor to increase your monthly transportation assistance to 100 dollars.

You also have another option: DOR can reimburse a driver at .21 cents per mile, which would total approximately \$134 per month (33.6 miles per week × 4 weeks × .21 per mile). If you prefer this reimbursement method over a flat monthly amount, please inform your counselor. I also want to encourage you to continue to work with your counselor to reach your employment goal.

Should you disagree with the above decision, you have the right to request a fair hearing within 30 days in receipt of this letter. You may request a fair hearing by contacting ppealsinfo@dor.ca.gov or by calling ** (916) 558-5860**. Your rights and remedies are attached.

Sincerely,

Leslie Rubalcava, M.S.

*Department of Rehabilitation***

*Supervisor I***

1890 Lassen Blvd. Suite A-1

Yuba City, CA 95993

Yuba City Branch and Woodland Branch

Main: (530)822-4591

Direct: (530) 822-4568

SERVING YOLO, YUBA, COLUSA and SUTTER COUNTIES

<https://outlook.office365.com/book/DORConsumerandStaff@dor.ca.gov/>

CONFIDENTIALITY NOTICE: This communication with its contents may contain confidential and/or legally privileged information. It is solely for the use of the intended recipient(s). Unauthorized interception, review, use or disclosure is prohibited and may violate applicable laws including the Electronic Communications Privacy Act. If you are not the intended recipient, please contact the sender and destroy all copies of the communication.

Attachment

16_DR1000.pdf

Attached to the email above.

If questions or issues arise while you are an applicant or a consumer of the Department of Rehabilitation (DOR), talk with your Rehabilitation Counselor. You may also request an informal meeting with your Rehabilitation Counselor's Team Manager.

You have the right to request an administrative review with the District Administrator. You may also seek, as set forth below, an administrative review concurrently with a formal request for mediation and/or fair hearing. However, most problems can be resolved informally and more quickly at the district level. You may bring a family member, other representative, or advocate with you any time you meet with the DOR staff.

CLIENT ASSISTANCE PROGRAM. To seek an advocate or for information regarding vocational rehabilitation services or the appeal process, the Client Assistance Program (CAP) administered by Disability Rights California may be available to assist you. Information is available at the [Disability Rights California website](http://www.disabilityrightsca.org) (<http://www.disabilityrightsca.org>), by phone at 800-776-5746 or 800-719-5798 TTY/TDD (Telecommunication Device for the Deaf and Hard of Hearing), or at the [DOR website](http://www.dor.ca.gov) (<http://www.dor.ca.gov>).

You have the right to take any of the following steps should issues arise:

REHABILITATION COUNSELOR. Most misunderstandings and issues can be resolved by talking them over with your Rehabilitation Counselor. It is your responsibility to let your Rehabilitation Counselor know there is an issue.

TEAM MANAGER. If you believe that you and your Rehabilitation Counselor cannot resolve the issue, you may request an informal meeting with the Team Manager to discuss the issue.

ADMINISTRATIVE REVIEW. You may request an administrative review by the District Administrator within one year of the action or decision. An administrative review decision will be rendered within 15 calendar days of the date of your request, unless you agree to a later date. If you disagree with an administrative review decision, you may file a request for fair hearing within 30 calendar days of the receipt of the written decision of your administrative review.

MEDIATION. Mediation is another option for resolving disputes with the DOR. You may file a request for confidential mediation within one year of the DOR action or decision with which you disagree. A qualified, impartial mediator can help you find solutions that are satisfactory to you and the DOR. If the DOR agrees to mediate, the mediation will be held within 25 calendar days from

receipt of the request, unless you agree to a later date. A written request for mediation and/or fair hearing may be filed concurrently.

FAIR HEARING. If you are dissatisfied with any action or decision of the DOR relating to your application or receipt of vocational rehabilitation services, you may file a request for a fair hearing within one year of the DOR action or decision or within 30 calendar days of the receipt of written decision of your administrative review (see above). A fair hearing will be held within 60 calendar days of the receipt of your written request, unless you agree to a later date. At the hearing, you may appear in person, and may be accompanied by a representative or advocate of your choice. It may be to your benefit to first work through the administrative review process or mediation (see above) before requesting a fair hearing. If you are not satisfied with the fair hearing decision, you may file a Writ of Mandate with the California Superior Court within six months of the decision.

To request a mediation and/or fair hearing, please obtain form DR 107 Request for Mediation and/or Fair Hearing from one of the following options: contact the DOR Mediation and Fair Hearing Office by phone at 916-558-5860 or by email at [DOR Appeals Info](mailto:appealsinfo@dor.ca.gov) (appealsinfo@dor.ca.gov); visit the [DOR website](http://www.dor.ca.gov) (<http://www.dor.ca.gov>); or contact a CAP advocate (see CAP contact information above).

DISCRIMINATION. If you believe that the DOR or its contractor or grantee has unlawfully discriminated against you because of one or more of the following protected categories, your race, color, religion, ancestry, physical or mental disability, national origin, medical condition, genetic information, sexual orientation, marital status, age, sex, gender, gender identity, gender expression, military status, or veteran status or retaliation, you have the right to pursue the following options: 1) Make an oral or written request for an administrative review to the District Administrator, who oversees the office where your case is assigned. The request should include: your name, address, and phone number; the name and title of the person against whom the complaint is being made; a description of the alleged discrimination; the protected category; and the remedy being sought. 2) File a discrimination complaint directly with DOR's Office of Civil Rights (OCR). For more information or to obtain a discrimination complaint form, contact the DOR's OCR directly by phone at 916-558-5850 or by email at OCR@dor.ca.gov. 3) File a complaint with the U.S. Department of Education's Office for Civil Rights. For more information contact the U.S. Department of Education's Office for Civil Rights directly by telephone at 800-421-3481 or by email at OCR@ed.gov.

Requests for administrative review and complaints of discrimination must be made within 180 days of the date of alleged discrimination.

DISCRIMINATION OR HARASSMENT ON THE BASIS OF SEX. If you believe that the DOR or its contractor or grantee has discriminated against or harassed you or another individual with a disability on the basis of sex – including sexual orientation, gender identity, sexual harassment, and sexual violence, such as rape, sexual assault, sexual battery, and sexual coercion, you have the right to pursue the following options under Title IX of the Education Amendments Act of 1972 (Title IX): 1) contact the Chief of OCR and Title IX Coordinator by mail at 721 Capitol Mall, Sacramento, California 95814, by email at OCR@dor.ca.gov, or by telephone at 916-558-5850; you can also report information you have about potential harassment by leaving a voicemail for OCR and the Title IX Coordinator at 916-857-9175; 2) file a complaint with the U.S. Department of Education's Office for Civil Rights; you may contact the U.S. Department of Education's Office for Civil Rights directly by telephone at 800-421-3481 or by email at OCR@ed.gov.

Attachment

17_Admin Review Decision 5.2026.pdf

Attached to the email above.

Dear Garrett,

It was a pleasure meeting with you on Wednesday, May 20th, regarding the Administrative Review you requested, which I received via email on May 6th, 2026. Although we could not meet the original deadline due to scheduling conflicts, the purpose of our meeting was to provide you with the opportunity to clarify your concerns and the resolution you are seeking. This letter serves as the Administrative Review decision concerning your complaint.

Issues

You are requesting assistance with reliable transportation to participate in the Department of Rehabilitation (DOR)—sponsored pre-apprenticeship program.

Resolution Requested

You requested a car rental to attend the training.

Background and Decision

On April 14th, you emailed your Rehabilitation Counselor (RC), Gladsona Somalal, requesting transportation assistance for the BuildingStrong Academy pre apprenticeship program, which you began on April 27th. The program runs Monday through Friday, from 8:00 a.m. to 5:00 p.m., and is located at 9332 Tech Center Drive, Sacramento, CA 95826—approximately 16 miles from your home. You shared that you are currently a full-time student and had to leave a stable job to attend this training. You do not own a personal vehicle and rely on family and friends for transportation. You stated that public transportation is not a viable option due to your health conditions of diabetes, asthma, and depression. You also noted that using public transportation would take approximately 108 to 194 minutes per trip and include about 38 minutes of walking. You stated that this would create undue hardship and requested that DOR provide a car rental.

On April 29th, the RC informed you that a car rental could not be approved due to DOR regulations, which require the least costly mode of transportation be used (CCR § 7161(c)). She explained that

public transportation is considered an available option for attending your training. She also provided information on obtaining a reduced fare disability pass through SacRT and advised that you would be issued 50 dollars per month in transportation support.

Decision

In accordance with Cal. Code Regs. tit. 9, § 7161(c), the mode of transportation provided must be the least costly option that meets your disability related needs. SacRT offers several routes that would get you to your training location, including one departing at 5:57 a.m. and arriving at 7:27 a.m. A monthly nondisabled pass costs \$100.

Based on this information and to support your participation in the program, I am directing your counselor to increase your monthly transportation assistance to 100 dollars.

You also have another option: DOR can reimburse a driver at .21 cents per mile, which would total approximately \$134 per month (33.6 miles per week × 4 weeks × .21 per mile). If you prefer this reimbursement method over a flat monthly amount, please inform your counselor. I also want to encourage you to continue to work with your counselor to reach your employment goal.

Should you disagree with the above decision, you have the right to request a fair hearing within 30 days in receipt of this letter. You may request a fair hearing by contacting ppealsinfo@dor.ca.gov or by calling (916) 558-5860. Your rights and remedies are attached.

Sincerely,

Leslie Rubalcava

Source: garrettmadden479@gmail.com

Subject: Concerning your new authorization from the Department of Rehabilitation

From: Dept. of Rehabilitation <salesforce-vrc-email@dor.ca.gov>

To: garrettmadden479@gmail.com <garrettmadden479@gmail.com>

Date: Wed, 24 Jun 2026 17:17:13 +0000 (GMT)

dor_logo_wide

Hello Garrett Madden,

An authorization for goods and/or services for you has been issued by the Department of Rehabilitation.

| Authorization: | DSF537961790 | | Goods/Service: | Clothing | | Dates of Service: | Start Date: 6/23/2026 End Date: 6/30/2026 | | Issued: | 6/24/2026 | | Vendor Name: | WEX Health Inc | | Issued By: | Aimee Colvin | | Branch: | Northern Sierra District | | Authorized By: | Gladsona Somalal | | Counselor Email: | Gladsona.Somalal@dor.ca.gov |

No action is necessary at this time. This email is for notification only. If any action is required, you will receive a follow up email that will include the authorization attachment and additional instructions.

If you have questions or concerns about this authorization, please contact the Department of Rehabilitation Counselor: Gladsona.Somalal@dor.ca.gov.

Sincerely,

Department of Rehabilitation

Please be advised that this is a no-reply inbox. Please forward your message to the appropriate DOR contact.

Source: garrettmadden479@gmail.com

Subject: Concerning your new authorization from the Department of Rehabilitation

From: Dept. of Rehabilitation <salesforce-vrc-email@dor.ca.gov>

To: garrettmadden479@gmail.com <garrettmadden479@gmail.com>

Date: Thu, 2 Jul 2026 17:53:15 +0000 (GMT)

dor_logo_wide

Hello Garrett Madden,

An authorization for goods and/or services for you has been issued by the Department of Rehabilitation.

| Authorization: | NMED537975002 | | Goods/Service: | | | Dates of Service: | Start Date: 7/3/2026 End Date: 7/17/2026 | | Issued: | 7/2/2026 | | Vendor Name: | EAN Services, LLC | | Issued By: | Kortney McLean | | Branch: | Northern Sierra District | | Authorized By: | Gladsona Somalal | | Counselor Email: | Gladsona.Somalal@dor.ca.gov |

No action is necessary at this time. This email is for notification only. If any action is required, you will receive a follow up email that will include the authorization attachment and additional instructions.

If you have questions or concerns about this authorization, please contact the Department of Rehabilitation Counselor: Gladsona.Somalal@dor.ca.gov.

Sincerely,

Department of Rehabilitation

Please be advised that this is a no-reply inbox. Please forward your message to the appropriate DOR contact.

Source: garrettmadden479@gmail.com

Subject: Concerning your new authorization from the Department of Rehabilitation

From: Dept. of Rehabilitation <salesforce-vrc-email@dor.ca.gov>

To: garrettmadden479@gmail.com <garrettmadden479@gmail.com>

Date: Thu, 16 Jul 2026 22:35:42 +0000 (GMT)

dor_logo_wide

Hello Garrett Madden,

An authorization for goods and/or services for you has been issued by the Department of Rehabilitation.

| Authorization: | NMED538021013 | | Goods/Service: | Vehicle Rental | | Dates of Service: | Start Date: 7/18/2026 End Date: 7/31/2026 | | Issued: | 7/16/2026 | | Vendor Name: | EAN Services, LLC | | Issued By: | Michelle Johnson | | Branch: | Northern Sierra District | | Authorized By: | Gladsona Somalal | | Counselor Email: | Gladsona.Somalal@dor.ca.gov |

No action is necessary at this time. This email is for notification only. If any action is required, you will receive a follow up email that will include the authorization attachment and additional instructions.

If you have questions or concerns about this authorization, please contact the Department of Rehabilitation Counselor: Gladsona.Somalal@dor.ca.gov.

Sincerely,

Department of Rehabilitation

Please be advised that this is a no-reply inbox. Please forward your message to the appropriate DOR contact.

Source: garrettmadden479@gmail.com

Subject: Travel Reimbursement Request
From: Keller, Esther@DOR <Esther.Keller@dor.ca.gov>
To: Garrett Madden <garrettmadden479@gmail.com>
Date: Thu, 23 Jul 2026 22:49:16 +0000

Good afternoon, Garrett,

Thank you for providing the detailed information regarding your transportation and reimbursement request. To move forward with reviewing and finalizing the reimbursement, please complete the table attached to the best of your ability with the correct mode of travel and associated cost for each date. This will ensure all information is clear and documented accurately.

Please review and fill in the "Mode of Travel" and "Cost" fields as applicable.

Once you return the completed table, we will proceed with reviewing your reimbursement request.

Please let me know if you have any questions or need assistance completing the chart.

Thank you,

Esther Keller

Service Coordinator

Capitol Mall Branch Office

721 Capitol Mall, Suite 110

Sacramento, CA 95814

(916) 558-5320 Direct line

(916) 558-5300 Front office

(916) 558-5303 Fax

Pronouns: she, her, hers

CONFIDENTIALITY NOTICE.****

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this

message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

From: Garrett Madden garrettmadden479@gmail.com

Sent: Wednesday, July 1, 2026 6:40 PM

To: Han, Peter@DOR Peter.Han@dor.ca.gov

Cc: Keller, Esther@DOR Esther.Keller@dor.ca.gov; Colvin, Aimee@DOR Aimee.Colvin@dor.ca.gov; MacNicholl, Monica A@DOR Monica.MacNicholl@dor.ca.gov; O'Sullivan, Sharon M@DOR Sharon.O'Sullivan@dor.ca.gov

Subject: Re: DOR update Car rental

[EXTERNAL EMAIL] This email originated outside DOR. Use caution when clicking links or opening attachments, especially if the sender is unknown or the message is unexpected.

Helpful Resource:

Refer to the IT Service Center KB article titled *'How to Identify Phishing Emails'* for guidance on recognizing phishing attempts.

Please provide a decision letter for this approval as well as the original denial for vehicle purchase so I have access to exercise my right to appeal if needed. I have requested several times.

I sent this information to you before.

Thank you for authorizing the rental vehicle. I confirm the details as stated: pick-up on Friday, July 3, 2026 at Enterprise, 4107 Northgate Blvd, Sacramento, CA 95834, and return to the same location on Friday, July 17, 2026 before 6:00 pm, with a new authorization beginning July 18, 2026. Travel days are Monday through Friday between my residence and my worksite, a 44.7 mile round trip.

Two logistical questions on the rental: (1) Can you confirm the July 18 pick-up under the new authorization is arranged for a Saturday, or advise the correct pick-up day if the Enterprise location is closed that day? (2) Can you confirm what the DOR-provided collision and liability coverage includes, and whether I am responsible for any deductible, supplemental liability, or damage waiver? I want to make sure there are no coverage gaps before I take possession of the vehicle.

TO ANSWER YOUR VERIFICATION QUESTIONS

1. Employer address. My employer of record is Auburn Constructors, LLC (through ABC Norcal), whose corporate office I believe is located at 730 W Stadium Ln, Sacramento, CA 95834. As is standard in the construction industry, the employer's corporate office address is different from the job site where I physically report to work. My current assigned job site is 1302 Pleasant Grove Blvd, Roseville, CA 95747. The address at 7621 Painted Desert Dr, Roseville, CA 95747

was the initial reporting location where I was directed to meet the project supervisor at the start of this assignment; it was a one-time meeting point, not an ongoing worksite. Please also note that an active construction site will typically appear as a vacant or undeveloped lot on real estate websites such as Zillow, since those sites reflect parcel records rather than active construction projects. I am happy to provide documentation from Auburn Constructors confirming my job site assignment if that would be helpful.

2. Duration at 1302 Pleasant Grove Blvd - I do not know how long this assignment will last. Job site assignments are determined by my employer based on project needs, and I will notify you immediately if my assigned site changes so that transportation records remain accurate. You are welcome to call ABC Norcal for further confirmation.

TRANSPORTATION REIMBURSEMENT: JUNE 15 THROUGH JULY 2, 2026

Thank you for processing the June reimbursement. Your count of 12 workdays in June is correct; I began work on June 15, 2026, and there were 12 weekdays from June 15 through June 30. However, one adjustment is needed, along with coverage of the two July workdays before the rental begins.

On the afternoon of June 30, and on July 1 and July 2, I did not have use of a personal vehicle and had to purchase Uber rides to travel between my residence and the worksite because transportation assistance was not yet in place. These were purchased transportation rather than operation of a personal vehicle, so I am requesting reimbursement of the actual documented fares for those trips, with the remaining days reimbursed under the mileage method you proposed. Itemized Uber receipts showing date, route, and fare are attached.

My requested reimbursement for our of pocket transportation is as follows:

1. Mileage method, 11 driving days (June 15 through June 29): $44.7 \text{ miles} \times \$0.21 = \$9.39 \text{ per day}$
 $\times 11 \text{ days} = \103.29
2. June 30: I was transported to the worksite that morning by a private party and paid cash for gas - I didn't get the receipt. My return trip was by Uber: \$55.93 - with the receipt attached.
3. July 1: Uber to worksite, \$31.40 (Receipt 2). Uber return, \$34.41 (Receipt 3). Day total: \$65.81.
4. July 2: Uber to worksite, \$30.94 (Ride confirmation 1). Uber return, \$34.94 (Ride confirmation 2). Day total: \$65.88

Total: \$290.91 - if I find other receipts I will submit.

A note on the receipt dates: Uber receipt headers reflect the booking date rather than the travel date. The payment timestamps on each receipt establish the actual trip dates, and the attached expense summary lists each trip by its payment timestamp. For my arco receipts, since I used arco cards - the receipts are the only ones I have but they are not dated.

A note on pick-up and drop-off addresses shown on the Uber receipts: the active construction site at 1302 Pleasant Grove Blvd does not have a sidewalk, driveway, or safe curbside stopping point for rideshare vehicles. Pick-ups and drop-offs therefore occur at the nearest safe walkable locations on the same block, including 1501 Misty Wood Dr (a park at the corner of the block) and 1271 Pleasant Grove Blvd. All trips shown originate from or terminate at the worksite block.

Finally, I am attaching fuel receipts totaling \$117.74 from the June driving period for documentation purposes. My actual fuel costs exceeded the mileage-based calculation.

Thank you for moving this forward. Please confirm the revised reimbursement amount and let me know if you need anything further from me before the July 3 pick-up.

Sincerely,

Garrett Madden

On Wed, Jul 1, 2026 at 5:03 PM Han, Peter@DOR <Peter.Han@dor.ca.gov> wrote:

Hello Garrett,

I am writing to let you know that we are moving forward with authorizing a rental vehicle for your transportation needs. DOR provides rental assistance in two-week periods, so the vehicle will need to be returned on Friday **July 17, 2026 before 6pm**.

Transportation details are below:

- Travel Days: Monday through Friday
- Route: 3620 Duckhorn Drive, Apt. 1003, Sacramento, CA 95834 to 1302 Pleasant Grove Blvd, Roseville, CA 95747 (round trip)
- Mileage: 44.7 miles
- Pick-Up Date: July 3, 2026
- Pick-Up Location: Enterprise, 4107 Northgate Blvd, Sacramento, CA 95834
- Return Date: July 17, 2026
- Return Location: Same as pick-up
- Insurance: DOR will only provide Collision and liability

Please be aware a new vehicle will be ready for pick up starting on July 18th with a new authorization.

Now I need clarifying information to understand the following info that has been provided.

To move forward with transportation assistance in the form of a reimbursement check, I need to verify your correct worksite address and how long you will be working at that location.

You have provided several different addresses:

- 1302 Pleasant Grove Blvd, Roseville, CA 95747 is your current work site address.
- 7621 Painted Desert Dr, Roseville, CA 95747
- The provided address of your employer location from a previous email looks like its a vacant lot according to Zillow.
- Auburn Constructors LLC, 730 W Stadium Ln, Sacramento, CA 95834
- The name of your actual employer reflects a Sacramento address.

As a one-time exception, the mileage reimbursement for June would be calculated as follows:

44.7 miles x \$0.21 = \$9.38 per day

\$9.38 x 12 workdays in the month of June = **\$112.56**

Before I can issue this reimbursement, please confirm:

1. The correct address of your employer
2. How long will you work at the address 1302 Pleasant Grove Blvd in the month of July 2026?

Once I have this information, I can finalize the transportation assistance.

Thank you, and I look forward to your response.

Sincerely,

Peter Han, M.S.

Vocational Rehabilitation Counselor

721 Capitol Mall, Suite 110

Sacramento, CA 95814

(916)-558-5321 direct line

(916)-558-5300 front office

CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If

you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

Attachment

conv_travel.pdf

Attached to the email above.

Date	Mode of Travel	To-Work Details	From-Work Details	Cost
06/15/26		44.7-mile	Same	
06/16/26		44.7-mile	Same	
06/17/26		44.7-mile	Same	
06/18/26		44.7-mile	Same	
06/19/26		44.7-mile	Same	
06/22/26		44.7-mile	Same	
06/23/26		44.7-mile	Same	
06/24/26		44.7-mile	Same	
06/25/26		44.7-mile	Same	
06/26/26		44.7-mile	Same	
06/29/26		44.7-mile	Same	
06/30/26		44.7-mile	Same	
07/01/26		44.7-mile	Same	
07/02/26		44.7-mile	Same	

Source: garrettmadden479@gmail.com

Subject: Concerning your new authorization from the Department of Rehabilitation

From: Dept. of Rehabilitation <salesforce-vrc-email@dor.ca.gov>

To: garrettmadden479@gmail.com <garrettmadden479@gmail.com>

Date: Fri, 31 Jul 2026 21:04:28 +0000 (GMT)

dor_logo_wide

Hello Garrett Madden,

An authorization for goods and/or services for you has been issued by the Department of Rehabilitation.

| Authorization: | NMED538089930 | | Goods/Service: | Vehicle Rental | | Dates of Service: | Start Date: 8/1/2026 End Date: 8/14/2026 | | Issued: | 7/31/2026 | | Vendor Name: | EAN Services, LLC | | Issued By: | Kortney McLean | | Branch: | Northern Sierra District | | Authorized By: | Gladsona Somalal | | Counselor Email: | Gladsona.Somalal@dor.ca.gov |

No action is necessary at this time. This email is for notification only. If any action is required, you will receive a follow up email that will include the authorization attachment and additional instructions.

If you have questions or concerns about this authorization, please contact the Department of Rehabilitation Counselor: Gladsona.Somalal@dor.ca.gov.

Sincerely,

Department of Rehabilitation

Please be advised that this is a no-reply inbox. Please forward your message to the appropriate DOR contact.

Source: garrettmadden479@gmail.com

Subject: RE: Travel Reimbursement Request
From: Keller, Esther@DOR <Esther.Keller@dor.ca.gov>
To: Garrett Madden <garrettmadden479@gmail.com>
Date: Tue, 11 Aug 2026 18:31:37 +0000

Hello Garrett,

Thank you for your email response.

We had agreed to provide you with two months of support with transportation assistance, which included the mileage reimbursement and rideshare fees and car rental services.

This message is to inform you that, at this time, we will need additional information from you to further evaluate your request for an extension of the vehicle rental. Until then, we cannot extend the transportation assistance of a car rental beyond August 14, 2026. DOR agreed to provide transportation assistance for two months after becoming employed. That two months will end August 14, 2026.

If you would like DOR to consider an extension, and in accordance with **CCR 7161.5** regarding transportation services for employed participants, please complete the attached Financial Statement form and the Income and Living Expenses table. DOR will need to review this information before an extension can be considered. **Please return this information by 5:00 pm on August 12, 2026.**

Lastly, I have attached a Travel Table to identify your methods of transportation to and from work for the two weeks prior to the car rental assistance.

§ 7161. Transportation Services---General.****

(a) Transportation as defined in section 7029:

(1) Shall be provided as a supportive service when necessary to provide for those travel expenses resulting from:

(A) A determination of rehabilitation potential.

(B) The provision of counseling and placement services.

(C) The individual's participation in a completion of an approved program of vocational rehabilitation services.

(D) The provision of post-employment services.

(2) Shall not be provided as a sole service because a supportive service is one which only contributes to the individual's ability to receive the benefit of other vocational rehabilitation services. Alone, it is not a vocational rehabilitation service.

(3) Shall not be provided for travel expenses caused by or required solely for personal, social, recreational or other non-vocational reasons.

(4) Shall be provided only to a individual who is engaged in suitable employment as defined in section 7011 under either of the following circumstances:

(A) Until the individual is financially capable of assuming the cost as determined in accordance with section 7161.5 or until the case is closed in accordance with section 7179.2, whichever occurs first.

(B) In accordance with (e).

(b) Prior to provision of any transportation services the Counselor shall determine both of the following:

(1) Whether the individual is eligible for similar benefits in accordance with Sections 7196 through 7198. If eligibility exists, the Counselor shall follow the procedures specified in those regulations.

(2) The ability of the individual to financially participate in accordance with sections 7190 through 7194. If the client is able to financially participate, the procedures for payment specified in those regulations shall be followed.

(c) The mode of transportation provided shall be the least costly mode which meets the special needs of the individual. Modes of transportation include, but are not limited to:

(1) Publicly owned or contracted transportation such as buses, dial-a-ride and rapid transit.

(2) Transportation available through community resources.

(3) Client-owned vehicles.

(4) Privately owned transportation such as taxi cab, limousine or paratransit companies and charter buses.

(5) Car pools and payment to co-workers.

(6) Car rental agencies.

(d) Additional authorization criteria and rates of payment for specific modes of transportation shall be set by the Department pursuant to sections 7162 through 7163.5.

(e) Once a case is closed because the individual is rehabilitated, transportation services shall be provided only upon written approval of the Rehabilitation Supervisor. The Rehabilitation Supervisor's approval shall be based upon such criteria as verification that:

- (1) The services are necessary to support an over-all program of post-employment services as defined in section 7176.
- (2) The services are requested within 12 months of the individual's case closure.
- (3) The requirements of (b) have been met.

Note: Authority cited: Sections 19006 and 19016, Welfare and Institutions Code. Reference: Sections 19018 and 19150, Welfare and Institutions Code; and 34 CFR Sections 361.5 and 361.48.

§ 7161.5. Transportation Services---Employed Clients.****

(a) For the purposes of section 7161(a)(4)(A), a client shall be deemed to be financially capable of assuming the cost of transportation after the client has received one full month of salary or wages unless there is evidence that undue financial hardship exists.

(b) Undue financial hardship means that the client's income, minus mandatory payroll deductions, and liquid assets for the month are insufficient to meet the current costs of transportation to and from employment in addition to all of the following:

(1) The average monthly costs, established in accordance with (c), of:

- (A) Housing.
- (B) Utilities, including basic rate for phone.
- (C) Clothing required for employment.
- (D) Food.
- (E) Monthly medical and dental services.
- (F) Child care necessary for employment.
- (G) Court ordered child or spousal support.

(2) Unusual or unforeseen necessary expenses including such occurrences as:

- (A) Deposits required for a client to move into more suitable housing.
- (B) Repair or replacement of personal belongings damaged due to fire, earthquake or other natural disaster.
- (C) Other similar occurrences.

(c) For the purposes of (b)(1), the average monthly costs shall be established by averaging the prior two months actual costs unless the Counsel-

or and client agree upon a different methodology for a particular item; for example, the client has paid for child care for only one month.

(d) Except as specified in section 7161(e), transportation services shall not be authorized after the client has received one full month of wages or salary, without the approval of the District Administrator. The District Administrator's decision shall be based upon such criteria as verification that:

(1) The conditions specified in section 7161(b) and (c) have been met.

(2) Undue financial hardship pursuant to subsection (b) of this section exists.

(e) In no instance shall a case, which would otherwise be closed in accordance with section 7184, remain open solely because a client is not financially capable of assuming the cost of transportation.

Esther Keller

Service Coordinator

Capitol Mall Branch Office

721 Capitol Mall, Suite 110

Sacramento, CA 95814

(916) 558-5320 Direct line

(916) 558-5300 Front office

(916) 558-5303 Fax

Pronouns: she, her, hers

CONFIDENTIALITY NOTICE:****

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

From: Keller, Esther@DOR

Sent: Thursday, July 23, 2026 3:49 PM

To: Garrett Madden garrettmadden479@gmail.com

Cc: Colvin, Aimee@DOR Aimee.Colvin@dor.ca.gov; Han, Peter@DOR Peter.Han@dor.ca.gov; Zapanta, Kamie@DOR Kamie.Zapanta@dor.ca.gov

Subject: Travel Reimbursement Request

Good afternoon, Garrett,

Thank you for providing the detailed information regarding your transportation and reimbursement request. To move forward with reviewing and finalizing the reimbursement, please complete the table attached to the best of your ability with the correct mode of travel and associated cost for each date. This will ensure all information is clear and documented accurately.

Please review and fill in the "Mode of Travel" and "Cost" fields as applicable.

Once you return the completed table, we will proceed with reviewing your reimbursement request.

Please let me know if you have any questions or need assistance completing the chart.

Thank you,

Esther Keller

Service Coordinator

Capitol Mall Branch Office

721 Capitol Mall, Suite 110

Sacramento, CA 95814

(916) 558-5320 Direct line

(916) 558-5300 Front office

(916) 558-5303 Fax

Pronouns: she, her, hers

CONFIDENTIALITY NOTICE:****

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

From: Garrett Madden <garrettmadden479@gmail.com>

Sent: Wednesday, July 1, 2026 6:40 PM

To: Han, Peter@DOR <Peter.Han@dor.ca.gov>

Cc: Keller, Esther@DOR <Esther.Keller@dor.ca.gov>; Colvin, Aimee@DOR <Aimee.Colvin@dor.ca.gov>; MacNicholl, Monica A@DOR <Monica.MacNicholl@dor.ca.gov>; O'Sullivan, Sharon M@DOR Sharon.O'Sullivan@dor.ca.gov

Subject: Re: DOR update Car rental

[EXTERNAL EMAIL] This email originated outside DOR. Use caution when clicking links or opening attachments, especially if the sender is unknown or the message is unexpected.

Helpful Resource:

Refer to the IT Service Center KB article titled '*How to Identify Phishing Emails*' for guidance on recognizing phishing attempts.

Please provide a decision letter for this approval as well as the original denial for vehicle purchase so I have access to exercise my right to appeal if needed. I have requested several times.

I sent this information to you before.

Thank you for authorizing the rental vehicle. I confirm the details as stated: pick-up on Friday, July 3, 2026 at Enterprise, 4107 Northgate Blvd, Sacramento, CA 95834, and return to the same location on Friday, July 17, 2026 before 6:00 pm, with a new authorization beginning July 18, 2026. Travel days are Monday through Friday between my residence and my worksite, a 44.7 mile round trip.

Two logistical questions on the rental: (1) Can you confirm the July 18 pick-up under the new authorization is arranged for a Saturday, or advise the correct pick-up day if the Enterprise location is closed that day? (2) Can you confirm what the DOR-provided collision and liability coverage includes, and whether I am responsible for any deductible, supplemental liability, or damage waiver? I want to make sure there are no coverage gaps before I take possession of the vehicle.

TO ANSWER YOUR VERIFICATION QUESTIONS

1. Employer address. My employer of record is Auburn Constructors, LLC (through ABC Norcal), whose corporate office I believe is located at 730 W Stadium Ln, Sacramento, CA 95834. As is standard in the construction industry, the employer's corporate office address is different from the job site where I physically report to work

Attachment

conv_income.pdf

Attached to the email above.

Income and Living Expenses

Expense	August 2026	September 2026	October 2026
Rent			
Utilities			
Medical			
Dental			
Child Support			
Child Care			
Income			

Attachment

24_DR233 Financial Statement (2).pdf

Attached to the email above.

STATEMENT OF FINANCIAL STATUS

DR233 (REV 05/20)

Page 1 of 2

Consumer's Name (Last, First, Middle Initial)

PART I – TO BE COMPLETED BY CONSUMER**1. PLEASE LIST YOUR LIQUID ASSETS:**

Cash	Checking*	Savings*	Total Amount
Negotiable Bonds	Stocks	Similar Accounts*	

2. PLEASE LIST YOUR MEDICAL EXPENSES: (Do not include insurance premiums, routine medical, and dental services.) (Use additional pages if needed.)

Item	Total Cost	Number of Payments	Monthly Payment(s)
a.			
b.			
*Do not include any of the current month's income which has been deposited into the account.		Total Amount	

PART II – TO BE COMPLETED BY THE COUNSELOR
☐ Client meets need factor because receiving SSDI, SSI/SSP or Public Assistance.

3. CLIENT MONTHLY INCOME (Include Spouse/Parent)		
4. INCOME EXEMPTION (From TABLE in RAM Chapter 12, Exhibit B)		
5. SURPLUS INCOME (Subtract line 4 from 3 – if less than 0, enter 0)		
6. TOTAL LIQUID ASSETS (From line 1)		
7. EXEMPTION FOR CLIENT	\$2,000.00	
8. EXEMPTION FOR ADDITIONAL HOUSEHOLD MEMBERS	x \$750.00 =	
9. TOTAL EXEMPT ASSETS (Add lines 7 and 8)		
10. SURPLUS LIQUID ASSETS (Subtract line 9 from 6 – if less than 0, enter 0)		
11. TOTAL SURPLUS INCOME AND ASSETS (Add lines 5 and 10)		
12. TOTAL MEDICAL EXEMPTIONS (From line 2)		
13. CONSUMER'S MONTHLY CONTRIBUTION (Subtract line 12 from 11 – if less than 0, enter 0)		

PART III – TO BE COMPLETED BY COUNSELOR AND CONSUMER

I AGREE TO PAY (IN CASH) TO THE DEPARTMENT

(From Line 13) PER MONTH FOR

MONTH(S).

THIS WILL BE APPLIED TOWARD THE COST OF

FOR

SERVICES.

I CERTIFY THAT ALL INCOME, LIQUID ASSETS, ADDITIONAL HOUSEHOLD MEMBERS AND MEDICAL EXPENSES LISTED ABOVE ARE COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY CHANGES TO THESE ITEMS, INCLUDING CHANGES IN LIQUID ASSETS OF \$100 OR MORE, MUST BE REPORTED TO THE DEPARTMENT AND MAY RESULT IN MODIFICATION OF THIS AGREEMENT.

Consumer/Parent or Guardian Signature	Date	Counselor Signature	Date
			

Source: garrettmadden479@gmail.com

Subject: Fair Hearing Statement of Position & Exhibits
From: Zapanta, Kamie@DOR <Kamie.Zapanta@dor.ca.gov>
To: garrettmadden479@gmail.com <garrettmadden479@gmail.com>
Date: Thu, 8 Oct 2026 03:52:28 +0000

Hello Mr. Madden,

Please see the attached Statement of Position and Exhibits for the Fair Hearing scheduled for Monday, October 12, 2026.

Please let me know if you have any questions.

Wishing you a wonderful evening.

Thank you,

Kamie

Kamie Zapanta

Team Manager

Capitol Mall Branch Office

721 Capitol Mall, Suite 110

Sacramento, CA 95814

(916) 720-9301 direct line

(916) 558-5300 front office

CONFIDENTIALITY NOTICE.****

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

Attachment

26_Exhibit 1 - DR 107w.AR.pdf

Attached to the email above.

REQUEST FOR MEDIATION AND/OR FAIR HEARING

DR 107 (Rev. 01/2022)

Page 1 of 2

PRIVACY STATEMENT - The information requested on this form, including name and contact information, is necessary for identification. Failure to provide the information requested may result in delays in services.

Consumer Name Garrett Madden		DOR Counselor Name Peter Han for Gladsona Somalal	
Telephone Number 916-	Check if TTY ☐	E-mail Address garrettmadden479@gmail.com	
Mailing Address 3620 Duckhorn Drive	City Sacramento	State CA	Zip Code 95834

For information about Mediation and Fair Hearings you may contact the Mediation and Fair Hearing Office at appealsinfo@dor.ca.gov, (916) 558-5860 (voice), or (916) 558-5862 (TTY). You may also visit <http://www.dor.ca.gov/RAB/index.html>.

If you need assistance filling out this form or resolving a problem with DOR, please contact the Client Assistance Program administered by Disability Rights California at 1-800-776-5746 (voice) or 1-800-719-5798 (TTY). You may also visit www.disabilityrightscalifornia.org/about/cap.html.

I am dissatisfied with a decision or action by the DOR and request **one or both** of the following:

- ☐ **Mediation** - I request that an impartial mediator assist me and the DOR in resolving our different viewpoints regarding a DOR decision made or action. **Mediation will be held within 25 calendar days from receipt of your request, unless you agree to a later date.**
- ☒ **Fair Hearing** - I request a hearing before an impartial hearing officer who will review a decision made or action taken by the DOR. **The hearing will be held within 60 days from receipt of your request and the decision will be issued within 30 days of the hearing.**

Describe the DOR decision made or action taken that you disagree with, including the date of the decision or action, why you disagree, and how you would like the problem solved.

I am appealing the May 26, 2026 Administrative Review decision because the finding it relied on no longer fits my situation. That decision concluded transit was an available, least-costly option under CCR § 7161(c) based on a route to my Sacramento training site. Since then, the DOR-sponsored program (ABC NorCal and BuildingStrong) placed me in a job at 1302 Pleasant Grove Blvd, Roseville, with a 7:00 a.m. start, and no transit route reaches it on time: the trip crosses three agencies with multiple transfers, and Roseville Transit does not start early enough to get me there by 7:00 a.m. For this job, transit is not an available option at all, so it cannot be the least-costly one. Because the position is ongoing with no end date, an open-ended rental costs more over time than a one-time used-vehicle purchase. I ask that DOR re-evaluate my transportation assistance based on my current employment and consider a vehicle purchase as the least-costly option.

REQUEST FOR MEDIATION AND/OR FAIR HEARING

DR 107 (Rev. 01/22)

Page 2 of 2

Consumer Name Garrett Madden

Consumer's Authorized Representative Name:

Client Assistance Program

☐ Yes☐ No

Email Address

Mailing Address

City

State

Zip Code

To participate in mediation and/or fair hearing, I will need the following accommodations (such as interpreters, assistive listening systems, or alternate formats):

What is your preferred language?

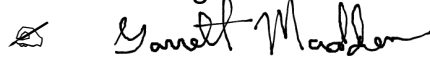
English

What is your preferred mode of communication?

Please list all dates you are not available to attend a mediation or hearing over the next 3 months.
Monday-Friday anytime before 330pm due to job placement.

By signing this form, I consent to the release of information on this form and the information necessary to carry out the mediation and/or fair hearing to the mediator, impartial hearing officer, and their staff, and my representative, if any.

Consumer Signature



Date Signed

6/16/2026

To File Your Request:Mail or Personal Delivery:

Department of Rehabilitation
Mediation and Fair Hearing Office
721 Capitol Mall
Sacramento, CA 95814

OREmail to:appeals.info@dor.ca.gov

Dear Garrett,

It was a pleasure meeting with you on Wednesday, May 20th, regarding the Administrative Review you requested, which I received via email on May 6th, 2026. Although we could not meet the original deadline due to scheduling conflicts, the purpose of our meeting was to provide you with the opportunity to clarify your concerns and the resolution you are seeking. This letter serves as the Administrative Review decision concerning your complaint.

Issues

You are requesting assistance with reliable transportation to participate in the Department of Rehabilitation (DOR)—sponsored pre-apprenticeship program.

Resolution Requested

You requested a car rental to attend the training.

Background and Decision

On April 14th, you emailed your Rehabilitation Counselor (RC), Gladsona Somalal, requesting transportation assistance for the BuildingStrong Academy pre apprenticeship program, which you began on April 27th. The program runs Monday through Friday, from 8:00 a.m. to 5:00 p.m., and is located at 9332 Tech Center Drive, Sacramento, CA 95826—approximately 16 miles from your home. You shared that you are currently a full-time student and had to leave a stable job to attend this training. You do not own a personal vehicle and rely on family and friends for transportation. You stated that public transportation is not a viable option due to your health conditions of diabetes, asthma, and depression. You also noted that using public transportation would take approximately 108 to 194 minutes per trip and include about 38 minutes of walking. You stated that this would create undue hardship and requested that DOR provide a car rental.

On April 29th, the RC informed you that a car rental could not be approved due to DOR regulations, which require the least costly mode of transportation be used (CCR § 7161(c)). She explained that

public transportation is considered an available option for attending your training. She also provided information on obtaining a reduced fare disability pass through SacRT and advised that you would be issued 50 dollars per month in transportation support.

Decision

In accordance with Cal. Code Regs. tit. 9, § 7161(c), the mode of transportation provided must be the least costly option that meets your disability related needs. SacRT offers several routes that would get you to your training location, including one departing at 5:57 a.m. and arriving at 7:27 a.m. A monthly nondisabled pass costs \$100.

Based on this information and to support your participation in the program, I am directing your counselor to increase your monthly transportation assistance to 100 dollars.

You also have another option: DOR can reimburse a driver at .21 cents per mile, which would total approximately \$134 per month (33.6 miles per week × 4 weeks × .21 per mile). If you prefer this reimbursement method over a flat monthly amount, please inform your counselor. I also want to encourage you to continue to work with your counselor to reach your employment goal.

Should you disagree with the above decision, you have the right to request a fair hearing within 30 days in receipt of this letter. You may request a fair hearing by contacting ppealsinfo@dor.ca.gov or by calling (916) 558-5860. Your rights and remedies are attached.

Sincerely,

Leslie Rubalcava

Attachment

27_Exhibit 2A - G. Madden - Request for Services.pdf

Attached to the email above.

CONFIDENTIAL FOR AGENCY USE ONLY

The following Interested Person has requested services, this form complies with the request for services. No other application forms/enrollment documents need to be completed.

PERSONAL INFORMATION for Garrett Madden

1. Name

Legal First & Last Name: Garrett Madden

Other Name(s) Used/Preferred Name: Garrett

Gender: Male

Pronoun(s):

Birthdate: April 18, 1979

2. Address

Home Address

5400 clark ave

232

Lakewood, CA 90712

Mailing Address

NOT PROVIDED

Participant Email Addresses Primary

gmadden79@gmail.com Yes

Participant Phone Numbers Primary

3238232457 Yes

3. Characteristics

Races/Ethnicities: Black or African American

Primary Language: n/a

Needs Interpreter? No

Needs American Sign Language Interpreter: No

Preferred Correspondence Format: Phone

Modes of transportation: Public Transportation

Wants to work with special skill:

4. Contacts (Optional)

NOT PROVIDED

APPLICATION INFORMATION FOR Garrett Madden

1. Basic

Application Date: March 7, 2023

Living Arrangement at Application: Private Residence

Chosen Office/District: District 530 - Unit B

Zip Code at Application: 90712

Currently Enrolled in School: No

Referral Information

Referral Date: March 7, 2023

Referral Source:

What services are you most interested in?:

2. Financial

NOT PROVIDED

3. Medical Insurance Information

Medical Insurance Types Options: NOT PROVIDED

RSA-911 Programs

Military Experience? NOT PROVIDED

Veteran: No

DISABILITY INFORMATION for Garrett Madden

1. Disability Documentation:

- Describe your disability or disabilities:

- How does your disability or disabilities impact you in your daily activities, school, or current or future job?
- How can DOR help you?

APPLICATION DOCUMENTATION for Garrett Madden

1. Documentation

NONE PROVIDED

CONFIDENTIAL FOR AGENCY USE ONLY

Attachment

28_Exhibit 2C - G. Madden DR212.pdf

Attached to the email above.

NOTICE OF ELIGIBILITY AND PRIORITY FOR SERVICES

DR 212 (Rev. 05/19)

Applicant Name and Address Garrett Madden 3230 Arena Blvd. Ste. 245-274 Sacramento, CA 95834	Counselor Name: Kashkouli, Sharon R.
	Counselor Phone: (562) 984-2333 Check if TDD ☐
	Counselor Email: Sharon.Kashkouli@dor.ca.gov

This **NOTICE OF ELIGIBILITY AND PRIORITY FOR SERVICES** informs you that as of 03/28/2023 your eligibility and priority for services have been determined based on the following criteria:

- ☐ **Presumptive Eligibility Applied:** You are presumed eligible because you receive Supplemental Security Income (SSI) and/or Social Security Disability Insurance (SSDI) because of your disability as verified by:

OR

- ☒ You have met the eligibility criteria because you have a physical or mental impairment which constitutes or results in a substantial impediment to employment based on at least one of the following:
- Rehabilitation Counselor direct observations and professional judgment.
 - Information from your doctor or another valid source.

AND

You require vocational rehabilitation services to prepare for, secure, retain, advance in, or regain employment that is consistent with your strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice.

NOTICE OF ELIGIBILITY AND PRIORITY FOR SERVICES

DR 212 (Rev. 05/19)

Your Priority Category

Priority Category: Priority Category 2

Application Date: 03/25/2023

Priority Category Currently Being ServedPriority for ServicesServing?Application Date On or Before

Priority Category 1

Yes

Priority Category 2

Yes

Priority Category 3

Yes

NOTICE OF ELIGIBILITY AND PRIORITY FOR SERVICES

DR 212 (Rev. 05/19)

- ☒ We are able to serve you at this time. We need to develop your Individualized Plan for Employment (IPE) within 90 days of your eligibility determination date of 03/28/2023. Review the Plan Development Information on page 4.

The next step is to complete one or more of the following actions:

- Attend your appointment scheduled on _____ at _____.
- Call us at 5629842333 for an appointment.
- Other:

- ☐ We are unable to serve individuals in your priority category at this time due to insufficient resources. You have been placed on the waiting list. You have the right to request a re-evaluation of your priority category if you believe your situation has changed sufficiently to place you in a different priority category. To request re-evaluation, please contact the counselor identified above.

Please see the Consumer Information Handbook or the Department's website (www.dor.ca.gov) for general information on Order of Selection and the current Declaration of Order of Selection.

Your rights and remedies, including your right to request an appeal, are attached.

For more information, see CCR, title 9, section 7055(a) at <http://oal.ca.gov>.

Rehabilitation Counselor Signature:

 Sharon K

Date Signed:

3/28/2023

NOTICE OF ELIGIBILITY AND PRIORITY FOR SERVICES

DR 212 (Rev. 05/19)

PLAN DEVELOPMENT INFORMATION

Your Individualized Plan for Employment (IPE) is a written plan describing the necessary steps to reach your employment goal. If you prefer, you may choose a representative to assist you in developing your IPE.

Your counselor will:

- Give you information and assistance to develop your plan.
- Be available to help you complete the necessary forms including form DR 215 Individualized Plan for Employment.
- Explain the Department's guidelines and the criteria for financial commitments in the plan, if needed.
- Make referrals to other sources for technical assistance, if needed.
- Ensure your plan is:
 - o Appropriate for your needs.
 - o Complete and consistent with Department requirements.
 - o Likely to lead to employment.
- Answer your questions about the vocational rehabilitation process.

Your DR 215 plan must include certain components (according to federal law), which are included in the Mandatory Components of an Individualized Plan for Employment section below. You will be given information and have the chance to make choices about your employment goal, services, service providers, and how the services will be arranged for and obtained.

When you and your counselor are satisfied with your plan, you will both sign the plan document. You will receive a copy of the plan in writing and, if appropriate, in your preferred mode of communication.

You and your counselor will review your progress periodically, and review your plan at least once a year. If your plan needs to be changed, you and your counselor will sign an amendment.

The Department is pleased to assist you in making your employment goal a reality.

NOTICE OF ELIGIBILITY AND PRIORITY FOR SERVICES

DR 212 (Rev. 05/19)

**MANDATORY COMPONENTS OF AN INDIVIDUALIZED PLAN FOR
EMPLOYMENT**

Title IV Rehabilitation Act Amendments of 1998 Section 102 (b)(3)

Regardless of the approach selected by an eligible individual to develop an individualized plan for employment, an individualized plan for employment shall, at a minimum, contain mandatory components consisting of --

- (A) a description of the specific employment outcome that is chosen by the eligible individual, consistent with the unique strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice of the eligible individual, and, to the maximum extent appropriate, results in employment in an integrated setting;
- (B) (i) a description of the specific vocational rehabilitation services that are --
 - (I) needed to achieve the employment outcome, including, as appropriate, the provision of assistive technology devices and assistive technology services, and personal assistance services, including training in the management of such services; and
 - (II) provided in the most integrated setting that is appropriate for the service involved and is consistent with the informed choice of the eligible individual; and(ii) timelines for the achievement of the employment outcome and for the initiation of the services;
- (C) a description of the entity chosen by the eligible individual or, as appropriate, the individual's representative, that will provide the vocational rehabilitation services, and the methods used to procure such services;
- (D) a description of criteria to evaluate progress toward achievement of the employment outcome;
- (E) the terms and conditions of the individualized plan for employment, including, as appropriate, information describing --
 - (i) the responsibilities of the designated State unit;
 - (ii) the responsibilities of the eligible individual, including--
 - (I) the responsibilities the eligible individual will assume in relation to the employment outcome of the individual;
 - (II) if applicable, the participation of the eligible individual in paying for the costs of the plan; and
 - (III) the responsibility of the eligible individual with regard to applying for and securing comparable benefits as described in section 101(a)(8); and
 - (iii) the responsibilities of other entities as the result of arrangements made pursuant to comparable comparable services or benefits requirements as described in section 101(a)(8);
- (F) for an eligible individual with the most significant disabilities for whom an employment outcome in a supported employment setting has been determined to be appropriate, information identifying --
 - (i) the extended services needed by the eligible individual; and
 - (ii) the source of extended services or, to the extent that the source of the extended services cannot be identified at the time of the development of the individualized plan for employment, a description of the basis for concluding that there is a reasonable expectation that such source will become available; and
- (G) as determined to be necessary, a statement of projected need for post-employment services.

YOUR RIGHTS AND REMEDIES

DR 1000 (Rev. 10/13)

If questions or issues arise while you are an applicant or a consumer of the Department of Rehabilitation (DOR), talk with your Rehabilitation Counselor. You may also request an informal meeting with your Rehabilitation Counselor's Team Manager.

You have the right to request an administrative review with the District Administrator. You may also seek, as set forth below, an administrative review concurrently with a formal request for mediation and/or fair hearing. However, most problems can be resolved informally and more quickly at the district level. You may bring a family member, other representative, or advocate with you any time you meet with the DOR staff.

CLIENT ASSISTANCE PROGRAM. To seek an advocate or for information regarding vocational rehabilitation services or the appeal process, the Client Assistance Program (CAP) administered by Disability Rights California may be available to assist you. Information is available at the Disability Rights California website (<http://www.disabilityrightscalifornia.org>), by phone at 800-776-5746 or 800-719-5798 TTY/TDD (Telecommunication Device for the Deaf and Hard of Hearing), or at the DOR website (<http://www.dor.ca.gov>).

You have the right to take any of the following steps should issues arise:

REHABILITATION COUNSELOR. Most misunderstandings and issues can be resolved by talking them over with your Rehabilitation Counselor. It is your responsibility to let your Rehabilitation Counselor know there is an issue.

TEAM MANAGER. If you believe that you and your Rehabilitation Counselor cannot resolve the issue, you may request an informal meeting with the Team Manager to discuss the issue.

ADMINISTRATIVE REVIEW. You may request an administrative review by the District Administrator within one year of the action or decision. An administrative review decision will be rendered within 15 calendar days of the date of your request, unless you agree to a later date. If you disagree with an administrative review decision, you may file a request for fair hearing within 30 calendar days of the receipt of the written decision of your administrative review.

MEDIATION. Mediation is another option for resolving disputes with the DOR. You may file a request for confidential mediation within one year of the DOR action or decision with which you disagree. A qualified, impartial mediator can help you find solutions that are satisfactory to you and the DOR. If the DOR agrees to mediate, the mediation will be held within 25 calendar days from receipt of the request, unless you

YOUR RIGHTS AND REMEDIES

DR 1000 (Rev. 10/13)

agree to a later date. A written request for mediation and/or fair hearing may be filed concurrently.

FAIR HEARING. If you are dissatisfied with any action or decision of the DOR relating to your application or receipt of vocational rehabilitation services, you may file a request for a fair hearing within one year of the DOR action or decision or within 30 calendar days of the receipt of written decision of your administrative review (see above). A fair hearing will be held within 60 calendar days of the receipt of your written request, unless you agree to a later date. At the hearing, you may appear in person, and may be accompanied by a representative or advocate of your choice. It may be to your benefit to first work through the administrative review process or mediation (see above) before requesting a fair hearing. If you are not satisfied with the fair hearing decision, you may file a Writ of Mandate with the California Superior Court within six months of the decision.

To request a mediation and/or fair hearing, please obtain form DR 107 Request for Mediation and/or Fair Hearing from one of the following options: contact the DOR Mediation and Fair Hearing Office by phone at 916-558-5860 or by email at DOR Appeals Info (appealsinfo@dor.ca.gov); visit the DOR website (<http://www.dor.ca.gov>); or contact a CAP advocate (see CAP contact information above).

DISCRIMINATION. If you believe that the DOR or its contractor or grantee has unlawfully discriminated against you because of one or more of the following protected categories, your race, color, religion, ancestry, physical or mental disability, national origin, medical condition, genetic information, sexual orientation, marital status, age, gender, gender identity, gender expression, military status, or veteran status or retaliation, you have the right to pursue the following options: 1) Make an oral or written request for an administrative review to the District Administrator, who oversees the office where your case is assigned. The request should include: your name, address, and phone number; the name and title of the person against whom the complaint is being made; a description of the alleged discrimination; the protected category; and the remedy being sought. 2) File a discrimination complaint directly with DOR's Office of Civil Rights (OCR). For more information or to obtain a discrimination complaint form contact the DOR's OCR directly by phone at 916-558-5850. 3) File a complaint with the U.S. Department of Education's Office for Civil Rights. For more information contact the U.S. Department of Education's Office for Civil Rights directly by telephone at 800-421-3481.

Requests for administrative review and complaints of discrimination must be made within 180 days of the date of alleged discrimination.

Attachment

29_Exhibit 2D - G. Madden - Case Transfer.pdf

Attached to the email above.

CA Department of Rehabilitation

Case Note

Participant Madden, Garrett

Participant ID 577053

Caseload 130-302 - Somalal, Gladsona

1. General

Entry Date 08/21/2024

Author LEE, ISABEL H.

Category Case Note

Share Note Yes

2. Note

Summary Phone call with clt/Transfer request to
Sacramento

Consumer called and reported that he moved to Sacramento and requested the case transfer. QRP updated his address in AWARE (3610 Duckhorn Dr. # 1003, Sacramento, CA 95834) and provided him with Sacramento DOR office information. Consumer agreed to transfer his case to Sacramento DOR office.

Address: 721 Capitol Mall, Sacramento, CA 95814

Phone: (916) 324-1313

=====

QRP attempted to reach out to the consumer at 3:02PM (323) 823-2457 to follow up with his employment status. No response. Left him a voice message.

3. Activities Provided

No items selected

Attachment

30_Exhibit 2E - IPE-Madden-5 (VRC).pdf

Attached to the email above.

Consumer Name and Address Garrett Madden 3610 Duckhorn Dr. # 1003 Sacramento, CA 95834	Counselor Name: Somalal, Gladsona Counselor Phone: (916) 558-5335 Counselor Email: Gladsona.Somalal@dor.ca.gov
Check if TDD ☐	

INDIVIDUALIZED PLAN FOR EMPLOYMENT

My employment goal is: Construction Laborers

My expected completion date is: 12/31/2026

1. Why did we choose this employment goal?
 - I explored options and feel this is a good choice.
 - It matches my interests, abilities and strengths.
 - The job outlook for this type of work is good.
 - I have successfully done this type of work before.

I have exercised my informed choice for the Individualized Plan for Employment (IPE) goal of Construction Laborers. This field will allow me to work in a field that accommodates my barriers to employment and aligns with my strengths, talents, abilities, capabilities, interests, resources, and informed choice.

I agree with this IPE and have been informed of my rights and responsibilities associated with the Department of Rehabilitation (DOR). I am aware of the Client Assistance Program (CAP) and a copy of this IPE will be provided to me. If an additional copy is needed or there are any questions or concerns regarding this plan, please contact DOR.

2. These are the steps I need to accomplish to reach my employment goal:
I will complete the construction labor apprenticeship program at ABC NorCal by attending all required orientation and training sessions.

Program Description:

ABC NorCal's apprenticeship programs are approved by the State of California and the U.S. Department of Labor. Apprenticeship is a unique learning experience that combines on-the-job training and classroom instruction. On-the-job training allows individuals to earn wages while gaining real-world experience. Classroom instruction teaches theory and skill development in a controlled learning environment. Combined, the two instruction processes create a knowledgeable and experienced worker. They offer apprenticeship programs in five trades: carpentry, construction craft laborer, electrical, painting and plumbing.

I will complete the construction labor apprenticeship program. Compared to a college education, there's virtually no cost as the program is funded by various private and public sources. Participant will need to purchase the tools required for the trade. This is a paid on-the-job training. Should I pass the entire program's placement test, once registered in the program, I must complete a minimum of six months of the program in order to receive credit and recognition as a graduate from the ABC NorCal Apprenticeship Program. Classes are held in one or two-week blocks throughout the year and are generally held Monday through Friday, 7:00 a.m. to 3:30 p.m. Some classes are held virtually Monday through Thursday, 4:00 p.m. to 8:00 p.m. I will attend a few mandatory training sessions on Saturdays. Carpentry and Construction Craft Laborer classes are held at the ABC NorCal Livermore Training Facility. Some Carpentry and Construction Craft Laborer classes may be offered at the ABC NorCal Sacramento Training Facility as determined by the ABC NorCal UAC. I may be placed with various contractors in order to gain varied on-the-job training experience. All construction jobs generally require travel to and from jobsites. I can be

dispatched anywhere in Northern California.

I will ensure I am on the call list for work assignments and attend my scheduled work hours consistently. I will perform my job reliably and safely to gain the skills and experience needed to succeed in construction labor. By completing this program, I will achieve my goal of becoming a construction laborer and gain experience that can help me in future employment opportunities.

1. Counseling and Guidance--throughout the duration of this case.
2. Attend to progress evaluation (see section 5 of this IPE).
3. Employment Services--when permissible.
4. Demonstrate appropriate work behaviors.
5. Learn the duties, responsibilities and expectations of the job.
6. Identify and address issues, barriers and/or concerns to the job coach.
7. Maintain acceptable standards of productivity, attendance, safety and social skills.
8. Cooperate with the job coach to meet employer expectations.
9. Stabilize in job setting within 3 months.
10. Avoid activities that are not safe for both physical and mental well-being.

3. These are the services we agreed are necessary to reach my employment goal:

<u>Service Provided</u>	<u>Service Provider</u>	<u>Funded By</u>	<u>Start Date</u>
Counseling/Guidance	DOR		10/2025
Employment Services	DOR Vendor	Agency	10/2025
Clothing	Approved Vendor	Agency	10/2025
Transportation - DOR Consumer	DOR	Agency	10/2025
Business and Vocational Training - Public	ABC NorCal		10/2025
School Supplies	DOR	Agency	10/2025
Books	DOR Vendor	Agency	10/2025

4. How did we choose or arrange these services?

I met with the DOR QRP to discuss employment goals, and the services are based on my needs, abilities, as well as my informed choice. I have decided to pursue employment as a plumber.

Other Responsibilities: I will be responsible for meeting the objectives identified in the IPE including, but not limited to, active participation, reasonable effort, regular attendance at scheduled appointments and training, and maintain regular communication with the QRP regarding progress toward achievement of the employment outcome per CCR 7029.9 (4).

Failure to cooperate, make reasonable effort, lack of regular attendance, or failure to maintain regular communication may result in loss of further services and closure of the record of services per CCR 7029.9 (4).

I have been advised and clearly understand that I am responsible for ensuring that any purchase of goods/services are in accordance with my IPE and are reasonable and necessary for the completion of my IPE. I will not obligate the DOR for the purchase of any goods/services without prior departmental approval. I understand that I cannot substitute nor add goods/services not approved by DOR. Furthermore, I understand that I must submit a receipt for any goods/services purchased through/by DOR. I have also been advised and understand that failure to comply with or the improper use of good/services may result in a recovery of DOR funds and/or termination of program services (CCR - Section 7195 - Improper Disposal

of or Failure to Return Loaned Property).

I am aware that items which may be purchased on my behalf by DOR (e.g. assistive technologies and adaptive aids) are the property of the State of California and may be inspected by departmental staff, and/or their representatives, until such a time when my case is successfully closed by the Department of Rehabilitation. I also understand that DOR may request the return of purchased items, should I acquire newer items and/or my case unsuccessfully closes (CCR - Section 7194 department Loaned Property).

5. How and when will progress toward my employment goal be evaluated?

Progress will be evaluated through my participation in services as well as through discussions and reports between me and my DOR counselor as often as needed regarding plan progress towards successful completion of this IPE. I will meet with my DOR counselor to review progress as needed, and will communicate via email, appointments, and/or phone as needed regarding progress. Should anything arise that would impact or change IPE, I will notify my DOR counselor as soon as possible.

Once in employment services, the DOR team will request monthly progress and attendance reports from the local training vendor and/or employment services vendor. An Annual Review will be conducted yearly on the anniversary of this IPE to review progress towards the employment goal.

6. These are my responsibilities toward the cost of my Plan:

I understand that the DOR is not responsible for any personal expenses such as DMV expenses or general living. If something arises that becomes a barrier to employment but is outside of the scope of what DOR can assist with, DOR counselor can be contacted to assist in seeking resources. I also understand that DOR consumers must seek comparable benefits when and where possible. DOR counselor can be contacted to address any questions pertaining to comparable benefits.

I understand that the DOR will NOT reimburse any items that are not pre-approved by my DOR counselor and obtained through established guidelines set forth by DOR. Written approval must be obtained from DOR counselor for any reimbursement and DOR must be provided with receipts for all DOR expenditures. Reimbursements will NOT be provided without prior written approval from DOR counselor. Any questions or concerns regarding reimbursement can be directed to DOR counselor.

7. What additional services will I need after I reach my employment goal, if any?

None are anticipated at this time but will be made available should the need arise. If additional services are needed after I reach my employment goal, I will contact my DOR counselor and/or reapply for DOR services.

I ACKNOWLEDGE THE FOLLOWING STATEMENTS

- I understand that I have the right to access records maintained by the Department containing my personal information by contacting my counselor. If the Department determines that any portion of my records may be harmful to me, the Department shall notify me in writing that the records cannot be directly disclosed to me and provide the options for releasing the records.
- I understand that except as authorized or required by state or federal law or regulations, my personal information maintained by the Department shall not be disclosed without my signed, informed written consent. See the attached Privacy Statement.
- I understand my right to make informed choices in the development of my individualized plan for employment, and I have exercised my right of informed choice in the development of my plan.
- I understand my right to make informed choices and have exercised informed choice in the selection of the specific employment goal, services, service providers, settings, and methods for arranging for services.
- My employment goal reflects my strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice.
- I understand that my counselor has the responsibility to review, evaluate, and make a determination regarding approval of my plan.
- My counselor has reviewed my rights and responsibilities with me.
- I understand that my plan will be reviewed and evaluated periodically, at least annually, as defined in the plan.
- If changes need to be made to the plan, my counselor and I will discuss the changes and I will sign an amendment.
- I understand that the failure to participate, to cooperate, and/or make a reasonable effort to carry out my plan may result in the closure of my case and the loss of further services.

- I understand that I will only receive services and assistance that are necessary and reasonable for my education, training, and/or placement, and that if I am furnished any item or service that does not meet this standard, I will inform my counselor.
- I understand that the Department will review progress reports, grade reports, receipts, and may take other steps to verify purchases. My failure to provide requested information or the improper use of department funds may result in my reimbursing the Department and could result in the Department closing my case.

By signing below, I acknowledge that my Rehabilitation Counselor has provided me with my Rights and Remedies (DR 1000) and has reviewed our roles and responsibilities with me. I understand that this Individualized Plan for Employment is effective only after the Rehabilitation Counselor and I sign the document, which includes all the attachments listed below.

Consumer Signature: Garrett Madden	Date Signed: 10/15/2025, 9:58 PM
Parent/Guardian/Representative Signature (if needed):	Date Signed:
Rehabilitation Counselor Signature: Gladsona Somalal	Date Signed: 10/8/2025, 2:14 PM

- Attachment – Consumer and Counselor Responsibilities
- Attachment – Privacy Statement
- Attachment – DR 1000 Rights and Remedies
- Attachment – Ticket to Work (for SSI/SSDI Recipients)

Consumer and Counselor Responsibilities

My Responsibilities: I will...

- Be active and fully participate in my employment plan.
- Discuss any changes that may be needed in my plan with my counselor. I understand this may require an amendment or a new plan.
- Review my progress and participate in a plan review with my counselor at least once per year.
- Actively look for work and let my counselor know when I get a job.
- Apply for any comparable services or benefits from other agencies or programs. and, if so, I will let my counselor know so they can help me apply for and use those benefits.
- Get approval from my counselor in advance before buying goods and services related to my plan. Give my counselor enough notice in advance when I need goods and services related to my plan.
- Confirm that I received goods and services and give my counselor receipts for any goods and services purchased.
- Maintain property/equipment loaned to me in good condition, notify my counselor if the property/equipment is lost, stolen, or destroyed, and return loaned property/equipment as requested.

Also, if my plan includes training, I will...

- Apply for financial aid each school year and provide my counselor with my financial aid award letter.
- Take only required courses to meet my employment goal.
- Provide my counselor with purchase receipts, registration confirmation, and grade reports for each term.
- Provide my counselor with verification of my progress at the end of every training term. This could include high school or postsecondary transcript or report card, apprenticeship or training program report, or exam results required for my vocational goal.
- Provide my counselor with verification of training goal completion. This could include high school diploma or equivalency, post-secondary degree, occupational licensure or certification, or other documentation.

Counselor's Responsibilities: I will...

- Be an active partner in the vocational rehabilitation process.
- Provide counseling and guidance to support you throughout your vocational plan.
- Provide information to you so you can make decisions throughout your employment plan.
- Keep your private information confidential according to regulations.
- Discuss any changes that may need to be made to your employment plan and prepare an amendment if needed.
- Regularly review your progress and participate in a plan review, at least once per year.
- Help you get documentation to verify completion of your training goals. This could include high school diploma or equivalency, post-secondary degree, occupational licensure or certification, or other documentation.
- Help you get documentation to verify milestones and measurable skill gains upon completion of each training term. This could include high school or post-secondary transcript or report card, apprenticeship or training program report, or exam results required for your vocational goal.
- Promptly coordinate purchase of goods and services included in your employment plan.
- Provide information to you on your rights and remedies, including Administrative Review, Mediation, Fair Hearings, and the Client Assistance Program.
- Explain and follow DOR policies, guidelines, and procedures.

**INDIVIDUALIZED PLAN FOR EMPLOYMENT
PRIVACY STATEMENT AND NOTICE**
(Rev. 02/2022)

**Department of Rehabilitation:
Specialized Services Division, Blind Field Services
Vocational Rehabilitation and Employment Division**

The law requires this notice to be provided to individuals when collecting personal information. This form, when completed and signed by both you and your Vocational Rehabilitation Counselor, will be your Individualized Plan for Employment (IPE). The primary purpose of the IPE is to identify your employment goal and the services necessary for you to achieve your employment goal. All information in the form is required to be included in your IPE or necessary to develop your IPE. Without this information, your Vocational Rehabilitation Counselor may not be able to approve your IPE and the vocational rehabilitation services may not be provided.

The IPE will be included in your record of services at the Department of Rehabilitation (DOR), and you have the right to inspect any information that DOR maintains about you, unless law or regulation does not allow that information to be provided. If you have questions or to request information, please contact the DOR staff listed on the IPE or you may contact DOR's Consumer Affairs and Quality Assurance Unit at (916) 558-5394, dorcustomerserviceunit2@dor.ca.gov or 721 Capitol Mall, Sacramento, California 95814.

DOR follows applicable federal and state privacy laws and regulations. In the following situations, the law allows DOR to share some personal information without a consumer's written authorization: (1) for the federal government to evaluate DOR's program performance; (2) in response to a court order, investigations in connection with law enforcement, fraud, abuse, or to protect the consumer or others; and (3) for audit, evaluation, or research purposes directly connected with the administration of the vocational rehabilitation program or to significantly improve the quality of life for vocational rehabilitation applicants and consumers in accordance with a written agreement. The written agreement will limit the use of the information and safeguard confidentiality. If the final report reveals any personal identifying information, informed, written consent will be required. For more information, please see DOR's Privacy Policy at www.dor.ca.gov/Home/PrivacyPolicy.

Below is a list of the laws and regulations discussed above in this Privacy Statement and Notice: section 3141 of title 29 of the United States Code; sections 361.38, 361.45, and 361.46 of title 34 of the Code of Federal Regulations; California Civil Code sections 1798 through 1798.78; and sections 7140 through 7143.5 of title 9 of the California Code of Regulations.

STATE OF CALIFORNIA DEPARTMENT OF REHABILITATION
YOUR RIGHTS AND REMEDIES
DR 1000 (Rev. 05/22)

If questions or issues arise while you are an applicant or a consumer of the Department of Rehabilitation (DOR), talk with your Rehabilitation Counselor. You may also request an informal meeting with your Rehabilitation Counselor's Team Manager.

You have the right to request an administrative review with the District Administrator. You may also seek, as set forth below, an administrative review concurrently with a formal request for mediation and/or fair hearing. However, most problems can be resolved informally and more quickly at the district level. You may bring a family member, other representative, or advocate with you any time you meet with the DOR staff.

CLIENT ASSISTANCE PROGRAM. To seek an advocate or for information regarding vocational rehabilitation services or the appeal process, the Client Assistance Program (CAP) administered by Disability Rights California may be available to assist you. Information is available at the [Disability Rights California website](http://www.disabilityrightscalifornia.org) (<http://www.disabilityrightscalifornia.org>), by phone at 800-776-5746 or 800-719-5798 TTY/TDD (Telecommunication Device for the Deaf and Hard of Hearing), or at the [DOR website](http://www.dor.ca.gov) (<http://www.dor.ca.gov>).

You have the right to take any of the following steps should issues arise:

REHABILITATION COUNSELOR. Most misunderstandings and issues can be resolved by talking them over with your Rehabilitation Counselor. It is your responsibility to let your Rehabilitation Counselor know there is an issue.

TEAM MANAGER. If you believe that you and your Rehabilitation Counselor cannot resolve the issue, you may request an informal meeting with the Team Manager to discuss the issue.

ADMINISTRATIVE REVIEW. You may request an administrative review by the District Administrator within one year of the action or decision. An administrative review decision will be rendered within 15 calendar days of the date of your request, unless you agree to a later date. If you disagree with an administrative review decision, you may file a request for fair hearing within 30 calendar days of the receipt of the written decision of your administrative review.

MEDIATION. Mediation is another option for resolving disputes with the DOR. You may file a request for confidential mediation within one year of the DOR action or decision with which you disagree. A qualified, impartial mediator can help you find solutions that are satisfactory to you and the DOR. If the DOR agrees to mediate, the mediation will be held within 25 calendar days from receipt of the request, unless you agree to a later date. A written request for mediation and/or fair hearing may be filed concurrently.

FAIR HEARING. If you are dissatisfied with any action or decision of the DOR relating to your application or receipt of vocational rehabilitation services, you may file a request for a fair hearing within one year of the DOR action or decision or within 30 calendar days of the receipt of written decision of your administrative review (see above). A fair hearing will be held within 60 calendar days of the receipt of your written request, unless you agree to a later date. At the hearing, you may appear in person, and may be accompanied by a representative or advocate of your choice. It may be to your benefit to first work through the administrative review process or mediation (see above) before requesting a fair hearing. If you are not satisfied with the fair hearing decision, you may file a Writ of Mandate with the California Superior Court within six months of the decision.

To request a mediation and/or fair hearing, please obtain form DR 107 Request for Mediation and/or Fair Hearing from one of the following options: contact the DOR Mediation and Fair Hearing Office by phone at 916-558-5860 or by email at [DOR Appeals Info](#); visit the [DOR website](#); or contact a CAP advocate (see CAP contact information above).

DISCRIMINATION. If you believe that the DOR or its contractor or grantee has unlawfully discriminated against you because of one or more of the following protected categories, your race, color, religion, ancestry, physical or mental disability, national origin, medical condition, genetic information, sexual orientation, marital status, age, gender, gender identity, gender expression, military status, or veteran status or retaliation, you have the right to pursue the following options: 1) Make an oral or written request for an administrative review to the District Administrator, who oversees the office where your case is assigned. The request should include: your name, address, and phone number; the name and title of the person against whom the complaint is being made; a description of the alleged discrimination; the protected category; and the remedy being sought. 2) File a discrimination complaint directly with DOR's Office of Civil Rights (OCR). For more information or to obtain a discrimination complaint form contact the DOR's OCR directly by phone at 916-558-5850 or by email at OCR@dor.ca.gov. 3) File a complaint with the U.S. Department of Education's Office for Civil Rights. For more information contact the U.S. Department of Education's Office for Civil Rights directly by telephone at 800-421-3481 or by email at OCR@ed.gov.

Requests for administrative review and complaints of discrimination must be made within 180 days of the date of alleged discrimination.

DISCRIMINATION OR HARASSMENT ON THE BASIS OF SEX. If you believe that the DOR or its contractor or grantee has discriminated against or harassed you or another individual with a disability on the basis of sex – including sexual orientation, gender identity, sexual harassment, and sexual violence, such as rape, sexual assault, sexual battery, and sexual coercion, you have the right to pursue the following options under Title IX of the Education Amendments Act of 1972 (Title IX): 1) contact the Chief of OCR and Title IX Coordinator by mail at 721 Capitol Mall, Sacramento, California 95814, by

email at OCR@dor.ca.gov, or by telephone at 916-558-5850; you can also report information you have about potential harassment by leaving a voicemail for OCR and the Title IX Coordinator at 916-857-9175; 2) file a complaint with the U.S. Department of Education's Office for Civil Rights; you may contact the U.S. Department of Education's Office for Civil Rights directly by telephone at 800-421-3481 or by email at OCR@ed.gov.

Ticket to Work (Applies only to SSI/SSDI recipients)

Ticket to Work (TTW) is a work incentive program for Social Security Disability Insurance (SSDI) or Supplemental Security Income (SSI) beneficiaries who are between the ages of 18 and 64 and interested in going to work. If you are an SSI/SSDI beneficiary, your DOR counselor has provided you with the Beneficiary Fact Sheet on the TTW Program. You understand that so long as your Ticket is in-use with DOR and that you meet Social Security Administration's (SSA) Timely Progress, SSA will suspend your medical Continuing Disability Reviews (CDRs). If you were initially referred by an Employment Network (EN) to DOR, you understand that your counselor will refer you back to this EN as the end of DOR services. You understand that you have the option to assign your Ticket to an approved EN of your choice for follow-up, retention, and additional support services when your DOR record of services is closed.

Attachment

31_Exhibit 2F - Re_ DOR follow up 6.30.26.pdf

Attached to the email above.

From: [Garrett Madden](#)
To: [Han, Peter@DOR](#)
Cc: [MacNicholl, Monica A@DOR](#); [O'Sullivan, Sharon M@DOR](#); [Zapanta, Kamie@DOR](#); [Keller, Esther@DOR](#)
Subject: Re: DOR follow up
Date: Tuesday, June 30, 2026 3:50:34 PM

[EXTERNAL EMAIL] This email originated outside DOR. Use caution when clicking links or opening attachments, especially if the sender is unknown or the message is unexpected.

Helpful Resource:

Refer to the IT Service Center KB article titled '*How to Identify Phishing Emails*' for guidance on recognizing phishing attempts.

The company I am employed by is called AUBURN CONSTRUCTORS LLC.
And as far as getting to work, I would get rides from friends. It's not always reliable though.
Even as I write this email I am stranded at work because I don't have any transportation home.

On Tue, Jun 30, 2026, 3:40 PM Garrett Madden <garrettmadden479@gmail.com> wrote:
I'll send receipts when I get home from my job today. As far as a lists goes, I believe I emailed one to Gladsona already

On Tue, Jun 30, 2026, 3:36 PM Han, Peter@DOR <Peter.Han@dor.ca.gov> wrote:

Hi Garrett,

I am reaching out to see if you have provided receipts for the clothing purchase with CPC?

Also, you have been in contact Sharon, and she provided instruction to provide a list of clothing needs from your employer. Is there an update for this list?

Also, from previous emails. I want to make sure I understand the following. How did you get to work?

- Did you carpool with a coworker?
- Are you currently driving without insurance?

Lastly, what is the name of your employer?

- I only know the address [1302 Pleasant Grove Blvd, Roseville, CA 95747](#) and the construction company headquarters address [7621 Painted Desert Dr, Roseville, CA 95747](#).

Sincerely,

Peter Han, M.S.

Vocational Rehabilitation Counselor

[721 Capitol Mall, Suite 110](#)

[Sacramento, CA 95814](#)

(916)-558-5321 direct line

(916)-558-5300 front office

CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

Attachment

32_Exhibit 2G - Follow-Up Regarding Your Transportation Request.pdf

Attached to the email above.

From: [Somalal, Gladsona@DOR](mailto:Somalal.Gladsona@DOR)
To: gmadden79@gmail.com
Cc: [Zapanta, Kamie@DOR](mailto:Zapanta,Kamie@DOR)
Subject: Follow-Up Regarding Your Transportation Request
Date: Wednesday, April 29, 2026 10:53:32 AM

Hi Garrett,

I attempted to reach you by phone today and left a message. I am following up with you via email since we were not able to connect.

I have reviewed your request for a car rental to commute from your address at 3610 Duckhorn Dr. #1003, Sacramento, CA 95834 to your training location at 9332 Tech Center Drive, Sacramento. Based on the California Code of Regulations (CCR), DOR is required to use the least costly transportation mode that meets the individual's needs.

As per CCR §7161(c), 'the mode of transportation provided shall be the least costly mode which meets the special needs of the individual'.

Public transit, such as SacRT buses and light rail, is listed as one of the standard transportation modes under this section. Because public transit is available for your route, it is considered the least-cost comparable option DOR can support at this time.

Regarding your concern about the SacRT monthly pass costing approximately \$100, I want to share information that may help reduce your out-of-pocket expenses:

SacRT Disability Discount Monthly Pass

- Discounted monthly pass: \$50
- Must apply in person for the disability photo ID and sticker
- Location:
SacRT Customer Service Center
1225 R Street, Sacramento, CA 95811
Hours: Monday to Friday, 9:00 a.m. to 5:30 p.m.
- Phone: (916) 321-2877
- Website: <https://www.sacrt.com/fares/>

At this time, based on my review of available comparable transportation options, public transit remains the least costly mode that meets policy requirements. If you agree, I can proceed with authorizing the previously approved \$50 per month for April through June.

To give you time to complete the SacRT disability discount application, **I can additionally approve an extra \$50 for the month of May.**

Please let me know how you would like to proceed, and I will continue to support you accordingly.

Thank you,

Gladsona Somalal

Senior Vocational Rehabilitation Counselor, QRP

Department of Rehabilitation

Northern Sierra District

721 Capitol Mall, Suite 110

Sacramento, CA 95814

Office: (916) 558-5335

Fax: (916) 558-5323



DEPARTMENT of
REHABILITATION

Employment, Independence & Equality

CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

Attachment

33_Exhibit 2G - Re_ Follow-Up on Transportation Request and Information Needed
5.4.26.pdf

Attached to the email above.

From: [Garrett Madden](#)
To: [Somalal, Gladsona@DOR](#)
Cc: [Zapanta, Kamie@DOR](#)
Subject: Re: Follow-Up on Transportation Request and Information Needed
Date: Monday, May 4, 2026 12:35:57 PM

[EXTERNAL EMAIL] This email originated outside DOR. Use caution when clicking links or opening attachments, especially if the sender is unknown or the message is unexpected.

Helpful Resource:

Refer to the IT Service Center KB article titled '*How to Identify Phishing Emails*' for guidance on recognizing phishing attempts.

I do not think it is fair that you are just not completing a review when these questions should have been addressed previously. To prevent back and forth, I am just requesting an administrative review. If the DOR is not truly committed to helping participants become independent and gainfully employed, then please just say that. I've already expressed my barriers but I'll give you an example, I borrowed a bicycle as I did not have bus fare because you haven't sent anything yet; it took me over 2 hours to get to my class (I left at 6am in the morning) and I was 15 minutes late. I've already borrowed money in the forms of loans to pay people back in gas.

If we continue down this path, I'm more than likely will not to finish. Please move forward in my administrative review and please direct me to how I can file a formal complaint if CAP is not the correct organization.

Have a good day.

On Mon, May 4, 2026 at 12:08 PM Somalal, Gladsona@DOR
<Gladsona.Somalal@dor.ca.gov> wrote:

Dear Garrett,

I am following up regarding your transportation request. I am writing in response to your email dated April 29, 2026, and to address the questions and concerns you raised regarding transportation assistance.

I previously offered to connect by phone outside of your training hours; however, I understand you prefer to proceed via email, and I will continue to work with you in this format. I want to acknowledge your concern about reliable transportation to support your participation in your training program, and you requesting clarification.

Under California Code of Regulations (CCR), Title 9 §7161(c), the Department of Rehabilitation is required to authorize the least costly transportation option that meets an individual's rehabilitation needs. In making this determination, CCR §7162(b)(2) requires consideration of proximity, availability/frequency of transportation options, and whether the option creates an undue hardship.

Based on the current review:

- Your residence (Duckhorn Drive, Sacramento) and training site (Tech Center Drive, Sacramento) are both located within the Sacramento area.
- SacRT bus and light rail services are available for this route.
- Based on typical routing, the commute is estimated at approximately 60 to 90 minutes each way depending on transfers and schedule timing.

Because public transit is available, it is currently considered the least costly comparable transportation option under DOR policy. The previously authorized \$50 monthly support was based on the SacRT discounted monthly pass and the expected duration of your training program.

You referenced a prior authorization for a rental vehicle in a different case. That determination was based on the specific circumstances at that time, including the location and travel requirements.

Transportation decisions are made individually based on current program conditions and available comparable options.

To fully evaluate your current request and your statement that public transportation creates an undue hardship, I need additional clarification from you. Please respond to the following:

1. What specific barriers prevent you from using available public transportation?
2. What do you mean by “undue hardship” in your situation?
3. Are there any functional limitations or other factors that impact your ability to use transit?
4. Are there specific timing or reliability concerns that impact your ability to consistently attend training?
5. Why do you believe a car rental is necessary to meet your participation needs compared to other available options?

This information is necessary to complete an individualized assessment under CCR requirements and determine whether the current transportation plan meets your needs or whether an alternative option is appropriate.

Once I receive your response, I will complete my review and provide you with a written determination. Your request for Administrative Review will also be processed in accordance with DOR procedures.

Thank you, and I look forward to your response.

Sincerely,

Gladsona Somalal

Senior Vocational Rehabilitation Counselor, QRP

Department of Rehabilitation

Northern Sierra District

721 Capitol Mall, Suite 110

Sacramento, CA 95814

Office: (916) 558-5335

Fax: (916) 558-5323



CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

Attachment

34_Exhibit 2G - RE_ Follow-Up Regarding Your Transportation Request 4.29.26.pdf

Attached to the email above.

From: [Zapanta, Kamie@DOR](mailto:Zapanta,Kamie@DOR)
To: [Garrett Madden](mailto:Garrett.Madden); [Somalal, Gladsona@DOR](mailto:Somalal.Gladsona@DOR)
Subject: RE: Follow-Up Regarding Your Transportation Request
Date: Thursday, April 30, 2026 9:20:00 AM
Attachments: [image001.png](#)

Hello Mr. Madden,

I am acknowledging receipt of your email. Ms. Somalal will respond to you with additional information you have requested.

Also, I will forward your request for an administrative review to my District Administrator.

Have a nice day.

Kamie

Kamie Zapanta

Team Manager
Capitol Mall Branch Office
721 Capitol Mall, Suite 110
Sacramento, CA 95814
(916) 720-9301 direct line
(916) 558-5300 front office



CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

From: Garrett Madden <gmadden79@gmail.com>
Sent: Wednesday, April 29, 2026 12:23 PM
To: Somalal, Gladsona@DOR <Gladsona.Somalal@dor.ca.gov>
Cc: Zapanta, Kamie@DOR <Kamie.Zapanta@dor.ca.gov>
Subject: Re: Follow-Up Regarding Your Transportation Request

[EXTERNAL EMAIL] This email originated outside DOR. Use caution when clicking links or opening attachments, especially if the sender is unknown or the message is unexpected.

Helpful Resource:

Refer to the IT Service Center KB article titled '*How to Identify Phishing Emails*' for guidance on recognizing phishing attempts.

Thank you for your response. Please note that I am unavailable by phone between 8:00 a.m. and 4:00 p.m. per the letter I forwarded to you as requested. So email is the best method of communication during that time.

I am writing to do two things:

1) Request the criteria and analysis used for the decision

Please provide, in writing:

- The criteria used to determine that public transit meets my transportation needs
- The evaluation conducted under California Code of Regulations Title 9 Section 7162, including proximity, frequency, and whether the commute creates an undue hardship
- Any internal guidelines or standards used to determine the \$50 monthly transportation amount
- The comparison of transportation options relied upon for my route
- Any transportation study or planning analysis used to determine that public transit is a viable option for this commute

2) Clarification of the regulatory basis for the determination and request for Administrative Review

I understand that California Code of Regulations Title 9 Section 7161(c) requires the Department to select the least costly mode of transportation. However, this standard requires that the selected mode be the least costly option that meets the individual's needs.

This determination must be made in conjunction with section 7162(b)(2), which requires evaluation of proximity, frequency, and whether the transportation option creates an undue hardship.

Your response concludes that public transit is the least costly option because it is available. However, it does not address whether public transit meets the required standard under section 7162(b)(2), particularly in relation to commute length, number of transfers, and reliability.

As applied to my situation, the commute requires multiple transfers and results in several hours of daily travel time. This places me in a position where I am fully dependent on the timing and coordination of multiple transit routes, with limited frequency and no margin for

delay. This directly impacts my ability to arrive on time and maintain consistent attendance.

Additionally, I would like to note that DOR has previously amended my Individualized Plan for Employment to authorize a rental vehicle for participation in the ABC NorCal Apprenticeship Program (email sent to me 10/24/2025) when travel needs arose. While that specific opportunity did not materialize, the authorization demonstrates that a rental vehicle has already been determined to be an appropriate transportation mode under my circumstances when required for participation. **And this was over 6 months ago.**

Given that precedent, I am seeking clarification as to why the same mode is not being considered here, particularly where the current commute presents comparable barriers to reliable participation.

Because section 7161(c) requires that the selected mode must both be the least costly and meet the individual's needs, and because section 7162(b)(2) provides the criteria for determining whether those needs are met, I do not believe the current determination reflects a complete application of the regulatory framework.

If public transit does not meet the required standard, it cannot be considered the least costly viable option. The analysis must then move to the least costly option that actually enables participation. At this time, a car rental remains the only option that provides direct, reliable access to the training location and supports consistent attendance.

For these reasons, I am proceeding with a formal request for Administrative Review.

Please consider this email my formal request for Administrative Review of the transportation determination related to my Individualized Plan for Employment.

Given that my orientation occurred on 4/23/2026 and official training began on April 27, 2026, I am requesting that this review be handled on an expedited basis so that a determination can be made prior to the program start date, if possible.

And again, I am requesting the use of the CalDor card for future support due to the extensive time these requests take for approval. Please provide a response to that request as well.

Thank you,

Garrett Madden

On Wed, Apr 29, 2026 at 10:53 AM Somalal, Gladsona@DOR

<Gladsona.Somalal@dor.ca.gov> wrote:

Hi Garrett,

I attempted to reach you by phone today and left a message. I am following up with you via email since we were not able to connect.

I have reviewed your request for a car rental to commute from your address at 3610 Duckhorn Dr. #1003, Sacramento, CA 95834 to your training location at 9332 Tech Center Drive, Sacramento.

Based on the California Code of Regulations (CCR), DOR is required to use the least costly transportation mode that meets the individual's needs.

As per CCR §7161(c), 'the mode of transportation provided shall be the least costly mode which meets the special needs of the individual'.

Public transit, such as SacRT buses and light rail, is listed as one of the standard transportation modes under this section. Because public transit is available for your route, it is considered the least-cost comparable option DOR can support at this time.

Regarding your concern about the SacRT monthly pass costing approximately \$100, I want to share information that may help reduce your out-of-pocket expenses:

SacRT Disability Discount Monthly Pass

- Discounted monthly pass: \$50
- Must apply in person for the disability photo ID and sticker
- Location:
SacRT Customer Service Center
1225 R Street, Sacramento, CA 95811
Hours: Monday to Friday, 9:00 a.m. to 5:30 p.m.
- Phone: (916) 321-2877
- Website: <https://www.sacrt.com/fares/>

At this time, based on my review of available comparable transportation options, public transit remains the least costly mode that meets policy requirements. If you agree, I can proceed with authorizing the previously approved \$50 per month for April through June.

To give you time to complete the SacRT disability discount application, **I can additionally approve an extra \$50 for the month of May.**

Please let me know how you would like to proceed, and I will continue to support you accordingly.

Thank you,

Gladsona Somalal

Senior Vocational Rehabilitation Counselor, QRP

Department of Rehabilitation

Northern Sierra District

721 Capitol Mall, Suite 110

Sacramento, CA 95814

Office: (916) 558-5335

Fax: (916) 558-5323



DEPARTMENT of
REHABILITATION

Employment, Independence & Equality

CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

Attachment

35_Exhibit 2H - Admin Review Decision 5.2026.pdf

Attached to the email above.

Dear Garrett,

It was a pleasure meeting with you on Wednesday, May 20th, regarding the Administrative Review you requested, which I received via email on May 6th, 2026. Although we could not meet the original deadline due to scheduling conflicts, the purpose of our meeting was to provide you with the opportunity to clarify your concerns and the resolution you are seeking. This letter serves as the Administrative Review decision concerning your complaint.

Issues

You are requesting assistance with reliable transportation to participate in the Department of Rehabilitation (DOR)—sponsored pre-apprenticeship program.

Resolution Requested

You requested a car rental to attend the training.

Background and Decision

On April 14th, you emailed your Rehabilitation Counselor (RC), Gladsona Somalal, requesting transportation assistance for the BuildingStrong Academy pre apprenticeship program, which you began on April 27th. The program runs Monday through Friday, from 8:00 a.m. to 5:00 p.m., and is located at 9332 Tech Center Drive, Sacramento, CA 95826—approximately 16 miles from your home. You shared that you are currently a full-time student and had to leave a stable job to attend this training. You do not own a personal vehicle and rely on family and friends for transportation. You stated that public transportation is not a viable option due to your health conditions of diabetes, asthma, and depression. You also noted that using public transportation would take approximately 108 to 194 minutes per trip and include about 38 minutes of walking. You stated that this would create undue hardship and requested that DOR provide a car rental.

On April 29th, the RC informed you that a car rental could not be approved due to DOR regulations, which require the least costly mode of transportation be used (CCR § 7161(c)). She explained that

public transportation is considered an available option for attending your training. She also provided information on obtaining a reduced fare disability pass through SacRT and advised that you would be issued 50 dollars per month in transportation support.

Decision

In accordance with Cal. Code Regs. tit. 9, § 7161(c), the mode of transportation provided must be the least costly option that meets your disability related needs. SacRT offers several routes that would get you to your training location, including one departing at 5:57 a.m. and arriving at 7:27 a.m. A monthly nondisabled pass costs \$100.

Based on this information and to support your participation in the program, I am directing your counselor to increase your monthly transportation assistance to 100 dollars.

You also have another option: DOR can reimburse a driver at .21 cents per mile, which would total approximately \$134 per month (33.6 miles per week × 4 weeks × .21 per mile). If you prefer this reimbursement method over a flat monthly amount, please inform your counselor. I also want to encourage you to continue to work with your counselor to reach your employment goal.

Should you disagree with the above decision, you have the right to request a fair hearing within 30 days in receipt of this letter. You may request a fair hearing by contacting ppealsinfo@dor.ca.gov or by calling (916) 558-5860. Your rights and remedies are attached.

Sincerely,

Leslie Rubalcava

Attachment

36_Exhibit 2I - G. Madden - Employment Information.pdf

Attached to the email above.

CA Department of Rehabilitation

Attachment Summary

Participant Madden, Garrett
Caseload 130-302 - Somalal, Gladsona

Participant ID 577053

1. Description

Category E-Mail
Attachment Date 06/18/2026
Source Outlook
Share Attachment No

2. Additional Information

Summary RE: Transportation

From: Han, Peter@DOR
Sent: 6/18/2026 1:42 PM
To: Garrett Madden; Keller, Esther@DOR; Colvin, Aimee@DOR; Zapanta, Kamie@DOR; Somalal, Gladsona@DOR

Hello Garrett!

Thanks for reaching out.

Thank you for sending the worksite addresses. I appreciate you keeping us updated, and I'm glad to hear that you are working. To make sure we have everything we need, we will need a few more details from you. Please let us know the name of the business, what day and month did you start work, how many hours per week you are working, and your hourly wage. This information helps us document your employment correctly.

Once we have the employment details, DOR will begin tracking your case for successful closure. As a reminder, when a participant secures employment, their case is closed successfully after they have maintained the job for 90 days. We will continue to support you during that time and make sure things are moving in the right direction.

In the meantime, your request to review DOR to explore a vehicle. We will need review with our team manager, and this process takes time and will need more information.

Beginning July 1, 2026, DOR may begin the process to assist you with the following:

- Transportation support of \$50 dollars for the month of July or mileage reimbursement at .21 cents a mile.
- A one-time \$250 dollars for employment incidentals to help you maintain your job
- Up to \$250 dollars for work clothing. Please be sure to save your receipts, as reimbursement is based on the amount shown on the receipts.

CA Department of Rehabilitation

Attachment Summary

Participant Madden, Garrett

Participant ID 577053

Caseload 130-302 - Somalal, Gladsona

Please understand that we cannot issue any checks in the remainder month of June due to the impending end of the state fiscal year.

Thanks for reading.

Sincerely,

Peter Han, M.S.

Vocational Rehabilitation Counselor

721 Capitol Mall, Suite 110

Sacramento, CA 95814

(916)-558-5321 direct line

(916)-558-5300 front office

CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

From: Garrett Madden <garrettmadden479@gmail.com>

Sent: Thursday, June 18, 2026 11:19 AM

To: Han, Peter@DOR <Peter.Han@dor.ca.gov> ; Keller, Esther@DOR <

CA Department of Rehabilitation
Attachment Summary

Participant Madden, Garrett

Participant ID 577053

Caseload 130-302 - Somalal, Gladsona

Esther.Keller@dor.ca.gov> ; Colvin, Aimee@DOR < Aimee.Colvin@dor.ca.gov> ; Zapanta, Kamie@DOR < Kamie.Zapanta@dor.ca.gov> ; Asch, Carol@DOR < Carol.Asch@dor.ca.gov> ; O'Sullivan, Sharon M@DOR < Sharon.O'Sullivan@dor.ca.gov> ; Somalal, Gladsona@DOR < Gladsona.Somalal@dor.ca.gov>
Subject: Re: Transportation

You don't often get email from garrettmadden479@gmail.com <mailto:garrettmadden479@gmail.com> . Learn why this is important <<https://aka.ms/LearnAboutSenderIdentification>>

[EXTERNAL EMAIL] This email originated outside DOR. Use caution when clicking links or opening attachments, especially if the sender is unknown or the message is unexpected.

Helpful Resource:

Refer to the IT Service Center KB article titled 'How to Identify Phishing Emails' for guidance on recognizing phishing attempts.

Hello,

On a break and my site project manager informed me I have to get work boots to be on site or I cannot work. I don't have work clothes or work boots for construction. I know this is short notice but I believe I was already approved for this program last year (ABC Norcal job in conjunction with Build strong). I get off work at 330pm

Thank you

Garrett Madden

On Wed, Jun 17, 2026 at 7:56 AM Garrett Madden <garrettmadden479@gmail.com <mailto:garrettmadden479@gmail.com> > wrote:

Hello, I sent an email yesterday but am sending again in light of my DOR worker being out.

I recently started a job in Roseville. The site address is 1302 Pleasant Grove Blvd, Roseville, CA 95747 (the construction company headquarters is 7621 Painted Desert Dr, Roseville, CA 95747). My hours are 7:00 a.m. to 3:30 p.m. I was placed at this site through my

CA Department of Rehabilitation

Attachment Summary

Participant Madden, Garrett

Participant ID 577053

Caseload 130-302 - Somalal, Gladsona

Build Strong training program and the ABC NorCal program that DOR originally introduced me to.

I continued to research whether public transit can get me there on time, and it cannot:

* The trip crosses three agencies (SacRT, Roseville Transit, Placer County Transit) with multiple transfers.

* Roseville Transit does not begin service until 5:45 a.m., and the routes near my work do not run early or frequently enough to get me there by my 7:00 a.m. start.

There is no combination of routes that produces an on-time arrival. Transit is not a viable option for this job.

This is an ongoing position with no set end date, and that fact is what makes a vehicle purchase the responsible choice rather than a rental. A rental is an open-ended, recurring cost with no cap. A used vehicle is a one-time, fixed cost. The longer my employment continues, the more a rental costs relative to simply purchasing a reliable vehicle.

A rental in this area runs roughly \$1,000 to \$1,500 per month once daily rates, taxes, and fees are included. A reliable used vehicle typically falls in the \$5,000 to \$10,000 range. At those numbers, an ongoing rental pays for an entire vehicle in about four to eight months, and my job has no anticipated end point. Every rental dollar spent past that window is money with nothing to show for it, against a need that does not stop.

Because the employment is indefinite, the rental is the higher-cost path and a vehicle purchase is the lower-total-cost path. I am asking that we explore a vehicle purchase on that basis. I raised this before during the previous transportation study.

Can anyone assist with this as soon as possible? I need this job so I can find a place to live. I do not have access to my cell phone during work hours and am available after 3:30 p.m.

Thank you,

Garrett Madden

3. Attached Files

File Name	California Code of Regulations.pdf
Date Attached	06/18/2026
Attached By	Keller, Esther

Attachment

37_Exhibit 2J - G. madden - Car rental assistance 6.24.26.pdf

Attached to the email above.

From: O'Sullivan, Sharon M@DOR
To: garrettmadden479@gmail.com
Cc: Han, Peter@DOR; Keller, Esther@DOR; Colvin, Aimee@DOR; MacNicholl, Monica A@DOR; Zapanta, Kamie@DOR
Subject: Car rental assistance
Date: Wednesday, June 24, 2026 4:57:54 PM
Importance: High

Hello Garrett,

Thank you for meeting with me this afternoon to discuss your current transportation need. As discussed, while DOR cannot purchase a vehicle, we can assist you with car rental for the first couple of months of employment.

As requested, please provide your CDL and insurance details as this will be needed to book your car rental. Esther, Aimee, please reach out to me directly if you have any questions. I see Peter is out of office.

Thank you-Sharon

Sharon O'Sullivan MS, RN, CRC
District Administrator-Northern Sierra District
Department of Rehabilitation
Direct Line: 916/558-5304
Main Line: 916/558-5300
Email: sharon.osullivan@dor.ca.gov
Website: www.dor.ca.gov
Pronouns: [She/Her/Hers](#)

Attachment

38_Exhibit 2K - Re_ Car Rental and Employment Update 8.10.26.pdf

Attached to the email above.

From: [Garrett Madden](#)
To: [Keller, Esther@DOR](#)
Cc: [Zapanta, Kamie@DOR](#); [Han, Peter@DOR](#)
Subject: Re: Car Rental and Employment Update
Date: Monday, August 10, 2026 1:51:46 PM

[EXTERNAL EMAIL] This email originated outside DOR. Use caution when clicking links or opening attachments, especially if the sender is unknown or the message is unexpected.

Helpful Resource:

Refer to the IT Service Center KB article titled '*How to Identify Phishing Emails*' for guidance on recognizing phishing attempts.

It's going very good. I'm trying to see if I'd able to extend my rental. I put in a request with my worker, but haven't heard back yet

On Mon, Aug 10, 2026, 1:46 PM Keller, Esther@DOR <Esther.Keller@dor.ca.gov> wrote:

Good afternoon, Garrett,

I hope this email finds you well. I am reaching out to inquire how the new job is going and how the car rental drop off and pick up have been working out for you.

Department of Rehabilitation (DOR) is ready to renew the authorization for the car rental for another two weeks. The reservation will be made for 8/15/26 pickup and 8/28/26 dropoff.

I look forward to hearing from you. Please let me know if you have any questions.

Thank you,

Esther Keller

Service Coordinator

Capitol Mall Branch Office

[721 Capitol Mall, Suite 110](#)

[Sacramento, CA 95814](#)

(916) 558-5320 Direct line

(916) 558-5300 Front office

(916) 558-5303 Fax

Pronouns: she, her, hers

CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

Attachment

39_Exhibit 2L - RE_ Travel Reimbursement Request 8.11.26.pdf

Attached to the email above.

From: [Keller, Esther@DOR](mailto:Keller,Esther@DOR)
To: [Garrett Madden](#)
Cc: [Colvin, Aimee@DOR](#); [Han, Peter@DOR](#); [Zapanta, Kamie@DOR](#)
Subject: RE: Travel Reimbursement Request
Date: Tuesday, August 11, 2026 11:33:31 AM
Attachments: [Travel Table- GM.docx](#)
[Income and Living Expenses- GM.docx](#)
[Re Car Rental and Employment Update.msg](#)
[DR233 Financial Statement \(2\).pdf](#)
[image001.png](#)

Hello Garrett,

Thank you for your email response.

We had agreed to provide you with two months of support with transportation assistance, which included the mileage reimbursement and rideshare fees and car rental services.

This message is to inform you that, at this time, we will need additional information from you to further evaluate your request for an extension of the vehicle rental. Until then, we cannot extend the transportation assistance of a car rental beyond August 14, 2026. DOR agreed to provide transportation assistance for two months after becoming employed. That two months will end August 14, 2026.

If you would like DOR to consider an extension, and in accordance with **CCR 7161.5** regarding transportation services for employed participants, please complete the attached Financial Statement form and the Income and Living Expenses table. DOR will need to review this information before an extension can be considered. **Please return this information by 5:00 pm on August 12, 2026.**

Lastly, I have attached a Travel Table to identify your methods of transportation to and from work for the two weeks prior to the car rental assistance.

§ 7161. Transportation Services---General.

(a) Transportation as defined in section 7029:

(1) Shall be provided as a supportive service when necessary to provide for those travel expenses resulting from:

- (A) A determination of rehabilitation potential.
- (B) The provision of counseling and placement services.
- (C) The individual's participation in a completion of an approved program of vocational rehabilitation services.
- (D) The provision of post-employment services.

(2) Shall not be provided as a sole service because a supportive service is one which only contributes to the individual's ability to receive the benefit of other vocational rehabilitation services. Alone, it is not a vocational rehabilitation service.

(3) Shall not be provided for travel expenses caused by or required solely for personal, social, recreational or other non-vocational reasons.

(4) Shall be provided only to a individual who is engaged in suitable employment as defined in section 7011 under either of the following circumstances:

(A) Until the individual is financially capable of assuming the cost as determined in accordance with section 7161.5 or until the case is closed in accordance with section 7179.2, whichever occurs first.

(B) In accordance with (e).

(b) Prior to provision of any transportation services the Counselor shall determine both of the following:

(1) Whether the individual is eligible for similar benefits in accordance with Sections 7196 through 7198. If eligibility exists, the Counselor shall follow the procedures specified in those regulations.

(2) The ability of the individual to financially participate in accordance with sections 7190 through 7194. If the client is able to financially participate, the procedures for payment specified in those regulations

shall be followed.

(c) The mode of transportation provided shall be the least costly mode which meets the special needs of the individual. Modes of transportation include, but are not limited to:

(1) Publicly owned or contracted transportation such as buses, dial-a-ride and rapid transit.

(2) Transportation available through community resources.

(3) Client-owned vehicles.

(4) Privately owned transportation such as taxi cab, limousine or paratransit companies and charter buses.

(5) Car pools and payment to co-workers.

(6) Car rental agencies.

(d) Additional authorization criteria and rates of payment for specific modes of transportation shall be set by the Department pursuant to sections 7162 through 7163.5.

(e) Once a case is closed because the individual is rehabilitated, transportation services shall be provided only upon written approval of the Rehabilitation Supervisor. The Rehabilitation Supervisor's approval shall be based upon such criteria as verification that:

(1) The services are necessary to support an over-all program of post-employment services as defined in section 7176.

(2) The services are requested within 12 months of the individual's case closure.

(3) The requirements of (b) have been met.

Note: Authority cited: Sections 19006 and 19016, Welfare and

Institutions Code. Reference: Sections 19018 and 19150, Welfare and Institutions Code; and 34 CFR Sections 361.5 and 361.48.

§ 7161.5. Transportation Services---Employed Clients.

(a) For the purposes of section 7161(a)(4)(A), a client shall be deemed to be financially capable of assuming the cost of transportation after the client has received one full month of salary or wages unless there is evidence that undue financial hardship exists.

(b) Undue financial hardship means that the client's income, minus mandatory payroll deductions, and liquid assets for the month are insufficient to meet the current costs of transportation to and from employment in addition to all of the following:

(1) The average monthly costs, established in accordance with (c), of:

(A) Housing.

(B) Utilities, including basic rate for phone.

(C) Clothing required for employment.

(D) Food.

(E) Monthly medical and dental services.

(F) Child care necessary for employment.

(G) Court ordered child or spousal support.

(2) Unusual or unforeseen necessary expenses including such occurrences as:

(A) Deposits required for a client to move into more suitable housing.

(B) Repair or replacement of personal belongings damaged due to fire, earthquake or other natural disaster.

(C) Other similar occurrences.

(c) For the purposes of (b)(1), the average monthly costs shall be established by averaging the prior two months actual costs unless the Counsel-

or and client agree upon a different methodology for a particular item; for example, the client has paid for child care for only one month.

(d) Except as specified in section 7161(e), transportation services shall not be authorized after the client has received one full month of wages or salary, without the approval of the District Administrator. The District Administrator's decision shall be based upon such criteria as verification that:

(1) The conditions specified in section 7161(b) and (c) have been met.

(2) Undue financial hardship pursuant to subsection (b) of this section exists.

(e) In no instance shall a case, which would otherwise be closed in accordance with section 7184, remain open solely because a client is not financially capable of assuming the cost of transportation.

Esther Keller

Service Coordinator
Capitol Mall Branch Office
721 Capitol Mall, Suite 110
Sacramento, CA 95814
(916) 558-5320 Direct line
(916) 558-5300 Front office
(916) 558-5303 Fax
Pronouns: she, her, hers

CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be

legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

From: Keller, Esther@DOR

Sent: Thursday, July 23, 2026 3:49 PM

To: Garrett Madden <garrettmadden479@gmail.com>

Cc: Colvin, Aimee@DOR <Aimee.Colvin@dor.ca.gov>; Han, Peter@DOR <Peter.Han@dor.ca.gov>; Zapanta, Kamie@DOR <Kamie.Zapanta@dor.ca.gov>

Subject: Travel Reimbursement Request

Good afternoon, Garrett,

Thank you for providing the detailed information regarding your transportation and reimbursement request. To move forward with reviewing and finalizing the reimbursement, please complete the table attached to the best of your ability with the correct mode of travel and associated cost for each date. This will ensure all information is clear and documented accurately.

Please review and fill in the "Mode of Travel" and "Cost" fields as applicable.

Once you return the completed table, we will proceed with reviewing your reimbursement request.

Please let me know if you have any questions or need assistance completing the chart.

Thank you,

Esther Keller

Service Coordinator
Capitol Mall Branch Office
721 Capitol Mall, Suite 110
Sacramento, CA 95814

(916) 558-5320 Direct line
(916) 558-5300 Front office
(916) 558-5303 Fax
Pronouns: she, her, hers

CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

From: Garrett Madden <garrettmadden479@gmail.com>
Sent: Wednesday, July 1, 2026 6:40 PM
To: Han, Peter@DOR <Peter.Han@dor.ca.gov>
Cc: Keller, Esther@DOR <Esther.Keller@dor.ca.gov>; Colvin, Aimee@DOR <Aimee.Colvin@dor.ca.gov>; MacNicholl, Monica A@DOR <Monica.MacNicholl@dor.ca.gov>; O'Sullivan, Sharon M@DOR <Sharon.O'Sullivan@dor.ca.gov>
Subject: Re: DOR update Car rental

[EXTERNAL EMAIL] This email originated outside DOR. Use caution when clicking links or opening attachments, especially if the sender is unknown or the message is unexpected.

Helpful Resource:

Refer to the IT Service Center KB article titled '*How to Identify Phishing Emails*' for guidance on recognizing phishing attempts.

Please provide a decision letter for this approval as well as the original denial for vehicle purchase so I have access to exercise my right to appeal if needed. I have requested several times.

I sent this information to you before.

Re: Request for Fair Hearing and Notice of Changed Circumstances



Garrett Madden <garrettmadden479@gmail.com>

Wed, Jun 17, 8:49 AM ☆ ☺ ↶ ⋮

To appealsinfo ▾

To whom it may concern,

I am writing to formally request a fair hearing regarding the denial of my transportation assistance request decision on May 26, 2026. I am submitting this request to preserve my appeal rights. I am also notifying DOR of a significant change in circumstances that affects the basis of that decision.

My transportation request has, from the beginning, been about reaching the employment outcome that my DOR plan and the program were designed to produce. DOR introduced me to the ABC NorCal program, which led to my BuildingStrong pre-apprenticeship training, which has now led directly to a job placement. The need I raised in April has not changed. It has reached its intended destination of employment.

The May 26 decision found that public transportation was an available, least-costly option under CCR section 7161(c) because SacRT offered a route to my training site at 9332 Tech Center Drive in Sacramento, which realistically wasn't reliable based on my first trial run. That finding was tied to the training location. It does not, and cannot, apply to where the program has now placed me.

I am now working at **1302 Pleasant Grove Blvd, Roseville, CA 95747** (company headquarters: 7621 Painted Desert Dr, **Roseville, CA 95747**), with hours of 7:00 a.m. to 3:30 p.m. This job is the direct result of the DOR-sponsored training pipeline I was placed into. Keeping it is the employment goal of my plan.

Unlike the Sacramento training site, this location has no viable transit route. The trip to Roseville crosses three separate transit agencies (SacRT, Roseville Transit, and Placer County Transit) with multiple transfers. Roseville Transit does not begin service until 5:45 a.m., and no combination of connecting routes arrives in time for my 7:00 a.m. start. I have researched this carefully and there is no route that produces an on-time arrival. For this job, public transportation is not the slower option. It is not an available option at all, so it cannot be the least-costly one under section 7161(c), because it does not meet the need.

This is an ongoing position with no set end date. A car rental is an open-ended, recurring cost with no cap, while a reliable used vehicle is a one-time, fixed cost. A rental in this area runs roughly \$1,000 to \$1,500 per month once daily rates, taxes, and fees are included; a reliable used vehicle typically falls in the \$5,000 to \$10,000 range. At those numbers an ongoing rental pays for an entire vehicle in about four to eight months, and my employment has no anticipated end point. Over the life of an indefinite job, a vehicle purchase is the lower-total-cost path, which is consistent with the least-costly requirement, not contrary to it.

I am requesting:

Thank you for authorizing the rental vehicle. I confirm the details as stated: pick-up on Friday, July 3, 2026 at Enterprise, 4107 Northgate Blvd, Sacramento, CA 95834, and return to the same location on Friday, July 17, 2026 before 6:00 pm, with a new authorization beginning July 18, 2026. Travel days are Monday through Friday between my residence and my worksite, a 44.7 mile round trip.

Two logistical questions on the rental: (1) Can you confirm the July 18 pick-up under the new authorization is arranged for a Saturday, or advise the correct pick-up day if the Enterprise location is closed that day? (2) Can you confirm what the DOR-provided collision and liability coverage includes, and whether I am responsible for any deductible, supplemental liability, or damage waiver? I want to make sure there are no coverage gaps before I take possession of the vehicle.

TO ANSWER YOUR VERIFICATION QUESTIONS

1. Employer address. My employer of record is Auburn Constructors, LLC (through ABC Norcal), whose corporate office I believe is located at 730 W Stadium Ln, Sacramento, CA 95834. As is standard in the construction industry, the employer's corporate office address is different from the job site where I physically report to work. My current assigned job site is 1302 Pleasant Grove Blvd, Roseville, CA 95747. The address at 7621 Painted Desert Dr, Roseville, CA 95747 was the initial reporting location where I was directed to meet the project supervisor at the start of this assignment; it was a one-time meeting point, not an ongoing worksite. Please also note that an active construction site will typically appear as a vacant or undeveloped lot on real estate websites such as Zillow, since those sites reflect parcel records rather than active construction projects. I am happy to provide documentation from Auburn Constructors confirming my job site

assignment if that would be helpful.

2. Duration at 1302 Pleasant Grove Blvd - I do not know how long this assignment will last. Job site assignments are determined by my employer based on project needs, and I will notify you immediately if my assigned site changes so that transportation records remain accurate. You are welcome to call ABC Norcal for further confirmation.

TRANSPORTATION REIMBURSEMENT: JUNE 15 THROUGH JULY 2, 2026

Thank you for processing the June reimbursement. Your count of 12 workdays in June is correct; I began work on June 15, 2026, and there were 12 weekdays from June 15 through June 30. However, one adjustment is needed, along with coverage of the two July workdays before the rental begins.

On the afternoon of June 30, and on July 1 and July 2, I did not have use of a personal vehicle and had to purchase Uber rides to travel between my residence and the worksite because transportation assistance was not yet in place. These were purchased transportation rather than operation of a personal vehicle, so I am requesting reimbursement of the actual documented fares for those trips, with the remaining days reimbursed under the mileage method you proposed. Itemized Uber receipts showing date, route, and fare are attached.

My requested reimbursement for our of pocket transportation is as follows:

1. Mileage method, 11 driving days (June 15 through June 29): $44.7 \text{ miles} \times \$0.21 = \$9.39$
per day $\times 11 \text{ days} = \103.29

2. June 30: I was transported to the worksite that morning by a private party and paid cash for gas - I didn't get the receipt. My return trip was by Uber: \$55.93 - with the receipt attached.

3. July 1: Uber to worksite, \$31.40 (Receipt 2). Uber return, \$34.41 (Receipt 3). Day total: \$65.81.

4. July 2: Uber to worksite, \$30.94 (Ride confirmation 1). Uber return, \$34.94 (Ride confirmation 2). Day total: \$65.88

Total: \$290.91 - if I find other receipts I will submit.

A note on the receipt dates: Uber receipt headers reflect the booking date rather than the travel date. The payment timestamps on each receipt establish the actual trip dates, and the attached expense summary lists each trip by its payment timestamp. For my arco receipts, since I used arco cards - the receipts are the only ones I have but they are not dated.

A note on pick-up and drop-off addresses shown on the Uber receipts: the active construction site at 1302 Pleasant Grove Blvd does not have a sidewalk, driveway, or safe curbside stopping point for rideshare vehicles. Pick-ups and drop-offs therefore occur at the nearest safe walkable locations on the same block, including 1501 Misty Wood Dr (a park at the corner of the block) and 1271 Pleasant Grove Blvd. All trips shown originate from or terminate at the worksite block.

Finally, I am attaching fuel receipts totaling \$117.74 from the June driving period for documentation purposes. My actual fuel costs exceeded the mileage-based calculation.

Thank you for moving this forward. Please confirm the revised reimbursement amount and let me know if you need anything further from me before the July 3 pick-up.

Sincerely,
Garrett Madden

On Wed, Jul 1, 2026 at 5:03 PM Han, Peter@DOR <Peter.Han@dor.ca.gov> wrote:

Hello Garrett,

I am writing to let you know that we are moving forward with authorizing a rental vehicle for your transportation needs. DOR provides rental assistance in two-week periods, so the vehicle will need to be returned on Friday **July 17, 2026 before 6pm**.

Transportation details are below:

- Travel Days: Monday through Friday
- Route: 3620 Duckhorn Drive, Apt. 1003, Sacramento, CA 95834 to 1302 Pleasant Grove Blvd, Roseville, CA 95747 (round trip)
- Mileage: 44.7 miles
- Pick-Up Date: July 3, 2026
- Pick-Up Location: Enterprise, 4107 Northgate Blvd, Sacramento, CA 95834
- Return Date: July 17, 2026
- Return Location: Same as pick-up
- Insurance: DOR will only provide Collision and liability

Please be aware a new vehicle will be ready for pick up starting on

th

July 18 with a new authorization.

Now I need clarifying information to understand the following info that has been provided.

To move forward with transportation assistance in the form of a reimbursement check, I need to verify your correct worksite address and how long you will be working at that location.

You have provided several different addresses:

- 1302 Pleasant Grove Blvd, Roseville, CA 95747 is your current work site address.

- 7621 Painted Desert Dr, Roseville, CA 95747

- The provided address of your employer location from a previous email looks like its a vacant lot according to Zillow.

- Auburn Constructors LLC, 730 W Stadium Ln, Sacramento, CA 95834

- The name of your actual employer reflects a Sacramento address.

As a one-time exception, the mileage reimbursement for June would be calculated as follows:

44.7 miles x \$0.21 = \$9.38 per day

\$9.38 x 12 workdays in the month of June = **\$112.56**

Before I can issue this reimbursement, please confirm:

1. The correct address of your employer
2. How long will you work at the address 1302 Pleasant Grove Blvd in the month of July 2026?

Once I have this information, I can finalize the transportation assistance.

Thank you, and I look forward to your response.

Sincerely,

Peter Han, M.S.

Vocational Rehabilitation Counselor

721 Capitol Mall, Suite 110

Sacramento, CA 95814

(916)-558-5321 direct line

(916)-558-5300 front office

CONFIDENTIALITY NOTICE:

The contents of this email message and any attachments are intended solely for the addressee(s) and may contain confidential and/or privileged information and may be legally protected from disclosure. If you are not the intended recipient of this message or their agent, or if this message has been addressed to you in error, please immediately alert the sender by reply email and then delete this message and any attachments. If you are not the intended recipient, you are hereby notified that any use, dissemination, copying, or storage of this message or its attachments is strictly prohibited.

