

**VIA EMAIL**

**Dear Navraj:**

**As per your request dated 08-07-2022, I have provided you all information available under the provisions of the Access to Information Act.**

**Jackie Ricci**  
**Labelbox**  
**415-294-0791**  
**hr@labelbox.com**

**Enclosure(s):** LETTER & QUESTIONNAIRE TO HEALTH CARE PROVIDER REQUESTING ADDITIONAL INFORMATION ABOUT EXTENDED LEAVE

**Re: Navraj Chohan**

Dear Dr. Singh,

~~Employee's response to the Genetic Information Nondiscrimination Act of 2008 (GINA) and similar state law(s) prohibit employers and other covered entities from requesting or requiring genetic information of an individual or family member of the individual, except as specifically allowed by this law. To comply with the law, we are asking that you not provide any genetic information when responding to this request for medical information. "Genetic information," as defined by law, includes an individual's family medical history, the results of an individual's or family member's genetic tests, the fact that an individual or an individual's family member sought or received genetic services, and genetic information of a fetus carried by an individual or an individual's family member or an embryo lawfully held by an individual or family member receiving assistive reproductive services.~~

1. Does this employee have a physical or mental impairment(s) that limits their ability to perform any of the essential functions of their position with the Company (as set forth in the attached job description)?

Yes ☒ No ☐

If yes, is/are the impairment(s) temporary ☐ or permanent ☒?

If temporary, when will the impairment(s) end, or when do you reasonably predict it/they will end?

This impairment does not end but can be managed with treatment and medication.

If you are unable to reasonably predict when the impairment(s) will end, can you provide a date on which the employee will be reevaluated and you will be able to reasonably predict a return to work date?

within 2-3 months

Are these restrictions temporary ☐ or permanent ☐?

If temporary, when will the restrictions end, or when do you reasonably predict they will end?

Once he is stabilized he will be able to perform all job functions

<sup>1</sup> The Genetic Information Nondiscrimination Act of 2008 (GINA) and similar state law(s) prohibit employers and other covered entities from requesting or requiring genetic information of an individual or family member of the individual, except as specifically allowed by this law. To comply with the law, we are asking that you not provide any genetic information when responding to this request for medical information. "Genetic information," as defined by law, includes an individual's family medical history, the results of an individual's or family member's genetic tests, the fact that an individual or an individual's family member sought or received genetic services, and genetic information of a fetus carried by an individual or an individual's family member or an embryo lawfully held by an individual or family member receiving assistive reproductive services.

8. Do you believe that the employee has a medical condition that may require accommodations to perform their essential job functions?  
(If "yes," please identify and describe all the accommodations in detail and explain why you believe these accommodations will help this employee perform their essential job functions.)  
Yes ☐ No ☒

If "yes," please identify and describe all the accommodations in detail and explain why you believe these accommodations will help this employee perform their essential job functions.

A modified work schedule would help, especially during "episodes" when he is unwell. And at times possibly needing a leave of absence.

9. Do you believe that the employee has a medical condition that may require accommodations to perform their essential job functions?  
(If "yes," please identify and describe all the accommodations in detail and explain why you believe these accommodations will help this employee perform their essential job functions.)  
Yes ☐ No ☒

If you answered "Yes," please identify the medical provider (by name and/or by specialty) and explain the reason for your response:

I anticipate 2-3 months he will be able to return to work. tentatively April 1<sup>st</sup> 2023 without restrictions but will need to continue treatment

10. Do you believe that the employee has a medical condition that may require accommodations to perform their essential job functions?  
(If "yes," please identify and describe all the accommodations in detail and explain why you believe these accommodations will help this employee perform their essential job functions.)  
Yes ☐ No ☒

If you answered "Yes," please identify the medical provider (by name and/or by specialty) and explain the reason for your response:

~~I~~ I am specialized + providing care  
Dr. Balveen Singh DO  
Board Certified psychiatrist  
→ Pt has a mental illness that is diagnosed + being treated.

Sincerely,  
Jackie Ricci  
Labelbox  
415-294-0791  
hr@labelbox.com