FILED

IN THE WORKERS' COMPENSATION COURT OF THE STATE OF MONTH 2006

WCC No. ACC	WORKERS' COMPENSATION JUDGE
Dale Rees	O/ HELEVA, MONTANA
Petitioner	
vs.	
Montana St	ak Fund
Respondent/Ins	surer.
AFFIDAVIT	
STATE OF Rhode Island)	
County of Providence: ss.	
¶1 I Nancy Resende (NAME), being and say:	g first duly sworn upon oath, depose
12 1, Nancy Resende (NAME), (POSITION) of Providence Ukshington (NAME)	am the Composate Secretary OF INSURER OR SELF-INSURER).
13 In my capacity as Corporate Socretary (POSITION) of Prandence Washington Insurance Company
(NAME OF INSURER OR SELF-INSURER), I a set forth in this affidavit on behalf of validing with	
SELF-INSURER) and to bind how dense Washington SELF-INSURER) by these statements.	
¶4 After a review of our records, I swear und (NAME OF INSURER OR SELF-INSURER) si entitled action for any or all of the following reason	

		INSURER) has not the state of Monta	ever written work		INSURER ompensation		
		-	not have any Monta	ana cl			
	v P		了 Tange (NAME no claimants mee in the summons;	OF ting th	INSURER ne Court's c	OR riteria	SELF- in this
			(NAME r is in liquidation d led summons serv	luring			
may c the fo OF IN couns	to 90 days fro conduct discov regoing state ISURER OR S el for Petition	that the Montana m the date of filing very and investigat ment(s) made by self-insurer), the Court was statements made	this affidavit withing the for the limited parties of the limited pa	n which ourpose ydenu ys, if orer/se	ch counsel fo se of proving Wakingto Tai no objection	r Petiti or disp <u>wane</u> (is lode	oner[s] proving (NAME ged by
¶6	I declare under penalty of perjury that the foregoing is correct. DATED this, 200						
			Nancy Res	send	(Name))	
	Nancy Resende (Name) Corporale, Secretary (Title) Signed and sworn to before me this day of February, 200						
	(SEAL)		Notary Public for Residing at: 12 My Commission	r the	State of Rho	de <u>Te</u> Prov D8	Jand
Affidavi	t - Page 2		-	•	/		