IN THE WORKERS' COMPENSATION COURT OF THE STATE OF MONTANA WCC No. 2001-0300

CASSANDRA SCHMILL

Petitioner

VS.

DEC 2 0 2005

LIBERTY NORTHWEST INSURANCE CORPORATION

OFFICE OF WORKER'S COMPENSATION JUDGE HELENA, MONTANA

Respondent/Insurer

MONTANA STATE FUND

Intervenor.

| AFFIDAVIT |
|------------------|
|------------------|

| | AFFIDAVII |
|--|--|
| STATE OF Michigan): ss. County of Oakland) | |
| County of <u>Oakland</u> : ss. | |
| 91 1 Mary Ann Townsen J (N) and say: | AME), being first duly sworn upon oath, depose |
| 12 1, Mary Ann Townsen | (NAME), am the Asst Treasurer |
| (PUSITION) OF HIPTOCS INCREASED CO | (NAME OF INSURER OR SELF-INSURER). |

- (NAME OF INSURER OR SELF-INSURER), I am authorized to make the statements set forth in this affidavit on behalf of Motors Insurance Corp. (NAME OF INSURER OR SELF-INSURER) and to bind Motors Insurance Corp. (NAME OF INSURER OR SELF-INSURER) by these statements.
- After a review of our records, I swear under oath that <u>Motors Insurance loop</u> (NAME OF INSURER OR SELF-INSURER) should be dismissed from the above-entitled action for any or all of the following reasons (check any or all that apply):

100KET HEM NO. 99

| × | INSURER) has never written workers' compensation insurance in the state of Montana; |
|--|--|
| ÞΧ | Motors Insurance Corp (NAME OF INSURER OR SELF. INSURER) does not have any Montana claims; |
| | (NAME OF INSURER OR SELF-INSURER) has no claimants meeting the Court's criteria in this matter as set forth in the summons; |
| | (NAME OF INSURER OR SELF-INSURER) was or is in liquidation during the period in question set forth in the amended summons served upon me. |
| of up to 90 days in may conduct discount the foregoing state of INSURER OR the Petitioner's conduct the sworth of the Petitioner's conduct the Pet | d that the Montana Workers' Compensation Court may allow a period from the date of filing this affidavit within which Petitioner's counsel overy and investigation for the limited purpose of proving or disproving ement(s) made by me on behalf of Modors Insurance (NAME SELF-INSURER). After such 90 days, if no objection is lodged by unsel, the Court will dismiss the insurer/self-insurer from this action in statements made by me in this affidavit. der penalty of perjury that the foregoing is correct. Statement of December 1, 2005. |
| | Mary Cer Pournel (Name) Asst Treasurer |
| | Hss+ Ireasurer (Title) |
| Signed and | sworn to before me this 16th day of December, 2005 |
| | Rhomes Daylor |
| (SEAL) | Notary Public for the State of ONDA GAYLOR Residing at: Notary Public, Oskland County, Av. My Commission Expires Sep. 16, 2001 |
| Affidavit - Page 2 | The second of th |