FILED

JAN 2 3 2006

## IN THE WORKERS' COMPENSATION COURT OF THE STATE OF MONIFANA WORKERS COMPENSATION JUDGE

WCC No. 2001-0300

HELENA, MONTANA

**CASSANDRA SCHMILL** 

Petitioner

٧\$,

## LIBERTY NORTHWEST INSURANCE CORPORATION

Respondent/Insurer

## MONTANA STATE FUND

Intervenor.

entitled action for any or all of the following reasons (check any or all that apply):

AFFIDAVIT	
STATE OF <u>Illinois</u> ) : ss.	
County of <u>Cook</u> )	
¶1 I John B. Euwema (NAME), being first duly sworn upon oath, depose and say:	
1	:1
After a review of our records, I swear under oath that <u>Insurance Company</u> (NAME OF INSURER OR SELF-INSURER) should be dismissed from the above-	

	HELLEGE CELET
X	Insurance Company (NAME OF INSURER OR SELF-INSURER) has never written workers' compensation insurance in
	the state of Montana;
	Horitage Casualty
<b>\_</b>	Insurance Company (NAME OF INSURER OR SELF-
	INSURER) does not have any Montana claims;
<u> </u>	Heritage Casualty Insurance Company (NAME OF INSURER OR SELF-
<u> </u>	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.
¶5 l understan	d that the Montana Workers' Compensation Court may allow a period
00 dovo	from the date of filing this affidavit within Which Petitioner's counsel
may conduct disco	overy and investigation for the limited purpose of proving or disproving ement(s) made by me on behalf of Insurance Company (NAME
the foregoing state	SELF-INSURER). After such 90 days, if no objection is lodged by
the Petitioner's co	ounsel, the Court will dismiss the insurer/self-insurer from this action
based on the swor	n statements made by me in this affidavit.
•	ider penalty of perjury that the foregoing is correct.
DATED this	23rd day of <u>January</u> , 200 <u>6</u> .
	$// \rightarrow $
	John 18 Comme
	John J. Euwema (Name)
•	Sr. VP, Secretary & General Counsel
	(Title)
	2006
Signed and	sworn to before me this 23rd day of January , 2006.
} B/	OFFICIAL SEAL ARBARA J GANNON  ARBARA J GANNON
NOTAR	PUBLIC-STATE OF ILLINOIS & DUNG WITH J STUTION
<b>MY</b> CO	Notary Public for the State of Illinois Residing at: 200 N. Martingale Road, Schaumburg
(SEAL)	My Commission Expires: 12/1/08
(50,10)	