## FILED

NOV 3 3 2006

## OFFICE OF IN THE WORKERS' COMPENSATION COURT OF THE STATE OF THE STATE

WCC No. <u>2001 - 0</u>300

Cassandra M. Schmill

**Petitioner** 

vs.

Liberty Northwest Insurance Corporation

Respondent/Insurer.

## **AFFIDAVIT**

STATE OF FLORIDA ) : ss.

County of PALM BEACH )

¶1 I  $\frac{\text{Marianna}}{\text{Certified}} \frac{\text{Valer}}{\text{Paraiegal}}$  (NAME), being first duly sworn upon oath, depose and say:

¶2 |, Marianna Valer (NAME), am the Legal Analyst (POSITION) of Lumbermen's Underwrit (NAME OF INSURER OR SELF-INSURER).

- In my capacity as Legal Analyst (POSITION) of Lumbermen's Underwriting Alliance (NAME OF INSURER OR SELF-INSURER), I am authorized to make the statements set forth in this affidavit on behalf of Lumbermen's Underwrit (NAME OF INSURER OR SELF-INSURER) and to bind Lumbermen's Underwrit (NAME OF INSURER OR SELF-INSURER) by these statements. Alliance
- ¶4 After a review of our records, I swear under oath that <u>Lumbermen's Underwriting Alliance</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):

	INSURER) has never writte the state of Montana;		INSURER mpensation i		
	INSURER) does not have an	Y .		OR SELF-	
	bermen's Underwriting (INSURER) has no claiman matter as set forth in the sur	nts meeting th		OR SELF- teria in this	
	INSURER) was or is in liquiforth in the amended summe	idation during t			
of up to 90 days from may conduct discover the foregoing stater of insurer or sounsel for Petition	that the Montana Workers' (m the date of filing this affidatery and investigation for the ment(s) made by me on behalf self-insurer). After succer[s], the Court will dismiss statements made by me in the	avit within which limited purpos nalf of Lumberme th 90 days, if i the insurer/se	h counsel for e of proving o en's Underwin no objection	Petitioner[s] or disproving ritiname is lodged by	
	er penalty of perjury that the	foregoing is co			
		MUUL	(Name)		
	Legal	Analyst	(Title)		
Signed and s	sworn to before me this <u>/</u> /	_day of <i>L</i> _e	OVEMBER	_, 200 <i>_</i> 6	
Sylvia Meiseles My Commission DE Expires April 22, 20	Notary	Public for the S	Mens State of FL Military	Trail BR PL.	3344.
(SEAL)		nmission Expir		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	()
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