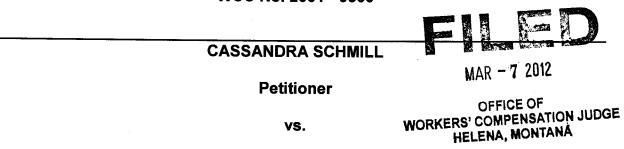
IN THE WORKERS' COMPENSATION COURT OF THE STATE OF MONTANA

WCC No. 2001 - 0300



LIBERTY NORTHWEST INSURANCE CORPORATION

Respondent/Insurer,

MONTANA STATE FUND

Intervenor.

AFFIDAVIT			
STATE OF CONNECTICUT)			
County of Hartford)			
¶1 I, Kimberly D'Amato, being first duly sworn upon oath, depose and say:			
¶2 I, Kimberly D'Amato, am a Home Office Consultant of Twin City Fire Insurance Company .			
¶3 In my capacity as Home Office Consultant of Twin City Fire Insurance Company I am authorized to make the statements set forth in this affidavit on behalf of Twin City Fire Insurance Company and to bind Twin City Fire Insurance Company by these statements.			
¶4 After a review of our records, I swear under oath that Twin City Fire Insurance Company should be dismissed from the above-entitled action for any or all of the following reasons (check any or all that apply):			
(NAME OF INSURER OR SELF-INSURER) has never written workers' compensation insurance in the state of Montana;			
(NAME OF INSURER OR SELF-INSURER) does not have any Montana claims;			

\bowtie	Iwin City Fire Insurance Company 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.		
I understand that the Montana Workers' Compensation Court may allow a period of up to 90 days from the date of filing this affidavit within which counsel for Petitioner[s] may conduct discovery and investigation for the limited purpose of proving or disproving the foregoing statement(s) made by me on behalf of Twin City Fire Insurance Company. After such 90 days, if no objection is lodged by counsel for Petitioner[s], the Court will dismiss the insurer/self-insurer from this action based on the sworn statements made by me in this affidavit.			
¶6	I declare under penalty of perjury that the foregoing is correct.		
	DATED this day of	, 2011. Nimberly D'Amato	
	Home Office Consultant		
2011.	Signed and sworn to before me this day of		
	- -	[Signature of Notary] LISA M. VIVAREU [Typed, stamped, or printed Name of Notary]	
	(NOTARIAL SEAL) F	Notary Public for the State of <u>COUNTERT CUT</u> Residing at My commission expires:2011	

LISA M. VIVARELLI NOTARY PUBLIC 4Y COMMISSION EXPIRES MAR. 31, 2014