

Todd A. Hammer Hammer, Quinn & Shaw, PLLC 100 Financial Drive, Suite 100 P.O. Box 7310 Kalispell, MT 59904-0310 Telephone: (406) 755-2225

CASSANDRA SCHMILL,

Facsimile:

this matter;

JUL 2 8 2016

OFFICE OF WORKER'S COMPENSATION JUDGE HELENA, MONTANA

WCC No. 2001-0300

Attorneys for Northwestern Healthcare Corporation

(406) 755-5155

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

Petitioner,	
vs.	
LIBERTY NORTHWEST INSURANCE CORPORATION,	AFFIDAVIT OF CASEY BUCKINGHAM
Respondent/Insurer,	
vs.	
MONTANA STATE FUND,	
Intervenor.	
STATE OF MONTANA )	
County of Cascade )	
I, Casey Buckingham, being first duly sw	orn, depose and say:
1. I am an employee in the Human F have been working with Barb Panagopolous, the handling and adjusting the claims of Benefis Hea	Resource Department with Benefis Healthcare. I adjuster for Brentwood who is responsible for althcare insofar as this action;

I am authorized to make statements on behalf of Benefis Healthcare in regard to

After a review of records, I swear under oath that Benefis Healthcare should be

Benefis Healthcare has no claimants meeting the court's criteria in this matter as set forth

dismissed from the above-and title action for the following reason:

in the summons or amended summons.

4. I understand the Montana Worker's Compensation Court may allow up to 90 days from the date of filing of this affidavit within which Petitioner's counsel may conduct discovery and investigate for the limited purpose of proving or disproving the foregoing statement(s) made by me on behalf of Benefis Healthcare Corporation. After such 90 days, if no objection is lodged by Petitioner's counsel, the court will dismiss the insurer/self-insurer from this action based upon the sworn statements made by me in this affidavit.

5	I declare under	nenalty of	neriury that th	a foregoing is	correct
J.	i ucciaic ulluci	penany or	perjury mar u	re internitif is	COHECU.

Dated this 22 day of July, 2016.

Casey Buckingham

Subscribed and sworn to me upon oath this and day of July, 2016.

SEAL

PAMALIA J. BLACKWELL NOTARY PUBLIC for the State of Montana Residing at Great Falls, Montana My Commission Expires November 29, 2019 Type, Stamp or Print Name

Notary Public for the State of Montana Residing at Creat falls, Montana

My commission expires 11/29, 2019

## **CERTIFICATE OF SERVICE**

I do hereby certify that on the 1<sup>st</sup> day of August, 2016, I served a copy of the foregoing in the above matter by mailing a copy thereof, first class postage prepaid to:

Laurie Wallace Bothe & Lauridsen, PC Attorney at Law P.O. Box 2020 Columbia Falls, MT 59912

Todd A. Hanm