

IN THE WORKERS' COMPENSATION COURT OF THE STATE OF MONTANA

WCC No. 2000-0222 & 2003-0771

Robert Flynn & Carl Miller

Petitioners

vs.

FILED

MAR - 7 2012

State Compensation Insurance Fund et al

OFFICE OF
WORKERS' COMPENSATION JUDGE
HELENA, MONTANA

Respondent/Insurer

AFFIDAVIT

STATE OF _____)
: ss.
County of _____)

¶1 I _____ (NAME), being first duly sworn upon oath, depose and say:

¶2 I, Charles Kroh (NAME), am the Senior Vice President (POSITION) of American Reinsurance Company ("American Re") (NAME OF INSURER OR SELF-INSURER).

¶3 In my capacity as Senior Vice President (POSITION) of American Re (NAME OF INSURER OR SELF-INSURER), I am authorized to make the statements set forth in this affidavit on behalf of American Re (NAME OF INSURER OR SELF-INSURER) and to bind American Re (NAME OF INSURER OR SELF-INSURER) by these statements.

¶4 After a review of our records, I swear under oath that American Re (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):

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- _____ (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;
- American Re (NAME OF INSURER OR SELF-INSURER) has no claimants meeting the Court's criteria in this matter as set forth in the summons; and Flynn III, 2011 MT 300.
- _____ (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.

¶15 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 American Re (NAME OF INSURER OR SELF-INSURER). 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.

¶16 I declare under penalty of perjury that the foregoing is correct.

DATED this _____ day of _____, 2012

[Signature]

 (Name)
Senior Vice President

 (Title)

Signed and sworn to before me this 1st day of March, 2012

Lauren M. Lupica
 Notary Public for the State of NJ
 Residing at: Princeton NJ
 My Commission Expires: 08-21-12

(SEAL)

LAUREN MARY LUPICA
 Notary Public, State of New Jersey
 No. 2291019
 Qualified in Middlesex County
 Commission Expires August 21, 2012