

IN THE WORKERS' COMPENSATION COURT OF THE STATE OF MONTANA

WCC No. 2000 - 0222

ROBERT FLYNN and CARL MILLER,
Individually and on Behalf of Others Similarly Situated,

Petitioners

vs.

MONTANA STATE FUND,

Respondent/Insurer,

and

LIBERTY NORTHWEST INSURANCE CORPORATION,

Intervenor.

FILED

SEP 15 2016

OFFICE OF
WORKERS' COMPENSATION JUDGE
HELENA, MONTANA

AFFIDAVIT

STATE OF MONTANA)
 : ss.
County of Flathead)

1. I, Jerry Lusk, being first duly sworn upon oath, depose and say:
2. I, Jerry Lusk, am the Chairman of the Board of Caring For Montanans, Inc. *Combined Benefits Insurance Company* was, at the time of the issues arising in this matter, a wholly owned subsidiary of CFM.
3. In my capacity as Chairman of CFM, I am authorized to make the statements set forth in this affidavit and bind CFM and *Combined Benefits Insurance Company* by these statements.
4. After a review of our records, I swear under oath that *Combined Benefits Insurance Company* should be dismissed from the above-entitled action because *Combined Benefits Insurance Company* has no claimants meeting the Court's criteria in this matter as set forth in the summons;

DOCKET ITEM NO. 735

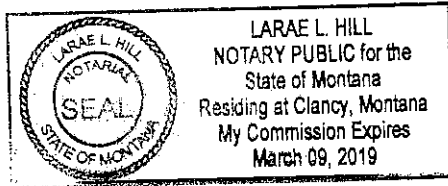
5 I understand that the Montana Workers' Compensation Court may allow a period of up to 90 days from the date of filing this affidavit within which counsel for Petitioner[s] may conduct discovery and investigation for the limited purpose of proving or disproving the foregoing statement(s) made by me on behalf of *Combined Benefits 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 8th day of September, 2016.

Jerry Lusk
Jerry Lusk, Board Chairman
Caring for Montanans, Inc.

Signed and sworn to before me this 8th day of September, 2016.



(NOTARIAL SEAL)

Larae L. Hill
[Signature of Notary]
Larae L. Hill
[Typed, stamped, or printed Name of Notary]
Notary Public for the State of Montana
Residing at Clancy MT
My commission expires: 3-9-19