



Reliance

(IN LIQUIDATION)
Three Parkway
Philadelphia, PA 19102-1376

March 3, 2005

Workers Compensation Court
1625 11th Avenue
P.O. Box 537
Helena, Montana 19102-1376

RE: Eula Mae Hiett

To Whom It May Concern,

We have no record of any claim pending with our Company based on the attached correspondence. If you have a claim pending with our Company, please complete the information requested below.

If this is a Workers' Compensation claim, please give this correspondence to your employer to submit the First Report of Injury Claim.

In order to properly process this claim, it is essential that you provide us with our claim number. If you do not know the claim number, we suggest you contact our insured and/or their agent. Please return this information as soon as possible so I can bring this to the attention of the Claim Consultant.

Thank you,
Claims Division

NAME OF OUR INSURED: _____

LOCATION OF ACCIDENT: _____

OUR CLAIM NUMBER/OUR POLICY NUMBER DATE OF LOSS: _____

SS# _____

NAME OF PERSON, IF ANY, YOU HAVE BEEN CORRESPONDING WITH AND TERRITORY IF KNOWN: _____

INSURED'S POLICY NUMBER: _____

P. S.
We cannot identify an insured by the name given. If you can supply additional information (i.e., policy number, alternate name, address) we will investigate the provided information further. Absent such additional documentation and/or information to allow further research, we can only assume that we do not insure the party shown in your correspondence.

FILED

MAR 17 2005

OFFICE OF
WORKER'S COMPENSATION JUDGE
HELENA, MONTANA

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