

FILED

JUL -1 2016

OFFICE OF
WORKERS' COMPENSATION JUDGE
HELENA, MONTANA

Todd A. Hammer
Hammer, Quinn & Shaw, PLLC
100 Financial Drive, Suite 100
P.O. Box 7310
Kalispell, MT 59904-0310
Telephone: (406) 755-2225
Facsimile: (406) 755-5155

Attorneys for Northwestern Healthcare Corporation

IN THE WORKERS' COMPENSATION COURT OF THE STATE OF MONTANA

<p>CASSANDRA SCHMILL, Petitioner, vs. LIBERTY NORTHWEST INSURANCE CORPORATION, Respondent/Insurer, vs. MONTANA STATE FUND, Intervenor.</p>	<p>WCC No. 2001-0300 CORRECTED AFFIDAVIT OF ALLYSA NICOL</p>
---	---

STATE OF MONTANA)
 :
County of Flathead)

I, Allysa Nicol, being first duly sworn, depose and say:

1. I am an adjuster with Brentwood Services Administrators, Inc., and I am responsible for handling and adjusting the claims of Northwest Healthcare Corporation;

2. I am authorized to make statements on behalf of Northwest Healthcare Corporation in regard to this matter;

3. After a review of records, I swear under oath that Northwest Healthcare Corporation should be dismissed from the above-and title action for the following reason:

Northwest Healthcare Corporation has no claimants meeting the court's criteria in this matter is set forth in the summons or amended summons.

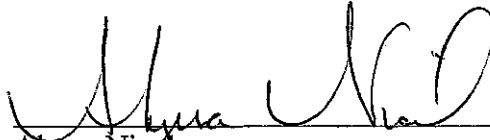
4. I understand that the Montana Worker's Compensation court may allow. Up to 90 days from the date of filing of this affidavit within which petitioner's counsel may conduct

DOCKET ITEM NO 678

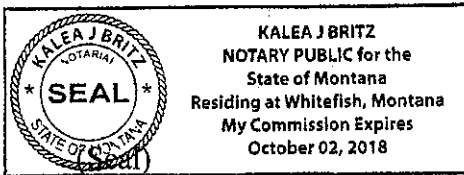
discovery and investigate for the limited purpose of proving or disproving the foregoing statement(s) made by me on behalf of Northwestern Healthcare Corporation. After such 90 days, if no objection is lodged by the petitioner's counsel, the court will dismiss the insurer/self-insurer from this action based upon the sworn statements made by me in this affidavit.

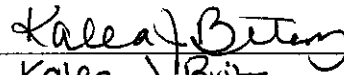
5. I declare under penalty of perjury that the foregoing is correct.

Dated this 23rd day of June, 2016.


Alyssa Nicol

Subscribed and sworn to me upon oath this 23rd day of June, 2016.

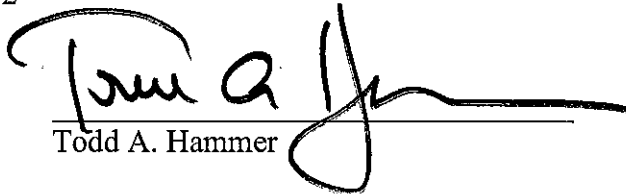



Kalea J Britz
[Type, Stamp or Print Name]
Notary Public for the State of Montana
Residing at Whitefish, Montana
My commission expires 10/2, 2018.

CERTIFICATE OF SERVICE

I do hereby certify that on the 29th day of June, 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. Hammer