

Montana Department of Labor & Industry
 Employment Relations Division
 Workers' Compensation Regulation Bureau
 P.O. Box 8011
 Helena, MT 59604-8011

**PLAN 1 IRREVOCABLE ASSIGNMENT OF
 SECURITIES AND SPECIAL POWER OF ATTORNEY**

1. The purpose of Assignment is for (“the Employer”) _____,
 of (“Address”) _____,
 (hereinafter called the Employer) a self-insured employer under compensation plan No. 1
 of the Montana Workers’ Compensation and Occupational Disease Acts, to furnish to the
 Montana Department of Labor & Industry, Employment Relations Division (hereinafter
 called the Department) security for the protection and guarantee of payment of workers’
 compensation and occupational disease liabilities owed by the Employer.

2. For good and valuable consideration, the Employer irrevocably assigns all of its right,
 title and interest in the below designated government security to the Department in trust
 for claimants of the Employer, as of this date. As of the date of this Assignment, each
 government security shall be deemed property of the Department and not property of the
 Employer. If the Department deems it necessary or convenient at any time after this
 assignment, the Department shall be entitled to and may, upon demand, retain physical
 possession of each government security at all times.

3. Each government security which is assigned to the Department is described as follows:

LOAN TITLE and/or ISSUE DENOMINATION CUSIP#
 (Include interest rate, series, issue date, call and maturity date)

Loan Title and/or Issue	Denomination	CUSIP#	Interest Rate	Series	Issue Date	Maturity Date

4. Unless the Department notifies the government entity or transfer agent otherwise,
 periodic interest on the government security may be paid directly to the Employer.
 However, at any time in its sole discretion, the Department may sell or liquidate each
 government security and apply the money as appropriate. In that regard, the Employer
 hereby authorizes the government entity or designated transfer agent to pay over the
 entire proceeds from such sale or liquidation including any earned and unpaid interest on
 each government security to the Department upon request. The Employer hereby waives

any and all claims it might have against the government entity or designated transfer agent for selling or liquidating the government security and paying all of the money to the Department.

5. After all workers' compensation and occupational disease liabilities for which the Employer is liable as a self-insurer are discharged by the Employer, the Montana Self-Insurers Guarantee Fund, or by the Department using the money generated from selling or liquidating this government security, the remaining proceeds, if any, will be refunded to the Employer or otherwise disbursed pursuant to law.
6. All disputes relating to this Assignment shall be decided in the courts of Montana pursuant to Montana law. It is mutually agreed that venue shall be in Lewis and Clark County and that each party will pay their own attorney fees and legal expenses.
7. The Employer, as the registered owner of each of the above designated government securities, does hereby irrevocably constitute and appoint the "Department of Labor & Industry" its true and lawful attorney in fact to sign and/or endorse in its name, place and stead each government security in whatever manner is necessary to negotiate the government security, selling or liquidating it, and having the full sum thereof paid directly and solely to the Department.
8. This special power of attorney shall not be affected by the subsequent insolvency or incapacity of the Employer. This special power of attorney cannot be revoked or amended by the Employer. This special power of attorney will remain in effect indefinitely.
9. The Employer further ratifies and confirms whatever action the Department takes as attorney in fact by virtue of this instrument.

Dated this _____ day of _____, _____.

CORPORATE SEAL

Self-Insured Employer

By: _____
Signature

Typed Name and Title

Attest:

By: _____
Signature of Secretary

Typed Name of Secretary