Mailing address: P.O. Box 64620 St. Paul, MN 55164-0620

STATE OF MINNESOTA COURT OF ADMINISTRATIVE HEARINGS WORKERS' COMPENSATION DIVISION 651-361-7900

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WID NUMBER or SSN	051-361-7900		
THE ROMBLING CO.			DO NOT USE THIS SPACE
DATE(S) OF CLAIMED INJURY			
EMPLOYEE			
	VS.		
EMPLOYER(S)			
	AND	Stinulatio	on of Intervention
INSURER (S)		Otipalati	
	AND		NT IN INK or TYPE. s in MM/DD/YYYY format.
Re:	dated		
(Identify dispute you are intervening in, suc	h as a Claim Petition, Medical Red	quest, or Rehabilitatior	Request)
According to Minnesota Rules, part 1415.	1200 it is stinulated and agree	ed that	
7,000 ruling to minimosota realist, part 1410.	1200, it is supulated and agree		(entity filing Motion to Intervene)
has sufficient interest to be joined as an interv	venor in the above entitled mat		, ,
Exhibit A accurately lists the amounts and the		•	·
may be amended if additional services are pro	•	o. pa.a o,oo	
,	, ,		

It is stipulated and agreed by the parties signing this stipulation that the services for which payment is being claimed are related to the alleged injury or condition in dispute and that, if the employee is successful in proving his or her claim, it is agreed that the sum provided in Exhibit A be paid to the intervenor.

The intervenor recognizes its obligation to participate in reasonable settlement discussions if such negotiations are initiated by the parties.

DATE	ATTORNEY FOR EMPLOYEE
DATE	ATTORNEY FOR EMPLOYER/INSURER
DATE	ATTORNEY FOR INTERVENOR

WID NUMBER or SSN	
DATE(S) OF CLAIMED INJURY	
STATE OF MINNESOTA } COUNTY OF } ss.	AFFIDAVIT OF SERVICE
I,, being first d	uly sworn, state that on, I
served a true and correct copy of the attached ${\bf STIPULATION\ OF}$	INTERVENTON, enclosed in a properly addressed envelope, by depositing
the same, with postage prepaid in the United States mail at	, Minnesota, addressed as follows:
Employee:	Employee Attorney:
Employer:	Employer/Insurer Attorney:
Insurer:	Other Party (Specify):
Other Party (Specify):	Other Party (Specify):
Subscribed and sworn to before me	
	nature
Notary Public	
My Commission expires	