

## STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

10 JAN 19 AM 8: 57

The name of the partnership is: The street address of its chief exe ST. MARIES, ID 83861		
	ecutive office is: 201 N. 8	RTH STREET SUITE 3
		JIII OII (LLL)
31. MARIES, ID 63001		
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The street address of one (1) office	ce in Idaho: 201 N. 8TH	STREET SUITE 3
ST. MARIES, ID 83861		
The names and mailing addresse	es of all partners (attache	ed sheets may be added):
Name	Address	
LARRY D. SCHLAPPY	201 N. 8TH STREET	SUITE 3 ST. MARIES, ID 83861
ANDREW L. KAHN	406 15TH STREET ST. MARIES, ID 83861	
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The names of the partners autho	rized to execute an inst	
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d in the name of the partnership:		rument transferring feat propert
ld in the name of the partnership:		
eld in the name of the partnership:  LARRY D. SCHLAPPY		
ld in the name of the partnership:  LARRY D. SCHLAPPY		
Signature of at least 2 partners:		
ld in the name of the partnership:  LARRY D. SCHLAPPY		
Signature of at least 2 partners:  1)  Pyped Name LARRY D. SCHLAPPY  2) (1) 2		
LARRY D. SCHLAPPY  Signature of at least 2 partners:		