Return To  Secretary of State Room 203, Statehouse Boise, ID 83720  ** FINAL NOTICE ** NO FEE REQUIRED  TO AND CITY ID 83631  4. Names and Addresses of Officers and Directors  No Campbell P.O. 90X 70  IDAHO CITY ID 83631  4. Names and Addresses of Officers and Directors  NUST BE PRINTED OR TYPED  Name Street or P.O. Address  City State  Zip  President:  Don Campbell P.O. Box 70  Idaho City Id. 83631  Secretary:  Lee Dimlet P.O. Box 327  Idaho City Id. 83631  Naney Secor P.O. Box 327  Idaho City Id. 83631  Naney Secor P.O. Box 327  Idaho City Id. 83631  Naney Secor P.O. Box 327  Idaho City Id. 83631		INSTRUC	IONS ON REVEHSE SIDE	· 1 ** * 1 * 1 .	= /= 1 w'. s	
Secretary of State Room 203, Statehouse Boise, ID 83720  ** FINAL NOTICE ** NO FEE REQUIRED  ** IDAHO CITY CHAMBER OF COMMERCE, IDAHO CITY ID R3631  ** FINAL NOTICE ** NO FEE REQUIRED  ** IDAHO CITY ID 83631  ** IDAHO CITY ID R3631  ** IDAHO CITY		of State Statehouse 10 AHO CITY CHAMBER OF COMMERCE, DON CAMPBELL		P.O. BOX 70 IDAHO CITY HOTFL IDAHO CITY ID 83631		
** FINAL NOTICE ** NO FEE REQUIRED IDAHO CITY ID 83031 NO: 95333  4. Names and Addresses of Officers and Directors    Name	Secretary of State Room 203, Statehouse					
President: Secretary: Don Campbell P.O. Box 70 Idaho City Id. 83631 Secretary: Lee Dimler P.O. Box 262 Idaho City Id. 83631 Ton Secon P.O. Box 327 Idaho City Id. 83631 Nancy Secon P.O. Box 327 Idaho City Id. 83631 Nancy Secon P.O. Box 327 Idaho City Id. 83631  Sometary: Directors:  Ton Secon P.O. Box 327 Idaho City Id. 83631  Nancy Secon P.O. Box 327 Idaho City Id. 83631  Sometary: Date 10-25-93	NO FEE REQUIRED	IDAHO CITY	ID 83631	of ID	The Laws	
President: Secretary: Don Campbell P.O. Box 70 Idaho City Id. 83631 Secretary: Lee Dimler P.O. Box 262 Idaho City Id. 83631 Directors: Tom Secon P.O. Box 327 Idaho City Id. 83631 Nancy Secon P.O. Box 327 Idaho City Id. 83631 Nancy Secon P.O. Box 327 Idaho City Id. 83631  5. Nature of Business Chamber of Commerce  6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.  Chamber of Commerce  Signature  Dete: 10-25-93	4. Names and Addresses of Office	ers and Directors	MUST BE PRINTED (	OR TYPED		
Secretary: Directors:  Lee Dimler P.O. Box 262 Idaho City Id. 83631  Tom Secon P.O. Box 327 Idaho City Id. 83631  Nancy Secon P.O. Box 327 Idaho City Id. 83631  Nancy Secon P.O. Box 327 Idaho City Id. 83631  5. Nature of Business  6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.  Signature Date 10-25-93			Street or P.O. Address	<u>City</u>	<u>State</u>	<u>Zip</u>
Directors:  Tom Secor P.O. Box 327 Idaho City Id. 83631  Nancy Secor P.O. Box 327 Idaho City Id. 83631  5. Nature of Business  6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.  Chamber of Commerce  Signature  Signature  Date	President:	Don Campbell	P.o. Box 70	Idaho City	Id. 8	3631
Nancy Secor P.O. Box 327 Idaho City Id. 83631  Nancy Secor P.O. Box 327 Idaho City Id. 83631  6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.  Chamber of Commerce Signature of Commerce			P.O. Box 262	Idaho City	Id. 8	3681
Nancy Secor P.O. Box 327 Idaho City Id. 83631  5. Nature of Business  6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.  Chamber of Commerce  Signature  Date 10-25-93		Tom Secor	P.O. Box 327	IdahoCity	Id. 8	368)
Chamber of Commerce Signature and complete.  Date 10-25-93		Nancy Secor	P.O. BOX 327	- I		363
1. /Typed or	5. Nature of Business	i true combo	t this Annual Report has been examinated the complete.	^		rledge
In am phell the tresident	CHAMBER OF COMMEN	Signature Name (Typed or	Con Carmer			
	<u> </u>	, and printed)	Lon amphell	i i i i i i	LIEZIGENT	