

| No. 124533  | <b>Idaho Corporation Annual Report Form</b>   |   | 2. Registered Agent and Office   |     |           |                        |                |          |                         |            |                           |                |  |  |            |  |  |  |  |            |  |  |  |  |
|---|---|---|--|-----|-----------|------------------------|----------------|----------|-------------------------|------------|---------------------------|----------------|--|--|------------|--|--|--|--|------------|--|--|--|--|
| Return To<br><br><b>Secretary of State</b><br><b>Room 203, Statehouse</b><br><b>Boise, ID 83720</b><br><br>3 OCT 21 1988  | Due No Later Than November 1, 1988  |   | HENRY SIJOHA<br>P.O. BOX 401<br>PLUMMER, IDAHO<br>83851                              |     |           |                        |                |          |                         |            |                           |                |  |  |            |  |  |  |  |            |  |  |  |  |
|   | 1. Mailing Address — Please Correct 084583  |   |  |     |           |                        |                |          |                         |            |                           |                |  |  |            |  |  |  |  |            |  |  |  |  |
|   | NORTHWEST INDIAN CHILD WELFARE ASSOCIATION<br>RRI<br>P.O. BOX 751<br>PORTLAND, OREGON 97201-97207 |   | 3. Incorporated Under The Laws of<br>ENTERED<br>10 43<br>STATE OF OREGON NOV 10 1988 |     |           |                        |                |          |                         |            |                           |                |  |  |            |  |  |  |  |            |  |  |  |  |
| 4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President:</td> <td colspan="4">Please see attached list.</td> </tr> <tr> <td>Secretary:</td> <td colspan="4"></td> </tr> <tr> <td>Directors:</td> <td colspan="4"></td> </tr> </tbody> </table> <p style="text-align: center; font-size: 1.5em;">x Gary W. Esterson</p> |   |   |  |     | Name      | Street or P.O. Address | City           | State    | Zip                     | President: | Please see attached list. |                |  |  | Secretary: |  |  |  |  | Directors: |  |  |  |  |
| Name  | Street or P.O. Address  | City  | State  | Zip |           |                        |                |          |                         |            |                           |                |  |  |            |  |  |  |  |            |  |  |  |  |
| President:  | Please see attached list.   |   |  |     |           |                        |                |          |                         |            |                           |                |  |  |            |  |  |  |  |            |  |  |  |  |
| Secretary:  |   |   |  |     |           |                        |                |          |                         |            |                           |                |  |  |            |  |  |  |  |            |  |  |  |  |
| Directors:  |   |   |  |     |           |                        |                |          |                         |            |                           |                |  |  |            |  |  |  |  |            |  |  |  |  |
| 5. Nature of Business<br>Non-profit organization  |   | 6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.<br><table border="1"> <tr> <td>Signature</td> <td>Date</td> </tr> <tr> <td>Terry L. Cross</td> <td>10/18/88</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Title</td> </tr> <tr> <td>Terry L. Cross</td> <td>Exec. Director</td> </tr> </table> |  |     | Signature | Date                   | Terry L. Cross | 10/18/88 | Name (Typed or Printed) | Title      | Terry L. Cross            | Exec. Director |  |  |            |  |  |  |  |            |  |  |  |  |
| Signature   | Date  |   |  |     |           |                        |                |          |                         |            |                           |                |  |  |            |  |  |  |  |            |  |  |  |  |
| Terry L. Cross  | 10/18/88  |   |  |     |           |                        |                |          |                         |            |                           |                |  |  |            |  |  |  |  |            |  |  |  |  |
| Name (Typed or Printed)   | Title   |   |  |     |           |                        |                |          |                         |            |                           |                |  |  |            |  |  |  |  |            |  |  |  |  |
| Terry L. Cross  | Exec. Director  |   |  |     |           |                        |                |          |                         |            |                           |                |  |  |            |  |  |  |  |            |  |  |  |  |

NORTHWEST INDIAN CHILD WELFARE ASSOCIATION, INC.  
BOARD OF DIRECTORS  
October, 1988

Gary Peterson, President; W. 81 Hwy. 108, Shelton, WA 98584  
Frank Peterson, Treasurer; PO Box 549, Siletz, OR 97380  
Jan Goslin, Secretary; 1925 Owen Dr., Montesano, WA 98563  
Michelle Aguilar, 5501 40th Court, S.E., Lacey, WA 98503  
Elizabeth Red Bear, PO Box 151, Toppenish, WA 98948  
Eloise King, PO Box 3277, Omak, WA 98841  
Henry SiJohn, PO Box 401, Plummer, ID 83851  
Lola Schappy, 2501 Looksh Street, Warm Springs, OR 97761  
Rhonda Foster, W. 2011 Hwy. 108, Shelton, WA 98584  
Andrew Pascua, PO Box 876, Neah Bay, WA 98357  
Loraine Brave, 15165 Sunwood Blvd., Seattle, WA 98188  
Willie Jones, 4067 Lummi Shore Drive, Bellingham, WA 98226  
Gloria Williams, Rt. 1 Box 416, Pendleton, OR 97801  
Julia Davis, Nez Perce Tribe of Idaho, Lapwai, ID 83540  
Guy McMinda, PO Box 67, Taholah, WA 98587  
Barbara Jones, PO Box 402, Taholah, WA 98587  
Anna Lattimere, 6505 NE Brooklyn Rd., Bainbridge Island, WA 98110  
Maria Tenorio, 453 Senate, Salem, OR 97304  
Merle Leno, PO Box 38, Grand Ronde, OR 97347  
Marsha Massey, 2705 E. Burnside, Portland, OR 97214  
Tessie Williams, PO Box 607, Pendleton, Oregon 97801

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- A. Please correct any pre-printed information
- B. You may change the information in Block address must be the physical location at any necessary changes on the form itself.
- C. You must enter complete information in block
- D. This report must be signed by an OFFICE agent or attorney is NOT sufficient.
- E. Return completed annual report form to:

1206J 334-2300

DUE NO LATER THAN NOVEMBER 1