		Annual Report Form Due No Later Than November 30, 1. Mailing Address - Please Correct If Not Correct CASSIA CUUNTY 12AHO HUMAN RE P.O. Box 1088 205 = 15TH STREET JURLEY I D 83313 Addresses of President, Secretary and Directors er Names and Addresses of Managers or Members		\$T\$PHEN 705 = 15 P.O. Box	3. Organized Under the Laws of: I D C 102870		
Office held	Name	realites and Address	Street or P.O. Address	City	State	Zip	
President		A. Bywater	P.O. Box 1088	Burley	ID	83318	
•			701 E 16th St	Burley	ID	83318	
Treasurer	Virginia	a Belnap	P.O. Box 514	Burley	, ID	83318	
NATURE OF		kno Sigr	rtify that this Against Beport has be wiedge true, confiction complete nature	. Date _	7-22-96	est of my	
SKOATJE	SUPPORT	Nam	I O (Typed or Stephen A. Bywa	rer Title Pi	resident		
<u> </u>		7-05-1995			4503		