July 13, 1995

MYWEST, INCORPORATED
DAVID C ACKLEY
PO BOX 1300
PRIEST RIVER ID   83856

RE: MYWEST, INCORPORATED   File Number C 96732

Dear Mr. Ackley:

Please find enclosed your recently submitted annual report for the 1994-1995
fiscal year. We are unable to accept it in its present form. Please make the
following correction(s) and return to this office.

The instructions for filing are on the back of the annual report form. You
must complete each instruction before it is acceptable to file.

Please be certain that the names and addresses of the officers in block 4 are
complete. (A notation that the information is the same as last year will not
be accepted.) After completing that block, resubmit the annual report to this
office. See instruction #3.

Block 5 on your annual report must be completed to show the nature of business
of the corporation. See instruction #4.

The annual report must be signed by an authorized individual designated by the
board of the corporation. See instruction #5.

If you have any questions or need further assistance, please do not hesitate
to contact me at (208) 332-2816.

                                        Very truly yours,

                                        Tonya Herold
                                        Corporate Division

Enclosures: cited

ISSUED: 07-04-1995

No. 96732	**Idaho Corporation Annual Report Form**	2. Registered Agent and Office NOT A P.O. BOX
Return To	*Due No Later Than November 30* 1995	DAVID C ACKLEY
	1. Mailing Address – Please Correct If And Correct	500 ALBENI HWY
Secretary of State	MYWEST, INCORPORATED	PO BOX 1300
700 W Jefferson	~~DANIEL UNTI~~ David C. Ackley	PRIEST RIVER ID 83856
P.O. Box 83720	~~2300 COLUMBIA CENTER~~ 500 Albeni Hwy	3. Incorporated Under The Laws of
Boise, ID 83720-0080	~~701 5TH AVE~~ P.O. Box 1300	WA
* FIRST NOTICE *	~~SEATTLE~~ ~~WA 98104~~	NO: 96732
NO FEE REQUIRED	Priest River, ID 83856	

4. Names and Addresses of Officers and Directors

	Name	Street or P.O. Address	City	State	Postal Code
President:					
Secretary:					
Directors:					

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_____
	Name (Typed or Printed)_____ Title_____