No. C 54868	Annual Report Form 1995 Due No Later Than November 30,		and Office NC	T A P.O. BOX	
SECRETARY OF STATE	1. Mailing Address - Please Correct, If Not Correct	MAIN AND		,	
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	STEELE MEMORIAL BENEFIT ASSO SEORSE GALVAN P.O. BOX 700	SALMON 3. Organized Under	ID		
* FIRST NOTICE	* SALMON ID 83457	15	۲ ج	4868	
4. Corporations: Enter Name Limited Liability Companies	s and Addresses of President, Secretary and Directors s: Enter Names and Addresses of I Managers or I Member	s (check one)			
Office held Na	me Street or P.O. Address	<u>City</u>	State	<u>Zip</u>	
Chairman Ge	orge Galvan 600 14th St.	Salmon	ID	83467	
	b Daniels P.O.Box 68	Salmon	ID	83467	
Member Da	le Jolley Rt. 1 Box 15	Salmon, -	ID	83467	
Member Sc	ott Tyler HC68,Box 15	Leadore	ID	83464	
Member Sa	.11y Edwards Box 747	Salmon -	ID	83467	
Member Ph	Phoebe A. Finlayson Box 1485		ID	9 3467	
Member Ja	nice Neal Box 135	Carmen	ID	83462	
Member Ca	rl Heckendorf Rt. 1 Box 116A	Salmon	ID	83467	
Member G1	en Sorensen 700 Lombard	Salmon	ID	83467	
5. NATURE OF BUSIN	Signature Signature	Signature Date 7/17/96			
TIPECH YTHUOD	Name Printed George Galvan	Title	airma#)	
ISSUED: 37-0	5-1995	1	0275		