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Date Appointed Chairperson's Name	_
Address	
City Zip Code	
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Treasurer's Name	
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	true,
SIGNATURE I declare that this statement has been examined by me and to the best of my knowledge and belief is t	
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SIGNATURE I declare that this statement has been examined by me and to the best of my knowledge and belief is t rrect and complete. I understand that the intentional failure to file this document or intentionally fili lse document is a class A misdemeanor." July 7, 2020	