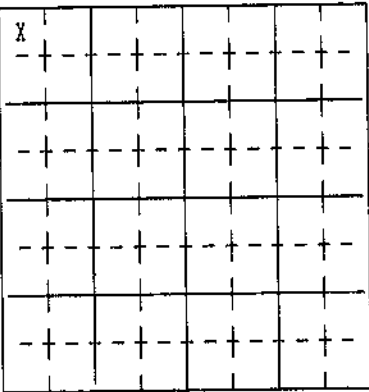


1. Location of Well	County Kalamazoo	Township Schoolcraft	Fraction NW 1/4 NW 1/4 NW 1/4	Section Number 23	Town Number 4 S	Range Number 11 W
Distance & Direction From Road Intersection south east corner of intersection of W Ave & Portage Rd.				3. Owner of Well: H & H Feed & Grain		
Street & City of Well 14903 Portage Rd. Vicksburg				Address 14903 Portage Rd. Vicksburg MI 49097		
Sketch Map 				Address Same as Well Location? Yes		
				4. Well Depth 93 Date Completed 11/04/99 Type Repl		
2. FORMATION DESCRIPTION				5. METHOD: Rotary Other		
				6. USE: Other type 111		
				7. CASING: Plastic Diameter 5 in to 93 ft. depth in to ft. depth BORE HOLE Diameter 8 in to 93 ft. depth in to ft. depth Height Above/Below Above Surface 1 ft. Weight lbs/ft. Drive Shoe Yes X No Shale Packer Yes X No		
Back Fill Stone 2 2 Br. Clay W/Gravel 6 8 Med. Red Br. Sand 7 15 Fine Lt. Br. Gravel 12 27 Fine Orange Gravel 3 30 Fine Lt. Br. Gravel 8 38 Gray Clay 7 45 Fine Gray Gravel 4 49 Fine Gray Gravel W/Clay 20 69 Coarse Gray Sand 3 72 Gray Clay 11 83 Fine Gray Br. Gravel 10 93				8. SCREEN: Not Installed Type PVC Diameter 5 inch Slot/Gauze Slot 18 Length 5 ft Set Between 88 ft and 93 ft Fittings Blank Above Screen 0 Other		
15. ABANDONED WELL PLUGGED? Yes X No Casing Diameter 1 1/4 ft. Depth ft. PLUGGING MATERIAL No. of Bags Casing Removed Yes No				9. STATIC WATER LEVEL 20 Ft. Below Land Surface Flow		
				10. PUMPING LEVEL: below land surface 23 Ft. after 1 hrs. pumping at 30 G.P.M. Ft. after hrs. pumping at G.P.M. Plunger Bailer X Air Test Pump		
16. REMARKS plumbing & wiring not completed, still using existing well				11. WELL HEAD COMPLETION X Pitless Adapter X 12" abv grade Basement Offset Well House		
				12. WELL GROUTED No X Yes From 0 to 85 Ft. Neat Cement X Bentonite Other No. Bags Cement 6.50 Additives		
17. Rig Operator's Name: Rick Clark X Employee Subcontractor				13. NEAREST SOURCE OF POSSIBLE CONTAMINATION Type septic Distance 85 Ft. Direction n Type Distance Ft. Direction		
				14. PUMP Not Installed Pump Installation Only Manufacturer's Name F&W Model Number 4P10G05305 HP 1/2 Volts 220 Length of drop pipe 40 Ft. Capacity 10 GPM Type X Submersible Jet Pressure Tank Name Xtrol Pressure Tank Model 203 Capacity 40 Gallons		
AUTHORITY: Act 368 PA 1978 COMPLETION: Required PENALTY: Conviction of a violation of any provision is a misdemeanor.  IMPORTANT: File with deed.				18. WATER WELL CONTRACTORS CERTIFICATION This well was drilled under my jurisdiction, and this report is true to the best of my knowledge and belief REGISTERED BUSINESS NAME: Clark Well Drilling REGISTRATION NUMBER: 1794 ADDRESS: 51833 N. Nottawa Rd. Mendon MI 49072 DATE: 11/5/99 SIGNED: <i>[Signature]</i> (Authorized Representative)		
				(Geological Survey Copy)		

RECEIVED  
MICH DEPT OF ENVIRONMENTAL QUALITY  
NOV 23 1999

Drinking Water & Radiological Protection Division  
Ground Water Supply Section

TAX NO:

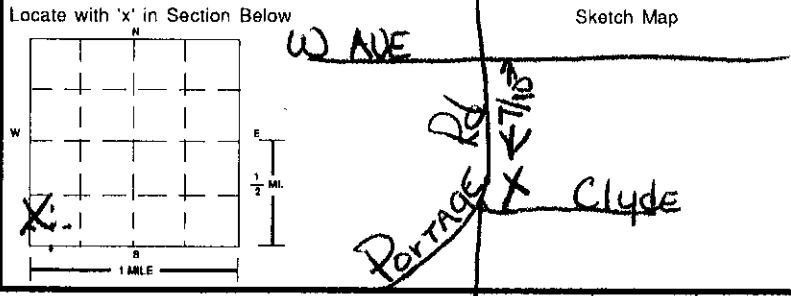
MICHIGAN DEPARTMENT OF PUBLIC HEALTH  
WATER WELL AND PUMP RECORD

PERMIT NO:

1. LOCATION OF WELL  
County Kalamazoo Township Name Schoolcraft Fraction NW 1/4 SW 1/4 Section No. 23 Town No. 45 Range No. 11W

Distance and Direction from Road Intersection  
7/10 MILE SOUTH OF W AVE ON THE CORNER OF PORTAGE RD & CLYDE  
Street Address & City of Well Location  
14761 PORTAGE RD, VICKSBURG, MICH

3. OWNER OF WELL STEVE SANFORD  
Address 14761 PORTAGE RD, VICKSBURG MICH. 49097  
Address Same as Well Location  Yes  No



4. WELL DEPTH: 44 ft. Date Completed 4/12/96  New Well  Replacement Well

5.  Cable Tool  Rotary  Driven  Dug  
 Hollow Rod  Auger/Bored  Jetted

6. USE:  Household  Type I Public  Type III Public  
 Irrigation  Type IIa Public  Heat Pump  
 Test Well  Type IIb Public

7. CASING:  Steel  Threaded  Plastic  Welded  
 Other \_\_\_\_\_ Height: Above/Below Surface: 1 ft

Diameter: 4 in. to 40 ft. depth Weight: 11.0 lbs./ft.  
\_\_\_\_\_ in. to \_\_\_\_\_ ft. depth

BORE HOLE:  Drive Shaft  Shale Packer  
Diameter: \_\_\_\_\_ in. to \_\_\_\_\_ ft. depth  
\_\_\_\_\_ in. to \_\_\_\_\_ ft. depth

2. FORMATION DESCRIPTION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM
Top Dirt	1	1
Brown Clay	2	3
SAND	10	13
GRAVEL STONES & SAND	12	25
WATER SAND & GRAVEL	19	44

8. SCREEN  Not Installed  Gravel-Packed  
Type STAINLESS STEEL Diameter 4"  
Slot/Gauze 10 Length: 44"

Set Between 40 ft. and 44 ft.  
FITTINGS:  K-Packer  Bremer Check  
 Blank Above Screen 1 ft. Other PLUG

9. STATIC WATER LEVEL: 24 ft. Below Land Surface  Flowing

10. PUMPING LEVEL: Below Land Surface  
24 ft. After 1/2 hrs. Pumping at 60 G.P.M.  
 Plunger  Bailer  Air  Test Pump

11. WELL HEAD COMPLETION:  
 Pitless Adapter  12" Above Grade  
 Basement Offset  Well House

12. WELL GROUTED?  No  Yes From \_\_\_\_\_ to \_\_\_\_\_ ft.  
 Neat Cement  Bentonite  Other \_\_\_\_\_  
No. of Bags \_\_\_\_\_ Additives \_\_\_\_\_

13. NEAREST SOURCE OF POSSIBLE CONTAMINATION:  
Type \_\_\_\_\_ Distance \_\_\_\_\_ ft. Direction \_\_\_\_\_  
Type \_\_\_\_\_ Distance \_\_\_\_\_ ft. Direction \_\_\_\_\_

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Mich. Dept. of Public Health  
MAY 17 1996  
BUREAU OF ENVIRONMENTAL AND OCCUPATIONAL HEALTH-GWQS

15. ABANDONED WELL PLUGGED?  Yes  No used for BACKUP  
Casing Diameter \_\_\_\_\_ in. Depth \_\_\_\_\_ ft.  
PLUGGING MATERIAL:  Neat Cement  Bentonite Slurry  
 Cement/Bentonite Slurry  Concrete Grout  Bentonite Chips  
No. of Bags \_\_\_\_\_ Casing Removed?  Yes  No

14. PUMP:  Not Installed  Pump Installation Only  
Manufacturer's Name RED JACKET  
Model Number CNS800 HP 1 Volts 230  
Length of Drop Pipe 27 ft. Capacity 18 G.P.M.  
TYPE:  Submersible  Jet  Other \_\_\_\_\_  
PRESSURE TANK:  
Manufacturer's Name WELL-X-TROL  
Model Number WX-203 Capacity 32 Gallons

16. REMARKS: (Elevation, Source of Data, etc.)  
  
17. DRILLING MACHINE OPERATOR:  
 Employee  Subcontractor  
Name \_\_\_\_\_

15. WATER WELL CONTRACTOR'S CERTIFICATION:  
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.  
GLEN LEVERSEE Well Drilling  
REGISTERED BUSINESS NAME REGISTRATION NO. \_\_\_\_\_  
Address 4224 N. 3<sup>RD</sup> ST KALAMAZOO  
Signed Glen Leversee Date 4-12-96  
AUTHORIZED REPRESENTATIVE

1 Location of Well  
 County **KALAMAZOO** Township Name **SCHOOLCRAFT** Fraction **NW 1/4 NW 1/4 SE 1/4** Section Number **23** Town Number **4S** Range Number **N/S 11W E/W**

Distance and Direction From Road Intersection **HOWARD LAKE**  
**304 BAUER LANE**  
**VICKSBURG**  
 Street Address and City of Well Location

3 Owner of Well **BEHGUNEK, RUDY**  
 Address **55015 HAGEN DR.**  
**SHELBY MI 48315-**  
 Address Same as Well Location? **No**

Sketch Map


4 Well Depth (Completed) **47 ft.** Date of Completion **7 /21/99**  
 New Well

5 Drilling Method **CABLE TOOL**

6 Proposed Use **DOMESTIC**

2 FORMATION DESCRIPTION

FORMATION DESCRIPTION	Thickness of Stratum	Depth to Bottom of Stratum
DRY SAND GRAVEL	20	20
COARSE SAND GRAVEL (WET)	27	47

7 Casing **STEEL** Height Above Surface **1 ft.**  
 4 in. to 41 ft. depth Weight **11LBS lbs./ft.**  
 Bore Hole Diameter  
 in. to ft. depth Drive Shoe **Yes**  
 in. to ft. depth Shale Packer **No**

8 Screen Gravel-packed? **No**  
 Type **SLOTTED** Diameter **4**  
 Slot/Gauze **12** Length **6**  
 Set Between **41 ft. and 47 ft.**  
 Fittings **K-PACKER** 1.00 Blank ft. above screen

9 Static Water Level **20** Ft. Below Land Surface Flow

10 Pumping Level Below Land Surface  
**20** ft. after **1** hrs. pumping at **50** G.P.H.  
 ft. after hrs. pumping at **G.P.H.**  
 Using **PLUNGER**

11 Well Head Completion **PITLESS ADAPT**

12 Well Grouted? **Yes** From **0** to **25** ft.  
**BENTONITE**  
 No. of bags **3** Additives

13 Nearest Source of Possible Contamination  
**SEPTIC SYSTEM** Distance **65** ft. Direction **S**  
 Distance ft. Direction

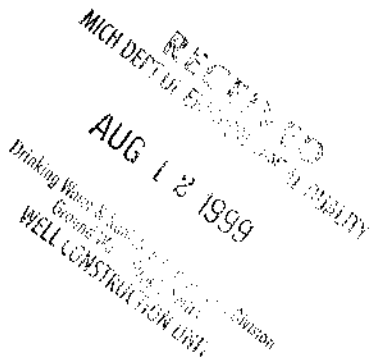
15 Abandoned well plugged? **No**  
 Casing Diameter in. Depth ft.  
 Casing removed? **No**

14 Pump Installed **Pump Installation Only? No**  
 Manufacturer's Name **STA-RITE**  
 Model Number **20P4E02T** HP **1** Volts **230**  
 Length of Drop Pipe **35** ft. Capacity **20** G.P.M.  
 Type **SUBMERSIBLE** Jet  
 Pressure tank:  
 Manufacturer's Name **WELL-MATE**  
 Pressure Tank Model **WM-14WB** Capacity **14 gal.**

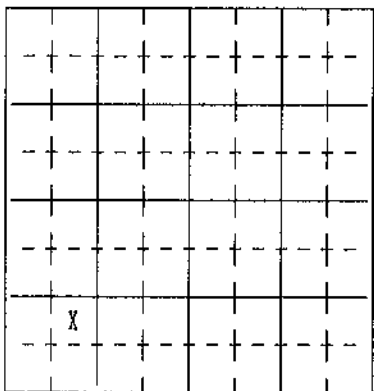
16 Remarks, elevation, source of data, etc.

17 Drilling machine operator:  
 Employee  
 Name **ROGER**  
 Authority: Act 368 PA 1978  
 Completion: Required.  
 Penalty: Conviction of violation of any provision is a misdemeanor.  
**IMPORTANT: File with deed.**

18 Water Well Contractor's Certification:  
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.  
 Registered business name: **EARL SANDERS & SON**  
 Registration number: **0112**  
 Address: **72819 M-40 HIGHWAY, LAWTON, MI 49065**  
 Signed: *R. S. Sanders* Date *7/22/99*  
 (Authorized representative)



1. Location of Well		County Kalamazoo	Township Prairie Ronde	Fraction NW 1/4 NW 1/4 NW 1/4	Section Number 23	Town Number 4 S	Range Number 12 W																																																																
Distance & Direction From Road Intersection SE Corner of intersection of West W Ave. & 8th St.				3. Owner of Well: Howard Bailey																																																																			
Street & City of Well 6657 West W Ave. Schoolcraft				Address 6657 West W Ave. Schoolcraft MI 49087																																																																			
Address Same as Well Location? Yes				4. Well Depth 92 Date Completed 11/23/98 Type New																																																																			
Sketch Map <table border="1" style="width:100%; height:100%; border-collapse: collapse;"> <tr> <td style="text-align:center">X</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td> </tr> </table>				X								-	-	-	-	-	-	-	-									-	-	-	-	-	-	-	-									-	-	-	-	-	-	-	-									-	-	-	-	-	-	-	-	5. METHOD: Rotary Other			
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Casing Diameter ft. Depth ft.				Manufacturer's Name F&W		Model Number 4F35A20301 HP 2 Volts 220																																																																	
PLUGGING MATERIAL				Length of drop pipe 63 ft		Pt. Capacity 35 GPM																																																																	
No. of Bags Casing Removed Yes No				Type X Submersible Jet																																																																			
16. REMARKS				Pressure Tank Name Xtrol																																																																			
				Pressure Tank Model 2 302 Capacity 220 Gallons																																																																			
17. Rig Operator's Name: Rick Clark				18. WATER WELL CONTRACTORS CERTIFICATION																																																																			
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IMPORTANT: File with deed.				(Geological Survey Copy)																																																																			

1. Location of Well County Kalamazoo		Township Schoolcraft		Fraction NE 1/4 SW 1/4 SW 1/4		Section Number 23		Town Number 4 S		Range Number 11 W																																											
Distance & Direction From Road Intersection 5/10 mile north of Clyde St. on east side of North Barton Lk. Dr.						3. Owner of Well: George Freund Address 14567 N Barton Lk. Dr. Vicksburg MI 49097 Address Same as Well Location? Yes																																															
Street & City of Well 14567 N Barton Lk. Dr. Vicksburg						4. Well Depth 92 Date Completed 06/30/97 Type New																																															
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MAY 17 1983



**WATER WELL RECORD**  
ACT 294 PA 1965

MICHIGAN DEPARTMENT  
OF  
PUBLIC HEALTH

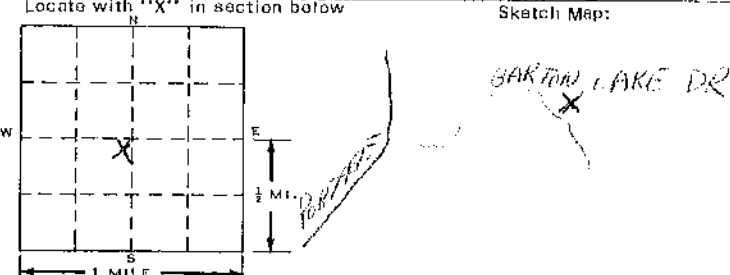
<b>1 LOCATION OF WELL</b>			<b>3 OWNER OF WELL:</b>																	
County <b>KALAMAZOO</b>	Township Name <b>SCHOOLCRAFT</b>	Fraction <b>N 1/4 SW 1/4 SW 1/4</b>	Section Number <b>23</b>	Town Number <b>4</b>	Range Number <b>11</b>															
Distance And Direction from Road Intersections <b>1/4 EAST OF PORTAGE RD ON EAST SIDE OF BARTON LK DR</b>			Address <b>CLYDE METZ 14761 BARTON LK DR VICKSBURG MICH</b>																	
Street address & City of Well Location Locate with "X" in section below			4 WELL DEPTH: (completed) Date of Completion <b>58 ft. 9/4/82</b>																	
Sketch Map: 			5 <input type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Bored <input type="checkbox"/>																	
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:30%;">2 FORMATION</th> <th style="width:10%;">THICKNESS OF STRATUM</th> <th style="width:10%;">DEPTH TO BOTTOM OF STRATUM</th> </tr> <tr> <td><b>LIGHT BR SAND</b></td> <td><b>5</b></td> <td><b>5</b></td> </tr> <tr> <td><b>TAN SAND</b></td> <td><b>20</b></td> <td><b>25</b></td> </tr> <tr> <td><b>BR GRAVEL</b></td> <td><b>15</b></td> <td><b>40</b></td> </tr> <tr> <td><b>GRAY GRAVEL</b></td> <td><b>18</b></td> <td><b>58</b></td> </tr> </table>			2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM	<b>LIGHT BR SAND</b>	<b>5</b>	<b>5</b>	<b>TAN SAND</b>	<b>20</b>	<b>25</b>	<b>BR GRAVEL</b>	<b>15</b>	<b>40</b>	<b>GRAY GRAVEL</b>	<b>18</b>	<b>58</b>	6 USE: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public Supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test Well <input type="checkbox"/>		
			2 FORMATION	THICKNESS OF STRATUM	DEPTH TO BOTTOM OF STRATUM															
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			<b>BR GRAVEL</b>	<b>15</b>	<b>40</b>															
<b>GRAY GRAVEL</b>	<b>18</b>	<b>58</b>																		
7 CASING: Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Height: Above/Below Surface <b>1</b> ft. <b>4</b> in. to <b>54</b> ft. Depth Weight <b>11</b> lbs./ft. <b>3</b> in. to <b>58</b> ft. Depth Drive Shoe? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>																				
8 SCREEN: Type: <b>JOHNSON SS</b> Dia.: <b>3</b> Slot/Gauze <b>10</b> Length <b>4 FT</b> Set between <b>34</b> ft. and <b>58</b> ft. Fittings: <b>3x18 NIPPLE &amp; K PACKER</b>																				
9 STATIC WATER LEVEL <b>19</b> ft. below land surface																				
10 PUMPING LEVEL below land surface _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m.																				
11 WATER QUALITY in Parts Per Million: Iron (Fe) _____ Chlorides (Cl) _____ Hardness _____ Other _____																				
12 WELL HEAD COMPLETION: <input type="checkbox"/> In Approved Pit <input checked="" type="checkbox"/> Pitless Adapter <input type="checkbox"/> 12" Above Grade																				
13 Well Grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From _____ ft. to _____ ft.																				
14 Nearest Source of possible contamination <b>52</b> foot <b>SW</b> Direction <b>SEPTIC</b> Type Well disinfected upon completion <input type="checkbox"/> Yes <input type="checkbox"/> No																				
15 PUMP: <input type="checkbox"/> Not installed Manufacturer's Name <b>F+W</b> Model Number <b>SBAS</b> HP <b>1/2</b> Volts <b>220</b> Length of Drop Pipe <b>42</b> ft. capacity <b>10</b> G.P.M. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating																				
<p>RECEIVED</p> <p>Mich. Dept. of Public Health</p> <p>MAR 25 1983</p> <p>Environmental and Occupational Health Services Administration</p>																				
ADDITIONAL INFORMATION: CORRECTED BY _____ ADDITION BY _____ ELEVATION _____ DEPTH TO ROCK _____																				
16 Remarks, elevation, source of data, etc. <b>PERMIT # 4278</b> <b>WS 9-9-82</b>																				
17 WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <b>MARCELLUS WELL DRILLING 1794</b> REGISTERED BUSINESS NAME REGISTRATION NO. Address: <b>RR3 E M 216 MARCELLUS</b> Signed: <b>Richard Clark</b> Date: <b>10/1/82</b> AUTHORIZED REPRESENTATIVE																				

**JAN 29 1979**



**WATER WELL RECORD**  
ACT 294 PA 1965

MICHIGAN DEPARTMENT  
OF  
PUBLIC HEALTH

<b>1 LOCATION OF WELL</b>					
County <b>KALAMAZOO</b>	Township Name <b>SCHOOLCRAFT</b>	Fraction <b>NE 1/4 NE 1/4 SW 1/4</b>	Section Number <b>23</b>	Town Number <b>4 M/S.</b>	Range Number <b>11 N.W.</b>
Distance And Direction from Road Intersections <b>2 MILES EAST OF PORTAGE RD. ON BARTON LAKE RD</b>			3 OWNER OF WELL: <b>CHARLES GLAES</b>		
Street address & City of Well Location <b>14652 N1 BARTON LK RD VICKSBURG</b>			Address <b>14652 N1 BARTON LK RD VICKSBURG</b>		
Locate with "X" in section below 			4 WELL DEPTH: (completed) Date of Completion <b>60 ft. 9-8-78</b>		
2 FORMATION			5 CASING: Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Height: Above/Below Surface _____ ft.		
			THICKNESS OF STRATUM		
DRIVEN CLOSED SHOE			DEPTH TO BOTTOM OF STRATUM		
			7 CASING: _____ Diam. _____ in. to _____ ft. Depth _____ in. to _____ ft. Depth Drive Shoe? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
			8 SCREEN: Type: <b>JOHNSON</b> Dia.: <b>1 1/4"</b> Slot/Grate <b>10</b> Length <b>3 FT</b> Set between <b>57</b> ft. and <b>60</b> ft. Fittings: <b>1 1/4 COUPLING</b>		
			9 STATIC WATER LEVEL <b>25</b> ft. below land surface		
			10 PUMPING LEVEL below land surface _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m.		
			11 WATER QUALITY in Parts Per Million: Iron (Fe) _____ Chlorides (Cl) _____ Hardness _____ Other _____		
			12 WELL HEAD COMPLETION: <input type="checkbox"/> In Approved Pit <input checked="" type="checkbox"/> Pitless Adapter <input checked="" type="checkbox"/> 12" Above Grade		
			13 Well Grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From _____ ft. to _____ ft.		
			14 Nearest Source of possible contamination <b>50</b> feet <b>W</b> Direction <b>SEWAGE</b> Type Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
			15 PUMP: <input checked="" type="checkbox"/> Not installed Manufacturer's Name _____ Model Number _____ HP _____ Volts _____ Length of Drop Pipe <b>48</b> ft. capacity _____ G.P.M. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating		
16 Remarks, elevation, source of data, etc. ADDED INFO BY DRILLER, ITEM NO. *CORRECTED BY **ADDITION BY ELEVATION DEPTH TO ROCK			17 WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <b>RSH Well Drilling</b> <b>0267</b> REGISTERED BUSINESS NAME REGISTRATION NO. Address <b>11196 S. Wall Lk. Dalton Mich</b> Signed <b>Robert Hayward</b> Date <b>1-18-79</b> AUTHORIZED REPRESENTATIVE		

USE A 2ND SHEET IF NEEDED