## RESOLUTION OF LODGE, ASSOCIATION OR OTHER SIMILAR ORGANIZATION

	ву: <u>TORRANCE COUNTY</u>			
	(Name of Lodge, Association or Similar Organization)			
	P.O. BOX 48			
	ESTANCIA, N.M. 87016			
A. I, CARLA CLAYTON	(City, State and Zip Code)			
(referred to as the "association") organized under the $\#~856000257$	, certify that I am Secretary (clerk) of the above-named organization the State of New Mexico , Federal Employer I.D. Number			
association duly and properly called and held on	, and that the following is a correct copy of resolutions adopted at a meeting of th			
appear in the minutes of this meeting and have not be				
3. Be it resolved that,				
3) All transactions, if any, with respect to any depositional institution prior to the adoption of this resolut) Any of the persons named below, so long as they a ill other contracts, agreements, stipulations and order om time to time with this Financial Institution, come stitution or any other business transacted by and bet 5) Any and all prior resolutions adopted by this association's account(s), are in full force and effect, ur. 5) This association agrees to the terms and conditions sociation, and authorizes the Financial Institution nate payment of money, that are drawn on this Financial entitled to the properties.	express written notice of its rescission or modification has been received and recorded by			
. If indicated, any person listed below (subject to any				
Name and Title	Signature . Facsimile Signature			
N) DON LYLES	Signature , Facsimile Signature (ff used)			
BILL WILLIAMS	(If used)			
BILL WILLIAMS  RODGER RAYNER	(If used)			
	(If used)			
BILL WILLIAMS  C) RODGER RAYNER  C) ROY SPENCER	(If used)			
BILL WILLIAMS  C) RODGER RAYNER  D) ROY SPENCER  addicate A, B, C and/or D	Rodger & Rame (If used)			
BILL WILLIAMS  C) RODGER RAYNER  D) ROY SPENCER  Indicate A, B, C and/or D  N/A (1) Exercise all of the powe	rs listed in (2) through (6).			
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BILL WILLIAMS  C) RODGER RAYNER  D) ROY SPENCER  Indicate A, B, C and/or D  N/A  (1) Exercise all of the power  N/A  (2) Open any deposit or che  N/A  (3) Endorse checks and order	rs listed in (2) through (6). ecking account(s) in the name of this association. ders for the payment of money and withdraw funds on deposit with this Financial Institution Number of authorized signatures required for this purpose1			
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