## CERTIFICATE OF SELECTION

STATE OF MINNESOTA

COUNTY OF OLMSTED

TO THE SECRETARY OF STATE OF MINNESOTA:

Please take notice that the undersigned chief clerical officer of the City of Dover, Minnesota, does hereby certify, that at a meeting duly held on the  $\frac{4}{4}$  day of  $\frac{4}{2}$  day of  $\frac{4}{2}$ , 19 $\frac{4}{2}$ , by a majority vote of all of the members present, the following person was selected for the term as designated to the Board of Directors of the Dover-Eyota, St. Charles Area Sanitary District.

NAME

SEAL

Leoye Ahrke

EXPIRATION OF TERM

January 1, 19<u>8</u>5

SIGNED Designation

STALL OF MININLOU DEPARTMENT OF STATE FILED MAR= 8 1983

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