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	Secretary of State	• • • • • • • • • • • • • • • • • • •
S T	ATE OF MINNI	ESOTA
	CUTIVE DEPAI	
HAROLD E. STA		OVERNOR OF SAID STATE
To DR. CARL HANSI		
Of <u>RICE</u>		SENDS GREETINGS;
i yaa maaniyaa into kalenda a saaba da kalenda a saaba ka saaba ka saaba ka saaba ka saaba ka saaba ka saaba k		confidence in your pruden
물건 이 가지 않는 것 같은 것 같아.	y I have a ppointed yo	
		F VETERINARY MEDICAL EXAMINERS
FOR THE TERM EXPIRING		
You are therefore by	these presents, appoi	nted and commissioned
A MEMBER OF SAID AR		as aforosaid,
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TO HAVE .	AND TO HOLD The said	OIIICE JI
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A MEMBER OF SAID ABO	DVE EOARD	together with all the
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<u>A MEMBER OF SAID ABO</u> rights, powers, and en by law in anywise appo	OVE FOARD moluments to the said ertaining, until this thority, superseded or	together with all the office belonging, or

8089 ۲. ÷ 2 í, ., ÷ 1 ŧ . . ч. Ф. Ĩ ٠, 11 Ŧ. 1 ÷. . . ٠. • ١, ٠ • á., 1 Ż  $< \epsilon_{\rm c}$ • • • 19 14 1.13 ٠  $\overline{\mathcal{A}}$ 1 • a. ÷ -. à. • STATE OF MINNESOTA DEPARTMENT OF STATE FILED JUL 101940 Municipal Secretary of State ÷ 2 . i ंद <u>.</u>\*. ••• . t . • . • Ĵ, ÷ . \*\*\* ) A . 10. A. M. ---•7 • and the second 11 177 1929 1929 . 4 i 3. i -----. ...... ÷4. \* . No. of Concession, Name 100 Street 1 1.1 Sector 2