

OFFICER SCHEDULE

Name of Bank _____

City _____

Date _____

Division of Banking
217½ West Missouri Ave
Pierre, South Dakota 57501-4590

Complying with the provisions of SDCL 51A-3-36, we herewith submit the names of the officers elected by the Board of Directors for the year 2008.

NAME

TITLE OF OFFICER

_____	Chairman of the Board
_____	President
_____	Chief Executive Officer
_____	Executive Vice President
_____	Executive Vice President
_____	Vice President
_____	Vice President
_____	Vice President
_____	Vice President
_____	Cashier
_____	Assistant Cashier
_____	Assistant Cashier
_____	Assistant Cashier
_____	Assistant Cashier

Respectfully submitted,

(Print Name and Title)

By _____

(Signature)