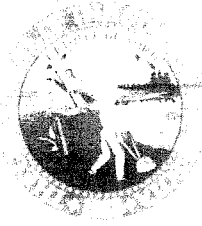


STATE of MINNESOTA

EXECUTIVE



DEPARTMENT

TIM PAWLENTY
GOVERNOR

NOTICE OF APPOINTMENT

STEVE BRAKE

12171 Erickson Avenue
Wilmont, Minnesota 56185
County of Nobles
Congressional District One

Because of the special trust and confidence I have in your integrity, judgment and ability, I have appointed and commissioned you to have and to hold the said office of:

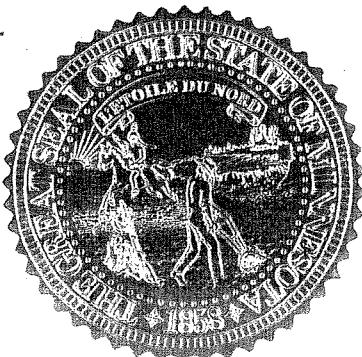
Livestock Producer Member

BOARD OF ANIMAL HEALTH

Effective: October 21, 2003
Term Expires: January 1, 2007

This appointment carries with it all rights, powers, duties, and emoluments granted by law and pertaining to this position until this appointment is superseded or annulled by me or other lawful authority or by any law of this State.

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Great Seal of the State of Minnesota to be affixed at the Capitol in the City of Saint Paul, October 14, 2003.



Replacing: Todd Searles

Handwritten signature of Tim Pawlenty in black ink.

Governor

Handwritten signature of Mary Kiefhaber in black ink.

Secretary of State

RECEIVED

JAN 03 2005

10 1-11-03
ACK letter 7-17-03AC

STATE OF MINNESOTA
OPEN APPOINTMENTS APPLICATION FOR SERVICE ON STATE AGENCY

All information on this form is available to the public upon request.



Agency Name: * Minnesota Board of Animal Health
(Enter name of board, council, commission or task force to which you are applying.)

Position Sought: Board member
(Enter type of membership position or state "member" if no specific requirements)

Applicant Name: * Steven Brake
(First Name) (Last Name)

Applicant Address: * 12171 Erickson Ave Wilmet MN 56185 Nobles
(Street) (City) (State) (Zip) (County)

Daytime Phone: * 507-360-7135 E-MAIL: * sbrake@frontiernet.net

Evening Phone: 507-472-8775 State Legislative District: 22 U.S. Congressional District: 1st

* Selected information will appear on the Secretary of State's web site: www.sos.state.mn.us

STATISTICAL INFORMATION

The following information is optional and is sought for the purpose of compiling the annual report on the open appointments process pursuant to Minnesota Statutes 15.0597, subdivision 7.

Gender: Female Male
Political Party: Green Democrat-Farmer-Labor Independence Republican None or Other
Race/National Origin: African American American Indian Asian/Pacific Caucasian Hispanic Other
Disabled: Yes No

STATEMENT OF QUALIFICATION/INTEREST

Minnesota Statutes 15.0597 requires that the application include "a statement that the nominee satisfies any legally prescribed requirements and any other information the nominating person feels would be helpful to the appointing authority."

I am a grain and livestock producer in SW MN. I have been raising hogs and cattle for 25 years. I am currently President of the MN State Cattlemen's Assoc.

(may continue on the back or on attached sheets)

Did the appointing authority ask you to submit this application? YES _____ NO X

I, the undersigned, hereby state that I satisfy, to the best of my knowledge, all legally prescribed qualifications for the position sought.

Steve Brake 7/8/03
(Signature of Applicant) (Date)

If applicant is being nominated by another person or group, signature indicates consent to nomination. You will not receive an acknowledgement of this application but the appointing authority will notify you if an interview is desired."

MAIL THIS COMPLETED APPLICATION TO: Secretary of State, Open Appointments
180 State Office Building, 100 Constitution Ave.
St. Paul, MN 55155-1299

SUBMIT IN PERSON TO: Room 180, State Office Building. OR BY FAX: (651) 296-9073 Phone: (651) 297-5845

On request, this application will be made available in alternative format (for example, braille, large print, audio tape, or computer disk.)

FOR OFFICE USE: Sub by AA: _____ AA: Governor Res: _____ Trans Date: 7-16-03
Open appointments rev. 6/01

RECEIVED

JUL 08 2005

President of the Senate