Applicant Name DR. STAN FLEMMING

NAIC No. _____
FEIN: _____

BIOGRAPHICAL AFFIDAVIT

To the extent permitted by law, this affidavit will be kept confidential by the state insurance regulatory authority.

(Print or Type)

Full Name, Address and telephone number of the present or proposed entity under which this biographical statement is being required (Do Not Use Group Names). Puget Sound Health Partners, 708 Broadway, Suite 400, Tacoma, Washington 98402

(253)627-4368

In connection with the above-named entity, I herewith make representations and supply information about myself as hereinafter set forth. (Attach addendum or separate sheet if space hereon is insufficient to answer any question fully.) IF ANSWER IS "NO" OR "NONE," SO STATE.

1. a. Affiant's Full Name (Initials Not Acceptable). STANLEY LALIT KUMAR FLEMMING NAIC – DO MATCH

   b. Maiden Name (if applicable). N/A

2. a. Have you ever had your name changed? NO ___ If yes, give the reason for the change and provide the full name(s).

   b. Other names used at any time (including aliases).

   N/A

3. a. Are you a citizen of the United States? YES

   b. Are you a citizen of any other country, if so, what country? NO

4. Affiant's Occupation or Profession. PHYSICIAN

5. Affiant's business address. 708 BROADWAY, SUITE 400, TACOMA, WASHINGTON 98402

   Business telephone. (253) 207-4330

Applicant Name DR. STAN FLEMMING

NAIC No. _____
FEIN: _____

6. Education and Training:

College/ University	City/ State	Dates Attended (MM/YY)	Degree Obtained
UNIVERSITY OF WASHINGTON	SEATTLE, WASHINGTON	09/73 TO 08/76	B.S.

Graduate Studies: College/ University	City/ State	Dates Attended (MM/YY)	Degree Obtained
PACIFIC LUTHERAN UNIVERSITY	TACOMA, WASHINGTON	06/78 TO 12/79	M.A.

Other Training: Name	City/ State	Dates Attended (MM/YY)	Degree/Certification Obtained
WESTERN UNIVERSITY OF HEALTH SCIENCE	POMONA, CALIFORNIA	08/81 TO 06/85	D.O.

(Note: If affiant attended a foreign school, please provide full address and telephone number of the college/university. If applicable, provide the foreign student Identification Number in the space provided in the Biographical Affidavit Supplemental Information.)

7. List of memberships in professional societies and associations.

Name of Society/Association	Contact Name	Address of Society/Association	Telephone Number of Society/Association
SEE ATTACHED SHEET			

8. Present or proposed position with the applicant entity. BOARD OF DIRECTORS

9. List complete employment record for the past twenty (20) years, whether compensated or otherwise (up to and including present jobs, positions, partnerships, owner of an entity, administrator, manager, operator, directorates or officerships). Please list the most recent first. Attach additional pages if the space provided is insufficient. It is only necessary to provide telephone numbers and supervisory information for the past ten (10) years.

Beginning/Ending Dates (MM/YY) 06/05 - PRESENT Employers' Name NORTHWEST PHYSICIANS NETWORK

Address 708 BROADWAY, SUITE 400 City TACOMA State/Province WASHINGTON

Country USA Postal Code 98402 Phone 253-207-4330 Offices/Positions Held CHIEF MEDICAL OFFICER

Supervisor / Contact PAT BRIGGS, CEO/ 253-627-4638

Beginning/Ending Dates (MM/YY) 08/76 - PRESENT Employers' Name UNITED STATES ARMY

Address 208 DRUM ROAD City FORT WADSWORTH State/Province NEW YORK

Country USA Postal Code 90305 Phone 718-668-6108 Offices/Positions Held COMMANDING GENERAL/BRIGADIER GENERAL

Supervisor / Contact N/A

Applicant Name DR. STAN FLEMMING

NAIC No. _____
FEIN: _____

Beginning/Ending Dates (MM/YY) 09/95 - PRESENT Employers' Name CITY OF UNIVERSITY PLACE

Address 3715 BRIDGEPORT WAY WEST City UNIVERSITY PLACE State/Province WASHINGTON

Country USA Postal Code _____ Phone 253-566-5656 Offices/Positions Held FORMER MAYOR, CURRENT MAYOR PRO TEM

Supervisor / Contact N/A

Beginning/Ending Dates (MM/YY) 12/99 - 06/05 Employers' Name FAMILY HEALTH MEDICAL GROUP

Address 2603 BRIDGEPORT WAY, #J City UNIVERSITY PLACE State/Province WASHINGTON

Country USA Postal Code 98466 Phone N/A Offices/Positions Held SENIOR PHYSICIAN

Supervisor / Contact N/A

10. a. Have you ever been in a position which required a fidelity bond? NO If any claims were made on the bond, give details. N/A

b. Have you ever been denied an individual or position schedule fidelity bond, or had a bond canceled or revoked? If yes, give details. NO

11. List any professional, occupational and vocational licenses (including licenses to sell securities) issued by any public or governmental licensing agency or regulatory authority or licensing authority that you presently hold or have held in the past. For any non-insurance regulatory issuer, identify and provide the name, address and telephone number of the licensing authority or regulatory body having jurisdiction over the license (s) issued. Attach additional pages if the space provided is insufficient.

Organization/Issuer of License STATE OF WASHINGTON Address UNK

City OLYMPIA State/Province WASHINGTON Country USA Postal Code 98054

License Type MEDICAL(OSTEO) License # [redacted] Date Issued (MM/YY) 03/85

Date Expired (MM/YY) N/A Reason for Termination N/A

Non-insurance Regulatory Phone Number (if known UNK

Organization /Issuer of License STATE OF CALIFORNIA Address UNK

City SACRAMENTO State/Province CALIFORNIA Country USA Postal Code UNK

License Type MEDICAL (OSTEO) License # [redacted] Date Issued (MM/YY) 06/85

Date Expired (MM/YY) N/A Reason for Termination N/A

Non-insurance Regulatory Phone Number (if known) UNK

Applicant Name DR. STAN FLEMMING NAIC No. _____
FEIN: _____

12. In responding to the following, if the record has been sealed or expunged, and the affiant has personally verified that the record was sealed or expunged, an affiant may respond "no" to the question. Have you ever:

a. Been refused an occupational, professional, or vocational license or permit by any regulatory authority, or any public administrative, or governmental licensing agency?
NO

b. Had any occupational, professional, or vocational license or permit you hold or have held, been subject to any judicial, administrative, regulatory, or disciplinary action?
NO

c. Been placed on probation or had a fine levied against you or your occupational, professional, or vocational license or permit in any judicial, administrative, regulatory, or disciplinary action?
NO

d. Been charged with, or indicted for, any criminal offense(s) other than civil traffic offenses? NO

e. Pled guilty, or nolo contendere, or been convicted of, any criminal offense(s) other than civil traffic offenses?
NO

f. Had adjudication of guilt withheld, had a sentence imposed or suspended, had pronouncement of a sentence suspended, or been pardoned, fined, or placed on probation, for any criminal offense(s) other than civil traffic offenses? NO

g. Been subject to a cease and desist letter or order, or enjoined, either temporarily or permanently, in any judicial, administrative, regulatory, or disciplinary action, from violating any federal, state law or law of another country regulating the business of insurance, securities or banking, or from carrying out any particular practice or practices in the course of the business of insurance, securities or banking? NO

h. Been, within the last ten (10) years, a party to any civil action involving dishonesty, breach of trust, or a financial dispute? NO

i. Had a finding made by the Comptroller of any state or the Federal Government that you have violated any provisions of small loan laws, banking or trust company laws, or credit union laws, or that you have violated any rule or regulation lawfully made by the Comptroller of any state or the Federal Government? NO

j. Had a lien or foreclosure action filed against you or any entity while you were associated with that entity?
NO

If the response to any question above is answered "Yes", please provide details including dates, locations, disposition, etc. Attach a copy of the complaint and filed adjudication or settlement as appropriate.

N/A

13. List any entity subject to regulation by an insurance regulatory authority that you control directly or indirectly. The term "control" (including the terms "controlling," "controlled by" and "under common control with") means the possession, direct or indirect, of the power to direct or cause the direction of the management and policies of a person, whether through the ownership of voting securities, by contract other than a commercial contract for goods or non-management services, or otherwise, unless the power is the result of an official position with or corporate office held by the person. Control shall be presumed to exist if any person, directly or indirectly, owns, controls, holds with the power to vote, or holds proxies representing, ten percent (10%) or more of the voting securities of any other person. N/A

Applicant Name DR. STAN FLEMMING

NAIC No. _____
FEIN: _____

If any of the stock is pledged or hypothecated in any way, give details. _____

14. Do [Will] you or members of your immediate family individually or cumulatively subscribe to or own, beneficially or of record, 10% or more of the outstanding shares of stock of any entity subject to regulation by an insurance regulatory authority, or its affiliates? An "affiliate" of, or person "affiliated" with, a specific person, is a person that directly, or indirectly through one or more intermediaries, controls, or is controlled by, or is under common control with, the person specified. If the answer is "Yes", please identify the company or companies in which the cumulative stock holdings represent 10% or more of the outstanding voting securities.
NO

If any of the shares of stock are pledged or hypothecated in any way, give details.

N/A

15. Have you ever been adjudged a bankrupt? NO If yes, provide details _____

16. To your knowledge has any company or entity for which you were an officer or director, trustee, investment committee member, key management employee or controlling stockholder, had any of the following events occur while you served in such capacity? If yes, please indicate and give details. When responding to questions (b) and (c) affiant should also include any events within twelve (12) months after his or her departure from the entity.

a. Been refused a permit, license, or certificate of authority by any regulatory authority, or Governmental-licensing agency? NO

b. Had its permit, license, or certificate of authority suspended, revoked, canceled, non-renewed, or subjected to any judicial, administrative, regulatory, or disciplinary action (including rehabilitation, liquidation, receivership, conservatorship, federal bankruptcy proceeding, state insolvency, supervision or any other similar proceeding)? NO

c. Been placed on probation or had a fine levied against it or against its permit, license, or certificate of authority in any civil, criminal, administrative, regulatory, or disciplinary action? NO

Note: If an affiant has any doubt about the accuracy of an answer, the question should be answered in the positive and an explanation provided.

Dated and signed this 16TH day of OCT 2006 at TACOMA, WASHINGTON I hereby certify under penalty of perjury that I am acting on my own behalf, and that the foregoing statements are true and correct to the

[redacted]

(Signature of Affiant)

16 October 2006
Date

State of WASHINGTON County of PIERCE

The foregoing instrument was acknowledged before me this 16th day of October, 2006 By STANLEY L.K. FLEMMING, and:

who is personally known to me, or

who produced the following identification: WASHINGTON STATE DRIVERS LICENSE

Jean M. Gambrielle
Notary Public

JEAN M. GAMBRIELLE
Printed Notary Name

9-29-08
My Commission Expires

Applicant Name DR. STAN FLEMMING

NAIC No. _____
FEIN: _____

BIOGRAPHICAL AFFIDAVIT
Supplemental Information

(Print or Type)

To the extent permitted by law, this affidavit will be kept confidential by the state insurance regulatory authority.

Full Name, Address, and telephone number of the present or proposed entity under which this biographical statement is being required (Do Not Use Group Names).

Puget Sound Health Partners, 708 Broadway, Suite 400, Tacoma, Washington 98402

(253)627-4368

1. a. Affiant's Full Name (Initials Not Acceptable). STANLEY LALIT KUMAR FLEMMING

   b. Maiden Name (if applicable) N/A

2. Affiant's Social Security Number [redacted]

3. Government Identification Number if not a U.S. Citizen N/A

4. Foreign Student ID# (if applicable) N/A

5. Date of Birth: (MM/DD/YY) [redacted] Place of Birth: City ROSEBUD INDIAN RESERVATION
   State/Province SOUTH DAKOTA Country USA

6. Name of Affiant's Spouse (if applicable) [redacted]

7. List your residences for the last ten (10) years starting with your current address, giving:

Beginning/Ending Dates (MM/YY)	Address	City	State/ Province	Country	Postal Code
08/90 TO PRESENT	[redacted]				

Applicant Name DR. STAN FLEMMING

NAIC No. _____
FEIN: _____

Dated and signed this 16th day of October, 2006 at Tacoma Washington I hereby certify under penalty of perjury that I am acting on my own behalf, and that the foregoing statements are true and correct to the best of my knowledge and belief.

[redacted]
(Signature of Affiant)

16 Oct 2006
Date

State of WASHINGTON County of PIERCE

The foregoing instrument was acknowledged before me this 16th day of October, 2006 By STANLEY L.K. FLEMMING, and:

who is personally known to me, or

who produced the following identification: WASHINGTON STATE DRIVERS LICENSE

JEAN M. GAMBRIELLE
[SEAL]
COMMISSION EXPIRES
NOTARY
PUBLIC
9-29-08
STATE OF WASHINGTON

Jean M. Gambrielle
Notary Public

JEAN M. GAMBRIELLE
Printed Notary Name

09-29-08
My Commission Expires

Applicant Name DR. STAN FLEMMING

NAIC No. _____
FEIN: _____

DISCLOSURE AND AUTHORIZATION CONCERNING BACKGROUND REPORTS(*All states except California, Minnesota and Oklahoma)*

This Disclosure and Authorization is provided to you in connection with pending or future application(s) of _____[***insert* company name**]("Company") for licensure or a permit to organize ("Application") with a department of insurance in one or more states within the United States. Company desires to procure a consumer or investigative consumer report (or both)("Background Reports") regarding your background for review by a department of insurance in any state where Company pursues an Application during the term of your functioning as, or seeking to function as, an officer, member of the board of directors or other management representative ("Affiant") of Company or of any business entities affiliated with Company ("Term of Affiliation") for which a Background Report is required by a department of insurance reviewing any Application. Background Reports requested pursuant to your authorization below may contain information bearing on your character, general reputation, personal characteristics, mode of living and credit standing. The purpose of such Background Reports will be to evaluate the Application and your background as it pertains thereto. To the extent required by law, the Background Reports procured under this Disclosure and Authorization will be maintained as confidential.

You may obtain copies of any Background Reports about you from the consumer reporting agency ("CRA") that produces them. You may also request more information about the nature and scope of such reports by submitting a written request to Company. To obtain contact information regarding CRA or to submit a written request for more information, contact _____[***insert* company's designated person, position, or department, address and phone**].

Attached for your information is a "Summary of Your Rights Under the Fair Credit Reporting Act."

AUTHORIZATION: I am currently an Affiant of Company as defined above. I have read and understand the above Disclosure and by my signature below, I consent to the release of Background Reports to a department of insurance in any state where Company files or intends to file an Application, and to the Company, for purposes of investigating and reviewing such Application and my status as an Affiant. I authorize all third parties who are asked to provide information concerning me to cooperate fully by providing the requested information to CRA retained by Company for purposes of the foregoing Background Reports, except records that have been erased or expunged in accordance with law.

I understand that I may revoke this Authorization at any time by delivering a written revocation to Company and that Company will, in that event, forward such revocation promptly to any CRA that either prepared or is preparing Background Reports under this Disclosure and Authorization. This Authorization shall remain in full force and effect until the earlier of (i) the expiration of the Term of Affiliation, (ii) written revocation as described above, or (iii) twelve (12) months following the date of my signature below.

A true copy of this Disclosure and Authorization shall be valid and have the same force and effect as the signed original.

STANLEY L.K. FLEMMING, [redacted]
[redacted]me and Residence Address)

[redacted] (Signature) _____ (Date)

State of WA County of Pierce

The foregoing instrument was acknowledged before me this 16th day of October 2006 By Stanley L.K. Flemming, and

who is personally known to me, or

who produced the following identification: Washington State Drs License

Jean M. Gambrielle
Notary Public

JEAN M. GAMBRIELLE
Printed Notary Name

9-29-08
My Commission Expires

[SEAL]
JEAN M. GAMBRIELLE
NOTARY PUBLIC
COMMISSION EXPIRES 9-29-08
STATE OF WASHINGTON

Applicant Name DR. STAN FLEMMING

NAIC No. _____
FEIN: _____

DISCLOSURE AND AUTHORIZATION CONCERNING BACKGROUND REPORTS (*California*)

This Disclosure and Authorization is provided to you in connection with a pending application of _____[*insert* **company name**]("Company") for licensure or a permit to organize ("Application") with a department of insurance in one or more states within the United States. Company desires to procure a consumer or investigative consumer report (or both)("Background Reports") regarding your background for review by any department of insurance in such states where Company is currently pursuing an Application, because you are either functioning as, or are seeking to function as, an officer, member of the board of directors or other management representative ("Affiant") of Company or of any business entities affiliated with Company ("Term of Affiliation") for which a Background Report is required by a department of insurance reviewing any Application. Background Reports will be obtained through _____[*insert* **name of CRA, address**]("CRA"). Background Reports requested pursuant to your authorization below may contain information bearing on your character, general reputation, personal characteristics, mode of living and credit standing. The purpose of such Background Reports will be to evaluate the Application and your background as it pertains thereto. To the extent required by law, the Background Reports procured under this Disclosure and Authorization will be maintained as confidential.

You may request more information about the nature and scope of Background Reports produced by any consumer reporting agency ("CRA") by submitting a written request to Company. You should submit any such written request for more information, to _____[*insert* **company's designated person, position, or department, address and phone**].

Attached for your information is a "Summary of Your Rights Under the Fair Credit Reporting Act." You will be provided with a copy of any Background Report procured by Company if you check the box below.

> By checking this box, I request a copy of any Background Report from any CRA retained by Company, at no extra charge.

Under section 1786.22 of the California Civil Code, you may view the file maintained on you by the CRA listed above. You may also obtain a copy of this file, upon submitting proper identification and paying the costs of duplication services, by appearing at the CRA in person or by mail; you may also receive a summary of the file by telephone. The CRA is required to have personnel available to explain your file to you and the CRA must explain to you any coded information appearing in your file. If you appear in person, you may be accompanied by one other person of your choosing, provided that person furnishes proper identification.

AUTHORIZATION: I am currently an Affiant of Company as defined above. I have read and understand the above Disclosure and by my signature below, I consent to the release of Background Reports to a department of insurance in any state where Company files or intends to file an Application, and to the Company, for purposes of investigating and reviewing such Application and my status as an Affiant. I authorize all third parties who are asked to provide information concerning me to cooperate fully by providing the requested information to CRA retained by Company for purposes of the foregoing Background Reports, except records that have been erased or expunged in accordance with law.

I understand that I may revoke this Authorization at any time by delivering a written revocation to Company and that Company will, in that event, forward such revocation promptly to any CRA that either prepared or is preparing Background Reports under this Disclosure and Authorization. In no event, however, will this authorization remain in effect beyond twelve (12) months following the date of my signature below.

A true copy of this Disclosure and Authorization shall be valid and have the same force and effect as the signed original.

Stanley L.K. Flemming [redacted]
[redacted] Full Name and Residence Address)

[redacted]
(Signature)

10-16-06
(Date)

State of WA County of Pierce

The foregoing instrument was acknowledged before me this 16th day of October, 2006 By Stanley L.K. Flemming, and

who is personally known to me, or

who produced the following identification: WASHINGTON STATE DRS. LICENSE

Jean M. Gambrielle
Notary Public

JEAN M. GAMBRIELLE
Printed Notary Name

9-29-08
My Commission Expires

[SEAL]
JEAN M. GAMBRIELLE
NOTARY PUBLIC
COMMISSION EXPIRES 9-29-08
STATE OF WASHINGTON

Stanley L.K. Flemming, D.O., M.A.

[redacted]

DATE OF BIRTH: [redacted]

PLACE OF BIRTH: Rosebud Indian Reservation, South Dakota

PERSONAL DATA: Married, three children
Wife's Name: [redacted]
Children: [redacted]

EDUCATION (Civilian):

1. **Degree Programs:**

a. Western University of Health Sciences, Pomona, California
Degree: **D.O.** From: 8/13/81 – 6/9/85 (Osteopathic Medicine)

b. Pacific Lutheran University, Tacoma, Washington
Degree: **M.A.** From: 3/78 – 12/79 (Human Relations/Social-Psychology)

c. United States Naval War College, Newport, Rhode Island
Degree: **M.A.** Enrolled (National Security & Strategic Planning)

d. University of Washington, Seattle, Washington
Degree: **B.S.** From: 9/73 – 8/76 (Zoology)

e. Pierce College, Lakewood, Washington
Degree: **A.A.&S.** From: 9/71 – 7/73 (Arts & Science)

2. **Non-Degree Programs**

a. Covey Seven Habits of Highly Effective People Program – Completed 2000

b. Covey Four Roles of Leadership – Completed 2001

c. Harvard University School of Public Health – Physician Leadership Education Program – Completed 10/98 (Certificate)

d. College of Physician Executives Program
(1) Course I – Exempted
(2) Course II – Completed 1991 (Granted as 50% completion towards MBA Degree in July 2002)
(3) Course III- Completed 1991

e. Uniformed Services University of Health Sciences - Hospital Senior Executives Course Completed 10/04 (Certificate)

3. **Medical Post-Graduate Education**

a. **Fellowship:** Adolescent Medicine (7/88 – 6/90)
Children's Hospital of Los Angeles – University of Southern California School of Medicine, Los Angeles, California

b. **Residency:** Family Practice Medicine (6/86 – 6/88)
Pacific Hospital of Long Beach, Long Beach, California (Base Hospital)
With Services at the following institutions:
a. Harbor-University of California at Los Angeles (UCLA) Medical Center
b. Children's Hospital of Los Angeles – University of Southern California School of Medicine
c. County - University of Southern California Medical Center
d. Robert F. Kennedy Medical Center

c. **Internship:** Rotating (6/85 – 6/86)
Pacific Hospital of Long Beach, Long Beach, California
With Services at the following institution:
County - University of Southern California Medical Center

CIVILIAN EXPERIENCE:

1. **Clinical Experience**
   a. The Family Health Medical Group, University Place, Washington
      - Private Practice, Family & Adolescent Medicine w/ Obstetrics (1996 – Present)
   b. Community Clinics of Pierce County (1996 – 1999)
      - Public Health Family Medicine
   c. Community Health Care Delivery System, Tacoma, Washington (1990 – 1996)
      - Public Health Family Medicine
   d. Federal Aviation Administration - Aviation Medical Examiner (1992 – 1997)

2. **Academic Experience**
   a. University of Washington, Seattle, Washington
      - Clinical Instructor, MEDEX Northwest, Department of Medical Education (1999 – Present)
      - Clinical Preceptor, Nurse Practitioner Program (1998 – Present)
      - Volunteer Faculty, Tacoma Family Medicine Residency (1991 – 1991)
   b. Western University of Health Science, Pomona, California
      - Clinical Associate Professor, Department of Family Medicine (8/95 – Present)
      - Clinical Assistant Professor, Department of Family Medicine (12/87 – 8/95)
      - Clinical Instructor, Department of Family Medicine (6/85 – 12/87)
   c. Pacific Lutheran University, Tacoma, Washington
      - Clinical Preceptor, Nurse Practitioner Program (1996 – 1997)
   d. California Medical Center/University of Southern California School of Medicine, Los Angeles, California
      - Clinical Preceptor, Family Medicine Residency (9/89 – 8/90)
   e. Pacific Hospital of Long Beach, Long Beach, California
      - Chief Resident, Department of Family Medicine (7/87 – 6/88)
   f. California State University – Long Beach, School of Nursing, Long Beach, California
      - Nurse Practitioner Program Advisory Council Member (1986)

3. **Administrative Health Care Related Experience**
   a. Northwest Physicians Network, Tacoma, Washington
      - Chief Medical Officer (2005 – Present)
      - Medical Director (2005 – 2005)
   b. Physicians Health Network, Tacoma, Washington
      - Medical Director (1996 – 2004)
   c. St. Joseph Medical Center, Tacoma, Washington
      - Vice President and Chief of Staff of the Medical Staff (2001 – 2002)
      - Medical Executive Committee (2000 – 2004)
      - Chairman, Family Medicine Department (1996 – Present)
      - Vice Chairman, Family Medicine Department (1995 – 1996)
      - Medical Operating Committee ((1996 – Present)
   d. Community Clinics of Pierce County, Tacoma, Washington
      - Deputy Executive Director/Medical Director (1996 – 1999)
   e. Community Health Care Delivery System, Tacoma, Washington
      - Deputy Executive Director/ Medical Director (1990 – 1996)
   f. The Osteopathic Medical Board of California, Sacramento, California
      - Licensing Board Member (9/89 – 1/93)
      - Fellow & Delegate to the Federation of State Board Licensing (1990 - 1993)
      - Consultant to the State of California (1/89 – 9/89, 1/93 – Present)
      - Examination Commissioner (1/87 – 1/89)
      - Expert Examiner (1/87 – 1/89)

4. **Non-Medical Experience**
   a. City of University Place, Washington
      - Mayor (1995 – 1996)
      - Mayor Pro Tem (2005-Present)
      - Councilmember (1996 – 2005)
   d. The Evergreen State College, Olympia, Washington
      - Chairman of the Board (2002 – Present)
      - The Board of Trustees, Vice Chairman (2000 – 2002)
      - The Board of Trustees, Member (1998 – Present)
   e. Rainier Communications Commission (Telecommunications)
      - President (12/97 – 12/03)
      - Vice President (6/97 – 12/97)(2/05 – Present)
      - Commissioner (1/97 – 6/97)
   f. Washington State House of Representatives (1992 – 1995)
      - Representative, 28th Legislative District
      - Environmental Committee, Vice Chairman
      - Health Care Committee, Member
      - Human Services Committee, Member
      - Aging and Long Term Care Council, Member
      - Public Health Improvement Plan Task Force, Member
   g. Clover Park Technical College, Lakewood, Washington
      - Accreditation Committee, Member (1994 –1995)
      - Advisory Committee, Member (1993 – 1995)
   h. Washington Governor's Task Force on Emergency Medical Services Cost Reimbursement Committee, Member (1991- 1993)
   i. Washington Health Education Board Sub-Committee on Post Graduate Education, Health Professional Recruitment and Placement, Member (1991- 1992)

j. University of Washington, Seattle, Washington
   - University Hospital Central Processing Laboratory Technician (1975 –1976)
   - Lifeguard (1973 – 1976)

k. Recreational Services, Fort Lewis, Washington
   - Lifeguard (1969 –1976)

CIVILIAN AWARDS:

1. Distinguished Alumnus, Pierce College (1997)
2. Pierce County Chamber of Commerce, Howard O. Scott Citizen of the Year (1994)
3. Pierce County Chamber of Commerce, Soldier of the Year (1994)
4. Washington National Guard Association Recognition Award (1994)
5. Admitted to the Western University of Health Science Achievement Wall (1994)
6. Distinguished Alumnus, Western University of Health Science (1994)
7. Physician of the Year, Washington State Osteopathic Medical Association (1993)
8. Alumnus of the Year, Western University of Health Science (1993)
9. Resident of the Year, Long Beach Medical Services Association, Long Beach, California (1988)
10. Outstanding Teaching Award, Pacific Hospital of Long Beach, Long Beach, California (1988)
11. Most Outstanding Intern, Pacific Hospital of Long Beach (1985-1986)
12. Mentor Teaching/Clinical Instructor Award, Pacific Hospital of Long Beach, Long Beach, California (1987)

EDUCATION (Military):

1. United States Navy War College (Graduated 6/04)
2. United States Army War College Defense Strategy Course (Graduated 12/01)
3. United States Airforce War College, Air University (Graduated 9/94)
4. United States Army Command and General Staff College (Graduated 7/90)
5. United States Army Special Forces Operations Course (Completed 5/92)
6. Army Medical Department Officers Advance Course (Completed 12/76)
7. Army Flight Surgeons Course (Graduated 8/85, Certified in Aviation Medicine)
8. Combat Casualty Care Course (Graduated 6/86)

MILITARY EXPERIENCE:

1. Branch of Service: United States Army

2. Highest Rank Held: Brigadier General

3. Branch/Corps: Medical Service Corps (8/76 – 6/85)
   Medical Corps (6/85 – 6/05)
   General Officer (6/05 – Present)

4. Status: Active Reserve/Guard: 9/30/74 – 10/11/7
   8/13/81 – 1/14/91
   4/19/91 - 5/16/04
   3/12/05 - Present

   Active Duty: 10/12/76 – 8/13/81
   1/15/91 – 4/18/91
   3/16/04 – 3/11/05

5. **Positions Held:**
   a. Commanding General , The Northeast Army Reserve Regional Medical & 8th Medical Brigade Command, Deputy Commanding General for Reserve Affairs, North Atlantic Regional Medical Command (3/10/05 – Present)
   b. Commander Task Force Med Falcon (Kosovo) (5/04 – 2/05)
   c. Commander, 139th Medical Group (Kosovo) (5/04 – 2/05)
   d. Commander, 18th Field Hospital – Kosovo (5/04 – 2/05)
   e. Task Force Falcon Surgeon – Kosovo (5/04 – 2/05)
   f. Commander, 139th Medical Group (5/03 – 5/04) (2/05 – 3/10/05)
   g. Chief of Staff, 70th Regional Support Command (7/00 – 5/03)
   h. Commander, 396th Combat Support Hospital (6/97 – 7/00)
   i. Commander, U.S. Army Medical Support Activity – Camp Murray (9/95 – 6/97)
   j. Commander, 164th Mobile Army Surgical Hospital (6/95 – 6/97)
   k. Commander, Combined Joint Medical Task Force – Thailand (7/94 – 6/95)
   l. Brigade Surgeon/Chief, Public Health Team, 364th Civil Affairs Brigade (8/91 – 7/95)
   m. Battalion Surgeon/Chief Medical Officer and Team Leader, 403rd Civil Affairs Battalion – Kuwait (1/91 – 4/91)
   n. Commander, General Support Detachment, 426th Civil Affairs Battalion (FID/UW) (2/90 – 1/91)
   o. Platoon Leader, Team II Leader, and Chief Public Health Team, 426th Civil Affairs Company (2/87 – 2/90)
   p. Assistant Platoon Leader, 426th Civil Affairs Company (5/86 – 2/87)
   q. Flight Surgeon, 63rd Regional Support Command (Additional Duty while assigned to the 426th Civil Affairs Company) (6/86 – 8/90)
   r. Staff Physician, 6252 U.S. Army Hospital (750 Bed) (5/81 – 5/86)
   s. Acting Plans, Training, Operations, and Intelligence Officer, 62nd Medical Group (10/80 – 5/81)
   t. Assistant Plans, Training, Operations, and Intelligence Officer, 62nd Medical Group (11/79 – 10/80)
   u. Commander, Headquarters and Headquarters Detachment, 62nd Medical Group (4/79 – 10/79)
   v. Executive Officer, 423rd Medical Company (Clearing) (1/78 – 8/78)
   w. Medical Platoon Leader, 3rd Battalion, 60th Infantry (12/76 – 1/78)

MILITARY AWARDS AND DECORATIONS:

1. The Legion of Merit
2. The Bronze Star
1. The Meritorious Service Medal w/ 5 Oak Leaf Clusters
2. The Army Commendation Medal w/ 1 Oak Leaf Cluster
3. The Army Good Conduct Medal
4. The Humanitarian Service Medal
5. The Army Reserve Medal w/ the Silver "X" device and Silver "M" device
6. The Army Reserve Commendation Medal w/ 2 Oak Leaf Clusters
7. The Army Overseas Service Ribbon with "3" device
8. The Army Reserve Overseas Ribbon with "9" device
9. The National Defense Medal w/ Star device
10. The Global War on Terrorism Medal
11. The NATO Medal
12. The Kosovo Campaign Medal
13. The Armed Forces Expeditionary Force Ribbon
14. The Southwest Asia Medal
15. The Kuwait Liberation Medal – Awarded by the Kingdom of Saudi Arabia
16. The Liberation of Kuwait Medal – Awarded by the Kingdom of Kuwait
17. The Army Service Ribbon
18. The Army Flight Surgeon Wings

19. The Expert Field Medical Badge
20. The Combat Medical Badge
21. U.S. Navy Unit Commendation Medal
22. U.S. Army Unit Superior Award
23. The Royal Thai Army Honorary Airborne Wings
24. Military Order of Medical Merit

PUBLICATIONS/LECTURE PRESENTATIONS:

1. Uncovering a Fraudulent Physician; Washington Association of Medical Staff Services; Federal Way, Washington; Sep 2006
2. HIV/AIDS Management and Care by the Military Primary Care Providers; Bondsteel U.S. Army Hospital, Camp Bondsteel, Kosovo; Grand Rounds; Nov 2004
3. Primary Care Preparedness and Bio-Terrorism; Washington Osteopathic Medical Association Fall Conference; Nov 2002.
4. HIV/AIDS Update for the Primary Care Physician; Washington Osteopathic Medical Association Winter Conference; Dec 2001.
5. AIDS, A Very Special Gathering; Pierce County AIDS Foundation; Jul 2001.
6. Your Present, Your Future; Keynote Address; Pierce College 2001 Commencement Exercise; Jun 2001.
7. HIV/AIDS, A Look to the Future; Washington Osteopathic Medical Association Winter Conference; Nov 2000.
8. Neurological Effects of HIV/AIDS; The University of Puget Sound School of Occupational and Physical Therapy; Nov 2000
9. Recruiting and Retention of Physicians in Today's Army; Keynote Address; AMEDD Recruiting Conference – Las Vegas, Nevada; Mar 2000.
10. Management of HIV/AIDS in the Prison Population; McNeil Island Correctional Center; Apr 2000.
11. Early Treatment and Management of HIV/AIDS in Prisoners – Primary Care Review; Washington State Department of Corrections; Mar 2000.
12. Overseas Deployment – Preparing and Training the United States Army Reserves; Keynote Address; Army Medical Department – United States Army Reserves, Association of Military Surgeons of the United States Annual Conference – 99, Anaheim, California; Nov 1999.
13. Humanitarian Civic Action of Today's Military; Keynote Address; Family Medicine Residency symposium; Pacific Hospital of Long Beach; Sep 1999.
14. HIV in the Aging Female, Washington Osteopathic Medical Association Fall Conference; Sep 1999.
15. Current Therapies and Modalities in Treating AIDS; Washington Osteopathic Medical Association 89th Annual Convention; Jun 1999.
16. Early Treatment and Management of AIDS; Washington Osteopathic Medical Association 89th Annual Convention; Jun 1999.
17. Living With HIV/AIDS – A New Beginning; Pierce County AIDS Foundation; Oct 1998.
18. Humanitarian Civic Action in the Pacific Rim; Pierce County Medical Society; Mar 1997.
19. Putting Humanism Back into Health Care; Flemming S.; Humanism in the Health Sciences Journal; Inaugural Article; Vol. 1; Nov 1996.
20. Military Troop Needs Versus Civilian – Medical Training Opportunities in Overseas Deployments; Tri-Service Deployment Medicine Conference; McChord AFB; Mar 1996.
21. The Future of Health Care in America and the Resident Physician; Pacific Hospital of Long Beach; Oct 1995.
22. Cardiac Related HIV Disease; Washington Osteopathic Medical Association Fall Conference; Sep 1995.
23. Politics and the Changing Face of the Health Care Professional; Keynote Address to the American College of Family Physicians, Pomona, California; Aug 1995.
24. The Adolescent Male, At Risk for the Nineties; College of Continuing Medical Education and Tacoma Family Medicine Day; Jul 1995.

25. Health Care in the Pacific Rim; Association of Military Surgeons of the United States Annual Conference – 94, San Antonio, Texas; Nov 1994.
26. Health Care Reform; The College of Continuing Education; Tacoma, Washington; Jan 1995.
27. Health Care Reform for the Nation and Washington State; Washington State Medical Association; Nov 1994.
28. HIV Update for the Primary Care Provider; Washington Osteopathic Medical Association; Nov 1994.
29. HIV Management for the Primary Care Provider; Washington Association of Physician Assistants Annual Convention; Apr 1994.
30. National Health Care Reform Update for Washington; Washington Nursing Executive Association; Apr 1994.
31. HIV/AIDS for the Primary Care Physician; Alaska Osteopathic Medical Association Conference; Jul 1993.
32. Health Care Reform Update for Washington; Washington Nursing Executive Association; May 1993.
33. HIV/AIDS Update for the Primary Care Physician; Hospital of the Good Samaritan CME Program; Los Angeles, California; Jan 1993.
34. Medical Observations of Iraqi Enemy Prisoners of War (EPW) During Operation Desert Storm; Cappucci, D.; Flemming, S.; Journal of the Association of Military Surgeons of the United States (AMSUS); Vol. 159; Jun 1994.
35. The Recognition and Management of Iatrogenic-Induced Hypoglycemia in the Geriatric Patient Secondary to Sulfonyurea Hyperglycemic Agents; Presented for publication to the Department of Family Medicine; Pacific Hospital of Long Beach; May 1985.
36. A Letter to Emily; The Journal of Osteopathic Physicians and Surgeons of California; Vol. 11, No. 3; 1985.
37. The Affects of Ozone on Fresh Water Fish; Nelson, M. ; Flemming, S.; Interdepartmental publication; The University of Washington Department of Zoology; 1976.

ORGANIZATIONS AND OFFICES HELD (Present and Past):

1. Tacoma Musical Theater, Tacoma, Washington
   a. Board of Directors (2000 – Present)
2. Rotary International – Member
3. Military Order of World Wars – Life Member
4. American Legion – Member
5. Veterans of Foreign Wars – Member
6. Senior Army Commanders Association – Member
7. Reserve Officers Association - Member
8. Association of Military Surgeons of the United States – Life Member
9. American Osteopathic Medical Association – Member
10. American Medical Association – Member
11. American Academy of Family Medicine – Former Member
12. American College of Family Practice – Member
13. Society of Adolescent Medicine – Former Member
14. California Medical Association – Former Member
15. Washington State Osteopathic Medical Association – Member
    a. Chairman, Committee on Post-Graduate Education
16. Washington State Medical Association – Member
17. California Medical Association – Former Member
18. California Family Practice Society – Former Member
19. Washington Academy of Family Physicians – Former Member
    a. Chairman, Minority Affairs (1997)
20. Long Beach Medical Association – Former Member
    a. Member, Executive Committee

21. Christian Eye Ministries – Former Member
    a. Member, Board of Directors
22. Los Angeles – Ghuanzhou Sister City Medical Exchange Program
    a. Executive Committee, Member (1/90 – 1/94)
    b. Delegate to China (3/89 – 4/89)
23. Sigma Sigma Phi (Medical) Honor Society – Member
24. California Medical Review – Former Member
25. Association of the United States Army – Former Member
26. Society for American Military Engineers – Former Member
    a. Former Chapter Vice President
27. The New York Academy of Science – Former Member
28. United States Coast Guard Auxiliary (1971 – 2000)(Retired)

MISCELLANEOUS:

1. **Medically Related**
    a. Board Certified in Family Medicine by the American Osteopathic College of Family Practice (7/28/88) Certificate Number 2236
    b. State of Washington Medical License: 1122 (Active)
    c. State of California Medical License: 20A5223 (Active)
    d. Drug Enforcement Agency License: Active

3. **Non-Medically Related**
    a. President of the United States' Short List as a candidate for Surgeon General of the United States of America (1995)
    b. State of Washington House of Representatives – Representative to the Asian Pacific Economic Conference (APEC) Seattle, Washington (1994)
    c. Musician – Published music in the Diocese of Olympia *Praise the Lord Song Book* (Circa 1978)

Marshall McGinnis

From: Howard Thomas [HTConsulting@comcast.net]
Sent: Friday, December 22, 2006 1:05 PM
To: Marshall McGinnis
Cc: Stan Flemming, DO
Subject: FW: Documents you requested

Dear Marshall,

Attached are the documents regarding the lawsuit that you raised regarding Dr. Flemming background check as a director and incorporator of PSHP. I think these documents and an explanation should clear up the matter.

Explanation:
In discussions with Dr. Flemming the following situation precipitated the lawsuit.

1. This case involved his private physician practice even though he was sued personally.
2. The practice's office administrator was involved in defrauding Dr. Fleming and the following circumstances occurred.
   a. The practice administrator was receiving the invoices, marking them as paid and pocketing the money for the money for the vendors.
   b. The vendor ended up sending the unpaid amount to collections which precipitated the suit.
   c. An audit was conducted on behalf of Dr. Flemming which uncovered the fraudulent actions of the practice administrator.
   d. Dr. Flemming's attorney resolved the matter with the vendor's attorney (see the stipulation and order of voluntary dismissal) and that is why he was somewhat unaware that he had even been sued as part of this whole mess.
   e. Dr. Flemming dealt with the practice administrator and cleaned up her mess.
3. All-in-all the matter was resolved as evidenced by the dismissal that was initiated by the plaintiff.

Hope this helps, Dr. Flemming is on vacation till the end of next week so let me know if you have other questions or concerns or would like to discuss the matter further with Dr. Flemming or his attorney.

Sincerely,
Howard Thomas

Thomas & Associates Consulting, L.L.C.
425/888-4399
HTConsulting@comcast.net

-----Original Message-----
From: Chris Spake [mailto:chris@mjwmlaw.com]
Sent: Thursday, December 21, 2006 3:55 PM
To: htconsulting@comcast.net
Cc: Gary Johnson
Subject: Documents you requested

Dear Mr. Thomas:

Attached are the Complaint, Stipulation and Order of Dismissal regarding Dr. Flemming's case, that you requested.

Chris

Christine Spake
Legal Assistant
Mann, Johnson, Wooster & McLaughlin, P.S.
820 A Street, Suite 550
Tacoma, WA 98402
(253) 572-4161

CONFIDENTIALITY NOTICE

This is intended only for the use of the individual or entity to which it is addressed and may contain information that is privileged, confidential, and exempt from disclosure under applicable law. If the reader of this message is not the intended recipient, or the employee or agent responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone and email reply, then delete the email. Thank you.

CLK287 6/19/2002 63639086

FILED
IN COUNTY CLERK'S OFFICE
PIERCE COUNTY, WASHINGTON
A.M. JUN 1 8 2002 P.M.
BOB SAN SOUCIE
COUNTY CLERK
BY _____ DEPUTY

IN THE SUPERIOR COURT OF THE STATE OF WASHINGTON

IN AND FOR THE COUNTY OF PIERCE

P.S.C., INC. a Washington corporation Plaintiff vs. STANLEY L. FLEMMING MARTHA FLEMMING Husband & Wife Defendants	02 2 08625 5 NO. COMPLAINT

Comes now the Plaintiff and states:

I.

That the Plaintiff is a duly licensed Washington corporation. That Plaintiff has paid all annual license fees and costs and is a corporation in good standing. That Plaintiff is duly licensed under the Collection Agency Act, Chapter 253, Laws of 1971, First Extraordinary Session of the Legislature, RCW 19.16 and has satisfied all the bonding requirements of that act.

ADAMS & ADAMS
ATTORNEYS AT LAW
2626 NORTH PEARL ST
TACOMA, WASHINGTON 98407
(253) 761-0141

ORIGINAL

II.

That the Defendants, STANLEY & MARTHA FLEMMING, are and at all times material hereto have been husband and wife. That all debts were incurred on behalf of the marital community. That the Defendants are residents of Pierce County, Washington, within the jurisdiction and venue of the above-entitled Court.

III.

That at the Defendant's request, the Defendants were furnished with goods, wares and services by the following individuals or firms for which the Defendants impliedly or expressly promised to pay the following sums:

CREDITOR	AMOUNT	INTEREST	TOTAL
OFFICE CARE	12,956.45	971.21	13,927.66
TOTAL	12,956.45	971.21	13,927.66

That the account(s) have been assigned to the Plaintiff, in writing.

IV.

Wherefore, Plaintiff prays that a Judgment be entered against the Defendants, STANLEY & MARTHA FLEMMING, as follows:

ADAMS & ADAMS
ATTORNEYS AT LAW
2626 NORTH PEARL ST
TACOMA, WASHINGTON 98407
(253) 761-0141

1) For the principal sum of $ 12956.45
2) For interest accrued to this date in the sum of $ 971.21
3) For Plaintiff's taxable costs and disbursements;
4) For an adjudication that the entire Judgment shall bear interest at the rate of 12% per annum subsequent thereto;
5) For reasonable attorney's fees and such other and further relief as the Court may deem just and equitable.

ADAMS & ADAMS

Bart L. Adams
Attorney for Plaintiff
WSBA #11297

STATE OF WASHINGTON)
)
County of Pierce)

Christine Michaud, being first duly sworn upon oath, deposes and says:

That she is the General Manager of said corporation, Plaintiff herein, and is duly authorized to make this verification on its behalf; that she has read the foregoing Complaint, knows the content thereof and believes the same to be true.

Christine Michaud

Christine Michaud

SUBSCRIBED AND SWORN to before me on this 14th day of December, 2001.

Elisabeth A. Larsen

Elisabeth A. Larsen
NOTARY PUBLIC in and for the State of Washington, residing at Tacoma, WA
Commission expires: 04-05-2003

ADAMS & ADAMS
ATTORNEYS AT LAW
2626 NORTH PEARL ST
TACOMA, WASHINGTON 98407
(253) 761-0141

02-2-08625-5 19827359 ORDSMWO 09-10-03

FILED
IN COUNTY CLERK'S OFFICE
A.M. SEP 1 0 2003 P.M.
PIERCE COUNTY, WASHINGTON
KEVIN STOCK, County Clerk
BY _____ DEPUTY

IN THE SUPERIOR COURT OF THE STATE OF WASHINGTON

IN AND FOR THE COUNTY OF PIERCE

P.S.C., INC. a Washington corporation Plaintiff vs. STANLEY L. FLEMMING MARTHA FLEMMING Husband & Wife Defendant(s)	NO. 02-2-08625-5 ORDER OF VOLUNTARY DISMISSAL

THIS MATTER came on regularly for hearing before the above-entitled Court this date upon the application of the Plaintiff, P.S.C., INC.; and the Plaintiff having moved for an Order of Voluntary Dismissal; there being no counterclaim in this matter by Defendant(s), STANLEY & MARTHA FLEMMING, filed pursuant to CR 41(a)(3); the Plaintiff appearing in open court by and through its attorney, BART L. ADAMS; now, therefore,

ORIGINAL

ADAMS & ADAMS
ATTORNEYS AT LAW
2626 NORTH PEARL ST
TACOMA, WASHINGTON 98407
(253) 761-0141

IT IS ORDERED, ADJUDGED AND DECREED that the Plaintiff's claim in the above-entitled cause be, and is hereby dismissed without prejudice, including costs.

DONE IN OPEN COURT THIS 10 day of September, 2003.

JUDGE/COURT COMMISSIONER

FILED
IN COUNTY CLERK'S OFFICE
A.M. SEP 10 2003 P.M.
PIERCE COUNTY, WASHINGTON
KEVIN STOCK, County Clerk
BY _____ DEPUTY

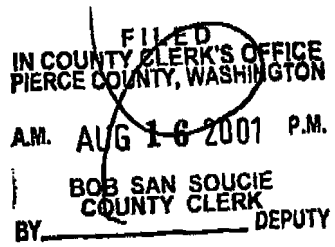
Presented by:

ADAMS & ADAMS

Bart L. Adams
Attorney for Plaintiff
WSBA #11297

ADAMS & ADAMS
ATTORNEYS AT LAW
2626 NORTH PEARL ST
TACOMA, WASHINGTON 98407
(253) 761-0141

02-2-08625-5 17154628 STP 08-19-02



IN THE SUPERIOR COURT OF THE STATE OF WASHINGTON
IN AND FOR THE COUNTY OF PIERCE

P.S.C., INC., a Washington corporation, Plaintiff, vs. STANLEY L. FLEMMING and MARTHA FLEMMING, husband & wife Defendants.	No. 02-2-08625-5 STIPULATION RE BALANCE OWED AND FOR JUDGMENT

IT IS HEREBY STIPULATED that Defendants STANLEY & MARTHA FLEMMING owe to the Plaintiff, P.S.C., INC., the sum of $15,066.67, including principal, interest and costs to date.

IT IS FURTHER STIPULATED that, so long as payments are received as agreed below, the Plaintiff, P.S.C., INC., shall not file the Stipulated Judgment herein.

IT IS FURTHER STIPULATED that the Defendants shall make payments as follows:

ADAMS & ADAMS
ATTORNEYS AT LAW
2626 N PEARL STREET
TACOMA, WASHINGTON 98407
(253) 751-0141

> A payment of One Thousand and no/100 Dollars ($1,000.00) is to be received at the office of P.S.C., Inc. not later than August 12, 2002. Thereafter, payments in the amount of $750.00 per month are to be receipted at the office of P.S.C., Inc. not later than the 15th day of each month, commencing September 15, 2002, and continuing until the account has been paid in full.

The full amount of each payment is due as agreed. If the Defendants remit more than the amount due for one payment, the excess will be applied to the balance. An excess payment WILL NOT decrease the amount due at the next payment date.

IT IS FURTHER STIPULATED that, should Defendants make any payment by check and that check is dishonored by Defendants' bank, a dishonored check fee of $15.00 shall be added to the amount due and owing herein and the Plaintiff shall be entitled to enter the Judgment herein as set forth in the following paragraph.

IT IS FURTHER STIPULATED that, should Defendants STANLEY & MARTHA FLEMMING fail to have any payment actually delivered to Plaintiff, P.S.C., INC., on or before the day said payment is due, then the Plaintiff shall be entitled to enter the Judgment, a copy of which is hereto attached, upon ten (10) days written notice mailed to Defendants, and said Judgment shall be fully enforceable in the manner provided for by law except that the Plaintiff shall give the Defendants credit for any payments made upon said Judgment between the date of this stipulation and the entry of the Judgment, applying those payments first to any costs incurred, then to interest accruing on the balance due and owing

ADAMS & ADAMS
ATTORNEYS AT LAW
2820 N PEARL STREET
TACOMA, WASHINGTON 98407
(253) 761-0141

under the stipulation at twelve percent (12%) per annum, and thereafter to the principal balance due and owing.

DATED this 16 day of August, 2002.

P.S.C., INC.

By _____
Bart L. Adams, WSBA
Attorney for Plaintiff
WSB #11297

DEFENDANT(s)

By _____
Garold E. Johnson
Attorney for Defendants
WSB #13286

_____
Stanley L. Flemming, D.O.

ADAMS & ADAMS
ATTORNEYS AT LAW
2626 N PEARL STREET
TACOMA, WASHINGTON 98407
(253) 761-0141