



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



SCHEDULE O
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

OMB No 1545-0047

2010Open to Public
InspectionDepartment of the Treasury
Internal Revenue ServiceComplete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

Name of the organization

Employer identification number

New Hampton Firefighters Association

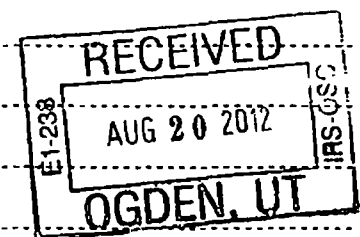
72-1522483

Form 990 Part VI Line 11b This return is reviewed by the officer signing the return for

accuracy

Form 990 Part VI Line 19 Such Documents are available for public inspection by contacting

any officer of the organization.



CISGS2XLRB

0425874015
July 11, 2011 LTR 2694C 0 R
72-1522483 201012 67
00021101

NEW HAMPTON FIREFIGHTERS ASSOCIATION
PO BOX 374
NEW HAMPTON IA 50659

DECLARATION

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Dany Haynes

Signature of officer or trustee

8-14-12

Date

Treasurer

Title

04B.034