

RECEIVED
05/13/2004 JUN 17 2004
Department of Water Resources

NOTICE OF ERROR
REPLY

Please type or print clearly, fill out this form completely and mail.

Return this reply form to IDWR by the deadline date printed below if you want IDWR to change your recommendation or you want to let IDWR know that you agree with its recommendation.

YOUR DEADLINE FOR RETURNING A NOTICE OF ERROR REPLY IS: July 15, 2004

Water right number: 83-4023

ALTON C LILLARD

~~HC 62 BOX 100~~

OROFINO ID 83544

1675 OLD DENT RD.

1. Describe the portion of the proposed recommendation with which you disagree (e.g. priority date, period of use, source):

2. Describe the changes you wish to make in the proposed recommendation:

3. Give a brief explanation as to why you disagree with these portions:

☒ I AGREE with this proposed recommendation: no changes need to be made.

DATE: 6/6/04

SIGNATURE:

Alton C. Lillard

Please print your name: ALTON C. LILLARD

IDWR Regional Office, 1910 Northwest Blvd, Suite 210, Coeur D' Alene, ID 83814, 2087691450

* Address changed by post office.
SAME physical address in S21, R2E, T38N.