

NOTICE OF ERROR
REPLY

01/21/2004 RECEIVED
FEB 17 2004

Department of Water Resources

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: February 2, 2004

Water right number: 73-12006, 73-12008, 73-12010, 73-12012, 73-12014,
73-12016, 73-12018, 73-12022

MARY D WHITE

~~HC 62 BOX 2050~~

2004 PAHSIMEROI RD.

MAY ID 83253

Telephone Number: (208)876-4250

KEN WHITE

HC 62 BOX 2050

MAY ID 83253

Telephone Number: (208)876-4250

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: Feb. 10, 2004

SIGNATURE:

Mary D White

Please print your name:

MARY D. WHITE

IDWR State Office, 1301 N. Orchard St., Boise ID 83706



COOPERATIVE CENTER FOR
HEALTH STATISTICS - VITAL
STATISTICS

450 W. STATE ST.
BOISE, IDAHO 83720

CERTIFICATE OF DEATH

DATE FILED: MAY 25, 1990 STATE FILE NUMBER: 90-02715

DECEDENT: FORREST KENNETH WHITE

DATE OF DEATH: MAY 18, 1990 PLACE OF DEATH: IDAHO

DATE OF BIRTH: DEC. 17, 1914 PLACE OF BIRTH: IDAHO

AGE: 75 YEARS SEX: MALE VETERAN? YES

MARITAL STATUS: MARRIED SPOUSE (MAIDEN) : MARY DARLING

SOCIAL SECURITY NUMBER: [REDACTED] RESIDENCE: , IDAHO

FATHER: FORREST A. WHITE
FATHER'S BIRTHPLACE: IDAHO
MOTHER (MAIDEN): RUTH E. OPIE
MOTHER'S BIRTHPLACE: NEBRASKA

MORTUARY: JONES & CASEY FUNERAL HOME
MORTICIAN: DOUGLAS C. CASEY

SALMON, IDAHO
DISPOSITION: CREMATION

CERTIFYING CORONER: DOUGLAS C. CASEY

AUTOPSY: NO

1. CAUSE OF DEATH, UNDERLYING CAUSE LAST:

INTERVAL

SHOCK AND TRAUMA
MULTIPLE HEAD INJURIES
TRACTOR RAN OVER VICTIM

IMMEDIATE

2. OTHER CONDITIONS CONTRIBUTING TO DEATH BUT UNRELATED TO ABOVE CAUSES:

NONE LISTED

MANNER OF DEATH: ACCIDENT DATE OF INJURY: MAY 18, 1990
HOUR OF INJURY: 11:30 A.M. INJURY AT WORK: YES
HOW INJURY OCCURRED: DUAL WHEELS OF TRACTOR RAN OVER SEVERAL TIMES
PLACE OF INJURY: CIRCLE PIE RANCH
LOCATION OF INJURY: 2 MILES WEST OF PATTERSON WEST OF PATTERSON, IDAHO

REVIEWING CORONER: DOUGLAS C. CASEY
CORONER'S ACTION: REVIEWED, COMPLETED MANNER OF DEATH AND/OR INJURY DATA

DATE ISSUED: MAY 31, 1990

This is to certify that this is a true and correct reproduction or abstract of the official record
filed with the Idaho Department of Health & Welfare, Boise, Idaho.

Richard W. Blair

RICHARD W. BLAIR, State Registrar

DO NOT ACCEPT UNLESS ON SECURITY PAPER WITH EMBOSSED SEAL OF IDAHO
DEPT. OF HEALTH & WELFARE CLEARLY AFFIXED.
Section 39-273, Idaho Code



197396

Feb. 10, 2004

Roxanne -

I have enclosed the preliminary report and a copy of Ken's death certificate -

By now you should have received a copy of the memorandum of understanding between Yiegler and me.

You will notice I have water right # A73-10095 which is for my domestic and stock water. Ken's name should be removed from that one also.

Thanks for your time

Mary

RECEIVED

FEB 17 2004

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