

name change

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
NOTICE OF CHANGE IN WATER RIGHT OWNERSHIP

RECEIVED
FEB 18 2005
DEPARTMENT OF
WATER RESOURCES

Please print or type. Attach pages with additional information. Instructions are included at the end of this form.
Incomplete forms will be returned.

1. Please list the water right number(s) and/or adjudication claim number(s) (if any) for each water right to be changed. List just the adjudication claim number if there is no corresponding water right record on file with the department. Indicate, by checking in the space provided (under the "split" heading), if the change in ownership is limited to a portion of a water right in which case division of the existing water right or adjudication claim record will be required.

Water Right No(s).	Adjudication Claim No(s).	Split	Water Right No(s).	Adjudication Claim No(s).	Split
75-4211					

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FEB 15 2005

Department of Water Resources
Eastern Region

2. The following **REQUIRED** information must be submitted with this form:

- A. The appropriate **FILING FEE**. See instructions for fee amounts. ☒
- B. A copy of the most recent **DEED, TITLE POLICY, CONTRACT OF SALE** or other legal document indicating your ownership of the property and water right(s) or claim(s) in question, **WITH ATTACHED LEGAL DESCRIPTION**.
- C. Either of the following (if necessary to clarify division of water rights or other complex property descriptions):
PLAT OF PROPERTY or **SURVEY MAP** clearly showing the location of the point(s) of diversion and place of use of your water right(s) and/or adjudication claim(s) (these are usually attached to your deed or on file with the county).

OR

If your water right(s) and/or adjudication claim(s) is for ten or more acres of irrigation, you must submit a USDA Farm Service Agency **AERIAL PHOTO** with the irrigated acres outlined and point(s) of diversion clearly marked. The **AERIAL PHOTO** should be submitted in place of the **PLAT OF PROPERTY** or **SURVEY MAP**.

3. Name and Address of Former Owner/Claimant(s)

Franklin Gray (deceased)

4. New Owner/Claimant(s)

✓ Edna Mae Gray Rotzler
Name Connector (Check one): ☐ and, ☐ or, ☒ and/or

New Mailing Address

✓ P.O. Box 224

City, State and ZIP Code

✓ Carmen Id 83462

New Telephone Number

✓ 208 756 4631

5. Date you acquired the property

July 11th 1973

CERTIFICATION OF VITAL RECORD

STATE OF IDAHO

IDAHO DEPARTMENT OF HEALTH AND WELFARE
CENTER FOR VITAL STATISTICS AND HEALTH POLICY

CERTIFICATE OF DEATH

DATE FILED: AUGUST 22, 2000

STATE FILE NUMBER: 00-05762

DECEDENT: FRANKLIN MARK GRAY

DATE OF DEATH: AUG. 14, 2000 PLACE OF DEATH: SALMON, IDAHO
TIME OF DEATH: 2:28 A.M.

DATE OF BIRTH: APR. 08, 1922 PLACE OF BIRTH: CALIFORNIA

AGE: 78 YEARS SEX: MALE VETERAN? YES

MARITAL STATUS: MARRIED SPOUSE (MAIDEN): EDNA SHENEFIELD

SOCIAL SECURITY NUMBER: 572-20-5251 RESIDENCE: CARMEN, IDAHO

FATHER: FRANKLIN M. GRAY, SR.
FATHERS BIRTHPLACE: CANADA
MOTHER (MAIDEN): RUBY WOLVERTON
MOTHERS BIRTHPLACE: CANADA

MORTUARY: SALMON RIVER FUNERAL CHAPEL
MORTICIAN: SHAUN O'REILLY

SALMON, IDAHO
DISPOSITION: BURIAL

CERTIFYING PHYSICIAN: SAMUEL D. GARDNER, D.O.

AUTOPSY: NO

1. CAUSE OF DEATH, UNDERLYING CAUSE LAST:

INTERVAL

CVA
ALZHEIMER DEMENTIA

30 MINUTES
> 3 YEARS

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

NONE LISTED

MANNER OF DEATH: NATURAL

This is a true and correct reproduction of the document officially registered and placed
on file with the IDAHO CENTER FOR VITAL STATISTICS AND HEALTH POLICY.

DATE ISSUED: AUGUST 23, 2000

This copy is not valid unless prepared on engraved border
displaying state seal and signature of the Registrar.

JANE S. SMITH
STATE REGISTRAR

STATE OF IDAHO

County of LEMHI

No. 148

Marriage License

Instrument No. 247071

KNOW ALL PERSONS BY THIS CERTIFICATE: That any regularly ordained minister of the Gospel, authorized by the rites and usages of the church or denomination of Christians, Hebrews, or religious body of which said minister is a member, or any judge or magistrate, or competent officer to whom this may come, not knowing of any lawful impediments thereto, is hereby authorized and empowered to solemnize the rites of Matrimony between:

GROOM

AND

BRIDE

Name: LEROY DELBERT ROTZIEN
Address: SALMON, LEMHI County, IDAHO
Age: 58 Race: WHITE Status: DIVORCED
Birthdate: 6/10/1942
Birthplace: HUTCHINSON, MINNESOTA USA

Name: EDNA MAE GRAY
Address: SALMON, LEMHI County, IDAHO
Age: 64 Race: WHITE Status: WIDOWED
Maiden name if previously married: SHENEFIELD
Birthdate: 5/23/1936
Birthplace: LOS ANGELES, CALIFORNIA USA

And to certify the same to said parties, or either of them under the signature and seal, of said minister or official capacity, and thereupon is required to deliver the original to the parties so married.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal, at
SALMON, LEMHI County, IDAHO, this 10th day of May, 2001

TERRI J. MORTON Recorder

Haren L. Baumert

Deputy Recorder

Marriage Certificate

I, Ervin Volamann, a Pastor
residing in the city of Lolo MT, in the county of Beavalli, in the state of
MT do certify that, in accordance with the authority on me conferred by the above license, I did on this 27th day
of May in the year A.D. 2001 in the city of Salmon
the county of Lemhi, in the state of Idaho, solemnize the rites of matrimony between

LEROY DELBERT ROTZIEN of SALMON, in the county of LEMHI, of the state of IDAHO
and EDNA MAE GRAY of SALMON, in the county of LEMHI, of the state of IDAHO

in the presence of Chad A Schrader and Pamela Kay Elder
WITNESS my hand at the county aforesaid, this 27th day of May, A.D. 2001.

In the presence of:

Officiant's Signature

Pastor Ervin Volamann

Officiant's Mailing Address

9595 Lolo Ck. Rd.
Lolo, ID 83847

and

(This copy for the Bride and Groom)