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DEPARTMENT OF
WATER RESOURCES

SNAKE RIVER BASIN ADJUDICATION
CHANGE IN ADDRESS OF NOTICE OF CLAIM

Water Right Number(s): 63 - 2251

Previous Mailing Address: GREENHORN

Barry Palmer

* New Mailing Address: 972 W. Greenhead ST.
Meridian, ID. 83642

* Telephone Number: (208) 888-4374

* Signature of all Claimant(s): Barry Palmer

Please print your name below your signature.

Barry Palmer

Please mail or FAX this completed form to the office nearest you:

Adjudication Bureau
Idaho Dept. of Water Resources
1910 Northwest Blvd., Ste. 210
Coeur d'Alene, ID 83814-2615
Ph. 208/769-1450 or
FAX 208/769-1454

Adjudication Bureau
Idaho Dept. of Water Resources
2735 Airport Way
Boise, ID 83705-5082
Ph. 208/334-2190 or
FAX 208/334-2348

Adjudication Bureau
Idaho Dept. of Water Resources
1341 Fillmore St., Ste. 200
Twin Falls, ID 83301-3380
Ph. 208/525-7161 or
FAX 208/736-3037

Adjudication Bureau
Idaho Dept. of Water Resources
900 N. Skyline, Ste. A
Idaho Falls, ID 83402-3653
Ph. 208/736-3033 or
FAX 208/525-7177

Adjudication Bureau
Idaho Dept. Of Water Resources
322 E. Front St.
P.O. Box 83720
Boise, Id 83720-0098
Ph 208/287-4800
FAX 208/287-6701

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: DECEMBER 30, 1998

STATE FILE NUMBER: 98-08590

DECEDENT: DONNA MARIE SEARLES

DATE OF DEATH: DEC. 21, 1998 PLACE OF DEATH: CALDWELL, IDAHO
TIME OF DEATH: 10:00 A.M.

DATE OF BIRTH: JAN. 06, 1937 PLACE OF BIRTH: IDAHO

AGE: 61 YEARS SEX: FEMALE VETERAN? NO

MARITAL STATUS: DIVORCED

SOCIAL SECURITY NUMBER:

RESIDENCE: CALDWELL, IDAHO

FATHER: DONALD CALVIN PALMER
FATHERS BIRTHPLACE: IDAHO
MOTHER (MAIDEN): VEDA E. ALLRED
MOTHERS BIRTHPLACE: UTAH

MORTUARY: ALSIP FUNERAL CHAPEL
MORTICIAN: JOHN A. YRAGUEN

NAMPA, IDAHO
DISPOSITION: BURIAL

CERTIFYING CORONER: VICKI DEGEUS

AUTOPSY: NO

1. CAUSE OF DEATH, UNDERLYING CAUSE LAST:

INTERVAL

ARRHYTHMIA
DIABETES

IMMEDIATE
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: JANUARY 05, 1999

This copy is not valid unless prepared on engraved border

JANE S. SMITH

