

REFUND REQUEST

TO: P. Shaff S. Sherman to Log In
 FOR: G. Fritschle/D. Allen
 FROM: S. Sherman Date: 4-20-07
 SUBJ: Receipt No. C083822 (Please attach ARQ2 Receipt copy immediately behind blue form)

RE: PayOR Alfred + Carolyn Taddei
 Address 14 Dews Ln.
Salmon ID 83467

Claimant(s) if NOT Payor —
 Refund Amount \$ 50.⁰² Claim Location (Region/Claimant) (S.O.)
 Extension Filed? Y/N NA Copy Attached? Y/N NA
 Late Fees Paid? Y/N NA Late Fee Receipt # C083822
 S.O. Verified Ext. by — on — D.B. Query by —
 Refund Generated By () Agent () Claimant (V) Sac
 Refund Category:
 insufficient fees / claim incomplete / withdrawn / (o-pmt)

Date of Last Correspondence (copy attached) n/a

Claim No.	Use*	Fees	Correct	Rec't #
		Paid	Fee	
74-480A	SA <u>CI</u>	\$ 25.-	<u>0</u>	C083822
74-480B	SA <u>CI</u>	\$ 25.-	<u>0</u>	C083822
		\$		
		\$		
		\$		
Total		\$ 50.-	\$ 0	

*Incomplete claims or insufficient fees for irrigation use will generally NOT be refunded. D.E. claim in AJSP1 at minimum.

Detailed Reason(s) for Refund Attached Y(N)
No fee for ownership change pending B4 The Court.

Region AJ Spvsr. Approval — S.O. AJ Spvsr. Approval —
 G. Fritschle Approval Shaff 4-23-07 Hold — To Fiscal 4-24-07
Dm Shaff Logged 4-20-07
 Data Base Modified? Y/N NA A &/or R Records By — on —