

REFUND REQUEST

TO: C. Fritschle S. Sherman to Log In
 FOR: D. Shaff/D. Allen
 FROM: Western Region Date: 12-10-07
 SUBJ: Receipt No. W032744 (Please attach ARQ2 Receipt copy immediately below W032745 form)

RE: PayOR Pioneer Title of Ada County
 Address 8151 Rifleman
Boise ID 83704

Claimant(s) if NOT Payor Guy & Kyla Carlson

Refund Amount \$50⁰⁰ Claim Location (Region/Claimant)

Extension Filed? Y/N NA Copy Attached? Y/N NA

Late Fees Paid? Y/N NA Late Fee Receipt # _____

S.O. Verified Ext. by _____ on _____ D.B. Query by _____

Refund Generated By () Agent X Claimant

Refund Category:

insufficient fees / claim incomplete / withdrawn (o-pmt)

Date of Last Correspondence (copy attached) _____

Claim No.	Use*	Fees Paid	Correct Fee	Rec't #
<u>65-10683</u>	<u>Domestic</u>	<u>\$25⁰⁰</u>		<u>W032744</u>
<u>65-5687</u>	<u>Domestic</u>	<u>\$25⁰⁰</u>		<u>W032745</u>
		\$		
		\$		
		\$		
Total		<u>\$50⁰⁰</u>	<u>\$0</u>	

*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

Ownership change fees not required, not decreed in SRBA.

Region AJ Spvsr. Approval [Signature] S.O. AJ Spvsr. Approval _____

Den Shaff Approval C. Fritschle Hold _____ To Fiscal 12-12-07

C. Fritschle Logged 12-11-07

Data Base Modified? Y/N NA A &/or R Records By _____ on _____

RECEIVED

DEC 11 2007

DEPARTMENT OF
WATER RESOURCES