

Moffatt Thomas

MOFFATT THOMAS BARRETT ROCK & FIELDS, CHTD.

Eugene C. Thomas
John W. Barrett
R. B. Rock
Richard C. Fields
John S. Simko
John C. Ward
D. James Manning
David B. Lincoln
Gary T. Dance
Larry C. Hunter
Randall A. Peterman
Mark S. Prusynski
Stephen R. Thomas
Glenna M. Christensen
Gerald T. Husch
Scott L. Campbell
Robert B. Burns

Michael E. Thomas
Patricia M. Olsson
Christine E. Nicholas
Bradley J. Williams
Lee Radford
Michael O. Roe
David S. Jensen
James L. Martin
C. Clayton Gill
Michael W. McGreaham
David P. Gardner
Tara Martens
Julian E. Gabiola
Kimberly D. Evans Ross
Jason G. Murray
Mark C. Peterson
Paul D. McFarlane

Jon A. Stenquist
Tyler J. Henderson
C. Edward Cather III
Andrew J. Waldera
Tyler J. Anderson
Dylan B. Lawrence
Benjamin C. Ritchie
Rebecca A. Rainey
Nathan R. Starnes
Andrew J. Snook

Robert E. Bakes, *of counsel*

Willis C. Moffatt, 1907-1980
Kirk R. Helvie, 1956-2003

RECEIVED

SEP 27 2007

DEPARTMENT OF
WATER RESOURCES

September 24, 2007

Boise
Idaho Falls
Pocatello
Twin Falls

US Bank Plaza Building
101 S Capitol Blvd 10th Fl
PO Box 829
Boise Idaho 83701 0829

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800 422 2889
208 385 5384 Fax
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Becky Harvey
Paralegal
Idaho Department of Water Resources
322 E. Front Street, 6th Floor
P.O. Box 83720

Boise, ID 83720

Re: Loraine Carr
MTBR&F File No 23028.0

Dear Becky:

I have enclosed a copy of the death certificate issued for Tom Carr. Please proceed with the changes to the water rights ownership to reflect Loraine Carr as the sole owner.

Thank you for your assistance. Please contact me if you have any questions.

Very truly yours,


Scott L. Campbell

SLC/dll
Enclosure
cc: Loraine Carr

78-137
78-151
78-152
78-10160
78-10161

CERTIFICATION OF VITAL RECORD

STATE OF IDAHO
IDAHO DEPARTMENT OF HEALTH AND WELFARE
BUREAU OF HEALTH POLICY AND VITAL STATISTICS

CERTIFICATE OF DEATH

Date Filed MAY 10, 2005State File No 2005-03616

DECEDENT - LEGAL NAME

THOMAS BROWN CARR, JR.

SEX

MALE

SOCIAL SECURITY NUMBER

AGE

87 YEARS

DATE OF BIRTH

FEBRUARY 16, 1918

BIRTHPLACE

MIDVALE, IDAHO

PLACE OF RESIDENCE

WEISER, IDAHO

MARITAL STATUS AT TIME OF DEATH

MARRIED

NAME OF SURVIVING SPOUSE (if wife, maiden name)

LORAIN DAY

WAS DECEDENT EVER IN
U.S. ARMED FORCES?

NO

FATHER - NAME

THOMAS BROWN CARR, SR.

BIRTHPLACE

SCOTLAND

MOTHER - MAIDEN NAME

PARLEE PHELPS

BIRTHPLACE

INDIANA

METHOD OF DISPOSITION

CREMATION

FUNERAL SERVICE LICENSEE

DAVID ANDREW DEMBOWSKI

NAME AND ADDRESS OF FUNERAL FACILITY

ACLESA CREMATION & BURIAL SOCIETY, BOISE, IDAHO

DATE OF DEATH

APR. 28, 2005

TIME OF DEATH

4:48 A.M.

CITY, TOWN OR LOCATION OF DEATH

BOISE, IDAHO

COUNTY OF DEATH

ADA

Approximate Interval Between
Onset and Death

CAUSE OF DEATH (underlying cause last)

? PULMONARY EMBOLUS OR MI

DUE TO (or as a consequence of):

POST OP RESECTION OF CECAL CARCINOMA

DUE TO (or as a consequence of):

W/ LIVER METASTASIS

DUE TO (or as a consequence of):

OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not resulting in the underlying cause given above

NONE STATED

WAS AN AUTOPSY
PERFORMED?

NO

MANNER OF DEATH

NATURAL

NAME OF CERTIFIER

ROBERT COSCIA, M.D.

TITLE

PHYSICIAN

CORONER SUBSEQUENT CERTIFICATION IF NECESSARY

INTERNAL CAUSE ONLY

DATE OF INJURY

TIME OF INJURY

PLACE OF INJURY

INJURY AT
WORK?

LOCATION WHERE INJURY OCCURRED

DESCRIPTION OF HOW INJURY OCCURRED

This is a true and correct reproduction of the document officially registered and placed
on file with the IDAHO BUREAU OF HEALTH POLICY AND VITAL STATISTICSDATE ISSUED: OCTOBER 17, 2005This copy not valid unless prepared on engraved border
displaying state seal and signature of the RegistrarJANE S. SMITH
STATE REGISTRAR