

REFUND REQUEST

TO: S. Sherman to Log In
 FOR: C. Fritzsche/D. Allen
 FROM: S. Sherman Date: 6-24-08
 SUBJ: Receipt No. C087154 (Please attach ARQ2 Receipt copy immediately behind blue form)

RE: PayOR Moore, Smith, Buxton + Turcke, Chtd.
 Address 950 W. Bannock Ste 520
Boise ID 83702

Claimant(s) if NOT Payor Casa del Norte, LP
 Refund Amount \$ 600 Claim Location (Region/Claimant) (State)
 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 (X) Agent () Claimant
 Refund Category:
insufficient fees / claim incomplete / withdrawn (o-pmt)
 Date of Last Correspondence (copy attached) 3-31-08

Claim No.	Use*	Fees Paid	Correct Fee	Rec't #
<u>37-22261</u>	<u>01</u>	<u>\$ 800</u>	<u>200</u>	<u>C087154</u>
Total		<u>\$ 800</u>	<u>\$ 200</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 (X) N

See Craig email

Region AJ Spvsr. Approval S.O. AJ Spvsr. Approval CS
 C. Fritzsche Approval Hold To Fiscal 6-24-08
Don Sharp 6-24-08 Logged 6-24-08 AS
 Data Base Modified? Y/N (NA) A &/or R Records By on