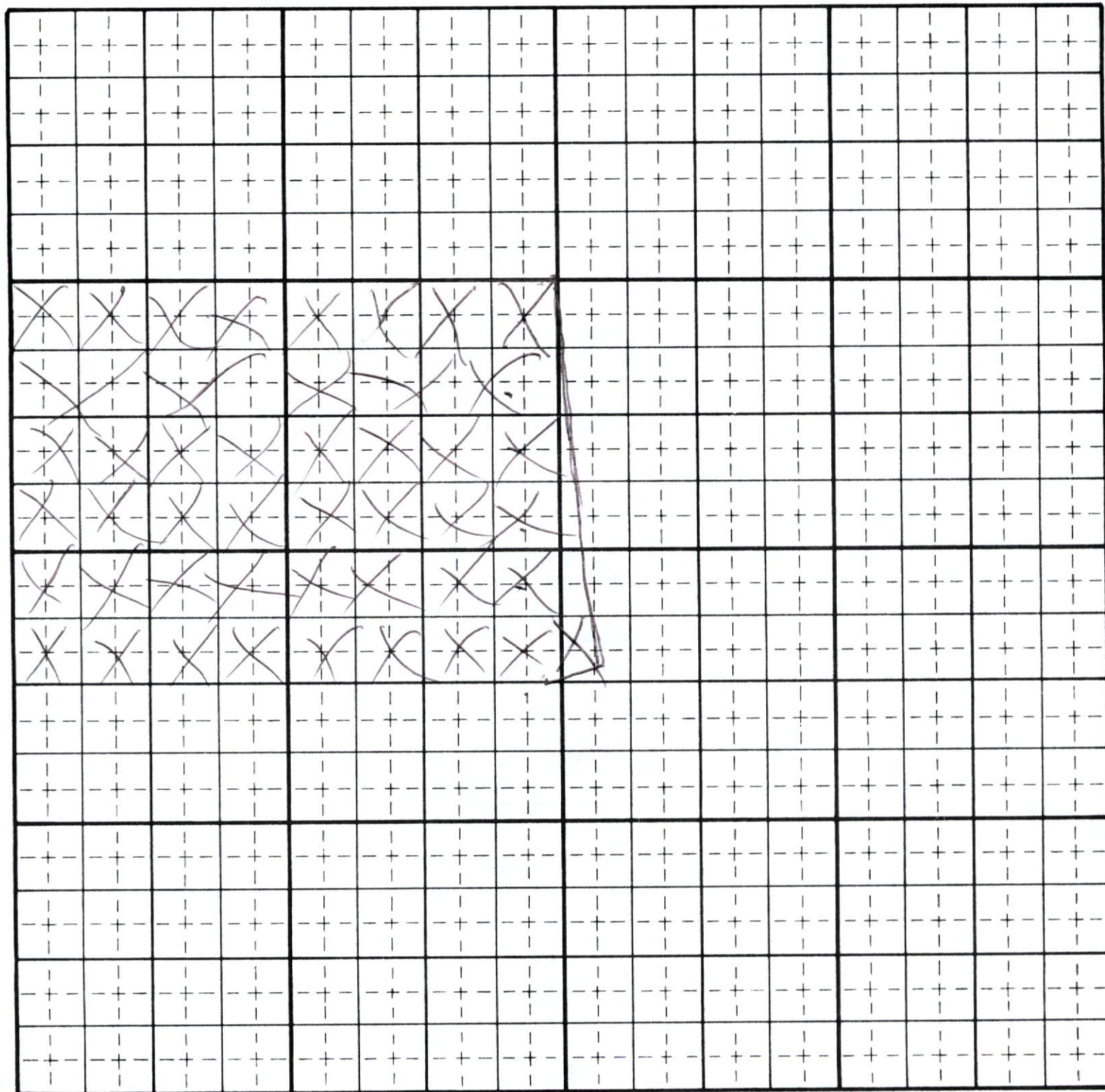


Map of Project: show clearly the point of diversion, place of use, section number, township, and range number.

Scale: 2 inches equals 1 mile



MICROFILMED

OCT 01 1992

Last Name

Swain

Ident No.

Copies: White-State, Yellow-Claimant

CLAIMANT'S NAME

Serra Family Trust

CLAIM IDENT. NO.

67-00528

DATE RECEIVED

10/16/81

CK #

672253

AMOUNT \$

159⁰⁰

YES

NO

Required
Info?

1. Is the name and address complete with zip code? ☒ YES ☐ NO ☐ Required Info? *
2. Is a priority date entered? ☒ YES ☐ NO ☐ Required Info? *
- Is the priority date acceptable in view of mandatory filing dates?
See Adjudication Memo #1 and #4 to determine if a Permit is required. ☒ YES ☐ NO ☐ Required Info? *
3. (a) Is a source entered? ☒ YES ☐ NO ☐ Required Info? *
- (b) Is a tributary to entered? (if required) ☒ YES ☐ NO ☐ Required Info? *
4. Is the legal description of the p.d. sufficient? ☒ YES ☐ NO ☐ Required Info? *
5. Is there a description of the diverting works? ☒ YES ☐ NO ☐ Required Info? *
6. Are the water uses appropriate for the form? The short form is limited to domestic and stockwater uses with direct diversion. All claims that include storage or instream stockwater must use long form. ☒ YES ☐ NO ☐ Required Info? *
- Is the period of use included? ☒ YES ☐ NO ☐ Required Info? *
- Is a quantity claimed for each use? ☒ YES ☐ NO ☐ Required Info? *
7. Is a total quantity claimed entered? ☒ YES ☐ NO ☐ Required Info? *
8. If required is a consumptive use entered? ☒ YES ☐ NO ☐ Required Info? *
- Is the consumptive use correct? ☒ YES ☐ NO ☐ Required Info? *
9. Are the non-irrigation uses listed properly? If this claim is on the short form, and more than one domestic use is listed, single ownership must be stated. If not under single ownership, see Adjudication Memo # 4. ☒ YES ☐ NO ☐ Required Info? *
10. Is (are) the place(s) of use and purpose(s) indicated? ☒ YES ☐ NO ☐ Required Info? *
11. Is (are) the county(ies) entered? ☒ YES ☐ NO ☐ Required Info? *
12. Is the ownership of p.u. checked? ☒ YES ☐ NO ☐ Required Info? *
13. Are other water rights listed or "none" indicated? ☒ YES ☐ NO ☐ Required Info? *
14. If required, are remarks correct? (If the claimant does not own the place of use, authority for filing the claim must be explained in the remarks.) ☒ YES ☐ NO ☐ Required Info? *
15. Is the basis of the claim indicated? ☒ YES ☐ NO ☐ Required Info? *
16. If the claimant requested a monthly docket sheet, is payment enclosed? (If yes, describe payment status in "Comments" below.) ☒ YES ☐ NO ☐ Required Info? *
17. Is the claim signed by the claimant, and is the signature appropriate? Organizations must complete the organization block. ☒ YES ☐ NO ☐ Required Info? *
18. Has the claim been signed, sealed, and dated by a notary? ☒ YES ☐ NO ☐ Required Info? *
19. Was this claim filed on time, or was an extension granted? ☒ YES ☐ NO ☐ Required Info? *
20. Is the fee enclosed correct? ☒ YES ☐ NO ☐ Required Info? *
21. If this claim is based on an existing water right, has the identification number been entered? ☒ YES ☐ NO ☐ Required Info? *
22. Should this claim be data entered? ☒ YES ☐ NO ☐ Required Info? *

Claim checked by:

B

Date:

5/22/90

Claim must be returned to claimant:

(Yes) (No)

Claimant must be notified of modifications:

(Yes) (No)

Receipt Prepared by:

Claim data entered by:

Sent to claimant by:

Date:

Date: 5/22/90

Date:

Checked by:

Date:

OCT 11 1992

Comments:

County = Washington

address across wrong = 109

fee = 159⁰⁰

over pd. 10\$

13 = 67-00525A

67-00593A

67-00529C

field
inspect
flag

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO,
IN AND FOR THE COUNTY OF TWIN FALLS

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEM.

CIVIL CASE NUMBER: 39576

Ident. Number: A67-00528
Date Received: 10/17/1989
Receipt No: C012253
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: SWAIN FAMILY TRUST 208-549-3519
Address: 1133 MANN CREEK RD.
WEISER, ID 83762

2. Date of Priority: JUN 01, 1871

3. Source: MANNS CREEK Trib. to: WEISER RIVER

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
12N	04W	31	NE	SW			WASHINGTON

5. Description of diverting works:
HEADGATE & LATERAL FOR FLOOD IRRIGATION & SPRINKLERS

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	04/01	10/31	0.450		

7. Total Quantity Appropriated is:
0.450 C.F.S. (and/or) A.F.A.

8. Total consumptive use is 327.0 Acre Feet Per Annum.

9. Non-irrigation uses:
IN-STREAM STOCKWATERING

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
12N	04W	31	SW	NE		IRR	19.0
			SW	NW		IRR	20.0
			NW	SW		IRR	40.0
			NW	SE		IRR	30.0

10. Place of Use: Continued

Section Acres 109.0

Total Acres 109.0

11. Place of use in counties: WASHINGTON

12. Do you own the property listed above as place of use? YES

13. Other Water Rights Used:
 A67-00525A, A67-00593A, A67-00529C

14. Remarks:

15. Basis of Claim: DECREED

Case Number:

Court :

Decree date:

E. V. JEFFERSON ET. AL.
Decree Plaintiff

vs

THOMAS HIGGENBOTHAM ET. AL.
Decree Defendant

16. Signature(s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notice in the Snake River Basin Adjudication." (b.) I/We do _____ do not _____ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: _____

For Organizations:

I do solemnly swear or affirm that I am _____ of
_____, that I have signed the foregoing
_____, that I have signed the foregoing
document in the space below as _____ of
_____ and that the statements contained in the
_____ and that the statements contained in the
foregoing document are true and correct.

Signature of Authorized Agent

Title and Organization

Date

State of Idaho)
County of _____) SS.

Subscribed and sworn (or affirmed) before me this _____ day
of _____ 19 _____

Notary Public

Seal

Residing at _____

My Commission Expires _____

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 39576

Ident. Number AL7-00528

Date Received 10/17/89

Receipt Number C012253

RECEIVED

OCT 16 1989

NOTICE OF CLAIM
TO A
WATER RIGHT

Department of Water Resources

ACQUIRED UNDER STATE LAW

Please type or print clearly

1. Name of Claimant (s) SWAIN Family Trust Phone (208) 599 3519
Mailing Address 1133 MANN CREEK RD WEISER Zip 83762
2. Date of Priority (Only one (1) per claim) 06-01-1871
3. Source of water supply (a) MANN CREEK
which is tributary to (b) WEISER RIVER
4. a. Location of existing point of diversion is: Township 12N Range 4W Section 31
NE 1/4 of SW 1/4 of _____ 1/4, Govt. Lot, _____ B.M., County of WASHINGT

Additional points of diversion if any: _____

b. If instream flow, beginning point of claimed instream flow is:

Township _____ Range _____ Section _____, _____ 1/4 of _____ 1/4 of _____ 1/4,

Govt. Lot _____ B.M., County of _____

ending point is: Township _____ Range _____ Section _____, _____ 1/4 of _____ 1/4 of _____

_____ 1/4, Govt. Lot _____ B.M., County of _____

5. Description of existing diversion works (Dams, Reservoirs, Ditches, Wells, Pumps, Pipelines, Headgates, Etc), including the dates of any changes or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well. Headgate & lateral

FOR FLOOD IRRIGATION & SPRINKLER

MICROFILMED

OCT 01 1992

HOW YOU WILL RECEIVE NOTICES IN THE SNAKE RIVER BASIN ADJUDICATION

All documents filed in the Snake River Basin Adjudication other than notices of claims are filed with the court. Notices of claims to water rights filed in the Snake River Basin Adjudication are filed with the Idaho Department of Water Resources. Copies of all documents filed in the Snake River Basin Adjudication will not be mailed to all parties (claimants) in the adjudication.

By order of the court, any document filed with the court will be mailed only to those parties who may be directly affected by it. A monthly docket sheet will be prepared by the department which contains a summary of all documents filed with the court in the previous month and the dates and locations of hearings scheduled for the following three months. The docket sheet will be filed with the district court clerk in each county within the Snake River Basin in Idaho. Copies of the docket sheet may be obtained from any of the offices of the department either in person or by mail; a small fee will be charged to cover the cost of mailing and/or copying. If you wish to receive a copy of the docket sheet each month, you should mark the appropriate place on your notice of claim form. You will be charged a small annual subscription fee to cover the cost of copying and mailing. Copies of any document listed on the docket sheet may be obtained from any of the offices of the department either in person or by mail; a small fee will be charged to cover the cost of mailing and/or copying.

Copies of all notices of claims filed with the department will be available for inspection from all offices of the department. Copies of the notices of claims may be obtained in person or by mail, but you will be charged for the cost of copying and mailing. (A claimant will not be charged for a copy of his or her own notice of claim, and a person who acquires property with water rights for which a notice of claim was filed will not be charged for a copy of the notice of claim filed by the previous owner.)

After the notices of claims have been reviewed, the director will prepare and file a report with the court. Part 1 of the report will contain the director's recommendations as to each water right claimed under state law. Part 2 of the report will list each federal reserved water right claimed. A number of reports will be prepared, one or more for each sub-basin in the Snake River Basin. When the report for your sub-basin is filed with the court, you will be mailed a notice informing you that the report for your sub-basin has been filed. The notice will be sent to the most recent address shown by the department's files. Attached to the notice will be a copy of those portions of the report describing the water rights you have claimed. If you do not agree with the way your water right is described, you may file an objection to the report with the court. You can also file an objection if you disagree with the way other claimant's water rights are described, and the notice will tell you where a copy of the full report is available for inspection. The notice will tell you when and where to file your objection. The notice of filing for each sub-basin report will also be published state-wide in local newspapers.

6. Water is claimed for the following purposes:

For IRRIGATION purposes from 4/1 to 10/31 amount 450 (cfs) or _____ (acre feet)
For _____ purposes from _____ to _____ amount _____ or _____
For _____ purposes from _____ to _____ amount _____ or _____
For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) 450 (cfs) and/or (b) _____ (acre feet)

8. Total consumptive use claimed is 327 acre feet per annum.

9. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock Etc.) IN STREAM STOCK WATER

10. Description of place of use:

- a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.
b. If water is used for other purposes, place a symbol of use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

TWP	RNG	SEC	NE 1/4				NW 1/4				SW 1/4				SE 1/4				Totals
			NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	
<u>12N</u>	<u>4W</u>	<u>31</u>			<u>29</u>				<u>20</u>				<u>40</u>				<u>30</u>		<u>119</u>

Total number of acres irrigated 119

11. In which county (ies) are lands listed above as place of use located? _____

12. Do you own the property listed above as place of use? Yes ☒ No ☐
If your answer is No, describe in Remarks below the authority you have to claim this water right.

13. Describe any other water rights used at the same place and for the same purposes as described above. _____ or None ()

14. Remarks:

MICROFILMED

OCT 01 1992

Last Name SWAIN Ident No. _____

Copies: White -State, Yellow-Claimant

It is very important that you inform the department in writing of any change in your address. This is to make sure that you receive the notices affecting your water rights that are to be mailed by the department.

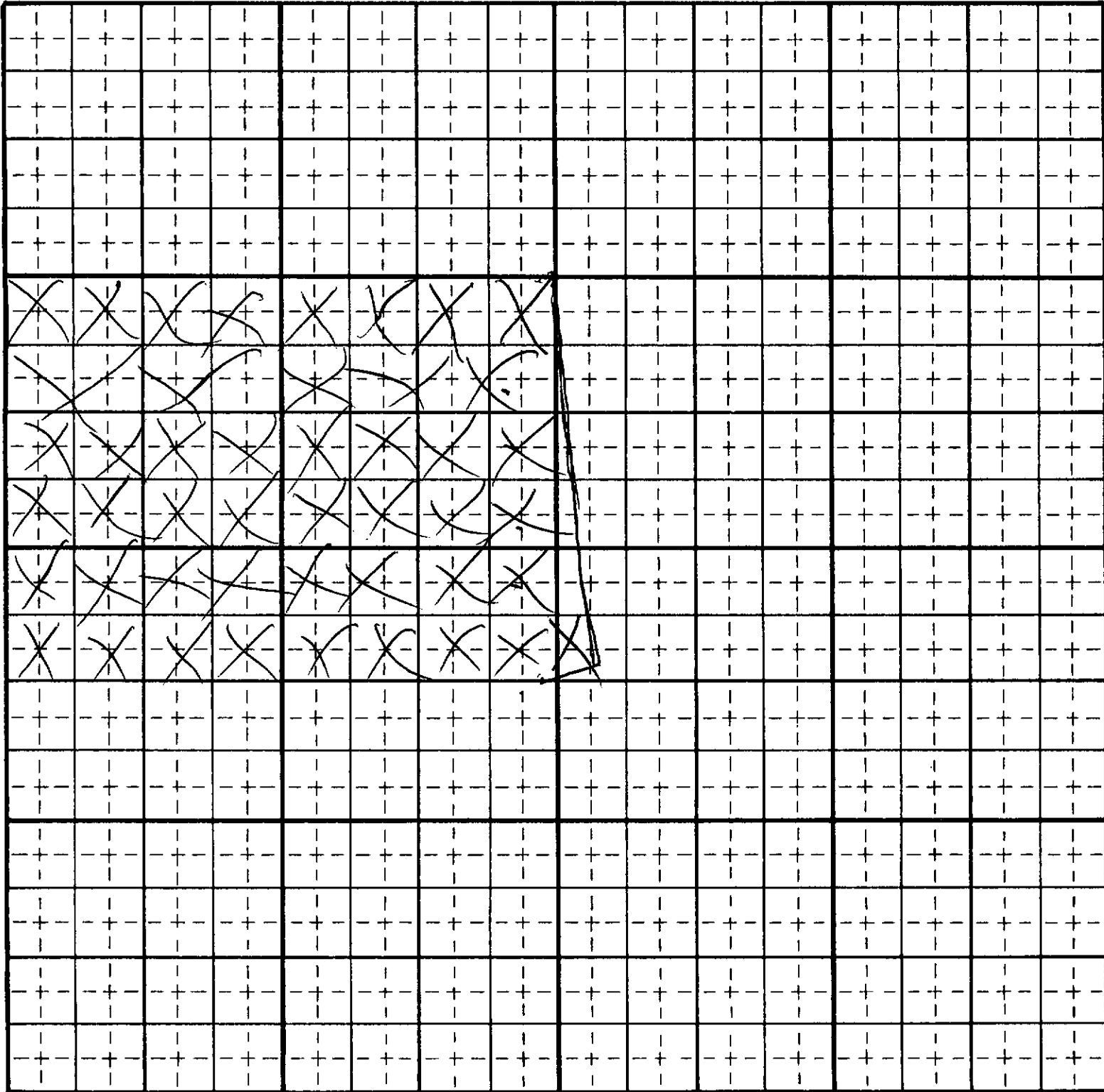
If you are acquiring property with water rights in the Snake River Basin water system in Idaho (either by purchase, gift, inheritance, or other means), it is very important that you inquire of the department whether a notice of claim has been filed. If not, you must file a notice of claim or the water right may be declared by the court to no longer exist. If a notice of claim has been filed, it is very important that you file a written notice of change in ownership with the department. The notice of change in ownership must be accompanied by some evidence of the change in ownership, such as a copy of the deed or a property tax statement showing the name of the new owner. Again, this is to make sure that you receive the notices affecting your water rights that are to be mailed by the department.

The cost of the subscription to the docket sheet is \$7.50 for calendar year 1988. The cost of the subscription may increase a small amount for calendar year 1989 if the cost of copying and/or mailing should increase.

If you are planning to file a motion or other pleading (not a notice of claim) with the court (not IDWR), the court has issued an order setting a special procedure that is different from the usual civil rules. A copy of the order may be obtained from any office of IDWR; you may be charged for the cost of mailing and/or copying.

Map of Project: show clearly the point of diversion, place of use, section number, township, and range number.

Scale: 2 inches equals 1 mile



MICROFILMED

OCT 01 1992

Last Name

SWAIN

Ident No.

Copies: White-State, Yellow-Claimant

15. Basis of Claim (check one) Beneficial Use _____ Posted Notice _____ License _____ Permit _____
Decree ☒ 6700528
If applicable provide IDWR Water Right Number _____
Court _____ Case Number _____ Decree Date _____
Plaintiff vs Defendant _____

16. Signature (s)
(a.) By signing below, I/We acknowledge that I/We have received, read, and understand the form entitled
"How you will receive notice in the Snake River Basin Adjudication." (b.) I/We do _____ do not _____
wish to receive and pay a small annual fee for monthly copies of the docket sheet.
Number of attachments 0

For Individuals: I do solemnly swear or affirm that the statements contained in the foregoing document are true
and correct.

Signature of Claimant (s) X Robert Swain Date _____
_____ Date _____

For Organizations: I do solemnly swear or affirm that I am Trustee Title
of SWAIN FAMILY TRUST Organization, that I have signed the foregoing
document in the space below as Trustee Title of Swain family Trust Organization

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent Robert Swain
Title and Organization Trustee - Swain Family Trust Date 10-13-89

State of Idaho/or _____)
County of Wash) SS.

Subscribed and sworn (or affirmed) before me this 13 day of Oct 19 89

SEAL

Notary Public [Signature]

Residing at Weiser

My Commission Expires 10-10-92

Please Print Name

17. Notice of Appearance:
Notice is hereby given that I, _____ will be acting as attorney at law on behalf
of the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above
should be mailed to me at the address listed below.

Signature _____

Address _____

Date _____

NOT RECORDED
OCT 01 1992

Last Name _____ Ident. Number _____

Copies White-State, Yellow-Claimant

A67-00528 109.0 ac

-00593A 109.0 ac

-11516 ⊕ listed

-00525A 109.0 ac

-11514 57.0 ac

-11517 ⊕ listed

-00529C 109.0 ac

-11515 ⊕ listed

CLAIMANT'S NAME Sperry Family Trust CLAIM IDENT. NO. 667-00528

DATE RECEIVED 10/16/81 CK # 672253 AMOUNT \$ 159⁰⁰

	YES	NO	Required Info?
1. Is the name and address complete with zip code?	☒	☐	*
2. Is a priority date entered?	☒	☐	*
Is the priority date acceptable in view of mandatory filing dates?	☒	☐	*
See Adjudication Memos #1 and #4 to determine if a Permit is required.	☒	☐	
3. (a) Is a source entered?	☒	☐	*
(b) Is a tributary to entered? (if required)	☒	☐	
4. Is the legal description of the p.d. sufficient?	☒	☐	*
5. Is there a description of the diverting works?	☒	☐	
6. Are the water uses appropriate for the form? The short form is limited to domestic and stockwater uses with direct diversion. All claims that include storage or instream stockwater must use long form.	☒	☐	*
Is the period of use included?	☒	☐	
Is a quantity claimed for each use?	☒	☐	*
7. Is a total quantity claimed entered?	☒	☐	
8. If required is a consumptive use entered?	☒	☐	
Is the consumptive use correct?	☒	☐	
9. Are the non-diversion uses listed properly? If this claim is on the short form, and more than one domestic use is listed, single ownership must be stated. If not under single ownership, see Adjudication Memo # 4.	☒	☐	*
10. Is (are) the place(s) of use and purpose(s) indicated?	☒	☐	*
11. Is (are) the county(ies) entered?	☒	☐	
12. Is the ownership of p.u. checked?	☒	☐	
13. Are other water rights listed or "none" indicated?	☒	☐	
14. If required, are remarks correct? (If the claimant does not own the place of use, authority for filing the claim must be explained in the remarks.)	☒	☐	
15. Is the basis of the claim indicated?	☒	☐	
16. If the claimant requested a monthly docket sheet, is payment enclosed? (If yes, describe payment status in "Comments" below.)	☒	☐	
17. Is the claim signed by the claimant, and is the signature appropriate? Organizations must complete the organization block.	☒	☐	*
18. Has the claim been signed, sealed, and dated by a notary?	☒	☐	*
19. Was this claim filed on time, or was an extension granted?	☒	☐	*
20. Is the fee enclosed correct?	☒	☐	*
21. If this claim is based on an existing water right, has the identification number been entered?	☒	☐	
22. Should this claim be data entered?	☒	☐	

Claim checked by: AB Date: 9/21/80Claim must be returned to claimant: (Yes) (No)Claimant must be notified of modifications: (Yes) (No)

Receipt prepared by: _____ Date: _____
 Claim data entered by: AB Date: 5/22/80 Checked by: _____ Date: _____
 Sent to claimant by: _____ Date: _____

Comments: County = Washington address across wrong = 109field
inspected
flag

#13 = 67-00525A

67-00593A
67-00529Cfee = 159⁰⁰

over pd. 10\$

INTER-DEPARTMENT MEMO — 1

FROM *Dally*

DATE *12-12-90*

TO *Anna*

SUBJECT *Rbt./Donna Swain Refund*

I just got this ref. request from ^{ons} Don this a.m.
John will require more info, I know. "Which w/r were
the acres miscalculated?" Als hi lite w/r on rec't.
copy, and return to me so I can do ltr B4 I
give to John.

Sharx, Anna!

MICROFILMED

OCT 01 1992

JDE = file at Region
Change Trs For Docket Sect Sub. \$7.50
Refund \$2.50

SIGNATURE

RECEIPT IS FROM THE STATE FILE
SD-01

IDAHO DEPARTMENT OF WATER RESOURCES
RECEIPT ENTRY SCREEN

DATE 05/24/90
TIME 14:07:45

REC/NO - C012253 AR/NO -
FROM: - SWAIN, ROBERT OR DONNA

RECEIPT TYPE - CK DOC/NO - 239
REMARKS -

TYPE OF PAYMENT
ADJUDICATION FEE

PROGRAM ACCT CLASS FEE
410162 9337 6490 501.00

DEC 12 1990

Department of Water Resources

TOTAL DUE - 501.00

WR/NO	WR FEE	WR/NO	WR FEE	WR/NO	WR FEE
A6700528	159.00	A6700525A	50.00	A6700529C	50.00
A6700593A	50.00	A6711514	107.00	A6711515	25.00
A6711516	25.00	A6711517	25.00		10.00

(ENTER=INQUIRE) (GOLD1=ADD/PRINT REC) (GOLD2=CHANGE) (GOLD3=VOID)
(GOLD6=2ND/COPY REC) (GOLD7=LASER/COPY REC) (MENU _____)

5/24/90
Don:

Log → JDC

This is a copy of the receipt from
the Swain family Trust Claims

(1) over paid by 10\$ because he added the
acres up wrong.

(2) Requested Subscription of Docket Sheet
but did not include \$7.50 fee.

Propose: Allocate \$7.50 of \$10.00 to
Docket fee subscription.

HAVE
* Added
name to
Docket sheet
99 ML3

adjust upper portion of Receipt

NOT FILMED

OCT 01 1992

Anna

Receipt Number : C012253

Page 1 OF 3

Receipt Amt : 501.00

A6700528	159.00	A6700525A	50.00	A6700529C	50.00
A6700593A	50.00	A6711514	107.00	A6711515	25.00
A6711516	25.00	A6711517	25.00		10.00

(ENTER=CONTINUE) (GOLD2=UPDATE) (GOLD4=PREV PG) (GOLD5=NEXT PG)

RECEIVED

OCT 01 1992

Idaho Department Of Water Resources
Receipt Maintenance II - Maint. Screen 2

Date: 12/13/90
Time: 15:18:13

Receipt Number : C012253

Receipt Amt : 501.00

Description	Program	Acct	Class	Fee
ADJUDICATION FEE	410162	9337	6490	501.00

(ENTER=CONTINUE) (GOLD2=UPDATE)

RECEIVED

OCT 01 1992

MEMO TO FILE

MAY 22, 1990

CLAIMS: A67-00525A, A67-00528, A67-00529C, A67-00593A

CLAIMANT: SWAIN FAMILY TRUST

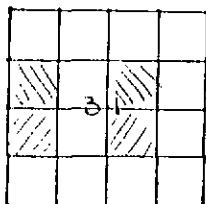
EMPLOYEE: ANNA BAUMHOFF *B*

IN REVIEWING THE ABOVE CLAIMS IT HAS BEEN NOTED THAT ALL REPRESENT EXPANSIONS IN THE NUMBER OF IRRIGATED ACRES, CHANGES IN THE POINT OF DIVERSION ETC...

THE MAJOR PROBLEM ON THE CLAIMS IS THE LISTED PLACE OF USE.

IT APPEARS AS IF THE CLAIMANT INTENDED TO CLAIM LANDS THAT REPRESENTED A BLOCK APPROXIMATELY 160 ACRES. SEE THE ATTACHED MAPS (SUCH THAT THEY ARE).

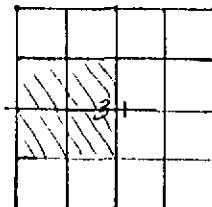
THE LEGALS GIVEN AS PLACE OF USE IN ITEM #10 ARE THE GIVEN AS THE SW 1/4'S OF BOTH THE NE AND NW 1/4 AND THE NW 1/4'S OF BOTH THE SW AND SE 1/4 ALL IN SECTION 31, 12N, 4W.



THE DECREED RIGHTS WERE ORIGINALLY APPURTENANT TO THE S 1/2 OF THE NW 1/4 AND THE N 1/2 OF THE SW 1/4 OF SECTION 31 12N, 4W.

THESE LANDS FORM A 160 ACRE BLOCK!! I BELIEVE THAT THE CLAIMANT REVERSED THE QTR QTR WHEN HE FILLED OUT THE CLAIM AND THE CORRECT PLACE OF USE SHOULD BE:

SW,NW 40 AC
SE,NW 30 AC
NE,SW 19 AC
NW,SW 20 AC



THIS IS WHY I ENTERED THE FIELD INSPECTION FLAG

NOTIFIED

OCT 01 1992

WHITE — State Auditor

YELLOW — Remittance Advice

PINK — State Auditor then Agency

GOLDENROD — Agency Copy

EXPENDITURE VOUCHER

AUDITOR USE

STATE OF IDAHO
Office of State Auditor

AGENCY USE

3744
Date 12/21/90
Code 193002

VENDOR: If you require additional information regarding this payment, please contact the State agency listed below.

AGENCY
NAME:

DEPT. OF WATER RESOURCES

Document No.	
Pre-Audit	Date
Warrant No.	

PAY

ROBERT OR DONNA SWAIN
1133 MANN CREEK RD.
WEISER, ID 83762

TO

CHECK ONE:

(1) MISCELLANEOUS EXPENDITURE

() STATE CONTRACT

() PURCHASE ORDER

() MISCELLANEOUS
ENCUMBRANCE REQUISITION

PAYMENT: () PARTIAL () FINAL

Encumbrance Reference No.

LINE No.	PROGRAM	FUND	ACCT.		DESCRIPTION	LINE AMOUNT	AGENCY USE
			Maj	Min			
1	04 10 162	9337	8831		REFUNDS PER D. SHAFF RECEIPT #0012253 12/12/90 2.50 WR#A67-00528/00593A/ A67-11516/00525A/11514 A67-11517/00529C/11515	2.50	
TOTAL						2.50	

NOTE: Final payment must be accompanied by a receiving copy

TO STATE AUDITOR

Request is hereby made that a warrant be authorized and drawn in payment of the item or items described above. I hereby certify that the items described were ordered by proper authority; that they are necessary in the public service, that the items have been received and accounted for, and that the account as stated is correct and just.

AUDITOR'S CERTIFICATE

I hereby certify that the above account is in proper form; that totals carried hereon are correct; that receipts when required by law or regulation of the State Board of Examiners covering items for which reimbursement is asked are submitted herewith; and that there are funds in the state treasury and balances in appropriation accounts out of which the same may be lawfully paid.

Date

Head of Agency or Institution

State Auditor



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Statehouse Mail, Boise, Idaho 83720 -(208) 327-7900

CECIL D. ANDRUS

GOVERNOR

R. KEITH HIGGINSON

DIRECTOR

December 19, 1990

Mr. & Mrs. Robert Swain
1133 Mann Creek Road
Weiser, ID 83762

RE: Snake River Basin Adjudication (SRBA)
Washington County - #A67-00528, A67-00593A,
A67-00525A, A67-115147, A67-11517. A67-00529C
& A67-1115
Receipt #C012253 - \$2.50

Dear Mr. & Mrs. Swain:

An overpayment of your filing fees has been brought to our attention on your above claims in the amount of \$10.00. During your conversation with Anna Baumhoff in May, 1990, you requested that we deduct the docket sheet fee of \$7.50 from the overpayment and enter your name on the subscription list. That has been accomplished.

The refund process has been initiated with the State Auditor's Office, and you should receive your check in the near future.

Sincerely,

John C. Carlson
John C. Carlson
Adjudication Supervisor

JDC:sf:ref

RECEIVED
OCT 01 1992

REFUND REQUEST

Hold Until — To Fiscal 12-19-90

TO: Debbie Allen

THRU: Don Shaff

Approved gpc 12/12/90

FROM: John Carlson

Approved gpc 12/14/90RE: Payor Robert or Donna SwainAddress 1133 Mann Creek Rd.
Weiser, ID 83762Claimant if NOT Payor Swain Family TrustReceipt # C012253 Attached ☒Logged 12-12-90 afAmount \$ ~~2.50~~ 2.50 Total \$50.00Claim Location regionW/R #(s) A67-00528, -00593A, -11516,Extension Filed? Y/N ☒ NA-00525A, -11514, -11517, -00529C, 11515Copy Attached? Y/N ☒ NARefund Generated By Anna BaumhoffLate Fees Paid? Y/N ☒ NANot Refunded as of 12-12-90On Receipt # —Reason for Refund overpmt - added acres incorrectly.Date of Last Correspondence unknownData Base Modified? Y/N ☒ NA By — Date —

REMARKS:

8 claims received 10/17/89 by mail with ck for \$501.00
Anna B. determined fee and from note 5/24/90, \$10.00 overpayment.
Claimant requested Pocket Sheet Subscription. Take off \$7.50
leaving \$2.50.

OK to refund \$2.50 gpc 12/14/90on ML3 sub.

09/20/90

OCT 01 1992

10/17/1989

SWAIN, ROBERT OR DONNA

ADJUDICATION FEE	410162 9337 6490	501.00
------------------	------------------	--------

CHECK	239	\$501.00
-------	-----	----------

Water Right Numbers				
A67-00528	A67-00525A	A67-00529C	A67-00593A	A67-11514
A67-11515	A67-11516	A67-11517	-	-

Region: STATE

Signature: _____

RECEIVED

OCT 01 1992

Idaho Department Of Water Resources
Receipt Maintenance II - Maint. Screen 1

Date: 12/13/90
Time: 15:18:04

Receipt Number : C012253

Receipt AMT : 501.00

Receipt Type : CK
Date & Time : 10/17/1989 08:33:09
From Payer : SWAIN, ROBERT OR DONNA
User ID : KEATHLEY
Adjust Flag : W
Trans Number : 90-456
AR Number :
Receipt Remarks :
Update Remarks :
Amount Refunded :
Refund Reason :
Refund Name :

Check Number: 239
Julian Date : -

Rec. Group : F
Trans Yr-Mo : 1989-10

Refund Date : __/__/__

Refund CK No: _____

Receipted Fees : _

Water Right Numbers: _

(ENTER=CONTINUE) (GOLD2=UPDATE)

RECEIVED

OCT 01 1992