

REFUND REQUEST

TO: S. Sherman to Log In
 FOR: C. Fritschle/D. Allen
 FROM: S. Sherman Date: 11-26-08
 SUBJ: Receipt No. C087751 (Please attach ARQ2 Receipt copy immediately behind blue form)
 RE: PayOR Holden Kidwell Hahn & Crapo PLLC
 Address Po Box 50130
Idaho Falls ID 83405

Claimant(s) if NOT Payor Birch Creek Corp
 Refund Amount \$ 89.- 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 () Agent () Claimant (✓) JAL
 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 insufficient fees / claim incomplete / withdrawn / o-pmt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>25-14228</u>	<u>storage(s)</u>	<u>\$200.-</u>	<u>\$111.-</u>	<u>C087751</u>
Total		<u>\$200.-</u>	<u>\$111.-</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

see airtel 8-27-08 JAL

Region AJ Spvsr. Approval S.O. AJ Spvsr. Approval 63
 C. Fritschle Approval C. Fritschle Hold To Fiscal 12-2-08
 Data Base Modified? Y/N NA A &/or R Records By on 11-26-08