

REFUND REQUEST

TO: S. Sherman to Log In
 FOR: C. Fritschle/D. Allen
 FROM: S. Sherman Date: 9-2-09
 SUBJ: Receipt No. No 19896 (Please attach ARQ2 Receipt copy immediately behind blue form)
 RE: Payor Mary + Lubertus Vanderbilt
 Address 20742 E. Hayden Lake Rd.
Hayden ID 83835-7093

Claimant(s) if NOT Payor —
 Refund Amount \$25.00 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 () Claimant () Sal
 Refund Category:
 insufficient fees / claim incomplete / withdrawn / o-pmt

Date of Last Correspondence (copy attached) nk

Claim No.	Use*	Fees Paid	Correct Fee	Rec't #
<u>95-390</u>	<u>43</u>	<u>\$25.00</u>	<u>0</u>	<u>No 19896</u>
		\$		
		\$		
		\$		
		\$		
Total		<u>\$25.00</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 (N)
Basis is Decreed. No fee due.
CLM matches Decree.

Region AJ Spvrs. Approval — S.O. AJ Spvrs. Approval —
 C. Fritschle Approval C. Fritschle Hold — To Fiscal 9-4-09, 10
 Data Base Modified? Y/N NA A &/or R Records By — on —
 Logged —