

RECEIVED

AUG 15 2011

REFUND REQUEST

TO: S. Sherman to Log In
FOR: C. Fritschle/D. Allen
FROM: KENNETH KNOBLOCK Date: 8/15/11
SUBJ: Receipt No. NO7440 (Please attach ARQ2 Receipt copy immediately behind blue form)

RE: PayOR RUSTIN YOUNG
Address 541 ROUND LAKE RD.
ST MARIES, ID 83861

Claimant(s) if NOT Payor _____

Refund Amount \$ 53 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

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insufficient fees / claim incomplete / withdrawn / o-pmt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>91-7128</u>	<u>FIRE RECREATION</u>	<u>\$ 53</u>	<u>0</u>	<u>NO27440</u>
_____	_____	\$ _____	_____	_____
_____	_____	\$ _____	_____	_____
_____	_____	\$ _____	_____	_____
_____	_____	\$ _____	_____	_____
Total		\$ _____	\$ _____	

*Incomplete claims or insufficient fees for irrigation use will generally NOT be refunded. D.E. claim in AJSPI at minimum.

Detailed Reason(s) for Refund Attached Y/N
DUPLICATE FILING. FIRST CLAIM FILED OCT. 5, 2010
RECEIPT NO25948

Region AJ Spvsr. Approval [Signature] Hold _____ To Fiscal 11-17-11-12
C. Fritschle Approval [Signature] Logged 8-15-11
Data Base Modified? Y/N NA A &/or R Records By _____ on _____

First Receipt	Claims	Amount	Description
<u>NO25948</u>		<u>\$200.00</u>	<u>Applications for Permit</u>
		<u>\$128.00</u>	<u>CSRA Filing fees.</u>
			<u>Permits</u>
<u>91-7128</u>	<u>53.00</u>	<u>94-7781</u>	<u>100.00</u>
<u>91-7231</u>	<u>25.00</u>	<u>94-7790</u>	<u>100.00</u>
<u>92-7048</u>	<u>25.00</u>		
<u>94-7769</u>	<u>25.00</u>		