

RECEIVED

MAY 25 2012

REFUND REQUEST

DEPT. OF WATER RESOURCES

TO: S. Sherman to Log In
 FOR: C. Fritschle/D. Allen
 FROM: KENNETH KNOBLOCH Date: _____
 SUBJ: Receipt No. NO21923 (Please attach ARQ2 Receipt copy immediately behind blue form) NO23463

RE: PayOR QUANTUM ENGINEERING
 Address 5-2641 SILVER BEACH LOOP
COEUR D'ALENE, ID 83814
THREE

Claimant(s) if NOT Payor UPPER COLUMBIA CORP. PRY ADVENTS ^{SEVENTH}
 Refund Amount \$ 174 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 X 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 insufficient fees / claim incomplete / withdrawn / o-pmt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>95-9502</u>	<u>DOMESTIC</u>	<u>\$ 67</u>	<u>0</u>	<u>NO23463</u>
<u>95-1517</u>	<u>DOMESTIC</u>	<u>\$ 107</u>	<u>0</u>	<u>NO21923</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DUPLICATE FILING & WITHDRAWN

Region AJ Spvsr. Approval K S.O. AJ Spvsr. Approval _____
 C. Fritschle Approval C. Fritschle Hold _____ To Fiscal 5-25-12

Data Base Modified? Y/N NA A &/or R Records By _____ on _____
 Logged 5-25-12-adjusted
initial entry
5-17-12