

OWNER CODE	NAME & ADDRESS	PRIORITY DATE	WATER USE	USE PERIOD FROM TO	DIVERSION RATE	DIVERSION VOLUME
C	KAREN POWERS	02/08/1949	DOMESTIC	01-01 12-31	0.04 CFS	
TOTAL DIVERSION:					0.04 CFS	

Water Source: GROUNDWATER

Tributary to:

Stage: BENEFICIAL USE

Point(s) of Diversion:

T11S R24E S02

NWNWNE

CASSIA County

Place of use Legal Description for: DOMESTIC

NE

NW

SW

SE

NENE				NENE				NENE				NENE				NENE				NENE				NENE			
T	R	S	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac				
11S	24E	11	:																								
			:																								

POU County: CASSIA

Non-Irrigation Uses: 1 HOME

Other Rights: NONE

Conditions of Approval:

- N11 - THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A
- DETERMINATION OF HISTORICAL BENEFICIAL USE.
- N13 - THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000
- GALLONS PER DAY.

Remarks: EXP ~~RPT11SR24E020001A~~*not correct*

Dates: Exam Made Date: Verified Date: 11/07/1997 Objection Filed Date:

Misc: Water District Number: Field Inspection Flag:
Presumption Flag:** 2/5/98*

AJ0749NP
No. R45-11410

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT
(REGIONAL)

DATE: 11/07/97
PAGE: 1

OWNER CODE	NAME & ADDRESS	PRIORITY DATE	WATER USE	USE PERIOD FROM TO	DIVERSION RATE	DIVERSION VOLUME
C	KAREN POWERS RT 1 BOX 101A DECLO ID 83323 (208) 654-2839	02/08/1949	DOMESTIC	01-01 12-31	0.04 CFS	
				TOTAL DIVERSION:	0.04 CFS	

Water Source: GROUNDWATER

Tributary to:

Stage: BENEFICIAL USE

Point(s) of Diversion:

T11S R24E S02

NWNWNE

CASSIA County

Place of use Legal Description for: DOMESTIC

	NE				NW				SW				SE			
T R S	: Lt Ac	Lt Ac	Lt Ac	Lt Ac	: Lt Ac	Lt Ac	Lt Ac	Lt Ac	: Lt Ac	Lt Ac	Lt Ac	Lt Ac	: Lt Ac	Lt Ac	Lt Ac	Lt Ac
11S 24E 11	:		D	:	:			:	:			:	:			:

POU County: CASSIA

Non-Irrigation Uses: 1 HOME

Other Rights: NONE

Conditions of Approval:

- N11 - THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A DETERMINATION OF HISTORICAL BENEFICIAL USE.
- N13 - THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000 GALLONS PER DAY.

Remarks: EXP RPT11SR24E020001A

Dates: Exam Made Date: Verified Date: 11/07/1997 Objection Filed Date:

Misc: Water District Number: Field Inspection Flag:
Presumption Flag:

Comments: Date: 11/07/1997 User-ID: SSHERMAN Subject: COPIED FROM REMARKS
OWNERSHIP CHANGE MADE 7-3-95 TF.

Audit: 11/07/97 SSHERMAN

AJ5856NP

IDAHO DEPARTMENT OF WATER RESOURCES
RECOMMENDED WATER RIGHTS ACQUIRED UNDER STATE LAW

REC'D 5007880
25.-

DATE: AUG-20-1997

PAGE: A-180

RIGHT NUMBER: 45-11410

NAME & ADDRESS: KAREN POWERS
RT 1 BOX 101A
DECILO ID 83323

Dale & Amy C. Darrington
220 S. 950 E.
Declo ID 83323

SOURCE: GROUNDWATER

QUANTITY: 0.04 CFS

PRIORITY DATE: 02/08/1949

POINT OF DIVERSION: RPT11S R24E S0200015 NWNWNE

Within CASSIA County

PURPOSE AND

PERIOD OF USE: PURPOSE OF USE
DOMESTIC D/I HOUSE

PERIOD OF USE
01-01 12-31

QUANTITY
0.04 CFS

PLACE OF USE: DOMESTIC Within CASSIA County
T11S R24E S11 NWNE

OTHER PROVISIONS NECESSARY FOR DEFINITION OR ADMINISTRATION OF THIS WATER RIGHT:

OWNERSHIP CHANGE MADE 7-3-95 TF.

EXPLANATORY MATERIAL: BASIS OF CLAIM - BENEFICIAL USE

only w/R

Verified by DS Date: 9-10-94

Verification Source: C.R.

Note: per staff
Dale C. bot prop. from his dad, who had it a long
time. & mentioning Powers on card.



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Statehouse Mail, Boise, Idaho 83720-9000

Phone: (208) 327-7900 FAX: (208) 327-7866

PHILIP E. BATT
GOVERNOR

October 7, 1997

KARL J. DREHER
DIRECTOR

DALE & AMY L DARRINGTON
220 S 950 E
DECLO ID 83323

*11-07-97
+ response.
/so*

RE: Snake River Basin Adjudication (SRBA)
Notice of Claim to a Water Right #A45-11410

Dear Claimants:

We have been advised you may be the new owners of the property with the water right referenced above.

Before we can modify our records to reflect your new ownership of the property and water right referenced above, we need Form 42-248/42-1409(6) completed and returned. We have enclosed this form for your use. Please return the completed form with warranty deed copy and map to my attention.

Please call me toll-free at 1-800/451-4129 if you have any questions.

Sincerely,

A handwritten signature in cursive script that reads "S. Sherman".

Sally Sherman
Technical Records Specialist
Adjudication Bureau

SS:region
Enclosure:
Form 42-248/42-1409(6)

Land Title and Escrow, Inc.

P.O. BOX 177
BURLEY, IDAHO 83318

RECEIVED

MAR 14 1995

Department of Water Resources
Southern Region

Idaho Department of Water Resources
222 Shoshone St. East
Twin Falls, Idaho 83301



DEC 03 1996

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: A45-11410
Date Received: 6/12/1989
Receipt No: S007880
Received By:

COPY FOR
YOUR FILES

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

COPY FOR
YOUR FILES

1. Name: KAREN POWERS
Address: RT 1 BOX 101A
DECLO ID

208-654-2839

83323

2. Date of Priority: FEB 8, 1949

3. Source: GROUNDWATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
11S	24E	2	NW	NW	NE		CASSIA

5. Description of diverting works:
6"X 80' WELL AND PUMP

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
DOMESTIC	01/01	12/31	0.040		

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

A.F.A.

8. Total consumptive use is

Acre Feet Per Annum.

9. Non-irrigation uses:
D/1 HOUSE

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
11S	24E	11	NW	NE		DOMEST	

11. Place of use in counties: CASSIA

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

13. Other Water Rights Used:
NONE

14. Remarks:
OWNERSHIP CHANGE MADE 7-3-95 TF.

15. Basis of Claim: BENEFICIAL USE

DEC 03 1996



State of Idaho
DEPARTMENT OF WATER RESOURCES

Southern Region, 222 Shoshone St. East, Twin Falls, Idaho 83301-6105 (208) 736-3033
Fax (208) 736-3037

July 3, 1995

PHILIP E. BATT
Governor

KARL J. DREHER
Director

KAREN POWERS
RT 1 BOX 101A
DECLO ID 83323

RE: SRBA Claim(s) A45-11410

Dear Ms. Powers:

Pursuant to the change in ownership request that has been submitted to the Department, we have changed the record of current ownership to you. Please find the enclosed copies of the computer record of the claim(s) noting the change in claimant. Review these records and if there is an error, or you have any questions, please contact this office.

Sincerely,

A handwritten signature in cursive script, appearing to read 'Trish Fawcett', is written over a horizontal line.

Trish Fawcett
Technical Records Specialist

enc.

DEC 03 1996



NEW PROPERTY OWNER NOTICE OF CHANGE OF WATER RIGHT OWNERSHIP

Please print or type
(see instructions on back of page)

DATE OF CLOSING: 5-17-95

LEGAL DESCRIPTION OF PROPERTY: Township 11 S Range 24 E
Section 11, NW 1/4 of NW 1/4 of NW E 1/4, Govt. Lot _____, BM.
Lot _____, Block _____, Subdivision/Townsite _____.
If you have additional legal descriptions, please attach separate sheet.

- ☐ Served Only by a Public Service Water Supply (all water is received from a city or company who maintains water supply system, owns the water right, and bills the customer on a regular basis)
- ☐ Water Right Number(s)
Assigned by IDWR: A 45 - 11410
- ☐ Name and Address of Former Owner/Claimant(s)(Seller): Austin OR Betty Walker
Rt. 1 Box 101 Hillside Acres
Declo ID 83323
- ☐ New Owner/Claimant (Purchaser): Karen Powers
- ☐ New Mailing Address: Rt 1 Box 101 A
Declo Id. 83323
- ☐ New Telephone Number: (208) 654-2839
- ☐ Does the change in ownership result in a splitting of the water right owned/claimed? yes ☒ no
If yes, then describe the portion of the water right that is now owned/claimed by the new owner:

- ☐ Attach proof of ownership, describe proof attached: _____

(proof of ownership must describe either the property conveyed or include the claim number. Proof of ownership is not required if this form is signed by the former owner/claimant.)

- ☐ Signature of New Owner/Claimant(s) Karen Powers Date 5-17-95
- ☐ Signature of Former Owner/Claimant(s): Austin Walker Date 5-17-95

(Signature of former claimant(s) is not required if proof of ownership is attached.)

FOR IDWR USE ONLY:

Initial Review and Data-Entry
Date: _____ By: _____

Further Action Needed:

Further Action Taken
Date: _____ By: _____

Final Review and Data-Entry
Date: _____ By: _____

Claim Numbers of Split, if any:

Original to be mailed to Idaho Department of Water Resources
Copies to Former Owner and New Owner

DEC 03 1996



NEW PROPERTY OWNER NOTICE OF CHANGE OF WATER RIGHT OWNERSHIP

Please print or type
(see instructions on back of page)

DATE OF CLOSING: 5-17-95

LEGAL DESCRIPTION OF PROPERTY: Township 11 S Range 24 E
Section 11, NW 1/4 of NW 1/4 of NW E 1/4, Govt. Lot _____, BM.
Lot _____, Block _____, Subdivision/Townsite _____.
If you have additional legal descriptions, please attach separate sheet.

- ☐ Served Only by a Public Service Water Supply (all water is received from a city or company who maintains water supply system, owns the water right, and bills the customer on a regular basis)
- ☐ Water Right Number(s)
Assigned by IDWR: A 45 - 11410
- ☐ Name and Address of Former Owner/Claimant(s)(Seller): Austin OR Betty Walker
Rt. 1 Box 101 Hillside Acres
Declo ID 83323
- ☐ New Owner/Claimant (Purchaser): Karen Powers
- ☐ New Mailing Address: Rt 1 Box 101 A
Declo ID 83323
- ☐ New Telephone Number: (208) 654-2839
- ☐ Does the change in ownership result in a splitting of the water right owned/claimed? yes X no
If yes, then describe the portion of the water right that is now owned/claimed by the new owner:

- ☐ Attach proof of ownership, describe proof attached: _____

(proof of ownership must describe either the property conveyed or include the claim number. Proof of ownership is not required if this form is signed by the former owner/claimant.)

- ☐ Signature of New Owner/Claimant(s): Karen Powers Date 5-17-95
- ☐ Signature of Former Owner/Claimant(s): Austin Walker Date 5-17-95

(Signature of former claimant(s) is not required if proof of ownership is attached.)

FOR IDWR USE ONLY:

Initial Review and Data-Entry
Date: _____ By: _____

Further Action Needed: _____

Further Action Taken
Date: _____ By: _____

Final Review and Data-Entry
Date: _____ By: _____

Claim Numbers of Split, if any: _____

Original to be mailed to Idaho Department of Water Resources
Copies to Former Owner and New Owner

Indexed

215425

GIFT DEED

FOR AND IN CONSIDERATION of my love and affection for my daughter, Karen Powers, I, the undersigned Grantor, do hereby grant, bargain, sell and convey to KAREN POWERS, a married woman as her sole and separate property, whose current address is Route 1 Box 101A, Declo, Idaho 83323, the Grantee, all of my right, title and interest in the following described real property in Cassia County, Idaho:

That portion of the North Half of the Northwest Quarter (N $\frac{1}{2}$ NW $\frac{1}{4}$) of Section Eleven (11), Township Eleven (11) South, Range Twenty-four (24) East of the Boise Meridian, lying and being north of the Government Third Lift Canal, extending across the said North half of the Northwest Quarter consisting of 10 $\frac{1}{2}$ acres, more or less, and all improvements thereon.

To have and to hold the said premises with their appurtenances to the said Grantee, her heirs and assigns forever.

And the said Grantor does hereby covenant to and with the Grantee that Grantor is the owner in fee of said premises, that said premises are free from all encumbrances and that Grantor will warrant and defend the same from all lawful claims whatsoever.

DATED this 1st day of May, 1991.

Austin Walker
Austin Walker

STATE OF IDAHO)
) ss.
County of Cassia)

On this 25th day of May, in the year of 1991, before me the undersigned notary public in and for said state, personally appeared AUSTIN WALKER, known or identified to me to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed the same.

GIFT DEED
PAGE 1
2410.GD/jm

DEC 03 1996

IN WITNESS WHEREOF, I have hereunto set my hand and
affixed my official seal the day and year first above written.

(SEAL)

Donald L. Chisholm
Notary Public
Residing at Kingsport
My Commission expires Sept 25

215425

Donald Chisholm
SEP 25 1 30 PM '91
FBI 600 AM
K.C. State 1118
Bureau

let 91

copying

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: A45-11410
Date Received: 6/12/1989
Receipt No: S007880
Received By: ALB

AMENDED

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

AMENDED

1. Name: AUSTIN WALKER 208-654-2859
Address: HILLSIDE ACRES
DECLO ID 83323
OR
Name: BETTY WALKER 208-654-2859
Address: HILLSIDE ACRES
DECLO ID 83323

2. Date of Priority: FEB 8, 1949

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
11S	24E	2	NW	NW	NE		CASSIA

5. Description of diverting works:
6"X 80' WELL AND PUMP

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
DOMESTIC	01/01	12/31	0.040		

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

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:
D/1 HOUSE

DEC 03 1996

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
11S	24E	11	NW	NE		DOMEST	

11. Place of use in counties: CASSIA

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

13. Other Water Rights Used:
NONE

14. Remarks:

15. Basis of Claim: BENEFICIAL USE

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 Individuals:

I/We do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s): *Justin Walker* Date: 5/17/98

Date: _____

State of Idaho)
County of Train Falls) SS.

Subscribed and sworn (or affirmed) before me this 17th day

of May 19 95

Mary A. Baldwin
Notary Public

Seal

Residing at *Leading*
My Commission Expires 10/16/1998

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: A45-11410
Date Received: 6/22/1989
Receipt No: S007880
Received By: SC

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: AUSTIN WALKER 208-654-2859
Address: HILLSIDE ACRES
DECLO, ID 83323

OR
Name: BETTY WALKER 208-654-2859
Address: HILLSIDE ACRES
DECLO, ID 83323

2. Date of Priority: FEB 08, 1949

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
11S	24E	2	NW	NW	NE		CASSIA

5. Description of diverting works:
6"X 80' WELL AND PUMP

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
DOMESTIC	01/01	12/31	0.040		

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

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:
D/1 HOUSE

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
11S	24E	2	NW	NE		DOMEST	

11. Place of use in counties: CASSIA

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

13. Other Water Rights Used:
NONE

14. Remarks:

15. Basis of Claim: BENEFICIAL USE

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 Individuals:

I/We do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s): _____ Date: _____
_____ 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

Identification No. A45-11410

Date Received _____

Receipt Number 5007880 500

NOTICE OF CLAIM
TO A
WATER RIGHT

ACQUIRED UNDER STATE LAW

For Domestic and/or Stockwater Purposes

Where Daily Use is less than 13,000 gallons per day.

Filing Fee \$25

Please type or print clearly

1. Name of Claimant (s) Austin or Betty Walker Phone (208) 654-2859

Mailing Address Hill side Acres Declo Idaho Zip 83323

2. Date of Priority (Only one per claim) Feb 8 1949 Month/Day/Year

3. Source of water supply (Check one) (☒ Groundwater or Other () (a) _____

Name or kind of source

which is tributary to (b) _____

4. Location of point of diversion is: Township 119 Range 24 E

Section 2, NW 1/4 of NW 1/4 of NE 1/4, Govt. Lot _____, BM.,

County of CASSIA

Additional points of diversion if any: _____

5. Description of existing diversion works (Ditches, Wells, Pumps, Pipelines, Headgate 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. 6" x 80' with pump

6. Water is claimed for the following: (limited to Domestic and/or Stockwater only. See Instructions.)

For Domestic purposes from 1-1 to 12-31 amount .040 (cfs)
(Both dates are inclusive)

For _____ purposes from _____ to _____ amount _____

7. Total quantity claimed .040 (cfs)

8. Total consumptive use claimed is de minimus

9. Non-irrigation uses. Describe fully. (Domestic: give number of households served if single ownership; Stockwater: Type and Number of livestock) Domestic - 1 home

MICROFILMED

MAR 9 1983

RECEIVED
JUN 8 1989
Department of Water Resources
Southern Region Office

10. Place of use is: Township: 11 S Range 24 E

Section 2, NW 1/4 of NE 1/4, Govt. Lot _____, B.M.,

County of CASSIA for (Circle One) Domestic Stock Domestic and Stock

Additional places of use, if any _____

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

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. None ☒
NONE

14. Remarks: _____

15. Basis of Claim (Circle One) Beneficial Use Posted Notice License Permit Decree

Court _____ Decree Date _____ Plaintiff vs Defendant _____

If applicable provide IDWR Water Right Number _____

16. Signature (s) _____

Number of Attachments _____

By signing I/We acknowledge reading the notice on the back of this claim form. I/We wish to receive for a small annual fee monthly copies of the docket sheet.
YES _____ NO _____

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

Signature of Claimant (s) Austin Walker Date 6/7/89

Date _____

For Organizations: I do solemnly swear or affirm that I am _____

of _____, that I have signed the foregoing

document in the space below as _____ of _____

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

Signature of Authorized Agent _____ Date _____

Title and Organization _____

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

Subscribed and sworn (or affirmed) before me this 7th day of 6th month 19 89

SEAL

Notary Public Sheila W. Hubbard

Residing at Cassia Co.

My Commission Expires 2-94

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant

MICROFILMED
MAR 09 1993



State of Idaho

DEPARTMENT OF WATER RESOURCES

Southern Region, 2148 4th Ave. East, Twin Falls, Idaho 83301 (208) 734-3578

CECIL D. ANDRUS
Governor

R. KEITH HIGGINSON
Director

. July 3, 1989

R-43-11410

. Austin Walker
. Hillside Acres
. Declo, Idaho 83323

Dear Claimant(s):

Please find enclosed your receipt and a copy of a computer generated claim based on the information from your original claim(s) which has been entered in our computer records.

Please review the computer generated claim for accuracy. In a few instances clarifications may have been added by the Department at the time of data entry. If you have any questions or objections regarding the computer record of your claim(s), please contact this office.

Yours truly,

A handwritten signature in black ink, appearing to read 'Judy Givens', written over a horizontal line.

Judy Givens
Adjudication Secretary

/jg

Enclosures:

MICROFILMED
MAR 09 1993