

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: A37-07710

Date Received: 1/23/1989

Receipt No: C004263 *lat*

Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: GILBERT L. FARR 208-788-4980
Address: P.O. BOX 230
BELLEVUE, ID 83313

AND/OR

Name: JANET L. FARR 208-788-4980
Address: P.O. BOX 230
BELLEVUE, ID 83313

2. Date of Priority: APR 20, 1978

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
02N	19E	31	SW	NE			BLAINE

5. Description of diverting works:
WELL, 164' DEEP, 8" CASING, 3 HP PUMP

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
IRRIGATION	04/01	11/01	0.130		
DOMESTIC	01/01	12/31	0.040		

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

8. Total consumptive use is 15.6 Acre Feet Per Annum.

9. Non-irrigation uses:
D/1 HOUSE

A37-07710

Page 1

Date: 02/13/89

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FEB 24 1993

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
02N	19E	31	SW	NE		IRR	6.0
			SW	NE		DOMEST	

Section Acres 6.0

Total Acres 6.0

11. Place of use in counties: BLAINE

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

13. Other Water Rights Used:
NONE

14. Remarks:
AC. IRR. = 6.25.

15. Basis of Claim: PERMIT

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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

Ident. Number

A37-07710

Date Received

1-23-89

Receipt Number

C004263

RECEIVED

OCT 5 1988

Department of Water Resources
Southern Region Office

NOTICE OF CLAIM
TO A
WATER RIGHT
ACQUIRED UNDER STATE LAW

Please type or print clearly

1. Name of Claimant (s) GILBERT L and/or JANET L FARR Phone (208) 788-4980Mailing Address PO Box 230 BELLEVUE, ID Zip 833132. Date of Priority (Only one (1) per claim) 4/20/783. Source of water supply (a) GROUND WATER
which is tributary to (b) _____4. a. Location of existing point of diversion is: Township 2N Range 19E Section 31,
_____ 1/4 of SW 1/4 of NE 1/4, Govt. Lot, _____ B.M., County of BLAINE

Additional points of diversion if any: _____

b. If instream flow, beginning point of claimed instream flow is:

Township _____ Range _____ Section _____, _____ 1/4 of _____ 1/4 of _____ 1/4,

Govt. Lot _____ B.M., County of _____

ending point is: Township _____ Range _____ Section _____, _____ 1/4 of _____ 1/4 of _____

_____ 1/4, Govt. Lot _____ B.M., County of _____

5. Description of existing diversion works (Dams, Reservoirs, Ditches, Wells, Pumps, Pipelines, Headgates, 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. Well - 164', 8" casing3HP PUMP

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6. Water is claimed for the following purposes:

(both dates are inclusive)

(cfs)

(acre feet)

For DOMESTIC purposes from 1/1 to 12/31 amount .04 or _____

For IRRIGATION purposes from 4/1 to 11/1 amount .13 or _____

For _____ purposes from _____ to _____ amount _____ or _____

For _____ purposes from _____ to _____ amount _____ or _____

7. Total quantity claimed (a) .17 (cfs) and/or (b) _____ (acre feet)

8. Total consumptive use claimed is _____ acre feet per annum.

9. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock Etc.) one domestic household

10. Description of place of use:

a. If water is for irrigation, indicate acreage in each subdivision in the tabulation below.

b. If water is used for other purposes, place a symbol of use (example: D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

TWP	RNG	SEC	NE 1/4				NW 1/4				SW 1/4				SE 1/4				Totals
			NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW1/4	SW1/4	SE1/4	
<u>2N</u>	<u>9E</u>	<u>31</u>			<u>D</u>														
					<u>6.25</u>														<u>6.25</u>

Total number of acres irrigated 6.25

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

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. _____ or None (☒)

14. Remarks:

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FEB 24 1993

Last Name FARR Ident No. _____

Copies: White -State, Yellow-Claimant

Section 31, T2N, R19E, B.M

SW 1/4, NE 1/4

30		29		28		27
31		32		33		34

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FEB 24 1993

Ident No. _____

Copies: White-State, Yellow-Claimant

15. Basis of Claim (check one) Beneficial Use _____ Posted Notice _____ License X Permit _____
Decree _____
If applicable provide IDWR Water Right Number 437-07710
Court _____ Case Number _____ Decree Date _____
Plaintiff vs Defendant _____

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 X wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments _____

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

Signature of Claimant (s)

Robert L. Farr

Date

10/4/88

Janet L. Farr

Date

10/4/88

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

Title

of _____

Organization

, that I have signed the foregoing

document in the space below as _____

Title

of _____

Organization

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

Signature of Authorized Agent _____

Title and Organization _____

Date _____

State of Idaho/or _____)

County of Blaine)

SS.

Subscribed and sworn (or affirmed) before me this 4 day of 10 19 88

SEAL

Notary Public

Janet Key

Residing at

Hailey, Idaho

My Commission Expires

10-4-94

Please Print Name

17. Notice of Appearance:

Notice is hereby given that I, _____ will be acting as attorney at law on behalf of the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above should be mailed to me at the address listed below.

Signature _____

Address _____

Date _____

Last Name

FARR

Ident. Number _____

MICROFILMED
FEB 24 1993

Copies White-State, Yellow-Claimant



State of Idaho

DEPARTMENT OF WATER RESOURCES

322 East Front Street, P.O. Box 83720, Boise, ID 83720-0098

Phone: (208) 287-4800 Fax: (208) 287-6700 Web Site: www.idwr.idaho.gov

JAMES E. RISCH
Governor

KARL J. DREHER
Director

November 29, 2006

GARY AND JUDY GUTCHES
PO BOX 685
BELLEVUE ID 83313

RE: Snake River Basin Adjudication (SRBA)
Notice of Claim to a Water Right #37-7710

Dear Claimants:

The Postal Service advised us your address has changed to the above address.

Although we have reached you at the address above, we need your written confirmation this is your correct mailing address before we can change our records.

Please sign your name at the bottom of this letter and return it to this office. Make corrections to your name and address if necessary before returning this letter, **list any other water rights you have**, and return this letter by December 12, 2006. Thank you for your help.

If your mail delivery address changes in any form, please contact us in writing so we can update our records. Be sure to list your water right numbers.

If there has been a change in ownership of the property connected with the water rights referenced above, please call this office toll-free at 1/800-451-4129 to obtain a form to make this required change to the water right records.

Sincerely,

Sally Sherman
Sally Sherman
Technical Records Specialist
Adjudication Bureau

SS:region

#####

The address is correct as shown above or as otherwise changed.

Water Right Holder's Signature

Telephone No.

SCANNED

APR 11 2007

IDAHO DEPARTMENT OF WATER RESOURCES
PRELIMINARY RECOMMENDATION OF WATER RIGHTS ACQUIRED UNDER STATE LAW

EXPLANATORY MATERIAL: BASIS OF CLAIM - License



Idaho Department of Water Resources

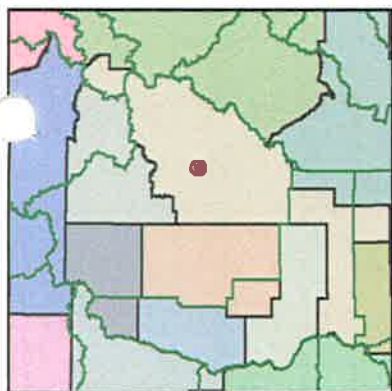
SRBA Recommendation:

37-7710

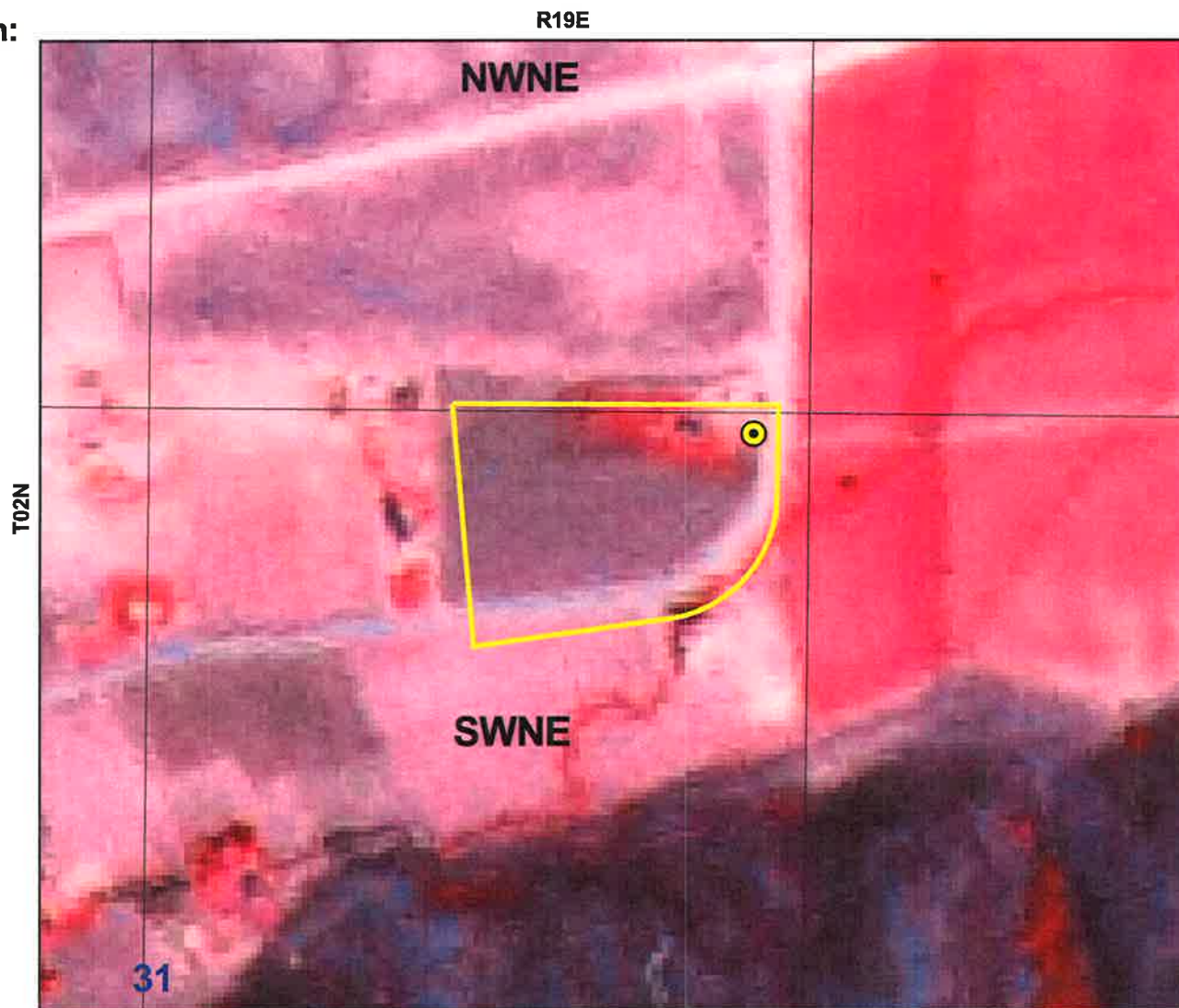
(Irrigation)

Legend

-  Point of Diversion
-  Place of Use
-  Townships
-  PLS Sections
-  Quarter Quarters



Blaine County
IDWR Basin 37



0 0.1 0.2 Miles

Prepared by E. Norques
On Tuesday, November 28, 2006
1987/88 Aerial Photography



Idaho Department of Water Resources

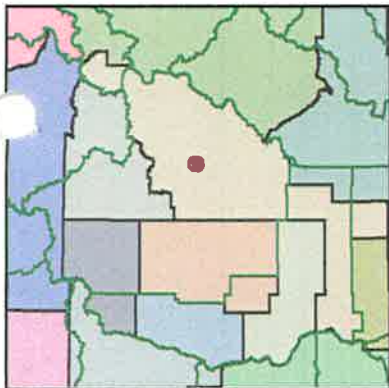
SRBA Recommendation:

37-7710

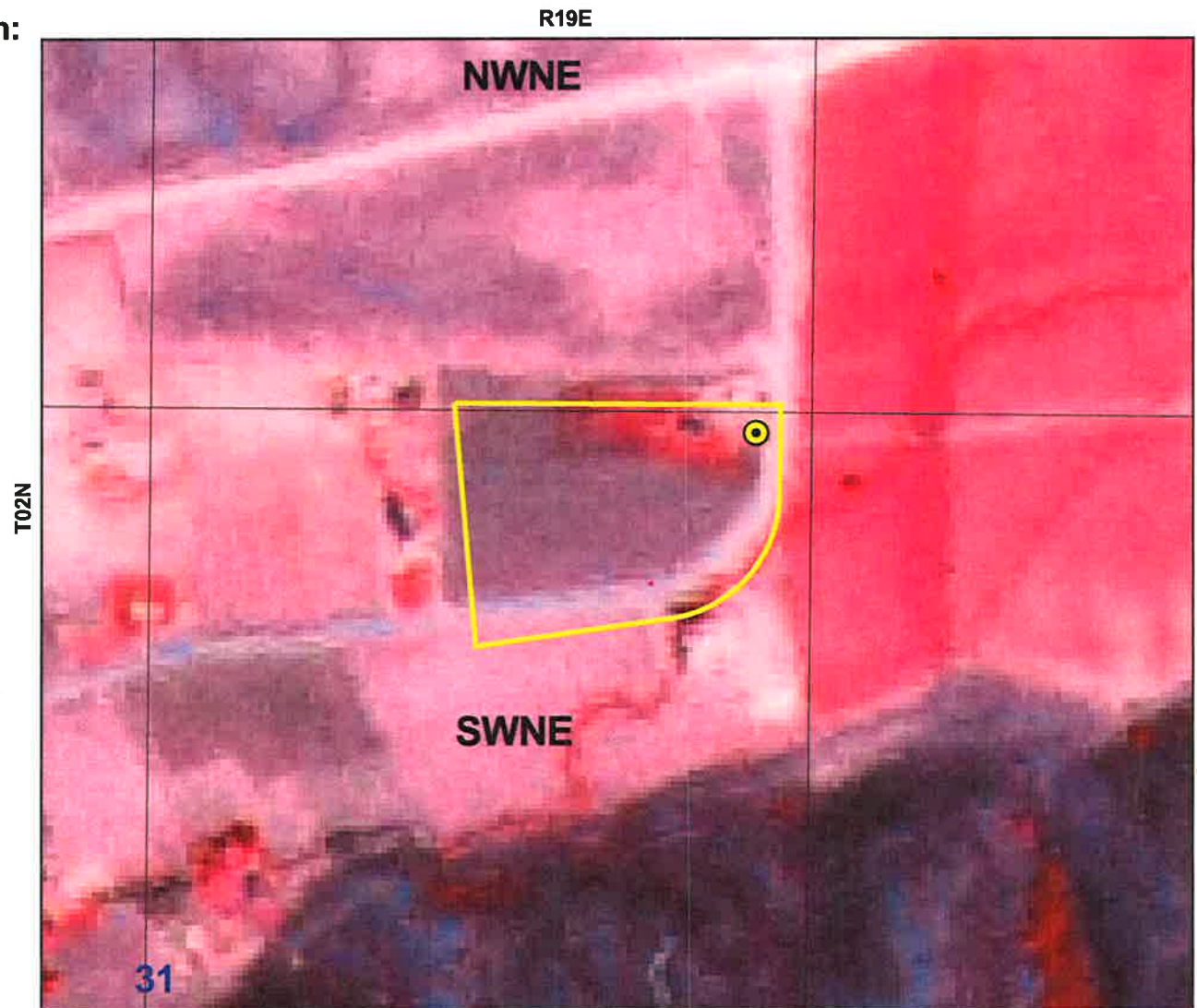
(Irrigation)

Legend

-  Point of Diversion
-  Place of Use
-  Townships
-  PLS Sections
-  Quarter Quarters



Blaine County
IDWR Basin 37



0 0.1 0.2 Miles



Prepared by E. Norques
On Tuesday, November 28, 2006
1987/88 Aerial Photography



State of Idaho

DEPARTMENT OF WATER RESOURCES

322 East Front Street, P.O. Box 83720, Boise, ID 83720-0098

Phone: (208) 287-4800 Fax: (208) 287-6700 Web Site: www.idwr.idaho.gov

RECEIVED

DEC 9 2006

DEPARTMENT OF
WATER RESOURCES

JAMES E. RISCH
Governor

KARL J. DREHER
Director

November 29, 2006

GILBERT AND JANET FARR
329 BAYHORSE RD.
BELLEVUE ID 83313

RE: Snake River Basin Adjudication (SRBA)
Notice of Claim to a Water Right #37-7710

*Revised Modified
12-7-06
-SS*

Dear Claimants:

The Postal Service advised us your address has changed to the above address.

Although we have reached you at the address above, we need your written confirmation this is your correct mailing address before we can change our records.

Please sign your name at the bottom of this letter and return it to this office. Make corrections to your name and address if necessary before returning this letter, **list any other water rights you have**, and return this letter by December 12, 2006. Thank you for your help.

If your mail delivery address changes in any form, please contact us in writing so we can update our records. Be sure to list your water right numbers.

If there has been a change in ownership of the property connected with the water rights referenced above, please call this office toll-free at 1/800-451-4129 to obtain a form to make this required change to the water right records.

Sincerely,

Sally Sherman
Sally Sherman
Technical Records Specialist
Adjudication Bureau

SS:region

#####

329 Bay Horse Rd.

The address is correct as shown above or as otherwise changed.

Gilbert L. Farr
Water Right Holder's Signature

Janet L. Farr

Telephone No.

37-7710

Notice to Mailer of Correction in Address

Addressee's Account Number (All numbers, dates, and letters)

☒ No account number on mail
☐ Account number illegible

Addressee's Name

Gilbert L Farr Janet L Farr

Old Address (Include apartment or suite number)

P.O. Box 230

City, State, and ZIP Code

Bellevue ID 83313

New Address (Include apartment or suite number)

329 Bayhorse

City, State, and ZIP Code

Bellevue ID 83313

This card is furnished ☒ For address correction, as requested (your mailpiece was forwarded).
☐ In place of Form 3579 (see reason for nondelivery below).

The address portion of your mailpiece was not readily detachable. Reason for nondelivery:

☐ Moved, left no address ☐ No such street ☐ No such number
☐ Refused ☐ Attempted, not known ☐ Unclaimed

IDAHO DEPARTMENT OF WATER RESOURCES
WATER RIGHT CLAIMS PROOF READING REPORT01/27/89 00:15:20
Page 1

Water Right Number - 37-07710

Adj. Flag Translation: Standard Water Right Number

Old (D) Number -

+ - - - - Last Name - - - - +

+ - First Name - - +

+ - - - - Address - - - - - +

*** C - CURRENT OWNER ***
FARR

GILBERT L.

1 - P.O. BOX 230

2 -

3 -

City- BELLEVUE

State- ID Zip- 83313

Phone -

1 - P.O. BOX 230

2 -

3 -

City- BELLEVUE

State- ID Zip- 83313

Phone -

FARR

JANET L.

+ - - Priority Date - - +
04/20/1978+ - - - Region - - - +
17+ - - - Stage - - - +
P - PERMIT

+ - - - Status - - - +

+ - - - - Source - - - - - +
GROUNDWATER

+ - - - - Tributary - - - - - +

Twn	Rng	Sec	Tract	Lot	RFlg	County	Point of Diversion	Stream Index (Blank if no Index Code)
02N	19E	31	SW NE			(13) BLAINE		

Code	Description	Period From	Period To	Diversion Rate	Diversion Volume
01 - IRRIGATION		04/01	11/01		
43 - DOMESTIC		01/01	12/31	0.130	0.040

+ - Total Div. Rate - + + - Total Div. Volume - + + - Total Div. Capacity - + + - Total Consumptive Use - + + - KW Usage - +
0.170

Twn	Rng	Sec	Tract	Lot	Acres	Place of Use Code	Description	County
02N	19E	31	SW NE		6.0	01	IRRIGATION	(13) BLAINE

Total Acres: 6.0

+ - - Diversion Means - WELL, PUMP & SPRINKLERS.

+ - - Non-Irrigation Use -

+ - - Other Rights for Same Use -

AC. IRR. = 6.25.

Remarks

FEB 24 1993

MICROFILMED

MICROFILMED
FEB 24 1993



State of Idaho

DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Statehouse Mail, Boise, Idaho 83720 - (208) 334-7900

CECIL D. ANDRUS
GOVERNOR
R. KEITH HIGGINSON
DIRECTOR

. January 13, 1989

. Gilbert L. &/or Janet L. Farr
. P.O. Box 230
. Bellevue, ID 83313

RECEIVED
JAN 23 1989

Department of Water Resources

Dear Claimant:

We are returning your Notice of Claim to a Water Right filed for your property in Blaine County for the reason(s) listed below:

- ☐ Your check # _____ in the amount of \$ _____ is also being returned. Upon completion of the items on the Notice of Claim as requested, please return the filing fee.
- ☐ No filing fees were attached to the Notice of Claim. The filing fee required for this claim is \$ _____.
- ☐ Priority date was excluded from Notice of Claim. This date is when the water was first placed to beneficial use, by yourself or your predecessors, to the best of your knowledge.
- ☐ No signature of claimant. Notice of Claim must be signed on Item #16 by person/persons listed as Claimant on Item #1.
- ☒ No Notary Public for signature. The Notary is required on this document as this is the documentation presented in the judicial system.

Please return the documents to this office at my attention. If you will make the necessary corrections before February 13, 1989, you will not be assessed a late filing fee. Please do not hesitate to contact this office if you have any questions or concerns.

Yours truly,

Glenn Harrison
for Donald V. Shaff
Adjudication Section
Supervisor

DVS;ds
Enclosures

Receipt enclosed

MICROFILMED
FEB 24 1993



State of Idaho
DEPARTMENT OF WATER RESOURCES

1301 North Orchard Street, Statehouse Mail, Boise, Idaho 83720 - (208) 334-7900

CECIL D. ANDRUS
GOVERNOR
R. KEITH HIGGINSON
DIRECTOR

January 13, 1989

Gilbert L. & Janet L. Farr
P.O. Box 230
Bellevue, ID 83313

A 37-07710
C004263
Data entered 2-13-90
Harrington
9-27-90
Donna Smith

Dear Claimant:

We are returning your Notice of Claim to a Water Right filed for your property in Blaine County for the reason(s) listed below:

- ☐ Your check # _____ in the amount of \$ _____ is also being returned. Upon completion of the items on the Notice of Claim as requested, please return the filing fee.
- ☐ No filing fees were attached to the Notice of Claim. The filing fee required for this claim is \$ _____.
- ☐ Priority date was excluded from Notice of Claim. This date is when the water was first placed to beneficial use, by yourself or your predecessors, to the best of your knowledge.
- ☐ No signature of claimant. Notice of Claim must be signed on Item #16 by person/persons listed as Claimant on Item #1.
- ☒ No Notary Public for signature. The Notary is required on this document as this is the documentation presented in the judicial system.

Please return the documents to this office at my attention. If you will make the necessary corrections before February 13, 1989, you will not be assessed a late filing fee. Please do not hesitate to contact this office if you have any questions or concerns.

Yours truly,

Donald V. Shaff
for Donald V. Shaff
Adjudication Section
Supervisor

DVS;ds
Enclosures

Receipt enclosed

MICROFILMED
FEB 24 1993

10/27/1988

SRBA CLAIMS RECEIVING CHECKLIST

CLAIMANT'S NAME Fair CLAIM NT. NO. A37-07710
DATE RECEIVED 10-5-88 CK # 0004263 AMOUNT \$

1. Is the name and address complete with zip code? YES ☒ NO ☐
2. Is a priority date entered? YES ☒ NO ☐

Is the water use exempt from the Permit requirements, or if it is not exempt, has a Permit been approved or a License issued?
A Permit is required: (1) for groundwater developed after March 25, 1963 (except single family domestic and stockwater wells using less than 13,000 gpd), or (2) for surface water developed after May 20, 1971 (except for instream stockwater). USE CARE IF CLAIM IS RETURNED. REFER TO ADJUDICATION MEMOS # 1 (ADJ. CLAIMS/APPLICATIONS) AND # 9 (REJECTION OF CLAIMS). EXPLAIN IN COMMENTS.

3. (a) Is a source entered? YES ☒ NO ☐
(b) Is a tributary to entered? (if required) N/A ☒
4. Is the legal description of the p.d. sufficient? YES ☒ NO ☐
5. Is there a description of the diverting works? YES ☒ NO ☐
6. Are the water uses appropriate for the form? The short form is limited to domestic and stockwater uses with direct diversion. All claims that include storage or instream stockwater must use long form. YES ☒ NO ☐
Is the period of use included? YES ☒ NO ☐
Is a quantity claimed for each use? YES ☒ NO ☐
7. Is a total quantity claimed entered? YES ☒ NO ☐
8. If required is a consumptive use entered? N/A ☒
Is the consumptive use correct? N/A ☒
9. Are the non-irrigation uses listed properly? If this claim is on the short form, and more than one domestic use is listed, single ownership must be stated. If not under single ownership, see Adjudication Memo # 4. N/A ☒
10. Is (are) the place(s) of use and purpose(s) indicated? YES ☒ NO ☐
11. Is (are) the county(ies) entered? YES ☒ NO ☐
12. Is the ownership of p.u. checked? YES ☒ NO ☐
13. Are other water rights-listed or "none" indicated? YES ☒ NO ☐
14. If required, are remarks correct? (If the claimant does not own the place of use, authority for filing the claim must be explained in the remarks.) N/A ☒
15. Is the basis of the claim indicated? YES ☒ NO ☐
16. Is the claim signed by the claimant, and is the signature appropriate? (If an individual is the claimant, has that individual signed the claim, or if an organization is the claimant, is the organization signature block complete?) YES ☒ NO ☐
Has the claim been signed, sealed, and dated by a notary? YES ☒ NO ☐
Was this claim filed on time, or was an extension granted? YES ☒ NO ☐
Is the fee enclosed correct? Exempt ☒
If this claim is based on an existing water right, has the identification number been entered? N/A ☒
Should this claim be receipted and data entered? YES ☒ NO ☐

Claim checked by MICROFILMED

Comments: Return for notary - send receipt. FEB 24 1993

1/23/1988

SRBA CLAIMS RECEIVING CHECKLIST "2"

CLAIMANT'S NAME

Farr

CLAIM IDENT. NO.

A37-07710

DATE RECEIVED

1/23/89

CK #

C004263

AMOUNT \$

YES

NO

Required Info?

1. Is the name and address complete with zip code? ☒ YES ☐ NO ☐ *
2. Is a priority date entered?
Is the priority date acceptable in view of mandatory filing dates?
See Adjudication Memos #1 and #4 to determine if a Permit is required. ☒ YES ☐ NO ☐ *
3. (a) Is a source entered? ☒ YES ☐ NO ☐ *
- (b) Is a tributary to entered? (if required) ☐ YES ☒ NO ☐ *
4. Is the legal description of the p.d. sufficient? ☒ YES ☐ NO ☐ *
5. Is there a description of the diverting works? ☒ YES ☐ NO ☐ *
6. Are the water uses appropriate for the form? The short form is limited to domestic and stockwater uses with direct diversion. All claims that include storage or instream stockwater must use long form. ☒ YES ☐ NO ☐ *
- Is the period of use included? ☒ YES ☐ NO ☐ *
- Is a quantity claimed for each use? ☒ YES ☐ NO ☐ *
7. Is a total quantity claimed entered? ☒ YES ☐ NO ☐ *
8. If required is a consumptive use entered? ☐ YES ☒ NO ☐ *
- Is the consumptive use correct? ☐ YES ☒ NO ☐ *
9. Are the non-irrigation uses listed properly? If this claim is on the short form, and more than one domestic use is listed, single ownership must be stated. If not under single ownership, see Adjudication Memo # 4. ☐ YES ☒ NO ☐ *
10. Is (are) the place(s) of use and purpose(s) indicated? ☒ YES ☐ NO ☐ *
11. Is (are) the county(ies) entered? ☒ YES ☐ NO ☐ *
12. Is the ownership of p.u. checked? ☒ YES ☐ NO ☐ *
13. Are other water rights listed or "none" indicated? ☒ YES ☐ NO ☐ *
14. If required, are remarks correct? (If the claimant does not own the place of use, authority for filing the claim must be explained in the remarks.) ☐ YES ☒ NO ☐ *
15. Is the basis of the claim indicated? ☒ YES ☐ NO ☐ *
16. If the claimant requested a monthly docket sheet, is payment enclosed? (If yes, describe payment status in "Comments" below.) ☐ YES ☒ NO ☐ *
17. Is the claim signed by the claimant, and is the signature appropriate? Organizations must complete the organization block. ☒ YES ☐ NO ☐ *
18. Has the claim been signed, sealed, and dated by a notary? ☒ YES ☐ NO ☐ *
19. Was this claim filed on time, or was an extension granted? ☒ YES ☐ NO ☐ *
20. Is the fee enclosed correct? ☐ YES ☒ NO ☐ *
21. If this claim is based on an existing water right, has the identification number been entered? ☐ YES ☒ NO ☐ *
22. Should this claim be receipted and data entered? ☒ YES ☐ NO ☐ *

Claim checked by:

rat

Date:

Claim must be returned to claimant:

(Yes) (No)

Claimant must be sent a copy of amended claim for approval:

(Yes) (No)

Receipt Prepared by:

Claim data entered by:

Sent to claimant by:

Date:

Date: 2/13/89

Date:

Checked by:

rat

Date: 2/13/89

Comments:

FEB 24 1993

SD-183
INQUIRY

IDA DEPARTMENT OF WATER RESOURCES
ADJUDICATION AUDIT INFORMATION SCREEN

DATE: 09/27/90
TIME: 10:36:34

WATER RIGHT NUMBER: A37-07710

FIRST PAGE

DATE-STAMP: 890213

USER-ID: HARRINGT

(GOLD4=PREV SCREEN) (GOLD6=END OF DATA)
(GOLD5=NEXT SCREEN)

(ENTER=EXIT)
(GOLD8=CANCEL)

MICROFILMED
FEB 24 1995