

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECEIVED

JUL 17 2017

DEPT OF WATER RESOURCES
SOUTHERN REGION

Notice of Change in Water Right Ownership

1. List the numbers of all water rights and/or adjudication claim records to be changed. If you only acquired a portion of the water right or adjudication claim, check "Yes" in the "Split?" column. If the water right is leased to the Water Supply Bank, check "Yes". If you are not sure if the water right is leased to the Water Supply Bank, see #6 of the instructions.

Water Right/Claim No.	Split?	Leased to Water Supply Bank?	Water Right/Claim No.	Split?	Leased to Water Supply Bank?
47-17412	Yes ☐	Yes ☐		Yes ☐	Yes ☐
47-17421	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐

2. Previous Owner's Name: Robert &/or Sally Baugh
Name of current water right holder/claimant
3. New Owner(s)/Claimant(s): Sally K Hamilton
New owner(s) as listed on the conveyance document Name connector ☐ and ☐ or ☐ and/or
- | | | | |
|------------------------|------------------------------|--------------|--------------|
| <u>PO Box 484</u> | <u>Buhl</u> | <u>ID</u> | <u>83316</u> |
| <u>Mailing address</u> | <u>City</u> | <u>State</u> | <u>ZIP</u> |
| <u>731-2964</u> | <u>sallykbaugh@gmail.com</u> | | |
| <u>Telephone</u> | <u>Email</u> | | |
4. If the water rights and/or adjudication claims were split, how did the division occur?
☐ The water rights or claims were divided as specifically identified in a deed, contract, or other conveyance document.
☐ The water rights or claims were divided proportionately based on the portion of their place(s) of use acquired by the new owner.
5. Date you acquired the water rights and/or claims listed above: _____
6. If the water right is leased to the Water Supply Bank changing ownership of a water right will reassign to the new owner any Water Supply Bank leases associated with the water right. Payment of revenue generated from any rental of a leased water right requires a completed IRS Form W-9 for payment to be issued to an owner. A new owner for a water right under lease shall supply a W-9. Water rights with multiple owners must specify a designated lessor, using a completed Lessor Designation form. Beginning in the calendar year following an acknowledged change in water right ownership, compensation for any rental will go to the new owner(s).
7. This form must be signed and submitted with the following **REQUIRED** items:
- ☐ A copy of the conveyance document – warranty deed, quitclaim deed, court decree, contract of sale, etc. The conveyance document must include a legal description of the property or description of the water right(s) if no land is conveyed.
 - ☐ Plat map, survey map or aerial photograph which clearly shows the place of use and point of diversion for each water right and/or claim listed above (if necessary to clarify division of water rights or complex property descriptions).
 - ☐ Filing fee (see instructions for further explanation):
 - ☐ \$25 per *undivided* water right.
 - ☐ \$100 per *split* water right.
 - ☐ No fee is required for pending adjudication claims.
 - ☐ If water right(s) are leased to the Water Supply Bank AND there are multiple owners, a Lessor Designation form is required.
 - ☐ If water right(s) are leased to the Water Supply Bank, the individual owner or designated lessor must complete, sign and submit an IRS Form W-9.

SUPPORT DATA

IN FILE # 47-17412

8. Signature: Sally K Hamilton Title, if applicable: _____ Date: _____
 Signature of new owner/claimant
- Signature: _____ Title, if applicable: _____ Date: _____
 Signature of new owner/claimant

For IDWR Office Use Only:

Received by DM Date 7-17-2017 Receipt No. SO36227 Receipt Amt. \$25-

Active in the Water Supply Bank? Yes ☐ No ☐ If yes, forward to the State Office for processing W-9 received? Yes ☐ No ☐

Name on W-9 _____ Approved by _____ Processed by _____ Date _____

STATE OF IDAHO

CERTIFICATION OF VITAL RECORD

STATE OF IDAHO

IDAHO DEPARTMENT OF HEALTH AND WELFARE

BUREAU OF VITAL RECORDS AND HEALTH STATISTICS

DATE FILED BY STATE REGISTRAR:

State of Idaho
CERTIFICATE OF DEATH

STATE FILE NO. 2014-03348

04/14/2014

ONLY A COPY OF THIS CERTIFICATE IS TO BE PLACED IN THE DEPARTMENT OF HEALTH AND WELFARE BUREAU OF VITAL RECORDS AND HEALTH STATISTICS. IT IS TO BE KEPT IN THE BUREAU OF VITAL RECORDS AND HEALTH STATISTICS FOR 100 YEARS.

Local Reg. No.

TYPE OR PRINT IN PERMANENT PLACE DO NOT USE FELT TIP PEN FOR INSTRUCTIONS SEE HANDBOOKS REGISTERED DISPOSITION PLACE OF DEATH DATE OF DEATH LOCAL OF DEATH IF DEATH WAS DUE TO OTHER THAN NATURAL CAUSE, THE DECEASED MUST COMPLETE AND SIGN THIS CERTIFICATE REGISTRAR'S SIGNATURE	DECEDENT 1. DECEDENT'S LEGAL NAME (Include AKA's if any) (First, Middle, Last, Suffix) ROBERT BRANDON BAUGH 2. SEX MALE 3. SOCIAL SECURITY NUMBER [REDACTED] 4a. AGE Last Birthday 54 (Years) Months Days Hours Minutes 4b. DATE OF BIRTH (Mo/Day/Yr) 07/18/1957 5. BIRTHPLACE (City and State, Territory, or Foreign Country) GOODING, IDAHO 6. RESIDENCY - STATE OR FOREIGN COUNTRY IDAHO 7a. COUNTY TWIN FALLS 7b. CITY OR TOWN BUHL 7c. STREET AND NUMBER 1368 E 4400 N 7d. APT. NO. 83316 7e. ZIP CODE 83316 7f. SPOUSE CITY LEWIS 8. MARITAL STATUS AT TIME OF DEATH ☒ Married ☐ Married, Not Separated ☐ Widowed ☐ Divorced ☐ Never Married ☐ Unknown 9. SURVIVING SPOUSE'S NAME (If widowed, give maiden name) SALLY SHEGRUD 10. EVER IN U.S. ARMED FORCES? ☐ Yes ☒ No 11a. FATHER'S NAME (First, Middle, Last, Suffix) HARRY BAUGH 11b. BIRTHPLACE (State, Territory, or Foreign Country) UNKNOWN 11c. MOTHER'S MAIDEN NAME (First, Middle, Last, Suffix) JEAN MCKAY 11d. BIRTHPLACE (State, Territory, or Foreign Country) UNKNOWN 12a. INFORMANT'S NAME (Type or print) SALLY BAUGH 12b. RELATIONSHIP TO DECEDENT SPOUSE 12c. MAILING ADDRESS (Street and Number, City, State, Zip Code) PO BOX 484 BUHL, ID 83316 13. METHOD OF DISPOSITION ☐ Burial ☐ Donation ☐ Removal from state ☐ Other (Specify) 13a. PLACE OF DISPOSITION (Name and address of cemetery, crematorium, funeral home, etc.) ROSENBAUM FUNERAL HOME AND CREMATORY 2828 ADDISON AVENUE EAST TWIN FALLS, IDAHO 83301 13b. NAME AND COMPLETE ADDRESS OF FUNERAL FACILITY ROSENBAUM FUNERAL HOME AND CREMATORY 2828 ADDISON AVE EAST TWIN FALLS, IDAHO 83301 14. SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH ELECTRONICALLY FILED: DUSTIN GODFREY 14a. LICENSE NUMBER (If licensed) M1175 14b. WAS CORONER CONTACTED DUE TO CAUSE OF DEATH? ☒ Yes ☐ No 15. PLACE OF DEATH (15-22) ☒ Hospital ☐ Emergency Room ☐ Home ☐ Nursing Home/Long term care facility ☐ Decedent's home ☐ Other (Specify) 16. FACILITY NAME (If facility, give street and number) ST. ALPHONSE REGIONAL MEDICAL CENTER 17. CITY, TOWN, OR LOCATION OF DEATH AND ZIP CODE BOISE, ID 83708 18. COUNTY OF DEATH ADA 19. DATE OF DEATH (Mo/Day/Yr) (Spell month) April 3, 2014 20. TIME OF DEATH (24hr) 01:52 21. DATE PROCLAIMED DEAD (Mo/Day/Yr) (Spell month) April 3, 2014 22. TIME PROCLAIMED DEAD (24hr) 01:52 PART I. Enter the cause of death - immediate, intermediate, or complications - that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without giving the etiology. DO NOT ABBREVIATE. Enter only one cause on a line. IMMEDIATE CAUSE (From disease or condition resulting in death) a. BLUNT FORCE TRAUMA OF THE HEAD DUE TO (or as a consequence of) b. FALL FROM A LADDER DUE TO (or as a consequence of) c. [REDACTED] DUE TO (or as a consequence of) Sequitely list conditions, if any, leading to the cause listed on line a. Enter the UNDERLYING CAUSE (Last disease or injury that preceded the event resulting in death) PART II. Enter other significant conditions contributing to death but not resulting in the underlying cause given in Part I 23. DID TOBACCO USE CONTRIBUTE TO DEATH? ☐ Yes ☐ Probably ☒ No ☐ Unknown 24. IF FEMALE (Age at 14-44) ☐ Not pregnant within past year ☐ Not pregnant, but pregnant 43 days to 1 year before death ☐ Pregnant at time of death ☐ Not pregnant, but pregnant within 42 days of death ☐ Unknown if pregnant within the past year 25. WAS AN AUTOPSY PERFORMED? ☒ Yes ☐ No 26. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? ☒ Yes ☐ No 27. MANNER OF DEATH ☐ Homicide ☐ Suicide ☐ Accidental ☐ Pending Investigation ☐ Could not be determined 28. DATE OF INJURY (Mo/Day/Yr) (Spell month) April 2, 2014 29. TIME OF INJURY (24hr) Estimated 18:00 - 18:30 30. PLACE OF INJURY (Decedent's home, farm, street, construction site, nursing home, restaurant, forest, etc.) BUILDING 31. INJURY AT WORK? ☒ Yes ☐ No 32. LOCATION OF INJURY State IDAHO City/Town or County BUHL, TW. FALLS Zip Code 83316 Street and Number or Location 1400 E 4300 N Apartment Number 33. DESCRIBE HOW INJURY OCCURRED. IF TRANSPORTATION INJURY, STATE THE TYPE(S) OF VEHICLE(S) INVOLVED (Automobile, pickup, motorcycle, ATV, bicycle, etc.) FELL OFF A LADDER AND HIT HIS HEAD 34. TRANSPORTATION - Was decedent? ☒ Driver/Operator ☐ Passenger ☐ Pedestrian ☐ Other (Specify) 35. WHAT SAFETY DEVICES DID DECEDENT USE/EMPLOY? ☐ Seat belt ☐ Child safety seat ☐ Helmet ☐ Air bag ☐ None ☐ Unknown 36. CERTIFIER (Check all that apply, based on official capacity for this certification) ☐ Physician ☐ Physician Assistant ☐ Advanced Practice Professional Nurse - To the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) stated (whether stated or not) 37. CORONER ☐ On the basis of examination and/or investigation ☐ On the basis of opinion, death occurred at the time, date, and place, and due to the cause(s) stated 38. SIGNATURE AND TITLE OF CERTIFIER ELECTRONICALLY SIGNED: GLEN R. GROBEN, M.D. 39. NAME, ADDRESS, AND ZIP CODE OF CERTIFIER (Type or print) GLEN R. GROBEN, 6550 MORRIS HILL ROAD BOISE, ID 83708 40. REGISTRAR'S SIGNATURE James B. Galtte 41. DATE SIGNED 4 / 14 / 2014
--	---

This is a true and correct reproduction of the document officially registered and placed on file with the IDAHO BUREAU OF VITAL RECORDS AND HEALTH STATISTICS.

DATE ISSUED: **APR 14 2014**

This copy not valid unless prepared on engraved border displaying state seal and signature of the Registrar

JAMES B. AYDELLOTTE
STATE REGISTRAR

PRNCO-0001-0012

ANY ALTERATION OR REUSE VOIDS THIS CERTIFICATE

John S. Ritchie.
COLEMAN, RITCHIE & CLUFF
Attorneys at Law
156 2nd Avenue West
P.O. Box 525
Twin Falls, ID 83303-0525
Telephone: 208-734-1224
Fax: 208-734-3983
Idaho State Bar No. 1790

TWIN FALLS COUNTY
RECORDED FOR:
COLEMAN, RITCHIE & CLUFF
09:09:16 AM 08-14-2016
2016009815
NO. PAGES 9 FEE: \$34.00
KRISTINA GLASCOCK
COUNTY CLERK
DEPUTY: JWD
Electronically Recorded by Simplifile

Attorney for Personal Representative

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS
MAGISTRATE DIVISION

IN THE MATTER OF THE ESTATE OF	)	Case No. CV42-16-1697
	)	
ROBERT B. BAUGH, aka BRAD BAUGH,	)	PERSONAL REPRESENTATIVE'S
	)	DEED
Deceased.	)	
_____	)	

SARA K. BAUGH, also known as SALLY K. BAUGH, Personal Representative of the Estate of Robert B. Baugh, aka Brad Baugh, deceased, does hereby GRANT, SELL and CONVEY to SARA K. BAUGH, also known as SALLY K. BAUGH, a single woman, whose address is PO Box 484, Buhl, Idaho, 83316, all of the interest of Robert B. Baugh, aka Brad Baugh, deceased, in and to the following parcels of real property:

Parcel No. 1 - RP09S14E230750A - consisting of 12.988 acres. See attached EXHIBIT "A".

superly split

*Water Right
47-17421*

PERSONAL REPRESENTATIVE'S DEED - 1

Wot Right
47-17412-

Parcel No. 2 - RP09S14E230602A - consisting of 5.0 acres. See attached *Homeplace*
EXHIBIT "B".

Parcel No. 3 - RP0B381004004GA - consisting of 1.006 acres. See *WOT ENQUIT*
attached EXHIBIT "C".

Parcel No. 4 - RP09S14E148435A - consisting of .952 acres. See *Church of
Corrals N of House*
attached EXHIBIT "D".

Parcel No. 5 - RP09S14E231050A - consisting of 1.289 acres. See *Lot By 7.9 ac*
attached EXHIBIT "E".

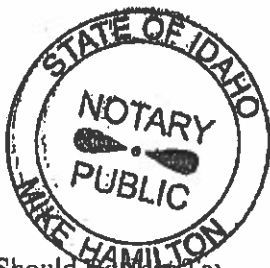
DATED this 9th day of June, 2016.

Sara Kay Baugh
SARA K. BAUGH, also known as
SALLY K. BAUGH
Personal Representative of the
Estate of Robert B. Baugh, aka Brad Baugh

STATE OF IDAHO)
) s.s.
County of Twin Falls)

On this 9th day of June, 2016, before me, the undersigned, a Notary Public in and for said County and State, personally appeared SARA K. BAUGH, also known as SALLY K. BAUGH, known to me to be the person who executed the foregoing instrument and acknowledged to me that he executed the same as Personal Representative of the Estate of Robert B. Baugh, aka Brad Baugh.

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



Tax Notices Should Be Sent To:
Sally K. Baugh
PO Box 484
Buhl, ID 83316

Mike Hamilton
NOTARY PUBLIC
Residing at Buhl
My Commission Expires 9-26-21

Part of the NE~~1~~NE~~4~~ and part of the SE~~1~~NE~~4~~ of Section 23 of Township 9 South, Range 14 East of the Boise Meridian, Twin Falls County, State of Idaho.

Beginning at the Northeast section corner of Section 23 of T.9 S., R.14 E., B.M., said corner marked by a concrete monument with brass tablet; Thence North 85 degrees 44 minutes 59 seconds West (N 86°32'23"W rec.) along the north line of the NE~~1~~NE~~4~~ for a distance of 1147.63 feet to a $\frac{3}{8}$ " rebar which shall be the Point of Beginning;

THENCE South 07 degrees 26 minutes 53 seconds East for a distance of 379.99 feet to a $\frac{3}{8}$ " rebar;

THENCE South 49 degrees 15 minutes 47 seconds East for a distance of 192.46 feet to a $\frac{3}{8}$ " rebar;

THENCE South 82 degrees 09 minutes 25 seconds East for a distance of 75.79 feet to a $\frac{3}{8}$ " rebar;

THENCE South 06 degrees 54 minutes 49 seconds East for a distance of 195.06 feet to a $\frac{3}{8}$ " rebar;

THENCE South 45 degrees 00 minutes 15 seconds East for a distance of 187.91 feet to a $\frac{3}{8}$ " rebar;

THENCE South 25 degrees 10 minutes 57 seconds East for a distance of 508.46 feet to a $\frac{3}{8}$ " rebar;

THENCE South 59 degrees 14 minutes 03 seconds West (S 58° 25'40"W rec.) for a distance of 214.08 feet to a $\frac{1}{2}$ " rebar;

THENCE South 59 degrees 14 minutes 03 seconds West (S 58° 25'40"W rec.) for a distance of 29.47 feet to the centerline of the Melon Valley Road;

(CON' T)



P-1

THENCE on the following courses and distances along the centerline of the Melon Valley Road:

North 62 degrees 50 minutes 22 seconds West (N 63° 32'27"W rec.) for a distance of 61.47 feet (61.64' rec.) to a p.k. nail;

North 65 degrees 24 minutes 25 seconds West (N 66° 09'08"W rec.) for a distance of 87.91 feet to the south line of the NE~~1~~NE~~1~~;

North 64 degrees 37 minutes 07 seconds West for a distance of 124.78 feet;

North 64 degrees 14 minutes 43 seconds West for a distance of 82.39 feet;

North 58 degrees 34 minutes 06 seconds West for a distance of 72.60 feet;

North 50 degrees 09 minutes 09 seconds West for a distance of 69.44 feet;

North 42 degrees 37 minutes 49 seconds West for a distance of 83.73 feet;

North 35 degrees 18 minutes 50 seconds West for a distance of 71.84 feet;

North 27 degrees 44 minutes 06 seconds West for a distance of 89.20 feet;

North 18 degrees 12 minutes 07 seconds West for a distance of 22.41 feet to the west line of the NE~~1~~NE~~1~~;

THENCE North 00 degrees 29 minutes 20 seconds West along the west line of the NE~~1~~NE~~1~~ for a distance of 46.19 feet to a $\frac{1}{2}$ " rebar;

THENCE North 00 degrees 29 minutes 20 seconds West along the west line of the NE~~1~~NE~~1~~ for a distance of 932.81 feet to the Northwest corner of the NE~~1~~NE~~1~~, marked by a $\frac{3}{8}$ " rebar;

THENCE South 85 degrees 44 minutes 59 seconds East (S 86° 32'23"E rec.) along the north line of the NE~~1~~NE~~1~~ for a distance of 158.77 feet to the Point of Beginning.

Said property contains 12.99 acres more or less and is subject to a county road right of way along the southwesterly side and subject to any other easements or right of ways of record or use.

12.99
12.99 acres

Bg 2

Township 9 South, Range 14 E., B.M., Twin Falls County, Idaho
Section 23: That part of the NW1/4NE1/4 lying North and East of the
Centerline of the Melon Valley County Road.

EXCEPT

Township 9 South, Range 14 E., B.M., Twin Falls County, Idaho
Section 23: A parcel of land located in the NW1/4NE1/4, being more
specifically described as follows:

COMMENCING at the North quarter corner of Section 23, Township 9 South,
Range 14 E., B.M.;

THENCE South 86°32'15" East 728.09 feet along the Northerly boundary of
said Section 23 to the REAL POINT OF BEGINNING;

THENCE South 86°32'15" East 173.18 feet;

THENCE South 46°19'46" West 48.25 feet;

THENCE South 3°44'10" West 103.34 feet to a point on the centerline of a
county road;

THENCE North 41°45'52" West 196.98 feet along the centerline of said
County Road to the REAL POINT OF BEGINNING.

SUBJECT TO: Twin Falls County Highway Right of Way.

Saved



A parcel of land located in the North 265 feet of Lot 4, Block 4, FRUITLAND SUBDIVISION in NW¼NE¼, Section 35, Township 9 South, Range 14 East, Boise Meridian, Twin Falls County, Idaho, more particularly described as follows:

COMMENCING at the Northeast Section corner of said Section 35;

THENCE North 89°35'45" West 1653.82 feet;

THENCE South 00°03'38" West 25.00 feet to the REAL POINT OF BEGINNING;

THENCE South 00°03'38" West 132.50 feet;

THENCE North 89°35'45" West 330.79 feet;

THENCE North 00°04'07" East 132.50 feet;

THENCE South 89°35'45" East 330.77 feet to the REAL POINT OF BEGINNING.

SUBJECT TO Highway District right of way along the North boundary.

ALSO SUBJECT TO a right of way easement for roadway purposes along the East boundary.

*Lot
at West End*



Township 9 South, Range 14 East, Boise Meridian, Twin Falls County, Idaho
Section 14: A parcel of land located in the SW $\frac{1}{4}$ SE $\frac{1}{4}$, more particularly described as follows:
COMMENCING at the Southquarter corner of Section 14;
THENCE South 86°32'15" East, 901.26 feet along the Southerly boundary of said Section 14 to the REAL POINT OF BEGINNING;
THENCE North 46°19'46" East 26.09 feet;
THENCE North 64°21'28" East 232.59 feet;
THENCE North 85°10'38" East 174.59 feet to a point on the Easterly boundary of the SW $\frac{1}{4}$ NE $\frac{1}{4}$ of said Section 14;
THENCE South 00°45'11" East 157.84 feet along the Easterly boundary of the SW $\frac{1}{4}$ SE $\frac{1}{4}$ of said Section 14 to the Southeast corner thereof;
THENCE North 86°32'15" West 405.35 feet to the REAL POINT OF BEGINNING.



Part of the NE¹/₄NE¹/₄ of Section 23 of Township 9 South, Range 14 East of the Boise Meridian, Twin Falls County, State of Idaho.

Beginning at the Northeast section corner of Section 23 of T.9 S., R.14 E., B.M., said corner marked by a concrete monument with brass tablet; Thence South 00 degrees 41 minutes 20 seconds East (S 01°29'31"E rec.) along the east line of the NE¹/₄NE¹/₄ for a distance of 1317.45 feet to the Southeast corner of the NE¹/₄NE¹/₄ marked by a ¾" rebar; Thence North 87 degrees 08 minutes 07 seconds West (N 87°55'32"W rec.) along the south line of the NE¹/₄NE¹/₄ for a distance of 862.42 feet to a point on the centerline of the Melon Valley Road which shall be the Point of Beginning;

THENCE North 87 degrees 08 minutes 07 seconds West (N 87°55'32"W rec.) along the south line of the NE¹/₄NE¹/₄ for a distance of 446.35 feet to the Southwest corner of the NE¹/₄NE¹/₄ marked by a ¾" rebar;

THENCE North 00 degrees 29 minutes 20 seconds West along the west line of the NE¹/₄NE¹/₄ for a distance of 369.81 feet to the centerline of the Melon Valley Road;

THENCE on the following courses and distances along the centerline of the Melon Valley Road:

South 18 degrees 12 minutes 07 seconds East for a distance of 22.41 feet;

South 27 degrees 44 minutes 06 seconds East for a distance of 89.20 feet;

South 35 degrees 18 minutes 50 seconds East for a distance of 71.84 feet;

South 42 degrees 37 minutes 49 seconds East for a distance of 83.73 feet;

South 50 degrees 09 minutes 09 seconds East for a distance of 69.44 feet;

South 58 degrees 34 minutes 06 seconds East for a distance of 72.60 feet;

South 64 degrees 14 minutes 43 seconds East for a distance of 82.39 feet;

THENCE South 64 degrees 37 minutes 07 seconds East for a distance of 124.78 feet to the Point of Beginning.

Said property contains 1.29 acres more or less and is subject to a county road right of way along the northeasterly side and subject to any other easements or right of ways of record or use.

1.29 acres



Deputy Clerk

TWIN FALLS COUNTY
RECORDED FOR:
COLEMAN, RITCHIE & CLUFF
09:09:13 AM 06-14-2016
2016009814
NO. PAGES 2 FEE: \$13.00
KRISTINA GLASCOCK
COUNTY CLERK
DEPUTY: JWD
Electronically Recorded by Simplifile

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS
MAGISTRATE DIVISION

Case No. CV42-16-1697

LETTERS TESTAMENTARY

Deceased,

LETTERS TESTAMENTARY - 1

John S. Ritchie
 COLEMAN, RITCHIE & CLUFF
 Attorneys at Law
 156 2nd Avenue West
 P.O. Box 525
 Twin Falls, ID 83303-0525
 Telephone: 208-734-1224
 Fax: 208-734-3983
 Idaho State Bar No. 1790

Attorney for Personal Representative

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
 STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS
 MAGISTRATE DIVISION

IN THE MATTER OF THE ESTATE OF)

Case No. CV42-16-1697

ROBERT B. BAUGH, aka BRAD BAUGH,)

LETTERS TESTAMENTARY

Deceased.)

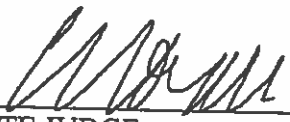
SARA K. BAUGH, also known as SALLY K. BAUGH, is hereby appointed Personal Representative of the Estate of Robert B. Baugh, deceased, with all authority pertaining thereto. Administration of the estate is unsupervised.

LETTERS TESTAMENTARY - 1

These Letters are issued to evidence the appointment, qualification, and authority of the personal representative.

WITNESS my signature and the seal of the Court this _____ day of _____, 2016.

Signed: 5/19/2016 04:36 PM



MAGISTRATE JUDGE

NOTICE OF FILING AND MAILING ORDER

NOTICE IS HEREBY GIVEN by the Clerk of the above-entitled Court, pursuant to Rule 77(d) of *Idaho Rules of Civil Procedure*, that the foregoing **LETTERS TESTAMENTARY** to be electronically filed with the Clerk of the Court, which sent a Notice of Electronic Filing to the following persons:

John S. Ritchie

john@crctflaw.com

CLERK OF THE DISTRICT COURT

Signed: 5/20/2016 04:55 PM

By 
Deputy Clerk

State of Idaho, ss. **5-20-16**
County of Teton Falls, ss.
I hereby certify the foregoing to be a full, true
and correct copy of the original on file in the
above entitled action. **2016**

KRISTINA GLASCOCK
CLERK OF THE DISTRICT COURT

By 
COURT SERVICES

Signed: 1/18/2017 11:34 AM

FILED By: TH Deputy Clerk
Fifth Judicial District, Twin Falls County
Kristina Glascock, Clerk of the Court

JOHN S. RITCHIE
COLEMAN, RITCHIE & CLUFF
Attorneys at Law
156 2nd Avenue West
P. O. Box 525
Twin Falls, ID 83303-0525
Telephone: (208)734-1224
Fax: (208)734-3983
Idaho State Bar No. 1790

Attorney for Petitioner

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS
MAGISTRATE DIVISION

In the Matter of the Petition of

Case No. CV42-16-4322

SARA KAY BAUGH

ORDER

For Change of Name.

The Petition of SARA KAY BAUGH praying for an order changing her name to SALLY K. HAMILTON, came on regularly for hearing on the 18th day of January, 2017; and it appearing to the satisfaction of this Court that notice of the hearing was given in accordance with Idaho Code §7-803, that no objections were filed by any person, and that there is no reasonable objection to petitioner assuming the name proposed.

IT IS HEREBY ORDERED that petitioner's name of SARA KAY BAUGH be, and the same is hereby changed to SALLY K. HAMILTON.

DATED this _____ day of January, 2017. Signed: 1/18/2017 11:00 AM

Kristina Glascock
MAGISTRATE

State of Idaho 01-18-17
County of Twin Falls, ss.
I hereby certify the foregoing to be a full, true
and correct copy of the original on file in the
above entitled action. page 1 of 2
KRISTINA GLASCOCK
CLERK OF THE DISTRICT COURT
By [Signature]
COURT SERVICES

ORDER - 1

NOTICE OF FILING & MAILING ORDER

Notice is hereby given by the Clerk of the above-entitled Court, pursuant to Rule 77(d) of Idaho Rules of Civil Procedure, that the foregoing **ORDER** was electronically filed and served to the following parties on Signed: 1/18/2017 11:38 AM :

John S. Ritchie
Coleman, Ritchie & Cluff
PO Box 525
Twin Falls, ID 83303-0525
john@crctflaw.com

CLERK OF THE DISTRICT COURT

By



Deputy Clerk

State of Idaho

County of Twin Falls

Marriage License

County File No. 38392

KNOW ALL PERSONS BY THIS CERTIFICATE: That any regularly ordained minister of the Gospel, authorized by the rites and usages of the church or denominations or religious body of which said minister is a member, or any judge or competent officer to whom this may come, not knowing of any lawful impediments thereto, is hereby authorized and empowered to solemnize the rites of Matrimony between:

GROOM

AND

BRIDE

1. Full Name: James Michael Hamilton

12. Full Name: Sara Kay Baugh

2. Title: Groom Birthdate: 12-06-1955

3. Sex: Male

13. Title: Bride

Birthdate: 02-21-1956

14. Sex: Female

4. Address: Buhl Twin Falls Idaho

15. Address: Buhl Twin Falls Idaho

5. Age 60 6. Race Cauca 7. Single 8. Widowed 9. Divorced X

16. Age 60 17. Race Cauca 18. Single 19. Widowed X 20. Divorced

10. Maiden Name if previously married:

21. Maiden Name if previously married: Shegrud

11. Birthplace City: Twin Falls State: Idaho

22. Birthplace City: Salt Lake City State: Utah

And to certify the same to said parties, or either of them, under the hand and seal, in their ministerial or official capacity, and thereupon is required to return this certificate in form following as hereto annexed. IN TESTIMONY WHEREOF, I have hereto set my hand and affixed my official seal, at

Twin Falls

Twin Falls

County, Idaho, this

18th

day of August

A.D. 2016

Kristina Gluscock

Starlene Miller

Recorder

Deputy

Marriage Certificate

I, Deacon James H. McLaughry, a Deacon of the Catholic Church residing in the city of Hagerman, in the county of Gooding, in the State of Idaho do certify that, in accordance with the authority on me conferred by the above license, I did on this 11th day of November in the year A.D. 2016 in the city of Hagerman in the County of Gooding, in the State of Idaho, solemnize the rites of matrimony between James Michael Hamilton of Buhl

in the County of Twin Falls of the State of Idaho and Sara Kay Baugh of Buhl in the County of Twin Falls of the State of Idaho in the presence of Pat Hamilton Jr. and Ann Lively WITNESS my hand at the county aforesaid, this 11th day of November A.D. 2016

In the presence of these Witnesses:

and

Officiant's Signature Deacon James H. McLaughry

and

Mailing Address 2603 Ritchie Rd Hagerman Id 83432

ATTENTION!

A "Certified Recorded Copy" is required per Idaho Code 49-318C & IDAPA 39.2.75.9 to have your name changed on your Driver's License or State Issued Identification Card and Social Security Card. This is NOT your "Certified Copy". You must return to the Recorder's Office to receive your "Certified Copy".