

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECEIVED

MAY 02 2017

Notice of Change in Water Right Ownership

DEPT OF WATER RESOURCES

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?
55-10206	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐

2. Previous Owner's Name: Don Pedracini
Name of current water right holder/claimant
3. New Owner(s)/Claimant(s): Chipmunk Grazing Association, Inc.
New owner(s) as listed on the conveyance document Name connector ☐ and ☐ or ☐ and/or
- P.O. Box 175 Marsing ID 83639
Mailing address City State ZIP
- _____
Telephone Email
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):
 o \$25 per *undivided* water right.
 o \$100 per *split* water right.
 o 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.

8. Signature: Martin Jara President 4-3-17
 Signature of new owner/claimant Title, if applicable Date

Signature: Evan K Miller Secretary 4/3-17
 Signature of new owner/claimant Title, if applicable Date

For IDWR Office Use Only:

Received by JE Date 5/2/17 Receipt No. C103470 Receipt Amt. \$75

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 [Signature] Date 5-11-17

WARRANTY DEED

Alliance Title & Escrow Corp. Order No.:342354

FOR VALUE RECEIVED

Donald C. McConnell and Ann Marie McConnell, husband and wife and Robert C. McConnell and Dee Ann McConnell, husband and wife

the grantor(s), do(es) hereby grant, bargain, sell and convey unto

Chipmunk Grazing Association, Inc., an Idaho corporation

whose current address is

**PO Box 175
Marsing, ID 83639**

the grantee(s), the following described premises, in Owyhee County, Idaho, TO WIT:

**In Township 4 South, Range 4 West, Boise Meridian, Owyhee County, Idaho
Section 26: West half Southeast Quarter, Southeast Quarter Southwest Quarter
Section 35: West half, Southwest Quarter Northeast Quarter, West half Southeast
Quarter**

TO HAVE AND TO HOLD the said premises, with their appurtenances unto the said Grantee, heirs and assigns forever. And the said Grantor does hereby covenant to and with the said Grantee(s), that (s)he is/are the owner(s) in fee simple of said premises; that they are free from all encumbrances Except: Current Year Taxes, conditions, covenants, restrictions, reservations, easements, rights and rights of way, apparent or of record.

And that (s)he will warrant and defend the same from all lawful claims whatsoever.

Dated: 3/24/2017

Donald C. McConnell
Donald C. McConnell

Ann Marie McConnell
Ann Marie McConnell

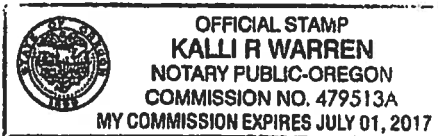
Robert C. McConnell

Dee Ann McConnell

State of Oregon } ss
County of Harney }

On this 27 day of March, 2017, before me, the undersigned, a Notary Public in and for said state, personally appeared Donald C. McConnell and Ann Marie McConnell, known or identified to me to be the person(s) whose name(s) is/are subscribed to the within Instrument and acknowledged to me that he/she/they executed same.

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



Kalli R Warren
Notary Public for the State of Oregon
Residing at: 493 N Broadway Ave Burns, OR 97700
Commission Expires: July 01, 2017

State of _____ } ss
County of _____ }

On this _____ day of _____, 2017, before me, the undersigned, a Notary Public in and for said state, personally appeared Robert C. McConnell and Dee Ann McConnell, known or identified to me to be the person(s) whose name(s) is/are subscribed to the within Instrument and acknowledged to me that he/she/they executed same.

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

Notary Public for the State of _____
Residing at: _____
Commission Expires: _____

Donald C. McConnell

Ann Marie McConnell

Robert C. McConnell
Robert C. McConnell

Dee Ann McConnell
Dee Ann McConnell

State of _____ } ss
County of _____ }

On this _____ day of _____, 2017, before me, the undersigned, a Notary Public in and for said state, personally appeared Donald C. McConnell and Ann Marie McConnell, known or identified to me to be the person(s) whose name(s) is/are subscribed to the within Instrument and acknowledged to me that he/she/they executed same.

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

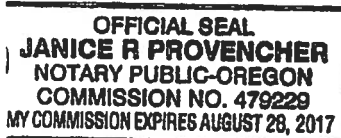
Notary Public for the State of _____
Residing at: _____
Commission Expires: _____

State of Oregon } ss
County of Grant }



On this 24 day of March, 2017, before me, the undersigned, a Notary Public in and for said state, personally appeared Robert C. McConnell and Dee Ann McConnell, known or identified to me to be the person(s) whose name(s) is/are subscribed to the within Instrument and acknowledged to me that he/she/they executed same.

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



File No. 342354

Janice R Provencher
Notary Public for the State of Oregon
Residing at: John Day OR
Commission Expires: 8.28.2017

292390

QUITCLAIM DEED

ATEC ORDER NO.: 342354

FOR VALUE RECEIVED, Sami L. Pedracini does hereby convey, release, remise and forever quitclaim unto Donald C. McConnell and Robert C. McConnell, whose current address is: BURNS & JORDAN OREGON RESPECTIVELY
the following described premises:

In Township 4 South, Range 4 West, Boise Meridian, Owyhee County, Idaho
Section 26: West half Southeast Quarter, Southeast Quarter Southwest Quarter
Section 35: West half, Southwest Quarter Northeast Quarter, West half Southeast Quarter

TO HAVE AND TO HOLD the said premises, unto the said grantees, heirs and assigns forever.

Dated: Feb 13, 2017

Sami L. Pedracini
Sami L. Pedracini

State of Oregon } ss
County of Baker }

On this 13 day of February, 2017, before me, a Notary Public in and for said state, personally appeared, known or identified to me to be the person whose name is subscribed to the within Instrument and acknowledged to me that he/she executed same. Sami L. Pedracini

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

Jennifer Laraine Blem Willis
Notary Public for the State of Oregon
Residing at: 3830 Campbell St, Baker City, OR 97814
Commission Expires: 8-25-2020



QUITCLAIM DEED

ATEC ORDER NO.: 342354

FOR VALUE RECEIVED, Robert D. Pedracini does hereby convey, release, remise and forever quitclaim unto Donald C. McConnell and Robert C. McConnell, whose current address is: Burns + John Day Oregon respectively the following described premises:

In Township 4 South, Range 4 West, Boise Meridian, Owyhee County, Idaho
Section 26: West half Southeast Quarter, Southeast Quarter Southwest Quarter
Section 35: West half, Southwest Quarter Northeast Quarter, West half Southeast Quarter

TO HAVE AND TO HOLD the said premises, unto the said grantees, heirs and assigns forever.

Dated: Feb 13th, 2017

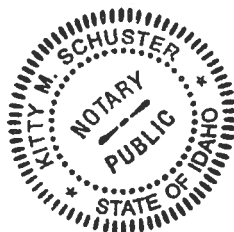
Robert D. Pedracini
Robert D. Pedracini

State of Id } ss
County of Payette }

On this 13th day of February, 2017, before me, a Notary Public in and for said state, personally appeared, Robert D. Pedracini, known or identified to me to be the person whose name is subscribed to the within Instrument and acknowledged to me that he/she executed same.

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

Kathy M Schuster
Notary Public for the State of Id
Residing at: Frutland Id
Commission Expires: 12/8/22



Instrument # 292007
MURPHY, OWYHEE, IDAHO
2017-02-27 02:32:41 No. of Pages: 1
Recorded for: ALLIANCE TITLE - BOISE PRODUCTIC
ANGELA BARKELL Fee: \$10.00
Ex-Officio Recorder Deputy: map
Index To: DEED QUIT-CLAIM
Electronically Recorded by Simplifile

QUITCLAIM DEED

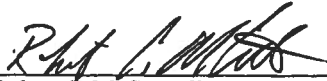
ATEC ORDER NO.: 342354

FOR VALUE RECEIVED, Robert C. McConnell does hereby convey, release, remise and forever quitclaim unto Donald C. McConnell and Robert C. McConnell, whose current address is: 1000 South Wade Burns, OR 97720
the following described premises:

In Township 4 South, Range 4 West, Boise Meridian, Owyhee County, Idaho
Section 26: West half Southeast Quarter, Southeast Quarter Southwest Quarter
Section 35: West half, Southwest Quarter Northeast Quarter, West half Southeast Quarter

TO HAVE AND TO HOLD the said premises, unto the said grantees, heirs and assigns forever.

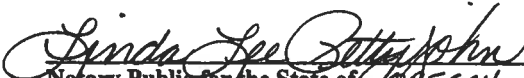
Dated: 2/7, 2017


Robert C. McConnell

State of OREGON } ss
County of GRANT }

On this 07TH day of FEBRUARY, 2017, before me, a Notary Public in and for said state, personally appeared, Robert C. McConnell known or identified to me to be the person whose name is subscribed to the within Instrument and acknowledged to me that he/she executed same.

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


Notary Public for the State of OREGON
Residing at: 316 A AVE SENECA, OR
Commission Expires: APRIL 03, 2020



Instrument # 292008

MURPHY, OWYHEE, IDAHO

2017-02-27 02:32:41 No. of Pages: 1

Recorded for: ALLIANCE TITLE - BOISE PRODUCTIC

ANGELA BARKELL Fee: \$10.00

Ex-Officio Recorder Deputy: map

Index To: DEED QUIT-CLAIM

Electronically Recorded by Simplifile

QUITCLAIM DEED

ATEC ORDER NO.: 342354

FOR VALUE RECEIVED, Donald C. McConnell does hereby convey, release, remise and forever quitclaim unto Donald C. McConnell and Robert C. McConnell, whose current address is: 1000 South Date Burns, OR 97720 the following described premises:

In Township 4 South, Range 4 West, Boise Meridian, Owyhee County, Idaho
Section 26: West half Southeast Quarter, Southeast Quarter Southwest Quarter
Section 35: West half, Southwest Quarter Northeast Quarter, West half Southeast Quarter

TO HAVE AND TO HOLD the said premises, unto the said grantees, heirs and assigns forever.

Dated: 2/8, 2017

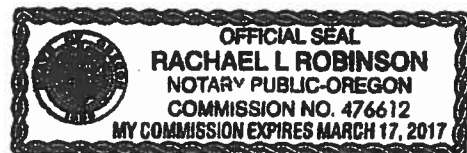
Donald C. McConnell
Donald C. McConnell

State of Oregon } ss
County of Harney }

On this 8th day of February, 2017, before me, a Notary Public in and for said state, personally appeared, Donald C. McConnell known or identified to me to be the person whose name is subscribed to the within Instrument and acknowledged to me that he/she executed same.

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

Rachael L. Robinson
Notary Public for the State of Oregon
Residing at: City of Hines
Commission Expires: March 17, 2017



292008

210352

RECORDER'S INFORMATION:

Prepared by:

YTURRI, ROSE, BURNHAM, EBERT & BENTZ
P.O. Box S
Ontario, OR 97914

Until a change is requested, all tax
statements shall be sent to:

Donald Pedracini, Trustee
P O Box 533
Sumpter, Oregon 97877

After recording return to: Yturri Law Office, P.O. Box S, Ontario, OR 97914

BARGAIN AND SALE DEED
(Idaho Property)

DONALD PEDRACINI, Grantor, of P.O. Box 533, Sumpter, Baker County, Oregon, for good and valuable consideration, the receipt of which is hereby acknowledged, does hereby grant, bargain, sell and convey to DONALD PEDRACINI, Trustee of the DONALD PEDRACINI FAMILY TRUST, under agreement dated ~~February~~ MARCH 2nd, 1993, Grantee, whose current address is P.O. Box 533, Sumpter, Baker County, Oregon, all of Grantor's undivided interest in and to the following described real property:

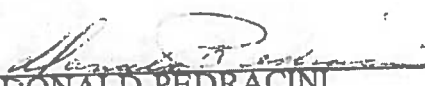
See EXHIBIT A attached hereto and by reference
incorporated herein as though fully set forth.

1/3

GRANTOR, for himself, his heirs and assigns does hereby covenant, warranty and shall defend the quiet and peaceable possession of said premises by the Grantee, its heirs and assigns forever against the lawful claims of all persons.

In construing this deed, and where the context so requires, the singular includes the plural and the masculine, the feminine and the neuter.

IN WITNESS WHEREOF, Grantor has hereunto subscribed his name to this instrument this 2nd day of ~~February~~ MARCH, 1993.


DONALD PEDRACINI

FILED - RECORDED
93 FEB 21 PM 1 27
REQUESTED BY
Yturri, Rose, Burnham, Ebert & Bentz
FE 9.00

210352

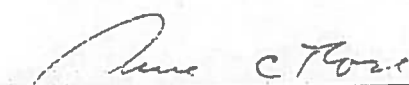
State of Oregon

County of Baker

} ss.

On this 2nd day of ^{MARCH} ~~February~~, 1993, before me the undersigned, a Notary Public for Oregon, personally appeared DONALD PEDRACINI, known to me to be the persons whose name is subscribed to the within instrument and acknowledged to me that he executed the same.

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



Notary Public for Oregon.

My Commission expires: 3-30-94

EXHIBIT A
(Real Property Description)

Bargain and Sale Deed
dated March 2, 1993
Grantor: DONALD PEDRACINI
Grantee: DONALD PEDRACINI FAMILY TRUST

All of Lot 2 and the South 75 feet of Lot 11, all of Lot 12 and Lot 13 Block 3 of the Original Townsite of Murphy, Owyhee County, Idaho, according to the official plat thereof on file and of record in the office of the Recorder for Owyhee County, Idaho.

ALSO a parcel of land in the E $\frac{1}{2}$ SE $\frac{1}{4}$, Sec. 27, T2S, R2W, B.M., Owyhee County, Idaho, described as follows: Beginning at the Northeast corner of Lot 12 in Block 3 of the Townsite of Murphy, Owyhee County, Idaho; thence in an Easterly direction at right angles to the East boundary of said Lot 12, 250 feet; thence in a Southerly direction parallel with the Eastern boundaries of said Lots 12 and 13, in Block 3 Murphy Townsite, 350 feet; thence in a Westerly direction 250 feet to the Southeast corner of said Lot 13; thence Northerly 350 feet along the East boundaries of Lots 12 and 13 to the point of beginning.

IN TOWNSHIP 4 SOUTH, RANGE 4 WEST, B.M., OWYHEE COUNTY, IDAHO
Section 26: W $\frac{1}{2}$ SE $\frac{1}{4}$, SE $\frac{1}{4}$ SW $\frac{1}{4}$
Section 35: W $\frac{1}{2}$, SW $\frac{1}{4}$ NE $\frac{1}{4}$, W $\frac{1}{2}$ SE $\frac{1}{4}$

Also the following Patented Mining Claims,
Tax No. 97, Multnomah Mining Claim
Tax No. 98, South Extension Multnomah Mining Claim
Tax No. 99, Ucal Mining Claim

AFFIDAVIT IN LIEU OF ADMINISTRATION

State of Idaho
County of Payette

Robert D. Pedracini, being first duly sworn upon his oath says that:

- a) He is now and has been a resident of Fruitland, Payette County, Idaho for 31 years.
- b) He makes this affidavit as of personal knowledge of the facts herein stated and for the purpose of inducing to issue title insurance of the following described premises:

In Township 4 South, Range 4 West, Boise Meridian, Owyhee County, Idaho
Section 26: West half Southeast Quarter, Southeast Quarter Southwest Quarter
Section 35: West half, Southwest Quarter Northeast Quarter, West half Southeast Quarter

- c) He was personally acquainted with Donald Pedracini during his lifetime.
- d) Donald Pedracini died testate (with a will) in Baker County, State of Oregon on April 29, 2008.
- e) At the time of his death, Donald Pedracini was a resident of Granite, Baker County, State of Oregon.
- f) At the time of his death, Donald Pedracini was married to Rosella Pedracini and had been continuously so married from 1950 to the 29th day of April, 2008.
- g) At the time of his death Donald Pedracini, in addition to his wife, was survived by the following heirs:
- | Name of Heir | Relationship | Residence if Known | Age |
|---------------------|--------------|--------------------|-----------|
| Robert D. Pedracini | Son | Fruitland, ID | <u>59</u> |
| Sami L. Pedracini | Daughter | Baker City, OR | |
| Donald C. McConnell | Grandson | Burns, OR | |
| Robert C. McConnell | Grandson | Burns, OR | |
- h) At the time of his death, decedent's entire estate was of the approximate value of N/A dollars.
- i) That as a result of the forgoing facts and sections 15-3-101 and 15-3-901 Idaho Code, all right, title and interest in the real property hereinabove described should now be vested in Robert D. Pedracini, Sami L. Pedracini, Donald C. McConnell and Robert C. McConnell.

Robert D. Pedracini
Robert D. Pedracini

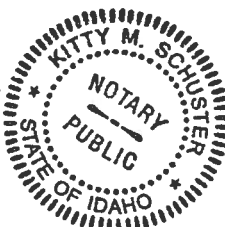
Subscribed and sworn to before me this 13th day of February, 2017.

State of ID } ss
County of Payette }

On this 13th day of February, 2017, before me, a Notary Public in and for said state, personally appeared, known or identified to me to be the person whose name is subscribed to the within Instrument and acknowledged to me that he executed same.

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

Kitty M. Schuster
Notary Public for the State of ID
Commission Expires: 12/8/22



CERTIFICATION OF VITAL RECORD

OR
PRINT IN
PERMANENT
BLACK INK

OREGON DEPARTMENT OF HUMAN SERVICES CENTER FOR HEALTH STATISTICS CERTIFICATE OF DEATH

136

STATE FILE NUMBER

LD TAG NO. 496293

1. Legal Name (Include AKA, if any) First: Donald Middle: William Last: Pedracini Suffix:				2. Death Date (MM/DD/YYYY) April 29, 2008			
3. Sex (M/F) Male	4a. Age - Last Birthday 78	4b. Under 1 Year Months: Days:	4c. Under 1 Day Hours: Minutes:	5. Social Security Number [REDACTED]	6. County of Death Baker		
7. Birthplace (MM/DD/YYYY) July 26, 1929		8a. Birthplace (City/Town, or County) Nampa		8b. (State or Foreign Country) Idaho			
9. Decedent's Education Some College No Degree		10. Was Decedent of Hispanic Origin? (Yes or No, if yes, specify) No		11. Decedent's Race(s) White			
12. Was Decedent Ever in U.S. Armed Forces? ☐ Yes ☒ No			13. Residence: Number and Street (e.g., 324 SE 8th Street, Apt. No. 8) 42695 GraniteCreek Rd.				
14. City/Town Granite			15. Residence County Baker				
16. State or Foreign Country Oregon			17. Zip Code + 4 97877				
18. Inside City Limits? ☐ Yes ☒ No ☐ Unknown			19. Marital Status at Time of Death Married				
20. Spouse's Name (if married or widowed, give name prior to first marriage) Rosella Lou Phelps			21. Usual Occupation (Indicate type of work done during most of working life. DO NOT USE "RETIRED.") Millworker				
22. Kind of Business/Industry (DO NOT USE COMPANY NAME) Lumber			23. Father's Name (First, Middle, Last) William Lorenzo Pedracini				
24. Mother's Name Prior to First Marriage (First, Middle, Last) Marguerite Gladys Brunzell			25. Informant's Name Sam Harris				
26. Telephone Number 541-523-2367			27. Relation to Decedent Daughter				
28. Mailing Address (Number & Street, City/Town, State, Zip + 4) 1960 15th Street, Baker City, OR 97814			29. Place of Death Inpatient; ICU				
30. Facility Name St. Elizabeth Health Services			31. Location of Death (Give address) 3325 Pocahontas Rd.				
32. City/Town or Location of Death Baker City			33. State OR				
34. Zip Code + 4 97814			35. Method of Disposition Burial				
36. Place of Disposition (Name of cemetery, crematory, or other place) Mt. Hope Cemetery			37. Location Baker City, Oregon				
38. Name and Complete Address of Funeral Facility (Number & Street, City/Town, State, Zip + 4) Coles Funeral Home, 1950 Place Street Baker City, Oregon 97814							
39. Date of Disposition (MM/DD/YYYY)			40. Funeral Director's Signature [Signature]				
41. OR License Number CO-3714			42. Registrar's Signature [Signature]				
43. Date Received (MM/DD/YYYY) May 1, 2008			44. Local File Number 59				
45. Record Amendment							
46. Was case referred to Medical Examiner? ☒ Yes ☐ No		47. Autopsy? ☐ Yes ☒ No		48. Were autopsy findings available to complete the cause of death? ☐ Yes ☒ No			
49. Time of Death 11:30 AM		50. Enter the chain of events - diseases, injuries, or complications - that directly caused the death. DO NOT ENTER TERMINAL EVENTS such as cardiac arrest, respiratory arrest or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE.					
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;"> Final disease or condition resulting in death: IMMEDIATE CAUSE ↓ a. <u>Pneumonia</u> Due to (or as a consequence of) ↓ b. _____ Due to (or as a consequence of) ↓ c. _____ Due to (or as a consequence of) ↓ d. _____ </td> <td style="width: 30%;"> Approximate Interval: Onset to Death </td> </tr> </table>						Final disease or condition resulting in death: IMMEDIATE CAUSE ↓ a. <u>Pneumonia</u> Due to (or as a consequence of) ↓ b. _____ Due to (or as a consequence of) ↓ c. _____ Due to (or as a consequence of) ↓ d. _____	Approximate Interval: Onset to Death
Final disease or condition resulting in death: IMMEDIATE CAUSE ↓ a. <u>Pneumonia</u> Due to (or as a consequence of) ↓ b. _____ Due to (or as a consequence of) ↓ c. _____ Due to (or as a consequence of) ↓ d. _____	Approximate Interval: Onset to Death						
51. Other significant conditions contributing to death, but not resulting in the underlying cause given above: <u>Transition; renal failure; congestive heart failure</u>							
52. Manner of Death ☒ Natural ☐ Homicide ☐ Accident ☐ Undetermined ☐ Suicide ☐ Pending		53. If Female ☐ Not pregnant within past year ☐ Not pregnant, but pregnant 43 days to 1 year before death ☐ Pregnant at time of death ☐ Unknown if pregnant within the past year ☐ Not pregnant, but pregnant within 43 days before death		54. Did tobacco use contribute to death? ☒ Yes ☐ Probably ☐ No ☐ Unknown			
55. Date of Injury (MM/DD/YYYY)		56. Time of Injury		57. Place of Injury (e.g., Decedent's home, construction site, restaurant, wooded area)			
58. Injury at Work? ☐ Yes ☒ No ☐ Unknown							
59. Location of Injury (Number & Street, City/Town, State, Zip + 4)							
60. Describe how injury occurred.				61. If transportation injury, specify: ☐ Driver/Operator ☐ Passenger ☐ Pedestrian ☐ Other (Specify)			
62. Name and Address of Certifying Physician & Street, City/Town, State, Zip + 4 Dr. Robert McKim 3175 Pocahontas Rd. Baker City, OR 97814							
63. Name and Title of Attending Physician if Other than Certifier							
64. Title of Certifier Physician at Surgery		65. License Number MD006674		66. Date Certified (MM/DD/YYYY) Apr 30, 2009			
67. Medical Examiner - To the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) and manner stated. [Signature]							
68. Medical Examiner - On the basis of examination, further investigation, in my opinion, death occurred at the time, date, and place, and due to the cause(s) and manner stated.							
69. Record Amendment							

TO BE COMPLETED BY FUNERAL FACILITY

TO BE COMPLETED BY MEDICAL CERTIFIER

ORIGINAL - VITAL RECORDS COPY

45-2 (01/06)

THIS IS A TRUE AND EXACT REPRODUCTION OF THE DOCUMENT OFFICIALLY REGISTERED AT THE OFFICE OF THE BAKER COUNTY REGISTRAR.

DATE ISSUED:

MAY 02 2008

THIS COPY IS NOT VALID WITHOUT INTAGLIO STATE SEAL AND BORDER

Sandy Cross
SANDY CROSS
COUNTY REGISTRAR
BAKER COUNTY, OREGON

292003

AFFIDAVIT IN LIEU OF ADMINISTRATION

State of ID
County of Payette

Robert D. Pedracini, being first duly sworn upon his oath says that:

- a) He is now and has been a resident of Fruitland, Payette County, Idaho for 31 years.
- b) He makes this affidavit as of personal knowledge of the facts herein stated and for the purpose of inducing to issue title insurance of the following described premises:

In Township 4 South, Range 4 West, Boise Meridian, Owyhee County, Idaho
Section 26: West half Southeast Quarter, Southeast Quarter Southwest Quarter
Section 35: West half, Southwest Quarter Northeast Quarter, West half Southeast Quarter

- c) He was personally acquainted with Rosella Pedracini during his lifetime.
- d) Rosella Pedracini died testate (with a will) in Ada County, State of Idaho on August 29, 2014.
- e) At the time of her death, Rosella Pedracini was a resident of Granite, Baker County, State of Oregon.
- f) At the time of her death, Rosella Pedracini was unmarried. She had previously been married to Donald Pedracini from 1950 until the date of Donald Pedracini's death, that being the 29th day of April, 2008.

- g) At the time of her death Rosella Pedracini as survived by the following heirs:

Name of Heir	Relationship	Residence if Known	Age
Robert D. Pedracini	Son	Fruitland, ID	59
Sami L. Pedracini	Daughter	Baker City, OR	
Donald C. McConnell	Grandson	Burns, OR	
Robert C. McConnell	Grandson	Burns, OR	

- h) At the time of her death, decedent's entire estate was of the approximate value of N/A dollars.
- i) That as a result of the forgoing facts and sections 15-3-101 and 15-3-901 Idaho Code, all right, title and interest in the real property hereinabove described should now be vested in Robert D. Pedracini, Sami L. Pedracini, Donald C. McConnell and Robert C. McConnell.

Robert D. Pedracini
Robert D. Pedracini

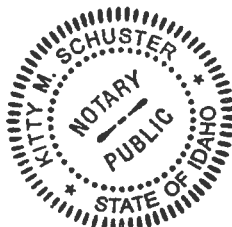
Subscribed and sworn to before me this 13th day of February, 2017.

State of ID } ss
County of Payette }

On this 13th day of February, 2017, before me, a Notary Public in and for said state, personally appeared, known or identified to me to be the person whose name is subscribed to the within Instrument and acknowledged to me that he executed same.

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

Kitty M. Schuster
Notary Public for the State of ID
Commission Expires: 12/18/22



STATE OF IDAHO
CERTIFICATION OF VITAL RECORD

STATE OF IDAHO
IDAHO DEPARTMENT OF HEALTH AND WELFARE
BUREAU OF VITAL RECORDS AND HEALTH STATISTICS

CERTIFICATE OF DEATH

Date Filed SEPTEMBER 05, 2014

State File No. 2014-08239

DECEDENT - LEGAL NAME ROSELLA LUE PEDRACINI			
SEX FEMALE	SOCIAL SECURITY NUMBER [REDACTED]	AGE 79 YEARS	DATE OF BIRTH SEPTEMBER 10, 1934
BIRTHPLACE WENATCHEE, WASHINGTON		PLACE OF RESIDENCE SUMPTER, OREGON	
MARITAL STATUS AT TIME OF DEATH WIDOWED		NAME OF SURVIVING SPOUSE (if wife, maiden name) NO	
FATHER - NAME SAMUEL EDMOND PHELPS		BIRTHPLACE UNKNOWN/NOT STATED	
MOTHER - MAIDEN NAME GLADYS CARROLL		BIRTHPLACE UNKNOWN/NOT STATED	
METHOD OF DISPOSITION REMOVAL FROM STATE		FUNERAL SERVICE LICENSEE CURTIS J. SMITH	
NAME AND ADDRESS OF FUNERAL FACILITY GRAY'S WEST AND COMPANY, BAKER CITY, OREGON			
DATE OF DEATH AUG. 29, 2014	TIME OF DEATH 6:50 P.M.	CITY/TOWN OR LOCATION OF DEATH BOISE, IDAHO	COUNTY OF DEATH ADA
CAUSE OF DEATH (underlying cause last) a. RESPIRATORY FAILURE			Approximate Interval Between Onset and Death DAYS
DUE TO (or as a consequence of): b. SEVERE COPD			YEARS
DUE TO (or as a consequence of): c.			
DUE TO (or as a consequence of): d.			
OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not resulting in the underlying cause given above CARDIOMYOPATHY			WAS AN AUTOPSY PERFORMED? NO
MANNER OF DEATH NATURAL	NAME OF CERTIFIER MICHAEL R. BLUMHARDT, M.D.		TITLE PHYSICIAN
CORONER SUBSEQUENT CERTIFICATION IF NECESSARY			
EXTERNAL CAUSES ONLY			
DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY	INJURY AT WORK
LOCATION WHERE INJURY OCCURRED			
DESCRIPTION OF HOW INJURY OCCURRED			

292004

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: SEPTEMBER 05, 2014

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

James B. Galt
JAMES B. AYDELOTTE
STATE REGISTRAR





State of Idaho

DEPARTMENT OF WATER RESOURCES

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

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

GARY SPACKMAN
Director

C.L. "BUTCH" OTTER
Governor

May 11, 2017

CHIPMUNK GRAZING ASSOC. INC
PO BOX 175
MARSING ID 83639

Re: Change of Ownership for Water Right/Permit No(s): 55-10206

Dear Water Right Holder(s):

The Department acknowledges the receipt of correspondence changing ownership of the above referenced water right(s) to you. The Department has modified its records to reflect this change in ownership and has enclosed a computer-generated report for your records.

Updating the ownership record for a water right does not reconfirm the validity of the right. When processing an ownership change notice, the department does not review the history of water use to determine if the right has been forfeited through five years or more of non-use. To read more about water right forfeiture, including how to protect a water right from forfeiture, please see § 42-222 and §42-223, Idaho Code.

Also note that as of July 1, 1996, water right owners are required to report any change of water right ownership and any change of mailing address of the owner of a water right, to the Department. Notice of the change must be provided to the Department within **120 days** of the change. Water right forms are available from any office of the Department, or at www.idwr.idaho.gov.

If you have any questions concerning the enclosed information, please feel free to contact me at (208) 287-4942.

Sincerely,

A handwritten signature in black ink that reads "Jean Hersley". The signature is written in a cursive, flowing style.

Jean Hersley
Technical Records Specialist II

Enclosure(s)