

STATE OF IDAHO  
DEPARTMENT OF WATER RESOURCES

RECEIVED

JUN 06 2016

WATER RESOURCES  
WESTERN 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.

| Water Right/Claim No. | Split?                       | Water Right/Claim No. | Split?                       | Water Right/Claim No. | Split?                       |
|-----------------------|------------------------------|-----------------------|------------------------------|-----------------------|------------------------------|
| 78-2040B              | Yes <input type="checkbox"/> |                       | Yes <input type="checkbox"/> |                       | Yes <input type="checkbox"/> |
| 78-4128B              | Yes <input type="checkbox"/> |                       | Yes <input type="checkbox"/> |                       | Yes <input type="checkbox"/> |
|                       | Yes <input type="checkbox"/> |                       | Yes <input type="checkbox"/> |                       | Yes <input type="checkbox"/> |
|                       | Yes <input type="checkbox"/> |                       | Yes <input type="checkbox"/> |                       | Yes <input type="checkbox"/> |
|                       | Yes <input type="checkbox"/> |                       | Yes <input type="checkbox"/> |                       | Yes <input type="checkbox"/> |

2. Previous Owner's Name: Florence C. Campbell Living Trust

Name of current water right holder/claimant

3. New Owner(s)/Claimant(s): John Welch

Name of each new owner as listed on the conveyance document

New owner continued

Name connector ☐ and ☐ or ☐ and/or

P.O. Box 487

Mailing address

New Meadows, ID 83654

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: May 27, 2016

6. 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.

SUPPORT DATA

IN FILE #

78-2040B

7. Signature: [Signature]

Signature of new owner/claimant

Title, if applicable

Date 5-27-16

Signature: \_\_\_\_\_

Signature of new owner/claimant

Title, if applicable

Date

For IDWR Office Use Only:

Received by [Signature]

Date 6/6/16

Receipt No. W044270

Receipt Amt. \$50.00

Approved by [Signature]

Processed by [Signature]

Date 6/22/16

WARRANTY DEED

COPY

For Value Received, FLORENCE C. CAMPBELL LIVING TRUST u/t/a dated September 17, 2007

the grantor, does hereby grant, bargain, sell and convey unto JOHN WELCH, an unmarried man

the grantee, whose current address is P.O. Box 487, New Meadows, ID 83654

the following described premises, in Adams County, Idaho, to-wit:

SEE ATTACHED EXHIBIT 'A' MADE A PART HERETO:

TO HAVE AND TO HOLD THE said premises, with their appurtenances unto the said Grantee, his heirs and assigns forever. And the said Grantor hereby covenants to and with the said Grantee, that they are the owners in fee simple of said premises; that they are free from all encumbrances excepting for all easements of record, rights of way, matters visible, and all matters of record and title and that they will warrant and defend the same from all lawful claims whatsoever.

Date: May 20, 2016

FLORENCE C. CAMPBELL LIVING TRUST  
u/t/a dated September 17, 2007

By: Ambia Jane Baker  
AMBIA JANE BAKER,  
Successor Co-Trustee

Instrument # 129537

COUNCIL, ADAMS, IDAHO

5-27-2016 04:43:47 PM No. of Pages: 3

Recorded for: TIMBERLINE TITLE & ESCROW

SHERRY WARD

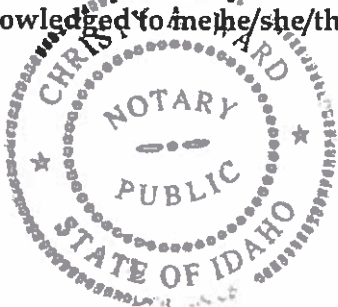
Ex-Officio Recorder Deputy Fee: 16.00

Index to: DEED

By: Margaret Anne Childers  
MARGARET ANNE CHILDERS,  
Successor Co-Trustees

STATE OF Idaho )  
 : ss  
COUNTY OF Adams )

On this 27 day of May, in the year of 2016, before me, a Notary Public in and for said State, personally appeared AMBIA JANE BAKER known or identified to me to be the person(s) whose name(s) is/are subscribed to the within instrument as Successor Co-Trustee of the FLORENCE C. CAMPBELL LIVING TRUST u/t/a dated September 17, 2007, and acknowledged to me he/she/they executed the same as Successor Co-Trustee.



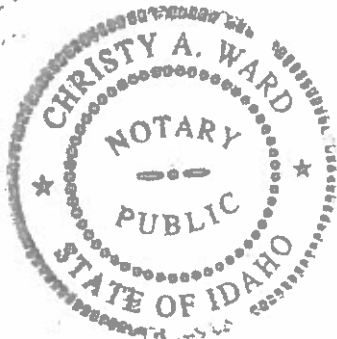
Christy Childers  
Notary Public

Residing at: Indian Valley, Idaho

Commission expires: 9-17-16

STATE OF *Idaho* )  
 : ss  
COUNTY OF *Adams* )

On this *27* day of May, in the year of 2016, before me, a Notary Public in and for said State, personally appeared MARGARET ANNE CHILDERS known or identified to me to be the person(s) whose name(s) is/are subscribed to the within instrument as Successor Co-Trustee of the FLORENCE C. CAMPBELL LIVING TRUST u/t/a dated September 17, 2007, and acknowledged to me he/she/they executed the same as Successor Co-Trustee.



#16-1168

*Christy A. Ward*  
\_\_\_\_\_  
Notary Public  
Residing at: *Carban Valley, Idaho*  
Commission expires: *9-17-16*

EXHIBIT 'A'

Township 19 North, Range 2 East, Boise Meridian, Adams  
County, Idaho

Section 18: E1/2W1/2NE1/4SE1/4 and the E1/2NE1/4SE1/4  
SUBJECT TO the right-of-way for the County road as now  
established.

PERSONAL REPRESENTATIVE'S DEED

COPY

THIS DEED, made by MARGARET CHILDERS, as Personal Representative of the Estate of CHARLES FREDERICK CAMPBELL, aka CHARLES F. CAMPBELL, deceased, the grantor, unto

THE FLORENCE C. CAMPBELL LIVING TRUST u/t/a dated September 17, 2007

the grantee, whose address is:

WHEREAS, the Grantor is the qualified Personal Representative of said Estate, filed as Probate Case No. CV IE 1505174 in Ada County, Idaho

THEREFORE, for good and valuable consideration, the receipt of which is hereby acknowledged, Grantor grants and conveys to Grantees all interest in the following described real property, in Adams County, Idaho, to-wit:

Township 19 North, Range 2 East, Boise Meridian, Adams County, Idaho  
Section 18: E1/2W1/2NE1/4SE1/4 and the E1/2NE1/4SE1/4  
SUBJECT TO the right-of-way for the County road as now established.

Date: 5-27-16

Margaret Childers

MARGARET CHILDERS, Personal Representative of  
The Estate of CHARLES FREDERICK CAMPBELL,  
aka CHARLES F. CAMPBELL

Instrument # 129536

COUNCIL, ADAMS, IDAHO

5-27-2016 04:41:53 PM No. of Pages: 1

Recorded for: TIMBERLINE TITLE & ESCROW

SHERRY WARD

Fee: 10.00

Ex-Officio Recorder Deputy

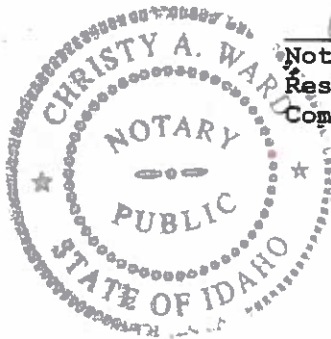
Index to: DEED

STATE OF Idaho )

: ss

COUNTY OF Adams )

On this 27 day of May, 2016, before me a Notary Public in and for said State, personally appeared MARGARET CHILDERS known or identified (or proved to me on the oath of ) to be the Personal Representative of the estate of CHARLES FREDERICK CAMPBELL aka CHARLES F. CAMPBELL, the person whose name is subscribed to the within instrument, and being by me first duly sworn, declared that the statements therein are true, and acknowledged to that she executed the same as said Personal Representative.



Christy A. Ward  
Notary Public

Residing At: Indian Valley, Idaho

Commission Expires: 9-17-16

MAR 30 2015

Ada County Clerk

NO. \_\_\_\_\_ FILED \_\_\_\_\_  
A.M. \_\_\_\_\_ P.M. \_\_\_\_\_

APR 15 2015

CHRISTOPHER D. RICH, Clerk  
By LORI FERGUSON  
DEPUTY

COPY

BRADY LAW, CHARTERED  
Michael G. Brady, ISB #1293  
Chip D. Giles, ISB #9135  
Jacob D. Bottari, ISB #9556  
St. Mary's Crossing  
2537 W. State Street, Suite 200  
Boise, ID 83702

Instrument # 129535

COUNCIL, ADAMS, IDAHO

5-27-2016 04:39:50 PM No. of Pages: 3

Recorded for : TIMBERLINE TITLE &amp; ESCROW

SHERRY WARD

Fee: 16.00

Ex-Officio Recorder Deputy

Index to: LETTER TESTAMENTARY

TELEPHONE: (208) 345-8400

FACSIMILE: (208) 322-4486

Attorneys for Personal Representative, Margaret Anne Childers

IN THE DISTRICT COURT OF THE FOURTH JUDICIAL DISTRICT OF THE  
STATE OF IDAHO, IN AND FOR THE COUNTY OF ADA

## MAGISTRATE DIVISION

IN THE MATTER OF THE ESTATE OF:

Case No.

CV IE 1505174

Charles Frederick Campbell,

LETTERS OF ADMINISTRATION

Deceased.

1. Margaret Childers was duly appointed and qualified as general Personal Representative of the estates of the above-named decedent by the Court with all authority pertaining thereto.

2. Administration of the estates is unsupervised

These letters are issued to evidence the appointment, qualification, and authority of the said personal representative or special administrator.

WITNESS, my signature and the Seal of this Court, this 14th day of April, 2015.

STATE OF IDAHO  
CHRISTOPHER M. BATER  
Magistrate Judge  
I, Christopher D. Rich, Clerk of the District Court of the  
Fourth Judicial District of the State of Idaho, in and for the  
County of Ada, do hereby certify that the foregoing is a  
true and correct copy of the original on file in this office. In  
witness whereof, I have hereunto set my hand and affixed  
my official seal this 14th day of April, 2015.  
CHRISTOPHER D. RICH, Clerk  
By Lori Ferguson Deputy

# 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 **OCTOBER 07, 2014**

State File No. **2014-09431**

|                                                                                                                                            |                                             |                                                        |                                                      |
|--------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|--------------------------------------------------------|------------------------------------------------------|
| DECEDENT - LEGAL NAME<br><b>CHARLES FREDERICK CAMPBELL</b>                                                                                 |                                             |                                                        |                                                      |
| SEX<br><b>MALE</b>                                                                                                                         | SOCIAL SECURITY NUMBER<br><b>[REDACTED]</b> | AGE<br><b>69 YEARS</b>                                 | DATE OF BIRTH<br><b>AUGUST 05, 1945</b>              |
| BIRTHPLACE<br><b>COUNCIL, IDAHO</b>                                                                                                        |                                             | PLACE OF RESIDENCE<br><b>BOISE, IDAHO</b>              |                                                      |
| MARITAL STATUS AT TIME OF DEATH<br><b>NEVER MARRIED</b>                                                                                    |                                             | NAME OF SURVIVING SPOUSE (if wife, maiden name)        | WAS DECEDENT EVER IN U.S. ARMED FORCES?<br><b>NO</b> |
| FATHER - NAME<br><b>CHARLES ALLEN CAMPBELL</b>                                                                                             |                                             |                                                        | BIRTHPLACE<br><b>IDAHO</b>                           |
| MOTHER - MAIDEN NAME<br><b>FLORENCE CARSTARPHEN</b>                                                                                        |                                             |                                                        | BIRTHPLACE<br><b>NEW JERSEY</b>                      |
| METHOD OF DISPOSITION<br><b>CREMATION</b>                                                                                                  |                                             | FUNERAL SERVICE LICENSEE<br><b>N. QUINN PETERSON</b>   |                                                      |
| NAME AND ADDRESS OF FUNERAL FACILITY<br><b>SUMMERS FUNERAL HOME, BOISE, IDAHO</b>                                                          |                                             |                                                        |                                                      |
| DATE OF DEATH<br><b>SEPT. 26, 2014</b>                                                                                                     | TIME OF DEATH<br><b>8:30 A.M.</b>           | CITY, TOWN OR LOCATION OF DEATH<br><b>BOISE, IDAHO</b> | COUNTY OF DEATH<br><b>ADA</b>                        |
| CAUSE OF DEATH (underlying cause last)<br><b>CARDIAC ARREST</b>                                                                            |                                             |                                                        | Approximate Interval Between Chest and Death         |
| DUE TO (or as a consequence of):<br><b>VENTRICULAR FIBRILLATION</b>                                                                        |                                             |                                                        | <b>12 HOURS</b>                                      |
| DUE TO (or as a consequence of):<br><b>MYOCARDIAL INFARCTION</b>                                                                           |                                             |                                                        | <b>12 HOURS</b>                                      |
| DUE TO (or as a consequence of):                                                                                                           |                                             |                                                        |                                                      |
| OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not resulting in the underlying cause given above<br><b>CORONARY ARTERY DISEASE</b> |                                             |                                                        | WAS AN AUTOPSY PERFORMED?<br><b>NO</b>               |
| MANNER OF DEATH<br><b>NATURAL</b>                                                                                                          |                                             | NAME OF CERTIFIER<br><b>JOSHUA MOZES, M.D.</b>         | TITLE<br><b>PHYSICIAN</b>                            |
| 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                                                                                                         |                                             |                                                        |                                                      |

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: **OCTOBER 30, 2014**

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

*James B. Aydelotte*  
**JAMES B. AYDELOTTE**  
STATE REGISTRAR



AFTER RECORDING, RETURN TO:  
Brown & Patrick, P.C.  
Attorneys and Counselors at Law  
2399 So. Orchard, Ste 204  
Boise, ID 83705

COPY

Instrument # 115224  
COUNCIL, ADAMS, IDAHO  
2007-09-20 12:44:06 No. of Pages: 1  
Recorded for : BROWN & PATRICK  
SHERRY WARD Fee: 3.00  
Ex-Officio Recorder Deputy *Sherry Ward*  
Index to MEMORANDUM

**MEMORANDUM OF TRUST**

KNOW THAT, Florence C. Campbell, having an address at 511 E. Warm Springs Ave., Boise, ID 83712, as Grantor, created a revocable trust, known as Florence C. Campbell Living Trust U/T/A dated September 17, 2007, by executing a Declaration of Trust, naming Florence C. Campbell, having an address as aforesaid, as primary beneficiary and initial trustee (referred to as the "Trustee"), and Charles F. Campbell, followed by Ambia J. Baker and Margaret Anne Childers, or the survivor of the two, as successor co-Trustees, respectively, as successor Trustees, in the event of the death of the Grantor, or her physical or mental incapacity.

This Memorandum of Trust is executed as evidence of the existence of the foregoing Declaration of Trust. Any person may rely upon this Memorandum of Trust as evidence of the existence of said Declaration of Trust, and is relieved of any obligation to verify that any transaction entered into by a Trustee or successor Trustee thereunder is consistent with the terms and conditions of said Declaration of Trust.

The Declaration of Trust and the trusts created thereunder may be referred to by the name: "Florence C. Campbell Living Trust U/T/A dated September 17, 2007." Any transfers to the Declaration of Trust or any trust thereunder may refer to the aforesaid name or to "Florence C. Campbell as Trustee under Florence C. Campbell Living Trust dated September 17, 2007," with or without specifying any change in Trustee, or any other or future amendments to the Declaration of Trust.

IN WITNESS WHEREOF, the Grantor has executed this Memorandum of Trust as of this 17<sup>th</sup> day of September, 2007.

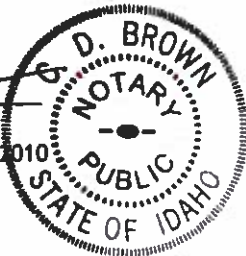
*Florence C. Campbell*  
Florence C. Campbell, Grantor

STATE OF IDAHO, COUNTY OF ADA, SS.:

On this 17<sup>th</sup> day of September, 2007, before me, the undersigned notary public, personally appeared Florence C. Campbell, known to me to be the person who executed the foregoing Memorandum of Trust, and acknowledged to me that he executed the same.

IN WITNESS WHEREOF I hereunto set my hand and affixed my official seal this 17<sup>th</sup> day of September, 2007.

*D. Brown*  
Notary Public  
My commission expires on 7/22/2010



AFTER RECORDING, RETURN TO:  
Christian D. Brown, P.C.  
Attorney and Counselor at Law  
2399 So. Orchard, Ste 204  
Boise, ID 83705

FOR RECORDER'S USE

Instrument # 115225

COUNCIL, ADAMS, IDAHO

2007-09-20

12:45:06 No. of Pages: 1

Recorded for: BROWN & PATRICK

SHERRY WARD

Fee: 3.00

Ex-Officio Recorder Deputy

Index to DEED

**ESTATE PLAN DEED**

THIS INDENTURE, made as of this 17<sup>th</sup> day of September, 2007, between Florence C. Campbell, having an address at 511 E. Warm Springs Ave., Boise, ID 83712, as the grantor hereunder (hereinafter referred to as the "Grantor"), and Florence C. Campbell, Trustee under the Declaration of Trust known as Florence C. Campbell Living Trust, U/T/A dated September 17, 2007, as the grantee hereunder (hereinafter referred to as the "Grantee").

WITNESSETH, that Grantor, in consideration of Ten Dollars and other valuable consideration, the receipt and sufficiency of which is hereby acknowledged, does hereby grant, convey and release unto Grantee and the heirs, personal representatives, executors, administrators, successors and assigns of Grantee forever,

The following described real property, situate, lying and being in Adams County and the State of Idaho, being more particularly described as follows:

T19N R2E Sec 18, E2W2NE4SE4 E2NE4SE4, 30 Acres, more or less, Adams County, Idaho, Parcel No. RP19N02E181200 A.

TOGETHER with the improvements, appurtenances and all the estate and rights of Grantor in and to said premises, TO HAVE AND TO HOLD the premises herein granted unto Grantee, and the successors and assigns of Grantee forever.

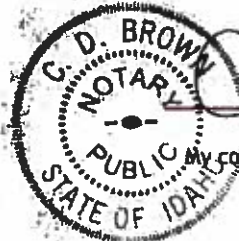
IN WITNESS WHEREOF, Grantor has duly executed this Deed on the date first above written.

*Florence C. Campbell*  
Florence C. Campbell  
Grantor

STATE OF IDAHO, COUNTY OF ADA, SS.:

On this 17<sup>th</sup> day of September, 2007, before me, C. D. Brown, the undersigned notary public, personally appeared Florence C. Campbell, known to me to be the person who executed the foregoing deed, and acknowledged to me that he executed the same.

IN WITNESS WHEREOF I hereunto set my hand and affixed my official seal this 17<sup>th</sup> day of September, 2007.



*C. D. Brown*  
Notary Public for ID  
My commission expires on 07/22/2010

INSTRUMENT NO. **112921**

Instrument # 112921

COUNCIL, ADAMS, IDAHO

2008-10-25

09:07:06 No. of Pages: 2

Recorded for: TIMBERLINE TITLE & ESCROW

MICHAEL FISK

Fee: \$6.00

Ex-Officio Recorder Deputy

Index to: POWER OF ATTORNEY

**POWER OF ATTORNEY**

I, Florence Carstarphen Campbell, grant my son, Charles Frederick Campbell, my power of attorney. This power of attorney becomes effective if or when I become physically and/or mentally incapacitated to handle my affairs. If, for any reason, he is unable to fulfill these duties, I grant this power of attorney to my daughters, Ambia Jane Baker and/or Margaret Anne Childers. The power of attorney covers my personal care and possible sale of my residence and property to cover the cost of this care.

The legal description of my residence is -

PARCEL DESCRIPTION: R1767000170

E 25 FT OF LOT 2 LOTS

3/4 W 36 FT OF LOT 9

E 25 FT OF LOT 10 BLK 8

#09393192 & VAC ALLEY ADJ

THOS DAVIS 3RD ADD

The mailing address is 511 Warm Springs Avenue. Boise, Idaho, 83712-6240

This power of attorney also covers the management and possible sale of 30 acres of pastureland in Adams County.

PARCEL NUMBER

RP19NO2E181200A

PARCEL DISCRIPTION:

T19N R2E SEC 18

E2W2NE4SE4 E2NE4SE4

30.0 AC.

This power of attorney also covers the sale of my annuity

CONTRACT NUMBER: 95509015

Type of Contract: Variable Investment Plan which also includes 72 shares of stock. The annuity and stock are in Prudential Insurance Company of America and Prudential Financial. My agent is Cathy Hardy, 960 Broadway Avenue. Boise, Idaho, 83704. Phone # 385-0739

My reason for writing this Power of Attorney is I have been experiencing Transient Ischemic Attacks which could be a precursor of a major stroke which could lead to the complete incapacitation of my body.

The authority granted herein shall include such acts as are reasonably required or necessary to carry out and perform the specific duties granted to my attorney-in-fact. My attorney-in-fact agrees to accept this appointment subject to the terms, and agrees to act in said capacity consistent with my best interests as his sole discretion deems advisable, and I hereby ratify all acts so carried out.

IN WITNESS WHEREOF, I have signed this Power of Attorney  
this 1st day of November 2005.

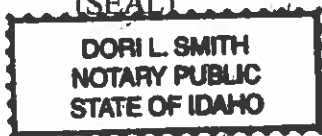
State of Idaho)  
County of Ada) ss.

Before me personally appeared Florence C Campbell who acknowledged the foregoing as her free act and deed, this 1st day of November 2005.

Nov 7 Amet

(SEAL)

My commission expires 1-15-2011



INSTRUMENT NO. **112920**

**COPY**

**QUITCLAIM DEED**

Instrument # **112920**

COUNCIL, ADAMS, IDAHO

2005-10-25

09:07:06 No. of Pages: 1

Recorded for: **TIMBERLINE TITLE & ESCROW**

**MICHAEL FISK**

Fee: 3.00

Ex-Officio Recorder Deputy

Index to DEED

FOR VALUE RECEIVED, Florence C Campbell does hereby convey, release, remise and forever quitclaim unto Florence C. Campbell and Charles F. Campbell, unmarried individuals, whose current address is 511 Warm Springs Ave., Boise, ID 83712, the following described premises to wit:

A PARCEL OF LAND SITUATED IN THE STATE OF IDAHO, COUNTY OF ADAMS, CURRENTLY OWNED BY FLORENCE C. CAMPBELL, HAVING A TAX IDENTIFICATION NUMBER OF RP19N02E181200A, AND FURTHER DESCRIBED AS: IN SECTION 18, TOWNSHIP 19 NORTH, RANGE 2 EAST, BOISE MERIDIAN, THE E ½ NE ¼ SE ¼ AND THE E ½ W ½ NE ¼ SE ¼

TO HAVE AND TO HOLD the said premises, with their appurtenances, unto the said Grantee, his heirs and assigns forever.

DATED this 15 day of December, 2005

Florence C Campbell  
Florence C Campbell

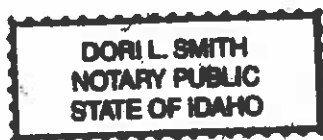
STATE OF IDAHO)

: ss.

County of Adams )

On this 15 day of December, 2005, before me the undersigned, a Notary Public in and for the State of Idaho, personally appeared Florence C. Campbell, known to me to be the person whose name is subscribed to the within instrument, and acknowledged to me that she executed the same.

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



Dori L. Smith  
NOTARY PUBLIC FOR IDAHO, Ada County  
Residence: 1000 Broadway Ave Boise ID 83700  
My commission Expires: 1-15-2011

**Instrument # 112919**

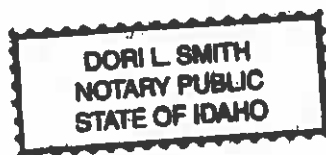
COUNCIL, ADAMS, IDAHO  
2008-10-25 08:07:08 No. of Pages: 2  
Recorded for: TIMBERLINE TITLE & ESCROW  
MICHAEL FISK Fee: 6.00  
Ex-Officio Recorder Deputy: *Samantha*  
Index to: AFFIDAVIT

**SAYS:**

- That the below-described property was community property at the time of his death: A PARCEL OF LAND SITUATED IN THE STATE OF IDAHO, COUNTY OF ADAMS, HAVING A TAX IDENTIFICATION NUMBER OF RP19N02E181200A, AND FURTHER DESCRIBED AS: IN SECTION 18, TOWNSHIP 19 NORTH, RANGE 2 EAST, BOISE MERIDIAN, THE E ½ NE ¼ SE ¼ AND THE E ½ W ¼ NE ¼ SE ¼

- Florence Campbell*  
Florence C Campbell  
511 Warm Springs Ave.  
Boise, Idaho 83712

On this 5th day of December, 2005, before me a notary public, personally appeared Florence C. Campbell, known or identified to me to be the person whose name is subscribed to the within instrument, and acknowledged to me that she executed the same.



*[Signature]*  
Notary Public for Idaho, Ada County  
Commission Expires 1-15-2011  
Residing @ 10003 Broadway Ave Boise ID 83706

CERTIFICATION OF VITAL RECORD

STATE OF IDAHO

IDAHO DEPARTMENT OF HEALTH AND WELFARE  
CENTER FOR VITAL STATISTICS AND HEALTH POLICY

FEB 11 1999

CERTIFICATE OF DEATH

0854

|                 |  |                                      |  |                                            |              |               |                   |
|-----------------|--|--------------------------------------|--|--------------------------------------------|--------------|---------------|-------------------|
| NAME            |  | CHARLES L. CAMPBELL                  |  | Sex                                        | Male         | Date of Birth | February 11, 1999 |
| AGE             |  | 79                                   |  | Date of Death                              | Jan. 4, 1920 | Boise, Idaho  |                   |
| MARRIAGE        |  | Married                              |  | Spouse: Florence Carstarphen, Photographer |              |               |                   |
| PLACE OF BIRTH  |  | Idaho                                |  | Place of Death: Boise, Idaho               |              |               |                   |
| HOSPITAL        |  | St. Luke's Regional Medical Ct.      |  | Boise, Ada                                 |              |               |                   |
| OCCUPATION      |  | Photographer                         |  | 511 West Springs Ave. 83712                |              |               |                   |
| RACE            |  | White                                |  | 12                                         |              |               |                   |
| MOTHER          |  | Marguerite Allen                     |  | Oregon                                     |              |               |                   |
| FATHER          |  | Willard Springs                      |  | Idaho                                      |              |               |                   |
| BURIAL          |  | Riverside Cemetery                   |  | Boise, Idaho                               |              |               |                   |
| FUNERAL HOME    |  | Funeral Home                         |  | Boise, Idaho                               |              |               |                   |
| CAUSE OF DEATH  |  | Embolism                             |  | 1 week                                     |              |               |                   |
| MANNER OF DEATH |  | Natural                              |  | Accident                                   |              |               |                   |
| SIGNATURE       |  | J. P. Smith                          |  | M-7080 2-12-99                             |              |               |                   |
| ADDRESS         |  | 520 S. Eagle Rd., Meridian, ID 83642 |  | 208-381-6400                               |              |               |                   |
| DATE ISSUED     |  | FEB 11 1999                          |  | JAMES SMITH, REGISTRAR                     |              |               |                   |



This is a true and correct reproduction of the document as duly registered and placed on record in the IDAHO CENTER FOR VITAL STATISTICS AND HEALTH POLICY.

DATE ISSUED FEB 11 1999

JAMES SMITH  
REGISTRAR

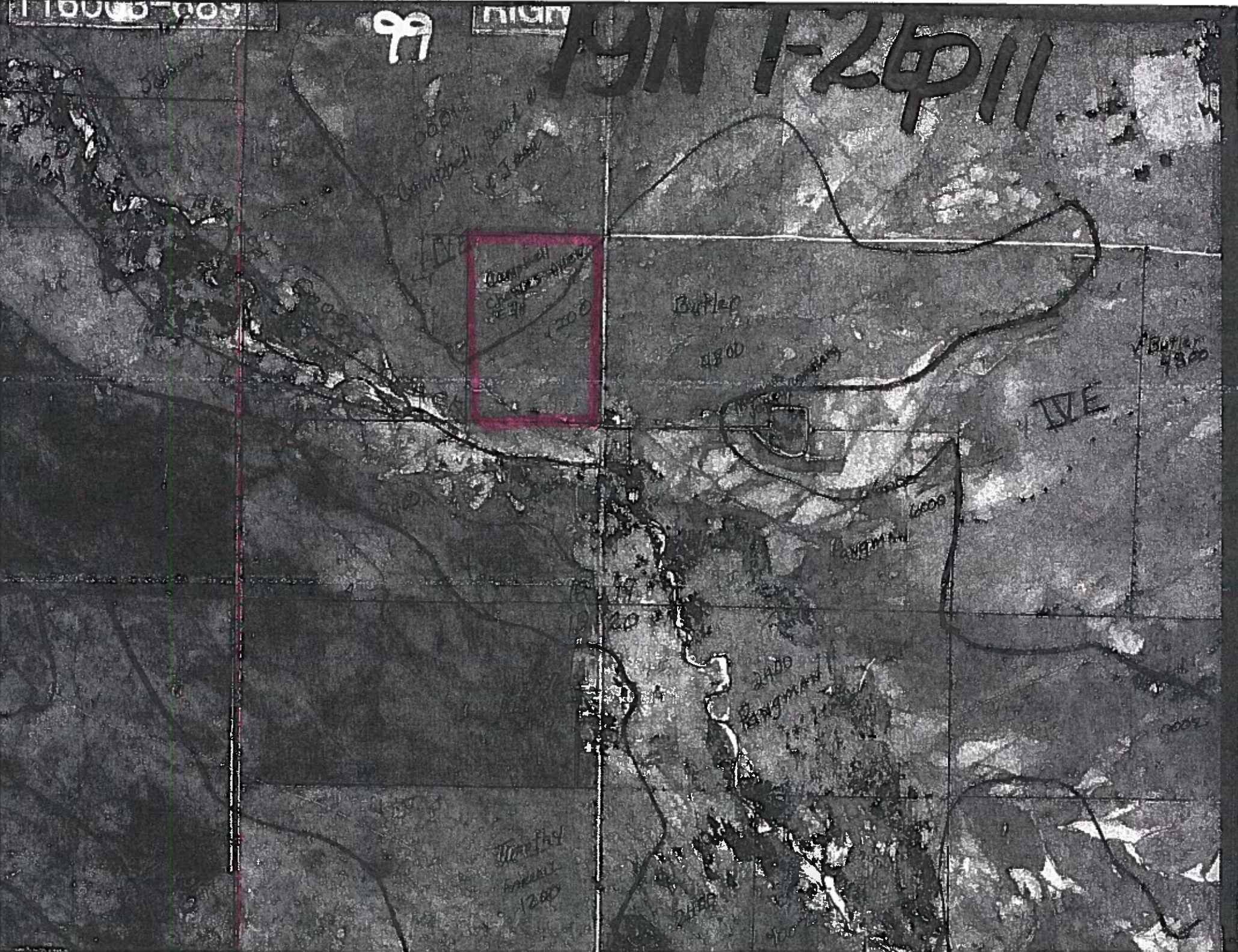
ANY ALTERATION OR ERASURE VOID THIS CERTIFICATE

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State of Idaho

## DEPARTMENT OF WATER RESOURCES

Western Region • 2735 Airport Way • Boise, Idaho 83705-5082

Phone: (208) 334-2190 • Fax: (208) 334-2348 • Website: [www.idwr.idaho.gov](http://www.idwr.idaho.gov)

C.L. "BUTCH" OTTER  
Governor

GARY SPACKMAN  
Director

June 22, 2016

JOHN WELCH  
PO BOX 487  
NEW MEADOWS ID 83654

**RE: Notice of Ownership Change in Water Right No's:**

**78-2040B & 78-4128B**

Dear Applicants,

The Department acknowledges the receipt of correspondence changing ownership of the above referenced water rights to you. The Department has modified its records to reflect the change in ownership and has enclosed computer-generated reports 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 Sections 42-222 and 42-223, Idaho Code.

Please 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. Change reporting forms are available from any office of the Department, or at [www.idwr.idaho.gov](http://www.idwr.idaho.gov).

Thank you for your patience and cooperation. Please call me if you have any questions concerning the enclosed information.

Sincerely,

A handwritten signature in black ink, appearing to read 'Chad Jones', is written over a horizontal line.

Chad Jones  
Office Specialist II  
Western Regional Office  
208-334-2190

Enclosures