

**MINIMUM REQUIREMENTS CHECKLIST
TO BE SUBMITTED WITH APPLICATION FOR TRANSFER**

An application for transfer must be prepared in accordance with the minimum requirements listed below to be acceptable for processing by the Department. Incomplete applications will be returned. The instructions, fee schedule, Part 2A reports and additional Part 2B forms are available from any Department office or on the Department's website at www.idwr.idaho.gov.

Name of Applicant(s) Andrew Merlette and Jake Merlette

Check whether each item below is *attached* (Yes) or *not applicable* (N/A) for the proposed transfer.

Yes ☒ N/A ☐ * Means the item is always required and must be included with the application.

- ☒ * Completed Application for Transfer of Water Right form, Part 1.
- ☒ * Signature of applicant(s) or applicant's authorized representative on Application for Transfer Part 1. Include evidence of authority labeled Attachment #3 (see below) if signed by representative.
- ☒ * Application for Transfer Part 2A. Attach a Part 2A report describing each water right in the transfer as currently recorded.
- ☐ ☒ Complete and attach an Application for Transfer Part 2B for each water right for which only a portion is proposed to be changed through this transfer application.
- ☒ * Application for Transfer Part 3A is always required (see Attachment #7a below); Parts 3B and 3C must be completed for transfer applications proposing to change the nature of use of the water right(s) or proposing changes to supplemental right(s).
- ☒ * Correct fee submitted with transfer application form. (Fee schedule is on website and instructions for application for transfer.)

Attachments to Application - Label each attachment with the corresponding number shown below as Attachment #1-10.

- ☐ ☒ #1 If the applicant is a business, partnership, organization, or association, and not currently registered in the State of Idaho as a business entity, attach documentation identifying officers authorized to sign or act on behalf of right holder. (See Part 1.)
- ☒ ☐ #2a Water Right ownership documentation if Dept. records do not show the applicant as the current water right owner. **
- ☐ ☒ #2b If the ownership of the water right will change as a result of the proposed transfer to a new place of use, attach documentation showing land and water right ownership at the new place of use. Include documentation for all affected land and owner(s).**
** Additional fee(s) required for water right ownership changes; see fee schedule.
- ☒ ☐ #3 Documentation of authority to make the change if the applicant is not the water right owner.
- ☐ ☒ #4 Power of Attorney or documentation providing authority to sign or act on the applicant's behalf. (See Part 1.)
- ☐ ☒ #5 If the transfer application proposes to change the point of diversion for a water right affecting the Eastern Snake Plain Aquifer (ESPA), attach the results of an ESPA analysis and a detailed mitigation plan to offset any depletions to hydraulically connected reaches of the Snake River. ESPA transfer spreadsheet and model grid labeled cells are available on the Department's website at www.idwr.idaho.gov/WaterManagement/WaterRights/WaterRightTransfers/resources.htm.
- ☐ ☒ #6 Notarized statement of agreement or a statement on official letterhead signed by an authorized representative from each lien holder or other entity with financial interest in the water right(s) or land affected by the proposed transfer. (See Part 1.5.c.)
- ☒ * #7a Attach a map identifying the proposed point(s) of diversion, place(s) of use, and water diversion and distribution system details as described on the application. Include legal description labels. If only a portion of the right is proposed to be changed, identify the current location of the part of the existing right(s) proposed to be changed. (See Part 3A.)
- ☐ ☒ #7b If the transfer application proposes to change the place or purpose of use of an irrigation right attach a Geographic Information System (GIS) shape file, or an aerial photo or other image clearly delineating the location and extent of existing acres and changes to the place of use. If some or all of any right is leased to the Water Supply Bank, you must also show the specific location and/or acres to be idled at the new, proposed place of use to satisfy lease requirements.
- ☐ ☒ #8a If the transfer application proposes to change the nature of use or period of use for one or more rights, provide documentation describing the extent of historic beneficial use for the water rights proposed to be transferred and document how enlargement will be avoided. (See Part 3B.) Additional fee required for proposed changes to nature of use; see fee schedule.
- ☐ ☒ #8b If the transfer application proposes to change the place of use of a supplemental irrigation right, provide documentation regarding the historic use of the supplemental right(s) and availability or reliability of the primary right(s) being supplemented, both before and after the proposed change. (See Part 3C.)
- ☐ ☒ #9 Water Supply Bank information for all rights proposed for transfer and currently leased to the Bank. (Attachment WSB)
- ☐ ☒ #10 Other. Please describe: _____

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

**APPLICATION FOR TRANSFER OF WATER RIGHT
PART 1**

Name of Applicant(s) Andrew Merlette and Jake MerlettePhone 208-709-1566Mailing address 124W 50S BLACKFOOT ID 83221Email fbigdaddy92@gmail.com

- ☐ If applicant is not an individual and not registered to do business in the State of Idaho, attach documentation identifying officers authorized to sign or act on behalf of the applicant. Label it Attachment #1.
- ☐ Attach water right ownership documentation if Department records do not show the transfer applicant as the current water right owner. Label it Attachment #2a.
- ☐ If the ownership of the water right will change as a result of the proposed transfer to a new place of use, attach documentation showing land and water right ownership at the new place of use. Include documentation for all affected land and owner(s). Label it Attachment #2b.
- ☐ Attach documentation of authority to make the proposed change if the applicant is not the water right owner. Label it Attachment #3.

Provide contact information below if a consultant, attorney, or any other person is representing the applicant in this transfer process.

☐ No Representative

Name of Representative _____ Phone _____

Mailing address _____ Email _____

- ☐ Send all correspondence for this application to the representative and not to the applicant.
OR
- ☐ Send original correspondence to the applicant and copies to the representative.
- ☐ The representative may submit information for the applicant but is not authorized to sign for the applicant.
OR
- ☐ The representative is authorized to sign for the applicant. Attach a Power of Attorney or other documentation providing authority to sign for the applicant and label it Attachment #4.

I hereby assert that no one will be injured by the proposed changes and that the proposed changes do not constitute an enlargement in use of the original right(s). The information contained in this application is true to the best of my knowledge. I understand that any willful misrepresentations made in this application may result in rejection of the application or cancellation of an approval.



Signature of Applicant or Authorized Representative

Jake Merlette
Print Name and Title if applicable

7-28-15
Date



Signature of Applicant or Authorized Representative

Andrew Merlette
Print Name and Title if applicable

7-28-15
Date

A. PURPOSE OF TRANSFER

1. ☒ Change point of diversion ☐ Add diversion point(s) ☒ Change place of use
☐ Change nature of use ☐ Change period of use ☒ Other Ownership Change

2. Describe your proposal in narrative form, including a detailed description of non-irrigation uses to justify amounts transferred (i.e. number of stock, etc.), and provide additional explanation of any other items on the application. Attach additional pages if necessary and label it Part 1A.2.

The point of diversion and place of use legal description under 27-10273 and 27-10274 are in error. The point of diversion and place of use have always been located in the SENE of 3S, 35E, Section 2. This transfer will change the point of diversion and place of use for rights 27-10273 and 27-10274. The ownership will be updated.

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

APPLICATION FOR TRANSFER OF WATER RIGHT
PART 1 Continued

B. DESCRIPTION OF RIGHTS AFTER THE REQUESTED CHANGES. IF THE RIGHTS ARE BEING SPLIT, DESCRIBE PORTIONS TO BE CHANGED AS THEY WOULD APPEAR AFTER THE REQUESTED CHANGES.

1.	Right Number	Amount (cfs/ac-ft)	Nature of Use	Period of Use	Source & Tributary
All or Part ☒ ☐	27-10273	0.04 cfs	Domestic	1/01 to 12/31	Ground Water
☒ ☐	27-10274	0.04 cfs	Domestic	1/01 to 12/31	Ground Water
☐ ☐				to	
☐ ☐				to	
☐ ☐				to	
☐ ☐				to	
☐ ☐				to	
☐ ☐				to	
☐ ☐				to	
☐ ☐				to	

Total authorized under rights 0.08 cfs and/or _____ acre-feet.

2. Total amount of water proposed to be transferred or changed 0.08 cubic feet per second and/or _____ acre-feet per year.

3. Point(s) of Diversion:

- ☐ No changes to point(s) of diversion are proposed - the following chart is therefore not completed. (Proceed to #4.)
- ☐ Attach Eastern Snake Plain Aquifer analysis if this transfer proposes to change a point of diversion affecting the ESPA. Label it Attachment #5.

New ?	Lot	¼	¼	¼	Sec	Twp	Rge	County	Source	Local name or tag #
			SE	NE	2	03S	35E	Bingham	Ground Water	

4. Place of use: (If irrigation, identify with number of acres irrigated per ¼ ¼ tract.)

- ☐ No changes to place of use are proposed - the following chart is therefore not completed. (Proceed to #5.)

Twp	Rge	Sec	NE ¼				NW ¼				SW ¼				SE ¼				Acres Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
03S	35E	2				D													
Total Acres (for irrigation use)																			

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

APPLICATION FOR TRANSFER OF WATER RIGHT
PART 1 Continued

5. General Information:

- a. Describe the complete diversion system, including how you will accommodate a measuring device and lockable controlling works should they be required now or in the future:

Submersible pump to two domestic homes located on the same property

- b. Who owns the property at the point(s) of diversion? Applicants

If other than the applicant, describe the arrangement enabling the applicant to access the property for the diversion system:

- c. Are the lands from which you propose to transfer the water right subject to any liens, deeds of trust, mortgages, or contracts? If yes, ☐ attach a notarized statement from the holder of the lien, deed of trust, mortgage or contract agreeing to the proposed changes on official letterhead signed by an authorized representative. Label it Attachment #6. List the name of the entity and type of lien:

It is the applicant's responsibility to provide notice to lien holder, trustee, mortgagor, or contract holder of the proposed changes that may impact or change the value of the water rights or affected real property. Any misrepresentation of legal encumbrance on this application may result in rejection of the application or cancellation of an approval.

- d. Are any of the water rights proposed for transfer currently leased to the Water Supply Bank?

If yes, ☐ complete Attachment WSB.

- e. Describe the effect on the land now irrigated if the place or purpose of use is changed pursuant to this transfer:

- f. Describe the use of any other water right(s) for the same purpose or land, or the same diversion system as right(s) proposed to be transferred at both the existing and proposed point(s) of diversion and place(s) use:

27-10275

- g. To your knowledge, has/is any portion of the water right(s) proposed to be changed:

Yes No

- ☐ ☒ undergone a period of five or more consecutive years of non-use,
☐ ☒ currently leased to the Water Supply Bank,
☐ ☒ currently used in a mitigation plan limiting the use of water under the right, or
☐ ☒ currently enrolled in a Federal set-aside program limiting the use of water under the rights?

If yes, describe:

Close

IDAHO DEPARTMENT OF WATER RESOURCES
Water Right Report

7/27/2015

WATER RIGHT NO. 27-10273

<u>Owner Type</u>	<u>Name and Address</u>
Current Owner	GRANT F CHRISTENSEN 122 W 50 S BLACKFOOT, ID 83221 (208)785-2114
Current Owner	MARCIA J CHRISTENSEN 124 W 50 S BLACKFOOT, ID 83221 (208)785-2114

Priority Date: 12/31/1905

Basis: Decreed

Status: Active

<u>Source</u>	<u>Tributary</u>
GROUND WATER	

<u>Beneficial Use</u>	<u>From</u>	<u>To</u>	<u>Diversion Rate</u>	<u>Volume</u>
DOMESTIC	1/01	12/31	0.04 CFS	
Total Diversion			0.04 CFS	

Location of Point(s) of Diversion:

GROUND WATER|SWSESE|Sec. 02|Township 03S|Range 35E|BINGHAM County

Place(s) of use:

8 0 2 9 4

Place of Use Legal Description: DOMESTIC BINGHAM County

<u>Township</u>	<u>Range</u>	<u>Section</u>	<u>Lot</u>	<u>Tract</u>	<u>Acres</u>	<u>Lot</u>	<u>Tract</u>	<u>Acres</u>	<u>Lot</u>	<u>Tract</u>	<u>Acres</u>	<u>Lot</u>	<u>Tract</u>	<u>Acres</u>
03S	35E	2		SESE										

Conditions of Approval:

1. N13 THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000 GALLONS PER DAY.
2. N11 THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A DETERMINATION OF HISTORICAL BENEFICIAL USE.
3. RP 0357600

Dates:

Licensed Date:

Decreed Date: 04/23/1999

Enlargement Use Priority Date:

Enlargement Statute Priority Date:

Water Supply Bank Enrollment Date Accepted:

Water Supply Bank Enrollment Date Removed:

Application Received Date:

Protest Deadline Date:

Number of Protests: 0

Other Information:

State or Federal: S

Owner Name Connector: OR

Water District Number:

Generic Max Rate per Acre:

Generic Max Volume per Acre:

Civil Case Number:

Old Case Number:

Decree Plaintiff:

Decree Defendant:

Swan Falls Trust or Nontrust:

Swan Falls Dismissed:

DLE Act Number:

Cary Act Number:

Mitigation Plan: False

Close

80294

Close

IDAHO DEPARTMENT OF WATER RESOURCES
Water Right Report

7/27/2015

WATER RIGHT NO. 27-10274

<u>Owner Type</u>	<u>Name and Address</u>
Current Owner	GRANT F CHRISTENSEN 122 W 50 S BLACKFOOT, ID 83221 (208)785-2114
Current Owner	MARCIA J CHRISTENSEN 124 W 50 S BLACKFOOT, ID 83221 (208)785-2114

Priority Date: 12/31/1950

Basis: Decreed

Status: Active

<u>Source</u>	<u>Tributary</u>
GROUND WATER	

<u>Beneficial Use</u>	<u>From</u>	<u>To</u>	<u>Diversion Rate</u>	<u>Volume</u>
DOMESTIC	1/01	12/31	0.04 CFS	
Total Diversion			0.04 CFS	

Location of Point(s) of Diversion:

GROUND WATER|SWSESE|Sec. 02|Township 03S|Range 35E|BINGHAM County

Place(s) of use:

8 0 2 9 4

Place of Use Legal Description: DOMESTIC BINGHAM County

Township	Range	Section	Lot	Tract	Acres	Lot	Tract	Acres	Lot	Tract	Acres	Lot	Tract	Acres
03S	35E	2		SESE										

Conditions of Approval:

1. N13 THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000 GALLONS PER DAY.
2. N11 THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A DETERMINATION OF HISTORICAL BENEFICIAL USE.
3. RP 0357600

Dates:

Licensed Date:

Decreed Date: 04/23/1999

Enlargement Use Priority Date:

Enlargement Statute Priority Date:

Water Supply Bank Enrollment Date Accepted:

Water Supply Bank Enrollment Date Removed:

Application Received Date:

Protest Deadline Date:

Number of Protests: 0

Other Information:

State or Federal: S

Owner Name Connector: OR

Water District Number:

Generic Max Rate per Acre:

Generic Max Volume per Acre:

Civil Case Number:

Old Case Number:

Decree Plaintiff:

Decree Defendant:

Swan Falls Trust or Nontrust:

Swan Falls Dismissed:

DLE Act Number:

Cary Act Number:

Mitigation Plan: False

Close

80294

**STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES**

APPLICATION FOR TRANSFER OF WATER RIGHT

PART 3

A. PLAT MAP (See Part 3A of Instructions for application for transfer for complete requirements.)

- ☒ Attach a map of the diversion, measurement, control, and distribution system. Label it Attachment #7a.
- ☐ If the transfer application proposes to change the place or purpose of use of an irrigation right attach a Geographic Information System (GIS) shape file, or an aerial photo or other image clearly delineating the location and extent of existing acres and changes to the place of use. Label it Attachment #7b.

If the place of use currently consists of a permissible place of use, then the attachment is not required if the application contains a clear statement that the boundaries for the place of use are not proposed to be changed by the transfer and the total number of irrigated acres within the place of use before and after the transfer is clearly stated.

If any part of the irrigation water right is leased to the Water Supply Bank, you must also specify the location and number of acres that will remain idled for the duration of the lease contract at the new, proposed place of use.

B. CHANGES IN NATURE OF USE (Water Balance)

- ☐ If you propose to change the nature of use or period of use of all or part of the right(s) listed in this application, attach documentation describing the extent of historic beneficial use of the portion of the right(s) proposed to be changed. Also attach documentation showing that the portion of the right(s) to be changed will not be enlarged in rate, volume, or consumptive use through the proposed change. Label it Attachment #8a.

C. PLACE OF USE CHANGES TO SUPPLEMENTAL IRRIGATION RIGHTS

- ☐ If you propose to change the place of use of a supplemental irrigation right, answer below and attach supporting documentation. Label it Attachment #8b.

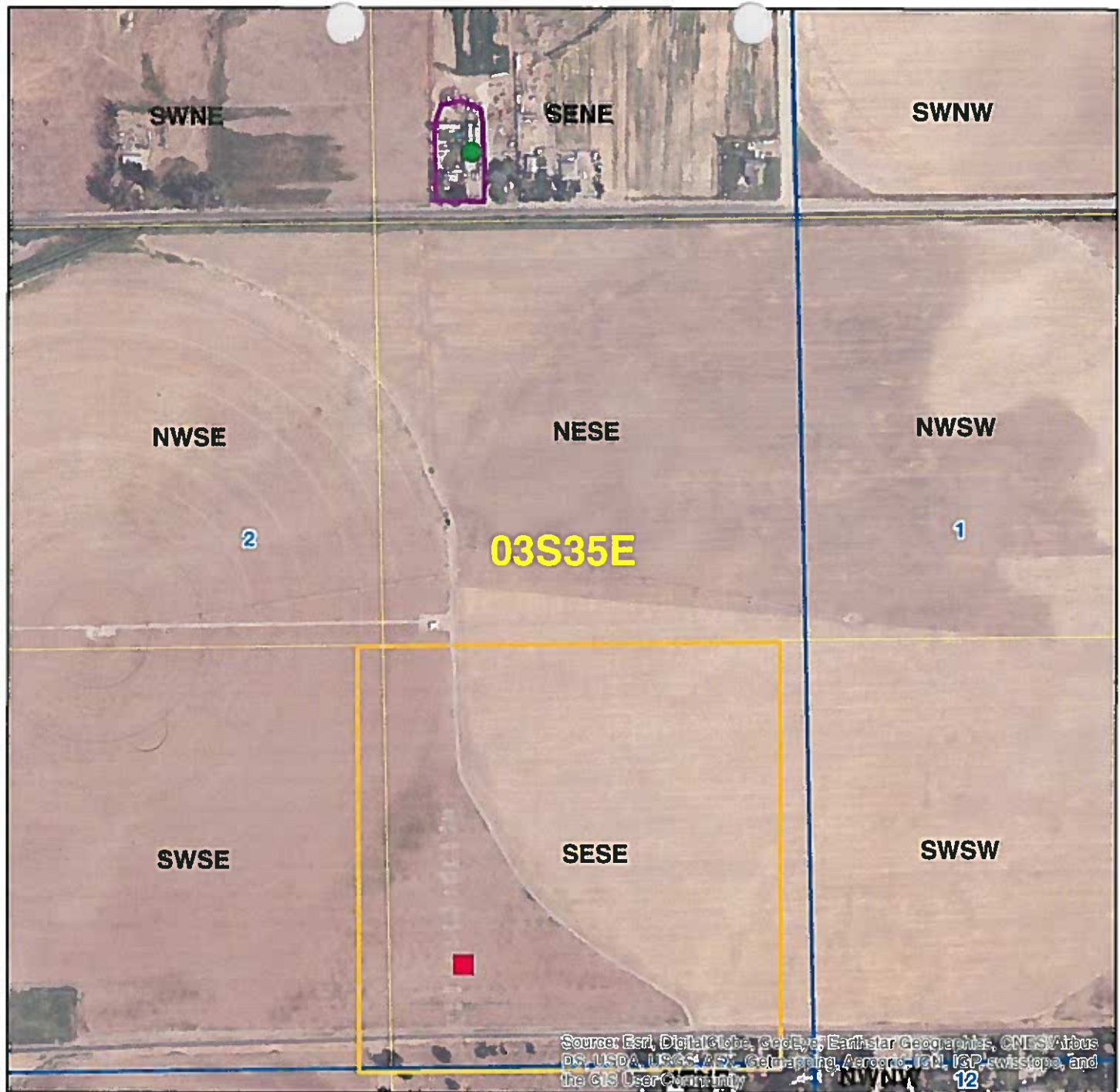
Describe how the supplemental water rights have been used historically in conjunction with other water rights at the existing place of use. Describe the time during the irrigation season that the supplemental rights have been used. Include information about the availability or reliability of the primary right(s) being supplemented, both before and after the change. If the applicant is proposing to change a supplemental irrigation right to a primary right, provide the information required on Part 3B above:

[illegible]**FOR DEPARTMENT USE ONLY**

Transfer contains _____ pages and _____ attachments.

Received by _____ Date 7/29/15 Preliminary check by _____ Date _____
 Fee paid 200- Date 7/29/15 Received by SC Receipt # E041313
 Add'l fee paid 50- c/o Date 7/29/15 Received by SC Receipt # E041313

Check all that apply: Attachment WSB ☐ (copy sent to state office) Lessor Designation form ☐ &/or W-9 ☐ (originals to state office)



- Current_Point_of_Diversion
- Actual POD
- Current Place of Use
- Actual Place of Use
- Township/Range
- Sections
- QQ

0 270 540 1,080 Feet

1 inch = 464 feet



80294

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECEIVED

JUL 29 2015

Department of Water Resources
Eastern 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?
27-10273	Yes ☐	Yes ☐		Yes ☐	Yes ☐
27-10274	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐

2. Previous Owner's Name: Grant Christensen; Marcia Christensen
Name of current water right holder/claimant
3. New Owner(s)/Claimant(s): Andrew G. Merlette; Jake J. Merlette
New owner(s) as listed on the conveyance document

Mailing address: 124 W 50S City: BLACKFOOT State: ID ZIP: 83221

Telephone: 208-709-1566 Email: bigdaddy92@gmail.com

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: 7/10/2015
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.

8. Signature: [Signature] Title, if applicable: _____ Date: 7-28-15
- Signature: [Signature] Title, if applicable: _____ Date: 7-28-15

For IDWR Office Use Only:

Received by: 3C Date: 7/29/15 Receipt No. 8041313 Receipt Amt. 50-

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: _____

80294

Cathy R. Hjelm
118 West 50 South
Blackfoot, Idaho 83221

Instrument # 668655

BINGHAM COUNTY

7-10-2015 09:01:30 AM No. of Pages: 2

Recorded for : 4654 CATHY R. HJELM

PAMELA W. ECKHARDT

Ex-Officio Recorder Deputy

Fee: 13.00



Space Above This Line for Recorder's Use Only

QUIT CLAIM DEED

Date: July 10, 2015

For Value Received

Mike C. Merlette and Melba Gayle Merlette of 95 North 100 West, Blackfoot, Bingham County Idaho 83221 and Roy A. Hjelm, Jr and Cathy R. Hjelm of 118 West 50 South, Blackfoot, Bingham County Idaho 83221

do(es) hereby convey, release, remise, and forever quit claim unto and address is

Andrew G. Merlette of 124 West 50 South, Blackfoot, Bingham County Idaho 83221 and Jake J. Merlette of 120 West 50 South, Blackfoot, Bingham County Idaho 83221

herein after called the Grantee, the following described premises situated in Bingham County, Idaho, to-wit:

Part of the South ½ Northeast ¼ Section 2 Township 3 South Range 35 East B.M. Bingham County, Idaho described as:

Commencing at the Northeast corner of Section 2; thence S 00°00'00" W 2635.92 feet along the section line to the East ¼ corner of said section 2; thence S 89°48'20" W 965.61 feet (of Record S 89°47'00" W) Along the south line of the northeast ¼ to the southwest corner of lands as described in deed instrument 497851 and the point of beginning. Thence S 89°48'20" W 147.65 feet continuing along said south line (of Record 149.80 feet) to the southeast corner of senior deed as described in Book 56 Page 528; thence N 00°11'40" W 1168.86 feet along said senior deed line (of Record 1172 feet) to a point on the south line of Harmony Acres subdivision; thence N 89°52'43" E 187.52 feet along said south line of Harmony Acres being parallel with the north line of the northeast ¼; thence S 00°00'00" W 827.64 feet to a point on the north line of lands as described in deed instrument 497851; thence S 01°13'02" W 57.99 feet thence S 07°45'02" W 260.51 feet to a point on the west line of said deed; thence S 01°03'42" E 25.00 feet to the point of beginning.

Parcel contains 4.85 Acres more or less and is subject to a county road right of way along the south line of the northeast ¼

LEGAL DESCRIPTION IS BEING WRITTEN FOR INHERITANCE PURPOSES

Together with its appurtenances.

Roy A. Hjelm, Jr.
Roy A. Hjelm, Jr.

Michael C. Merlette
Michael C. Merlette

Cathy Rae Hjelm
Cathy Rae Hjelm

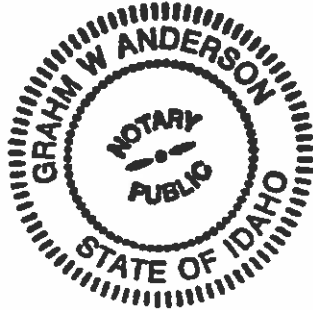
Melba Gayle Merlette
Melba Gayle Merlette

STATE OF Idaho)

SS.

COUNTY OF Bingham)

On this July 9 2015, before me, a Notary Public in and for said State, personally appeared Roy A. Hjelm JR. & Cathy Rae Hjelm and Michael C. Merlette & Melba Gayle Merlette 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 the same.



Graham W. Anderson
Notary Public for the State of Idaho

Residing at : Blackfoot

My Commission Expires: Jan 27, 2020

AFTER RECORDING MAIL TO:

Cathy R. Hjelm
118 West 50 South
Blackfoot, Idaho 83221

Instrument # 668652

BINGHAM COUNTY

7-10-2015 08:47:16 AM No. of Pages: 2

Recorded for : 4654 CATHY R. HJELM

PAMELA W. ECKHARDT

Fee: 13.00

Ex-Officio Recorder Deputy



Space Above This Line for Recorder's Use Only

QUIT CLAIM DEED

Date: July 10, 2015

For Value Received

Melba Gayle Merlette, a married person dealing with her sole and separate property, whose current address 95 N 100 W, Blackfoot, Bingham County, Idaho, and Cathy Rae Hjelm, a married person dealing with her sole and separate property, whose address is 118 W 50 S, Blackfoot, Bingham County, Idaho, as tenants in common.

**do(es) hereby convey, release, remise, and forever quit claim
unto and address is**

Mike C. Merlette and Melba Gayle Merlette of 95 North 100 West, Blackfoot, Bingham County Idaho 83221 and Roy A. Hjelm, Jr and Cathy R. Hjelm of 118 West 50 South, Blackfoot, Bingham County Idaho 83221

**herein after called the Grantee, the following described premises
situated in Bingham County, Idaho, to-wit:**

A portion of the Southeast 1/4 Northeast 1/4 of Section 2, Township 3 South, Range 35 East, Boise Meridian, Bingham County, Idaho Tax Parcel Number RP1398500, 124 West 50 South, Blackfoot, Idaho 83221. T-395 Less T-13394, described as:

Beginning at a point 838 feet West of the East Quarter Corner of said Section 2, and running thence West 277.4 feet; thence North 1171.5 feet; thence East 493.4 feet; thence South 524 feet; thence West 228 feet; thence South 1° East 646 Feet to the Place of Beginning.

EXCEPTING THEREFROM: Part of the Southeast V4 Northeast 1/4 of Section 2, Township 3 South, Range 35 East, Boise Meridian, Bingham County, Idaho described as:

Beginning at a point that is South 00°00'00" East 2635.92 feet along the Section line to the East Vi corner and South 89°47'00" West 841.73 feet along the East-West center section line of said Section 2 from the Northeast corner of said Section 2 to the True Point of Beginning and running thence South 89°47'00" West 107.87 feet along said East-West center section line, thence North 01°03'42" West 403.64 feet; thence North 89°47'00" East 107.55 feet to an existing fence line; thence South 01°03'42" East 403.64 feet along said existing fence line to the Point of Beginning.

Parcel contains 9 acres more or less.

Together with its appurtenances.

Melba Gayle Merlette
Melba Gayle Merlette

Cathy Rae Hjelm
Cathy Rae Hjelm

STATE OF Idaho)

SS.

COUNTY OF Bingham)

On this July 9 2015, before me, a Notary Public in and for said State, personally appeared Melba Gayle Merlette & Cathy Rae Hjelm 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 the same.



Graham W. Anderson
Notary Public for the State of Idaho

Residing at : Blackfoot

My Commission Expires: Jan 27, 2020

668652

WARRANTY DEED

461365

FOR VALUE RECEIVED, WILLIAM S. BOYER and LORENE S. BOYER, husband and wife,
of Blackfoot, Bingham County, State of Idaho,

the Grantors, do hereby grant, bargain, sell and convey unto GRANT F. CHRISTENSEN and
MARCIA J. CHRISTENSEN, husband and wife, of Blackfoot, Bingham County,
State of Idaho,

the Grantees, the following described premises, to-wit:

Beginning at a point 838 feet West of the East Quarter corner
of Section Two in Township Three South of Range Thirty-five
East Boise Meridian, in Bingham County, Idaho; and running
thence West 277.4 feet; thence North 1171.5 feet; thence
East 493.4 feet; thence South 524 feet; thence West 228 feet;
thence South 1° East 646 feet to the place of beginning;

Together with the ditches and water rights therefor and
particularly 3½ shares of stock in Corbett Slough Ditch
Company, and 18 shares of stock in the Barnard Lateral Company.

RECORDED AT THE REQUEST OF
Grant Christensen
IDAHO 505
Box 578
Blackfoot ID 83321
FEE 300 DEP 02
98 JAN 30 PM 1:16
BINGHAM COUNTY RECORDER
BLACKFOOT, IDAHO

TO HAVE AND TO HOLD the said premises, with their appurtenances, unto the said Grantees,
their heirs and assigns forever. And the said Grantors do hereby covenant to and
with the said Grantees, that they are the owners in fee simple of said premises; that said
premises are free from all encumbrances except as hereinabove mentioned, and that they will warrant
and defend the same from all lawful claims whatsoever.

Dated: June 26, 1968

461365

STATE OF IDAHO, COUNTY OF Bingham
On this 2nd day of July, 1968
before me, a Notary Public in and for said State, personally
appeared WILLIAM S. BOYER and
LORENE S. BOYER, husband and wife,

known to me to be the persons whose names are
subscribed to the within instrument, and acknowledged to me
that they executed the same.

Edna R. Caffee
Notary Public
Residing at Blackfoot, Idaho
Comm. Expires January 31, 1970

STATE OF IDAHO, COUNTY OF
I hereby certify that this instrument was filed for record at the
request of

at _____ minutes past _____ o'clock m.,
this _____ day of _____,
19 _____, in my office, and duly recorded in the OFFICIAL RECORDS,
Vol. _____

Ex-Officio Recorder

By _____ Deputy.
Fees \$ _____
Mail to: _____

INSTRUMENT NO.

80294

QUITCLAIM DEED

For Value Received PATRICIA J. SHEPPARD now known as PATRICIA J. GIBSON, a married woman dealing with her sole and separate property

do hereby convey, release, remise and forever quit claim unto GRANT F. CHRISTENSEN and MARCIA J. CHRISTENSEN, husband and wife

whose address is: 1222 W 50 S, Blackfoot, Id 83221

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

Beginning at a point 838 feet West of the East Quarter corner of Section Two in Township Three South, of Range 35, East Boise Meridian, in Idaho; and running thence West 277.4 feet, thence North 1171.5 feet; thence East 493.4 feet; thence South 524 feet; thence West 228 feet; thence South 1° East 646 feet to the place of beginning;

Together with the ditches and water rights therfore and particularly 3 1/2 shares of stock in Corbett Slough Ditch company, and 18 shares of stock in the Barnard Lateral Company.

together with their appurtenances.

Dated: February 10, 1998

Patricia J. Gibson
PATRICIA J. GIBSON

FIRST AMERICAN TITLE COMPANY

RECORDED AT THE REQUEST OF

98 FEB 10 PM 4:31

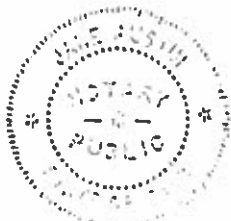
FEE 3.00

BINGHAM COUNTY RECORDER
BLACKFOOT, IDAHO

STATE OF IDAHO)
 : ss
COUNTY OF BINGHAM)

On this 10 day of FEBRUARY, in the year 1998, before me, a Notary Public in and for said State, personally appeared PATRICIA J. GIBSON, known or identified to me to be the person whose name subscribed to the within Instrument, and acknowledged to me that she executed the same.

Jane Austin
Notary Public of Idaho
Residing at Blackfoot, Idaho
Commission Expires: 9-2-1999



Instrument # 620388

BINGHAM COUNTY

8-5-2010 09:01:41 No. of Pages: 2
Recorded for : #21034 BLASER SORENSEN
SARA J. STAUB Fee: 13.00
Ex-Officio Recorder Deputy

Send Tax Notices To:
Marcia J. Christensen
124 W 50 S
Blackfoot, ID 83221

DEED WITH LIFE ESTATE

GRANTOR: Marcia J. Christensen, a widow
of 124 W 50 S, Blackfoot, Bingham County, Idaho 83221

GRANTEE: Melba Gayle Merlette, a married person dealing with her sole and separate property, whose current address 95 N 100 W, Blackfoot, Bingham County, Idaho, and Cathy Rae Hjelm, a married person dealing with her sole and separate property, whose address is 118 W 50 S, Blackfoot, Bingham County, Idaho, as tenants in common.

FOR VALUE RECEIVED, Grantor does hereby grant, bargain, sell and convey

unto Grantee the following premises described to wit:

A portion of the Southeast $\frac{1}{4}$ Northeast $\frac{1}{4}$ of Section 2, Township 3 South, Range 35 East, Boise Meridian, Bingham County, Idaho Tax Parcel Number RP1398500, 124 West 50 South, Blackfoot, Idaho 83221. T-395 Less T-13394, described as:

Beginning at a point 838 feet West of the East Quarter Corner of said Section 2, and running thence West 277.4 feet; thence North 1171.5 feet; thence East 493.4 feet; thence South 524 feet; thence West 228 feet; thence South 1° East 646 Feet to the Place of Beginning.

EXCEPTING THEREFROM: Part of the Southeast $\frac{1}{4}$ Northeast $\frac{1}{4}$ of Section 2, Township 3 South, Range 35 East, Boise Meridian, Bingham County, Idaho described as:

Beginning at a point that is South $00^{\circ}00'00''$ East 2635.92 feet along the Section line to the East $\frac{1}{4}$ corner and South $89^{\circ}47'00''$ West 841.73 feet along the East-West center section line of said Section 2 from the Northeast corner of said Section 2 to the True Point of Beginning and running thence South $89^{\circ}47'00''$ West 107.87 feet along said East-West center section line, thence North $01^{\circ}03'42''$ West 403.64 feet; thence North $89^{\circ}47'00''$ East 107.55 feet to an existing fence line; thence South $01^{\circ}03'42''$ East 403.64 feet along said existing fence line to the Point of Beginning.

Parcel contains 9 acres more or less.

TOGETHER with all and singular tenements, hereditaments, and appurtenances, thereunto belonging or in anywise appertaining, the reversion and reversions, remainder and remainders, rents and issues and profits thereof.

2

STATE OF IDAHO

IDAHO DEPARTMENT OF HEALTH AND WELFARE
BUREAU OF HEALTH POLICY AND VITAL STATISTICS
CERTIFICATE OF DEATH

DATE FILED BY STATE REGISTRAR:

STATE FILE NO.

Local Reg. No. 116

MORTICIAN: Complete/Verify and File Within 5 Days of Death	1. DECEDENT'S LEGAL NAME (Include AKA's if any) (First, Middle, Last, Suffix) <u>Grant Franklin Christensen</u>		2. SEX <u>Male</u>		3. SOCIAL SECURITY NUMBER <u>[REDACTED]</u>	
	4a. AGE-Last Birthday <u>76</u> (Years)		4b. UNDER 1 YEAR Months <u>0</u> Days <u>0</u>		4c. UNDER 1 DAY Hours <u>0</u> Minutes <u>0</u>	
	5. DATE OF BIRTH (Mo/Day/Yr) <u>November 26, 1927</u>		6. BIRTHPLACE (City and State, Territory, or Foreign Country) <u>St. Anthony, Idaho</u>			
	7a. RESIDENCE - STATE OR FOREIGN COUNTRY <u>Idaho</u>		7b. COUNTY <u>Bingham</u>		7c. CITY OR TOWN <u>Blackfoot</u>	
INFORMANT: Complete/Verify and File Within 72 Hours of Death	7d. STREET AND NUMBER <u>124 W. 50 S.</u>		7e. APT. NO. <u>83221</u>		7f. ZIP CODE <u>83221</u>	
	8. MARITAL STATUS AT TIME OF DEATH ☒ Married ☐ Married, but separated ☐ Widowed ☐ Divorced ☐ Never married ☐ Unknown		9. SURVIVORS OF COUSE'S NAME (If wife, give maiden name) <u>Marcia Jolynn McIntyre</u>			
	10. EVER IN U.S. ARMED FORCES? ☒ Yes ☐ No		11a. FATHER'S NAME (First, Middle, Last, Suffix) <u>Andrew Eskells Christensen</u>		11b. BIRTHPLACE (State, Territory, or Foreign Country) <u>Denmark</u>	
	12a. MOTHER'S MAIDEN NAME (First, Middle, Last, Suffix) <u>Ada Bathia Barnes</u>		12b. BIRTHPLACE (State, Territory, or Foreign Country) <u>Utah</u>		13. MAILING ADDRESS (Street and Number, City, State, Zip Code) <u>124 W. 50 S. Blackfoot, ID 83221</u>	
DISPOSITION Complete/Verify and File Within 72 Hours of Death	14. METHOD OF DISPOSITION ☒ Burial ☐ Cremation ☐ Donation ☐ Removal from Idaho ☐ Other (Specify)		15. PLACE OF DISPOSITION (Name and address of cemetery, crematory, other place) <u>Southeast Crematory 132 S. Shilling Ave. Blackfoot, ID 83221</u>		16. NAME AND COMPLETE ADDRESS OF FUNERAL FACILITY <u>Hanker Funeral Home 132 S. Shilling Ave. Blackfoot, ID 83221</u>	
	17a. SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH <u>[Signature]</u>		17b. LICENSE NUMBER (Or license) <u>M-734</u>		18. WAS CORONER CONTACTED? ☐ Yes ☒ No	
	19. PLACE OF DEATH (19-22) 20. IF DEATH OCCURRED IN A HOSPITAL: ☒ Inpatient ☐ ER/Outpatient ☐ DCA ☐ Hospice facility ☐ Nursing home/Long term care facility ☐ Decedent's home ☐ Other (Specify) 21. FACILITY NAME (If not facility, give street and number) <u>Bingham Memorial Hospital</u>					
	22. DATE OF DEATH (Mo/Day/Yr) (Spell month) <u>August 4, 2004</u>		23. TIME OF DEATH <u>0001</u> (24hr)		24. DATE PRONOUNCED DEAD (Mo/Day/Yr) (Spell month) <u>August 4, 2004</u>	
CERTIFIER: Complete Within 72 Hours of Death	25. PART I. Enter the chain of events - disease, 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. Enter only one cause on a line: IMMEDIATE CAUSE (Final disease or condition resulting in death) <u>Ventricular Tachycardia (palpitations)</u> 14 min					
	26. SEQUENTIALLY LIST CONDITIONS, IF ANY, LEADING TO THE CAUSE LISTED ON LINE 25. Enter the UNDERLYING CAUSE (Last disease or injury that initiated the events resulting in death) <u>Hypokalemia</u> 20 min <u>Bacterial pneumonia</u> 1 week <u>Chronic Lipoid Pneumonia</u> Years					
	27. PART II. Enter other significant conditions contributing to death but not resulting in the underlying cause given in Part I ☐ Yes ☒ No					
	28. DID TOBACCO USE CONTRIBUTE TO DEATH? ☐ Yes ☐ Probably ☒ No ☐ Unknown					
CORONER: Complete/Verify and File Within 72 Hours of Death	29. IF FEMALE (Aged 16-54): ☐ Not pregnant within past year ☐ Pregnant at time of death ☐ Not pregnant, but pregnant 43 days to 1 year before death ☐ Unknown if pregnant within the past year		30. MANNER OF DEATH ☒ Natural ☐ Accident ☐ Suicide ☐ Homicide ☐ Pending investigation ☐ Could not be determined			
	31. DATE OF INJURY (Mo/Day/Yr) (Spell month) <u>August 4, 2004</u>		32. TIME OF INJURY <u>0001</u> (24hr)		33. PLACE OF INJURY (Decedent's home, farm, street, construction site, parking lot, restaurant, forest, etc.) <u>Blackfoot, Idaho</u>	
	34. LOCATION OF INJURY: State <u>Idaho</u> City/Town or County <u>Blackfoot</u> Zip Code <u>83221</u>					
	35. DESCRIBE HOW INJURY OCCURRED. IF TRANSPORTATION INJURY, STATE THE TYPE(S) OF VEHICLE(S) INVOLVED (Automobile, pickup, motorcycle, ATV, bicycle, etc.) SPECIFY WHICH VEHICLE DECEDENT OCCUPIED, IF APPLICABLE					
IF DEATH WAS DUE TO OTHER THAN NATURAL CAUSE, THE CORONER MUST COMPLETE AND SIGN THE CERTIFICATE	36. TRANSPORTATION (See WAS DECEDENT: ☐ Driver/Operator ☐ Passenger ☐ Other (Specify)) INJURY ONLY ☐ Pedestrian ☐ Other (Specify)		37. WHAT SAFETY DEVICES DID DECEDENT USE/EMPLOY? ☐ Seat belt ☐ Child safety seat ☐ Helmet ☐ Air bag ☐ None ☐ Unknown			
	38. CERTIFIER (Check only one, based on official capacity for this certificate) ☒ PHYSICIAN - To the best of my knowledge, death occurred at the time, date, and place, and due to the natural cause(s)/manner stated. ☐ CORONER - On the basis of examination and/or investigation, in my opinion, death occurred at the time, date, and place, and due to the cause(s) and manner stated.		39. LICENSE NUMBER <u>M-8772</u>			
	Signature and Title of Certifier <u>Peagu J. Toro, M.D.</u>		40. DATE SIGNED <u>08/16/2004</u>			
	41. NAME, ADDRESS, AND ZIP CODE OF DECEDENT (Type or print) <u>Peagu Toro, M.D. 9 Airport Road Blackfoot, Idaho 83221</u>		42. CORONER'S SUBSEQUENT SIGNATURE IF NECESSARY: The coroner's signature in this item supersedes that of the physician, and the coroner becomes the certifier of record.			
43. I have reviewed and if necessary amended the medical section						
44a. REGISTRAR'S SIGNATURE <u>Rafael Peña</u>		44b. DATE SIGNED <u>08/19/2004</u>				

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

DATE ISSUED: August 19, 2004

This copy is not valid unless prepared on engraved border disclaimer plate and said plate of the Registrar

JANE S. SMITH
STATE REGISTRAR

80294

ASS 05 200

CERTIFICATE OF VITAL RECORDS

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

State of Idaho CERTIFICATE OF DEATH

DECEDENT		1. DECEDENT'S LEGAL NAME (Include AKA if any) (First, Middle, Last, Suffix) MARCIA JOLYNN CHRISTENSEN		2. SEX FEMALE		3. SOCIAL SECURITY NUMBER [REDACTED]	
4a. AGE-Last Birthday 82 (Year)		4b. UNDER 1 YEAR Months 0 Days 0		4c. UNDER 1 DAY Hours 0 Minutes 0		5. DATE OF BIRTH (Mo/Day/Yr) 06/05/1932	
6. BIRTHPLACE (City and State, Territory, or Foreign Country) IDAHO FALLS, IDAHO		7a. RESIDENCE - STATE OR FOREIGN COUNTRY IDAHO		7b. COUNTY BINGHAM		7c. CITY OR TOWN BLACKFOOT	
7d. STREET AND NUMBER 124 W. 50 S.		7e. APT. NO. 83221		7f. ZIP CODE 83221		7g. INSIDE CITY LIMITS? ☐ Yes ☒ No	
8. MARITAL STATUS AT TIME OF DEATH ☐ Married ☐ Married, but separated ☐ Widowed ☐ Divorced ☐ Never married ☐ Unknown				9. SURVIVING SPOUSE'S NAME (If wife, give maiden name)			
10. EVER IN U.S. ARMED FORCES? ☐ Yes ☒ No				11a. BIRTHPLACE (State, Territory, or Foreign Country) UTAH		11b. BIRTHPLACE (State, Territory, or Foreign Country) IDAHO	
12a. FATHER'S NAME (First, Middle, Last, Suffix) ALBERT MCINTIRE		12b. MOTHER'S NAME (First, Middle, Last, Suffix) MELVA G. [REDACTED]		13. CAILING ADDRESS (Street and Number, City, State, Zip Code) 118 W. 50 S. BLACKFOOT, ID 83221			
14. METHOD OF DISPOSITION ☐ Burial ☒ Cremation ☐ Donation ☐ Entombment ☐ Removal from Idaho ☐ Other (Specify)		15. PLACE OF DISPOSITION (Name and address of cemetery, crematory, other place) BLACKFOOT CREMATORY 32 S. SHILLING AVE. BLACKFOOT, IDAHO 83221		16. NAME AND COMPLETE ADDRESS OF FUNERAL FACILITY HAWKER FUNERAL HOME 132 SOUTH SHILLING AVENUE BLACKFOOT, IDAHO 83221			
17a. SIGNATURE OF FUNERAL SERVICE ELECTRONICALLY FILED: JERRY L. HAWKER		17b. LICENSE NUMBER (Of licensee) M0734		18. WAS CORONER CONTACTED DUE TO CAUSE OF DEATH? ☐ Yes ☒ No			
19a. IF DEATH OCCURRED IN A HOSPITAL: ☐ Inpatient ☒ Outpatient ☐ Ambulatory ☐ Other (Specify)							
19b. IF DEATH OCCURRED SOMEWHERE OTHER THAN A HOSPITAL: ☐ Hospice facility ☐ Nursing home/Long term care facility ☐ Decedent's home ☐ Other (Specify)							
20. FACILITY NAME (If not facility, give street and number) 124 W. 50 S.		21. CITY, TOWN, OR LOCATION OF DEATH, AND ZIP CODE BLACKFOOT, ID 83221		22. COUNTY OF DEATH BINGHAM		23. DATE OF DEATH (Mo/Day/Yr) (Spell month) March 1, 2015	
24. TIME OF DEATH (24hr) 08:00		25. DATE PRONOUNCED DEAD (Mo/Day/Yr) (Spell month) March 1, 2015		26. TIME PRONOUNCED DEAD (24hr) 08:00		27. CAUSE OF DEATH	
PART I. 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. Enter only one cause on a line. IMMEDIATE CAUSE (Final disease or condition resulting in death) LIVER CIRRHOSIS, CRYPTOGENIC DUE TO (or as a consequence of): a. LIVER CIRRHOSIS, CRYPTOGENIC b. DUE TO (or as a consequence of): c. DUE TO (or as a consequence of): d. DUE TO (or as a consequence of):							
PART II. Enter other significant conditions contributing to death but not resulting in the underlying cause per Part I. SENILE DEMENTIA							
28. DID TOBACCO USE CONTRIBUTE TO DEATH? ☐ Yes ☐ Probably ☒ No ☐ Unknown		29. ALE (Aged 10-54): ☐ Pregnant at time of death ☐ Pregnant, but pregnant less than 42 days of death ☐ Unknown if pregnant within the past year		30. MANNER OF DEATH ☒ Natural ☐ Accident ☐ Suicide ☐ Homicide ☐ Pending investigation ☐ Could not be determined		31. INJURY AT WORK? ☐ Yes ☒ No	
32. DATE OF INJURY (Mo/Day/Yr) (Spell month)		33. TIME OF INJURY (24hr)		34. PLACE OF INJURY (Decedent's home, farm, street, construction site, nursing home, restaurant, forest, etc.)		35. INJURY AT WORK?	
36. LOCATION OF INJURY: Street and Number or Location		City/Town or County		Zip Code		Apartment Number	
37. DESCRIBE HOW INJURY OCCURRED. TRANSPORTATION INJURY, STATE THE TYPE(S) OF VEHICLE(S) INVOLVED (Automobile, pickup, motorcycle, ATV, bicycle, etc.). SPECIFY WHICH VEHICLE DECEDENT OCCUPIED, if applicable							
38a. WAS DECEDENT: ☐ Driver/Operator ☐ Passenger ☐ Pedestrian ☐ Other (Specify)		38b. WHAT SAFETY DEVICES(S) DID DECEDENT USE/EMPLOY? ☐ Seat belt ☐ Child safety seat ☐ Helmet ☐ Air bag ☐ None ☐ Unknown		39a. CERTIFIER (Check only one, based on official capacity for this certificate) ☒ 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 natural cause(s) and manner stated. ☐ CORONER On the basis of examination and/or investigation, in my opinion, death occurred at the time, date, and place, and due to the cause(s) and manner stated.			
39b. NAME, ADDRESS, AND ZIP CODE OF CERTIFIER (Type or print) SHANE K. ANDERSON, D.O.		39c. DATE SIGNED 3 / 9 / 2015		39d. LICENSE NUMBER O-00585			
40a. REGISTRAR'S SIGNATURE James B. Aydelotte		40b. DATE SIGNED 3 / 10 / 2015		40c. SIGNATURE James B. Aydelotte			

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

DATE ISSUED: **March 10, 2015**

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

80294

JAMES B. AYDELOTTE
STATE REGISTRAR



AFFIDAVIT OF SURVIVORSHIP

STATE OF IDAHO)
)ss.
County of Bingham)

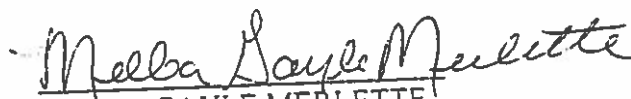
MELBA GAYLE MERLETTE, married person dealing with her sole and separate property of 95 North 100 West, Blackfoot, Bingham County Idaho 83221 and CATHY RAE HJELM, a married person dealing with her sole and separate property, whose address is 118 West 50 South, Blackfoot, Bingham County, Idaho after first duly being sworn, deposes and says:

1. That we are the daughters of Marcia J. Christensen, deceased.
2. That on August 5, 2010, a Deed with Life Estate was recorded as Instrument No. 62038 records of Bingham County, Idaho, transferring property therein described to us as tenants in common reserving a life estate to Marcia J. Christensen.
3. That attached hereto is a copy of the Death Certificate of our mother, Marcia J. Christensen who died on March 1, 2015 in Blackfoot, Bingham County Idaho, being at said time a resident of said county.
4. That as a result of the death of Marcia J. Christensen, we are the rightful owners of the real property that was subject to a Deed with Life Estate dated August 4, 2015 and recorded as Instrument No. #620388, records of Bingham County, Idaho.
5. Affiants further states that at the time of the death of our mother, Marcia J. Christensen, there were no existing creditors or claims against her estate that have not been fully paid and affiant has paid all funeral expenses and all outstanding obligations of every kind and nature existing at the time of her death.

6. Affiants further say that we were well and personally acquainted with the estate of our mother and all assets thereof and that there are no outstanding inheritance or federal estate taxes due or unpaid by reason of her death.

7. No probate proceedings were ever held in the matter of the estate of our mother, Marcia J. Christensen.

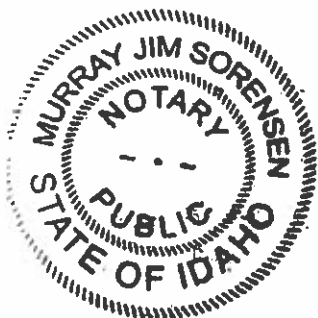
8. Your affiants make and record this affidavit for the purpose of establishing Affiant's ownership of the real property above-mentioned and the absence of any creditor's claims, inheritance taxes, and federal estate taxes.


MELBA GAYLE MERLETTE

STATE OF IDAHO)
) ss.
County of Bingham)

On this 22 day of June, 2015, before me, the undersigned, a notary public in and for said state, personally appeared MELBA GAYLE MERLETTE, 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 hereunto set my hand and affixed my official seal the day and year in this certificate first above written.




Notary Public for State of Idaho
Residing at Blackfoot
My com expires: 8-21-2015