State of Idaho
DEPARTMENT OF WATER RESOURCES
Western Region, 2735 Airport Way • Boise, Idaho 83705-5082
Phone: (208) 334-2190 • Fax: (208) 334-2348 • Web Site: www.idwr.idaho.gov

C. L. "BUTCH" OTTER
Governor

DAVID R. TUTHILL, JR.
Director

August 18, 2008

John V. Goode Estate
c/o Marsha Gantz
PO Box 63
Donnelly, ID 83615

Re: Application for Transfer of Water Right

Dear Applicant:

This office received your application without the required payment of the fee. The application cannot be accepted into the records of the Idaho Department of Water Resources (IDWR) until the fee is paid. Therefore, IDWR is returning your application.

Please consult the enclosed fee schedule to determine the required fee. The fee is based on the total amount of water described by your application. Please consult the IDWR website or contact this office at 208-334-2190 and ask for the "office day person" if you have any questions about the fee.

Additionally, upon initial review of the application, it appears the transfer is not approvable. The application proposes to transfer two water rights, no. 65-3164 and no. 65-3165, from a piece of property where their beneficial use is combined with Mahala Ditch Co. water. Removing a water right from this combined system and irrigating additional land is presumed to be an expansion of use.

You may re-submit the application together with information indicating how the proposed transfer is approval and payment of the fee at your convenience. IDWR forms and other information are available on the Internet at www.idwr.idaho.gov. Thank you for your attention to this matter.

Sincerely,

Western Region Water Rights Staff

Enclosure: Original Application
Fee Schedule

Form 222 November 30, 1999

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

Transfer No. _____

RECEIVED
SEP 14 2006
WATER RESOURCES
WESTERN REGION

APPLICATION FOR TRANSFER OF WATER RIGHT
PART 1

Name of Applicant John + Aila Goode / John V. Goode Estate Phone 208-325-8692

Post Office address PO Box 63 - Donnelly, Idaho

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 _____

2. Describe the reason for the proposed changes Sale + Transfer of Water Rights to Nortune Revocable Living Trust. Water to be used on same Property on Attached Water Right Reports 65-2519A + 65-2340A

B. DESCRIPTION OF RIGHT(S) OR PORTION THEREOF, AFTER THE REQUESTED CHANGE

1.

Right Number	Priority	Amount (cfs/ac-ft)	Nature of Use	Period of Use
65-3164	5/01/1909	1.14 CFS	Irrigation	5/01 to 9/15
65-3165	5/01/1909	.460 CFS	Irrigation	5/01 to 9/15
				to
				to

2. Total amount of water being transferred 1.5 cubic feet per second and/or N/A acre-feet per annum.
3. Source of water Lake Fork tributary to North Fork Payette River
4. Point(s) of Diversion:

Lot	¼	¼	¼	Sec	Twp	Rge	County	Local name for diversion
				No		Change		

5. Lands irrigated or place of use:

Twp	Rge	Sec	NE ¼				NW ¼				SW ¼				SE ¼				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
16N	03E	3	40	39	39	40													
16N	03E	3	40	39	39	40													

Total Acres 158

(2) of 13

Page 1 of 2

IDAHO DEPARTMENT OF WATER RESOURCES

Water Right Report 65-2340A

WATER RIGHTS 65-3164 + 65-3165 TO be TRANSFERED TO THIS PROPERTY AND The property on NEXT page.

WATER RIGHT NUMBER: 65-2340A

Owner Type	Name and Address
Current Owner	HENRY NORTUNE PO BOX 130 DONNELLY, ID 83615 (208)325-8720
Current Owner	BETTE NORTUNE C/O SANDRA METZKER PO BOX 1073 NORTH PLAINS, OR 97133 (503) 647-5372

Priority Date: 05/03/1926

Basis: Decreed

Status: Active

Source	Tributary
UNNAMED STREAM	LAKE FORK

Beneficial Use	From	To	Diversion Rate	Annual Volume
IRRIGATION	4/15	10/15	0.430 CFS	
		Total Diversion:	0.430 CFS	

Location of Point(s) of Diversion

UNNAMED STREAM	NW1/4NW1/4NE1/4	Sec. 10,	Twp 17N,	Rge 03E, B.M.
VALLEY County	(Rediversion)			
UNNAMED STREAM	SE1/4NW1/4SE1/4	Sec. 3,	Twp 17N,	Rge 03E, B.M.
VALLEY County	(Injection)			

Place of Use

IRRIGATION

Twp	Rge	Sec	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
17N	03E	34					45			~~34.0~~ 38									34.0

Total Acres: 34

Conditions of Approval:

1. C20 Basin 65 General Provisions No. 3, the Separate Streams General Provision, does not apply to appropriations of water after October 18, 1977.
This water right shall be administered as being from a separate source pursuant to Basin 65 General Provision No. 3. If the holder of this right seeks to change the right pursuant to Idaho Code § 42-222 or sucessor statute, nothing in this general provision shall preclude any other person or entity from demonstrating that such change in use would cause injury to its water right or from receiving any relief provided by law in the event of injury.

(3) of 13

PAGE 2 of 2

IDAHO DEPARTMENT OF WATER RESOURCES

Water Right Report 65-2519A

WATER RIGHT NUMBER: 65-2519A

WATER RIGHTS 65-3164 & 65-3165 TO be TRANSFERRED TO THIS PROPERTY & PROPERTY ON PREVIOUS PAGE.

Owner Type	Name and Address
Directors Report Owner	HENRY NORTUNE PO BOX 130 DONNELLY, ID 83615 (208)325-8720
Original Owner	TILDA N BARKER PO BOX 304 DONNELLY, ID 83615
Current Owner	BETTE NORTUNE C/O SANDRA METZKER PO BOX 1073 NORTH PLAINS, OR 97133 (503) 647-5372

Priority Date: 09/14/1949

Basis: Decreed

Status: Active

Source	Tributary
SPRINGS	LAKE FORK

Beneficial Use	From	To	Diversion Rate	Annual Volume
IRRIGATION	4/15	10/15	1.000 CFS	
		Total Diversion:	1.000 CFS	

Location of Point(s) of Diversion

SPRINGS SW1/4SW1/4SE1/4 Sec. 22, Twp 17N, Rge 03E, B.M.

VALLEY County

Place of Use

IRRIGATION

Twp	Rge	Sec	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
17N	03E	34					16.0			34.0									50.0

Total Acres: 50

Conditions of Approval:

1. C05 RIGHT INCLUDES ACCOMPLISHED CHANGE IN PLACE OF USE PURSUANT TO SECTION 42-1425, IDAHO CODE.

 Transfer No. _____

PART 1

6. General Information:

a. Description of diversion system No change

b. Are the lands from which you propose to transfer the water right subject to any liens, deeds of trust, mortgages, or contracts?

_____ Yes ✓ No. If yes, provide a notarized statement from the holder of the lien, deed of trust, mortgage or contract agreeing to the proposed changes.

c. Describe the affect on the land now irrigated if the place of use is changed pursuant to this transfer:

80 Acreas of this 158 Acres has been sold to a Developer who does not intend to use the property for Agricultural Afer the sale of these water rights the remaining 78 Acres still has water right from 65-11326

d. Remarks:

No water right were sold/tranfered with the sale of the first 80 Acreas. All water rights for 31-3164 & 31-3165 are still owned by the Goode Estate.

ACTION OF THE DIRECTOR, DEPARTMENT OF WATER RESOURCES

This is to certify that I have examined Application for Transfer of Water Rights No. _____

And the said application is hereby _____, subject to the following conditions:

Witness my hand this _____ day of _____, 20 _____.

_____
For the Director

Transfer No. _____

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

APPLICATION FOR TRANSFER OF WATER RIGHT
PART 2
(Attach one copy for each right)

A. DESCRIPTION OF RIGHT AS RECORDED

1. Right as evidenced by:
   a. Decree No. _____ Decreed to _____
   in case of _____ vs. _____
   dated N/A in _____ county of _____
   b. License No. N/A issued by the Idaho Department of Water Resources.
   c. Claim No. N/A on file with the Idaho Department of Water Resources.
   d. Transfer No. _____ which produced this right.
2. Attach copy of last year's tax notice for the property to which the water right is appurtenant or other documents which show ownership. Label document as attachment A. Check appropriate box below:

   ☐ Tax Notice ☑ Warranty Deed ☐ Other _____
3. Source of water LAKE FORK tributary to North Fork Payette River
4. Date or priority 5/01/1909
5. Water is used for the following purposes:
   amount 1.14 cfs for IRRIGATION purposes from 5/1 to 9/15
   (cfs/ac-ft)
   amount .460 cfs for IRRIGATION purposes from 5/1 to 9/15
   (cfs/ac-ft)
   amount _____ for _____ purposes from _____ to _____
   (cfs/ac-ft)
6. Total amount of water under right 1.5 cubic feet per second and/or — acre-feet per annum.
7. Point(s) of Diversion:

Lot	¼	¼	¼	Sec	Twp	Rge	County	Local name for diversion
				NO	CHANGE			

8. Lands irrigated or place of use:

Twp	Rge	Sec	NE ¼				NW ¼				SW ¼				SE ¼				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
16N	03E	3	40	39	39	40													
16N	03E	3	40	39	39	40													

Total Acres 150

9. Describe any other water rights used for the same purpose as described above WATER RIGHT 65-11326 owned by MALALA DITCH

6/13 WATER Right sold

 05/23/2006

IDAHO DEPARTMENT OF WATER RESOURCES

Water Right Report 65-3164

WATER RIGHT NUMBER: 65-3164

Owner Type	Name and Address
Current Owner	JOHN V GOODE PO BOX 45 DONNELLY, ID 83615 (208)325-8857
Current Owner	AILA D GOODE PO BOX 45 DONNELLY, ID 83615 (208)325-8857

Priority Date: 05/01/1909

Basis: Decreed

Status: Active

Source	Tributary
LAKE FORK	NORTH FORK PAYETTE RIVER

Beneficial Use	From	To	Diversion Rate	Annual Volume
IRRIGATION	5/01	9/15	1.140 CFS	
		Total Diversion:	1.140 CFS	

Location of Point(s) of Diversion

LAKE FORK NW1/4NE1/4 Sec. 10, Twp 17N, Rge 03E, B.M.

VALLEY County

Place of Use

IRRIGATION

Twp	Rge	Sec	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
16N	03E	3	40.0	39.0	39.0	40.0													158.0
			L 1	L 2															

Total Acres: 158

Conditions of Approval:

Remarks:

Comments:

Dates and Other Information:

7 of 13

IDAHO DEPARTMENT OF WATER RESOURCES

Water Right Report 65-3164

Licensed Date:
Decreed Date: 4/7/1986
Enlargement Use Priority Date:
Enlargement Statute Priority Date:
State or Federal:
Owner Name Connector:
Water District Number: 65K
Generic Max Rate Per Acre:
Generic Max Volume Per Acre:
Decree Defendant: A & C Corp, et al
Decree Plaintiff: State of Idaho
Civil Case Number: 3667
Judicial District: Third District
Swan Falls Trust or Nontrust:
Swan Falls Dismissed:
DLE Act Number:
Carey Act Number:
Mitigation Plan: False

Combined Use Limits:

Water Supply Bank:

8 of 13

WATER Right sold

 05/23/2006

IDAHO DEPARTMENT OF WATER RESOURCES

Water Right Report 65-3165

WATER RIGHT NUMBER: 65-3165

Owner Type	Name and Address
Current Owner	JOHN V GOODE PO BOX 45 DONNELLY, ID 83615 (208)325-8857
Current Owner	AILA D GOODE PO BOX 45 DONNELLY, ID 83615 (208)325-8857

Priority Date: 05/01/1919

Basis: Decreed

Status: Active

Source	Tributary
LAKE FORK	NORTH FORK PAYETTE RIVER

Beneficial Use	From	To	Diversion Rate	Annual Volume
IRRIGATION	5/01	9/15	0.460 CFS	

Total Diversion: 0.460 CFS

Location of Point(s) of Diversion

LAKE FORK NW1/4NE1/4 Sec. 10, Twp 17N, Rge 03E, B.M.

VALLEY County

Place of Use

IRRIGATION

Twp	Rge	Sec	NE				NW				SW				SE				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
16N	03E	3	40.0	39.0	39.0	40.0													158.0
			L 1	L 2															

Total Acres: 158

Conditions of Approval:

Remarks:

Comments:

Dates and Other Information:

9 of 13

IDAHO DEPARTMENT OF WATER RESOURCES

Water Right Report 65-3165

Licensed Date:
Decreed Date: 4/7/1986
Enlargement Use Priority Date:
Enlargement Statute Priority Date:
State or Federal:
Owner Name Connector:
Water District Number: 65K
Generic Max Rate Per Acre:
Generic Max Volume Per Acre:
Decree Defendant: A & C Corp, et al
Decree Plaintiff: State of Idaho
Civil Case Number: 3667
Judicial District: Third District
Swan Falls Trust or Nontrust:
Swan Falls Dismissed:
DLE Act Number:
Carey Act Number:
Mitigation Plan: False

Combined Use Limits:

Water Supply Bank:

Transfer No. _____ TO

PART 2

10. To your knowledge, has any portion of this water right undergone a period of five or more consecutive years of non-use?

_____ If yes, describe _____

ALL Rig Lts 65-3164 + 65-3165 being Transferred

B. DESCRIPTION OF PORTION OF RIGHT BEING TRANSFERRED

(If the entire right is to be changed by the applicant, omit part B and C.)

1. amount _____ for _____ purposes from _____ to _____
(cfs/ac-ft)
amount _____ for _____ purposes from _____ to _____
(cfs/ac-ft)
amount _____ for _____ purposes from _____ to _____
(cfs/ac-ft)

2. Point(s) of Diversion:

Lot	¼	¼	¼	Sec	Twp	Rge	County	Local name for diversion

3. Lands irrigated or place of use:

Twp	Rge	Sec	NE ¼				NW ¼				SW ¼				SE ¼				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	

Total Acres _____

C. DESCRIPTION OF UNCHANGED PORTION OF RIGHT *(omit if there is no change)*

1. amount _____ for _____ purposes from _____ to _____
(cfs/ac-ft)
amount _____ for _____ purposes from _____ to _____
(cfs/ac-ft)
amount _____ for _____ purposes from _____ to _____
(cfs/ac-ft)

2. Point(s) of Diversion:

Lot	¼	¼	¼	Sec	Twp	Rge	County	Local name for diversion

3. Lands irrigated or place of use:

Twp	Rge	Sec	NE ¼				NW ¼				SW ¼				SE ¼				Totals
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	

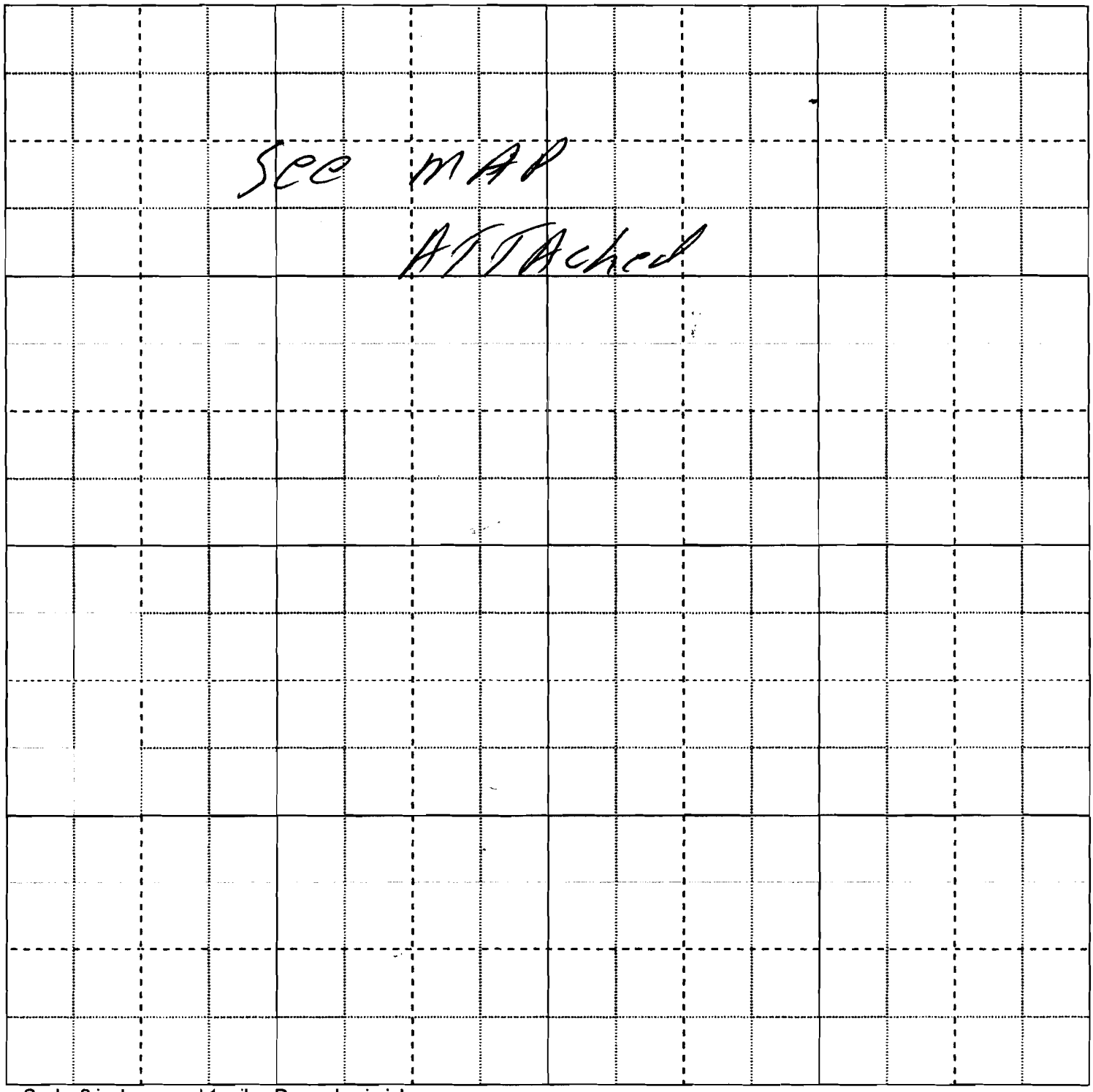
Total Acres _____

Transfer No. _____

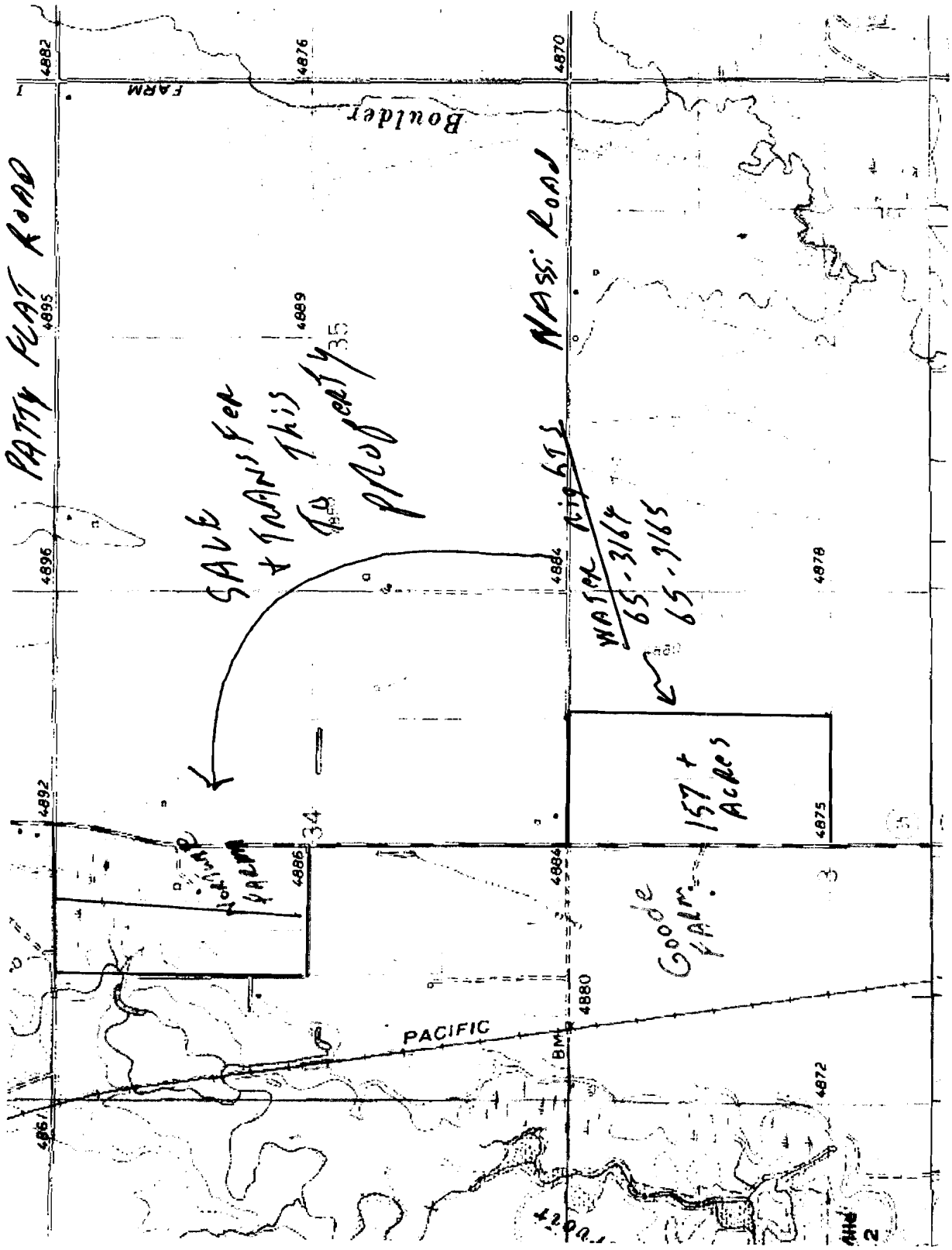
STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

APPLICATION FOR TRANSFER OF WATER RIGHT
PART 3

A. Draw a map or attach a USGS map indicating the new point(s) of diversion and/or the new place of use for the rights described in part 1. Clearly depict the land by section, township and range number.



Scale: 2 inches equal 1 mile. Draw plan in ink.


PATTY FLAT ROAD
NASS ROAD
Boulder
FARM
SALE + TRANSFER TO THIS PROPERTY
WATER RIGHTS
65-3164
65-3165
157 + ACRES
Goode FARM
PACIFIC
BM
4882
4876
4870
4895
4889
4896
4884
4878
4892
4886
4884
4875
4880
4872
4861
35
34
3
2

Transfer No. _____

PART 3

B. CHANGES IN NATURE OF USE

1.

New Nature of Use	Amount(cfs/af-ft)	Hours/days/year	Period of Use
			_____ to _____
			_____ to _____

2. Quantity and quality of return flows and location of discharge: _____

3. Describe effects on other water uses resulting from the proposed change:

NONE

I hereby assert that no one will be injured by such change and that the change does not constitute an enlargement in use of the original right. 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 voiding its approval.

* Marsha Gary
(Signature of Applicant)

Subscribed and sworn to before me this 12th day of September, 20 06.

Ginger Hughes
(Notary Public)

GINGER HUGHES NOTARY PUBLIC STATE OF IDAHO

My commission expires 1/7/10

FOR DEPARTMENT USE ONLY

Transfer contains _____ pages and _____ attachments

Received by SR Date 9/14/06 Protest filed by _____

Prelim. Check by _____ Fee _____

* Receipted by _____ Date _____

Published in _____ Copies of protest forwarded by _____

Pub. Dates _____ Hearing held by _____ Date _____

Watermaster recommendations requested on _____ Recommended for ☐ approval ☐ denial

_____ received _____ by _____

Copy of transfer sent to lien holder _____

* NO $ 9/14/06

ATTACHMENT 5
#1

LELAND G. HEINRICH, CLERK
By /s/ F. GARRISON Deputy
AUG 18 2005
Case No. _____ Inst. No. _____
Filed 11:15 A.M. P.M.

BRIAN L. McMAHAN, ISB # 3724
MILLEMANN, PITTENGER, McMAHAN & PEMBERTON, LLP
706 NORTH FIRST STREET
P. O. BOX 1066
McCALL, IDAHO 83638
TELEPHONE: (208) 634-7641
FACSIMILE: (208) 634-4516
EMAIL: blm@mpmplaw.com

Attorney for Personal Representative

CERTIFIED COPY

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

MAGISTRATE DIVISION

IN THE MATTER OF THE ESTATE OF	CASE NO. CV-2005-361C
JOHN VERNON GOODE,	LETTERS TESTAMENTARY (I.C. 15-3-702)
Deceased.	

1. MARSHA GANTZ was duly appointed and qualified as General Personal Representative of the estate of the above-named decedent by the Court with all authority pertaining thereto.

2. Administration of the estate is unsupervised.

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

WITNESS, my signature and the Seal of this Court, this 18 day of August, 2005.

/s/ Henry R. Boomer
MAGISTRATE

8/18/05 Leland G. Heinrich
Deputy

CERTIFICATION OF VITAL RECORD

Attachment #1

STATE OF IDAHO

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

CERTIFICATE OF DEATH

Date Filed AUGUST 09, 2005 State File No. 2005-06081

DECEDENT - LEGAL NAME: JOHN VERNON GOODE

SEX	SOCIAL SECURITY NUMBER	AGE	DATE OF BIRTH
MALE	518-09-2687	93 YEARS	FEBRUARY 24, 1912

BIRTHPLACE	PLACE OF RESIDENCE
SPANAWAY, WASHINGTON	DONNELLY, IDAHO

MARITAL STATUS AT TIME OF DEATH	NAME OF SURVIVING SPOUSE (If wife, maiden name)	WAS DECEDENT EVER IN U.S. ARMED FORCES?
WIDOWED		YES

FATHER - NAME	BIRTHPLACE
JOHN GOODE	ILLINOIS
MOTHER - MAIDEN NAME	BIRTHPLACE
LINNY COONROD	KANSAS

METHOD OF DISPOSITION	FUNERAL SERVICE LICENSEE
CREMATION	JERRY K. LAWSON

NAME AND ADDRESS OF FUNERAL FACILITY: HEIKKILA FUNERAL CHAPEL, MCCALL, IDAHO

DATE OF DEATH	TIME OF DEATH	CITY, TOWN OR LOCATION OF DEATH	COUNTY OF DEATH
AUG. 01, 2005	11:20 A.M.	BOISE, IDAHO	ADA

CAUSE OF DEATH (underlying cause last)

a. PNEUMONIA — Approximate Interval Between Onset and Death: 6 DAYS

DUE TO (or as a consequence of):

b. ASPIRATION — 10 DAYS

DUE TO (or as a consequence of):

c. COMPLICATIONS OF A NECK FRACTURE

DUE TO (or as a consequence of):

d. GROUND LEVEL FALL

OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not resulting in the underlying cause given above: FRACTURED NECK — WAS AN AUTOPSY PERFORMED? NO

MANNER OF DEATH	NAME OF CERTIFIER	TITLE
ACCIDENT	LEE M. KORNFIELD, M.D.	PHYSICIAN

CORONER SUBSEQUENT CERTIFICATION IF NECESSARY

REVIEWED AND IF NECESSARY AMENDED THE MEDICAL SECTION: GLEN R. GROBEN

EXTERNAL CAUSES

DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY	INJURY AT WORK?
JUNE 29, 2005	P.M. HOURS	HOME	NO

LOCATION WHERE INJURY OCCURRED: 13309 HIGHWAY 55, DONNELLY, IDAHO

DESCRIPTION OF HOW INJURY OCCURRED: DEVELOPED PNEUMONIA AFTER FALLING AND BREAKING HIS NECK

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 10, 2005

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

JANE S. SMITH
STATE REGISTRAR

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

Attachments
#1

Attachment #2

QUITCLAIM DEED

FOR VALUE RECEIVED, MARSHA GANTZ, as Personal Representative of the Estate of John Vernon Goode, deceased, Grantor, hereby conveys, releases, remises, and forever quitclaims unto the trustees of the Nortune Revocable Living Trust dated September 3, 1998, Grantee, whose current address is 13409 State Highway 55, Donnelly, Idaho 83615, all her right, title, and interest in the following water rights as they are described on the records of the Idaho Department of Water Resources: #65-03164 and 65-03165.

DATED this 25 day of August, 2006.

Marsha Gantz, as Personal Representative of the Estate of John Vernon Goode, deceased

STATE OF IDAHO,)
(ss.
County of Valley.)

On this 25th day of August, 2006, before me, a Notary Public in and for said State, personally appeared MARSHA GANTZ, 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 in her capacity as Personal Representative of the Estate of John Vernon Goode, deceased.

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

MARIA McCONNELL NOTARY PUBLIC STATE OF IDAHO

NOTARY PUBLIC FOR IDAHO
My Commission Expires: 6/30/2011

CERTIFIED COPY

LELAND G. HEINRICH, CLERK
By /s/ E. GARRISON Deputy

AUG 18 2005

Case No. _____ Inst. No. _____
Filed 11:50 A.M. _____ P.M.

BRIAN L. McMAHAN, ISB # 3724
MILLEMANN, PITTENGER, McMAHAN & PEMBERTON, LLP
706 NORTH FIRST STREET
P. O. BOX 1066
McCALL, IDAHO 83638
TELEPHONE: (208) 634-7641
FACSIMILE: (208) 634-4516
EMAIL: blm@mpmplaw.com

Attorney for Personal Representative

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

MAGISTRATE DIVISION

IN THE MATTER OF THE ESTATE OF	)	CASE NO. CV-2005-361C
	)	
JOHN VERNON GOODE,	)	LETTERS TESTAMENTARY
	)	(I.C. 15-3-702)
Deceased.	)	
	)	
	)	

1. MARSHA GANTZ was duly appointed and qualified as General Personal Representative of the estate of the above-named decedent by the Court with all authority pertaining thereto.

2. Administration of the estate is unsupervised.

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

WITNESS, my signature and the Seal of this Court, this 18 day of August, 2005.

/s/ Henry F. Boomer
MAGISTRATE

I hereby certify that the foregoing is a true and correct copy of the original on file herein.
Date 8/18/05 Leland G. Heinrich
Clerk
Garrison Deputy

STATE OF IDAHO
CERTIFICATION OF VITAL RECORD

STATE OF IDAHO

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

CERTIFICATE OF DEATH

Date Filed AUGUST 09, 2005

State File No. 2005-06081

DECEDENT - LEGAL NAME: JOHN VERNON GOODE			
SEX: MALE	SOCIAL SECURITY NUMBER: 518-09-2687	AGE: 93 YEARS	DATE OF BIRTH: FEBRUARY 24, 1912
BIRTHPLACE: SPANAWAY, WASHINGTON		PLACE OF RESIDENCE: DONNELLY, IDAHO	
MARITAL STATUS AT TIME OF DEATH: WIDOWED	NAME OF SURVIVING SPOUSE (If wife, maiden name):		WAS DECEDENT EVER IN U.S. ARMED FORCES?: YES
FATHER - NAME: JOHN GOODE			BIRTHPLACE: ILLINOIS
MOTHER - MAIDEN NAME: LINNY COONROD			BIRTHPLACE: KANSAS
METHOD OF DISPOSITION: CREMATION	FUNERAL SERVICE LICENSEE: JERRY K. LAWSON		
NAME AND ADDRESS OF FUNERAL FACILITY: HEIKKILA FUNERAL CHAPEL, MCCALL, IDAHO			
DATE OF DEATH: AUG. 01, 2005	TIME OF DEATH: 11:20 A.M.	CITY, TOWN OR LOCATION OF DEATH: BOISE, IDAHO	COUNTY OF DEATH: ADA
CAUSE OF DEATH (underlying cause last) a. PNEUMONIA			Approximate Interval Between Onset and Death: 6 DAYS
DUE TO (or as a consequence of): b. ASPIRATION			10 DAYS
DUE TO (or as a consequence of): c. COMPLICATIONS OF A NECK FRACTURE			
DUE TO (or as a consequence of): d. GROUND LEVEL FALL			
OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not resulting in the underlying cause given above: FRACTURED NECK			WAS AN AUTOPSY PERFORMED?: NO
MANNER OF DEATH: ACCIDENT	NAME OF CERTIFIER: LEE M. KORNFIELD, M.D.		TITLE: PHYSICIAN

CORONER SUBSEQUENT CERTIFICATION IF NECESSARY

REVIEWED AND IF NECESSARY AMENDED THE MEDICAL SECTION: GLEN R. GROBEN

DATE OF INJURY: JUNE 29, 2005	TIME OF INJURY: P.M. HOURS	PLACE OF INJURY: HOME	INJURY AT WORK?: NO
LOCATION WHERE INJURY OCCURRED: 13309 HIGHWAY 55, DONNELLY, IDAHO			
DESCRIPTION OF HOW INJURY OCCURRED: DEVELOPED PNEUMONIA AFTER FALLING AND BREAKING HIS NECK			

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 10, 2005

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

JANE S. SMITH
STATE REGISTRAR

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

CLASS D Idaho DRIVER'S LICENSE

EXPIRES 12/12/2007

NUMBER UP151783G

ISSUED 01/09/2004

RSTS B

ENDR

GANTZ, MARSHA KAY

13307 SH55

DONNELLY, ID 83615

DATE OF BIRTH

12/12/1955

SEX F

HEIGHT 5'02

WEIGHT 175

HAIR BRO

EYES BLU

DONOR