

You must return the completed form to IDWR as soon as possible and no later than 5 weeks before the meeting date to enable IDWR to send notice of the annual meeting at least 21 days before the meeting.

| Water District No. 74C  | Water District Name: | Bolicumon Creek          |
|---|----------------------|--------------------------|
| Meeting Location  |                      |                          |
| Facility Name Pine Creek  | Shop                 |                          |
| Room Name/Number  |                      |                          |
| Room Name/NumberStreet Address 10   | Lane                 |                          |
| City Selmon, ID   | 83467                |                          |
| Meeting Time/Day  |                      |                          |
| Date (month, day, year) 3/7/707:  Day of Week Time  | 3                    |                          |
| Day of Week Tuesday   |                      |                          |
| Time 1:00 pm  |                      |                          |
| platform and/or telephone number). and meeting agenda   | A 1 \(\lambda\)      | ar on the meeting notice |
| Will attendees be required to wear a face cov   | vering? ///          |                          |
| (re h)  | Ser                  | etary transver           |
| Signature, Water District Representative  | Title                | 11/                      |
| 208-223-22  | 58                   |                          |
| Representative Phone Number   |                      |                          |
| CKisby 77 @ gm  | gil. Com             |                          |
| Representative Email Address  |                      | ð                        |
| Return this form via mail, fax, or email, attention   | n: Christina Henman  |                          |
| Eastern Regional Office<br>900 N. Skyline Dr. Ste. A<br>Idaho Falls, Id 83402-1718<br>Fax: (208) 525-7177 / Phone: (208) 525-7161 |                      |                          |

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