

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECEIVED

MAY 03 2024

NOTICE OF CHANGE IN WATER RIGHT OWNERSHIP

DEPT. OF WATER RESOURCES

1. List the numbers of all water rights and/or adjudication claim records to be changed. If you only acquired a portion of the water right or adjudication claim, check "Yes" in the "Split?" column. If the water right is leased to the Water Supply Bank, check "Yes". If you are not sure if the water right is leased to the Water Supply Bank, see #7 of the instructions.

Water Right/Claim No.	Split?	Leased to Water Supply Bank?	Water Right/Claim No.	Split?	Leased to Water Supply Bank?
37-474B	Yes ☒	Yes ☐		Yes ☐	Yes ☐
37-13312	Yes ☐	Yes ☐		Yes ☐	Yes ☐
37-473B	Yes ☒	Yes ☐		Yes ☐	Yes ☐
37-4175	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐

2. Previous Owner's Name: Wanda Haas Trust
Name of current water right holder/claimant
3. New Owner(s)/Claimant(s): Colleen Haas and Patricia Saia
New owner(s) as listed on the conveyance document Name connector ☒ and ☐ or
- 290 Sierks St. COSTA MESA CA 92627
Mailing address City State Zip
- 714) 329-8028 patsaia82@gmail.com
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: 05-30-2023
6. Do you own the land identified as the water right place of use? Yes ☒ No ☐
 o If no, attach evidence that written notice of the change of water right ownership has been delivered to the landowner of record.
7. This form must be signed and submitted with the following **REQUIRED** items:
☒ A copy of the conveyance document – warranty deed, quitclaim deed, court decree, contract of sale, etc. The conveyance document must include a legal description of the property or description of the water right(s) if no land is conveyed.
☒ Plat map, survey map or aerial photograph which clearly shows the place of use and point of diversion for each water right and/or claim listed above (if necessary to clarify division of water rights or complex property descriptions).
☐ Filing fee (see instructions for further explanation):
 o \$25 per *undivided* water right.
 o \$100 per *split* water right.
 o No fee is required for pending adjudication claims.
☐ If water right(s) are leased to the Water Supply Bank AND there are multiple owners, a Lessor Designation form is required.
☐ If water right(s) are leased to the Water Supply Bank, the individual owner or designated lessor must complete, sign and submit an IRS Form W-9.

SUPPORT DATA

IN FILE # 37-473B

8. Signature: Patricia Saia 4/28/2024
Signature of new owner/claimant Title, if applicable Date
PATRICIA SAIA
Print name
- Signature: Colleen Haas 1-19-24
Signature of new owner/claimant Title, if applicable Date
COLLEEN HAAS
Print name

For IDWR Office Use Only:

Received by KM Date 5.3.24 Receipt No. C118256 Receipt Amt. \$ 250.00

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 JML Date 5-30-24

Recording Requested By:
Patricia L. Saia, Successor Co-Trustee
290 Sierks Street
Costa Mesa, CA 92627

After Recording Mail To:
uDeed, LLC - 107076
1349 Galleria Drive, Suite 100
Henderson, NV 89014-8624

Mail Tax Statements To:
Patricia L. Saia, et al
290 Sierks Street
Costa Mesa, CA 92627

CAMAS COUNTY
RECORDED FOR:
Clerk
03:59:29 PM 05-30-2023
2023-091838
No. PAGES: 2 FEE: \$15.00
BRIANNA WALTER
COUNTY CLERK
DEPUTY: CC

Assessor's Parcel No.: RP01N15E260100A

QUITCLAIM DEED
TITLE OF DOCUMENT

FOR VALUE RECEIVED

Patricia L. Saia and Colleen E. Haas, Successor Co-Trustees of the Wanda M. Haas Trust
UDT Dated August 1, 2001

The GRANTOR, whose address is 290 Sierks Street, Costa Mesa, California 92627, does hereby convey, release, remise, and forever quitclaim unto

Patricia L. Saia, a married woman and Colleen E. Haas, a single woman, as joint tenants
with right of survivorship and not as tenants in common

The GRANTEE, whose address is 290 Sierks Street, Costa Mesa, California 92627, the following described premises, in Camas County, Idaho, to wit:

REAL PROPERTY DESCRIBED AS A 320 ACRE FARM/RANCHING OPERATION LOCATED EIGHT MILES NORTHEAST OF FAIRFIELD, IDAHO WITH A LEGAL DESCRIPTION OF TOWNSHIP 1 NORTH, RANGE 15 EAST, BOISE MERIDIAN, CAMAS COUNTY, IDAHO, SECTION 26: EAST ONE-HALF.

MORE commonly known as: vacant lot, no assigned address

PRIOR Recorded Doc. Ref.: Affidavit of Successor Trustee: Recorded: November 9, 2021, Instrument No. 2021-090929; AND Trust Transfer Grant Deed: Recorded: August 9, 2001, in Book 32, Page 555, Instrument No. 74669

SUBJECT TO: ANY Restrictions, Conditions, Covenants, Rights, Rights of Way, and Easements now of record

TO HAVE AND TO HOLD the said premises, with their appurtenances unto the said GRANTEE, GRANTEE'S heirs and assigns forever.

When the context requires, singular nouns and pronouns, include the plural.

DATED this 28 day of March, 2023.

Wanda M. Haas Trust UDT Dated August 1, 2001

Patricia L. Saia, Successor Co-Trustee
Patricia L. Saia, Successor Co-Trustee

Colleen E. Haas, Successor Co-Trustee
Colleen E. Haas, Successor Co-Trustee

STATE OF California
COUNTY OF Orange ss

On this 28th day of March, 2023, before me, a Notary Public, in and for the said state, personally appeared **Patricia L. Saia, Successor Co-Trustee and Colleen E. Haas, Successor Co-Trustee**, proved to me on the basis of satisfactory evidence 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.

NOTARY STAMP/SEAL



Diana Figueroa
Diana Figueroa, NOTARY PUBLIC
Diana Figueroa
Notary Printed Name
MY Commission Expires: 04/09/23

Recording Requested By:

Patricia L. Saia, Successor Co-Trustee
290 Sierks Street
Costa Mesa, CA 92627

After Recording Mail To:

uDeed, LLC - 107076
1349 Galleria Drive, Suite 100
Henderson, NV 89014-8624

Mail Tax Statements To:

Patricia L. Saia, et al
290 Sierks Street
Costa Mesa, CA 92627

CAMAS COUNTY

RECORDED FOR:

Clerk

03:59:29 PM 05-30-2023

2023-091838

No. PAGES: 2

FEE: \$15.00

BRIANNA WALTER

COUNTY CLERK

DEPUTY: CC

Assessor's Parcel No.: RP01N15E260100A

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When the context requires, singular nouns and pronouns, include the plural.

DATED this 28 day of March, 2023.

Wanda M. Haas Trust UDT Dated August 1, 2001

Patricia L. Saia, Successor Co-Trustee
Patricia L. Saia, Successor Co-Trustee

Colleen E. Haas, Successor Co-Trustee
Colleen E. Haas, Successor Co-Trustee

STATE OF California
COUNTY OF Orange ss

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NOTARY STAMP/SEAL



Diana Figueroa
Diana Figueroa, NOTARY PUBLIC
Diana Figueroa
Notary Printed Name
MY Commission Expires: 04/09/23

CAMAS COUNTY
RECORDED FOR:

Clerk

02:06:46 PM 11-09-2021

2021-090929

No. PAGES: 5

FEE: \$22.00

KATHERINE RABLIN
COUNTY CLERK
DEPUTY: KR

Recording Requested By:

Patricia L. Saia
Successor Co-Trustee
290 Sierks Street
Costa Mesa, CA 92627

After Recording Mail To:

uDeed, LLC 98521
1349 Galleria Drive, Suite 100
Henderson, NV 89014-8624

Mail Tax Statements To:

Patricia L. Saia,
Successor Co-Trustee, et al
290 Sierks Street
Costa Mesa, CA 92627

Assessor's Parcel No.: RP01N15E260100A

AFFIDAVIT OF SUCCESSOR TRUSTEE

TITLE OF DOCUMENT

We, Patricia L. Saia and Colleen E. Haas, the undersigned, affirm under penalty of perjury under the laws of the State of Idaho that the following is true and correct:

- (1) By instrument dated August 1, 2001, Wanda M. Haas executed the Wanda M. Haas Trust
- (2) Said trust appointed us to serve as Successor Co-Trustees upon the death or incapacity of Wanda M. Haas.
- (3) Wanda M. Haas died on November 18, 2020 at Artesia, California, a resident of Los Angeles County, California pursuant to the attached certified copy of the Certificate of Death and is the same person as said Wanda M. Haas.
- (4) Pursuant to the terms of the Trust, We have assumed the responsibilities of Successor Co-Trustees.
- (5) The following described real property is part of the trust estate: See Exhibit "A" attached.
- (6) No other person has a right to the interest of the Trust in the described property.
- (7) The described property shall be transferred to us as Successor Co-Trustees.

Executed on 23 Aug, at Newport Beach 21.

Patricia L. Saia, Successor Co-Trustee Colleen E. Haas, Successor Co-Trustee
Patricia L. Saia, Successor Co-Trustee Colleen E. Haas, Successor Co-Trustee

STATE OF _____)
COUNTY OF _____) ss

Signed and sworn to (or affirmed) before me on _____ day of _____, 20____, by
Patricia L. Saia, Successor Co-Trustee and Colleen E. Haas, Successor Co-Trustee.

see attached

Before Me: _____

NOTARY PUBLIC

My Commission Expires: _____

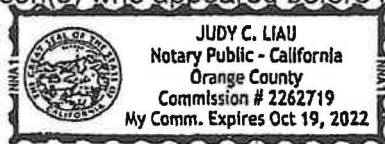
NOTARY STAMP/SEAL

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
County of Orange

Subscribed and sworn to (or affirmed) before me on this 23rd
day of August, 2021, by Patricia L. Saia and
Colleen E. Haas

proved to me on the basis of satisfactory evidence to be the
person(s) who appeared before me.



(Seal)

Signature

A handwritten signature in cursive script, appearing to read "Judy C. Liao", written over a horizontal line.

EXHIBIT "A"
LEGAL DESCRIPTION

THE FOLLOWING DESCRIBED REAL PROPERTY IN CAMAS COUNTY, STATE OF IDAHO,
LEGALLY DESCRIBED AS:

REAL PROPERTY DESCRIBED AS A 320 ACRE FARM/RANCHING OPERATION LOCATED
EIGHT MILES NORTHEAST OF FAIRFIELD, IDAHO WITH A LEGAL DESCRIPTION OF
TOWNSHIP 1 NORTH, RANGE 15 EAST, BOISE MERIDIAN, CAMAS COUNTY, IDAHO, SECTION
26: EAST ONE-HALF.

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF LOS ANGELES
DEPARTMENT OF PUBLIC HEALTH

3052020270683

CERTIFICATE OF DEATH

3202019063759

STATE FILE NUMBER		LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT - FIRST (Given) WANDA		2. MIDDLE M.	
3. LAST (Family) HAAS			
4. DATE OF BIRTH mm/dd/yyyy 07/27/1934		5. AGE Yrs. 86	
6. SEX F			
7. DATE OF DEATH mm/dd/yyyy 11/18/2020		8. HOUR (24 Hour) 0545	
9. BIRTH STATE/FOREIGN COUNTRY OR		10. SOCIAL SECURITY NUMBER	
11. EVER IN U.S. ARMED FORCES? ☐ YES ☒ NO		12. MARITAL STATUS/PROP (at Time of Death) WIDOWED	
13. EDUCATION - Highest Level/Degree HS GRADUATE		14. WAS DECEDENT HISPANIC/LATINO/ASIAN/AM? (If yes, see worksheet on back) ☐ YES ☒ NO	
15. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED HOMEMAKER		16. DECEDENT'S RACE - Up to 3 races may be listed (see worksheet on back) CAUCASIAN	
17. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.) OWN HOME		18. YEARS IN OCCUPATION 67	
19. DECEDENT'S RESIDENCE (Street and number, or location) 17402 S. IBEX AVENUE			
20. CITY ARTESIA		21. COUNTY/PROVINCE LOS ANGELES	
22. ZIP CODE 90701		23. YEARS IN COUNTY 50	
24. STATE/FOREIGN COUNTRY CA			
25. INFORMANT'S NAME, RELATIONSHIP PATRICIA SAIA, DAUGHTER			
26. INFORMANT'S MAILING ADDRESS (Street and number, or rural route number, city or town, state and zip) 290 SIERKS STREET, COSTA MESA, CA 92627			
27. NAME OF SURVIVING SPOUSE/PROP - FIRST -		28. MIDDLE -	
29. LAST (BIRTH NAME) -			
30. NAME OF FATHER/PARENT - FIRST DARRELL		31. MIDDLE LEON	
32. LAST VANDEVENTER		33. BIRTH STATE IA	
34. NAME OF MOTHER/PARENT - FIRST LAURA		35. MIDDLE VIOLA	
36. LAST (BIRTH NAME) PECK		37. BIRTH STATE ID	
38. DISPOSITION DATE mm/dd/yyyy 12/09/2020		39. PLACE OF FINAL DISPOSITION RIVERSIDE NATIONAL CEMETERY 22495 VAN BUREN BOULEVARD, RIVERSIDE, CA 92518	
40. TYPE OF DISPOSITION BU		41. SIGNATURE OF EMBALMER NOT EMBALMED	
42. NAME OF FUNERAL ESTABLISHMENT FOREST LAWN MEMORIAL-PARKS & MORTUARIES		43. LICENSE NUMBER FD1051	
44. SIGNATURE OF LOCAL REGISTRAR MUNTU DAVIS, M.D.		45. DATE mm/dd/yyyy 12/02/2020	
46. PLACE OF DEATH RESIDENCE			
47. IF HOSPITAL, SPECIFY ONE ☐ P. ☐ ER/OP ☐ OCA ☐ Hospital ☐ Nursing Home/JTC ☒ Decedent's Home ☐ Other			
48. COUNTY LOS ANGELES		49. CITY ARTESIA	
50. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location) 17402 IBEX AVE.			
51. CAUSE OF DEATH Enter the chain of events -- diseases, injuries, or complications -- that directly caused death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT abbreviate. IMMEDIATE CAUSE (if final disease or condition resulting in death) CONGESTIVE HEART FAILURE			
52. SEQUENCE, list conditions, if any, leading to cause on Line A. Enter UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST			
53. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107 CORONARY ARTERY DISEASE, CHRONIC OBSTRUCTIVE PULMONARY DISEASE, CHRONIC KIDNEY DISEASE STAGE IV			
54. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date) NO			
55. IF FEMALE, PREGNANT IN LAST YEAR? ☐ YES ☒ NO ☐ UNK			
56. CERTIFY THAT TO THE BEST OF MY KNOWLEDGE/OPINION OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED Decedent Attended Since 11/05/2020		57. SIGNATURE AND TITLE OF CERTIFIER ISHITA SHARMA M.D.	
58. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE ISHITA SHARMA M.D. 12200 BELLFLOWER BLVD., DOWNEY, CA 90242		59. LICENSE NUMBER A116461	
60. DATE 11/15/2020		61. DATE 11/20/2020	
62. CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED MANNER OF DEATH ☐ Natural ☐ Accident ☐ Homicide ☐ Suicide ☐ Pending Investigation ☐ Could not be determined ☐ YES ☐ NO ☐ UNK			
63. INJURED AT WORK? ☐ YES ☐ NO ☐ UNK			
64. INJURY DATE mm/dd/yyyy 12/02/2020			
65. HOUR (24 Hour) 0545			
66. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)			
67. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)			
68. LOCATION OF INJURY (Street and number, or location, and city, and zip)			
69. SIGNATURE OF CORONER / DEPUTY CORONER			
70. DATE mm/dd/yyyy			
71. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER			
72. STATE REGISTRAR			
73. FAX AUTH#			
74. CENSUS TRACT			

CERTIFIED COPY OF VITAL RECORD
STATE OF CALIFORNIA, COUNTY OF LOS ANGELES

This is a true certified copy of the record filed in the County of Los Angeles Department of Public Health if it bears the Registrar's signature in purple ink.



002666631

DATE ISSUED

Health Officer and Registrar

DEC -4 2020

This copy is not valid unless printed on an engraved border, displaying the date, seal and signature of the Registrar.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

CALOSANGJL



COPY

Last Will and Testament

OF

WANDA M. HAAS

I, WANDA M. HAAS, also known as WANDA MAE HAAS, residing in the County of Los Angeles, State of California, being of sound and disposing mind and memory and not acting under duress, menace, fraud, or the undue influence of any person or persons whomsoever, do make, publish and declare this to be my Last Will and Testament, and hereby revoke any and all prior Wills and Codicils to Wills that I have previously made.

FIRST: I direct my Executor hereinafter named to pay all of my debts, expenses of last illness and funeral costs as soon as is convenient.

SECOND: I declare that I am a widow. My late husband's name is LESLIE L. HAAS. There were two (2) children issue of our marriage, namely COLLEEN E. HAAS and PATRICIA L. SAIA, both adults. I have no other children, now living or deceased.

THIRD: I hereby nominate and appoint COLLEEN E. HAAS and PATRICIA L. SAIA as Co-Executors to serve as such without bond. If, for any reason, either COLLEEN E. HAAS or PATRICIA L. SAIA, is unable or unwilling, to act as Co-Executor, then and in that event, the remaining nominee shall act as sole Executor, without bond. I hereby authorize my Executor to sell, lease or encumber by mortgage, by deed of trust, or otherwise, the whole or any part of my estate, with or without notice, but subject to such confirmation as may be required by law.

FOURTH: I have been explained and acknowledge that I understand the legal effect of holding property in joint tenancy, in trust, or naming a person the beneficiary of an asset. I am hereby executing concurrently with this Will, a revocable living trust and I am transferring my real property assets into same at this time.

FIFTH: I hereby give all of my jewelry, clothing, household furniture and furnishings, and other tangible articles of a personal nature to my children, COLLEEN E. HAAS and PATRICIA L. SAIA, who survive me, in equal shares as they shall agree.

SIXTH: I hereby give, devise and bequeath the rest, residue and remainder of my property and estate, both real and personal, and wheresoever or howsoever situated, of which I shall die seized or to which I may be entitled at the time of my death, to the Trustees then in office under that Trust designated as the **WANDA M. HAAS TRUST U/D/T dated AUGUST 1, 2001**, of which I am the Settlor and the initial Trustee. I direct that my estate shall be added to, administered, and distributed as part of that Trust according to the terms of the Trust and any amendment made to it prior to my death. To the extent permitted by law, it is not my intent to create a separate trust by this Will or subject the Trust or other property added to it by this Will to the jurisdiction of the probate court except as provided in the Trust mentioned above.

SEVENTH: If the disposition in the SIXTH paragraph of this Will is inoperative or is invalid for any reason or if the Trust referred to in the SIXTH paragraph fails or is revoked, I incorporate herein by reference the terms of that Trust as executed without giving effect to any amendments made subsequently, and I bequeath and devise the residue of my estate to the Trustees named in the Trust as Trustees, to be held, administered and distributed as provided in this instrument.

EIGHTH: I have intentionally omitted making provision for all of my heirs who are not specifically mentioned herein, and I hereby generally and specifically disinherit each, any and all persons whomsoever claiming to be or who may lawfully be determined to be my heirs at law except such as are mentioned in this Will, and if any of such persons or such heirs, or any devisees, legatees, or beneficiaries under this Will or intended so to be, shall contest in any Court any of the provisions of this instrument, are shown not to defend or assist in good faith in defense of any and all such contests, then each and all such persons shall not be entitled to any devices, legatees or benefits under this Will or any Codicils hereto and any

and all devices, legatees, either or both, otherwise provided to be paid to such person, shall be paid, distributed and passed as though such person had died without issue of his or her body before my death.

NINTH: Should any part, clause, provision or condition of this Will be held to be void, invalid and inoperative, then I hereby direct such invalidity shall not affect any other clause, provision or condition hereof, but the remainder of this Will shall be effective as though such clause, provision or condition had not been contained herein.

IN WITNESS WHEREOF, I have hereunto set my hand this 1st day of August, 2001 at Norwalk, California.

Wanda M. Haas
WANDA M. HAAS

THE FOREGOING INSTRUMENT, consisting of three (3) pages, including this page and the page signed by the Witnesses, was, at the date hereof, by the Testatrix, signed as and declared to be her Last Will and Testament, in the presence of us, who, at her request and in her presence and in the presence of each other, subscribe our names as witnesses hereto. Each of us observed the signing of this Will by the Testatrix and by each other subscribing witness, and each of us knows that each signature is the signature of the person whose name is signed.

Each of us is now more than 18 years of age and a competent witness and each resides at the address set forth after his or her name. We are acquainted with the Testatrix. At this time she is over the age of 18 years, and to the best of our knowledge she is of sound mind and is not acting under duress, menace, fraud, misrepresentation or undue influence.

We declare, under penalty of perjury under the laws of the State of California, that the foregoing is true and correct. Executed at Norwalk, California this 1st day of August, 2001.

Paul Jay Fisher Address: 12749 Norwalk Blvd, #111
Norwalk CA 90650-3181
Robert S. Smith Address: 12749 Norwalk Blvd, #111
Norwalk, CA 90650

FERRUZZO & FERRUZZO, LLP
Michelle M. Lepich, Esq.
3737 Birch Street, Suite 400
Newport Beach, California 92660
Tel.: (949) 608-6900
Fax: (949) 608-6994
mlepich@ferruzzo.com

Attorneys for **PATRICIA L. SAIA** and **COLLEEN E. HAAS**, Trustee

STATE OF CALIFORNIA, COUNTY OF LOS ANGELES

In the Matter of the

**WANDA M. HAAS TRUST UDT DATED
AUGUST 1, 2001**

DECLARATION BY TRUSTEE

We, **PATRICIA L. SAIA** and **COLLEEN E. HAAS**, trustee of the **WANDA M. HAAS TRUST UDT DATED AUGUST 1, 2001**, are informed, and believe, and therefore declare as follows:

1. On August 1, 2001, **WANDA M. HAAS**, as settlor, established the **WANDA M. HAAS TRUST UDT DATED AUGUST 1, 2001**, which was amended on August 13, 2014 (the "Trust") and appointed **WANDA M. HAAS**, as initial trustee of the Trust.
2. **WANDA M. HAAS** died on November 18, 2020. Upon her death, **PATRICIA L. SAIA** and **COLLEEN E. HAAS** became the successor trustees of the Trust ("Trustee").
3. The Trustee has administered the Trust and, based on that administration, has determined that the assets held in the Trust and in **WANDA M. HAAS'** estate as of November 18, 2020 are those listed on **Exhibit A**, attached and incorporated by reference.
4. The Trustee has no knowledge of any gifts made by **WANDA M. HAAS** during her lifetime for which IRS Form 709 - Gift Tax Return was required to be filed.

5. Based upon the total value of **WANDA M. HAAS'** estate, as demonstrated by the assets listed on **Exhibit A**, and the total value of gifts made by **WANDA M. HAAS** during her lifetime for which IRS Form 709 - Gift Tax Return was required to be filed, the Trustee has determined that IRS Form 706 - Estate Tax Return is not required to be filed and Federal Estate Taxes are not due and payable as a result of the death of **WANDA M. HAAS**.

6. The Trustee has determined that **PATRICIA L. SAIA, COLLEEN E. HAAS, CLAIRE BRIDGFORD, KEVIN SAIA, BRIAN SAIA, and EMILY SAIA** are identified as beneficiaries of the Trust and that their interests vested by virtue of the fact that they were living as of the date of **WANDA M. HAAS'** death (collectively, "Beneficiaries").

7. Pursuant to Article Two, Section 2.04 of the Trust, the Trust assets shall be distributed to the Beneficiaries as follows:

- a. Twenty-five percent (25%) share for **PATRICIA L. SAIA**, outright and free of trust;
- b. Twenty-five percent (25%) share for **COLLEEN E. HAAS**, outright and free of trust; and
- c. Fifty percent (50%) share for **WANDA M. HAAS'** grandchildren, **CLAIRE BRIDGFORD, KEVIN SAIA, BRIAN SAIA, and EMILY SAIA**, in equal shares, share and share alike, outright and free of trust since all grandchildren have attained the age of twenty-one (21).

8. The Trustee made final distributions to the Beneficiaries as follows:

- a. Cash in the amount of \$65,765.87 and 50% interest in the real property farmland located in Camas County, Idaho, Parcel No. RP 01N15E260100 to **PATRICIA L. SAIA**, outright and free of trust;

b. Cash in the amount of \$65,765.87 and 50% interest in the real property farmland located in Camas County, Idaho, Parcel No. RP 01N15E260100 to **COLLEEN E. HAAS**, outright and free of trust;

c. Cash in the amount of \$162,500.00 to **CLAIRE BRIDGFORD**, outright and free of trust;

d. Cash in the amount of \$162,500.00 to **KEVIN SAIA**, outright and free of trust;

e. Cash in the amount of \$162,500.00 to **BRIAN SAIA**, outright and free of trust;

f. Cash in the amount of \$162,500.00 to **EMILY SAIA**, outright and free of trust;

9. The Trustee will hold back approximately \$24,000.00 as a reserve ("Reserve"), which will be maintained for a reasonable period following the filing of the income tax returns for the year of final distribution ("Reserve Period"). At the expiration of the Reserve Period, the remaining balance of the Reserve, if any, will be distributed to the Beneficiaries according to the terms of the Trust.

10. The Trustee will undertake to resolve any further liabilities that may be incurred with respect to winding up the affairs of the Trust and distribution of the Trust estate, including payment of tax liability and professional fees resulting from trust administration and preparation of tax returns.

NOW THEREFORE, the Trustee resolves as follows:

1. The assets held in the Trust and in **WANDA M. HAAS'** estate as of November 18, 2020 are those listed on **Exhibit A**.

2. The Trust assets were allocated accordingly and distributed to the Beneficiaries.
3. The Trustee shall take whatever further action and execute whatever further documents that are necessary to cause the title to said assets to be allocated and distributed to the Beneficiaries in the manner prescribed by the Trust.
4. The Trustee shall take whatever further actions and execute whatever tax returns that are required or deemed proper with respect to winding up the affairs of the Trust and distribution of the Trust estate.

The matters stated above are true of our own knowledge except as to those matters which are stated on information and belief, and as to those matters we are informed and believe that they are true.

We declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on _____, 2023, at _____, California.

Dated: 3/28/2023, 2023

Patricia L. Saia, Trustee
PATRICIA L. SAIA, Trustee

Dated: 3-28-23, 2023

Colleen E. Haas, Trustee
COLLEEN E. HAAS, Trustee

A Notary Public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of Orange)

On MARCH 28, 2023, before me, Diana Figueroa, Notary Public, personally appeared **PATRICIA L. SAIA** and **COLLEEN E. HAAS**, who proved to me on the basis of satisfactory evidence 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 in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

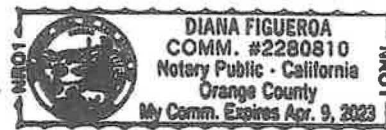
I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature Diana Figueroa

(Seal)



CERTIFICATION OF VITAL RECORD

STATE OF CALIFORNIA DEPARTMENT OF HEALTH SERVICES

3 052001085776

CERTIFICATE OF DEATH

3 200130 006223

STATE FILE NUMBER		STATE OF CALIFORNIA USE BLACK INK ONLY. NO ERASURES, WHITEOUTS OR ALTERATIONS FD-202 (REV. 1/99)		LOCAL REGISTRATION NUMBER	
1. NAME OF DECEASED—FIRST (GIVEN)		2. MIDDLE		3. LAST (FAMILY)	
LESLIE		LEONARD		HAAS	
4. DATE OF BIRTH MM/DD/YYYY		5. AGE YRS.		6. SEX	
12/15/1925		75		M	
9. STATE OF BIRTH		10. SOCIAL SECURITY NO.		11. MILITARY SERVICE	
KS				☒ YES ☐ NO ☐ U.S. ARMY	
12. MARITAL STATUS		13. EDUCATION—YEARS COMPLETED		14. USUAL EMPLOYER	
MARRIED		14		CEBE COMPANY	
15. RACE		16. HISPANIC—SPECIFY		17. USUAL EMPLOYER	
WHITE		☐ YES ☒ NO		CEBE COMPANY	
18. OCCUPATION		19. KIND OF BUSINESS		20. YEARS IN OCCUPATION	
OFFICE MANAGER				30	
21. RESIDENCE—(STREET AND NUMBER OR LOCATION)					
5017 E CHAPMAN AVE					
22. CITY		23. COUNTY		24. ZIP CODE	
ORANGE		ORANGE		92869	
25. NAME, RELATIONSHIP		26. MAILING ADDRESS (STREET AND NUMBER OR RURAL ROUTE NUMBER, CITY OR TOWN, STATE, ZIP)			
WANDA MAE HAAS - WIFE		17402 IBEX AVE ARTESIA CA 90701			
27. NAME OF SURVIVING SPOUSE—FIRST		28. MIDDLE		29. LAST (MAIDEN NAME)	
WANDA		MAE		VAN	
30. NAME OF FATHER—FIRST		31. MIDDLE		32. LAST	
DAVID				HAAS	
33. NAME OF MOTHER—FIRST		34. MIDDLE		35. LAST (MAIDEN)	
LYDIA				MOHN	
36. DATE MM/DD/YYYY		37. PLACE OF FINAL DISPOSITION			
05/07/2001		RIVERSIDE NATIONAL CEMETERY 22495 VAN BUREN BLVD RIVERSIDE CA 92518			
38. TYPE OF DISPOSITION		39. SIGNATURE OF CORONER		40. LICENSE NO.	
BU		<i>David S. Simon</i>		7693	
41. NAME OF FUNERAL DIRECTOR		42. LICENSE NO.		43. SIGNATURE OF LOCAL REGISTRAR	
FOREST LAWN MORTUARY, CYPRESS		FD-1051		<i>Monica Mehren</i>	
44. PLACE OF DEATH		45. IF HOSPITAL, SPECIFY ORG		46. COUNTY	
IHS ORANGE HILLS		☐ IP ☐ ER/OP ☐ OCA ☒ CORP. ☐ RES. CARE ☐ OTHER		ORANGE	
47. STREET ADDRESS—(STREET AND NUMBER OR LOCATION)		48. CITY		49. DEATH REPORTED TO CORONER	
5017 E. CHAPMAN AVE		ORANGE		☐ YES ☒ NO	
50. DEATH WAS CAUSED BY (ENTER ONLY ONE CAUSE PER LINE FOR A, B, C, AND D)		51. TIME INTERVAL BETWEEN ONSET AND DEATH		52. DEATH REPORTED TO CORONER	
(A) RESPIRATORY FAILURE		10 MINS		☐ YES ☒ NO	
(B) GUTTAN BARRE SYNDROME		10 MOS		☐ YES ☒ NO	
(C)				☐ YES ☒ NO	
(D)				☐ YES ☒ NO	
53. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 50					
NONE					
54. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 50 OR 51? IF YES, LIST TYPE OF OPERATION AND DATE.					
G610 NO					
55. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED.		56. SIGNATURE AND TITLE OF CERTIFIER		57. LICENSE NO.	
DECEDENT ATTENDED SINCE DECEASED LAST SIGN DATE MM/DD/YYYY		<i>Monica Mehren MD</i>		6063266	
58. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP		59. DATE MM/DD/YYYY			
MONICA MEHREN MD 5017 E. CHAPMAN AVE ORANGE CA 92869		05/01/2001			
60. I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED.		61. INJURY AT WORK		62. INJURY DATE MM/DD/YYYY	
119. MANNER OF DEATH		☐ YES ☒ NO		123. HOUR	
☐ NATURAL ☐ SUICIDE ☐ HOMICIDE				123. PLACE OF INJURY	
☐ ACCIDENT ☐ PENDING INVESTIGATION ☐ COULD NOT BE DETERMINED					
124. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)					
125. LOCATION (STREET AND NUMBER OR LOCATION AND CITY, ZIP)					
126. SIGNATURE OF CORONER OR DEPUTY CORONER					
127. DATE MM/DD/YYYY		128. TYPED NAME, TITLE OF CORONER OR DEPUTY CORONER			
STATE REGISTRAR		A 4 B X C 2 D E F G H		FAX AUTH. # 2427 CENSUS TRACT	

This is to certify that this document is a true copy of the official record filed with the Office of Vital Records.

01 AUG 31 PM 4: 29

MICHAEL L. RODRIGUEZ

DATE ISSUED



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

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

STATE OF CALIFORNIA
DEPARTMENT OF HEALTH SERVICES

3 2001 30 006223

LOCAL REGISTRATION OFFICE AND CERTIFICATE NUMBER

NO ERASURES, WHITEDUPS, OR ALTERATIONS

STATE/LOCAL REGISTRAR USE ONLY	1.	2.	3.
PART I INFORMATION TO LOCATE RECORD—TYPE OR PRINT IN BLACK INK ONLY			
NAME AS IT APPEARS ON RECORD ADDITIONAL INFORMATION TO LOCATE RECORD	1. NAME—FIRST (GIVEN) LESLIE		2. MIDDLE LEONARD
			3. LAST (FAMILY) HAAS
	4. SEX M	5. DATE OF EVENT—MM/DD/YYYY 04/30/2001	6. CITY OF OCCURRENCE ORANGE
			7. COUNTY OF OCCURRENCE ORANGE
8. FATHER'S NAME AS STATED ON ORIGINAL DAVID - HAAS		9. MOTHER'S NAME AS STATED ON ORIGINAL LYDIA - MOHN	
PART II STATEMENT OF CORRECTIONS—NO ERASURES, WHITEOUTS, OR ALTERATIONS			
LIST ONE ITEM PER LINE	10. CERTIFICATE ITEM NUMBER 30	11. INFORMATION AS IT APPEARS ON ORIGINAL RECORD VAN	
		2 OF 8	
		12. INFORMATION AS IT SHOULD APPEAR VAN DEVENTER	
	REASON FOR CORRECTION	13. TO CORRECT ORIGINAL RECORD	
AFFIDAVITS AND SIGNATURES	We, the undersigned, hereby certify under penalty of perjury that we have personal knowledge of the above fact and that the information given above is true and correct.		
TWO PERSONS MUST SIGN THIS FORM	14. SIGNATURE OF FIRST PERSON 	15. TITLE/RELATIONSHIP TO PERSON IN PART I CLIENT REP	16. DATE SIGNED—MM/DD/YYYY 06/15/2001
	17. AGE LEGAL AGE	18. ADDRESS (STREET, CITY, STATE, ZIP) 4471 LINCOLN AVE CYPRESS CA 90630	
USE BLACK INK ONLY	19. SIGNATURE OF SECOND PERSON 	20. TITLE/RELATIONSHIP TO PERSON IN PART I CLIENT REP	21. DATE SIGNED—MM/DD/YYYY 06/13/2001
	22. AGE LEGAL AGE	23. ADDRESS (STREET, CITY, STATE, ZIP) 4471 LINCOLN AVE CYPRESS CA 90630	
STATE/LOCAL REGISTRAR USE ONLY	24. SIGNATURE OF STATE OR LOCAL REGISTRAR OFFICE OF THE STATE REGISTRAR OF VITAL STATISTICS		25. DATE ACCEPTED FOR REGISTRATION—MM/DD/YYYY 08/23/2001

STATE OF CALIFORNIA, DEPARTMENT OF HEALTH SERVICES, OFFICE OF STATE REGISTRAR

70-0100 (Rev. 1/75)



This is to certify that this document is a true copy of the official record filed with the Office of Vital Records.

01 AUG 31 Fri 4: 29

MICHAEL L. RODRIAN
STATE REGISTRAR OF VITAL RECORDS

DATE ISSUED

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



* 001215880 *



Last Will and Testament

OF

LESLIE L. HAAS

I, **LESLIE L. HAAS**, also known as **LESLIE LEONARD HAAS**, residing in the County of Los Angeles, State of California, being of sound and disposing mind and memory and not acting under duress, menace, fraud, or the undue influence of any person or persons whomsoever, do make, publish and declare this to be my Last Will and Testament, and hereby revoke any and all former Wills and Codicils to Wills by me at any time heretofore made.

FIRST: I direct my Executor hereinafter named to pay all of my just debts, expenses of last illness and funeral costs as soon as is convenient.

SECOND: As used in this Will, the masculine, feminine or neuter gender, and the singular or plural number, shall each be deemed to include the others whenever the context so indicates.

THIRD: I declare that I am married to **WANDA M. HAAS**. There are (2) children the issue of our marriage, namely, **COLLEEN ELAINE HAAS** and **PATRICIA LYNN SAIA**, both adults. I have no other children now living or deceased.

FOURTH: I hereby nominate and appoint my wife, **WANDA M. HAAS**, as Executor of this, my Last Will and Testament, to serve as such without bond. If, for any reason, **WANDA M. HAAS** is unable or unwilling to serve as Executor, then and in that event, I nominate and appoint my daughters, **COLLEEN E. HAAS** and **PATRICIA L. SAIA**, to serve as Co-Executors of this, my Last Will and Testament, to serve as such without

2214

bond. If, for any reason, either nominee is unable or unwilling to serve as Co-Executor, then and in that event, the remaining nominee may serve as sole Executor, to serve as such without bond.

I hereby authorize my Executor to sell, lease or encumber by mortgage, deed of trust, or otherwise, the whole or any part of my estate, with or without notice, but subject to such confirmation as may be required by law.

FIFTH: I have been explained and acknowledge that I understand the legal effect of holding property in joint tenancy, in trust, or naming a person the beneficiary of an asset.

SIXTH: I hereby give, devise and bequeath all of my property and estate, both real and personal, and wheresoever or howsoever situated of which I shall die seized or to which I may be entitled at the time of my death to my wife, WANDA M. HAAS.

SEVENTH: Should my wife, WANDA M. HAAS, predecease me, or if we should both perish as a result of the same accident or calamity, at or about the same time, then and in that event, I hereby give, devise and bequeath all of my estate, both real and personal, and wheresoever or howsoever situated of which I shall die seized, as follows:

- (a) One (1) share to my daughter, COLLEEN ELAINE HAAS, if then living, and if not to her issue, if any, by right of representation.
- (b) One (1) share to my daughter, PATRICIA LYNN SAIA, if then living, and if not to her issue, by right of representation.
- (c) Any shares not effectively disposed of by the provisions of this paragraph shall be added on a pro rata basis to the shares that are effectively disposed of by this paragraph.

EIGHTH: I have intentionally omitted making provision for all of my heirs who are not specifically mentioned herein, and I hereby generally and specifically disinherit each, any and all persons whomsoever claiming to be or who may lawfully be determined to be my

heirs at law except such as are mentioned in this Will, and if any such persons or such heirs, or any devisees, legatees, or beneficiaries under this Will or intended so to be, shall contest in any Court any of the provisions of this instrument, or shall not defend or assist in good faith in the defense of any and all such contests, then each and all of such persons shall not be entitled to any devises, legacies, or benefits under this Will or any Codicil hereto, and any and all devises, legacies, either or both, otherwise provided to be paid to such person, shall be paid, distributed and pass as though such person had died without issue of his or her body before my death.

NINTH: Should any part, clause, provision or condition of this Will be held to be void, invalid and inoperative, then I hereby direct such invalidity shall not affect any other clause, provision or condition hereof, but the remainder of this Will shall be effective as though such clause, provision or condition had not been contained herein.

IN WITNESS WHEREOF, I have hereunto set my hand this 8th day of July, 1996 at Norwalk, California.



LESLIE L. HAAS

THE FOREGOING INSTRUMENT, consisting of four (4) pages, including this page and the page signed by the Witnesses, was, at the date hereof, by the Testator, signed as and declared to be his Last Will and Testament, in the presence of us, who, at his request and in his presence and in the presence of each other, subscribe our names as witnesses hereto. Each of us observed the signing of this Will by the Testator and by each other subscribing witness, and each of us knows that each signature is the true signature of the person whose name is signed.

Each of us is now more than 18 years of age and a competent witness and each resides at the address set forth after his or her name. We are acquainted with the Testator. At this time he is over

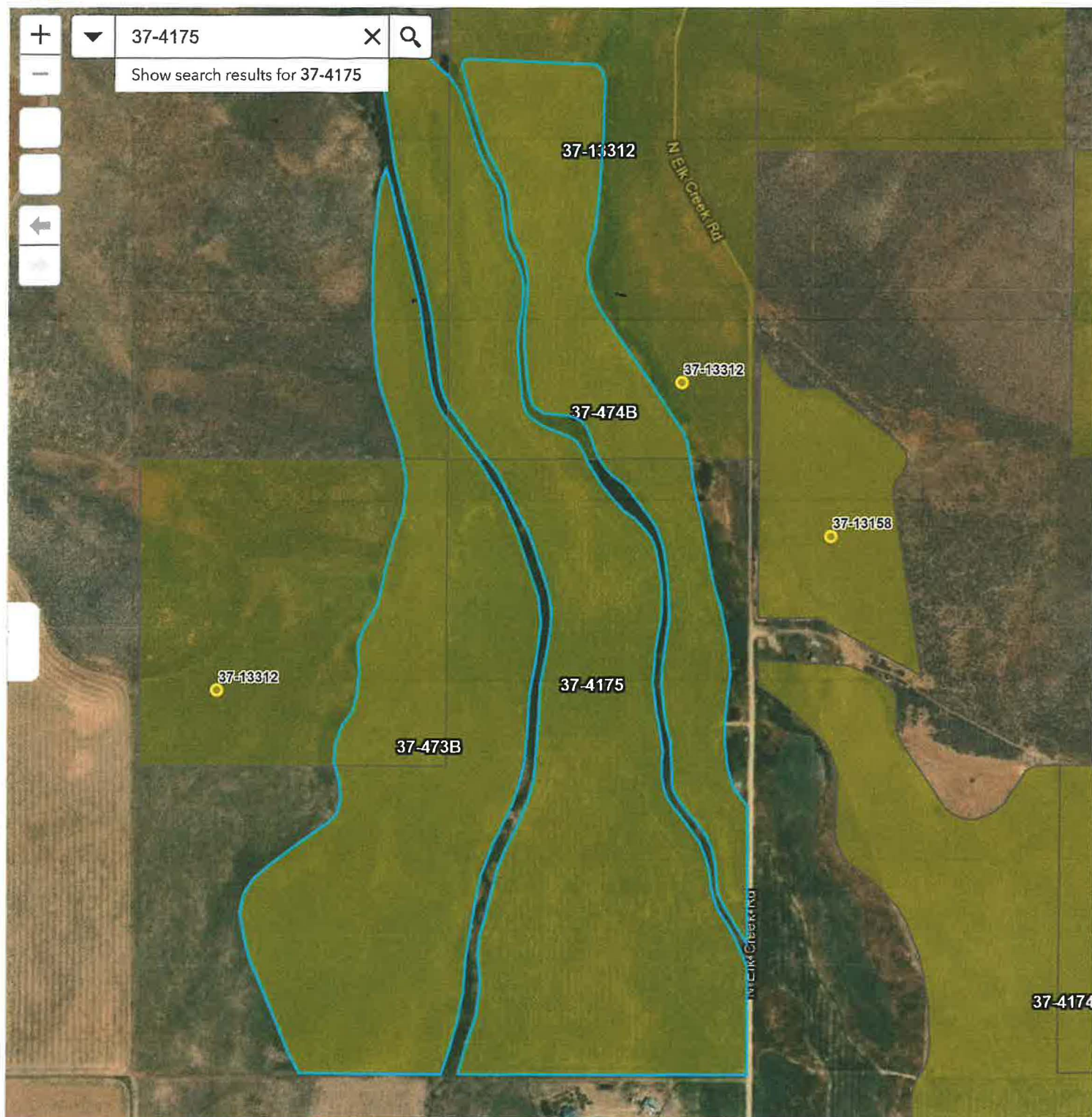
the age of 18 years, and to the best of our knowledge he is of sound mind and is not acting under duress, menace, fraud, misrepresentation or undue influence.

We declare, under penalty of perjury under the laws of the State of California, that the foregoing is true and correct.

Executed this 8th day of July, 1996, at Norwalk, California.

Sandi Sigal Address: 16154 Summerhead Dr.
La Mirada CA 90638

Janice Lopez Address: 15140 Vista del Valle
La Brea Hts. Ca 90631



0 300 600ft
-114.625 43.393 Degrees



IDAHO DEPARTMENT OF
WATER RESOURCES

322 E Front Street, Suite 648, Boise ID 83702 • PO Box 83720, Boise ID 83720-0098
Phone: 208-287-4800 • Fax: 208-287-6700 • Email: idwrinfo@idwr.idaho.gov • Website: idwr.idaho.gov

Governor Brad Little

Director Mathew Weaver

May 30, 2024

COLLEEN E HAAS
PATRICIA L SAIA
290 SIERKS ST
COSTA MESA CA 92627-2152

Re: Change in Ownership for Water Right No(s): 37-473B, 37-474B, 37-4175 & 37-13312

Dear Water Right Holder(s):

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

Updating the ownership record for a water right does not reconfirm the validity of the right. When processing a Notice of Change in Water Right Ownership, the Department does not review the history of water use to determine if the right has been forfeited or deliberately abandoned 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 Idaho Code §§ 42-222 and 42-223.

On the form, you requested and paid the fee for water rights 37-473B and 37-474B to be split. The water rights were not split as you own the land under the entirety of the rights. A refund of \$150 has been requested and will be sent to Patricia Saia under separate cover from the Idaho State Controller's Office.

Please note, water right owners are required to report any change of water right ownership and any change of mailing address to the Department within 120 days of the change. Reporting forms are available from any office of the Department, or from the Department's website.

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

Sincerely,

Jean Hersley
Technical Records Specialist 2

Enclosure(s)

c: Water District No. 37B

Hersley, Jean

From: Hersley, Jean
Sent: Thursday, May 30, 2024 9:42 AM
To: IdwrPayable
Subject: refund
Attachments: Saia Basin 37.docx

Please process the attached refund. Thank you.



Jean Hersley
Technical Records Specialist II
Idaho Dept Water Resources
(208) 287-4942

Idaho Department of Water Resources Receipt

Receipt ID: C118256

Payment Amount	\$250.00	Date Received	5/3/2024	Region	STATE
----------------	----------	---------------	----------	--------	-------

Payment Type	Check	Check Number	126
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Payer	SAIA, PATRICIA
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Comments	CHANGE OF OWNERSHIP WR # 37-474B, 37-473B (SPLITS) WR# 37-13312, 37-4175 PREVIOUS OWNER'S: WANDA HAAS AND PATRICIA SAIA NEW OWNERS: COLLEEN HAAS AND PATRICIA SAIA DOCUMENT NUMBER: D33345
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Fee Details

Amount	Description	PCA	Fund	Fund Detail	Subsidiary	Object
\$250.00	OWNERSHIP CHANGES/SECURITY INTERESTS	56140	0229	21		1155

Signature Line (Department Representative)

Please refund \$150 to:

PATRICIA L SAIA
290 SIERKS ST
COSTA MESA CA 92627-2152

Water rights 37-473B and 37-474B were not split.

Thank you.

Jean

Hersley, Jean

From: Patricia Saia <patsaia82@gmail.com>
Sent: Tuesday, May 28, 2024 10:13 PM
To: Hersley, Jean
Subject: Re: Change in Ownership Water Right No(s): 37-474B, 37-473B, 37-4175 & 37-13312
Attachments: Idaho property quitclaim deed.pdf

CAUTION: This email originated outside the State of Idaho network. Verify links and attachments BEFORE you click or open, even if you recognize and/or trust the sender. Contact your agency service desk with any concerns.

Third email re: Fairfield, Idaho property water rights

On Wed, May 15, 2024 at 8:26 AM Hersley, Jean <Jean.Hersley@idwr.idaho.gov> wrote:

>
> Dear Interested Parties:
>
>
>
> The Department of Water Resources (Department) acknowledges receipt of your Notice of Change in Water Right Ownership (Notice).
>
>
>
> Our review of your Notice indicates that additional information is required before the Department can process the change. The information required is indicated below:
>
>
>
> The current owners of these water rights are Leslie L. Haas and Wanda Mae Haas. The Department will need a chain of title from Leslie L. Haas and Wanda Mae Haas to the Wanda Haas Trust.
>
>
>
> Because the Department cannot process the Notice without proper documentation, we will hold any action on your notice pending receipt of the necessary information. If we do not receive the necessary information within 30 days, we will return your notice and all attachments, and your notice will not be processed. You can mail the requested information to: IDWR, PO Box 83720, Boise, ID, 83720-0098 or email to file@idwr.idaho.gov, attention: Jean.
>
>
>
> Also, please note that water right holders are required to report any change of ownership and/or mailing address to the Department within 120 days of the change. Forms to update ownership or update your address are available from any office of the Department or on the Department's website.
>
>
>
>
>
> If you have any questions regarding this matter, please contact me at (208) 287-4942.
>

>
>
>
>
> Jean Hersley
>
> Technical Records Specialist II
>
> Idaho Dept Water Resources
>
> (208) 287-4942
>
>
>
>
>
>
>
>
>
>

Hersley, Jean

From: Patricia Saia <patsaia82@gmail.com>
Sent: Tuesday, May 28, 2024 10:12 PM
To: Hersley, Jean
Subject: Re: Change in Ownership Water Right No(s): 37-474B, 37-473B, 37-4175 & 37-13312
Attachments: Wanda Haas Death Certificate.pdf; Wanda Haas Will 8-1-2001.pdf; Wanda Haas Execution of Trust Disbursement.pdf

CAUTION: This email originated outside the State of Idaho network. Verify links and attachments BEFORE you click or open, even if you recognize and/or trust the sender. Contact your agency service desk with any concerns.

Second email re: Water rights for Fairfield Idaho property

On Wed, May 15, 2024 at 8:26 AM Hersley, Jean <Jean.Hersley@idwr.idaho.gov> wrote:

Dear Interested Parties:

The Department of Water Resources (Department) acknowledges receipt of your Notice of Change in Water Right Ownership (Notice).

Our review of your Notice indicates that additional information is required before the Department can process the change. The information required is indicated below:

- The current owners of these water rights are Leslie L. Haas and Wanda Mae Haas. The Department will need a chain of title from Leslie L. Haas and Wanda Mae Haas to the Wanda Haas Trust.

Because the Department cannot process the Notice without proper documentation, we will hold any action on your notice pending receipt of the necessary information. If we do not receive the necessary information within 30 days, we will return your notice and all attachments, and your notice will not be processed. You can mail the requested information to: IDWR, PO Box 83720, Boise, ID, 83720-0098 or email to file@idwr.idaho.gov, attention: Jean.

Also, please note that water right holders are required to report any change of ownership and/or mailing address to the Department within 120 days of the change. Forms to update ownership or update your address are available from any office of the Department or on the Department's website.

If you have any questions regarding this matter, please contact me at (208) 287-4942.



Jean Hersley

Technical Records Specialist II

Idaho Dept Water Resources

(208) 287-4942

Hersley, Jean

From: Patricia Saia <patsaia82@gmail.com>
Sent: Tuesday, May 28, 2024 10:09 PM
To: Hersley, Jean
Subject: Re: Change in Ownership Water Right No(s): 37-474B, 37-473B, 37-4175 & 37-13312
Attachments: Leslie Haas Death Certificate.pdf; Leslie Haas Will.pdf

CAUTION: This email originated outside the State of Idaho network. Verify links and attachments BEFORE you click or open, even if you recognize and/or trust the sender. Contact your agency service desk with any concerns.

Patricia Saia <patsaia82@gmail.com>

8:54 PM (12 minutes ago)

to Jean.Hersley, Colleen

Dear Ms. Hersley,

I have attached all of the documentation for the change of ownership request of the Water rights pertaining to the farmland property in Fairfield, Idaho.

I'm sorry, I was not aware that the water rights were owned separately from the ownership of the land, or that the change needed to be reported within 120 days of ownership change.

I will endeavor to trace the chain of events that led me to request that the water rights ownership should be put into my (Patricia Saia) and my sister's (Colleen Haas) names.

Legal description of the "Fairfield, Idaho Property"

320 acre farm/ranching operation located eight miles northeast of Fairfield, Idaho with a legal description of Township 1 North, Range

15 East, Boise Meridian, Camas County, Idaho, Section 26: East one-half Parcel Number: RP 01N15E260100 A

The water rights to this land have been in our family since as early as 1883. The land was originally homesteaded in 1878 by my Great-Great-Grandfather, George Washington Peck who relocated to Idaho from Wisconsin.

My Great-Grandfather, William Henry Peck inherited the land upon his father's death in 1931.

Upon the death of W.H. Peck in 1956, the land and water rights (1/2 original land) were transferred to my Grandmother, Laura Viola Peck Vandeventer Whitney. The other half of the property went to her sister.

Upon the death of my Grandmother in 1990, the land and the water rights were transferred to my mother, Wanda Mae Vandeventer Haas and my father, Leslie Leonard Haas.

Upon my father's death in 2001, his estate transferred to my mother (death certificate and will are attached).

Unfortunately, at this time, my mother did not remove my father's name from the water rights nor did she put the water rights into her Trust, only the land ownership. I am presuming that she was unaware that the water rights ownership was separate from the ownership of the land, since this was never discussed with either me or my sister.

When my mother passed away in 2020 (death certificate and will are attached), my sister and I opted to take ownership of the land as part of our portion of her trust (copy of the trust disbursement and the Quit Claim Deed to the land are attached).

It was only brought to our attention recently that we needed to transfer the water rights into our name by Opal Davis(Butte Springs Ranch), who owns the other half of the original property and leases our half of the land, at which time, April 2024, I applied to change the water rights ownership into my and my sister's names.

I hope this clarifies the request for change of ownership at this time. If there are any other documents that you need to determine this matter, or if there is any information that needs clarification, please let me know, I can send you hard copies of all the attachments if you need them.

Patricia Saia
patsaia82@gmail.com
714.329.8028

* Four more attachments are in a second email

On Wed, May 15, 2024 at 8:26 AM Hersley, Jean <Jean.Hersley@idwr.idaho.gov> wrote:

>
> Dear Interested Parties:
>
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>
> The Department of Water Resources (Department) acknowledges receipt of your Notice of Change in Water Right Ownership (Notice).
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> Our review of your Notice indicates that additional information is required before the Department can process the change. The information required is indicated below:
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> The current owners of these water rights are Leslie L. Haas and Wanda Mae Haas. The Department will need a chain of title from Leslie L. Haas and Wanda Mae Haas to the Wanda Haas Trust.
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> Because the Department cannot process the Notice without proper documentation, we will hold any action on your notice pending receipt of the necessary information. If we do not receive the necessary information within 30 days, we will return your notice and all attachments, and your notice will not be processed. You can mail the requested information to: IDWR, PO Box 83720, Boise, ID, 83720-0098 or email to file@idwr.idaho.gov, attention: Jean.
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> Also, please note that water right holders are required to report any change of ownership and/or mailing address to the Department within 120 days of the change. Forms to update ownership or update your address are available from any office of the Department or on the Department's website.
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> If you have any questions regarding this matter, please contact me at (208) 287-4942.
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>
> Jean Hersley
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> Technical Records Specialist II
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> Idaho Dept Water Resources
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> (208) 287-4942

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IDAHO DEPARTMENT OF
WATER RESOURCES

322 E Front Street, Suite 648, Boise ID 83702 • PO Box 83720, Boise ID 83720-0098
Phone: 208-287-4800 • Fax: 208-287-6700 • Email: idwrinfo@idwr.idaho.gov • Website: idwr.idaho.gov

Governor Brad Little

Director Mathew Weaver

May 15, 2024

COLLEEN HAAS
PATRICIA SAIA
290 SIERKS ST
COSTA MESA CA 92627-2152

RE: Change in Ownership Water Right No(s): 37-474B, 37-473B, 37-4175 & 37-13312

Dear Interested Parties:

The Department of Water Resources (Department) acknowledges receipt of your Notice of Change in Water Right Ownership (Notice).

Our review of your Notice indicates that additional information is required before the Department can process the change. The information required is indicated below:

- The current owners of these water rights are Leslie L. Haas and Wanda Mae Haas. The Department will need a chain of title from Leslie L. Haas and Wanda Mae Haas to the Wanda Haas Trust.

Because the Department cannot process the Notice without proper documentation, we will hold any action on your notice pending receipt of the necessary information. If we do not receive the necessary information within 30 days, we will return your notice and all attachments, and your notice will not be processed.

Also, please note that water right holders are required to report any change of ownership and/or mailing address to the Department within 120 days of the change. Forms to update ownership or update your address are available from any office of the Department or on the Department's website.

If you have any questions regarding this matter, please contact me at (208) 287-4942.

Sincerely,

Jean Hersley
Technical Records Specialist 2