

Print Claim Stub

WMA

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Please type or write clearly. Please include the Claim number shown below on any supporting documents you submit to IDWR.

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Claim Number:	Water right 96-2128(1419)
Date Submitted:	6/30/2022, 4:39:06 PM
Claim Fee:	\$60.00
Claimant(s)	STATE OF IDAHO FISH & GAME COMMISSION PO BOX 25 BOISE, ID 83707-0025
Claimed Purpos(s)	IRRIGATION

Office address and phone number:

Idaho Department of Water Resources
7600 Mineral Dr. Suite 100
Coeur d'Alene, ID 83815
(208) 762-2800

Inter-Agency Billing Receipt - Bill 042201

STATE OF IDAHO - STARS
INTERAGENCY BILLING INPUT

SECTION A - AGENCY NAME (BILLING AGY)				AGENCY CODE	CONTACT NAME	PHONE #	DOCUMENT DATE	CUR DOCUMENT #/SFX
Department of Water Resources				360	Susan Steed	287-4818	12/21/2022	BILL042201
SFX	T/C	GAAP	INDEX/PC A	SEC AGY	SUBSIDIARY	REV SUBOBJ	AMOUNT	INVOICE DESCRIPTION
01	130		75503	260	26000000	1155	\$116.00	WATER RIGHT CLAIMS WMA
						-		
SECTION B - THIS SECTION CONTAINS THE DESCRIPTION AND PRICE OF MATERIALS AND SERVICES SUPPLIED								
DESCRIPTION								
WATER RIGHT CLAIMS WMA								AMOUNT
								\$ 116.00
TOTAL								\$ 116.00

SECTION C - AGENCY NAME (PAYING AGY)				AGENCY CODE	CONTACT NAME	PHONE #	DATE	CUR DOCUMENT #/SFX
SFX	T/C	RVS	INDEX/PC A	SEC AGY	SUBSIDIARY	EXP SUBOBJ	AMOUNT	PROP NO./COMP NO.
01	240			360	36000000	-	\$ 116.00	BILL042201
						-		
						-		
						-		
						-		
TOTAL							\$ 116.00	

PAYING AGENCY'S AUTHORIZED SIGNATURE _____

DATE _____

ENTERED
DEC 21 2022
FISCAL.