RECEIVED
SEP 09 2025
DEPARTMENT OF
WATER RESOURCES

08/06/2025

NOTICE OF ERROR REPLY

Please type or print clearly, fill out this form completely and mail.

Return this reply form to IDWR by the deadline date printed below if you want IDWR to change your recommendation or you want to let IDWR know that you agree with its recommendation.

YOUR DEADLINE FOR RETURNING A NOTICE OF ERROR REPLY IS: 10/3/2025

Water right number: 97-4031

KATHRINE BADRAUN TRUST
C/O MARY ANGELOSANTE
1812 E CREEK VIEW AVE
SPOKANE WA 99224
Telephone Number: (509) 448-3444

1. Describe the portion of the proposed recommendation with which you disagree (e.g. priority date, period of use, source):

2. Describe the changes you wish to make in the proposed recommendation:

3. Give a brief explanation as to why you disagree with these portions:

X **I AGREE with this proposed recommendation: no changes need to be made.**

DATE: Sept. 2, 2025 **SIGNATURE:** Mary Angelosante

Please print your name: Mary Angelosante

IDWR Regional Office, 7600 N MINERAL DR STE 100, COEUR D ALENE, ID 83815-7763, (208) 762-2800

SCANNED
SEP 09 2025