

WATER DISTRICT
CONTACT SHEET Year: 2026

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DEPT. OF WATER RESOURCES
EASTERN REGION

Water District 27/ Blackfoot River

Water District No. / Name

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Assistant Watermaster/Secretary *(please circle)*

Address, City, State, Zip

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This information is required for elected water district officer(s). The information provided will be posted on the IDWR website. Please fill in the information above and return it to the appropriate IDWR regional office along with the other forms listed in the meeting checklist above, after your annual meeting.