

WATERMASTER REQUIREMENT SHEET

DATE OF MEETING: 3/7/05 TIME OF MEETING: _____

PLACE OF MEETING: Little Lost River Community Center

IDWR EMPLOYEE IN ATTENDANCE @ ANNUAL MEETING: _____

ELECTED OFFICERS:

Chairman: Jim Anderson
(name) (address)

Phone #: _____

Sec/Treas: Leo D. Amy (Secy) Raige McAffee (Treas.)
(name) (address)

Phone #: _____

Watermaster: David S. Anderson 3794 Little Lost River Hwy
(name) (address) Howe, Id 83244

Phone #: _____

Board or Committee: Credentials Comm: George Woodie, Rod Pancheri,
Bill Stauffer.

Advisory Comm: Opmeer Mays, Rod Pancheri,
Chairman of Blaine County Canal Company.

COMMENTS: _____

APPOINTMENT REQUIREMENTS:

Copy of annual meeting minutes received: 3/28/05

Adopted Budget received: 3/28/05

Oath of Office received: _____

Petition for Watermaster Services received: _____

Certificate of Appointment sent: _____
(_____ Daily record books & Instructions to Watermaster sent)

WATER DISTRICT INFORMATION:

Watermaster Report received: 3-16-06