

CERTIFICATE OF MAILING

I certify that a true and correct copy of the ORDER OF PARTIAL DECREE was mailed on November 13, 2019, with sufficient first-class postage to the following:

MORRISON ESTATES HOMEOWNERS
WATER ASSN
PO BOX 2100
POST FALLS, ID 83877
Phone: 208-818-1743

DIRECTOR OF IDWR
PO BOX 83720
BOISE, ID 83720-0098


