



## **Annual Water District Meeting Information Form**

You must return the completed form to IDWR as soon as possible and no later than 5 weeks <u>before</u> the meeting date to enable IDWR to send notice of the annual meeting at least 21 days before the meeting.

Water District No. 45-C. Water District Name: 6005e	ek.
Meeting Location  Facility Name	
Room Name/Number	
Street Address 100 ELM 57	
City <u>Oakley</u> Jolaho 83346	
Meeting Time/Day	
Date (month, day, year) 3/11/25	
Day of Week Tuesday Time / pm	
Time / pm	
Will the meeting be accessible via telephone or video conferencing?  If so, include specific information on how water users can participate (eg. link, virtuplatform and/or telephone number). This information must appear on the meeting rand meeting agenda	ıal iotice
Levey B. Aclams Secretary	
Signature, Water District Representative Title	
208-678-1101	
Representative Phone Number	
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Representative Email Address	

Return this form via mail, fax, or email, attention: Suzanne George

IDWR Southern Regional Office 650 Addison Ave W. Ste. 500 Twin Falls, Id 83301-5858

Phone: (208) 736-3033 / Fax: (208) 736-3037 Email: southerninfo@idwr.idaho.gov

RECEIVED
JAN 28 2025

DEPT. OF WATER RESOURCES SOUTHERN REGION