



## Annual Water District Meeting Information Form

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

**Water District No.** 37N **Water District Name:** LITTLE WOOD

### Meeting Location

**Facility Name** CAREY CITY HALL

**Room Name/Number** \_\_\_\_\_

**Street Address** 20482 MAIN ST

**City** CAREY IDAHO

### Meeting Time/Day

**Date (month, day, year)** FEBRUARY 3,

2026

**Day of Week**

TUESDAY

**Time** 3:00

**PM** \_\_\_\_\_

**Will the meeting be accessible via telephone or video conferencing?**

NO

If so, include specific information on how water users can participate (eg. link, virtual platform and/or telephone number). This information must appear on the meeting notice and meeting agenda

KATHI PECK

SECRETARY

*Signature, Water District Representative*

*Title*

\_\_208-309-



IDAHO DEPARTMENT OF  
**WATER RESOURCES**

0425

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*Representative Phone Number*  
KATHILWRID@GMAIL.COM

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*Representative Email Address*

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

IDWR Southern Regional Office  
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