CERTIFICATE OF MAILING

I hereby certify that true and correct copies of the ORDER OF PARTIAL DECREE were mailed on December 17, 2025, by first-class mail to the following:

MICHAEL STEFFEN 1504 S MOUNTAIN VIEW AVE TACOMA, WAS 98465

IDAHO DEPARTMENT OF WATER RESOURCES PO BOX 83720 BOISE, ID 83720-0098

Chief Deputy Clerk