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MAR 13 2020

IDAHO SOIL & WATER  
CONSERVATION COMMISSIONIDAHO SOIL & WATER  
CONSERVATION COMMISSION**REQUEST FOR ASSISTANCE**  
**CERTIFICATION**DISTRICT: **WEST SIDE SWCD**

Project or Activity Name:

FOR FISCAL YEAR: **2020-2021**Hours of Assistance Requested:  
6hrs attend board meetingsDue: **March 31,****CERTIFICATION**

By concurrence of a majority of the supervisors of the district board and the above name conservation district certifies that attached Request for Assistance is true and accurate, and further submits said Report for the above named District and fiscal year.

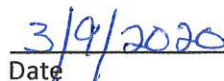
A copy of this Request for Assistance and supporting documents shall be kept at the District office and is available for public inspection.



Board Supervisor Signature

**JIM DIXON**

Printed Name



Date

**208-522-6250 EXT 3101**

District Telephone

**Joyce.Smith@id.nacdnet.net**

District Email Address

**FOR SWC USE ONLY:****DATE OF CONFIRMATION:**