

| Date of Report (mm/dd/yyyy): 11/15/2023 20:27 | ANNUAL Update ID #: |
|---|---|
| Trust Fund ID #: 19-053-006 | 7514 |
| | |
| Working title(s) of acquisition: | |
| Baker-Carver Regional Trail (Ho) | |
| Do you (does your organization/agency) still own interest in the above parcel? Yes Is the contact information for this parcel correct? Yes | |
| | |
| 4. Are there any other changes to the Initial Reporting Form? Please explain. | |
| Question #1 - If answer was "No", please complete below | Question #2 - If answer was "No", please complete below |
| Organization: | Organization: |
| Contact: | Contact: |
| Address: | Address: |
| City: | City: |
| Phone: | Phone: |
| Email: | Email: |

Notes:

Signature: Heather Kuikka