ASSIGNMENT

	I, DOUGLAS A. GIBBONS and	A KATHLEEN J. G.		_ of
	19110 SW Hennig Street,	Aloha, Oregon 9	7006	<u>-</u>
	(Mailing Address)	(City)	(State)	(Zip)
	do hereby assign all my interes No. <u>56233</u> , Permit No.4 <u>1</u> of the Water Resources Directo	<u>860</u> , as fil		
•	RICHARD L. MYERS and	J. M. MYERS, Sr	•	
	(N 333 Spruce Street, My	ame) rtle Point, Ore	gon 97458	
	(Mailing Address)	(City)	(State)	(Zip)
	TELEPHONE NUMBER 572-2627			
nty of Marion. I certify that the day ock m., and		Signature of Perm	More	198 <u>5</u> .
		Douglas A. Gibbo		
	Y	Kathleen J. Glb	Dilber	
	•	Kaciileeli o. Gubi		OREGON
	ASSIG	NMENT	BALL	M, OREGON
	I,E.T. SHEPPARD	(Decision of	BALI	of
	I,E.T. SHEPPARD	(Decision of	BALI	of
		(Decision of	BALI	of
	I,E.T. SHEPPARD	(Recipion of Sherman) (City)	(State)	of (Zip)
	E.T. SHEPPARD (Mailing Address)	(City) est in and to water	(State)	of // / / / / / / / / / / / / / / / / /
	I. E.T. SHEPPARD R.19 4 - 13489 (Mailing Address) do hereby assign all my interest	(City) est in and to water 38460 , as fi	(State) right Appl	of // / / / / / / / / / / / / / / / / /
	I,	(City) est in and to water 38460 , as fi	(State) right Appl	of (Zip) ication office
	I,	(City) est in and to water 38460 , as fi	(State) right Appl	of (Zip) ication office
	I,	(City) est in and to water 38460 , as fi	(State) right Appl	of (Zip) ication office
	I,E.T. SHEPPARD R 19 4 - 13 19 9 (Mailing Address) do hereby assign all my interest No	City) est in and to water 38460 , as fill or, to: Name) (City)	(State) right Appl	of (Zip) ication office
TE OF OREGON, nty of Marion. I certify that the day of	I. E.T. SHEPPARD R.13 4 - 121/89 (Mailing Address) do hereby assign all my interest No. 50947, Permit No. of the Water Resources Directed Williams E. Mep. R.R4-13-12-12 (Mailing Address) TELEPHONE NUMBER 123-7 BS WITNESS my hand this 24 The within was received by me of anythin 19 10 at 8:00	Shown (City) est in and to water 38460 , as fill or, to: Name) RR4-19-12 (City)	(State) (State) right Appl led in the	of (Zip) ication office 4 - Fack heard Ore (Zip)
ATE OF OREGON, nty of Marion. I certify that the day ock Am, and	I,	Shown (City) est in and to water 38460 , as fill or, to: Name) RR4-19-12 (City)	(State) (State) right Application the (State) (State)	of (Zip) ication office A Fack herry Ore (Zip)