

RECEIVED

SEP 22 1986

WATER RESOURCES DEPT
SALEM, OREGON

ASSIGNMENT

I, Cedric Cross of
(Name of Permittee)
650 S 1st Ave Coquille Ore 97423
(Mailing Address) (City) (State) (Zip)

do hereby assign all my interest in and to water right Application No. 59669
Permit No. 44857, as filed in the office of the Water Resources Director, to:

Tom Thurman
(Name)

Pt 1 Box 3350 Coquille Ore 97423
(Mailing Address) (City) (State) (Zip)

Telephone Number 396-2066

WITNESS my hand this 19 day of Sept 1986

STATE OF OREGON, } ss
County of Marion.

Cedric Cross
(Signature of Permittee)

I certify that the within was received by me
on the 22 day of September, 19 86, at 8:00
o'clock A.m., and was recorded in Miscellaneous
Records, Vol. 6 Page 1629.

Water Resources Director