

RECEIVED

OCT -1 1990

WATER RESOURCES DEPT.
SALEM, OREGON

A S S I G N M E N T

I, LEAL W. GRAHAM and BONNIE D. GRAHAM of
(Name of Permittee)

64800 Hunter Road LaGrande OR 97850
(Mailing Address) (City) (State) (Zip)

do hereby assign all my interest in and to water right(s) as follows:

Application No. 54138 Permit No. 40529

Application No. _____ Permit No. _____

Application No. _____ Permit No. _____

as filed in the office of the Water Resources Director, to

PHILIP R. STEVENSON and ELLEN L. STEVENSON
(Name)

_____ NORTH POWDER OR 97867
(Mailing Address) (City) (State) (Zip)

WITNESS my hand this 13th day of September, 19 90

STATE OF OREGON, }
County of Marion. } ss

Leal W. Graham
(Signature of Permittee)

I certify that the within was received by me
on the 1st day of October, 19 90, at 8
o'clock A.m., and was recorded in Miscellaneous
Records, Vol. 7 Page 2415.

Bonnie D. Graham

Water Resources Director

10-1-90
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