

A S S I G N M E N T

I, WILLAMETTE WATER COMPANY
(NAME)
P.O. BOX 46 SPRINGFIELD, OR. 97477
(MAILING ADDRESS) (CITY) (STATE) (ZIP)

do hereby assign all my interest in and to water right
Application Number C-2761, Permit Number G2643,
as filed in the office of the Water Resources Director, to:

WILLAMETTE WATER D.G. COMPANY
(NAME)
P.O. BOX 46 SPRINGFIELD, OR. 97477
(MAILING ADDRESS) (CITY) (STATE) (ZIP)

TELEPHONE NUMBER 503-747-7197

WITNESS my hand this 4th day of JANUARY 1995.

STATE OF OREGON, } ss
County of Marion.

I certify that the within was received by me
on the 5th day of January 1995, at 8
o'clock A.m., and was recorded in Miscellaneous
Records, Vol. 7 Page 2999.

James J. Carter PRES.
Robert W. Stewart SEC.

The completed assignment must be submitted to the Water
Resources Director,
together with a recording fee of \$10.

WATER RESOURCES DEPARTMENT
158 12TH ST. N.E.
SALEM, OR 97310