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DEC - 4 1996

REQUEST FOR ASSIGNMENT

WATER RESOURCES DEPT. SALEM, OREGON

16300 SW 192nd	Sherwood	Washington	Oregon	97140	(541)376-8359
(mailing address)	(city)	(county)	(state)	(zip)	(phone)
CHECK ONE					
[] - hereby assign all	my interest in a	and to application	on/permit;		
[X]] - hereby assign showing portion of a	•	-	on of applic	ation/perm	t (include a map
[] - hereby assign a p	oortion of my in	terest in and to	he entire ap	oplication/p	ermit;
Application # GR Certificate of Re Director, to:					
L &	L Farms / Rob (name of new o				
P.O. Box 69 (mailing address)	Echo (city) (c	Umatilla County) (sta	o <u>R 9782</u> te) (zip)	,)376-8433 hone)
(Note: If there are othe Groundwater Registrat	•				
Permit or Certificate	of Registration	of this request t	for assignm	ent STATE OF	
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