REQUEST FOR ASSIGNML .

Oregon Department of Veterans') 1. Cowa	n, Jr on b	enall of	the Dir	ector or
700 Summer St NE	Salem	OR			
(mailing address)	(city)				
CHECK ONE					
[XX] - hereby assign all my i	<u>nterest</u> i	n and to	applica	ation/	permit;
[] - hereby assign all mapplication/permit (include assigned);					
[] - hereby assign a portion application/permit;	n of my i	nterest	in and t	o the	entire
Application # 49637 OR GR Statement #, GR as filed in the office of the	, Per Certific e Water R	mit # ate of Re esources	4130 egistrat Directo	ion #	
Leon A Kenwed					
(name	of new o	wner)			-
PO. Box 518 · Um (address)	. a.L.l.l.u	Ocen	97	838 =	541-922-3513
(address)	(city)	(stat	e) (zi	p) (p	phone)
(Note: If there are other own Application, Permit of Certif must attach a list of their own applications are other own applications.	ers of th	e propert	ty descr cer kegi	ribed i	in this ion you
I hereby certify that I have property described in this A Registration of this request	pplicatio	n, Permi			
Witness my hand this applicant/perm	day of	otember	19/99	7	
applicant/per	nit holde	Mou	tof		
applicant/perm	mit holder	:			
DO NOT WRITE IN THIS BOX					
STATE OF OREGON,)		must b	mpleted e submi	tted t	
County of Marion.		II .	Resourc ment to		_
l certify that the within we received by me on the					
September 1997 at 8 o'clos			record Additio	nal pa	ges
A m., and was recorded in the		will c	ost \$5	per pa	ge.
Miscellaneous Records, Vol. Page 44	-	WATER I	RESOURCE	S DEPA	RTMENT

Water Resources Director

WATER RESOURCES DEPARTMENT 158 12TH STREET NE SALEM, OREGON 97310-0210

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