



REQUEST FOR ASSIGNMENT

DAVID DUNLAP, for

I, (permit holder, applicant) TRAVELERS INSURANCE COMPANY
6715 N. PALM AVE, SUITE 212 FRESNO CA 93704 (559) 447-2069
(mailing address) (city) (state) (zip) (phone)

CHECK ONE

- [X] - hereby assign all my interest in and to application/permit;
[] - hereby assign all my interest in and to a portion of application/permit...
[] - hereby assign a portion of my interest in and to the entire application/permit;

Application # R-25395, Permit # R-1678
OR GR Statement # 44120, GR Certificate of Registration # 23218
as filed in the office of the Water Resources Director, to:

MC GROUP TOM LANE PRESIDENT
(name of new owner)
P.O. Box 65 ADEL OR 97620 (541) 947-2834
(address) (city) (state) (zip) (phone)

(Note: If there are other owners of the property described in this Application, Permit of Certificate of Groundwater Registration you must attach a list of their names and addresses to this form.)

I hereby certify that I have notified all other owners of the property described in this Application, Permit or Certificate of Registration of this request for assignment.

Witness my hand this 17th day of July, 2000.

applicant/permit holder THE TRAVELERS INSURANCE COMPANY
applicant/permit holder By: David E. Dunlap, V.P.
David E. Dunlap, Vice President

DO NOT WRITE IN THIS BOX

STATE OF OREGON,)
County of Marion.)
I certify that the within was received by me on the 21 day of July, 2000 at 8 o'clock A. m., and was recorded in the Miscellaneous Records, Vol. 8 Page 235
Water Resources Director

The completed assignment must be submitted to the Water Resources Department together with a recording fee of \$25. Additional pages will cost \$5 per page.

OK PSM

WATER RESOURCES DEPARTMENT
158 12TH STREET NE
SALEM, OR 97301-4177