

Request for **Assignment**

RECEIVED

JAN 1 8 2011

If for multiple rights, a separate form and fee for each right will be required.

WATER RESOURCES DEPT SALEM OREGON

Po	BOX 34		020	6RANDE (City)	OR CA	92	2368	760	792-9	4
(Ma	iiling Address)			(City)	(State) (Z	ip)	(P	Phone #)		
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DO NOT WRITE IN THIS BOX

- This certifies assignment and record change at Oregon Water Resources Department effective 8:00a.m. on date of receipt at Salem,

- Fee receipt # iOCOS3 - For Director by Jerry Sauter Water Rights Division

The completed "Request for Assignment" form must be submitted to the Department along with the recording fee of \$75.