REQUEST FOR ASSIGNMENT

	rs, Rogers Associat				
(Name of	Applicant / Permit /	Transfer Holder)		
P.O. Box 3789		Bristol	TN	37625	(800) 251-0239
(mailing address)		(City)	(State)	(Zip)	(Phone #)
CHECK ONE					RECE
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☐hereby assi (You must it assigned.)	gn <u>all my intere</u> nclude a map sh	est in and to a owing the por	portion of tion of the a	application/pe	permit/transfer; ermit to be SALEM, O
□hereby assi transfer;	ign <u>a portion of</u>	my interest	in and to the	e <u>entire</u> appli	cation/permit/
Application #	G-14605	_, Permit # _	G-13570	, Trans	sfer #
SD Statement	ш	-OR		of Dominanoti	
SR Statement	#	, GR (certificate (n Registrati	on #
s filed in the o	ffice of the Wate	er Resources	Director, to:		
Mary Spada Livir	ng Trust				
(Name of	New Owner)				
13635 NE Clackamas Street		Portland	OR	97230	(503) 254-0197
(mailing address)		(City)	(State)	(Zip)	(Phone #)
—— Рі		or Certificate o all other own	of Ground W	ater Registra	is Application, ation, you must g addresses and
Application, Per	that I have notifi rrnit or Certificat	e of Registrati	ion of this re	quest for as	
Witness my har	nd this 2206	_day of $\underline{\digamma}$	Bugang	, 20 <u>05</u>	·
		Permit holder	Georg	1 /1	gen)
	Applicant/F	Permit holder _			
DO NOT WRI	TE IN THIS BO		•	•	Assignment" form partment along
				iate recordin	

This certifies assignment and record change at Oregon Water Resources Department effective 3:00a.m. on date of receipt at Salem, Oregon.

Fee receipt # 7292

For Director by Jerry Sauce Program analyst in Water Rights Division

- ♦ \$25 for the first page, and
- ◆ \$5 for <u>each</u> additional page. [as required by ORS 536.050(1)(d)]

WATER RESOURCES DEPARTMENT 725 SUMMER STREET NE, SUITE A SALEM, OREGON 97301-1271