A -	OF OWNER	RSHIP (IF PERN		OLDER IS NOT AV	AILABLE)
CESANED TEXIL	DR ANI	5 JULIET	MARKHAM_TE	ExiODC	
(Name of Party Reque			,	9790-302	Ku) 278 61
(Mailing address)	ens rean	<u>D</u> <u>ADAMS</u>	OR(State)	(Zip)	(Phone #)
		(0.9)	(01010)	<b>·······</b>	(
	et accianme	ont in and to ann	ication/permit/tran	efer	
•	•		-		
hereby reque	•			-	
	-			ion/permit/transfer to	
property held jo	ointly; o include <b>\$5</b>	for <u>each</u> additie	onal page.)	be limited to: a copy ree, documentation of	of survivorship of
GR Statement #_			rtificate of Regis		<del>}</del>
Donald	V, Sr	MITH, MO	(who	Died 2 yra	is ago)
(Name of Permit/Tran			-	6 7 CAL	
(Mailing address)	mate	(City)	OR (State)	<b>97801</b> (Zip)	(Phone #)
NOTE: If the	ere are other	owners of the pr	operty described	in this Application, P	ermit, Transfer
or Co own	ertificate of ( <b>ers' names</b>	Bround Water Re and malling add	egistration, <b>you m</b> d <b>resses and atta</b>	ust provide a list of ch it to this form.	f all other
Permit or Certifica	te of Registr	ation of this requ		y described in this A t.	pplication,
Witness my hand t	this <u>20<sup>fh</sup></u>	_day of	ENBER, 20	05	
Party Requ	esting Assig	nment	esares_	Jepuelo	$\sim$ $\gamma$
🗸 Party Requ	esting Assig	nment	" trul	Fordor	
DO NOT WR	TE IN THIS	BOX	The complete	d "Request for Assig	nment" form
		<u> </u>		itted to the Departm	ent along with
			the appropriat	e recording fees:	
- This certifies assignm	ent and record ch	ange at	<b>≁ ♦</b> \$25 f	or the first page, <i>ai</i>	nd
Oregon Water Resource 8:00a.m. on date of rec - Fee receipt #	eipt at Salem, Or	egon.	♦ \$5 fo	r <u>each</u> additional p ed by ORS 536.050(1	age.
- For Director by Jerry Water Rights Division	Saytor Program	shatyst in	<b>↓ 725 SUMMER</b>	OURCES DEPARTI STREET NE, SUIT GON 97301- <b>BEC</b>	EA
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