	Application No.	G169	<u>U5</u>		FEE	S PAID		
Name G-16905						Date <b>7-20-67</b>	Amount	Receipt No.
Bv CASCADE TIMBERLANDS, LI	.c Certificate No.				_			
THOMAS M RINGO 15 SW COLORADO, SUITE 3 BEND OR 97702		Date			-			
BEND OR 97702	DENIED				-	*	-	
	MICCH ED				-		Cert. Fee	<u> </u>
		VC	olume	Page	FEE	S REFUND  Date	ED Amount	Receipt No.
Priority	WITHDRAWN				_		7 111100111	
County W	M# CANCELLED				-			• • •
RELATED FILES					_	L		
	ASSIGNMENTS							
	Date	To Whom					Address	
<b>DEVELOPMENT</b> Date								
Completion								
Extended to								
Final Proof received								-
Proposed Cert. Mailed								
			]	REMA	RKS _			
								_
							_	
							_	
				MAP I	LOCAT	ION		
								Rev. 04/03

JS 7-20-2007