

Request for Assignment

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

(Name	of Applicant / Permit /	Transfer H	older)				
4985 Rattle C	reek Rd, SE, Suite 🗃 S	alem	OF	97	306	503-585-8789	
(Mailing ad		(City)	(State)	(Zip)		(Phone #)	
hereby	assign <u>all my interest</u> in assign <u>all my interest</u> in ust include a map show	n and to a <u>po</u>	o <u>rtion</u> of a	pplica	tion/permit/	-	
hereby a	ssign <u>a portion of my i</u>	nterest in an	nd to the <u>e</u>	ntire a	pplication/p	permit/transfer;	
Application #, Permit #		Permit #	; Transfer # _T-7126				
CD Ct-tt	#,	CD C	-OR-		11		
JK Statement	#,	GR Cerunc	ate of Reg	gistratio	on #		
	office of the Water Res		-				
	m Credit Services, FL	CA and Mah	onia Inc.,	a corp	oration		
(Name of New	Owner)						
P O Box 13309		Salem	0	R	97309	503-373-3000	
(Mailing address)		(City)	(S	ate)	(Zip)	(Phone #)	
NOTE:	If there are other own Certificate of Ground names and mailing ac	Water Regi	stration, y	ou mu	st provide a		
	y that I have notified al of Registration of this r				ty described	d in this Application,	Permit
Witness my ha	Applicant/Per	mit holder \	John D.) <u> </u>	ooy nc. er, Pres	<u>N</u> llident	-
DO NO	OT WRITE IN THIS E	BOX					

This certifies assignment and record change at Oregon Water Resources Department effective 8:00 a.m. on date of receipt at Salem, Oregon. Fee receipt # <u>93225</u>

For Director by Jerry Sauter Water Rights Division

The completed "Request for Assignment" form must be submitted to the Department along with a recording fee of \$50.

RECEIVED

JUL 0 9 2008

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