

Request for **Assignment**

| If for multiple rights, a separ Doug Jones, Tru | ate form and fee for ea | ch right will b | e required. | WST | |
|---|--|-------------------------------------|---------------------|-------------------------|------------|
| I, TOD TOUKANO, T | JUSTEF - POTER | RAUSE ! | Cover se | 5/WAY TOURT | - |
| (Name of Applicant / | Permit / Transfer Hole | der) | CILIPLE | | |
| V. P. FOR FINANCE - WESTME 3705 MANINI WAY | WIT SANTA BARBA | es CA 9. | 3108 | (805) 565-61 | 72 |
| 3705 MANINI WAY | HONQUEN 1 | 41 968 | 16 | (808) 372-346 | 84 |
| (Mailing address) | (City) (| State) (Zip |) | (Phone #) | |
| hereby assign all my i | nterest in and to applic | cation/permit/t | ransfer; | | |
| hereby assign all my i | | | | | |
| (You must include a i | map showing the portio | on of the appli | cation/pern | iit to be assigned.) | |
| ☐hereby assign <i>a portio</i> | | | | | |
| Application # 5-16888 | , Permit # <u></u> | 14494_ | _; Transfer | # | |
| GR Statement # | GP Cartificate | UK- e of Registrati | on # | | |
| OK Statement # | , OR Certificati | e or Registrati | OII # | | |
| as filed in the office of the W | | or, to: | | | |
| Duane Stroupe, % S& H Lo | <u>jging</u> | | | | |
| (Name of New Owner) | | | | | |
| 20200 SW Stafford Road | Tualatin | OR | 97062 | (503)638-9802 | 2 |
| (Mailing address) | (City) | (State) | (Zip) | (Phone #) | |
| Certificate of names and m | ther owners of the prop f Ground Water Registra ailing addresses and a | ration, you mu attach it to this | st provide of form. | i list of all other own | ers' |
| I hereby certify that I have n or Certificate of Registration | | | ty describe | in this Application, | Permit 3 |
| Witness my hand this 9th | day of | E) 2 | 0 08 . | ^ | |
| Doug Jones Appl Tod Tsukano Appl | icant/Permit holder <u>X</u> | Hoyser | sons, | Trustee J.M | 1.R. Trass |
| TOD TSUKANO App | icant/Permit holder X | (A) | fu t | ites (). Keyer "Ti | ust . |
| DO NOT WRITE IN | THIS BOX | | | | |
| This certifies assignment | and record change at | The co | mpleted "P | equest for Assignme | nt" |

Fee receipt #______
For Director by Jerry Sauter, Program Analyst in

Water Rights Division

Request for Assignment/1

RECEIVED

form *must* be submitted to the Department

along with a recording fee of \$50.

WR

Last updated: June 1, 2007

AUG 1 5 2008

WATER RESOURCES DEPT SALEM, OREGON

RECEIVED OVER THE COUNTER

THE STATE OF THE S

Oregon Water Resources Department effective

8:00 a.m. on date of receipt at Salem, Oregon.