	S-87 9 09	Application No Permit No	. <u>879</u> 		E^-	rec	S PAID Date	**************************************	Receipt No.
Name By Address	HAROLD AND LORETA FASIG 107 STONEHAVEN STREET EUGENE OR 97404	Certificate No			•	<u>Q</u> -	b-19-13	*8/5	109098
			Date			_			
	<u> </u>	DENIED _		-		_		Cert. Fee	
		MISFILED _		Volume	Page	FEE	S REFUN	DED	
Priority_	JUNE 19,7013	WITHDRAWN _				_	Date	Amount	Receipt No.
County_	Douglas WM# 15	CANCELLED _				_			
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		ASSIGNMENTS							
	<u>.</u> .	Date	To Whom		- 1			Address	
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Compl	etion							_	
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Rev. 04/03