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Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, Oregon 97301 (503) 986-0900 www.wrd.state.or.us

MAY 1 9 2014

Request for **Assignment**

SALEM, OR

If for multiple rights, a separate form and fee fo	r each right will be required.	
I, Gray Living Trust, a Trust (Trust Agreement)		
(Name of Applicant / Permit / Transfer Hol		ate of Registration)
38024 Conser Rd NE	Albany, OR 97321	(541) 967-2293
(Mailing Address)	(City) (State) (Zip)	(Phone #)
X hereby assign <u>all my interest</u> in and to Registration;	application/permit/transfer/license/	GR Certificate of
hereby assign <u>all my interest</u> in and to Certificate Registration; (You must incapplication/permit/transfer/license/GR	ude a map showing the portion of	the
hereby assign <u>a portion of my interest</u> in and to the <u>entire</u> application/permit/transfer/license/GR Certificate of Registration:		
Application # S-73275	; Permit # <u>53400</u>	; Transfer #
License #; GR Statement #; GR Certificate of Registration #		
As filed in the office of the Water Resources Director, to:		
Northwest Farm Credit Services, FLCA (Name of New Owner) 650 Hawthorne Ave SE, Suite 210, PO Box 13309 Salem, OR 97309-9831 (Mailing Address) (City) (State) (Zip)		
Gray Living Trust, a Trust (Trust Agreement) (Name of New Owner)		
38024 Conser Rd NE	Albany, OR 97321	(541) 967-2293
(Mailing Address)	(City) (State) (Zip)	(Phone #)
Note: If there are other owners of the property described in this Application, Permit, Transfer, License, or GR Certificate of Registration, you must provide a list of all other owners' names and mailing addresses and attach it to this form.		
I hereby certify that I have notified all other of Certificate of Registration of this Request for		this Application, Permit, Transfer, License, or GR
Witness my hand this X Mm	$\int day of X / S$, 20 × 14
Witness my hand this X May day of X / S Applicant/Permit Holder X May May Applicant/Permit Holder X May May May Applicant/Permit Holder X May		
Applicant/Permit Holder × Hany M Dlay, brustee		
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DO NOT WRITE IN THIS 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 # 112035

For Director by Jerry Sauter

Water Rights Division

The completed "Request for Assignment" form *must* be submitted to the Department along with the recording fee of **\$85**.

WR