

Certificate No. _____

FEES PAID

Date	Amount	Receipt No.
4-7-15	\$1,550. ⁰⁰	115423
	Cert. Fee	

FEES REFUNDED

Date	Amount	Receipt No.

Name Fischer Living Trust S-88070
By Wilmer Fischer
Address 13681 SW Morgan Rd
 Sherwood, OR 97410

Date _____

DENIED _____

MISFILED _____

Volume | Page

WITHDRAWN

CANCELLED _____

Priority April 7, 2015

County WALLA WA WM# 6

RELATED FILES

ASSIGNMENTS

Date _____

To Whom

Address

DEVELOPMENT

Date _____

Completion _____

Extended to _____

Final Proof received _____

Proposed Cert. Mailed _____

REMARKS _____

MAP LOCATION