

Request for RECEIVED BY OWRD Assignment JUN 01 2015

SALEM, OR

•	homas J Heriza			
(Name of Applicant / Permit / Tra			Certificate	e of Registration)
5180 STUCKY RD BOZEMAN,	MT 59/18 406-600-5180			
(Mailing Address)	(City)	(State)	(Zip)	(Phone #)
hereby assign all my interest Registration;	t in and to application/perr	nit/transfe	er/license/	GR Certificate of
hereby assign all my interest of Registration; (You must in application/permit/transfer/i	nclude a map showing the	portion of	f the	
hereby assign <u>a portion of m</u> Certificate of Registration:	ny interest in and to the en	<u>tire</u> applic	ation/perr	nit/transfer/license/GR
pplication # 88047 ;	Permit #	; 7	ransfer #	
CD Co.	-OR-	20.00		
cense #; GR Stateme	ent #; (JR Certiii	cate of Ke	gistration #
Casey Thomas Allen Anna (Name of New Owner)	Catherine Allen			
(Mailing Address) Casey Thomas Allen Anna (Name of New Owner) 853 NE 3RD ST PENDLETON, ((Mailing Address)			(Zip)	(Phone #)
(Name of New Owner) 853 NE 3RD ST PENDLETON, ((Mailing Address) Note: If there are other owners of the GR Certificate of Registration addresses and attach it to this I hereby certify that I have notified.	OR 97801 541-264-3000 (City) the property described in the property described a list is form. ed all other owners of the	(State) ne Applica of all other	ation, Permers	nit, Transfer, License, or 'names and mailing in this Application,
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