William and Lena Name_ PO Box 1205 By _ Shady Cove, OR Address	97539	-88229		lication No. Permit No. tificate No.		·			Date 5-9-10	Amount \$1,550.00	Receipt No. 119749
Priority 1/2/ 9,20/6 County Jackson RELATED FILES			MI WITH	DENIED ISFILED IDRAWN CELLED		Volume		FEI	ES REFUN Date	Cert. Fee DED Amount	Receipt No.
DEVELOPMENT	Date		IGNMEN' Date	TS	To Whom					Address	
Extended to Final Proof received Proposed Cart, Mailed		- - -									
Proposed Cert. Mailed							REMA	RKS _			
							— MAP L	OCAT	ION		

Pay 04/03

Us who have