

Name _____
By _____
Address _____
Jon Barry Kraxberger Living Trust
PO Box 2073
Beaverton, OR 97075 G-18596

Application No. **G- 18596**

Permit No. _____

Certificate No. _____

Date _____

DENIED _____

MISFILED _____

WITHDRAWN _____

CANCELLED _____

Volume _____ Page _____

FEES PAID

Date	Amount	Receipt No.
1/5/18	2,110.00	125611

Cert. Fee

FEES REFUNDED

Date	Amount	Receipt No.

Priority JANUARY 5, 2018

County WASHINGTON WM# 10

RELATED FILES

ASSIGNMENTS

Date	To Whom	Address

DEVELOPMENT

Date

Completion _____

Extended to _____

Final Proof received _____

Proposed Cert. Mailed _____

REMARKS _____

MAP LOCATION _____