

Application No. S- 88644

Permit No. \_\_\_\_\_  
Certificate No. \_\_\_\_\_

**FEES PAID**

Date	Amount	Receipt No.
7/20/18	1570.00	127302

Name Sharon A. Matlock, Trustee S-88644  
 By Of the Sharon A. Matlock Trust  
 Address PO Box 925  
 Shady Cove, OR 97539

Date

DENIED \_\_\_\_\_

MISFILED \_\_\_\_\_

Volume Page

WITHDRAWN \_\_\_\_\_

CANCELLED \_\_\_\_\_

**FEES REFUNDED**

Date	Amount	Receipt No.

Priority JULY 20, 2018  
 County JACKSON WM# 17

**RELATED FILES**

**ASSIGNMENTS**

Date	To Whom	Address

**DEVELOPMENT**

Date

Completion \_\_\_\_\_  
 Extended to \_\_\_\_\_  
 Final Proof received \_\_\_\_\_  
 Proposed Cert. Mailed \_\_\_\_\_

REMARKS \_\_\_\_\_

MAP LOCATION \_\_\_\_\_