

U.S. Postal Service™  
**CERTIFIED MAIL™ RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)®

**OFFICIAL USE**

7009 2250 0004 4950 3152

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark  
Here

11/7/14

Sent To Ringer, Hernandez  
 Street, Apt. No.,  
 or PO Box No.  
 City, State, ZIP+4 CS4-01744sb10

PS Form 3800, August 2006

See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

THOMAS RINGER AND KAREN HERNANDEZ  
 5750 NUMBER 6 ROAD  
 ELLENSBURG, WA 98926

WR/ba CS4-01744sb10

2. Article Number  
 (Transfer from service label)

7009 2250 0004 4950 3152

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature  
 \* Karen Hernandez  Agent  Addressee
- B. Received by (Printed Name) Karen S. Hernandez C. Date of Delivery 1-10-14
- D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

# REPORT OF EXAMINATION & POSTING ROUTER

ROE     ROE for Change

TW Donation  
 TW Extension

TW Temporary Donation  
 TW Short-term Lease

WR Doc ID: 5645949

PROTESTS?  Yes     No

File No.: CS4-01744SB10

Circle appropriate WRIA. County:

Author/Date: Jacqui METCALFE

TRIBE	WRIA
Colville Confederated Tribes	49 50 51 52 53 58 60 61
Yakama Nation	29 30 31 32 33 37 38 39 40
Both Tribes	45 46 47 48

QA/QC Review Group: \_\_\_\_\_  
 (Date)

SharePoint> \_\_\_\_\_

**Certified CCs:** (Check application signatures)

Y:\Staff\METCALFE\ JWWTCS4-01744SB10

Unit Supervisor: \_\_\_\_\_  
 (Initial & date - Begin routing.)

Dates drafted/edited (Admin): \_\_\_\_\_

**CCs to anyone else?** Please list cc's & protestants – more room on back

Reviewer/Date: \_\_\_\_\_  
 (Reviewer please comment on back of page)

**GWIS Mapping Review** (review changes BEFORE final)  
**GWIS initials/date:** \_\_\_\_\_  
**GWIS remarks & edits** (if more room is needed use back of page):

**Minimum Flow River List?** (Y:\Adm\Rivers)

Name of River \_\_\_\_\_

Add name to the appropriate River Data Source:

**Trust Water (TW) to Chris Anderson:** MA  
**HQ to Post to Net**      TW Donation/Extension posted for 2 weeks  
                                  TW Temp D./Short-term Lease posted for 44 days

**Attachments:**

- Your Right to Be Heard
- PTO appeal? No Your Right to Be Heard
- BC, CC, PA forms
- Water Measurement Requirements
- Fish Screening Criteria
- Focus on Water Right Relinquishment (98-1812-WR)
- Other: \_\_\_\_\_

**Permit Writer:** \_\_\_\_\_  
 (Initial & date – ROE DRAFT ready for 30-day posting to Web.)

**FINAL ROE mail out & post 60-days to Web** [Admin]:

**Unit Supervisor:** \_\_\_\_\_  
 (Initial & date – ROE DRAFT ready for 30-day posting to Web.)

**Section Manager:** \_\_\_\_\_  
 (Initial & date: ROE DRAFT is ready for 30-day posting to Web)

**DRAFT ROE post 30-days to Web initial & date** (Admin):

**Remarks or Related Files** (More space on back of page):

**Permit Writer** \_\_\_\_\_  
 (Initial & date – FINAL ROE ready for mail/posting.)

**Unit Sup** (Consider Comments): \_\_\_\_\_  
 (Initial & date – FINAL ROE ready for mail/posting.)

**Section Manager:** \_\_\_\_\_  
 (Initial & date: FINAL ROE is ready for mail/posting.)

