

**REPORT OF EXAMINATION & POSTING ROUTER**

ROE     ROE for Change

TW Donation     TW Extension

WR Doc ID: \_\_\_\_\_

PROTESTS?  Yes     No

File No.: CS4-00467sb10@6

Circle appropriate WRIA. County:

Author/Date: Scott T. 10-18-12

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

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

SharePoint > TURNER 2 Donations 2  
CS4-4167sb10@6 (Rosbach)

Certified CCs: (Check application signatures)

Y:\Staff\ \_\_\_\_\_

Unit Supervisor: JP 11/8/12  
(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)

Arron Penrose TID  
Philip Rigdon, YAKAMA NATION

GWIS Mapping Review (review changes BEFORE final)  
GWIS initials/date: WH 11/8/12  
GWIS remarks & edits (if more room is needed use back of page):  
Add para #5 close

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

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

Name of River \_\_\_\_\_  
Add name to the appropriate River Data Source:

Unit Supervisor: JP 11/8/12  
(Initial & date - ROE DRAFT ready for 30-day posting to Web.)

- 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: \_\_\_\_\_

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

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

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.)

Yak. Basin Do not post on the internet.

Unit Sup (Consider Comments): JP  
(Initial & date - FINAL ROE ready for mail/posting.)

Section Manager: 11/9/12  
(Initial & date: FINAL ROE is ready for mail/posting.)

7007 2560 0001 7675 7411

**U.S. Postal Service**  
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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here  
*MAILED 11/9/12*

Sent To: *Steven C Rosbach*  
 Street, Apt. No., or PO Box No.  
 City, State, ZIP+4 *CS4-00467sb10@6*

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <i>X Steven C Rosbach</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee  <i>X STEVEN C. ROSBACH</i></p> <p>C. Date of Delivery  <i>11-9-12</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes      If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>1. Article Addressed to:</p> <p><b>STEVEN C ROSBACH</b>  <b>2180 S FERGUSON RD</b>  <b>ELLENSBURG WA 98926-8434</b>          WR/ss TW Donation 11/9/12          CS4-00467sb10@6</p>	<p>3. Service Type  <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>2. Article Number          (Transfer from service label)</p>	<p>7007 2560 0001 7675 7411</p>	
PS Form 3811, February 2004	Domestic Return Receipt	102595-02-M-1540