

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

For delivery information visit our website at www.usps.com

OFFICIAL USE

120
 7009 2250 0004 4950 3428

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

Postmark
Here

1/28/14

Sent To Trout Unlimited
 Street, Apt. No.,
 or PO Box No.
 City, State, ZIP+4 CG4-2431202
 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:

LISA PELLY
 TROUT UNLIMITED WASHINGTON WATER
 103 PALOUSE, SUITE 14
 WENATCHEE, WA 98801

WR:ba CG4-24312@2

2. Article Number
 (Transfer from service label)

7009 2250 0004 4950 3428

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee

B. Received by (Printed Name)
 C. Date of Delivery

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

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: 5278371

PROTESTS? Yes No

File No.: CG4-2431202

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> _____

Y:\Staff\METCALFE\TRUSTWATER\DONATIONS\CG4-2431202

Certified CCs: (Check application signatures)

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: Kelsey Collins 1/24/14
 (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):

altered legal based on permit mapping. River mile starting is approx 2 miles south of lowest WWR location

Trust Water (TW) to Chris Anderson: 1/28/14

HQ to Post to Net TW Donation/Extension posted for 2 weeks
 TW Temp D./Short-term Lease posted for 44 days

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

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):

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.)

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

Y:\Adm\Routers\ROE Review & Posting Router (8/15/2013)

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

Name of River _____

Add name to the appropriate River Data Source:

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: _____

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

Should Exhibits be attached to new letter.

**The file # in the footnote doesn't match the WR being donated.*



STATE OF WASHINGTON
DEPARTMENT OF ECOLOGY

15 W Yakima Ave, Ste 200 • Yakima, WA 98902-3452 • (509) 575-2490

May 21, 2012

Trout Unlimited – Washington Water Project
Attn: Lisa Pelly
103 Palouse Street, Suite 14
Wenatchee WA 98801-2251

Re: Water Right Change Application No. CG4-24312@2

Dear Ms. Pelly:

We have received your trust water right application and have assigned the application number shown above. Please use this number in future communications with our office.

If you have any questions, please contact Teresa Mitchell at 509-575-2597.

Sincerely,

Mark Kemner, LHG
Section Manager
Water Resources Program

MK:hd
120510

App-trustwater.doc

FILE COPY

