## **STATEMENT OF SERVICE**

## CALIFORNIA WATERFIX PETITION HEARING Department of Water Resources and U.S. Bureau of Reclamation (Petitioners)

I hereby certify that I have this day submitted to the State Water Resources Control Board and caused a true and correct copy of the following document(s):

## [SUBJECT LINE OF DOCUMENT(S)]

| o be served <b>by Electronic Mail</b> (email) upon the pa<br>he California WaterFix Petition Hearing, dated<br>Resources Control Board at                     |                                |                              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|------------------------------|
| http://www.waterboards.ca.gov/waterrights/water_issues/progra                                                                                                 | ms/bay_delta/california_v      | vaterfix/service_list.shtml: |
| Note: In the event that any emails to any parties on attempt to effectuate service using another method estatement of service that describes any changes to a | of service, if necessa         | ry, and submit another       |
| For Petitioners Only:                                                                                                                                         |                                |                              |
| I caused a true and correct hard copy of the method of service to Suzanne Womack & Shee Drive, Sacramento, CA 95818:  Method of Service:                      | eldon Moore, Clifton (         | Court, L.P., 3619 Land Park  |
| certify that the foregoing is true and correct and that this document was executed on<br>Date                                                                 |                                |                              |
|                                                                                                                                                               | Signature:                     |                              |
|                                                                                                                                                               | Name:<br>Title:                |                              |
|                                                                                                                                                               | Party/Affiliation:<br>Address: |                              |