

**WQWebSubmittal - Submittal Submission Id: 1976688 - 3/18/2025 2:09:40 PM**

Company Name	Signer Name	System Name
Cowlitz Mosquito Control Distri	Michael McKeague-Foster	WQWebPortal

**Attachments:**

Document Name Or Description	Document Name
Submitted Copy of Record for Cowlitz Mosquito Control Distri	Copy of Record CowlitzMosquitoControlDistri Tuesday March 18 2025

**Attestation Agreed to at Signing:**

I certify I personally signed and submitted to the Department of Ecology an Electronic Signature Agreement. I understand that use of my electronic signature account/password to submit this information is equal to my written signature. I have read and followed all the rules of use in my Electronic Signature Agreement. I believe no one but me has had access to my password and other account information.

I further certify: I had the opportunity to review the content or meaning of the submittal before signing it; and to the best of my knowledge and belief, the information submitted is true, accurate, and complete. I intend to submit this information as part of the implementation, oversight, and enforcement of a federal environmental program. I am aware there are significant penalties for submitting false information, including possible fines and imprisonment.

For Ecology Use Only



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