



SUPERINTENDENT OF PUBLIC INSTRUCTION

DR. TERRY BERGESON OLD CAPITOL BUILDING • PO BOX 47200 • OLYMPIA WA 98504-7200 • <http://www.k12.wa.us>

I, _____, certify that on _____, I mailed a copy of this document, certified & postage prepaid, to all parties or their counsel of record. I certify under penalty of perjury, under the laws of the state of Washington, that the foregoing is true and correct.

January 4, 2001
December 7, 2000

**CERTIFIED MAIL
RETURN RECEIPT REQUESTED**

Mr. Eric Hansen, Attorney
33434 Eighth Ave. S.
Federal Way, WA 98003

RE: RICHARD P. LEWIS
Certificate No. 177364G
OPP No. D97-12-236

Dear Mr. Hansen:

I have received your client's signed statement, dated October 22, 2000, voluntarily surrendering their Washington educational certificate. Notification to that effect, including your client's name, certificate number, and social security number will be shared with other states and public and private school officials within the state of Washington.

Upon locating his certificate, your client must immediately return the certificate to the Office of Professional Practices, Superintendent of Public Instruction, Old Capitol Building, P. O. Box 47200, Olympia, Washington, 98504-7200.

If you have any questions, please call the Office of Professional Practices at (360) 586-7436.

Sincerely,

Mike Bigelow

Michael L. Bigelow
Associate Superintendent
Budget and School Business Services

MLB:ikh

VOLUNTARY SURRENDER OF CERTIFICATES

I, Richard P Lewis, have reason to believe that I am or might be ineligible to hold a certificate(s) for reasons which do or might constitute grounds for revocation of the certificate(s). Accordingly, I hereby voluntarily surrender the following certificate(s):

- 1. _____ Certificate No. 1773646
- 2. _____ Certificate No. _____

I have not been, to the best of my knowledge, convicted of any felony crime listed within WAC 180-86-013(1).

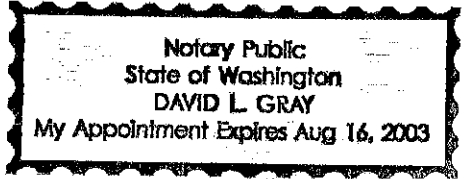
I agree, if I request reinstatement of the certificate(s) I have voluntarily surrendered, to provide the Superintendent of Public Instruction with an affidavit describing in full the reasons for my voluntary surrender of the certificate(s) listed above. I further understand that the Superintendent of Public Instruction will notify other states and public and private school officials within the state of Washington that I have voluntarily surrendered my certificate(s).

Dated this 22 day of October 19 2000

Richard P Lewis
 Printed Name
Richard P Lewis
 Signature

 Address

SUBSCRIBED AND SWORN to before me this 30th day of October, 19 2000.



Paul J. Gray
 Notary Public in and for the state of Washington, Residing at Seattle
 My commission expires: 16 Aug 2003