



SUPERINTENDENT OF PUBLIC INSTRUCTION

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

August 4, 2005

**CERTIFIED MAIL
RETURN RECEIPT REQUESTED**

Mr. Harvey Morgan
[REDACTED]

RE: Certificate No.: 187072D
OPP No.: D05-07-084

Dear Mr. Morgan:

I have received your signed statement, dated August 2, 2005, voluntarily surrendering your Washington educational certificate. Notification to that effect, including your name, certificate number, and social security number will be shared with other states and public and private school officials within the state of Washington.

You must immediately return the certificate to:

Office of Professional Practices
Superintendent of Public Instruction
PO Box 47200
Olympia, Washington 98504-7200

If you have any questions, please call Charles Schreck, Director, Office of Professional Practices at (360) 725-6136.

Sincerely,

Marcia L. Riggers
Assistant Superintendent
Student Support and Operations

MLR:pjc

cc: Mitchell Cogdill

I, Penny Ok, certify that on 8/8/05, 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.

VOLUNTARY SURRENDER OF CERTIFICATE(S)

I, HARVEY C MORGAN, 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. WASHINGTON EDUCATION Certificate No. 187072D
- 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 2nd day of AUGUST, 2005

HARVEY C. MORGAN
Printed Name
Harvey C Morgan
Signature

Address

SUBSCRIBED AND SWORN to before me this 2nd day of Aug, 2005.

W. James Coyle
Notary Public in and for the state of Washington, Residing at Everett
My commission expires: 8-19-08

Washington State Superintendent
of Public Instruction
PO Box 47200
Olympia, WA 98504-7200

Attention: Professional Certification Program

Re: Certificate No. 187072D

Greetings:

The purpose of this letter is to advise you that I am relinquishing my Washington State Teaching Certificate. To my knowledge, I have never had possession of an actual Teaching Certificate but my Certificate No. is referred to above. I am also permanently waiving any right to seek reinstatement of the Certificate.

I have retired from teaching and I have no interest in pursuing any further teaching job.

Yours truly,

A handwritten signature in cursive script that reads "Harvey C. Morgan".

Harvey Morgan