



COMPANY NAME:

DOES REPORT CONTAIN CONFIDENTIAL INFORMATION? No Yes If yes, submit a redacted public version (or a cover letter) by email. Submit the confidential information as directed in OAR 860-001-0070 or the terms of an applicable protective order.

Select report type: RE (Electric) RG (Gas) RW (Water) RT (Telecommunications) RO (Other, for example, industry safety information)

Did you previously file a similar report? No Yes, report docket number:

Report is required by: OAR Statute Order

Note: A one-time submission required by an order is a compliance filing and not a report (file compliance in the applicable docket)

Other (For example, federal regulations, or requested by Staff)

Is this report associated with a specific docket/case? No Yes, docket number:

List Key Words for this report. We use these to improve search results.

Send the completed Cover Sheet and the Report in an email addressed to PUC.FilingCenter@state.or.us

Send confidential information, voluminous reports, or energy utility Results of Operations Reports to PUC Filing Center, PO Box 1088, Salem, OR 97308-1088 or by delivery service to 201 High Street SE Suite 100, Salem, OR 97301.

This form must be electronically filed with the Public Utility

Commission of Oregon at: PUC.FilingCenter@state.or.us

If you have questions about the form call

Joan Grindeland at (503) 373-1003

on or before May 31, 20XX or email:

joan.grindeland@state.or.us

Affiliated Interest Annual Report for Water Utilities

OAR 860-036-2360

Utility Company Name:
Address:
Telephone:
Email:

SOUTH HILLS WATER SYSTEMS INC.
11650 S.W. HILLSBORO HWY.
HILLSBORO, ORE. 97123
503-318-4434

Annual Transactions for January 1 through December 31, 20XX

(Please use this format and attach additional sheets if needed.)

Docket & Order No. #	Name of Affiliate And Description of Affiliation	Purpose of Transaction	Hours & Current Hourly Rate (If Applicable)	Annual Dollar Amount
<i>N/A</i>	<i>N/A</i>	<i>N/A</i>	<i>N/A</i>	<i>N/A</i>

Have any changes occurred to the utility, affiliate, or the affiliated relationships that affect any affiliated interest contracts?

NO

YES - Using a separate sheet, please explain the changes and provide any other pertinent information.

Signature of responsible party: *WR* Date: *4/16/18*

Printed name: *WAYNE RODGERS* Position held in utility:

Telephone Number: *503-318-4434* E-mail: *waynerodgers@comcast.net*

The Commission may request further information regarding any affiliated interest transaction.

*If you do not know the docket or order number, please call and I will help you with that information. Please do not file the form with this section blank.