## Oregon Public Utility Commission

## e-FILING REPORT COVER SHEET

COMPANY NAME: WILLAMETTE WATER COMPANY
DOES REPORT CONTAIN CONFIDENTIAL INFORMATION? No See 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? Yes, report docket number:
Report is required by:  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.
ANNUAL AFFILIATED INTEREST REPORT
Send the completed Cover Sheet and the Report in an email addressed to <a href="PUC.FilingCenter@state.or.us">PUC.FilingCenter@state.or.us</a>
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.



## **Affiliated Interest Annual Report for Water Utilities**

OAR 860-036-2360

This form must be electronically filed with the OPUC at: <a href="PUC.FilingCenter@state.or.us">PUC.FilingCenter@state.or.us</a> on or before May 31, 2021

Utility Comp	any Name: WILLAMETT	E WATER COMPANY		
Address: PO	BOX 876 VENETA OR 97	487		
Telephone:	541-945-1050			
Email: JEFFC	O@FRLLC.COM			
		ions for January 1 through Decen this format and attach additional sheets if r	•	
Docket & Order No.*	Name of Affiliate And Description of Affiliation	Purpose of Transaction	Hours & Current Hourly Rate (If Applicable)	Annual Dollar Amount
		NO AFFILIATED INTEREST TRANSACTIONS THIS YEAR		
		ler number, please call and staff will hel ection blank; if not affiliated interest exi		ation.
Have any cha interest contr	_	ility, affiliate, or the affiliated relations	hips that affect any af	ffiliated
x NO YES - Usir	ng a separate sheet, ple	ase explain the changes and provide ar	ny other pertinent info	ormation.
Signature of r	esponsible party:	Demers Date: APRIL 21, 2021		
Printed name	: JEFF DEMERS Position	on held in utility: SECRETARY/DIRECTOR	OPERATIONS	

If you have questions about the form call Russ Beitzel at (503) 378-6628 or email: <a href="mailto:russell.beitzel@state.or.us">russell.beitzel@state.or.us</a>

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

Telephone Number: 541-935-1050 E-mail: JEFFD@FRLLC.COM