This form must be electronically filed with the Public Utility Commission of

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

on or before May 31, 2018

If you have questions about the form call Joan Grindeland at (503) 373-1003 or email: joan.grindeland@state.or.us

Affiliated Interest Annual Report for Water Utilities

OAR 860-036-2360

Utility Compa	any Name: Crooked Rive	er Ranch Water Co.			
Address: PO	Box 2319, Terrebonne C	Or 97760			
Telephone: 5	541-923-1041				
Email: Frank	@crrwater.com				
		ions for January 1 through Decemb	•		
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 to Report				
Have any char interest contr	_	lity, affiliate, or the affiliated relationshi	ps that affect any a	filiated	
NO YES - Using	a separate sheet, please o	explain the changes and provide any other p	pertinent information		
Signature of re	esponsible party:	Date Date	Date: 04/27/18		
Printed name:	Frank Day	Position held in utility: GM			
Telephone Nu	mber: 541.923.1041	E-mail: <u>frank@crrwat</u>	er.com		
The Commissi	on may request further i	information regarding any affiliated inter	est 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.