



e-FILING REPORT COVER SHEET

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.

Clearwater Affiliated Interest Report

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.



Affiliated Interest Annual Report for Water Utilities

OAR 860-036-2360

This form must be electronically filed with the OPUC at: PUC.FilingCenter@state.or.us on or before June 1, 2021

Utility Company Name: Clearwater Source LLC
Address: 2121 Via Rivera, Palos Verdes Estates CA 90274
Telephone: (480) 322-7924
Email: amicompany@gmail.com

Annual Transactions for January 1 through December 31, 2020

(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

*If you do not know the docket or order number, please call and staff will help you with that information. Please **do not** file the form with this section blank; if not affiliated interest exists please use N/A.

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: Date: 04/05/2021 _____

Printed name: Alain Cailler _____ Position held in utility: Manager

Telephone Number: (480)322-7924 E-mail: amicompany@gmail.com _____

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

If you have questions about the form call Russ Beitzel at (971) 209-0533 or email: russell.beitzel@state.or.us