

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 May 31, 2020

Utility Comp	any Name: Salmon Vall	ey Water Company		
Address: PO	Box 205, Welches, OR 9	97067		
Telephone:				
Email:				
	Annual Transact	tions for January 1 through Decemb	er 31, 2019	
Docket	Name of Affiliate	Purpose	Hours & Current	Annual
& Order No.*	And Description of Affiliation	of Transaction	Hourly Rate (If Applicable)	Dollar Amount
UI 434 &				Amount
20-111	NW Natural Water	Management & Operations Agreement		\$14,110
Please do not	file the form with this se	er number, please call and staff will help yection blank; if not affiliated interest exists ility, affiliate, or the affiliated relationship	please use N/A.	
NO YES - Usin	ng a separate sheet, plea	ase explain the changes and provide any	other pertinent info	ormation.
Signature of r	esponsible party:	Date	: 10/29/20	
Printed name	: Michael E Bowman	Position held in utility: General Ma	inager	
Telephone Nu	ımber: 503.622.4083	mail: michael@salmonvalleywat	er.com	
The Commissi	on may request further	information regarding any affiliated intere	est transaction.	

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

Revised 9/22/2020