e-FILING REPORT COVER SHEET



COMPANY NAME: Wilderness Canyon

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: Statute WILDERNESS CANYON AFFILIATED INTEREST ANNUAL REPORT 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: UI 363
List Key Words for this report. We use these to improve search results.
UI 363 Order 16-101 2019 WILDERNESS CANYON
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 May 31, 2019

Utility Company Name: Wilderness Canyon	
Address: PO Box 699 Newberg, OR 97132	
Telephone: 503-554-8333	
Email: silas@hilandwater.com	

Annual Transactions for January 1 through December 31, 2019

(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
UI 363		Operational, managerial, and		
16-101	Hiland Water	administrative services.		3,029.00
UI 363				
16-101	Hiland Water	Main office facility		1,556.00
UI 363				_,
16-101	Hiland Water	Warehouse, equipment, vehicles		818.00

^{*}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: Alas OLSON

Printed name: SILAS OLSON

Position held in utility: General Manager

Telephone Number: 503-554-833

E-mail: SIlas Ohilanduater.com

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

If you have questions about the form call Russ Beitzel at (503) 378-6628 or email: russell.beitzel@state.or.us