

e-FILING REPORT COVER SHEET

REPORT NAME: 2013 Affiliated Interest

COMPANY NAME: Sunriver Water LLC

DOES REPORT CONTAIN CONFIDENTIAL INFORMATION? No Yes

If yes, please submit only the cover letter electronically. Submit confidential information as directed OAR 860-001-0070 or the terms of an applicable protective order.

If known, please select designation: RE (Electric) RG (Gas) RW (Water)
 RO (Other)

Report is required by: OAR 860-036-0816
 Statute ORS 757.005
 Order Enter Commission Order No.; e.g., 95-1335
 Other Enter reason; e.g., at Request of Lee Sparling

Is this report associated with a specific docket/case? No Yes
If Yes, enter docket number: Enter docket number; e.g.; UM 1484

Key words: Sunriver Water 2013 Affiliated Interest

If known, please select the PUC Section to which the report should be directed:

- Corporate Analysis and Water Regulation
- Economic and Policy Analysis
- Electric and Natural Gas Revenue Requirements
- Electric Rates and Planning
- Natural Gas Rates and Planning
- Utility Safety, Reliability & Security
- Administrative Hearings Division
- Consumer Services Section

PLEASE NOTE: Do NOT use this form or e-filing with the PUC Filing Center for:

- Annual Fee Statement form and payment remittance or
- OUS or RSPF Surcharge form or surcharge remittance or
- Any other Telecommunications Reporting or
- Any daily safety or safety incident reports or
- Accident reports required by ORS 654.715.

Must be electronically filed with the Public Utility Commission of Oregon
at: http://www.puc.state.or.us/Pages/water/forms_notices/annualreports.aspx
on or before May 31, 2014.

If you have questions about
the form call Celeste Hari
at (503)378-6628
email: celeste.hari@state.or.us

Mail the original to:
Public Utility Commission of Oregon
PO Box 1088
Salem, OR 97308-1088

Affiliated Interest Annual Report for Water Utilities

OAR 860-036-0816

Utility Company Name: Sunriver Water LLC
Address: PO Box 3589 , Sunriver OR 97707
Telephone: 541-593-3705
Email: jchojnacky@sunriver-resort.com

Annual Transactions for Jan. 1 through Dec. 31, 2013

Please use this format and attach additional sheets if needed.

Docket and Order No.*	Name of Affiliate And <u>Description of Affiliation</u>	Purpose of Transaction	Hours and Current Hourly Rate If Applicable	Annual Dollar Amount
Dockets: UW 86 & UI 168 Order 02-662	Sunriver Resort Limited Partnership	Management Fee	N/A	\$166,060

Have any changes occurred to the utility, affiliate, or the affiliated relationships that affect any affiliated interest contracts?

NO

Signature of responsible party:  Date: 5/23/2014

Printed name: Jessica Chojnacky Position held in utility: Controller for SRLP

Telephone Number: 541-593-3705 email: jchojnacky@sunriver-resort.com

The Commission may request further information regarding any affiliated interest transaction.
This form **must** be filed electronically via the PUC Filing Center as indicated at the top of the page.
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. Keep a copy for your records.