e-FILING REPORT COVER SHEET



Send completed Cover Sheet and the Report in an email addressed to: <u>PUC.FilingCenter@state.or.us</u>

REPORT NAME: Water Annual Affiliated Interest Report

COMPANY NAME: Government Camp Water Co. Inc.

DOES REPORT CONTAIN CONFIDENTIAL INFORMATION?

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

Yes

If known, please select designation:	RE (Electric) RG (Gas)	RW (Water)	RO (Other)
Report is required by: OAR	OAR 860-036-0816r		
Statute	Enter Statute		
Order	Enter PUC Order No.		
Other	Enter reason		

Is this report associated with a specific docket/case?

If yes, enter docket number:

List applicable Key Words for this report to facilitate electronic search: Government Camp Water Co. Inc.

DO NOT electronically file with the PUC Filing Center:

- 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

Please file the above reports according to their individual instructions.

Must be electronically filed with the Public Utility Commission of Oregon at: <u>http://www.puc.state.or.us/Pages/water/forms_notices/annualreports.aspx</u> 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: Government Camp Water Co. Inc.

Address: PO Box 67 Government Camp OR 97028

Telephone: 503-260-1342 direct line

Email: lbekins@comcast.net

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</u> <u>of Affiliation</u>	Purpose of Transaction	Hours and Current Hourly Rate If Applicable	Annual Dollar Amount
	$(\bigcirc$	A L		
	XO	N		

Affiliated Interest Annual Report Page 2

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: Ashi Am Schunn Date: 6-4-2014
Printed name: Lesli Ann Bekins Position held in utility: Coup Sec
Telephone Number: 503-260-1342 email: Lbekins@comcast.net

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.