



e-FILING REPORT COVER SHEET

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

REPORT NAME: Double-click and enter report name here, tab to next field

COMPANY NAME: Government Camp Water Company Inc.

DOES REPORT CONTAIN CONFIDENTIAL INFORMATION? No Yes

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.

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

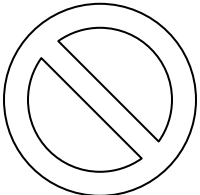
Report is required by: OAR 860-036-0816
Statute Enter statute number
Order Enter PUC Order No
Other Enter reason

Is this report associated with a specific docket/case? No Yes

If yes, enter docket number: Enter Docket number

List applicable Key Words for this report to facilitate electronic search:
Government Camp Water Co. Inc. PUC Water Annual Affiliated Interest Report

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: <http://www.oregon.gov/puc/pages/efiling/ereports/index.aspx> on or before May 31, 2013.

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 2148
Salem, OR 97308-2148

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: 503-272-3281 ofc or 503-260-1342 mobile
Email: lbekins@comcast.net

Annual Transactions for Jan. 1 through Dec. 31, 2012

Please use this format and attach additional sheets if needed.

Docket and Order No.	Name of Affiliate	Purpose of Transaction	Annual Dollar Amount

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

- NO
 YES Please explain the changes and provide any other pertinent information, use a separate sheet if necessary.

Signature of responsible party: Maryanne Hill Date: 4/9/2013

Printed name: Maryanne Hill Position held in utility: President/Owner

The Commission may request additional information regarding any Affiliated Interest transaction.