



American Water Works Association

**Pacific Northwest Section**

Cascade To Coast Subsection

**Cascade To Coast Subsection**

**2018 Annual Report**

**February 8, 2019**

Cascade to Coast Subsection  
P.O. Box 8, Springfield, OR 97477



American Water Works Association  
**Pacific Northwest Section**  
Cascade To Coast Subsection

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**American Water Works Association**  
**Pacific Northwest Section**  
Cascade To Coast Subsection

Position	2018-19 Officers	Nominated for 2019-20
President	John Woody Optimum Environmental Corp. 541-643-6137 <a href="mailto:john@oecadmin.com">john@oecadmin.com</a>	Jamie Porter Rainbow Water District 541-746-1676 <a href="mailto:jamie@rwdonline.net">jamie@rwdonline.net</a>
Vice President	Jamie Porter Rainbow Water District 541-746-1676 <a href="mailto:jamie@rwdonline.net">jamie@rwdonline.net</a>	Jared Rush Springfield Utility Board 541-501-2079 <a href="mailto:jaredr@subutil.com">jaredr@subutil.com</a>
Secretary	Jared Rush Springfield Utility Board 541-501-2079 <a href="mailto:jaredr@subutil.com">jaredr@subutil.com</a>	Tami Eckstine Row River Valley Water District 541-946-1655 <a href="mailto:eckstine6@msn.com">eckstine6@msn.com</a>
Treasurer	Jodi Busick Rainbow Water District 541-746-1676 <a href="mailto:jodi@rwdonline.net">jodi@rwdonline.net</a>	Jodi Busick Rainbow Water District 541-746-1676 <a href="mailto:jodi@rwdonline.net">jodi@rwdonline.net</a>
Director 1	Andy Simon EWEB 541-784-5201 <a href="mailto:andy.simon@eweb.org">andy.simon@eweb.org</a>	Mark McGuire EWEB 541-556-9024 <a href="mailto:mark.mcguire@eweb.org">mark.mcguire@eweb.org</a>
Director 2	Mark McGuire EWEB 541-556-9024 <a href="mailto:mark.mcguire@eweb.org">mark.mcguire@eweb.org</a>	TBD
Director 3	David Donahue EWEB 541-852-3981 <a href="mailto:david.donahue@eweb.org">david.donahue@eweb.org</a>	TBD
Director 4	Tami Eckstine Row River Valley Water District 541-946-1655 <a href="mailto:eckstine6@msn.com">eckstine6@msn.com</a>	TBD
Past President	Jeff Kinney City of Albany	Jonathan Woody Optimum Environmental Corp.



American Water Works Association  
**Pacific Northwest Section**  
Cascade To Coast Subsection

## 2018 Completed Activities

1. January 25<sup>th</sup>: Regulatory Update  
(Held at Springfield Sizzler)
2. April 3-6: Cascade to Coast Short School Held at New Venue
  - a. Best tasting water contest held at Short School.
3. May 3<sup>rd</sup>: Member appreciation night  
(Held at Ninkasi Brewery)
4. July 26, 10<sup>th</sup> Annual Wine For Water Fundraiser  
(Water For People event at Sweet Cheeks Winery, Eugene)
5. October 17<sup>th</sup>: Hosted O&M Seminar  
(Held at SUB)
6. December 20<sup>th</sup>: Regulatory Update  
(Held at Springfield Sizzler)



American Water Works Association  
**Pacific Northwest Section**  
Cascade To Coast Subsection

## 2019 Goals

1. Fill director positions to maintain roster.
2. Host a financially successful short school.
3. Host a subsection activities day.
4. Have all CEU's applied for and ready prior to trainings.
5. Recruit a new WFP event organizer.

## 2019 Proposed Activities

- February 28th: Host Emergency Preparedness training at EWEB.  
0.7 CEU's.
- March 21<sup>st</sup>: Host a Subsection Activities day and Business meeting  
in Cottage Grove. Conduct officer Elections.
- April 15-18<sup>th</sup>: Host the C2C Short School at the Albany Expo.
- June 18<sup>th</sup>: Business Meeting Vibration Testing Program at  
Springfield Roadhouse
- October 17<sup>th</sup>: Certification Review for Operator Levels 1-4
- December 18<sup>th</sup>: Winter Business Meeting and Regulatory Update



American Water Works Association  
**Pacific Northwest Section**  
Cascade To Coast Subsection

## 2018 Financial Statements

- Balance Sheet
- Profit & Loss Statement
- Cash Receipts & Expenses Report
- Allotment Request

## 2019 Supporting Documents

- Conflict of Interest Forms
- Affiliation Agreement



American Water Works Association  
**Pacific Northwest Section**

PO Box 872467  
Vancouver, WA 98687  
T 503-760-6460  
F 360-254-0695  
www.pnws-awwa.org

SUBSECTION BALANCE SHEET FOR CALENDAR YEAR

Subsection Name:

BANK STATEMENT PERIOD:

THROUGH

PREVIOUS BALANCE

DEPOSITS & ADDITIONS (Should total the income on the profit and loss statement)

CHECKS & WITHDRAWALS (should total the expenses on the profit and loss statement)

ENDING BALANCE:



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SUBSECTION PROFIT/LOSS STATEMENT AS OF:

Subsection Name:

INCOME:

Interest	<input type="text"/>
Receivables	<input type="text" value="\$45,736.38"/>
Miscellaneous	<input type="text" value="\$250.00"/>
<b>TOTAL INCOME:</b>	<input type="text" value="\$45,986.38"/>

EXPENSES:

Accounting Fees	<input type="text" value="\$579.26"/>
Committee	<input type="text"/>
Conference/Meetings	<input type="text" value="\$44,043.95"/>
Equipment	<input type="text"/>
Miscellaneous	<input type="text"/>
Officer Compensation	<input type="text"/>
Postage	<input type="text"/>
Printing	<input type="text"/>
Prizes & Awards	<input type="text"/>
Telephone	<input type="text"/>
Travel	<input type="text"/>
<b>TOTAL EXPENSES:</b>	<input type="text" value="\$44,623.21"/>





SUMMARY REPORT OF SUBSECTION CASH RECEIPTS AND EXPENSES FOR 2018

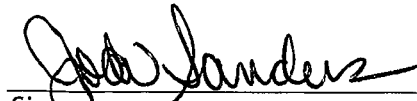
Subsection Number: 23702616 Subsection Name: Cascade to Coast

- |   |                    |
|---|--------------------|
| 1. Total Subsection Balance of Funds at beginning of the year:  | <b>\$3,567.24</b>  |
| 2. Total receipts during the year. (Monies collected during the year):  | <b>\$45,986.38</b> |
| <b>3. Total (Add Lines 1 and 2)</b>   | <b>\$49,553.62</b> |
| 4. Total Expenses for the year:   | <b>\$44,623.21</b> |
| <b>5. Balance at the end of the year. (Subtract Line 4 from Line 3)</b>   | <b>\$4,930.41</b>  |
| 6. Of the Balance on Line 5, how much is earned Interest from the bank?   | <b>\$0.00</b>      |
| 7. Please list where the subsection funds are kept. (Types of accounts, name and branch of bank(s), account number(s), cash, etc.) Remember to protect your bank account numbers! Do not transmit this form electronically with account numbers attached. |                    |

Key Bank, Mohawk Branch, Springfield, OR Basic Business Checking #37968107547

**Certification:**

I, the undersigned, Secretary/Treasurer of the Cascade to Coast Subsection hereby certify that the foregoing is a correct statement of cash receipts and disbursements for the calendar year listed above.

  
\_\_\_\_\_  
Signed

**Jodi Sanders, C2C Treasurer**

\_\_\_\_\_  
Please Print Signed Name



## PNWS-AWWA ANNUAL SUBSECTION ALLOTMENT

Date: 1/30/2019

To: Kyle Kihs  
Executive Director PNWS-AWWA  
P.O. Box 872467  
Vancouver, WA 98687  
Office: 503-760-6460  
Fax: 360-254-0695  
E-Mail: kkihs@pnws-awwa.org

### Subsection:

The Subsection has evaluated the options available to us and made the following selection regarding the annual allotment.

If your subsection does not need the allotment this year, you need not respond.

**NOTE:** *You must respond by February 1<sup>st</sup> of each year to be eligible to receive an allotment. If you do not respond by the deadline listed above, your Subsection will not receive an allotment. You must also have completed and submitted your subsection annual report; including the Profit & Loss Statement and Signature Card from your subsection's financial institution to the PNWS-AWWA Executive Director.*

- Yes, the Subsection requests the allotment.
- No, the Subsection does not wish to collect the allotment.

## Certification

I declare that I have no knowledge, as of the date set forth below, of any relationships, positions, or circumstances in which I am involved that could be deemed a Conflict of Interest under the Conflict of Interest Policy of the Pacific Northwest Section of the American Water Works Association as currently in effect except as follows:

I hereby certify that the information set forth above is true and complete to the best of my knowledge. I also certify that I have reviewed, and I agree to abide by, the Pacific Northwest Section of the American Water Works Association's Conflict of Interest Policy, as currently in effect and as it may be amended from time to time.

Signature

*Jonathan Woody*

Date:

1/28/2019

Name (printed)

Jonathan Woody

Committee or Subsection

Cascade to Coast

Title

President

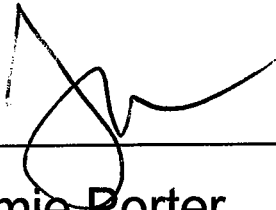
**Print Form**

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Signature \_\_\_\_\_



Date: 1/30/2019

Name (printed) Jamie Porter

Committee or Subsection Cascade to Coast Subsection

Title Vice President

## Certification

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Signature



Date:

1/30/19

Name (printed)

Jared Rush

Committee or Subsection

Cascade to Coast

Title

Secretary

**Print Form**

SF: adminpol/Conflict of interest

## Certification

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Signature

Jodi Sanders

Date:

1/23/2019

Name (printed)

Jodi Sanders

Committee or Subsection

Cascade to Coast Subsection

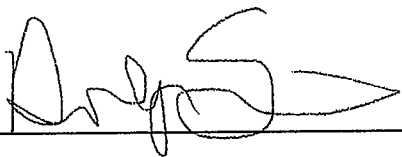
Title

Treasurer

# Certification

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Signature  Date: 1/30/19

Name (printed) Andy Simon

Committee or Subsection Cascade to Coast

Title Officer



## Certification

I declare that I have no knowledge, as of the date set forth below, of any relationships, positions, or circumstances in which I am involved that could be deemed a Conflict of Interest under the Conflict of Interest Policy of the Pacific Northwest Section of the American Water Works Association as currently in effect except as follows:

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Signature Mark McGuire Digitally signed by Mark McGuire  
DN: cn=Mark McGuire, o=EWEB,  
ou=Hayden Bridge Water Treatment Plant,  
email=mark.mcguire@ewwb.org, c=US  
Date: 2019.01.24 07:36:14 -0800 Date: 1-24-2019

Name (printed) Mark McGuire

Committee or Subsection Cascade to Coast

Title Director, Vice Chairman of Short School Committee





# Certification

I declare that I have no knowledge, as of the date set forth below, of any relationships, positions, or circumstances in which I am involved that could be deemed a Conflict of Interest under the Conflict of Interest Policy of the Pacific Northwest Section of the American Water Works Association as currently in effect except as follows:

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Signature David Donahue Digitally signed by David Donahue  
DN: cn=David Donahue, o=Eugene Water &  
Electric Board, ou=Source Protection,  
email=david.donahue@eweb.org, c=US  
Date: 2019.01.24 06:54:24 -0800 Date: 1/24/2019

Name (printed) David Donahue

Committee or Subsection Cascade to Coast Subsection

Title Director / Environmental Specialist




## Certification

I declare that I have no knowledge, as of the date set forth below, of any relationships, positions, or circumstances in which I am involved that could be deemed a Conflict of Interest under the Conflict of Interest Policy of the Pacific Northwest Section of the American Water Works Association as currently in effect except as follows:

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Signature



Date:

11/24/19

Name (printed)

Tamera J Fekstine

Committee or Subsection

Cascade to Coast

Title

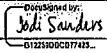
Director

**Print Form**

**KeyBank** Business/Public Entity Signature Card

<b>Account Number:</b> 379681075477 <input type="checkbox"/> Multiple Accounts - Refer to Exhibit A		<b>Entity:</b> <input type="checkbox"/> C-Corporation <input type="checkbox"/> S-Corporation <input type="checkbox"/> Sole Proprietorship <input checked="" type="checkbox"/> Organization/Association <input type="checkbox"/> Non-Profit <input type="checkbox"/> Partnership <input type="checkbox"/> Public Entity <input type="checkbox"/> Trust <input type="checkbox"/> LLC (Tax Classification: <input type="checkbox"/> C-Corp <input type="checkbox"/> S-Corp <input type="checkbox"/> Partnership)	
<b>Legal Title of Account</b> CASCADE TO COAST SUBSECTION PNWS-AWWA		<b>Signature Card Purpose:</b> <input type="checkbox"/> New Account Signature Card (Complete Section A Only) <input type="checkbox"/> Replacement Signature Card (Complete Section A Only) <input checked="" type="checkbox"/> Add Signer (Complete Section A & C) <input checked="" type="checkbox"/> Delete Signer (Complete Section B & C)	
<b>Tax ID:</b> 237026163		<b>Title for Legal Owner of Tax ID:</b> CASCADE TO COAST SUBSECTION PNWS-AWWA	
<b>Principal Business Address</b> 1550 N 42ND ST		<b>City</b> Springfield	<b>State</b> OR
<b>Statement Mailing Address</b> PO Box 8		<input type="checkbox"/> * Same as Principal Address	<b>ZIP</b> 97477

**SECTION A: Add Signer to Account** This section must be completed when adding new signers to an **EXISTING** or **NEW** account.

Signer Name	Email Address <i>(Required for all signers when document is digitally signed)</i>	Social Security Number	US Citizen Y/N	Signature
Jodi Sanders	Jodi@rwdonline.net	[REDACTED]	Y	

**SECTION B: Delete Signer from Account** This section must be completed when deleting one or more signers from an **EXISTING** account.

Signer Name	Social Security Number
James D Porter	

**SECTION C: Confirmation of Account Signers** This section must be completed when changing signers on an **EXISTING** account. This will be the complete list of signers on the above referenced account once all requested changes have been completed.

Signer Name (Please Print)	Signer Name (Please Print)	Signer Name (Please Print)
Kyle Kihs		
Jodi Sanders		

If this entity has additional Signers enter Signer's information on page 4 and check here   
 By signing, each signer authorizes KeyBank to obtain a consumer report for them individually. We may also report information about the Account to a consumer reporting agency.

By signing below, the client listed above ("Client") authorizes KeyBank National Association ("KeyBank"), at its discretion, to open and close one or more business or non-personal accounts owned by the Client with the same Account Title listed above and with the same Signers, and upon receipt of electronic, written or oral instructions from the Client without obtaining an additional Signature Card ("Account" or "Accounts"). Accounts opened hereunder are listed above and on Exhibit A attached hereto and made a part hereof, as such Exhibit may be amended or supplemented by the Client from time to time. Addition of a new account to Exhibit A shall be effective only upon receipt by KeyBank of a new Exhibit A in a form acceptable to KeyBank in its sole discretion. The Client acknowledges and agrees that all Accounts opened under this Signature Card are governed by the terms and conditions of the Deposit Account Agreement and Funds Availability Policy ("Agreement") and Disclosures governing the Accounts. KeyBank may change the Agreement at any time. By signing below, Client acknowledges receipt of the Agreement and Disclosures.

The Client authorizes KeyBank to operate all current and future Accounts opened under this Signature Card. The authority to operate each Account includes: (i) to act upon instructions from any of the signers to deposit, withdraw or transfer funds to or from any other accounts at the Bank when opening new accounts; (ii) to recognize and honor the signature of any of the signers on checks (if withdrawal by check is permitted) and withdrawal slips and honor any other electronic, written or oral requests for withdrawals or transfers of funds, including transfers to KeyBank or to third parties; and (iii) to act upon instructions from any Signer for the transaction of any business on any Accounts covered by this Signature Card. KeyBank may rely on this authorization for the Accounts opened under this Signature Card until KeyBank receives written notice revoking the authorization and has reasonable time to act upon it. Until such notice is actually received, the authority conferred herein to the Signers noted below shall remain in full force and effect and KeyBank shall be indemnified and saved harmless from any loss suffered or liability incurred by it in pursuance of this Authorization.

Note: The information you are providing to open your new KeyBank account is subject to review and verification. KeyBank reserves the right to close your account in the event we are unable to verify, to our satisfaction, the information you provide.

**Under penalties of perjury, I certify that:**

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
  - An individual who is a U.S. citizen or U.S. resident alien;
  - A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
  - An estate (other than a foreign estate); or
  - A domestic trust (as defined in Regulations section 301.7701-7)
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. Exemption from FATCA Reporting Code

**Certification Instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.

Tax Identification Number: 237026163

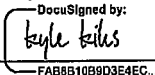
Title for Legal Owner of TIN: CASCADE TO COAST SUBSECTION PNWS-AWWA

Refer to the list of payees exempt from backup withholding and for which no information reporting is required. If this Entity is exempt from backup withholding and information reporting under IRS regulations, enter your correct TIN in the previous section and place the applicable "Payee Exempt from Backup Withholding Code" Here: \_\_\_\_\_

Attention Non-U.S. Persons (Non-resident aliens and foreign entities): Please cross out the certification above and complete the appropriate IRS Form W-8.

**IN WITNESS WHEREOF, Company has signed below by a duly authorized officer as listed in the Resolved section of the Depository Certificate on file with KeyBank.**

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Signature: \_\_\_\_\_ Date: 06/25/18  
 Authorized Officer  FAB8B10B9D3E4EC...  
 Printed Name: Kyle Kihs Title: Executive Director

**Bank Use Only**

Account Number this page corresponds to: 379681075477

## Payees and Payments Exempt from Backup Withholding

The following is a list of payees exempt from backup withholding and for which no information reporting is required. For interest and dividends, all listed payees are exempt except item 9. For broker transactions, payees listed in 1 through 13, and a person registered under the Investment Advisers Act of 1940 who regularly acts as a broker are exempt.

1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2);
2. The United States or any of its agencies or instrumentalities;
3. A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions, agencies, or instrumentalities;
4. A foreign government or any of its political subdivisions, agencies, or instrumentalities; or
5. A corporation;
6. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession;
7. A futures commission merchant registered with the Commodity Futures Trading Commission;
8. A real estate investment trust;
9. An entity registered at all times during the tax year under the Investment Company Act of 1940;
10. A common trust fund operated by a bank under section 584(a);
11. A financial institution;
12. A middleman known in the investment community as a nominee or custodian; or
13. A trust exempt from tax under section 664 or described in section 4947.

### Bank Use Only

Account Number this page corresponds to: 379681075477



## AWWA and the Section

### Reasons an Affiliation Agreement is needed:

- Protect the Associations' intellectual property including logos, emblems, names, free publications and other proprietary material. In this litigious society if you don't protect your brands you can lose them. An example, Bayer aspirin did not protect the name aspirin and it is now used worldwide by many companies.
- By having this agreement the Association can continue to indemnify all eligible persons of the section, such as directors and officers with liability insurance as cost effectively as possible.
- The Associations' not-for-profit status is critical to our organization surviving. As such the need was there to ensure that everyone understood that all activities conducted by the Sections must meet with AWWA's stated mission of uniting the water community to protect public health and to provide safe and sufficient water for all. Through collective leadership, AWWA advances technology, education, science, management, and government policies. Anything outside of this mission is not allowed.

### Section Penalties for Affiliation Agreement Violations:

1. If the Section violates this agreement to Association may start a disciplinary proceeding that could include financial penalties or ultimately dissolution of the Section.

*I understand the importance of the American Water Works Associations' Affiliation Agreement and why it was needed. Furthermore, I understand that by violating this agreement I place the Pacific Northwest Section in jeopardy of financial penalties or possible dissolution. If I have any questions or concerns regarding my Committee or Subsection activities I will contact the Section office for clarification.*

**John Woody**

Name

**President**

Title

**Cascade to Coast**

Committee or Subsection

**1/23/2019**

Date