



PNWS-AWWA
Northwest Washington
2020 Annual Report



American Water Works Association
Pacific Northwest Section
Northwest Washington Subsection

Table of Contents

1. 2021-22 Subsection officer information
2. 2020 Subsection activities summary
3. 2021 Proposed schedule of meetings and events.
4. 2021 Subsection goals
5. Copy of signature card from the bank/financial institution with signatures (listing the PNWS Executive Director as a signee)
6. Affiliation Agreement signed by the Subsection President/Chair
7. Conflict of Interest Statement signed by each subsection officer (including Directors)
8. Subsection Financials
 - Balance Sheet
 - Profit/Loss Statement
 - Cash Receipts and Expenses Report



PNWS - Subsection Officer Information

Officers to be included:

1. President/Chair
2. Vice-President/Vice-Chair
3. Secretary
4. Treasurer
5. In-coming Officer/Officer-Elect
6. Past President/Past Chair

Information Needed for Each Officers:

1. Name
2. Title
3. Business/Organization
4. Mailing/Street Address (P.O. Box is fine)
5. City/State/Zip Code
6. Phone
7. Fax
8. E-mail



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

President/Chair

Vice-President/Vice-Chair

Secretary

Treasurer

In-coming Officer/Officer-Elect

Past President/Past Chair

2020 Workshops, Events and Board Meetings

Date	Event	Location
January 9, 2020	Subsection Board Meeting	In-Person
January 14, 2020	Chlorine Residuals Testing and Lab Skills Workshop	In-Person
January 23, 2020	Chlorine Residuals Testing and Lab Skills Workshop	In-Person
February 13, 2020	Subsection Board Meeting	In-Person
February 14, 2020	Emergency Preparedness	In-Person
February 21, 2020	Math for Operators & Reading P&ID's	In-Person
March 3, 2020	Chlorine Residuals Testing and Lab Skills Workshop	In-Person
May 14, 2020	Subsection Board Meeting	On-Line
August 13, 2020	Subsection Board Meeting	On-Line
September 10, 2020	Subsection Board Meeting	On-Line
October 8, 2020	Subsection Board Meeting	On-Line
October 14, 2020	Math for Operators & Reading P&ID's	On-Line
October 28, 2020	Emergency Preparedness	On-Line
November 4, 2020	Emergency Preparedness	On-Line
November 12, 2020	Subsection Board Meeting	On-Line
December 8, 2020	Water Storage Basics	On-Line
December 15, 2020	Water Storage Basics	On-Line

2021 Workshops, Events and Board Meetings

Date	Event	Location
January 14, 2021	Subsection Board Meeting	On-Line
January 27, 2021	Math for Operators	On-Line
February 10, 2021	Intro to Reading P&ID's	On-Line
February 11, 2021	Subsection Board Meeting	On-Line
March 10, 2021	Basic Waterworks	On-Line
March 11, 2021	Subsection Board Meeting	On-Line
April 8, 2021	Subsection Board Meeting	On-Line
May 13, 2021	Subsection Board Meeting	On-Line
June 10, 2021	Subsection Board Meeting	On-Line
September 9, 2021	Subsection Board Meeting	On-Line
October 14, 2021	Subsection Board Meeting	On-Line
November 11, 2021	Subsection Board Meeting	On-Line
December 9, 2021	Subsection Board Meeting	On-Line
Other Planned Workshops with Dates TBD		
	Chlorine Residual Testing	In-Person
	Emergency Preparedness	TBD
	Distribution Workshop	TBD
	Water Storage Basics	TBD
Fall	Reverse Osmosis Workshop	In-Person
Fall/Winter	CEU Round-Up	TBD
June	Western Washinton Short School	On-Line

GOALS 2021

Primary Focus is Training

- Provide cost-effective continuing education unit credits (CEUs) through training workshops for water utility managers, engineers and operators in Northwest Washington and the Pacific Northwest;
When possible, include topics and advertise to wastewater utility professionals, such as asset management;
- Provide safety related training including classes for which CEUs are not granted but are important to water and wastewater utility operators, such as asbestos cement pipe handling;
- Advertise via Water Matters and Water Tap whenever possible;
- Continue to hold subsection board meetings virtually but reach out to utilities and members to foster involvement and to get input for future workshops and events and to assess other utility needs;
- Continue to look for opportunities to partner with PNWS committees, neighboring subsections and allied organizations (PNCWA, NWMOA, etc.);
- Continue to take the lead in developing more “training-in-a-box” curricula and train instructors so these trainings.
- Host the 2021 Western Washington Short School virtually.

Giving – Support the Pacific NW and Abroad

- Reach out to young professionals and students through email campaigns and special activities (field trips, networking events, etc.);
- Identify and participate in career fairs to help promote careers in the water utility industry;
- Continue supporting the PWNS scholarship and E&T funds;



Business Signature Card
with Substitute Form W-9



Account Number: 0000 6335 5614 Bank Number: 353

Account Type: Checking (DDA) Savings (SAV) Certificate of Deposit (CD)

Account Title:
NORTHWEST SUB SEC AWWA

Legal Designation:

- Individual/Sole Proprietor Trust/Estate Unincorporated Association C Corporation S Corporation
 Partnership (Enter the type of partnership: General, LP, LLP or LLLP) _____
 Limited Liability Company (Enter tax classification: C=C Corporation, S=S Corporation, P=Partnership or M=Single Member Sole Proprietor) _____
 Other (Defined in W-9 instructions) _____

Social Security Number _____ (or) Employer Identification Number 23-7026163

By signing below, I/we acknowledge and agree that this account is and will be governed by the terms and conditions set forth in the account opening documents for my/our account, as they are amended from time to time. The account opening documents include the Deposit Agreement and Disclosures and the Business Schedule of Fees. Furthermore, I/we acknowledge the receipt of these documents. By signing below, I/we acknowledge and agree that the signature(s) will serve as verification for any transactions in connection with this account, and as the certification (set forth below) of the taxpayer identification number (TIN) to which I/we want interest reported. The Deposit Agreement includes a provision for alternative dispute resolution.

Nonresident Alien Status (if applicable) If the beneficial owner of this account is a foreign person, check here, and complete and sign the applicable Form(s) W-8.

Substitute Form W-9. Certification - Under penalties of perjury, I certify that: (1) The number shown on this form is the 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 US citizen or other US person (Defined in the W-9 instructions) and (4) the FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

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. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. (Please refer to the IRS instructions for Form W-9).

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

Exemptions (codes apply only to certain entities, not individuals; see instructions the IRS instructions for Form W-9):

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

Name (typed or printed)	Title (if applicable)	Signature	Date
1 BRIDGET AUGUST	SIGNER	<i>Bridget August</i>	12/14/17
2 ERIC N SCHEY	SIGNER	<i>Eric N Schey</i>	12-14-17
3 MARK L SEMRAU	SIGNER	<i>Mark Semrau</i>	12-14-17
4 KYLE KIHS	SIGNER	<i>Kyle Kihs</i>	12-19-17
5			

Account Number: 000 6335 5614 Signature Card Addendum on File

ATM/Deposit/Debit Card Request

Provided that the account referenced above is eligible to receive automated teller machine cards and/or Debit Cards, I (as authorized by the resolutions and/or court documents and/or other agreements which authorize this account) hereby request the issuance of such cards to any of the authorized signers on this account.

Authorized Signer	Title
-------------------	-------

Review Information

Customer 1:

Name BRIDGET AUGUSTID Type: US DRIVER LICENSE W/PHOT ID#: AUGUSBA224QC ID Issuer: WA Iss. Date: 10/2012 Exp. Date: 11/2017ID Type: MAJOR FIN'L CREDIT CD ID#: 1433 ID Issuer: N/A Iss. Date: N/A Exp. Date: 03/2019

Customer 2:

Name ERIC N SCHEYID Type: US DRIVER LICENSE W/PHOT ID#: SCHEYEN183PT ID Issuer: WA Iss. Date: 10/2014 Exp. Date: 10/2020ID Type: MAJOR FIN'L CREDIT CD ID#: 9031 ID Issuer: NA Iss. Date: NA Exp. Date: 01/2020

Customer 3:

Name MARK L SEMRAUID Type: US DRIVER LICENSE W/PHOT ID#: SEMRAML402OF ID Issuer: WA Iss. Date: 07/2016 Exp. Date: 06/2020ID Type: OTHER ID#: 9673 ID Issuer: SS CARD Iss. Date: NA Exp. Date: NA

Customer 4:

Name KYLE KIHSID Type: US DRIVERS LICENSE ID#: KIHSKA357JM ID Issuer: WA Iss. Date: 03/2015 Exp. Date: 04/21ID Type: OTHER ID#: 0209 ID Issuer: SS CARD Iss. Date: NA Exp. Date: NA

Customer 5:

Name _____

ID Type: _____ ID#: _____ ID Issuer: _____ Iss. Date: _____ Exp. Date: _____

ID Type: _____ ID#: _____ ID Issuer: _____ Iss. Date: _____ Exp. Date: _____

Bank Information

Date

12/19/2017

Financial Center Name

LYNNWOOD BANKING CENTER

Employee's Name

KRYSTAL HUMPHREY

Employee's Phone Number

425-672-0570



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.

Jeff Marrs

Name

President

Title

Northwest Washington

Committee or Subsection

1/21/2021

Date

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 Bridget August Date: 1/14/2021

Name (printed) Bridget August

Committee or Subsection Northwest Washington

Title Secretary

[Print Form](#)

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  Digitally signed by Dave Price
Date: 2021.01.18 09:53:19
-08'00' Date: January 18, 2021

Name (printed) David Price

Committee or Subsection Northwest Washington Subsection

Title Board Member

Print Form

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 Mark Semrau Digitally signed by Mark Semrau
Date: 2021.01.15 07:44:35
-08'00' Date: Jan. 15, 2021

Name (printed) Mark Semrau

Committee or Subsection Northwest Washington Subsection

Title Treasure

Print Form

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  Date: 1/14/2021

Name (printed) Jeff Marris

Committee or Subsection Northwest Washington

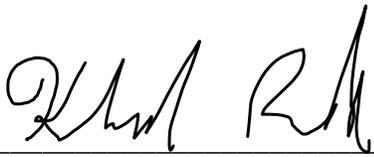
Title President

[Print Form](#)

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  _____ Date: _____

Name (printed) _____

Committee or Subsection _____

Title _____

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  Date: 1-15-2021

Name (printed) Eric Schey

Committee or Subsection Northwest Washington

Title Past President



American Water Works Association
Pacific Northwest Section

PO Box 872467
Vancouver, WA 98687
T 803-760-6460
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:



SUBSECTION PROFIT/LOSS STATEMENT AS OF:

Subsection Name:

INCOME:

Interest	<input type="text"/>
Receivables	<input type="text"/>
Miscellaneous	<input type="text" value="\$21,664.30"/>
TOTAL INCOME:	<input type="text" value="\$21,664.30"/>

EXPENSES:

Accounting Fees	<input type="text"/>
Committee	<input type="text"/>
Conference/Meetings	<input type="text"/>
Equipment	<input type="text" value="\$33.05"/>
Miscellaneous	<input type="text" value="\$17,451.93"/>
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"/>
TOTAL EXPENSES:	<input type="text" value="\$17,484.98"/>



SUMMARY REPORT OF SUBSECTION CASH RECEIPTS AND EXPENSES FOR 2020

Subsection Number:

Subsection Name: **Northwest Washington**

- | | |
|---|--------------------|
| 1. Total Subsection Balance of Funds at beginning of the year: | \$41,915.20 |
| 2. Total receipts during the year. (Monies collected during the year): | \$21,664.30 |
| 3. Total (Add Lines 1 and 2) | \$63,579.50 |
| 4. Total Expenses for the year: | \$17,484.98 |
| 5. Balance at the end of the year. (Subtract Line 4 from Line 3) | \$46,094.52 |
| 6. Of the Balance on Line 5, how much is earned Interest from the bank? | \$0.00 |
| 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. | |

Checking Account, Bank of America, Lynnwood Branch, Washington

Certification:

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

Mark Semrau

Signed

Mark Semrau

Please Print Signed Name