

Eastern Oregon AWWA PNWS / PNCWA 2024 Annual Report



**Eastern Oregon Region AWWA/PNCWA
PNWS - Subsection Officer Information**

AWWA President

Deb Cornford
Anderson Perry & Associates
1901 N Fir
La Grande, OR 97850
541-963-8309
dcornford@andersonperry.com

PNCWA President

Rachel Muniz
City of Hermiston
525 NE 7th Street
Hermiston, OR 97838
(541)371-1696
rmuniz@hermiston.or.us

AWWA Vice President

Jason Wood
City Halls
387 NE Third
Prineville, OR 97754
541-447-7844
jwood@cityofprineville.com

PNCWA Vice President

Kyle Willman
City of Pendleton
1501 SE Byers Ave.
Pendleton, OR 97801
541-276-3078
Kyle.Willman@ci.pendleton.or.us

AWWA Secretary/Treasurer

Mary McDonald
City Of La Grande-Public Works
800 X Avenue
La Grande, Oregon 97850
541-805-9556
easternoregonregion@gmail.com

PNCWA Secretary/Treasurer

Mary McDonald
City Of La Grande-Public Works
800 X Avenue
La Grande, Oregon 97850
541-805-9556
easternoregonregion@gmail.com



PNWS-AWWA Subsection Activities

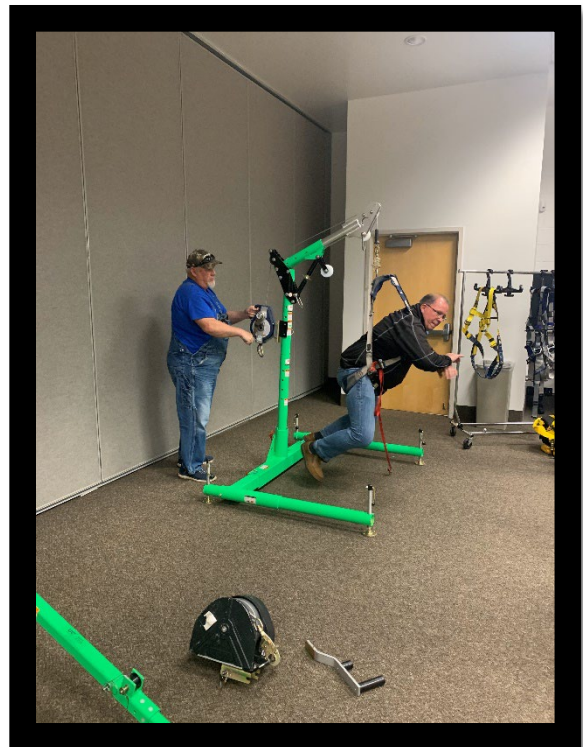
Please list your Subsection meetings for the past year. Include the date, where the meeting was held, topics discussed at the meeting and the number of people that attended the meeting. List all meetings, Workshops, short schools and other events sponsored or co-sponsored by the subsection. Including copies of the meeting flyers would be appreciated.

(Attach multiple sheets as needed)

Date	Location	Discussion Topics	No. in Attendance
1/11/24	La Grande, OR	Spring confererence, still need spea	10
2/8/24	Pendleton, OR	Spring Confeerence, Rachel as op	13
3/14/24	Pendlton, OR	Conference, OESAC approved CE	12
4/8/24-4/10/24	Ontario, OR	Spring Conference	96
5/9/24	Pendleton, OR	Raising conference prices, survey	11
6/13/24	La Grande, OR	Fall class discussion, .6 CEUs, 9-	8
7/11/24	Pendleton, OR	Fall class, did people get save the	9
8/8/24	La Grande, OR	Fall class, Rob got taco truck & HI	8
9/17/24	Hermiston, OR	Fall class, OSHA required classes	25
10/10/24	Pendleton, OR	Whova conference app discussior	10
11/14/24	Pendleton, OR	Spring conference, call for speake	8
12/12/24	Pendleton, OR	Spring conference, round table ho	11

Eastern Oregon Operators Conference

April 8 – 10, 2024



FALL TRAINING 2024

9/17/24

HERMISTON COMMUNITY CENTER

HERMISTON, OREGON

Speaker Brian Warren from Pendleton, Oregon

Schedule

9:00 a.m. – 11:00 a.m.	PPE .2 CEUs
11:00 a.m – 11:30 a.m.	Lunch (sponsored by HD Fowler)
11:30 a.m. -1:30 p.m.	Hazard Identification .2 CEUs
1:30 p.m.- 3:30 p.m	Lock Out Tag Out .2 CEUs

Eastern Oregon Region Fall Training

September 17, 2024





PNWS-AWWA Subsection Meeting Schedule

Please list your upcoming Subsection meeting schedule even if the schedule is proposed or tentative. Please list date, meeting location and topic of discussion. Please mark those dates that are tentative with an asterisk (*) (Attach multiple sheets as needed)

Date	Location	Discussion Topics
3/31/25-4/2/25	Pendleton, OR	Eastern Oregon Operators Conference
Sept or Oct 25	La Grande or Hermiston	Fall class, one day. Probably .6 CEUs
1/25-12/25	Pendleton/La Grande	Monthly meetings to discuss conference, 1

Print Form

Eastern Oregon Region Subsection Goals

1. Sponsor a successful Eastern Oregon Operators Conference
2. Sponsor a one-day training event in Fall 2025
3. Continue support for Eastern Oregon AWWA/PNCWA Scholarship fund in conjunction with Walla Walla Community College



The bank is hereby authorized to recognize the signature(s) subscribed below in the payment of funds or the transaction of any business for this account. All transactions shall be governed by applicable laws and the bank's terms (copy acknowledged as received herewith) that pertain to the type of account and style of ownership indicated on this card. Upon the request of the bank, any consumer reporting agency is hereby instructed to furnish a consumer report relating to the undersigned to the bank. Refer to resolution file for authorization of signatures where authorization is required. By signing this signature card, you are also acknowledging your express consent to the terms and conditions in your applicable account agreement, including but not limited to our policies on funds availability and our cellular phone contact policy.

MR. MS MRS. MISS Paul M. Temm ACCOUNT SIGNATURE 1 (DO NOT PRINT)
 MR. MS MRS. MISS Debra J. Campbell ACCOUNT SIGNATURE 2 (DO NOT PRINT)
 MR. MS MRS. MISS Jessica A. Dindley ACCOUNT SIGNATURE 3 (DO NOT PRINT)
 MR. MS MRS. MISS Jessica A. Dindley ACCOUNT SIGNATURE 4 (DO NOT PRINT)

REMARKS:

Check appropriate box for federal tax classification

Individual/sole proprietor C Corporation S Corporation Partnership Trust/estate Other _____
 Limited liability company -- Enter the Tax Classification: C=C Corporation, S=S Corporation, P=Partnership: _____

Certification: 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 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.
- (4) I am an exempt payee. To claim the exemption, you must check this box.

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 dividend you are not required to sign the Certification, but you must provide your correct TIN.

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

Signature of U.S. Person Paul M. Temm

Date 4-5-12



The bank is hereby authorized to recognize the signature(s) subscribed below in the payment of funds or the transaction of any business for this account. All transactions shall be governed by applicable laws and the bank's terms (copy acknowledged as received herewith) that pertain to the type of account and style of ownership indicated on this card. Upon the request of the bank, any consumer reporting agency is hereby instructed to furnish a consumer report relating to the undersigned to the bank. Refer to resolution file for authorization of signatures where authorization is required. By signing this signature card, you are also acknowledging your express consent to the terms and conditions in your applicable account agreement, including but not limited to our policies on funds availability and our cellular phone contact policy.

MR. MS MRS. MISS [Signature] ACCOUNT SIGNATURE 1 (DO NOT PRINT)
 MR. MS MRS. MISS _____ ACCOUNT SIGNATURE 2 (DO NOT PRINT)
 MR. MS MRS. MISS _____ ACCOUNT SIGNATURE 3 (DO NOT PRINT)
 MR. MS MRS. MISS _____ ACCOUNT SIGNATURE 4 (DO NOT PRINT)

REMARKS:

Check appropriate box for federal tax classification

Individual/sole proprietor C Corporation S Corporation Partnership Trust/estate Other _____
 Limited liability company -- Enter the Tax Classification: C=C Corporation, S=S Corporation, P=Partnership: _____

Certification: 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 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.
- (4) I am an exempt payee. To claim the exemption, you must check this box.

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 dividend you are not required to sign the Certification, but you must provide your correct TIN.

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



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.

Deb Cornford

Name

President

Title

President

Committee or Subsection

Eastern Oregon Region

Date



POLICY ON CONFLICTS OF INTEREST AND DISCLOSURE OF CERTAIN INTERESTS

This conflict of interest policy is designed to help directors, officers, employees and members ("Responsible Persons") of the Pacific Northwest Section of the American Water Works Association (PNWS) identify situations that present potential conflicts of interest and to provide the Section with a procedure which, if observed, will allow a transaction to be treated as valid and binding even though a Responsible Person has or may have a conflict of interest with respect to the transaction.

DEFINITIONS

Conflict of Interest. For purposes of this policy, the following circumstances shall be deemed to be a Conflict of Interest:

Outside Interests

- A Contract or Transaction between the PNWS and a Responsible Person or a Family Member of a Responsible Person.
- A Contract or Transaction between the PNWS and an entity in which a Responsible Person or a Family Member of a Responsible Person has a material interest in excess of 5% or of which such person is a director, officer, agent, partner, trustee, personal representative, guardian, custodian, or other legal representative.

Outside Activities

- A Responsible Person or a Family Member of a Responsible Person accepting gifts, entertainment, or other favors with a value in excess of \$100 from any individual or entity that:
 - (i) Does or is seeking to do business with the PNWS or
 - (ii) Is seeking to receive a loan or grant, or to secure other financial commitments or benefits from the PNWS.

Responsible Person is any person who is an officer, director, employee or member of the PNWS, including, when the context requires, a Family Member of any such person.

Family Member is a spouse, domestic partner, parent, child or spouse of a child, brother, sister, or spouse of a brother or sister of a Responsible Person.

Contract or Transaction is any agreement or relationship involving the sale or purchase of goods, services, or rights of any kind, the providing or receipt of a loan or grant, the establishment of any other type of pecuniary or financially meaningful relationship except for transactions in the ordinary course of business (a) between the PNWS and an employee of the PNWS arising from the employment relationship, such as salary, benefits or reimbursement of employment related expenses, (b) between the PNWS and a member of the PNWS arising from the membership relationship, such as payment of membership dues or the purchase of publications, exhibition space or member services, or (c) between the PNWS and its officers or directors arising out of their positions, such as the reimbursement of travel and lodging expenses in accordance with the PNWS's stated policies for such reimbursements.

PROCEDURES

- Prior to any Board or Committee action on a Contract or Transaction involving a Conflict of Interest, any Responsible Person having a Conflict of Interest who is in attendance at the meeting shall disclose all facts material to the Conflict of Interest. Such disclosure shall be reflected in the minutes of the meeting.
- If an officer or director of the PNWS is unable to attend a meeting of a Board or Committee at which he or she has reason to believe that the Board will act on a matter in which the officer or director has a Conflict of Interest, then that person shall disclose to the chair of the meeting all facts material to the Conflict of Interest. The chair shall report the disclosure at the meeting and the disclosure shall be reflected in the minutes of the meeting.
- Any Responsible Person who has a Conflict of Interest shall not participate in or be permitted to hear the Board's discussion of the matter except to disclose material facts and to respond to questions. Any Responsible Person who is an officer, director or employee of the PNWS shall not attempt to exert his or her personal influence with respect to the matter, either at or outside the meeting.
- A Responsible Person who has a Conflict of Interest with respect to a Contract or Transaction that will be voted on at a meeting shall not be counted in determining the presence of quorum for purposes of the vote. The Responsible Person having a Conflict of Interest may not vote on the Contract or Transaction and shall not be present in the meeting room when the vote is taken. Such person's ineligibility to vote shall be reflected in the minutes of the meeting.
- Responsible Persons who are not members of the Board of Directors of the PNWS shall disclose to the PNWS Executive Director or Chair of the PNWS (or his or her designee) any Conflict of Interest that such Responsible Person has with respect to a Contract or Transaction. Responsible Persons who have a Conflict of Interest with respect to a Contract or Transaction that is not the subject of Board action shall also make the same disclosure. In either case, such disclosure shall be made as soon as practicable as the Responsible Person knows of the Conflict of Interest. Any Responsible Person who is an officer, director or employee of the PNWS shall refrain from any action that may affect the PNWS's participation in the Contract or Transaction.
- In the event it is not entirely clear that a Conflict of Interest exists, the Responsible Person with the potential conflict shall disclose, in writing, the circumstances to the Chair or Executive Director of the PNWS, who shall determine whether there exists a Conflict of Interest that is subject to this policy.

- Each Responsible Person shall exercise care not to disclose confidential information acquired in connection with any such Contract or Transaction the disclosure of which might have an adverse effect on the business of the PNWS. Furthermore, a Responsible Person shall not disclose or use information relating to the business of the PNWS for the personal profit or advantage of the Responsible Person or a Family Member.

Dissemination and Review of Policy

- This policy shall be published on the PNWS's website and otherwise made available to all members of the PNWS. Each officer, director and employee of the PNWS shall be required to review a copy of this policy and acknowledge in writing that he or she has done so.
- Each officer and director of the PNWS shall annually complete a disclosure form identifying any relationships, positions, or circumstances in which such Responsible Person is involved that could reasonably be expected to lead to a Conflict of Interest. Such relationships, positions or circumstances include any significant ownership interest (more than 5%) of a business that might provide goods or services to the PNWS. The PNWS will treat any such disclosures as confidential information.
- The Board of Directors shall review this policy annually. Any changes to the policy shall be communicated immediately to all Responsible Persons.

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) _____

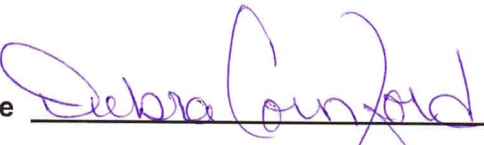
Committee or Subsection _____

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: 01/09/2025

Name (printed) Deb Cornford

Committee or Subsection Eastern Oregon Region

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: 01/09/2025

Name (printed) Mary McDonald

Committee or Subsection Eastern Oregon Region

Title Secretary/Treasure

Print Form



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:



SUBSECTION PROFIT/LOSS STATEMENT AS OF: 2024

Subsection Name: Eastern Oregon Region AWWA/PNCWA

INCOME:	36593.88
Interest	
Receivables	
Miscellaneous	
TOTAL INCOME:	36593.88

EXPENSES:	37302.89
Accounting Fees	0.00
Committee	523.23
Conference/Meetings	35124.83
Equipment	
Miscellaneous	500.00
Officer Compensation	
Postage	
Printing	
Prizes & Awards	1154.83
Telephone	
Travel	
TOTAL EXPENSES:	37302.89



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

SUMMARY REPORT OF SUBSECTION CASH RECEIPTS AND EXPENSES FOR

2024

Subsection Number: _____ Subsection Name: Oregon

- | | |
|--|-----------------|
| 1) Total Subsection Balance of funds at beginning of the year: | <u>5588.97</u> |
| 2) Total Receipts during the year. (Monies collected during the year): | <u>36593.88</u> |
| 3) Total (Add Lines 1 and 2): | <u>42182.85</u> |
| 4) Total Expenses for the year: | <u>37470.29</u> |
| 5) Balance at the end of the year. (Subtract line 4 from line 3) | <u>4721.56</u> |
| 6) Of the balance on line 5, how much is earned interest from the bank? | <u>0.00</u> |
| 7) Please list where the subsection funds are kept. (Types of accounts, name and branch of bank(s), cash, etc.) Do not add your bank account numbers. | |

U.S. Bank

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

Sign: _____

Print Name: _____