

ARIZONA CORPORATION COMMISSION
UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL - MAKE CHANGES AS NECESSARY

W-02003A

Rillito Water Users Association
PO Box 668
Rillito, AZ 85654

RECEIVED

MAY 29 2015

AZ CORP COMM
Director - Utilities

Please click here if pre-printed Company name on this form is not your current Company name or dba name is not included.

Please list current Company name including dba here:

ANNUAL REPORT
Water

FOR YEAR ENDING

| | | |
|----|----|------|
| 12 | 31 | 2014 |
|----|----|------|

FOR COMMISSION USE

| | |
|--------|----|
| ANN 04 | 14 |
|--------|----|

7-24-15

COMPANY INFORMATION

Company Name (Business Name) Rillito water users Association

Mailing Address 8840 Robinson St
Rillito (Street) AZ 85654
(City) (State) (Zip)

Telephone No. (Include Area Code) _____ Fax No. (Include Area Code) _____ Cell No. (Include Area Code) _____

Email Address Rillitowater@gmail.com

Local Office Mailing Address PO BOX 668
Rillito (Street) AZ 85654-0668
(City) (State) (Zip)

Local Customer Service Phone No. (Include Area Code) _____ (1-800 or other long distance Customer Service Phone No.) _____

Email Address Rillitowater@gmail.com Website address _____

MANAGEMENT INFORMATION

Regulatory Contact:

Management Contact: Juanita Carbajal Treasurer
(Name) (Title)

8921 Benta Vista PO BOX 667 Rillito AZ 85654
(Street) (City) (State) (Zip)

520-682-3531 520 609 2245
Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Email Address _____

On Site Manager: Kirby Colter
(Name)

11571 N David Ave #1 PO BOX 414 Rillito AZ 85654
(Street) (City) (State) (Zip)

520-403-4778
Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Email Address _____

Statutory Agent: Christopher Hill
 (Name)

2500 W Lambert Ln. PO Box 70022 Tucson AZ 85737
 (Street) (City) (State) (Zip)

520-904-0741
 Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Attorney: _____
 (Name)

 (Street) (City) (State) (Zip)

 Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Email Address _____

OWNERSHIP INFORMATION

Check the following box that applies to your company:

| | |
|---|---|
| <input type="checkbox"/> Sole Proprietor (S) | <input type="checkbox"/> C Corporation (C) (Other than Association/Co-op) |
| <input type="checkbox"/> Partnership (P) | <input type="checkbox"/> Subchapter S Corporation (Z) |
| <input type="checkbox"/> Bankruptcy (B) | <input checked="" type="checkbox"/> Association/Co-op (A) |
| <input type="checkbox"/> Receivership (R) | <input type="checkbox"/> Limited Liability Company |
| <input type="checkbox"/> Other (Describe) _____ | |

COUNTIES SERVED

Check the box below for the county/ies in which you are certificated to provide service:

| | | |
|-------------------------------------|--|-----------------------------------|
| <input type="checkbox"/> APACHE | <input type="checkbox"/> COCHISE | <input type="checkbox"/> COCONINO |
| <input type="checkbox"/> GILA | <input type="checkbox"/> GRAHAM | <input type="checkbox"/> GREENLEE |
| <input type="checkbox"/> LA PAZ | <input type="checkbox"/> MARICOPA | <input type="checkbox"/> MOHAVE |
| <input type="checkbox"/> NAVAJO | <input checked="" type="checkbox"/> PIMA | <input type="checkbox"/> PINAL |
| <input type="checkbox"/> SANTA CRUZ | <input type="checkbox"/> YAVAPAI | <input type="checkbox"/> YUMA |
| <input type="checkbox"/> STATEWIDE | | |

COMPANY NAME

Rillito Water Users Assoc.

UTILITY PLANT IN SERVICE

| Acct. No. | DESCRIPTION | Original Cost (OC) | Accumulated Depreciation (AD) | O.C.L.D. (OC less AD) |
|-----------|--|--------------------|-------------------------------|-----------------------|
| 301 | Organization | 1750 | | 1750 |
| 302 | Franchises | | | |
| 303 | Land and Land Rights | 1000 | | 1000 |
| 304 | Structures and Improvements | 1500 | | 1500 |
| 307 | Wells and Springs | 2524.26 | 75.73 | 2448.53 |
| 311 | Pumping Equipment | 20062.57 | 1003.13 | 19059.44 |
| 320 | Water Treatment Equipment | 300.00 | | 300 |
| 320.1 | Water Treatment Plants | | | |
| 320.2 | Solution Chemical Feeders | | | |
| 330 | Distribution Reservoirs and Standpipes | 3413.35 | 102.40 | 3310.95 |
| 330.1 | Storage Tanks | | | |
| 330.2 | Pressure Tanks | | | |
| 331 | Transmission and Distribution Mains | 18211.40 | 546.34 | 17665.06 |
| 333 | Services | | | |
| 334 | Meters and Meter Installations | 15949.71 | 797.49 | 15152.22 |
| 335 | Hydrants | | | |
| 336 | Backflow Prevention Devices | | | |
| 339 | Other Plant and Misc. Equipment | | | |
| 340 | Office Furniture and Equipment | 5500.00 | 275.00 | 5225 |
| 340.1 | Computers & Software | | | |
| 341 | Transportation Equipment | | | |
| 343 | Tools, Shop and Garage Equipment | | | |
| 344 | Laboratory Equipment | | | |
| 345 | Power Operated Equipment | | | |
| 346 | Communication Equipment | | | |
| 347 | Miscellaneous Equipment | | | |
| 348 | Other Tangible Plant | | | |
| | TOTALS | 70211.29 | 2800.09 | 67411.20 |

This amount goes on the Balance Sheet Acct. No. 108

COMPANY NAME Rillito Water Users Assoc.

WATER UTILITY CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

| Acct. No. | DESCRIPTION | Original Cost (1) | Depreciation Percentage (2) | Depreciation Expense (1 x 2) |
|-----------|--|-------------------|-----------------------------|------------------------------|
| 301 | Organization | | | |
| 302 | Franchises | | | |
| 303 | Land and Land Rights | | | |
| 304 | Structures and Improvements | | | |
| 307 | Wells and Springs | 2524.26 | 3% | 75.73 |
| 311 | Pumping Equipment | 20062.57 | 5% | 1003.13 |
| 320 | Water Treatment Equipment | | | |
| 320.1 | Water Treatment Plants | | | |
| 320.2 | Solution Chemical Feeders | | | |
| 330 | Distribution Reservoirs and Standpipes | 3413.35 | 3% | 102.40 |
| 330.1 | Storage Tanks | | | |
| 330.2 | Pressure Tanks | | | |
| 331 | Transmission and Distribution Mains | 18211.40 | 3% | 546.34 |
| 333 | Services | | | |
| 334 | Meters and Meter Installations | 15949.71 | 5% | 797.49 |
| 335 | Hydrants | | | |
| 336 | Backflow Prevention Devices | | | |
| 339 | Other Plant and Misc. Equipment | | | |
| 340 | Office Furniture and Equipment | 5500.00 | 5% | 275.00 |
| 340.1 | Computers & Software | | | |
| 341 | Transportation Equipment | | | |
| 343 | Tools, Shop and Garage Equipment | | | |
| 344 | Laboratory Equipment | | | |
| 345 | Power Operated Equipment | | | |
| 346 | Communication Equipment | | | |
| 347 | Miscellaneous Equipment | | | |
| 348 | Other Tangible Plant | | | |
| | SUBTOTAL | | | 2800.09 |
| | LESS CIAC Amortization | | | |
| | TOTALS * | | | 2800.09 |

*This amount goes on the Comparative Statement of Income and Expense Acct. No. 403

COMPANY NAME

WATER UTILITY BALANCE SHEET

| Acct No. | ASSETS | BALANCE AT BEGINNING OF YEAR | BALANCE AT END OF YEAR |
|----------|---|------------------------------|------------------------|
| | CURRENT AND ACCRUED ASSETS | | |
| 131 | Cash | \$ 3042.30 | \$ 2146.91 |
| 134 | Working Funds | | |
| 135 | Temporary Cash Investments | | |
| 141 | Customer Accounts Receivable | | |
| 146 | Notes/Receivables from Associated Companies | | |
| 151 | Plant Material and Supplies | | |
| 162 | Prepayments | | |
| 174 | Miscellaneous Current and Accrued Assets | | |
| | TOTAL CURRENT AND ACCRUED ASSETS | \$ | \$ |
| | FIXED ASSETS | | |
| 101 | Utility Plant in Service | \$ | \$ |
| 103 | Property Held for Future Use | | |
| 105 | Construction Work in Progress | | |
| 108 | Accumulated Depreciation – Utility Plant | | |
| 121 | Non-Utility Property | | |
| 122 | Accumulated Depreciation – Non Utility | | |
| | TOTAL FIXED ASSETS | \$ | \$ |
| | TOTAL ASSETS | \$ 3042.30 | \$ 2146.91 |

NOTE: The Assets on this page should be equal to Total Liabilities and Capital on the following page.

COMPANY NAME

WATER UTILITY BALANCE SHEET (CONTINUED)

| Acct. No. | LIABILITIES | BALANCE AT BEGINNING OF YEAR | BALANCE AT END OF YEAR |
|--|---|------------------------------|------------------------|
| CURRENT LIABILITES | | | |
| 231 | Accounts Payable | \$ | \$ 10053.41 |
| 232 | Notes Payable (Current Portion) | | |
| 234 | Notes/Accounts Payable to Associated Companies | | |
| 235 | Customer Deposits | | |
| 236 | Accrued Taxes | | |
| 237 | Accrued Interest | | |
| 241 | Miscellaneous Current and Accrued Liabilities | | |
| | TOTAL CURRENT LIABILITIES | \$ | \$ |
| LONG-TERM DEBT (Over 12 Months) | | | |
| 224 | Long-Term Notes and Bonds | \$ | \$ |
| DEFERRED CREDITS | | | |
| 251 | Unamortized Premium on Debt | \$ | \$ |
| 252 | Advances in Aid of Construction | | |
| 255 | Accumulated Deferred Investment Tax Credits | | |
| 271 | Contributions in Aid of Construction | | |
| 272 | Less: Amortization of Contributions | | |
| 281 | Accumulated Deferred Income Tax | | |
| | TOTAL DEFERRED CREDITS | \$ | \$ |
| | TOTAL LIABILITIES | \$ | \$ |
| CAPITAL ACCOUNTS | | | |
| 201 | Common Stock Issued | \$ | \$ |
| 211 | Paid in Capital in Excess of Par Value | | |
| 215 | Retained Earnings | | |
| 218 | Proprietary Capital (Sole Props and Partnerships) | | |
| | TOTAL CAPITAL | \$ | \$ |
| | TOTAL LIABILITIES AND CAPITAL | \$ 1112,00 | \$ 10053.41 |

COMPANY NAME

WATER UTILITY COMPARATIVE STATEMENT OF INCOME AND EXPENSE

| Acct. No. | OPERATING REVENUES | PRIOR YEAR | CURRENT YEAR |
|-----------|---|------------|--------------|
| 461 | Metered Water Revenue | \$ | \$ 13429.10 |
| 460 | Unmetered Water Revenue | | |
| 474 | Other Water Revenues | | |
| | TOTAL REVENUES | \$ | \$ 13429.10 |
| | OPERATING EXPENSES | | |
| 601 | Salaries and Wages | \$ | \$ 3000.00 |
| 610 | Purchased Water | | |
| 615 | Purchased Power | | 2924.66 |
| 618 | Chemicals | | |
| 620 | Repairs and Maintenance | | 595.45 |
| 621 | Office Supplies and Expense | | 270.38 |
| 630 | Outside Services | | 400.00 |
| 635 | Water Testing | | 3627.02 |
| 641 | Rents | | |
| 650 | Transportation Expenses | | |
| 657 | Insurance - General Liability | | |
| 659 | Insurance - Health and Life | | |
| 666 | Regulatory Commission Expense - Rate Case | | 10.00 |
| 675 | Miscellaneous Expense | | 3016.91 |
| 403 | Depreciation Expense | | 2800.09 |
| 408 | Taxes Other Than Income | | |
| 408.11 | Property Taxes | | 480.07 |
| 409 | Income Tax | | |
| | TOTAL OPERATING EXPENSES | \$ | \$ 17124.58 |
| | OPERATING INCOME/(LOSS) | \$ | \$ |
| | OTHER INCOME/(EXPENSE) | | |
| 419 | Interest and Dividend Income | \$ | \$ |
| 421 | Non-Utility Income | | |
| 426 | Miscellaneous Non-Utility Expenses | | |
| 427 | Interest Expense | | |
| | TOTAL OTHER INCOME/(EXPENSE) | \$ | \$ |
| | NET INCOME/(LOSS) | \$ | \$ (3695.48) |

COMPANY NAME

SUPPLEMENTAL FINANCIAL DATA
Long-Term Debt

No Loans

| | LOAN #1 | LOAN #2 | LOAN #3 | LOAN #4 |
|------------------------|---------|---------|---------|---------|
| Date Issued | | | | |
| Source of Loan | | | | |
| ACC Decision No. | | | | |
| Reason for Loan | | | | |
| Dollar Amount Issued | \$ | \$ | \$ | \$ |
| Amount Outstanding | \$ | \$ | \$ | \$ |
| Date of Maturity | | | | |
| Interest Rate | % | % | % | % |
| Current Year Interest | \$ | \$ | \$ | \$ |
| Current Year Principle | \$ | \$ | \$ | \$ |

Meter Deposit Balance at Test Year End \$ _____

Meter Deposits Refunded During the Test Year \$ _____

COMPANY NAME

Name of System: ADEQ Public Water System Number:

WATER UTILITY PLANT DESCRIPTION

WELLS

Table with 7 columns: ADWR ID Number*, Pump Horsepower, Pump Yield (gpm), Casing Depth (Feet), Casing Diameter (Inches), Meter Size (inches), Year Drilled. Contains handwritten entries for two wells.

* Arizona Department of Water Resources Identification Number

OTHER WATER SOURCES

Table with 3 columns: Name or Description, Capacity (gpm), Gallons Purchased or Obtained (in thousands).

Table with 4 columns: BOOSTER PUMPS (Horsepower, Quantity) and FIRE HYDRANTS (Quantity Standard, Quantity Other). Contains handwritten entries for 3 booster pumps and 2 fire hydrants.

Table with 4 columns: STORAGE TANKS (Capacity, Quantity) and PRESSURE TANKS (Capacity, Quantity). Contains handwritten entries for 1 storage tank and 1 pressure tank.

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME

Name of System:

ADEQ Public Water System Number:

WATER UTILITY PLANT DESCRIPTION (CONTINUED)

MAINS

| Size (in inches) | Material | Length (in feet) |
|------------------|----------|------------------|
| 2 | AC | 1680 |
| 3 | AC | 4880 |
| 4 | | |
| 5 | | |
| 6 | | |
| 8 | | |
| 10 | | |
| 12 | | |
| 3 | stool | 350 |
| | | |
| | | |

CUSTOMER METERS

| Size (in inches) | Quantity |
|------------------|----------|
| 5/8 X 3/4 | |
| 3/4 | 100 |
| 1 | |
| 1 1/2 | |
| 2 | 1 |
| Comp. 3 | |
| Turbo 3 | |
| Comp. 4 | |
| Turbo 4 | |
| Comp. 6 | |
| Turbo 6 | |
| | |
| | |

For the following three items, list the utility owned assets in each category for each system.

TREATMENT EQUIPMENT:

Contracted to: CW H2 Service LLC (Chris Hill) PO Box 70022
Tucson AZ 85737 520-271-2156

STRUCTURES:

6' fence around well #1 and storage tank S
6' fence around well #2
Storage Building at well #1 site

OTHER:

Note: If you are filing for more than one system, please provide separate sheets for each system.

| | |
|-----------------|----------------------------------|
| COMPANY NAME: | |
| Name of System: | ADEQ Public Water System Number: |

WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2014

| MONTH | NUMBER OF CUSTOMERS | GALLONS SOLD (Thousands) | GALLONS PUMPED (Thousands) | GALLONS PURCHASED (Thousands) |
|-----------------|---------------------|-----------------------------|-------------------------------|----------------------------------|
| JANUARY | 55 | 217,580 | | |
| FEBRUARY | 55 | 187,270 | | |
| MARCH | 55 | 247,150 | | |
| APRIL | 55 | 479,860 | | |
| MAY | 55 | 456,100 | | |
| JUNE | 55 | 10,010 | | |
| JULY | 55 | 744,670 | | |
| AUGUST | 55 | 579,752 | | |
| SEPTEMBER | 55 | 443,158 | | |
| OCTOBER | 56 | 446,780 | | |
| NOVEMBER | 56 | 289,190 | | |
| DECEMBER | 56 | 231,500 | | |
| TOTALS → | | 4,333,020 | | 4,333,020 |

What is the level of arsenic for each well on your system? ^{less than} 0.05 mg/l
(If more than one well, please list each separately.)

If system has fire hydrants, what is the fire flow requirement? ___ GPM for ___ hrs none

If system has chlorination treatment, does this treatment system chlorinate continuously?
 Yes No

Is the Water Utility located in an ADWR Active Management Area (AMA)?
 Yes No

Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement?
 Yes No

If yes, provide the GPCPD amount: _____

Note: If you are filing for more than one system, please provide separate data sheets for each system.

COMPANY NAME:

Name of System:

ADEQ Public Water System Number:

UTILITY SHUTOFFS / DISCONNECTS

| MONTH | Termination without Notice R14-2-410.B | Termination with Notice R14-2-410.C | OTHER |
|-----------|---|--|-------|
| JANUARY | | 0 | |
| FEBRUARY | | 0 | |
| MARCH | | 0 | |
| APRIL | | 0 | |
| MAY | | 0 | |
| JUNE | | 0 | |
| JULY | | 0 | |
| AUGUST | | 0 | |
| SEPTEMBER | | 0 | |
| OCTOBER | | 0 | |
| NOVEMBER | | 1 | |
| DECEMBER | | 0 | |
| TOTALS → | | 1 | |

OTHER (description):

COMPANY NAME Rillito Water Users Association YEAR ENDING 12/31/2014

PROPERTY TAXES

Amount of actual property taxes paid during Calendar Year 2014 was: \$ 480,07

Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.

If no property taxes paid, explain why. _____

VERIFICATION
AND
SWORN STATEMENT
Taxes

RECEIVED

MAY 29 2015

AZ CORP COMM
Director - Utilities

VERIFICATION

STATE OF Arizona
I, THE UNDERSIGNED
OF THE

| | |
|--------------------------------|--|
| COUNTY OF (COUNTY NAME) | <u>Pima</u> |
| NAME (OWNER OR OFFICIAL) TITLE | <u>Rillito Water User - Juanita Carbajal</u> |
| COMPANY NAME | <u>Rillito Water Users</u> |

DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

| | | |
|-----------|-----------|-------------|
| MONTH | DAY | YEAR |
| <u>12</u> | <u>31</u> | <u>2014</u> |

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

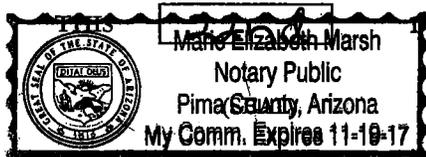
I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

Juanita A Carbajal
SIGNATURE OF OWNER OR OFFICIAL

520 682 3531 520-609-2245
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF



DAY OF May

| | |
|-------------|------------------------|
| COUNTY NAME | <u>Pima</u> |
| MONTH | <u>May</u> <u>2015</u> |

Marsh

SIGNATURE OF NOTARY PUBLIC

MY COMMISSION EXPIRES 11-19-2017

RECEIVED

JUL 17 2015

AZ CORP COMM
Director - Utilities

VERIFICATION
AND
SWORN STATEMENT
Intrastate Revenues Only

RECEIVED

MAY 29 2015

AZ CORP COMM
Director - Utilities

VERIFICATION

STATE OF Arizona

I, THE UNDERSIGNED

OF THE

| | |
|--------------------------------|---------------------------------|
| COUNTY OF (COUNTY NAME) | <u>Pima</u> |
| NAME (OWNER OR OFFICIAL) TITLE | <u>Juanita Carbajal Sec-Try</u> |
| COMPANY NAME | <u>Rillito Water Users</u> |

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

| MONTH | DAY | YEAR |
|-----------|-----------|-------------|
| <u>12</u> | <u>31</u> | <u>2014</u> |

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2014 WAS:

| |
|---|
| Arizona Intrastate Gross Operating Revenues Only (\$) |
| <u>\$ 15,267.08</u> |

(THE AMOUNT IN BOX ABOVE INCLUDES \$ 878.08 IN SALES TAXES BILLED, OR COLLECTED)

**REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)

Juanita A Carbajal
SIGNATURE OF OWNER OR OFFICIAL

520 6823581 520 609 2245
TELEPHONE NUMBER

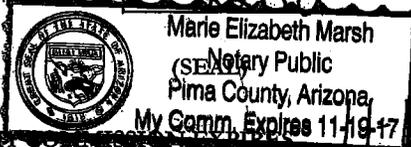
SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

| | |
|-------------|-------------------------|
| COUNTY NAME | <u>Pima</u> |
| MONTH | <u>May</u> <u>.2015</u> |

THIS 22nd DAY OF

[Signature]
SIGNATURE OF NOTARY PUBLIC



9-17

RECEIVED

JUL 17 2015
AZ CORP COMM
Director - Utilities

RECEIVED

MAY 29 2015

AZ CORP COMM
Director - Utilities

VERIFICATION
AND
SWORN STATEMENT
RESIDENTIAL REVENUE
Intrastate Revenues Only

None

VERIFICATION

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

| | |
|---|-------------------------|
| COUNTY OF (COUNTY NAME) <i>Pima</i> | |
| NAME (OWNER OR OFFICIAL) <i>Juanita Carbajal</i> | TITLE <i>Sec Tre</i> |
| COMPANY NAME <i>Pillito Water Users</i> | |

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

| | | |
|-----------|-----------|-------------|
| MONTH | DAY | YEAR |
| <i>12</i> | <i>31</i> | <i>2014</i> |

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2014 WAS:

| |
|---|
| ARIZONA INTRASTATE GROSS OPERATING REVENUES <i>\$4,389,0015,267.08</i> |
|---|

THE AMOUNT IN BOX AT LEFT
INCLUDES \$ *878.08*
IN SALES TAXES BILLED, OR COLLECTED)

*RESIDENTIAL REVENUE REPORTED ON THIS PAGE
MUST INCLUDE SALES TAXES BILLED.

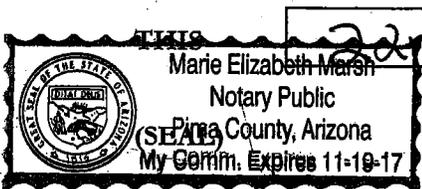
Juanita Carbajal
SIGNATURE OF OWNER OR OFFICIAL

520 682 3531
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

| | |
|--|---------------------|
| NOTARY PUBLIC NAME <i>Marie Elizabeth Marsh</i> | |
| COUNTY NAME <i>Pima</i> | |
| MONTH <i>May</i> | YEAR <i>2015</i> |



MY COMMISSION EXPIRES

THIS *22nd* DAY OF

Marsh
SIGNATURE OF NOTARY PUBLIC

11-19-17