## Edgar Filing: NICKOLOFF JEFFREY K - Form 4

NICKOLOF	F JEFFREY K									
Form 4										
June 18, 200	7									
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMMISSION	OMB Number:	3235-0287	
Check thi if no long subject to Section 1		NGES IN BENEFICIAL OWNE SECURITIES				Expires: January 3 20 Estimated average burden hours per				
Form 4 or								response	5 per 0.5	
Form 5 obligation may cont <i>See</i> Instru 1(b).	ns Section 17(	a) of the Publ	on 16(a) of the ic Utility Holo ne Investment	ling Com	pany	Act of	1935 or Section			
(Print or Type F	Responses)									
NICKOLOFF JEFFREY K Symb			. Issuer Name <b>and</b> Ticker or Trading mbol ASCADE CORP [cae]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (	Middle) 3. D	ate of Earliest Tr	ansaction			(Check	c all applicable	)	
(Month PO BOX 20187 06/15 (Street) 4. If A			<ul> <li>(Month/Day/Year)</li> <li>06/15/2007</li> <li>4. If Amendment, Date Original Filed(Month/Day/Year)</li> </ul>				Director 10% Owner X Officer (give title Other (specify below) below) Vice President			
							6. Individual or Joint/Group Filing(Check Applicable Line)			
PORTLANI	D, OR 97294		``````````````````````````````````````				_X_ Form filed by O Form filed by M Person			
(City)	(State)	(Zip)	Table I - Non-D	erivative S	Securi	ties Acqu	uired, Disposed of	, or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code	4. Securiti r(A) or Dis (Instr. 3, 4 Amount	posed	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	06/15/2007		S		D	\$ 80.18	0	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title o Derivativ Security (Instr. 3)	ve Conversion or Exercise	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Addre	ess	s Relationships							
	Director	10% Owner	Officer	Other					
NICKOLOFF JEFFREY K PO BOX 20187 PORTLAND, OR 97294			Vice President						
Signatures									
Jeffrey K. Nickoloff	06/18/2007								

<u>\*\*</u>Signature of Reporting Person

Date

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.