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Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

2009Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection**A For the 2009 calendar year, or tax year beginning , 2009, and ending ,**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C ROGUE VALLEY FOUNDATION 101 E 8TH STREET MEDFORD, OR 97501-7201	D Employer identification number 93-0903879
			E Telephone number (541) 779-4847 EXT
			F Group Exemption Number

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method: ☒ Cash ☐ Accrual
Other (specify) ▶

I Website: ▶ N/A

H Check ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

J Tax-exempt status (check only one) — ☒ 501(c) (3) (insert no.) ☐ 4947(a)(1) or ☐ 527

K Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ 104,776.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

REVENUE	1	Contributions, gifts, grants, and similar amounts received	1	104,550.
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	
	4	Investment income	4	226.
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>		
	6a	Gross revenue (not including \$ of contributions reported on line 1)	6a	
	6b	Less: direct expenses other than fundraising expenses	6b	
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c		
7a	Gross sales of inventory, less returns and allowances	7a		
7b	Less: cost of goods sold	7b		
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe ▶)	8		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	104,776.	
EXPENSES	10	Grants and similar amounts paid (attach schedule)	10	81,967.
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	1,125.
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe ▶ SEE STATEMENT 2)	16	46,528.
	17	Total expenses. Add lines 10 through 16	17	129,620.
NET ASSETS	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-24,844.
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	118,532.
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	93,688.

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

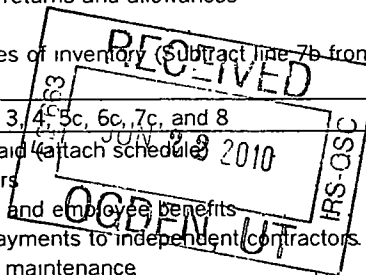
(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	118,532.	93,688.
23 Land and buildings		
24 Other assets (describe ▶)		
25 Total assets	118,532.	93,688.
26 Total liabilities (describe ▶)	0.	0.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	118,532.	93,688.

BAA For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

Form 990-EZ (2009)

SCANNED JUL 22 2010



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Expenses

(Required for section 501(c)(3) and (4) organizations and section 4947(a)(1) trusts, optional for others)

28 SEE STATEMENT 3

28a	39,300.
-----	---------

29a	23,927.
-----	---------

30 a	20,574.
------	---------

31 a	44,483.
------	---------

32	128,284.
----	----------

(e) Expense account and other allowances

C

0.

0.

0.

Part V Other Information (Note the statement requirements in the instrs for Part V.)

SEE STATEMENT 7

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity		X
34 Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes		X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N		X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions 37a 0.		
b Did the organization file Form 1120-POL for this year?		X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?		X
b If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b N/A		
39 Section 501(c)(7) organizations Enter		
a Initiation fees and capital contributions included on line 9 39a N/A		
b Gross receipts, included on line 9, for public use of club facilities 39b N/A		
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 0. ; section 4912 0. ; section 4955 0.		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I 40b X		
c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0.		
d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization 0.		
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T 40e X		
41 List the states with which a copy of this return is filed NONE		

42a The organization's books are in care of **JUDY CHARLEY** Telephone no. **(541) 779-4847**
 Located at **101 E 8TH STREET MEDFORD OR** ZIP + 4 **97501-7201**

b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?
 If 'Yes,' enter the name of the foreign country

	Yes	No
42b		X
42c		X

See the instructions for exceptions and filing requirements for **Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts.**

c At any time during the calendar year, did the organization maintain an office outside of the U S ?
 If 'Yes,' enter the name of the foreign country

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** — Check here and enter the amount of tax-exempt interest received or accrued during the tax year

43 ☐ N/A
☐ N/A

44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ

	Yes	No
44		X
45		X

45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

- | | Yes | No |
|---|-----|----|
| 46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I | 46 | X |
| 47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II | 47 | X |
| 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E | 48 | X |
| 49a Did the organization make any transfers to an exempt non-charitable related organization? | 49a | X |
| b If 'Yes,' was the related organization a section 527 organization? | 49b | |

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None'

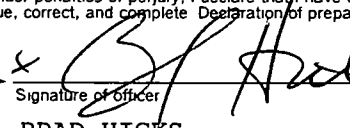
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
NONE				

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None'

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	 Signature of officer		Date 6/15/10	
	BRAD HICKS		SECRETARY/TREASURER	
	Type or print name and title			
Paid Preparer's Use Only	Preparer's signature	RICHARD W. BREWSTER, CPA	Date	6/14/10
	Firm's name (or yours if self-employed), address, and ZIP + 4	RICHARD W. BREWSTER, CPA, PC 670 SUPERIOR CT. #106 MEDFORD, OR 97504	Check if self-employed	<input type="checkbox"/> N/A
			EIN	N/A
			Phone no	(541) 773-1885

May the IRS discuss this return with the preparer shown above? See instructions

☒ Yes ☐ No

BAA

Form 990-EZ (2009)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.)						
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.						
3 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						
4 Total. Add lines 1-through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33-1/3 support test – 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. <input type="checkbox"/>		
b 33-1/3 support test – 2008. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. <input type="checkbox"/>		
17a 10%-facts-and-circumstances test – 2009 If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. <input type="checkbox"/>		
b 10%-facts-and-circumstances test – 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. <input type="checkbox"/>		

BAA

Schedule A (Form 990 or 990-EZ) 2009

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.)	54,694.	175,183.	141,664.	110,520.	104,550.	586,611.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose						0.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0.
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
6 Total. Add lines 1 through 5	54,694.	175,183.	141,664.	110,520.	104,550.	586,611.
7a Amounts included on lines 1, 2, 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year	0.	0.	0.	0.	0.	0.
c Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8 Public support. (Subtract line 7c from line 6.)						586,611.

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	54,694.	175,183.	141,664.	110,520.	104,550.	586,611.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	157.	209.	397.	354.	226.	1,343.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0.
c Add lines 10a and 10b	157.	209.	397.	354.	226.	1,343.
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						0.
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.
13 Total support. (add lines 9, 10c, 11, and 12.)						587,954.

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	99.8 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	99.8 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	0.2 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	0.2 %

19a 33-1/3 support tests – 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☒

b 33-1/3 support tests – 2008. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

Pàrt IV

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

2009**FEDERAL STATEMENTS****PAGE 1****CLIENT ROGU6860****ROGUE VALLEY FOUNDATION****93-0903879**

6/14/10

08 40AM

**STATEMENT 1
FORM 990-EZ, PART I, LINE 10
GRANTS AND SIMILAR AMOUNTS PAID**

CASH AMOUNT GIVEN: \$ 81,967.

**STATEMENT 2
FORM 990-EZ, PART I, LINE 16
OTHER EXPENSES**

BANK FEES.	\$ 74.
CLEAN CITIES INITIATIVE	20,574.
FRIENDS OF MT ASHLAND	1,745.
LEADERSHIP PROJECT	13,230.
LESS TO ADMIN	-908.
SOTIA - THE STAND PROJECT	11,416.
STATE FEES	137.
SUPPLIES	260.
TOTAL	\$ 46,528.

**STATEMENT 3
FORM 990-EZ, PART III, LINE 28
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS**

THE NBC5 ACADEMIC CHALLENGE SCHOLARSHIP IS AN ACADEMIC TV PROGRAM COMPETITION FOR HIGH SCHOOL TEAMS. THE TOP TWO TEAMS EARN COLLEGE OR CONTINUING EDUCATION SCHOLARSHIPS. COMPETITION IS OPEN TO SOUTHERN OREGON HIGH SCHOOL STUDENTS AND COVERS A POPULATION OF APPROXIMATELY 400,000.

**STATEMENT 4
FORM 990-EZ, PART III, LINE 29
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS**

THE LATINO NETWORK SCHOLARSHIP PROGRAM RAISED FUNDS TO AWARD COLLEGE AND CONTINUING EDUCATION SCHOLARSHIPS FOR ELIGIBLE LATINO STUDENTS IN JACKSON COUNTY. THE TOTAL POPULATION OF JACKSON COUNTY IS APPROXIMATELY 198,615.

**STATEMENT 5
FORM 990-EZ, PART III, LINE 30
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS**

THE ROGUE VALLEY CLEAN CITIES COALITION PROJECT IS TO HELP FUND ACTIVITIES RELATED TO VALIDATING, COLLECTING, AND REPORTING CRITICAL DATA AND PERFORMANCE METRICS THAT ARE NEEDED TO GAGE CONSUMER ACCEPTANCE AND TRACK THE GROWTH/ADOPTION OF PETROLEUM REDUCTION TECHNOLOGIES AND PRACTICES IN THE MARKET PLACE. THE FUNDING SUPPORTS LOCAL CLEAN CITIES EFFORTS THAT HELP THE COALITIONS MEASURE AND ASSESS LOCAL MARKET CONDITIONS AND EVALUATE THE POTENTIAL FOR PETROLEUM REDUCTION IN THEIR COMMUNITY.

CLIENT ROGU6860

ROGUE VALLEY FOUNDATION

93-0903879

6/14/10

08 40AM

STATEMENT 6
FORM 990-EZ, PART III, LINE 31
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION	GRANTS	PROGRAM SERVICE EXPENSES
THE FIRST CITIZEN SCHOLARSHIP PROGRAM AWARDED COLLEGE SCHOLARSHIPS BASED ON LEADERSHIP DEMONSTRATED BY HIGH SCHOOL JUNIOR APPLICANTS. ALL JACKSON COUNTY STUDENTS MAY APPLY. THE TOTAL POPULATION OF JACKSON COUNTY IS APPROXIMATELY 198,615.	19,000.	19,000.
INCLUDES FOREIGN GRANTS: NO		
THE LEADERSHIP CLASS RAISED AND DONATED FUNDS TO CREATE A TEEN FACILITY AT DUNN HOUSE. DUNN HOUSE HAD A SPACE FOR CHILDREN, BUT NONE FOR TEENS.		12,322.
INCLUDES FOREIGN GRANTS: NO		
THE SOTIA CHARTER FUND IS A PROGRAM TO ASSIST GOVERNMENT AGENCIES IN DEVELOPING TIMBER MANAGEMENT PLANS AND PROGRAMS AND TO PROVIDE INFORMATION ABOUT THE BENEFIT OF FEDERAL AND STATE TIMBER RECEIPTS FOR SCHOOLS, LIBRARIES AND OTHER COMMUNITY RESOURCES. THE FUND WILL PROVIDE AWARDS TO STUDENTS AND TEACHERS TO LEARN ABOUT FORESTS AND LAND MANAGEMENT PROGRAMS AND PROGRAMS TO PROMOTE SUSTAINABLE FOREST PRACTICES.		11,416.
INCLUDES FOREIGN GRANTS: NO		
THE FRIENDS OF MT. ASHLAND WERE RAISING FUNDS TO ASSIST MT ASHLAND IN ITS EXPANSION. THE REMAINING FUNDS WERE DISTRIBUTED IN 2009 TO THE MT. ASHLAND ASSOCIATION.		1,745.
INCLUDES FOREIGN GRANTS: NO		
THE COMMISSION ON CHILDREN AND FAMILIES IS TO PROMOTE THE WELL BEING OF ALL JACKSON COUNTY CHILDREN. THE 2009 AGENDA IS TO INCREASE HIGH SCHOOL GRADUATIONS RATE TO 90% BY 2011 THROUGH PUBLIC AWARENESS AND ENGAGEMENT TO SUPPORT EDUCATIONAL SUCCESS.		
INCLUDES FOREIGN GRANTS: NO		
TOTAL	\$ 19,000.	\$ 44,483.

STATEMENT 7
FORM 990-EZ, PART V
REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

(A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT?	NO
(B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?	NO

ROGUE VALLEY FOUNDATION
2009 Board of Directors

Dan O'Connor, President
Jay Harland, President Elect
Brad Hicks, Secretary/Treasurer

TERMS EXPIRING
12/31/09

Mike Mastroni
Beecher Carlson Insurance
Agency, LLC
707 Murphy Road
Medford, OR 97504
772-1111/FAX 772-3785
1/07

Chela Sanchez
New York Life Insurance
166 Alta Lane
Central Point, OR 97502
664-1180/FAX 664-4175
1/07

Tim Jackle
Foster, Denman, LLP
3521 Barnett Road
PO Box 1667
Medford, OR 97501
770-5466/FAX 770-6502
1/07

Brad Hicks
The Chamber of
Medford/Jackson County
101 E. 8th St.
Medford, OR 9751
779-4847/FAX 776-4808

TERMS EXPIRING
12/31/10

Dennis Ramsden
Ramsden Financial Services
100 E. Main Street
Medford, OR 97501
973-4187/FAX 245-4072
1/04

Dan O'Connor
Huycke, O'Connor, Jarvis &
Lohman, LLC
823 Alder Creek Drive
Medford, OR 97504
772-1977/FAX 772-3443
1/04

Jay Harland
CSA Planning Ltd.
4497 Brownridge STE 101
Medford, OR 97504
779-0569/FAX 779-0114
1/08

Chick Parsons
Pennsylvania Life
316 Medford Heights Lane
Medford, OR 97504
778-0147
1/08

TERMS EXPIRING
12/31/11

Steve Young
Peoples Bank of Commerce
750 Biddle Rd.
Medford, OR 97504
776-5350/FAX 618-3333
1/09

Justin Hurley
Asante Health System
2650 Siskiyou Blvd.
Medford, OR 97504
789-4100/FAX 789-5393
1/09

Joe Davis
Huycke, O'Connor, Jarvis &
Lohman, LLC
823 Alder Creek Dr.
Medford, OR 97504
772-1977/ FAX 772-3443
1/09

Jared Pulver
Pulver & Leever Real Estate
1060 Crater Lake Ave. STE C
Medford, OR 97504
773-5391/FAX 773-5399
1/09