Edgar Filing: Jackson Kathryn Jean - Form 4

Jackson Kath Form 4 April 26, 201											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISS						COMMISSION	ОМВ	PPROVAL 3235-0287			
Check this if no longe subject to Section 16 Form 4 or Form 5 obligation may contin <i>See</i> Instruct 1(b).	Filed purs s. Section 17(a	ENT OF CH suant to Sectio a) of the Public	SECUR n 16(a) of th	BENEFI ITIES e Securiti ling Com	CIA es Ex pany	xchang Act o	EXAMPLE OF ge Act of 1934, ff 1935 or Sectio 40	Number: Expires: Estimated a burden hou response	January 31, 2005 average Irs per		
(Print or Type R	esponses)										
Jackson Kathryn Jean Symbol PORTL			suer Name and ol TLAND GE CTRIC CO /	NERAL		g	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) 121 SW SAL	(First) (M	te of Earliest Tr th/Day/Year) 5/2018	ansaction			Director Dificer (give below)	Officer (give title Other (specify				
			Amendment, Da Month/Day/Year	-			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 				
PORTLAND	o, OR 97204						Form filed by M Person	More than One Ro	eporting		
(City)	(State) ((Zip)	Table I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code ear) (Instr. 8)	4. Securi onAcquired Disposed (Instr. 3, Amount	I (A) of I of (D 4 and (A) or)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common Stock	04/25/2018		А	2,451	А	\$0	11,044	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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Relationships **Reporting Owner Name / Address** Director 10% Owner Officer Other Jackson Kathryn Jean 121 SW SALMON ST. PORTLAND, OR 97204 Signatures Karen J. Lewis Power of Attorney on Behalf of Reporting 04/26/2018 Person **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.