

**Port Of Port Orford**

**Contact Information**

Please review your district's current key contact information listed below, and make any updates if necessary.

Key Contact	Changes to Key Contact Information
<b>Contact Name:</b> Pat Cox	Name: _____
<b>Title:</b> District Manager	Title: _____
<b>Mailing Address:</b> PO Box 490 Port Orford, OR 97465	Mailing Address: _____
<b>Work Phone:</b> 541-332-7121	Work Phone: _____
<b>Mobile Phone:</b>	Mobile Phone: _____
<b>Home Phone:</b>	Home Phone: _____
<b>Email:</b> p.cox@portofportorford.org	Email: _____

**Additional Information: Complete or make corrections to the following required information if needed.**

**Number of District Employees:** 6  
**Number of District Volunteers:** 5

**Attorney Name:** Robert S. Miller III, Attorney  
**Auditor Name:**

**Budget Information**

Your district's 2024-2025 budget information is required for calculating your SDIS property/casualty insurance contribution and/or SDAO membership dues. For help completing the budget information, refer to your district's LB-1 form. **If your district does not file an LB-1, please refer to your budget.** Upon completion, please return this form to SDAO with a copy of your LB-1 or budget.

**Line Item 9. FY 2024-2025 Budgeted Personnel Services:**  
*All salaries, fringe benefits, and other costs associated with salaries.*

\$ 25 226,900

**Line Item 10. FY 2024-2025 Budgeted Materials and Supplies:**  
*Services, materials, supplies, and other miscellaneous charges. This does not include any pass-through funds such as wholesale power and water purchasing costs, if applicable, or funds for capital constructions or improvements.*

\$ 359,100

**Line Item 14. FY 2024-2025 Budgeted Contingencies:**  
*Amount set aside for unforeseen events in the budgeted year.*

\$ 10,000

**Total of line items 9, 10, and 14 above.** \$ 596,000

**Please return your completed form to SDAO Member Services**

**Mail:**  
PO Box 12613  
Salem, OR 97309-0613

**Fax:**  
503-371-4781

**Email:**  
memberservices@sdao.com

## Port Of Port Orford

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Your district's current SDAO roster is listed below. Please review each contact and update their information as needed. You may update directly on this form.

SDAO periodically sends communications to all individuals listed with your district. **Please provide an email address for each contact.** If you need to remove an individual, please check the 'Remove From Roster' box.

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**Name:** Aaron Ashdown

**Title:** Board Member

**Address:**

PO Box 831  
Port Orford, OR 97465  
UNITED STATES

**Work:**

**Home:** 541-655-0201

**Fax:**

**Email:** a.ashdown@portofportorford.org

**Remove From Roster**

**Communication Preference:** MailEmail

PC Claims Contact: No

HR Contact: No

Facilities Contact: No

WC Claims Contact: No

Risk Management Contact: No

IT Contact: No

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**Name:** Pat Cox

**Title:** District Manager

**Address:**

PO Box 490  
Port Orford, OR 97465  
UNITED STATES

**Work:** 541-332-7121

**Home:**

**Fax:** 541-332-7121

**Email:** p.cox@portofportorford.org

**Remove From Roster**

**Communication Preference:** EMail

PC Claims Contact: No

HR Contact: No

Facilities Contact: No

WC Claims Contact: No

Risk Management Contact: No

IT Contact: No

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**Name:** Rick Fox

**Title:** Board Member Position 3

**Address:**

PO Box 640  
Port Orford, OR 97465  
UNITED STATES

**Work:** 925-330-6536

**Home:**

**Fax:** 541-332-7121

**Email:** fishing4lifess@yahoo.com

**Remove From Roster**

**Communication Preference:** EMail

PC Claims Contact: No

HR Contact: No

Facilities Contact: No

WC Claims Contact: No

Risk Management Contact: No

IT Contact: No

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**Name:** David Rickel

**Title:** Board Member Position 1

**Address:**

PO Box 1452  
Port Orford, OR 97465  
UNITED STATES

**Work:** 541-290-4890

**Home:**

**Fax:** 541-332-7121

**Email:** daverickel@yahoo.com

**Remove From Roster**

**Communication Preference:** EMail

PC Claims Contact: No  
HR Contact: No  
Facilities Contact: No

WC Claims Contact: No  
Risk Management Contact: No  
IT Contact: No

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**Name:** Leila Thompson

**Work:** 541-332-7121

**Title:** Commissioner

**Home:**

**Address:**  
300 Dock Rd  
Port Orford, OR 97465  
UNITED STATES

**Fax:** 541-332-7121

**Email:** leilathompson@portofportorford.org



**Remove From Roster**

**Communication Preference:** EMail

PC Claims Contact: No  
HR Contact: No  
Facilities Contact: No

WC Claims Contact: No  
Risk Management Contact: No  
IT Contact: No

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**Name:** Brett Webb

**Work:** 541-366-1888

**Title:** Board Member

**Home:**

**Address:**  
PO Box 789  
Port Orford, OR 97465  
UNITED STATES

**Fax:**

**Email:** b.webb@portofportorford.org

**Remove From Roster**

**Communication Preference:** EMail

PC Claims Contact: No  
HR Contact: No  
Facilities Contact: No

WC Claims Contact: No  
Risk Management Contact: No  
IT Contact: No

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# Legal and Public Notice

**FORM  
LB-1**

## NOTICE OF BUDGET HEARING

A public meeting of the Port of Port Orford will be held on June 24th, 2024 at 6:00  a.m. at 6:00  p.m.  
(Governing body) (Date)

City of Port Orford Council Chambers at 555 W. 20th, Oregon. The purpose of this meeting is to discuss the budget for the  
(Location)

fiscal year beginning July 1, 2024 as approved by the Port of Port Orford Budget Committee. A summary of  
(Municipal corporation)

the budget is presented below. A copy of the budget may be inspected or obtained at 300 Dock Rd Port Orford, OR  
(Street address)

97465 between the hours of 8 a.m. and 4 p.m., or online at p.cox@portofportorford.org This

budget is for an  annual;  biennial budget period. This budget was prepared on a basis of accounting that is:  the same as;  different than the preceding year. If different, the major changes and their effect on the budget are:

Contact <b>Pat Cox</b>	Telephone number <b>541-332-7121</b>	E-mail <b>p.cox@portofportorford.org</b>
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### FINANCIAL SUMMARY -- RESOURCES

TOTAL OF ALL FUNDS	Actual Amounts 20 22 -20 23	Adopted Budget This Year: 20 23 -20 24	Approved Budget Next Year: 20 24 -20 25
1. Beginning Fund Balance/Net Working Capital	65,644	82,000	47,000
2. Fees, Licenses, Permits, Fines, Assessments & Other Service Charges	455,712	544,000	532,500
3. Federal, State & all Other Grants, Gifts, Allocations & Donations			
4. Revenue from Bonds & Other Debt			
5. Interfund Transfers/Internal Service Reimbursements			
6. All Other Resources Except Current Year Property Taxes	9,923		5,500
7. Current Year Property Taxes Estimated to be Received	119,905	116,000	120,000
<b>8. Total Resources -- add lines 1 through 7</b>	<b>651,584</b>	<b>741,000</b>	<b>705,000</b>

### FINANCIAL SUMMARY -- REQUIREMENTS BY OBJECT CLASSIFICATION

9. Personnel Services	197,871	292,000	226,900
10. Materials and Services	355,876	373,800	389,100
11. Capital Outlay			
12. Debt Service	44,720	38,200	42,000
13. Interfund Transfers	7,521		
14. Contingencies			
15. Special Payments			
16. Unappropriated Ending Balance and Reserved for Future Expenditure	47,966	37,000	47,000
<b>17. Total Requirements -- add lines 9 through 16</b>	<b>653,954</b>	<b>741,000</b>	<b>705,000</b>

### FINANCIAL SUMMARY -- REQUIREMENTS AND FULL-TIME EQUIVALENT EMPLOYEES (FTE) BY ORGANIZATIONAL UNIT OR PROGRAM\*

Name of Organizational Unit or Program FTE for Unit or Program			
Name <b>Port Operations</b>	<b>240.368</b>	<b>292,000</b>	<b>253,800</b>
FTE	5.5	5.0	5.0

### PROPERTY TAX LEVIES

Permanent Rate Levy (Rate Limit .3591 Per \$1000)	Rate or Amount Imposed	Rate or Amount Imposed	Rate or Amount Approved
Local Option Levy	.3591 per 1000		.3591 per 1000
Levy for General Obligation Bonds			

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