Wells Thomas Form 4 December 09, 2010

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number:

Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

CASCADE BANCORP [CACB]

3. Date of Earliest Transaction

may continue. See Instruction

1(b).

Symbol

5. Relationship of Reporting Person(s) to

Issuer

_X__ Director

(Print or Type Responses)

(Last)

(City)

1. Name and Address of Reporting Person * Wells Thomas

(Middle)

(First)

1100 NW WALL ST

(State)

(Zip)

(Month/Day/Year) 12/08/2010

(Street) 4. If Amendment, Date Original

Filed(Month/Day/Year)

OMB APPROVAL

10% Owner

Estimated average

burden hours per

Expires:

response...

3235-0287

January 31,

2005

0.5

(Check all applicable)

Other (specify Officer (give title below)

6. Individual or Joint/Group Filing(Check

Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting

Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

BEND, OR US 97701

	Table 1 - Non-Derivative Securities Acquired, Disposed of, or Deficitionary Owned							
		3.	4. Securities			5. Amount of	6. Ownership	7. Nature of
(Month/Day/Year)	· · · · · · · · · · · · · · · · · · ·		* '					Indirect
	•		* '			•	` '	Beneficial
	(Month/Day/Tear)	(Illstr. 8)	(Instr. 3, 4 and 5)			` '	Ownership	
						υ	(Instr. 4)	(Instr. 4)
				(A)		*		
				or		` '		
		Code V	Amount	(D)	Price	(IIIsu. 5 aliu 4)		
12/08/2010		P	2,149	A	\$	10,408	D	
					6.5			
12/09/2010		P	1.000	A	\$	11.408	D	
			,		6.6	,		
12/09/2010		P	940	A	\$ 6.5	12,348	D	
	(Month/Day/Year) 12/08/2010 12/09/2010	2. Transaction Date (Month/Day/Year) 2A. Deemed Execution Date, if any (Month/Day/Year) 12/08/2010 12/09/2010	2. Transaction Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) Code (Instr. 8) Code V 12/08/2010 P	2. Transaction Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) (Instr. 3, 4 and 5) Owned Following Reported Transaction(s) (Instr. 3 and 4) P 2,149 A \$ 10,408	2. Transaction Date (Month/Day/Year) 2A. Deemed 3. 4. Securities (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) (Instr. 3, 4 and 5) (Instr. 3 and 4) (Instr. 3 and			

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

Persons who respond to the collection of SEC 1474 information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

(9-02)

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

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
									Amount		
						Date	Expiration	T:41-	or Name		
						Exercisable	sable Date		Number		
				G 1 W	(A) (B)				of		
				Code V	(A) (D)				Shares		

Reporting Owners

	Relationships
Reporting Owner Name / Address	

Director 10% Owner Officer Other

Wells Thomas

1100 NW WALL ST X

BEND, OR US 97701

Signatures

Gregory D Newton, by POA for Thomas 12/09/2010 Wells

> **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.

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