Edgar Filing: SIEGELE STEPHEN H - Form 4

SIEGELE ST	FEPHEN H										
Form 4											
October 04, 2											
FORM			GECUD		ND EV		NCEO	OMMISSION		PROVAL	
	CITTE	SIAIES		shington,			NGE C	UNIMISSION	OMB Number:	3235-0287	
Check thi	or								Expires:	January 31,	
subject to	if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP (NERSHIP OF	Estimated average				
Section 1	6.			SECUR	ITIES				burden hour		
Form 4 or Form 5			7	$(\cdot, \cdot) = f(\cdot, \cdot)$	G	P		- A - + - £ 1024	response	0.5	
obligation	1 0						•	e Act of 1934, 1935 or Section	n		
may conti	inue.			vestment	•	· ·			1		
See Instru 1(b).	iction	50(II)	or the m	vestment	compan	y 110	101174	0			
(Print or Type R	Responses)										
1 NT 1 A		D *						5 0 1 (* 1 * 6			
SIEGELE S	ddress of Reporting	g Person _		Name and	Ticker or	Tradii	ng	5. Relationship of Issuer	Reporting Pers	OI(S) to	
SILCELE 5			Symbol EPEED	ORT MC			DDED				
				D INC [F				(Checl	k all applicable)	
(Last)	(First)	(Middle)		Earliest Tra	_			Director	10%	Owner	
(Lust)	(1130)	(ivitable)	(Month/D		alisaction			Officer (give	title Othe	er (specify	
333 NORTH	I CENTRAL A	VENUE	10/01/2	-				below)	below)		
	(Street)		4. If Ame	ndment, Dat	te Original	l		6. Individual or Jo	int/Group Filin	g(Check	
				th/Day/Year)	-			Applicable Line)			
								X Form filed by C	One Reporting Per Iore than One Re		
PHOENIX,	AZ 85004							Person		porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Da	te 2A. Deer	ned	3.	4. Securit	ties A	cquired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year		n Date, if	Transactio				Securities	Form: Direct		
(Instr. 3)		any (Month/I	Day/Year)	Code (Instr. 8)	(Instr. 3,	4 and	5)	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership	
		(the second sec		(Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
						or	р.	(Instr. 3 and 4)			
Common				Code V		(D)	Price \$				
Stock (1)	10/01/2011			A <u>(2)</u>	841	А	φ 30.45	236,593	D		
							20110				

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

10% Owner Officer Other

Reporting Owners

Reporting Owner Name / Address Relationships

Director

SIEGELE STEPHEN H 333 NORTH CENTRAL AVENUE PHOENIX, AZ 85004

Signatures

Kelly C. Simoneaux on behalf of Stephen H. Siegele pursuant to a power of attorney 10/04/2011

**Signature of Reporting Person

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).
- (1) Amount beneficially owned following the reported transaction includes 8,000 Common Stock Restricted Stock Units.
- (2) Represents shares acquired pursuant to the Reporting Person's previous election to receive shares of common stock in lieu of cash for some or all of his annual retainer fee.

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.

2

Date