Edgar Filing: TRAVIS JUNE E - Form 4

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Form 4												
January 19, 2 FORM Check thi if no long subject to	s box	 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 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 20(b) of the Investment Company. Act of 1940 								OMB APPROVAL OMB 3235-0287 Number: January 31 Expires: January 31 Estimated average burden hours per response 0.5		
Section 10 Form 4 or Form 5 obligatior may conti <i>See</i> Instru 1(b).	r Filed pur ¹⁵ Section 17(
(Print or Type R	Responses)											
TRAVIS JUNE E Symbo			Symbol	er Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
(M			(Month/D	3. Date of Earliest Transaction Month/Day/Year) 01/14/2011				(Check all applicable) <u>X</u> Director <u>10%</u> Owner Officer (give title <u>Director</u>) below)				
				endment, Date Original nth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 				
(City)	(State)	(Zip)	Tabl	L Non D	orivotivo S	oourit	ios A ca	Person	or Bonoficial	ly Ownod		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	e 2A. Deem	ned 1 Date, if	3. Transactio Code (Instr. 8)	4. Securiti	es Aco posed	quired of (D)	uired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of		
Common Stock	01/14/2011			Code V D	Amount 19,671	(D) D	Price \$ 31.5	(Instr. 3 and 4) 0	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. 5. Number of TransactiorDerivative Code Securities (Instr. 8) 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)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Options	\$ 14.39	01/14/2011		D	20,000	(1)	02/22/2015	Common Stock	20,000
Stock Options	\$ 7.43	01/14/2011		D	5,000	<u>(1)</u>	03/05/2013	Common Stock	5,000
Stock Options	\$ 16.2	01/14/2011		D	20,000	<u>(1)</u>	02/21/2012	Common Stock	20,000

Reporting Owners

Reporting Owner Name / Address		Relationships					
		Director	10% Owner	Officer	Other		
TRAVIS JUNE E 1100 COMMSCOPE PLAC HICKORY, NC 28602	CE, SE	Х					
Signatures							
/s/June E. Travis	01/19/2	2011					
**Signature of	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).

This option, which provided for vesting in three equal annual installments beginning on the first anniversary of the date of grant, was cancelled and disposed of pursuant to the Agreement and Plan of Merger (the "Merger Agreement") among the Issuer, Cedar I Holding

(1) Company, Inc. and Cedar I Merger Sub, Inc., dated as of October 26, 2010, in exchange for \$31.50 in cash for each share of the Issuer's common stock subject to such stock option, less the exercise price of such stock option.

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.

Reporting Person

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