## Edgar Filing: STAFFORD HARRISON II - Form 4

STAFFORD HARRISON II Form 4 September 27, 2017 FORM 4 Manuel States Securities AND EXCHANGE COMMISSION Munter States Securities AND EXCHANGE COMMISSION Washington, D.C. 20549 Check this box if no longer subject to Section 16, Form 4 or Form 5 obligations may continue. See Instruction 1(b). State pursuant to Section 16(a) of the Securities Exchange Act of 1934, Stinated pursuant to Section 16(a) of the Securities Exchange Act of 1934, Stinated pursuant to Section 16(a) of the Securities Exchange Act of 1934, Stinated pursuant to Section 16(a) of the Securities Exchange Act of 1934, Stinated pursuant to Section 16(a) of the Securities Exchange Act of 1934, Stinated pursuant to Section 16(a) of the Securities Exchange Act of 1934, Stinated pursuant to Section 16(a) of the Securities Exchange Act of 1934, Stinated pursuant to Section 16(a) of the Securities Exchange Act of 1934, Stinated pursuant to Section 16(a) of the Securities Exchange Act of 1934, Stinated pursuant to Section 16(a) of the Investment Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940)											
(Print or Type	Responses)										
STAFFORD HARRISON II S				er Name <b>and</b> PERITY B				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
()			<ul><li>3. Date of Earliest Transaction</li><li>(Month/Day/Year)</li><li>09/24/2010</li></ul>					X_ Director 10% Owner Officer (give title Other (specify below) below)			
				. If Amendment, Date Original ïled(Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li>Form filed by More than One Reporting</li> </ul>			
EL CAMPO, TX 77437 Form filed by More than One Reporting Person											
(City)	(State)	(Zip)	Tab	le I - Non-D	erivative	Secu	rities Acc	quired, Disposed	of, or Benefic	ially Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D	Date, if	Transaction	(Instr. 3, 4	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	09/24/2010			S	2,000	A	\$ 31.95	111,106	D		
Common Stock								180,400	Ι	By General Partnership	
Common Stock								3,200	Ι	By Spouse	

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

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#### number.

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

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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

# **Reporting Owners**

Reporting Owner Name / Address		Relationships							
		Director	10% Owner	Officer	Other				
STAFFORD HARRISON 1300 N. MECHANIC EL CAMPO, TX 77437	N II	Х							
Signatures									
/s/ Harrison Stafford II	09	/27/2010							
<u>**</u> 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.