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SGNILEK L Form 4	ES										
February 14,	2007										
FORM			CECUD		ND EV(NCE	COMMISSION		PPROVAL	
		hington,			NGE (COMMISSION	OMB Number:	3235-0287			
Check the if no long	Ter	ENT O	Г <u>с</u> на м	CESINI	PENEEI	CIA		NEDSHIDOE	Expires:	January 31 2005	
subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Es Section 16.								Estimated a burden hou response	average Irs per		
(Print or Type F	Responses)										
1. Name and A SGNILEK I	Symbol	Name and INC [PC		Tradin	ıg	5. Relationship of Reporting Person(s) to Issuer					
(Last)	(First) (M	iddle)	3. Date of Earliest Transaction (Cl						eck all applicable)		
8725 W. HI 400		(Month/Day/Year) 02/12/2007					Director 10% Owner X Officer (give title Other (specify below) below) VP of Finance				
Filed(Mon				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 			
CHICAGO,	IL 60631							Person		8	
(City)	(State) (2	Zip)	Table	e I - Non-D	erivative	Securi	ties Acq	uired, Disposed of	, or Beneficial	lly Owned	
1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deemed(Instr. 3)Execution Date, if any (Month/Day/Year)			on Date, if	3. 4. Securities Acquired Transaction(A) or Disposed of Code (D) (Instr. 8) (Instr. 3, 4 and 5) (A)				Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common	02/12/2007			F <u>(1)</u>	2,963	D	\$ 9.47	64,873	D		
Common	02/12/2007			S <u>(2)</u>	137	D	\$ 9.27	64,736	D		
Common	02/12/2007			S <u>(2)</u>	1,100	D	\$ 9.28	63,636	D		
Common	02/12/2007			S <u>(2)</u>	400	D	\$ 9.3	63,236	D		
Common	02/12/2007			S <u>(2)</u>	1,100	D	\$ 9.31	62,136	D		
Common	02/12/2007			S (2)	900	D		61 236	D		

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					\$ 9.32		
Common	02/12/2007	S <u>(2)</u>	300		9.55	60,936	D
Common	02/12/2007	S <u>(2)</u>	900	D	\$ 9.34	60,036	D
Common	02/12/2007	S <u>(2)</u>	300	D	\$ 9.35	59,736	D
Common	02/12/2007	S <u>(2)</u>	100	D	\$ 9.36	59,636	D
Common	02/12/2007	S <u>(2)</u>	200	D	\$ 9.38	59,436	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)

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exer		7. Titl		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
. ,	Derivative			. ,	Securities			(Instr.	3 and 4)		Owne
	Security				Acquired				,		Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(insu
					× /						
					4, and 5)						
									Amount		
									or		
						Date	Expiration	Title	Number		
						Exercisable	Date	inte	of		
					(A) (D)						
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address				
	Director	10% Owner	Officer	Other
SGNILEK LES				
8725 W. HIGGINS ROAD			VP of Finance	
SUITE 400			vr of Finance	
CHICAGO, IL 60631				

Signatures

Les Sgnilek

02/14/2007

<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).
- (1) Witholding of stock to satisfy statutory tax withholding obligations
- (2) Sales of Shares pursuant to 10b5-1 Plan

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.