## Edgar Filing: Boyce Michael Ross - Form 4

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Form 4										
January 18, 2 FORN	Л	STATES		RITIES A shington,			NGE C	OMMISSION	OMB AF OMB Number:	PROVAL 3235-0287
Check th if no long subject to Section 1 Form 4 o Form 5 obligatio may cont <i>See</i> Instru 1(b).	6. Filed put finue.	rsuant to So (a) of the P	CHAN ection 1 ublic U	GES IN SECUR	BENEF ITIES e Securit ling Cor	ICIA ties E	Exchange y Act of	ERSHIP OF Act of 1934, 1935 or Section 0	Expires: Estimated a burden hour response	
(Print or Type I	Responses)									
1. Name and A Boyce Mich	address of Reporting nael Ross		Symbol	r Name <b>and</b> ORP [AIF		Tradi		5. Relationship of I Issuer	Reporting Pers	
(Last) 1100 N. WC	(First) (		3. Date of (Month/D 01/13/2	-	ansaction			X Director Officer (give t below)	10%	) Owner r (specify
	(Street)			ndment, Da nth/Day/Year	-	1		6. Individual or Joi Applicable Line) _X_ Form filed by O Form filed by M	ne Reporting Per	rson
	LE, IL 60191-							Person	ore than One Rej	porting
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	rities Acqu	iired, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8) Code V	(Instr. 3,	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	01/13/2006			P	2,000	A	\$ 25.228	2,000	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 Derivati Security (Instr. 3	ve Conversion or Exercise	· · · ·	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Instr. 8	of Der Sec Acc (A) Dis of ( (Ins	ivativ urities juired or posed	5	Date	Amor Unde Secur	le and unt of rlying tities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code	V (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address				
	Director	10% Owner	Officer	Other
Boyce Michael Ross 1100 N. WOOD DALE ROAD WOOD DALE, IL 60191-	Х			
Signatures				
Jo-Ellen Kiddie 01/1	8/2006			
**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.