Edgar Filing: TRUNZO ANTHONY L - Form 4

TRUNZO A	NTHONY L										
Form 4											
March 06, 20	008										
FORM	14								OMB AF	PROVAL	
	UNITE) STATES		AITIES A Shington,			NGE C	COMMISSION	OMB Number:	3235-0287	
Check the									Expires:	January 31,	
subject to STATEMENT OF CHA				NGES IN BENEFICIAL OW				NERSHIP OF	Estimated a	2005	
Section 1				SECUR	ITIES				burden hou		
Form 4 o									response	0.5	
Form 5 obligation							•	e Act of 1934,			
may cont				•	•	· ·		1935 or Section	1		
See Instru	uction	30(h)) of the In	vestment	Compan	y Ac	t of 194	-0			
1(b).											
(Print or Type I	Responses)										
(F)										
1. Name and Address of Reporting Person [*] _ 2. Issuer Name and Ticker or Trading 5. Relationship of							Reporting Person(s) to				
TRUNZO ANTHONY L Symbol				-				Issuer			
			•	YSTEMS	INC [FI	LIR]				、 、	
(Last)	(First)	(Middle)	3 Date of	² Earliest Tr	ansaction	-		(Check	k all applicable)	
()	()	()	(Month/E		unsuerion			Director	10%	Owner	
27700A SW	PARKWAY A	VENUE	03/06/2	-				\underline{X} Officer (give		er (specify	
								below) Sr VP Corp	below) Strategy & Dv	Inmnt	
	(Etmost)		4 10 4	1 (D				-		-	
				. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check			
			Filed(Mol	iui/Day/1ear)			Applicable Line) _X_ Form filed by C	One Reporting Pe	rson	
WILSONVI	ILLE, OR 9707	0						Form filed by M	lore than One Re		
								Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Da	ate 2A. Dee	med	3.	4. Securi	ties Ac	quired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Yea		on Date, if	Transactio				Securities	Form: Direct		
(Instr. 3)		any (Month/	Day/Year)	Code (Instr. 8)	(Instr. 3,	4 and	5)	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership	
		(Infolial)	Day/Tear)	(11301.0)				Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
				Code V	Amount	(D)	Price	(11180. 5 and 4)			
Common Stock	03/06/2008			М	5,000	А	\$ 12.57	53,879	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 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. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amour Underlying Securit (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amo Num Share
Non-Qualified Stock Option (right to buy)	\$ 9.79					12/01/2004	02/23/2009	Common Stock	14,
Non-Qualified Stock Option (right to buy)	\$ 18.06					02/04/2005	02/04/2015	Common Stock	120
Incentive Stock Option (right to buy)	\$ 12.57	03/06/2008		М	5,000	02/13/2007	02/13/2016	Common Stock	5,0
Non-Qualified Stock Option (right to buy)	\$ 25.14					02/15/2007	02/13/2016	Common Stock	63,
Non-Qualified Stock Option (right to buy)	\$ 20.75					02/15/2008	05/01/2017	Common Stock	47,

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
TRUNZO ANTHONY L 27700A SW PARKWAY AVENUE WILSONVILLE, OR 97070			Sr VP Corp Strategy & Dvlpmnt				
Signatures							
David A. Muessle, Attorney-in-fact fo Trunzo	r Anthon	y L.	03/06/2008				

<u>**</u>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).

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.

Date