Edgar Filing: SULLIVAN DANIEL L - Form 4

SULLIVAN DANIEL L										
Form 4										
July 02, 2009										
FORM 4	о стате	SECU	DITIES		CILAN		COMMISSIO	- NT	PPROVAL	
	DSIALES		shington			GE		N OMB Number:	3235-0287	
Check this box if no longer								Expires:	January 31,	
subject to Section 16.	NGES IN SECUI	BENEF	ICIAL	Estimated						
Form 4 or								response	•	
Form 5 obligations may continue.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 30(h) of the Investment Company Act of 19401(b).30(h) of the Investment Company Act of 1940										
(Print or Type Responses)										
1. Name and Address of Reporti SULLIVAN DANIEL L	Symbol	er Name an COMM I		U	, 	5. Relationship of Reporting Person(s) to Issuer				
						L]	(Check all applicable)			
			of Earliest T Day/Year) 2009	ransaction			Director 10% Owner X Officer (give title Other (specify below) Executive Vice President			
			If Amendment, Date Original ed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
SAN DIEGO, CA 92121-1	714							More than One R		
(City) (State)	(Zip)	Tał	ole I - Non-	Derivative	Securitie	ies Ac	quired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)2. Transaction Da (Month/Day/Year)		Date, if	3. Transactic Code (Instr. 8) Code V	4. Securit onAcquired Disposed (Instr. 3, Amount	(A) or of (D) 4 and 5) (A) or		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)	

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	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8. Price
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	onof	Expiration Date	Underlying Securities	Derivativ
Security	or Exercise		any	Code	Derivative	(Month/Day/Year)	(Instr. 3 and 4)	Security

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Securi Acqui (A) or Dispo of (D) (Instr. and 5)	red sed 3, 4,					(Instr. 5)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Unit <u>(1)</u>	\$ 1	06/30/2009		A		136		(2)	<u>(3)</u>	Common Stock	136	\$ 45.43

Reporting Owners

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
SULLIVAN DANIEL L			Executive						
5775 MOREHOUSE DR.			Vice						
SAN DIEGO, CA 92121-1714		President							
Signatures									
By: Noreen E. Burns, Attorney-in Sulllivan	07/02/2009								
<u>**</u> Signature of Reportin	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) The common stock issued under the terms of the Company's Executive Retirement Matching Contribution Plan, a tax conditioned plan, is exempt under Rule 16b-3. The shares are held in a grantor trust and stock is the only permissable form of distribution under the Plan.

The rights awarded under the Company's Executive Retirement Matching Contribution Plan will be eligible for distribution upon
(2) termination and vest according to the following schedule: 100% at age 65 with acceleration provisions (1) at the rate of 25% per year for each subsequent year of participation, (2) after the individual reaches age 61, or (3) if they have more than 10 years of service.

(3) The rights awarded under the Company's Executive Retirement Matching Contribution Plan will be eligible for distribution upon termination.

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.