Edgar Filing: GOLDMAN VARDA A - Form 4

GOLDMAN	I VARDA A										
Form 4											
July 30, 200	8										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL			
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB	3235-0287		
Check th	nis box		wa	snington	, D.C. 20	549			Number:	January 31,	
if no lon		AENT OF	CHAN	ICES IN	RENEE	СТА	I OWN	FRSHIP OF	Expires: 2005		
subject t Section	0			IGES IN BENEFICIAL OWN SECURITIES					Estimated average		
Form 4 c				bleer					burden hours per response 0.5		
Form 5	Filed put	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,						10000100	0.0		
obligatio	ons Section 17(U	1935 or Section	l		
may con <i>See</i> Instr		30(h)	of the Ir	vestment	Compan	y Ac	t of 1940)			
1(b).											
(Print or Type	Responses)										
1 Name and /	Address of Reporting	Person *	2.1	N	I.T.' 1	T 1'	4	5 Relationship of I	Reporting Pers	on(s) to	
				1				5. Relationship of Reporting Person(s) to Issuer			
			Symbol PC TFI	L INC [PC	וודי						
(I t)	(F :			_	-			(Check	all applicable)	
(Last)	(First) (Middle)		f Earliest Tr	ransaction			Director	10%	Owner	
			07/29/2	nth/Day/Year)				Diffect (give title Other (specify			
PLACE, #2			0112)12	.000			ł	pelow)	below) General Couns	al	
,											
								6. Individual or Joint/Group Filing(Check			
			Filed(Mo	nth/Day/Yea	r)			Applicable Line) _X_ Form filed by One Reporting Person			
CHICAGO	IL 60611						-	Form filed by Mo			
							ł	Person			
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secur	ities Acqui	ired, Disposed of,	or Beneficial	ly Owned	
1.Title of	2. Transaction Date	2A. Deem	ed	3.	4. Securit	ies Ac	quired (A)	5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year)	Date, if Transactionor Disposed of (D) Code (Instr. 3, 4 and 5)					Securities	Ownership Form:	Indirect		
(Instr. 3)		any (Month/Da			(Instr. 3, 4	and 3))	Beneficially Owned	Beneficial Ownership		
		(monul/D	uy, reur)	(Instr. 8)				Following	Direct (D) or Indirect	(Instr. 4)	
						(A)		Reported	(I)		
						or		Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
G				Code V	Amount	(D)	Price		D		
Common	07/29/2008			Μ	12,000	А	\$ 7.04	68,694	D		
Common	07/29/2008			S	12,000	D	\$ 10.908	56,694	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)

Edgar Filing: GOLDMAN VARDA A - Form 4

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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amoun or Numbe of Shar
12/13/2002 Stock Options	\$ 7.04	07/29/2008		М	12,000	12/01/2003	12/01/2012	Common Stock	12,00

Reporting Owners

Reporting Owner Name / Address				Relationships		
1 0	Director	10% Owner	Officer	Other		
GOLDMAN VARDA A 200 EAST DELAWARE PI #20F CHICAGO, IL 60611	LACE			VP and General Counsel		
Signatures						
Juliann M. Qualiato	07/30/	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).

Date

** 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.