Edgar Filing: COLLAWN PATRICIA K - Form 4

COLLAWN	PATRICIA K											
Form 4												
November 09	9, 2018											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL				
	UNITED	STATES		RITIES A shington,			NGE C	COMMISSION	OMB Number:	3235-0287		
Check this box if no longer									Expires:	January 31, 2005		
subject to		MENT OF	F CHAN		GES IN BENEFICIAL OWNER				Estimated average			
Section 1				SECUR	ITIES			burden hours per				
Form 4 or Form 5					a .			A (01024	response	0.5		
obligation	na *						U	e Act of 1934,				
may cont	inue. Section 17			vestment	•	· ·		1935 or Sectior	1			
See Instru 1(b).	uction	50(II)	or the m	vestment	Compan	y At	101 194	0				
1(0).												
(Print or Type F	Responses)											
1. Name and Address of Reporting Person * COLLAWN PATRICIA K2. Issuer Symbol				r Name and Ticker or Trading DRP [CTS]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
												CTS CC
(Last)	(First)	(Middle)	3. Date of									f Earliest Tr
4925 INDIANA AVENUE(Month/D11/08/20							_X_ Director 10% Owner					
			11/08/2	018				Officer (give title Other (specify below) below)				
Filed(Mor			ndment, Date Original				6. Individual or Joint/Group Filing(Check					
			nth/Day/Year)			Applicable Line)					
							X Form filed by One Reporting Person Form filed by More than One Reporting					
LISLE, IL 6	0552							Person				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	or Beneficial	ly Owned		
1.Title of	2. Transaction Dat		1					5. Amount of 6. Ownership 7. Nat				
Security	(Month/Day/Year) Execution Date,							Securities	Form: Direct	Indirect Beneficial		
(Instr. 3)		any (Month/E	Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)				3)	Beneficially Owned		Ownership		
		×	, ,					Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported Transaction(s)				
						or		(Instr. 3 and 4)				
Common				Code V	Amount	(D)	Price ¢					
Common Stock	11/08/2018			А	4,200	А	۵ 28.85	73,820	D			
STOCK							20.05					

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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	of (Mo			te Amount Year) Underly Securitie		ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
COLLAWN PATRICIA K 4925 INDIANA AVENUE LISLE, IL 60532	Х							
Signatures								
/s/ Luis F. Machado, as Attorney-in-Fact		11/09/2	2018					
**Signature of Reporting Person		Dat	e					
Evaluation of Poenoncoe								

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.