Edgar Filing: TYREE WALTER - Form 4

TYREE WALTER Form 4 January 10, 2003

FORM 4

_ Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287 Expires: January 31, 2005 Estimated average burden hours per response. . .0.5

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 1940

Filed By Romeo & Dye's Instant Form 4 Filer www.section16.net

 Name and Address of Reporting Person* Tyree Walter 						and Ticker ment, Inc.	Per	6. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
(Last) (First) (Middle)				of Reporting Person,					4. Statement for Month/Day/Year 01/08/03		X Director 10% Owner Officer (give title below) Other (specify below)			
(Street) Houston, TX 77090									5. If Amendment, Date of Original (Month/Day/Year)		7. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City) (St	tate) (Zip)		Table I Non-Derivative						Securities Acquired, Disposed of, or Beneficially Owne					
1. Title of Security (Instr. 3)	itle of Security 2. Trans- 2A. Dee		1	3. Trar action Code (Instr. Code			posed	of (D)	5. Amount of Securities Beneficially Owned Follow- ing Reported Transactions(s) (Instr. 3 & 4)		6. Owner- ship Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock, Par Value \$.10										3,750	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

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

FORM 4 (continued) Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(c.g., puts, cans, warrants, options, convertible securities)													
1. Title of	2. Conver-	3. Trans-	3A.	4.	5.	6. Date Exercisable	7. Title and	8. Price of	9. Number of	10.	11. N		
Derivative	sion or	action	Deemed	Trans-	Number	and Expiration	Amount of	Derivative	Derivative	Owner-	of Ind		
Security	Exercise	Date	Execution	action	of	Date	Underlying	Security	Securities	ship	Benef		
	Price of		Date,	Code	Derivative	(Month/Day/	Securities	(Instr. 5)	Beneficially	Form	Owne		
(Instr. 3)	Derivative	(Month/	if any		Securities	Year)	(Instr. 3 & 4)		Owned	of Deriv-	(Instr		
	Security	Day/	(Month/	(Instr.	Acquired				Following	ative			
		Year)	Day/	8)	(A) or				Reported	Security:			
			Year)		Disposed				Transaction(s)	Direct			

(e.g., puts, calls, warrants, options, convertible securities)

Edgar Filing: TYREE WALTER - Form 4

					of (D) (Instr. 3, 4 & 5)						(1		(D) or Indirect (I)	
			Code	V	(A)		Exer-cisable	Expira- tion Date		Amount or Number of Shares			(Instr. 4)	
Non-Employee Stock Option	\$26.0500	01/07/00					(1)		Common Stock	2,500		2,500	D	
Non-Employee Stock Option	\$34.0002	01/08/01					(2)		Common Stock	2,500		5,000	D	
Non-Employee Stock Option	\$44.1400	01/08/02					(3)		Common Stock	4,000		9,000	D	
Non-Employee Stock	\$30.956	01/08/03	Α		4,000		(4)		Common Stock	4.000		13,000	D	

Explanation of Responses:

(1) Vesting Schedule: 50% after 01/08/02; and 100% after 01/08/03.

(2) Vesting Schedule: 50% after 01/08/03; and 100% after 01/08/04.

(3) Vesting Schedule: 50% after 01/08/04; and 100% after 01/08/05.

(4) Vesting Schedule: 50% after 01/08/05; and 100% after 01/08/06.

By: /s/ Walter Tyree

<u>01/10/03</u> Date

**Signature of Reporting Person

**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.

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 Number.