Edgar Filing: EISENBERG GLENN A - Form 4

EISENBERG (GLENN A								
Form 4									
February 04, 20	009								
FORM	4							OMB AF	PPROVAL
	UNITEDSI	TATES SECURI Wash	FIES AN ington, D			GE C	OMMISSION	OMB Number:	3235-0287
Check this b if no longer subject to Section 16. Form 4 or Form 5 obligations may continu <i>See</i> Instruct	STATEME Filed pursu ae. Section 17(a)	s ant to Section 16(of the Public Util	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section of the Investment Company Act of 1940					Expires: January 31, 2005 Estimated average burden hours per response 0.5	
1(b).									
(Print or Type Res	-	ron* 2 I N	r		1.		5 Relationship of	Reporting Pers	con(s) to
EISENBERG GLENN A Symbol						5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (Mid	dle) 3. Date of E	arliest Trans	saction			(Check all applicable)		
(Last) (That) (Windel) 5. Date of 1 (Month/Day 1835 DUEBER AVE. S. W. 02/02/200			ay/Year)				Director 10% Owner Officer (give title Other (specify below) Ex. VP - Finance & Admin.		
	(Street) 4. If Amend Filed(Month/			ment, Date Original /Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person		
CANTON, OF	H 44706						Form filed by M Form filed by M Person		
(City)	(State) (Zi	p) Table l	- Non-Der	ivative Se	curitie	es Acqu	uired, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed	3.	TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
G			Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		
Common Stock (Restricted)	02/02/2009		А	8,950 (1)	A	<u>(2)</u>	63,624	D	
Common Stock							3,417	Ι	401(k)

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.

Edgar Filing: EISENBERG GLENN A - Form 4

 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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Derivative Expiration Date (Month/Day/Year) Acquired (A) or Disposed of D) Instr. 3, 4,		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
Employee Stock Option (right to buy)	\$ 14.74	02/02/2009		A	54,100	02/02/2010 <u>(3)</u>	02/02/2019	Common Stock	54,1

Reporting Owners

Reporting Owner Name / Address	Relationships					
1	Director	10% Owner	Officer	Other		
EISENBERG GLENN A 1835 DUEBER AVE. S. W. CANTON, OH 44706			Ex. VP - Finance & Admin.			
Signatures						

Scott A. Scherff - Attorney	02/04/2009
in Fact	02/04/2009

**Signature of Reporting Person

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) Grant of restricted shares subject to the Company's financial performance in 2009 and further subject to vesting in 25 percent annual increments beginning 2/2/2010.
- (2) Not Applicable
- (3) The option becomes exercisable in (a) annual 25 percent increments begining on 2/2/10 or (b) in the event of retirement, death or disability of the participant or (c) upon the occurrence of a change in control of the Company or similar event.

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.