## Edgar Filing: SULLIVAN FRANK C - Form 4

Form 4										
November 06 FORM Check thi if no long subject to Section 10 Form 4 or Form 5 obligation may conti See Instru 1(b).	<b>4</b> UNITED S s box er 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5.	STATES SECUR Was IENT OF CHAN suant to Section 1 a) of the Public Ut 30(h) of the In	Shington, GES IN SECUR 6(a) of the cility Hold	D.C. 20 BENEF ITIES e Securit ling Con	549 ICIA ies E	L OWN xchange y Act of	NERSHIP OF e Act of 1934, 7 1935 or Section	OMB Number: Expires: Estimated a burden hour response	•	
(Print or Type R	esponses)									
1. Name and A SULLIVAN	ddress of Reporting I FRANK C	Symbol	Name and		Tradi	ng	5. Relationship of Issuer			
(Last) 4500 MT. Pl	(First) (M LEASANT ST. N	(Month/D	-	ansaction			X_ Director Officer (give below)	x all applicable) title 10% Owner Other (specify below)		
	(Street)	Filed(Mor	ndment, Da hth/Day/Year)		l		Applicable Line) _X_ Form filed by C	oint/Group Filing(Check		
NORTH CA	NTON, OH 4472	20					Form filed by M Person	lore than One Re	porung	
(City)	(State)	(Zip) Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8) Code V	(Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	11/05/2018		Р	5,000	А	\$ 41.05	51,932	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: SULLIVAN FRANK C - Form 4

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	of Der Sect Acq (A) Disp of (I (Ins	ivativo urities uired or oosed			7. Titl Amou Under Secur (Instr.	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code N	V (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Addres	5	Relationships				
	Director	10% Owner	Officer	Other		
SULLIVAN FRANK C 4500 MT. PLEASANT ST. NV NORTH CANTON, OH 44720						
Signatures						
/s/ Frank C. 1 Sullivan 1	1/06/2018					
<pre>**Signature of Reporting Person</pre>	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).

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.