Edgar Filing: MATTHEWS GARY S - Form 4

MATTHEWS Form 4 July 05, 2005												
FORM	Δ									PPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287				
Check this box if no longer subject to STATEMENT OF CHANC									Expires:	January 31,		
				GES IN BENEFICIAL OW				NERSHIP OF	Estimated a	2005 average		
Section 1	5. SECUL				ITIES			burden hours per				
Form 4 or									response 0.5			
	Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,											
obligations may continue.Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 1(b).												
(Print or Type R	Responses)											
MATTHEWS GARY S Symbol				Name and TMENT :			-	5. Relationship of Reporting Person(s) to Issuer				
(Last)	Last) (First) (Middle) 3. Date of				ansaction			(Check all applicable)				
(Month/Da				-				_X_ Director	10%	Owner		
6436 CITY WEST PARKWAY 07/05/20			Officer (give titleOther (specify below)									
(Street) 4. If Amen Filed(Month EDEN PRAIRIE, MN 55344				ndment, Date Original				6. Individual or Joint/Group Filing(Check				
				th/Day/Year)	1			Applicable Line)				
								X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Securi	ities Acc	uired, Disposed of	f, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution Date, if			3.4. Securities AcquiredTransaction(A) or Disposed ofCode(D)(Instr. 8)(Instr. 3, 4 and 5)				Securities Elementicially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				
Common Stock	07/05/2005			А	661	А	\$ 10.2	19,563	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)

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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. Transact Code (Instr. 8)	5. 6. Date ExercisationNumber Expiration Date of (Month/Day/Year Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr	
			Code N	7 (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
MATTHEWS GARY S 6436 CITY WEST PARKWAY EDEN PRAIRIE, MN 55344	Х							
Signatures								
Julie S. Wingert, attorney in fact	07/0							
**Signature of Reporting Person	E	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.