Edgar Filing: SILVESTRI JOSEPH - Form 4

SILVESTR	I JOSEPH									
Form 4										
August 08, 2	2011									
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMB AF	PPROVAL		
	UNITED		JRITIES A Vashington			NGE CO	OMMISSION	OMB Number:	3235-0287	
Check th	nis box	•	asinington	, D.C. 20	349				January 31,	
if no lon	- NIATHA	MENT OF CHA	NGES IN	BENEF	ICIA	LOWN	ERSHIP OF	Expires:	2005	
subject t Section	.0		SECURITIES					Estimated average burden hours per response 0.		
Form 4										
Form 5 obligation	n a *	suant to Section				•				
may con		a) of the Public	•	•				l		
See Inst		30(h) of the	Investment	t Compan	y Ac	t of 1940)			
1(b).										
(Print or Type	Responses)									
1. Name and	Address of Reporting	Person <u>*</u> 2. Iss	uer Name an o	d Ticker or	Tradi	ng	5. Relationship of I	Reporting Pers	son(s) to	
SILVESTR	I JOSEPH	Symbo					Issuer			
		TRIU	MPH GRC	OUP INC	[TG]	[]	(Check	all applicable	9	
(Last)	(First) (Middle) 3. Date	3. Date of Earliest Transaction				n un upprouero)			
			n/Day/Year)				X Director		Owner	
899 CASSA	ATT ROAD, SUI	TE 210 08/04	/2011				Officer (give t below)	below)	er (specify	
(Street)			4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check				
		Filed(1	/Ionth/Day/Yea	r)			Applicable Line)			
DEDUXAL	DA 10212						_X_ Form filed by O Form filed by M			
BERWYN,	PA 19312						Person		r8	
(City)	(State)	(Zip) T	able I - Non-l	Derivative	Secur	ities Acqu	ired, Disposed of,	or Beneficial	ly Owned	
1.Title of	2. Transaction Date		3.				5. Amount of	6.	7. Nature of	
Security (Instr. 3)	(Month/Day/Year)	Execution Date, i any	if Transaction Disposed of (D) Code (Instr. 3, 4 and 5)				Securities Beneficially	Ownership Indirect Form: Beneficia	Indirect Beneficial	
(1130.5)		(Month/Day/Yea					Owned		Ownership	
							Following	or Indirect	(Instr. 4)	
					(A)		Reported Transaction(s)	(I) (Instr. 4)		
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)	(,		
Common	0.0.10.1.10.0.1.1					\$	101 100			
Stock	08/04/2011		Р	21,300	A	49.856	121,100	D		
Common										
Stock							10,000 (1)	Ι	By Trust	

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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date		Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
SILVESTRI JOSEPH 899 CASSATT ROAD SUITE 210 BERWYN, PA 19312	Х						
Signatures							
John B. Wright, II, Power of A Silvestri	08/05/2011						
<u>**</u> Signature of Reporting		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).
- Shares of Common Stock owned by the Silvestri 2002 Trust of which the reporting person's spouse serves as trustee. The reporting person (1) disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the reporting person is the beneficial owner of the securities for purposes of Section 16 or for any other purpose.

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.

Date