Edgar Filing: SHAPIRO JACLYN L - Form 4

SHAPIRO JA	ACLYN L										
Form 4											
June 18, 200	7										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL			
Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box if no longer subject to STATEMENT OF CHAN									Expires:	January 31, 2005	
						ICIA		NERSHIP OF	Estimated average burden hours per		
Section 16. Form 4 or				SECUR	TTES						
Form 5		rsuant to S	Section 1	6(a) of the	- Securit	ies F	xchang	e Act of 1934,	response	0.5	
obligation	ns Section 17(• •			U	1935 or Section	n		
may cont See Instru	inue.			vestment	•	· ·	•				
1(b).											
(Duint on Tomo I)										
(Print or Type F	(esponses)										
1. Name and Address of Reporting Person * 2. Issuer SHAPIRO JACLYN L Symbol			r Name and	Ticker or	Tradi	ng	5. Relationship of Reporting Person(s) to Issuer				
			•	APITAL,	INC. [N	1VC]		1 11 1: 1. 1.	`	
(Last)	(First) (Middle)	3. Date of	f Earliest Tra	ansaction			(Chec	k all applicable	;)	
			(Month/E	Day/Year)				Director 10% Owner			
	CAPITAL, INC., AVENUE, 2ND		06/15/2	007				XOfficer (give below)	below)	er (specify	
(Street) 4. If An								Vice President & Secretary			
				endment, Da	-	1		6. Individual or Joint/Group Filing(Check			
PURCHASE, NY 10577				nth/Day/Year))			Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
PURCHASI	E, NY 10577							Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if		4. Securi n(A) or Di			5. Amount of Securities	6. Ownership Form: Direct		
(Instr. 3)	any (Mont		Day/Year)	Code (Instr. 3, 4 and 5) (Instr. 8)			Following Reported	(D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common							\$				
Stock, \$.01 par value	06/15/2007			Р	150	А	ф 19.39	1,150	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners



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.