## Edgar Filing: Cannon James J - Form 4

Cannon James	s J										
Form 4 January 02, 20	018										
	Л									PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								COMMISSION	OMB Number:	3235-0287	
Check this if no longe subject to	r STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								Expires: Estimated a	January 31, 2005 average	
Section 16 Form 4 or		SECU				CURITIES				irs per	
Form 5 obligations may contin <i>See</i> Instruct 1(b).	s Section 1	7(a) of the 1	Public Uti		ing Com	pany	Act o	ge Act of 1934, f 1935 or Sectio 40	response n	0.0	
(Print or Type Re	esponses)										
Cannon James J Symbol			Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
(Last) (First) (Middle) 3. Date of (Month/E ONCE COLONIAL ROAD 12/31/2 (Street) 4. If Ame				<ul> <li>3. Date of Earliest Transaction</li> <li>(Month/Day/Year)</li> <li>12/31/2017</li> <li>4. If Amendment, Date Original</li> <li>Filed(Month/Day/Year)</li> </ul>				(Check all applicable) X Director 10% Owner Officer (give title Other (specify below) 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
			(Month/Da								
MANCHEST	TER, CT 0604	2						Form filed by M Person	Nore than One Ro	eporting	
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	ecuri	ties Ac	quired, Disposed of	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ion Date 2A. Deemed y/Year) Execution Date, if any (Month/Day/Year)		3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A)				SecuritiesIBeneficially(i)OwnedIFollowing(i)ReportedTransaction(s)	5. Ownership Form: Direct D) or indirect (I) Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Commen				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	12/31/2017			А	592 <u>(1)</u>	А	\$0	796	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	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transacti	5. orNumber	6. Date Exer Expiration D		7. Title and Amount of	8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security	(Month Day Teat)	(Month/Day/Year)	Code (Instr. 8)	onNumber Expiration Date of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Underlying Securities (Instr. 3 and 4)	Security (Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Cannon James J ONCE COLONIAL ROAD MANCHESTER, CT 06042	Х							
Signatures								
Chad A. McDaniel, attorney-in Cannon	01/02/2018							
**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).

Pursuant to a resolution adopted by the Compensation of the Board of Directors of the Issuer, on June 30 and December 31 of every year (the "Grant Date"), each non-employee Director of the Issuer automatically receives a fully vested and unrestricted stock award under the

(1) Issuer's 2012 Stock Incentive Plan (the "Plan") consisting of that number of whole shares of common stock of the Issuer, subject to adjustment for rounding, equal in value to \$30,000, based on the Fair Market Value of the Issuer's common stock (as defined in the Plan) on the respective Grant Date.

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.