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JAMES DON	NALD L										
Form 4 February 28,	2012										
									OMB AF	PPROVAL	
	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287	
Check thi if no long subject to Section 1 Form 4 of Form 5 obligation may cont <i>See</i> Instru 1(b).	6. Filed pur Section 17(a	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940									
(Print or Type F	Responses)										
1. Name and A JAMES DO	Symbol UNIVE	Name and RSAL FC CTS INC	REST	Tradin	ıg	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) 2801 EAST	(First) (N BELTLINE, N.E	3. Date of (Month/D 02/27/20	-	ansaction			Director 10% Owner X Officer (give title Other (specify below) below) below) Exec VP National Sales				
		ndment, Da th/Day/Year)	-			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 					
	APIDS, MI 49525							Person			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	saction Date 2A. Deem /Day/Year) Execution any (Month/D		3. Transactio Code (Instr. 8)	ransaction(A) or Disposed of (D) ode (Instr. 3, 4 and 5)			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	02/27/2012			Code V A	Amount 330 (1)	(D) A	Price \$ 33.08	2,635	Ι	Def Comp Interest	
Common Stock								13,471	D		
Common Stock								4,023	Ι	401(k) Plan	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative	2. Conversion	3. Transaction (Month/Day		3A. Deemed Execution Date,	4. if Transac	5. tionN		6. Date Exer Expiration I			tle and ount of	8. Price of Derivative	9. Nu Deriv
Security or Exercise			· · ·	any	Code	of			(Month/Day/Year)		erlying	Security	Secu
(Instr. 3)	Price of			(Month/Day/Year	r) (Instr. 8	·	erivativ		;		rities	(Instr. 5)	Bene
	Derivative						curitie			(Insti	r. 3 and 4)		Owne
	Security						cquired						Follo
							sposed	1					Repo Trans
							(D)						(Instr
						(Iı	nstr. 3,						
						4,	and 5)						
											Amount		
								Date	Expiration		or		
								Exercisable	Date	Title	Number		
					Code	V (A	(D)				of Shares		
					code	• (1	(D)				Shares		
_													
Kepoi	rting O	wners	\$										
Reporting	Owner Name	e / Address			Relationsh	ips							
			Director	r 10% Owner	Officer			Oth	ner				
JAMES D	ONALD L												

JAMES DONALD L 2801 EAST BELTLINE, N.E. GRAND RAPIDS, MI 49525

Signatures

/s/ Christina A. Holderman, Atty-in-Fact for Donald L. James

**Signature of Reporting Person

Date

02/28/2012

Exec VP National Sales

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).

Represents grant of shares of restricted stock. The shares vest on the fifth anniversary of the grant date, subject to earlier vesting upon(1) death, disability or retirement. Half of the shares are deliverable to the reporting person upon vesting; the balance of the shares are not issuable to the reporting person until subsequent retirement, death or disability.

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.