## Edgar Filing: GALLAGHER MICHAEL L - Form 4

GALLAGHE Form 4 July 06, 2009	ER MICHAEL L										
									OMB AF	PROVAL	
				RITIES AND EXCHANGE COMMISSIO shington, D.C. 20549				COMMISSION	OMB Number:	3235-0287	
Check thi if no long	or			~~~~					Expires:	January 31, 2005	
subject to STATEMENT OF CHAIN				GES IN BENEFICIAL OWNERSH SECURITIES				NERSHIP OF	Estimated a	iverage	
Section 16. Form 4 or				SECONTIES					burden hours per response 0.5		
Form 5 obligatior	• • •						•	e Act of 1934,	·		
may conti	inue. Section 17(3			ility Hold vestment	•	· ·		1935 or Section	1		
See Instru 1(b).	uction	30(II) (		vestment	Compan	y At	1 01 194	Ю			
(Print or Type R	Responses)										
1. Name and Address of Reporting Person *       2. Issuer         GALLAGHER MICHAEL L       Symbol				er Name <b>and</b> Ticker or Trading ACLE WEST CAPITAL [PNW]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
PINNA CORP [											
(Last)	(First) (M	Middle)		Earliest Tr	ansaction			X_ Director Officer (give		Owner er (specify	
2575 E. CAMELBACK ROAD 07/01/20				-				below)	below)		
			ndment, Date Original				6. Individual or Joint/Group Filing(Check				
			nth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
								Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1. Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)						d of (D)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial		
C				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	07/01/2009			А	1,600	A	\$ 30.68	17,866	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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	(Month/Day/Year) vative rities uired or osed 0)		d 7. Title and Amount of Underlying Securities (Instr. 3 and 4)	Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr	
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
GALLAGHER MICHAEL L 2575 E. CAMELBACK ROAD PHOENIX, AZ 85016	Х						
Signatures							
/s/ Diane Wood, Attorney-in-Fact	07/0	6/2009					
**Signature of Reporting Person		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.