## Edgar Filing: HAMMER N ROBERT - Form 4

HAMMER N Form 4	N ROBERT										
June 17, 201	1										
								OMB AF	OMB APPROVAL		
Check this box							COMMISSION	OMB Number:	3235-0287		
if no long subject to Section 1 Form 4 o			SECUR	ITIES	NERSHIP OF	Expires: January 20 Estimated average burden hours per response					
Form 5 obligation may cont <i>See</i> Instru 1(b).	ns Section 17(a	a) of the I	Public Ut		ling Con	npan	y Act of	e Act of 1934, 1935 or Section 0	1		
(Print or Type F	Responses)										
1. Name and Address of Reporting Person <sup>*</sup> HAMMER N ROBERT COMMV [CVLT]				r Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
					SYSTEN	45 If	NC	(Check all applicable)			
(Month/I				e of Earliest Transaction h/Day/Year) h/2011				X Director 10% Owner X Officer (give title Other (specify below) below) Chairman, President & CEO			
				nendment, Date Original Ionth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
OCEANPO	RT, NJ 07757							Form filed by M Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	n Date, if	3. Transactio Code (Instr. 8)	(Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
Common Stock (1)	06/15/2011	06/15/2	011	Code V F	Amount 445	(D) D	Price \$ 37.51 (2)	(Instr. 3 and 4) 2,657,509	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 Derivativ Security (Instr. 3)	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	Number Expiration Date of (Month/Day/Year Derivative Securities Acquired A) or Disposed of (D)		nd 7. Title and Amount of Underlying Securities (Instr. 3 and 4)	Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna 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**

<b>Reporting Owner Name / Address</b>	Relationships							
	Director	10% Owner	Officer	Other				
HAMMER N ROBERT 2 CRESCENT PLACE OCEANPORT, NJ 07757	Х		Chairman, President & CEO					
Signatures								
Warren H. Mondschein, Attorney-in-Fact	06/17/2011							
**Signature of Reporting Person		Dat	e					
Evaluation of Decanonace								

## **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).
- (1) This sale of common stock was made to satisfy certain tax withholding obligations resulting from the vesting of restricted stock units.
- (2) Represents average sale price.

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.