Edgar Filing: DRISCOLL RICHARD C - Form 4

DRISCOLL I	RICHARD C											
Form 4												
November 16	5, 2004											
FORM	4									PROVAL		
	UNITED	STATES		ITIES A hington,			NGE (COMMISSION	OMB Number:	3235-0287		
Check this if no long							Expires:	January 31,				
subject to	STATEM	IENT O	F CHAN			CIA	LOW	NERSHIP OF	Estimated a	2005 average		
Section 10				SECUR	ITIES				burden hou	0		
Form 4 or Form 5					a		1	A (C1024	response	0.5		
obligation	-						-	ge Act of 1934,				
may conti	nue. Section 17(a			vestment	•	· ·		f 1935 or Sectio	n			
See Instru	ction	50(II)	of the m	vestment	Compan	y Aci	01 194	+0				
1(b).												
(Print or Type R	esponses)											
	•											
1. Name and A	ddress of Reporting	Person [*]	2. Issuer	Name and	Ticker or '	Tradin	ıg	5. Relationship of	of Reporting Person(s) to			
DRISCOLL RICHARD C Symbol								Issuer				
				INDUST	RIES IN	IC [N	IPO]	(Check all applicable)				
(Last) (First) (Middle)			3. Date of Earliest Transaction					(Check all applicable)				
			(Month/D					Director	Owner			
5605 CARNEGIE BLVD. 11/16/				-				XOfficer (give	er (specify			
								below) SR.V	below) PHR&ADM			
	(Street)		4 If Amo	ndmont Dot	o Original							
(Street) 4. If Amendmen Filed(Month/Day					-			6. Individual or Joint/Group Filing(Check Applicable Line)				
			1 neu(won	ul/Day/Teal)				_X_Form filed by (One Reporting Pe	erson		
CHARLOTT	TE, NC 2820946	74						Form filed by M Person	fore than One Re	eporting		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Acc	quired, Disposed of	f, or Beneficial	ly Owned		
1.Title of	2. Transaction Date	e 2A. Deer	med	3.				5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)		on Date, if	Transaction(A) or Disposed of						Indirect		
(Instr. 3)		any (Month/I	Day/Year)	Code (Instr. 8)	(D) (Instr. 3,	4 and	5)	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(INIOIIUI)	Day/ICal)	(Insu. 0)	(111501. 5,	+ anu	5)	Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported				
						or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common Stock	11/16/2004			М	875	А	\$ 5.51	24,909	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)

Signatures /s/ Driscoll, 11/16/2004 Richard C. **Signature of Date Reporting Person **Explanation of Responses:**

Director

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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)	4. Transactio Code (Instr. 8)	5. Number Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	Expiration I (Month/Day	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option	\$ 5.51	11/16/2004	М	875	<u>(1)</u>	(2)	Common Stock	875	\$ 5.51

Reporting Owners

Reporting Owner Name / Address

CHARLOTTE, NC 282094674

DRISCOLL RICHARD C 5605 CARNEGIE BLVD.

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) All options vest in three years from the date of grant as follows: 35% in the first year, 35% in the second year and 30% in the third year.

Relationships

Officer

SR.VP.-HR&ADM.

Other

10% Owner

(2) 7/30/2012

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.