#### Edgar Filing: Baker Robert Ellison - Form 4

Form 4	Ellison									
November 16										PROVAL
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMMISSION	OMB Number:	3235-0287	
Check this if no longe subject to Section 16 Form 4 or Form 5 obligation may conti <i>See</i> Instru- 1(b).	<ul> <li>box</li> <li><b>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF</b> SECURITIES</li> <li>Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,</li> <li>Section 17(a) of the Public Utility Holding Company Act of 1935 or Section</li> <li>and the Investment Company Act of 1940</li> </ul>								Expires: Estimated a burden hour response	•
(Print or Type R	esponses)									
1. Name and Ad Baker Rober	Symbol	Name <b>and</b> T				5. Relationship of Reporting Person(s) to Issuer				
(Last) 1310 GLEN	3. Date of Earliest Transaction (Month/Day/Year) 11/15/2012					(Check all applicable) <u>X</u> Director Officer (give title 10% Owner below) Director below)				
MABLETO	4. If Amendment, Date Original Filed(Month/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 Person				
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Acq	uired, Disposed of,	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Executio any	med 3. 4. Securities Act on Date, if Transaction(A) or Disposed Code (Instr. 3, 4 and 2 Day/Year) (Instr. 8)			d of (D)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	or	Price	Transaction(s) (Instr. 3 and 4)		
Common Shares without par value	11/15/2012			Р	500	A	\$ 14.95	2,300	D	
Restricted Share Units								15,036.639 (1)	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.

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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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Titl Amou Under Secur (Instr.	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv 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** 

10% Owner Officer Other Director

**Baker Robert Ellison** 1310 GLEN CEDARS DRIVE X MABLETON, GA 30126

## Signatures

Robert E. Baker by James A. Yano, attorney in fact pursuant to a POA filed with the 11/16/2012 Commission 5-8-07

\*\*Signature of Reporting Person

# **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 restricted share units previously granted under Oustide Directors Restricted Share Unit Plan and restricted share units credited with dividends, equivalent in value to those declared and paid on one share of STFC common stock; 158.518 shares acquired on 6/30/12

(1) and 136.286 shares acquired on 9/30/12. Each restricted share unit represents a right to receive one share of STFC common stock. The restricted share units become payable, in cash or common shares, at the election of the reporting person, upon the reporting person's termination of services as a director, following a six month waiting period.

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.

Date