## Edgar Filing: Chow Joan Kai - Form 4

Chow Joan K	ai											
Form 4 February 28,	2013											
									OMB AF	PROVAL		
FORM	UNITED	STATES		ITIES Al hington,			NGE C	OMMISSION	OMB Number:	3235-0287		
Check this if no long	or		- ~	~~~~					Expires:	January 31, 2005		
subject to STATEMENT OF CHANG				GES IN BENEFICIAL OWNERSHIP SECURITIES					Estimated average burden hours per			
Form 4 or Form 5		rsuant to S	lection 10	5(a) of the	e Securit	ies E	xchang	e Act of 1934,	response	0.5		
obligation may conti <i>See</i> Instru 1(b).	<sup>is</sup> nue. Section 17	(a) of the H	Public Ut		ing Con	ipany	y Act of	1935 or Section	1			
(Print or Type R	esponses)											
1. Name and A Chow Joan H	ddress of Reporting Kai	g Person <u>*</u>	Symbol	Name and			-	5. Relationship of Issuer	Reporting Pers	on(s) to		
		<b>AC111</b>					w ]	(Check	c all applicable	)		
(Last)	(First)	(Middle)	3. Date of (Month/D	'Earliest Tra ay/Year)	ansaction			Director	10%	Owner		
2400 S. 44TH STREET 02/26/24 (Street) 4. If Ame			02/26/2013					Officer (give titleOther (spec below) below)				
			endment, Date Original				6. Individual or Joint/Group Filing(Check					
			Filed(Mon	th/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
								Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year		n Date, if	3. Transactio Code (Instr. 8)	4. Securit n(A) or Di (Instr. 3,	spose	d of (D)	Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
				Code V	Amount		Price	(Instr. 3 and 4)				
Common Stock	02/26/2013			А	5,410	А	\$ 18.14	7,660	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)

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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. Transactic Code (Instr. 8)	5. ionNumber of Derivatives Securities Acquired (A) or Disposed of (D) (Instr. 3,		(Month/Day/Year) /ative rities ired r osed )		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5 (A) (E	<b>)</b> ]	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Addre</b>	ess	Relationships								
	Director	10% Owner	Officer	Other						
Chow Joan Kai 2400 S. 44TH STREET MANITOWOC, WI 54220										
Signatures										
Maurice D. Jones	02/28/2013									
<u>**</u> Signature of	Date									

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).

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.