## Edgar Filing: SILVESTRI JOSEPH - Form 4

SILVESTRI	JOSEPH											
Form 4												
June 08, 201	0											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL				
. •	UNITED	STATES					NGE C	COMMISSION	OMB	3235-028		
Check th	is box		vv as	shington,	D.C. 20	549			Number:	January 31,		
if no long		IENT O	F CHAN	GES IN I	RENEE	CIA	LOW	NERSHIP OF	Expires:	2005		
subject to Section 1	5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								Estimated average		
Form 4 c		SECURITIES							burden hours per response 0.			
Form 5	Filed pur	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,								0.0		
obligatio may cont	ns Section 17(						•	1935 or Section	1			
See Instr		30(h)	of the In	vestment	Compan	y Ac	t of 194	40				
1(b).												
(Print or Type ]	(kesponses)											
1. Name and A	Address of Reporting	Person *	2 Issue	Name <b>and</b>	Ticker or	Tradi	nσ	5. Relationship of	Reporting Pers	son(s) to		
SILVESTRI JOSEPH Symbo				er Name <b>and</b> Ticker or Trading				Issuer				
			•	PH GRO	UP INC	[TG]	ŋ					
(Last) (First) (Middle) 3.				f Earliest Tra	ansaction			(Check all applicable)				
				h/Day/Year)				X_ Director10% Owner				
1550 LIBER	RTY RIDGE, SU	ITE 100	06/04/2	-				Officer (give below)	title Other below)	er (specify		
	(Streat)		4 10 4	1 ( D				,	,	(61 1		
				.mendment, Date Original Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)				
			1 neu(moi	lui/Day/Tear)	<b>,</b>			_X_Form filed by C	One Reporting Pe	rson		
WAYNE, P	A 19087							Form filed by M Person	lore than One Re	porting		
(City)	(State)	(Zin)										
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction Date 2A. Deemed			3.	4. Securi		-	5. Amount of	6. Ownership			
Security (Instr. 3)	(Month/Day/Year)	n Date, if	Transactio Code	(A) or Di (Instr. 3,			Securities Beneficially	Form: Direct Indirect (D) or Beneficia	Indirect Beneficial			
(1150.5)		any (Month/I	Day/Year)	(Instr. 8)	(1150.5,	i unu	5)	Owned		Ownership		
								Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported Transaction(s)				
				Cala V	A	or	Duine	(Instr. 3 and 4)				
Common				Code V		(D)	Price \$					
Stock	06/04/2010			Р	1,000	А	φ 64.32	28,900	D			
Common Stock	06/07/2010			Р	2,000	А	\$ 62.13	30,900	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	7. Titl Amou Under Secur (Instr.	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
I State and the second	Director	10% Owner	Officer	Other				
SILVESTRI JOSEPH 1550 LIBERTY RIDGE SUITE 100 WAYNE, PA 19087	Х							
Signatures								
John B. Wright, II, Power of A Silvestri	ttorney Jo	oseph	0	6/08/2010				
<u>**</u> Signature of Reporting		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.