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MORRISON DAVID G
Form 5
January 30, 2003

FORM 5

U.S. SECURITIES AND EXCHANGE COMMISSION
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

() Check box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

| | | |
|---|---|--|
| 1. Name and Address of Reporting Person | 2. Issuer Name and Ticker or Trading Symbol | 3. IRS or Social Security Number of Reporting Person (Voluntary) |
|---|---|--|

| | |
|--|------------------|
| Morrison, David G. Brewster Transport Company Limited 100 Gopher Street, P.O. Box 1140 Banff, Alberta, Canada T0L 0C0 | Viad Corp VVI |
|--|------------------|

6. Relationship of Reporting Person to Issuer (Check all applicable)

Director 10% Owner Officer (give title below) Other (specify below)

X
Pres/CEO, Brewster T
ransport Company Ltd

7. Individual or Joint/Group Reporting

Form Filed by One Reporting Person
 Form Filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially owned

| 1. Title of Security (Instr. 3) | 2. Trans- action Date (Month/Day/Year) | 3. Trans- action Code (Instr. 8) | 4. Securities acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | 5. Amount of Securities Beneficially Owned at End of Month (Instr. 3 and 4) | 6. Owner- Ship Form: Direct (D) or Indirect (I) |
|---------------------------------|--|----------------------------------|---|---|---|
|---------------------------------|--|----------------------------------|---|---|---|

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. Con- version or Deriv- ative Security Exercise Price of Security | 3. Trans- action Date | 4. Trans- action Code (Instr. 8) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | 6. Date exer- cisable and Expiration Date (Month/Day/Year) | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | 8. Pr of De at Se ri (I 5) |
|--|---|-----------------------|----------------------------------|--|--|---|----------------------------|
|--|---|-----------------------|----------------------------------|--|--|---|----------------------------|

| | | | |
|--------|-----------|------------|------------------|
| (| Month/ C | Date Expi- | Amount or Number |
| Day/ O | Exer- ra- | | |

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| Year | D | | | | | cis- | tion | | of |
|------|---|---|-----|-----|--|------|------|-------|--------|
|) | E | V | (A) | (D) | | able | Date | Title | Shares |

Explanation of responses:

Signature of Reporting Person:

/s/Carol Kotek, Attorney-in-Fact

Carol Kotek, Attorney-in-Fact