FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

5 Relationship of Reporting Person(s) to Issuer

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

4. None and Address of December Decemb

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

2 Issuer Name and Ticker or Trading Symbol

	OOS ROE	BERT R			AI	ME'	ΓEK	INC	<u>/</u> [	AME	]	.,				neck	all appli Directo	cable)	.g . o	10% Ov	
(Last) 1100 CA P.O. BO	SSATT RO	•	(Middle)				3. Date of Earliest Transaction (Month/Day/Year) 01/25/2013										below)		Æ VI	below)	
(Street) BERWY			19312-11	77	_   4. If	If Amendment, Date of 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)	(S		(Zip)					1			D:		-6		6: . : . !		0				
Table I - Non-Deriv  1. Title of Security (Instr. 3)  2. Transa Date (Month/D			action	ction 2A. Deemed Execution Date,			е,	3. 4. Securities Transaction Code (Instr. 5)				ot, Or Beneficially ities Acquired (A) or d Of (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount		A) or D)	Price	Report Transa (Instr. 3		tion(s)			(Instr. 4)	
Common Stock			01/25	5/2013	3				F <sup>(1)</sup>		3,45	0	D	\$41.0	)7	98	,891		D		
401k Plan																1				401k Plan	
Common Stock/serp														17		7,043		D			
		1	able II -	Deriva (e.g., p												<i>,</i> 0	wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Year)		3A. Deeme Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 8)				Ex	6. Date Exercisa Expiration Date (Month/Day/Year			of Sec Under	7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)		De Se	Price of erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Dai	te ercisable	E) e Da	piration te	Title		Amount or Number of Shares						
Stock Option	\$14.5378									(2)	04	1/22/2016	Comn		40,540			40,540		D	
Stock Option	\$19.5867									(3)	04	1/28/2017	Comn		29,079			29,079	,	D	
Stock Option	\$29.8267									(4)	05	5/02/2018	Comn		15,150			15,150		D	
Stock	\$34,0467						İ			(5)	04	1/30/2019	Comn	non	28 704	Г		28 704		D	ĺ

## **Explanation of Responses:**

- 1. Represents withholding of shares to pay withholding taxes incurred in connection with performance vesting of restricted stock issued on April 29, 2010.
- $2. \ The \ stock \ options \ will \ become \ exercisable \ in \ four \ equal \ annual \ installments \ beginning \ on \ April \ 23, \ 2010.$
- 3. The stock options will become exercisable in four equal annual installments beginning on April 29, 2011.
- 4. The stock options will become exercisable in four equal installments beginning on May 3, 2012.
- 5. The stock options will become exercisable in four equal installments beginning on May 1, 2013.

/s/ Robert R. Mandos 01/28/2013

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* 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.

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 Number.