Edgar Filing: Goossen Isabelle C - Form 4

Goossen Isab	belle C											
Form 4												
July 22, 2008	3											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION							OMB AF	PROVAL				
	Washington, D.C. 20549						COMMISSION	OMB Number:	3235-0287			
Check thi if no long	er								Expires:	January 31, 2005		
subject to	subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF					NERSHIP OF	Estimated average burden hours per					
Section 1	ection 16. SECURITIES											
Form 4 or Form 5		want to S	action 1	f(a) of the	. Saannit	ian E	vahana	a A at of 1024	response 0.5			
obligation	10						-	e Act of 1934, 1935 or Section	n			
may conti	inue.			vestment	•	· ·			1			
See Instru 1(b).	iction	50(11)	or the m	vestment	compun	y 110	101174					
-(-).												
(Print or Type R	Responses)											
1. Name and A Goossen Isal	ddress of Reporting I			Name and	Ticker or	Tradiı	ng	5. Relationship of Issuer	Reporting Pers	on(s) to		
Goossen Isa	belle C		Symbol		CTDON			135001				
			METHC [METH]	DE ELE	CIRON	ICS	INC	(Chec	k all applicable)		
			-									
(Last)	(First) (M			Earliest Tr	ansaction			X_ Director Officer (give		Owner r (specify		
7401 WEST	WILSON AVEN		(Month/D 07/21/20	-				below)	below)			
/ 101 // 101								<pre>/</pre>		below)		
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
			Filed(Month/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person				
CHICAGO,	IL 60706-4548							Form filed by M	lore than One Re	porting		
	(Ct-t-)	(7:)						Person				
(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			3.	4. Securi			5. Amount of	6. Ownership			
Security (Instr. 3)	(Month/Day/Year)	Execution any	1 Date, 1f	Transactic Code	on(A) or Di (Instr. 3,	-		Securities Beneficially	Form: Direct (D) or	Indirect Beneficial		
(1150.5)		(Month/D	ay/Year)	(Instr. 8)	(1150.5,	i unu	5)	Owned	Indirect (I)	Ownership		
								Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported Transaction(s)				
				Cala V	A	or	Duiters	(Instr. 3 and 4)				
Common				Code V	Amount 3,000	(D)	Price \$					
Stock	07/21/2008	07/21/20	008	А	(1)	А	φ 11.35	15,000	D			
					_		11.00					

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)

Edgar Filing: Goossen Isabelle C - Form 4

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)	;	ate	Secur	ınt 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

Relationships **Reporting Owner Name / Address** 10% Owner Officer Other Director Goossen Isabelle C 7401 WEST WILSON AVENUE Х CHICAGO, IL 60706-4548 Signatures Douglas A. Koman as Attorney-in-Fact for Isabelle C.

Goossen.

**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).

(1) Stock Award granted under terms of the Methode Electronics, Inc. 2007 Stock Plan

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.

07/22/2008

Date