### Edgar Filing: Dadone Theresa L - Form 4

Dadone The	resa L										
Form 4											
June 01, 201	.0										
FORM		CT A TEC	SECUI		ND EV		NCEC	OMMISSION		PROVAL	
		SIAIES		shington,			NGE U	UNINIISSIUN	OMB Number:	3235-0287	
Check th	nis box		vv as	sinington,	D.C. 20	549				January 31,	
if no longer STATEMENT OF CHANG				IGES IN I	GES IN BENEFICIAL OWNE				Expires:	2005	
subject to Section 1	0	STATEMENT OF CHANGES IN DENETICIAL OWNER SECURITIES						Estimated average			
Form 4 c		SECONTIES							burden hours per response 0.5		
Form 5	Filed pur	suant to S	ection 1	6(a) of the	e Securit	ies E	xchange	e Act of 1934,			
Form 5 obligations may continue. Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section											
See Instr		30(h) o	of the In	vestment	Compan	y Ac	t of 194	0			
1(b).											
(Print or Type l	Responses)										
							Reporting Person(s) to				
Dadone Theresa L Symbol								Issuer			
ACCUF				JRAY INC [ARAY]				(Check all applicable)			
(Last) (First) (Middle) 3. Date of				of Earliest Transaction				()			
1010 0000				nth/Day/Year)				Director 10% Owner Officer (give titleX Other (specify			
1310 CHESAPEAKE TERRACE 05/28/2				/2010				below) below)			
								SVP Hu	uman Resource	S	
(Street) 4. If Ame			endment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Mor				Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person			
							Ine Reporting Person Iore than One Reporting				
SUININYVA	ALE, CA 94089							Person		. U	
(City)	(State)	(Zip)	Tab	le I - Non-D	erivative	Secur	ities Acqu	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of	2. Transaction Date				4. Securit			5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year)		Date, if	Transaction Code				Securities Beneficially	Ownership Form: Direct	Indirect Beneficial	
(Instr. 3) any (Month/Day/Y			ay/Year)					Owned	(D) or	Ownership	
			•					Following	Indirect (I)	(Instr. 4)	
						(A)		Reported Transaction(s)	(Instr. 4)		
				Cod. V	<b>A</b>	or	D.'	(Instr. 3 and 4)			
					Amount	(D)	Price \$				
Common	05/28/2010			A <u>(1)</u>	1,516	А	ф 4.6495	18,594	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)

## **Reporting Owners**

#### Edgar Filing: Dadone Theresa L - Form 4

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. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Add</b>	ress	Relationships							
1	Director	10% Owner	Officer	Other					
Dadone Theresa L 1310 CHESAPEAKE TERR SUNNYVALE, CA 94089	ACE			SVP Human Resources					
Signatures									
Theresa Dadone	06/01/2010								
**Signature of	Date								

# **Explanation of Responses:**

Reporting Person

\* 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) This transaction, although non-reportable, is being reported on a voluntary basis by the Company.

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.