| SEC Form 4 | |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| OMB APPROVAL | | | | | | | | | | |
|------------------------|-----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | | |
| Estimated average burg | len | | | | | | | | | |
| hours per response. | 05 | | | | | | | | | |

| hours per response: | 0.5 |
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| Estimateu average buruen | |

| 1. Name and Address of Reporting Person [*] Card Andrew H JR | | | | er Name and Ticke <u>ON PACIFIC</u> | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
|--|------------------|---|---|--|--------|---|----------------|------------|--|---|---|---------------|--|--|
| (Last) 5747 N. 4TH ST | (First) TREET | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 10/02/2006 | | | | | | Officer (give title below) | Other below | (specify) | | |
| , | | | 4. If An | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | |
| (Street) ARLINGTON | VA | 22205 | | | | | | Line) X | | | | | | |
| (City) | (State) | (Zip) | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | |
| Date | | 2. Transaction Date Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Transaction D Code (Instr. 5 | | 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5) | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | Code | v | Amount | ount (A) or Pr | | Transaction(s) (Instr. 3 and 4) | | (1150.4) | | | |
| | | | | curities Acquii | | | , | | - | wned | | | | |
| | | (e | .g., puts, cal | ls, warrants, c | option | s, co | onvertible | secur | ties) | | | | | |

| 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. Transa Code (8) | | 5. Nu of Deriv Secu Acqu (A) of Dispo of (D) (Instr and 5 | rities lired r osed) 7. 3, 4 | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|------------------------------|---|--|--|--|--------------------|--|--|---|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Phantom Stock ⁽¹⁾ | \$0 | 10/02/2006 | | A | | 85 | | (2) | (2) | Common Stock | 85 | \$0 | 85 | D | |

Explanation of Responses:

1. Distribution ratio for Phantom Stock Units is 1:1.

2. Phantom Stock Units are payable in cash only commencing at retirement.

By: Michael M. Hemenway,

Attorney-in-Fact For: Andrew

H. Card Jr.

** Signature of Reporting Person Date

10/02/2006

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.