Edgar Filing: TERRILL ALAN - Form 4

TERRILL AI	LAN																					
Form 4																						
September 16	5, 2005																					
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									APPROVAL													
CURIVI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287													
Check thi									Expires:	January 31												
if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF							NERSHIP OF	Estimated a	2005 average													
Section 16. SECURITIES							burden hours per															
Form 4 or Form 5		suant to S	Section 16	5(a) of the	- Securiti	ies F	vchano	ge Act of 1934,	response	response 0.5												
obligation	18 Section 17(a)						-	f 1935 or Sectio	n													
may conti <i>See</i> Instru	nue.			vestment	•	· ·																
1(b).	enon				1.																	
(Print or Type R	esponses)																					
1. Name and A	ddress of Reporting F	Person *	2 Issuer	Name and	Ticker or '	Tradir	nσ	5. Relationship of	f Reporting Per	son(s) to												
TERRILL ALAN Symbol				uer Name and Ticker or Trading l				Issuer														
			•	W VAL	LEY CO	RP			11 11 11 \													
			[MVCO	MVCO]				(Check all applicable)														
(Last) (First) (Middle)			3. Date of Earliest Transaction					Director 10% Owner														
				onth/Day/Year)				XOfficer (give titleOther (specify below) below)														
4411 SOUTH 40TH STREET 09/16/			09/16/20	16/2005					COO													
				If Amendment, Date 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 														
												PHOENIA, A	AZ 83040							Person		
												(City)	(State) ((Zip)	Table	e I - Non-D	erivative S	Securi	ities Acc	uired, Disposed of	f, or Beneficial	lly Owned
1.Title of	2. Transaction Date			3. 4. Securities Acquired					6. Ownership													
Security (Instr. 3)	(Month/Day/Year)	Execution Date, if					Beneficially (D) or	Form: Direct	ct Indirect Beneficial Ownership													
(IIIsu. 5)		any (Month/			Code (D) (Instr. 8) (Instr. 3, 4 and 5)			Indirect (I)														
							Following	(Instr. 4)														
						(A)		Reported Transaction(s)														
						or	р.	(Instr. 3 and 4)														
Common				Code V	Amount	(D)	Price															
Stock \$.001	09/16/2005	09/16/2	2005	S	1,100	D	\$	42,014	D													
par value	0011012000	07,10/2		U U	1,100	2	9.98	,011	-													
•																						

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)

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

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
TERRILL ALAN 4411 SOUTH 40TH STREET PHOENIX, AZ 85040			COO				
Signatures							
/s/ Clint Tryon Attorney-in-fact	09/	16/2005					

**Signature of Reporting Person

Date

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).

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.