Edgar Filing: KLINGL GARY F - Form 4/A

KLINGL GA	RY F											
Form 4/A												
March 11, 20	09											
FORM	Δ									PPROVAL		
	UNITED	STATES S		ITIES AI hington, I			NGE (COMMISSION	OMB Number:	3235-0287		
Check this if no long										January 31,		
subject to	IENT OF	F CHANGES IN BENEFICIAL OW					NERSHIP OF	Expires: Estimated a	2005 average			
Section 10				SECURI	TIES				burden hours pe			
Form 4 or Form 5									response 0.5			
obligation	-							ge Act of 1934,				
may conti	nue. Section 17(a			vestment (•	- ·		f 1935 or Sectio	n			
<i>See</i> Instru 1(b).	ction	50(II) 0I		estinent	Compan	y Aci	. 01 19	40				
(Print or Type R	esponses)											
1. Name and Address of Reporting Person <u>*</u> KLINGL GARY F			2. Issuer Name and Ticker or Trading					5. Relationship of Reporting Person(s) to Issuer				
			ymbol INTEGI	RIS INC	FNTGI							
								(Chec	k all applicable	e)		
(Month.				Earliest Tra	insaction			XDirector10% Owner				
			(Month/Day/Year) 01/14/2009					Officer (give title Other (specify				
			T C A	1	<u> </u>			below)	below)			
			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)				
			1/16/20	-				_X_ Form filed by (One Reporting Po	erson		
LONGVILL	E, MN 56655	Ū	1110/20	07					Aore than One Ro			
(City)	(State)	(Zip)	Table	I - Non-De	erivative S	Securi	ties Ac	quired, Disposed of	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	curity (Month/Day/Year) Execution Date, if			3.4. SecuritiesTransactionAcquired (A) orCodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)				Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				
Common Stock	01/14/2009			А	6,910 (1) (3)	A	\$ 0 (2)	44,627	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)

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1. Title of	2. Conversion	3. Transaction Date		4. Transcor	5.	han	6. Date Exerc		7. Titl		8. Price of	9. Nu Darii
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transac Code (Instr. 8)	of Deri Secu Acqu (A) o Disp of (E	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,			Amou Under Secur (Instr.	rlying	Derivative Security (Instr. 5)	Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	ŕ	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships								
1	Director	10% Owner Office		Other					
KLINGL GARY F 5066 KINGS TRAIL LONGVILLE, MN 56655	Х								
Signatures									
/s/ Peter W. Walcott attorney-in Klingl		03/10/2009							

**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).
- (1) These shares are Restricted Stock Units payable only in Common Stock and were issued in connection with a reduction in director's fees which will remain in place through the 2009 Annual Meeting of Stockholders. The restrictions lapse January 14, 2010.
- (2) The number of shares covered by this Restricted Stock Unit grant were calculated by dividing the amount of the reduction in director's fees referenced in footnote 1 by the closing price of \$1.99 on the date of grant.
- (3) This amemendment is to correct the number of shares that were reported due to a calculation error.

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.