Holder David Form 3

| January 21, 2009 | | | | | | | | | |
|---|---|---|---|--------------------------------------|--------------|--|--|--|--|
| FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION | | | | | MISSION | OMB APPROVAL | | | |
| | Wa | Washington, D.C. 20549 | | | | OMB Number: | 3235-0104 | | |
| IN | ITIAL STATEMEN | | | OWNERSH | IP OF | Expires: | January 31, 2005 | | |
| | pursuant to Section 17(a) of the Public U 30(h) of the In | Jtility Holdi | Securities E ng Company | Act of 1935 | | Estimated burden ho response. | l average ours per | | |
| (Print or Type Responses) | | | | | | | | | |
| 1. Name and Address of Repor Person <u>*</u> Holder David | Statement (Month/Day/ | 2. Date of Event Requiring Statement (Month/Day/Year) | | e and Ticker of INC [PDEX] | | nbol | | | |
| (Last) (First) (| Middle) 01/09/2009 |) | 4. Relationship of Reporting Person(s) to Issuer | | | 5. If Amendment, Date Original Filed(Month/Day/Year) | | | |
| 1052 CHARWOOD LAN | ЛЕ | | (Chaole | all applicable) | | | | | |
| (Street) | | | (Check all applicable) 6. I | | | ndividual or Joint/Group | | | |
| SANTA ANA, CA 92 | NTA ANA, CA 92705 | | OfficerOtherX (give title below) (specify below) Perso 1 | | | ng(Check Applicable Line) Form filed by One Reporting on Form filed by More than One orting Person | | | |
| (City) (State) | (Zip) | Table I - N | Non-Derivat | ive Securitie | es Benefici | ally Owne | ed | | |
| 1.Title of Security (Instr. 4) | | 2. Amount o Beneficially (Instr. 4) | 11 of Securities 3. 4. Nature of I 11 Owned Ownership Form: (Instr. 5) Direct (D) or Indirect (I) (Instr. 5) | | Indirect Ben | eficial | | | |
| Reminder: Report on a separate owned directly or indirectly. | e line for each class of sec | urities benefic | ^{ially} S | EC 1473 (7-02) | | | | | |
| informat required | who respond to the o tion contained in this I to respond unless th y valid OMB control n | form are not le form displ | t | | | | | | |
| Table II - Deriva | ative Securities Benefici | ally Owned (e | .g., puts, calls, | warrants, opti | ons, convert | ible securiti | es) | | |
| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable and Expiration Date (Month/Day/Year) | Secur | e and Amount ities Underlyin ative Security 4) | | ise Form o | rship Bene of (Instr | ature of Indirect ficial Ownership r. 5) | | |

Shares

(Instr. 5)

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| Director Stock Options | 07/08/2009 | 01/08/2019 | Stock Options | 20,000 | \$ 0.47 | D | Â |
|------------------------|------------|------------|------------------|--------|---------|---|---|
|------------------------|------------|------------|------------------|--------|---------|---|---|

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|---|---------------|-----------|---------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| Holder David 1052 CHARWOOD LANE SANTA ANA, CA 92705 | X | Â | Â | Â | | |
| Signatures | | | | | | |
| Jeffrey J. 01/ Ritchey | 21/2009 | | | | | |

**Signature of Date
Reporting Person

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 5(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.