FORM 5

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Nashington, | D.C. | 20549 |
|-------------|------|-------|

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

| OMB APPROVAL | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|
| OMB Number: | 3235-0362 | | | | | | |
| Estimated average burden | | | | | | | |
| hours per response: | 1.0 | | | | | | |

Form 3 Holdings Reported.

| Form 4 Transactions Reported. | or Sec | | | | | ompany Ac | | | 4 | | | | | | |
|---|--------------------------------|---|--|---------|--|------------------|---|--------|---|---|-------------------|----------------------------|--|---|--|
| 1. Name and Address of Reporting Person* SCANLON PATRICK RONALD | | er Name ar ERICAN | | | | Symbol ATER C | <u>O</u> [A | wr] | (Ch | elationship eck all applic Directo | cable) or | Ü | 10% | Owner | |
| (Last) (First) (Middle) 175 LILAC LANE | | 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2006 | | | | | | | X Officer (give title Other (specify below) Vice President | | | | | | |
| (Street) BREA CA 92823 (City) (State) (Zip) | 4. If An | endment, | Date o | of Orig | inal File | d (Month/D | ay/Year |) | Line | X Form f | iled by O | ne Repo | orting Per | son | |
| Table I - Non- | Derivative S | ecuritie | s Ac | quire | ed, Di | sposed | of, or | Bene | ficial | y Owned | l | | | | |
| Date (Month/Day/Year) if | | Date, Ti | Code (Instr. | | | | | sed Of | ed Of 5. Amount of Securities Beneficially Owned at er | | Owners Form: D | | | | |
| | (montain 2) | (Month/Day/Year) 8) | | Amount | | t | (A) or (D) | Price | | Issuer's Fiscal Year (Instr. 3 and 4) | | Indirect (I) (Instr. 4) | | (Instr. 4) | |
| Common 12/31/20 | 006 | | A | | 3,236.9908 ⁽¹⁾ A | | A | , | \$0 | 7,939. | .6677 | |] | 401(K) | |
| I | erivative Se e.g., puts, ca | | | | | | | | - | Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security (Instr. 3) 3. Transaction Date Execution Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) | Code (Instr | Derivati Securiti | vative Expirati (Month/iisposed Instr. | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4) | | 4) mount | 8. Price of Derivative Security (Instr. 5) | | | 10. Owners Form: Direct (I or Indire (I) (Instr | Beneficial Ownership ect (Instr. 4) | |
| | 12/31/2006 A 21.0914 | | (D) | Date | Date Expiration Date | | Num of Title Sha | | lumber f | ares | | | | | |

Explanation of Responses:

- 1. Updated 401K employer contributions of Company Stock
- 2. DER units credited on RSU award for 3 years vesting 1/3 annually Jan. 07, Jan. 08 & Jan. 09
- 3. No expiration date. Automatically converts to shares upon vesting dates listed in FN 2.

/s/ Patrick R. Scanlon

02/15/2007

** Signature of Reporting Person

Date

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.