| Check this box if no<br>longer subject to<br>Section 16. Form 4 or<br>Form 5 obligations | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF<br>SECURITIES             |
|--|---|
| may continue. See<br>Instruction 1(b).   | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or |

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL Washington, D.C. 20549 OMB

Section 30(h) of the Investment Company Act of 1940

| (Print or Type Respo              | onses)  |   |               |                                   |  |   |   |   |  |                                  |   |
|-----------------------------------|---|---|---------------|-----------------------------------|--|---|---|---|--|----------------------------------|---|
| 1. Name and Addres<br>DONNELLY RI | 2. Issuer Na<br>Symbol<br>CAPSTON                       |   |               |                                   | U  |   | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable)<br>X Director 10% Owner   |   |  |                                  |   |
| (Last)<br>21211 NORDHO            | :)  | 3. Date of Earliest Transaction<br>(Month/Day/Year)<br>09/10/2004 |               |                                   |  |   |   | Deficer (give title Other (specify below) |  |                                  |   |
| CHATSWORTH                        | 4. If Amendment, Date Original<br>Filed(Month/Day/Year) |   |               |                                   |  |   | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>-X_ Form filed by One Reporting Person<br>Form filed by More than One Reporting Person |   |  |                                  |   |
| (City)                            | (City) (State) (Zip)                                    |   |               |                                   | Table I - Non-Derivative Securities Acqu |   |   |   |  | Beneficially                     | Owned   |
| 1.Title of Security<br>(Instr. 3) | 2. Transaction<br>Date<br>(Month/Day/Year)              | Execu<br>any  | tion Date, if | Transaction<br>Code<br>(Instr. 8) |  | 4. Securities<br>Acquired (A) or<br>Disposed of (D)<br>(Instr. 3, 4 and 5)<br>(A)<br>or<br>Amount (D) Price |   | D)<br>5)                                  | Securities<br>Beneficially Owned<br>Following Reported<br>Transaction(s)<br>(Instr. 3 and 4) | Ownership<br>Form:<br>Direct (D) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.

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Number:

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Estimated average

burden hours per

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

| (e.g., puts, calls, warrants, options, convertible securities) |  |
|--|--|
|--|--|

|                                      | (e.g., puts, cans, warrants, options, convertible securities) |                          |                    |      |      |        |     |  |                    |                 |  |                                      |  |  |            |
|--------------------------------------|---|--------------------------|--------------------|------|------|--------|-----|--|--------------------|-----------------|--|--------------------------------------|--|--|------------|
| Security                             | Conversion  | Date<br>(Month/Day/Year) | Execution Date, if | Code | tion | n of   |     | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                    |                 |  | Derivative<br>Security<br>(Instr. 5) | Derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s) | Ownership<br>Form of<br>Derivative<br>Security:<br>Direct (D)<br>or Indirect | Beneficial |
|                                      |   |                          |                    | Code | v    | (A)    | (D) | Exercisable  | Expiration<br>Date | Title           | Amount<br>or<br>Number<br>of<br>Shares |                                      |  |  |            |
| Stock<br>Option<br>(right to<br>buy) | \$ 1.59   | 09/10/2004               | 09/10/2004         | А    |      | 10,000 |     | 12/10/2004 <mark>(1)</mark>                                    | 09/10/2015         | Common<br>stock | 10,000                                 | \$ 1.59                              | 10,000   | D  |            |
| Stock<br>Option<br>(right to<br>buy) | \$ 1.59   | 09/10/2004               | 09/10/2004         | А    |      | 11,793 |     | 09/10/2004 <sup>(2)</sup>                                      | 09/10/2014         | Common<br>Stock | 11,793                                 | \$ 1.59                              | 11,793   | D  |            |

## **Reporting Owners**

| Reporting Owner Name / Address                                      | Relationships |           |         |       |  |  |  |  |
|---|---------------|-----------|---------|-------|--|--|--|--|
| Reporting Owner Name / Address                                      | Director      | 10% Owner | Officer | Other |  |  |  |  |
| DONNELLY RICHARD M<br>21211 NORDHOFF STREET<br>CHATSWORTH, CA 91311 | х             |           |         |       |  |  |  |  |

## **Signatures**

| Karen Clark, Power of Attorney for Richard M. Donnelly, Reporting Person | 09/17/2004 |  |
|--|------------|--|
| -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) This option vests quarterly ove a one-year period.

(2) This option is immediately vested 100%.

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.