

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Weekington, D.C. 20540

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL						
OMB	3235-					
Number:	0104					
Estimated average						
burden hours pei	ſ					
response	0.5					

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)										
1. Name and Address of Reporting					ring 3. Issuer Name <b>and</b> Ticker or Trading Symbol					
Person *	Statem		`	MATTHE		VS INTERN	ATIONAL	CORP	[MATW]	
Murray Ralph W		n/Day/Year	:)							
(Last) (First) (Middle	e) 07/19	9/2004		4.	4. Relationship of Reporting 5. If An			Amendme	mendment, Date Original	
4250 OLD WILLIAM PENN					\ /			Filed(Month/Day/Year)		
HIGHWAY					(Check all applicable) Director 10% Owner					
(Street)					X_ Officer (give Other (specify			fy 6. Individual or Joint/Group		
PITTSBURGH, PA 15146					Chairman, Cloverleaf Group Inc X_F			Filing(Check Applicable Line)  X_Form filed by One Reporting Person Form filed by More than One Reporting		
1.Title of Security						3. 4. Nature of Indirect Beneficial			Beneficial	
(Instr. 4)	(Instr. 4)		Beneficially Owned (Instr. 4)				Ownership Corm: Direct (Instr. 5)			
		(III.	(111511. 4)			(D) or				
						Indirect (I)				
						(Instr. 5)				
None		0				D				
not required number.  Table II - Derivative So	·					·			rities)	
1. Title of Derivative Security	2. Date Exer		e 3. Title and Amount of			5.		6. Nature of Indirect Beneficial Ownership		
(Instr. 4)	and Expirati				Conversio					
(Month				Derivative Security		or Exercise		(Instr	. 5)	
			(Instr. 4)		Price of Derivative	Derivative Security:	e			
	Date Exercisable	Expiration				Security	Direct (D	)		
	Exercisable	Date	Title	Amou of Sh	unt or Numb	oer j	or Indirec	t		
				01 511	ares		(I)			
							(Instr. 5)			
<b>Reporting Owners</b>										
Reporting Owner Name / Address  Director		Relationships								
		Director	10% Owner Officer					Other		
Murray Ralph W										
4250 OLD WILLIAM PENN HIGHWAY PITTSBURGH, PA 15146					Chairman, Cloverleaf Group Inc					

## **Explanation of Responses:**

08/20/2004 Date

Signatures

Ralph W. Murray

\*\*Signature of Reporting

- \* 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.