Edgar Filing: WOODARD GERALD G - Form 4

| WOODARD | GERALD G | | | | | | | | | | |
|--|-------------------------|-------------|---|-------------------------------------|--------------|-----------|---------|---|---------------------------|-------------|--|
| Form 4 | | | | | | | | | | | |
| July 16, 2012 | , | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION | | | | | | | r | OMB APPROVAL | | | |
| UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | OND | 3235-0287 | | | |
| Check this | s box | | vvas | nington, | D.C. 205 | 49 | | | Number: | January 31, | |
| if no long | er STATI | EMENT O | Г СНА М | CES IN I | RENEEL | стат | ow | NEBSHID OF | Expires: 2005 | | |
| subject to | | | r Chan | NGES IN BENEFICIAL OW SECURITIES | | | | NERSIIII OF | Estimated average | | |
| Section 16 Form 4 or | | | | SECON | | | | | burden hou response | | |
| Form 5 | | oursuant to | Section 10 | 5(a) of the | e Securiti | es Ex | chang | e Act of 1934, | 165p01156 | 0.5 | |
| obligation | ¹⁸ Section 1 | | | | | | - | f 1935 or Sectio | n | | |
| may conti <i>See</i> Instru | nue. | | of the In | • | • | | | | | | |
| 1(b). | ction | | | | | | | | | | |
| | | | | | | | | | | | |
| (Print or Type R | esponses) | | | | | | | | | | |
| 1 Name and A | ddress of Reporti | ng Person * | 2 I | N I | m. 1 m | - 1· | | 5 Relationship of | Penorting Per | son(s) to | |
| WOODARD GERALD G Sy | | | | Name and | Ticker or I | rading | 5 | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | | | RGICAL | EXPRES | S IN | ~ | | | | |
| | | | [STRC] | | | 5 11 1 | C | (Chec | ck all applicable | e) | |
| (Last) | (First) | (Middle) | | Earliest Tre | ncaction | | | _X_ Director | 10% | Owner | |
| (Last) (First) (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) | | | | | X Officer (give title Other (specify | | | |
| SRI SURGIO | CAL EXPRES | SS | 07/13/20 | - | | | | below) | below) Executive Offic | | |
| INC, 12425 | RACE TRAC | K ROAD | | | | | | Chief I | | .01 | |
| | (Street) | | 4. If Ame | ndment, Dat | te Original | | | 6. Individual or Jo | oint/Group Filir | 1g(Check | |
| | | | Filed(Month/Day/Year) | | | | | Applicable Line) | | | |
| | | | | | | | | _X_Form filed by | | | |
| TAMPA, FL | , 33626 | | | | | | | Form filed by M Person | Nore than One Re | eporting | |
| (City) | (State) | (Zip) | Table | e I - Non-D | erivative S | ecurit | ies Aco | uired, Disposed of | f. or Beneficial | llv Owned | |
| 1.Title of | 2. Transaction I | Date 2A Dee | | 3. | | | - | 5. Amount of | 6. Ownership | - | |
| Security | (Month/Day/Ye | | on Date, if | | on(A) or Dis | | | Securities | Form: Direct | | |
| (Instr. 3) | , , | any | Code (D) | | | | | Beneficially | (D) or | Beneficial | |
| | | (Month/ | Day/Year) | (Instr. 8) | (Instr. 3, 4 | and 5 | 5) | Owned Following | Indirect (I) | Ownership | |
| | | | | | | | | Following Reported | (Instr. 4) | (Instr. 4) | |
| | | | | | | (A) | | Transaction(s) | | | |
| | | | | Code V | Amount | or (D) | Price | (Instr. 3 and 4) | | | |
| Common | 07/12/2012 | | | | | | \$ | 0 | D | | |
| Stock | 07/13/2012 | | | U | 25,000 | D | 3.7 | 0 | 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 Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. 5. Number of TransactiorDerivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | |
|---|---|---|---|--|---------|--|--------------------|---|-------------------------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Stock Option (Right to buy) | \$ 0.93 | 07/16/2012 | | D | 50,000 | <u>(1)</u> | 03/07/2019 | Common Stock | 50,000 |
| Stock Option (Right to buy) | \$ 2.79 | 07/16/2012 | | D | 75,000 | (2) | 03/17/2020 | Common Stock | 75,000 |

Reporting Owners

| Reporting Owner Name / Address | | Relationships | | | | | | |
|--|----------|---------------|-------------------------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| WOODARD GERALD G SRI SURGICAL EXPRESS INC 12425 RACE TRACK ROAD TAMPA, FL 33626 | X | | Chief Executive Officer | | | | | |
| Signatures | | | | | | | | |
| Gerald Woodard 07/1 | 6/2012 | | | | | | | |

**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).
- This option, which provided for vesting evenly over a five year period from March 6, 2009, was cancelled in exchange for a cash
 (1) payment of \$138,500 (less any applicable withholdings), which represents the product of the number of shares covered by this option multiplied by the amount per share by which the per share amount of \$3.70 exceeds the exercise price per share under this option.
- This option, which provided for vesting evenly over a five year period from March 16,2010, was cancelled in exchange for a cash
 (2) payment of \$68,250 (less any applicable withholdings), which represents the product of the number of shares covered by this option multiplied by the amount per share by which the per share amount of \$3.70 exceeds the exercise price per share under this option.

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.

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