Edgar Filing: GUARCH GUY R - Form 4

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| Form 4 | UIK | | | | | | | | | | |
|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|----------------------------------------|-------------------------------------------------|-------|------------|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|----------|--|
| October 19, 2 | | | | | | | | | OMB AI | PPROVAL | |
| FORM | FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | OMB 3235-0287 Number: January 31, 2005 Estimated average burden hours per response 0.5 | | |
| Check this if no longe subject to Section 16 Form 4 or Form 5 obligation may conti See Instru- | er STATEM 5. Filed purs ^s Section 17(a | Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | | |
| 1(b). (Print or Type R | esponses) | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> GUARCH GUY R | | | 2. Issuer Name and Ticker or Trading Symbol SYNERGETICS USA INC [SURG] | | | | C | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (M | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/19/2010 | | | | | Officer (give title Other (specify below) below) | | | |
| | | | | ndment, Date Original hth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| O'FALLON, | MO 63368 | | | | | | | | Jore than One Re | | |
| (City) | (State) | (Zip) | Table I - Nor | n-De | erivative S | ecuri | ties Acc | uired, Disposed of | f, or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | e 2A. Deemed Execution D any (Month/Day | ate, if Transa Code /Year) (Instr. | 8) | 4. Securit n(A) or Di (D) (Instr. 3, - | spose | d of | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Common Stock | 10/19/2010 | | P | · | 2,000 | A A | \$ 2.95 | 6,000 | 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. Transacti Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Under Secur | unt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------------|---------------------------------------|-------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------|----------------|----------------------------------------|-----------------------------------------------------|---------------------------------------------------------------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | | Relationships | | | | | | |
|------------------------------------------------------------|------------|---------------|---------|-------|--|--|--|--|
| hepotoling o whet i tuille / h | Director | 10% Owner | Officer | Other | | | | |
| GUARCH GUY R 3845 CORPORATE CENTR O'FALLON, MO 63368 | RE DRIVE | Х | | | | | | |
| Signatures | | | | | | | | |
| /s/ Guy Guarch | 10/19/2010 | | | | | | | |
| <u>**</u> 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).

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.