Edgar Filing: Hill Colin - Form 4

Hill Colin													
Form 4													
May 08, 2018	3												
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION										OMB APPROVAL			
	UNITED) STATES		ITIES Al hington,			NGE (COMMISSION	OMB Number:	3235-0287			
Check this box									Expires:	January 31,			
if no longe subject to	STATE	MENT O	F CHAN	IGES IN BENEFICIAL OW				NERSHIP OF		2005			
Section 16	.	SECURITIES							Estimated average burden hours per				
Form 4 or									response C				
Form 5	~ ^						-	ge Act of 1934,					
obligation may contin				•	•	• •		of 1935 or Sectio	n				
<i>See</i> Instruction 1(b).		30(h)	of the Inv	estment (Company	y Act	: of 19	40					
(Print or Type R	esponses)												
1. Name and Address of Reporting Person 2. Issuer Name and Ticker of Comparison				Ticker or T	Fradin	g	5. Relationship of Reporting Person(s) to Issuer						
Hill Colin			Symbol					Issuer					
			BIOTEL	EMETR	Y, INC. [BEA	T]	(Check all applicable)					
(Last)	(First)	(Middle)	3. Date of Earliest Transaction				(-)				
(Month/			(Month/Da	onth/Day/Year)				_X_ Director10% Owner					
			05/04/20	5/04/2018				Officer (give titleOther (specify below) below)					
SUITE 102								,					
(Street) 4. If a			4. If Amen	If Amendment, Date Original				6. Individual or Joint/Group Filing(Check					
Filed				h/Day/Year)				Applicable Line)					
								X Form filed by One Reporting Person Form filed by More than One Reporting					
MALVERN,	PA 19355							Person		epotting			
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	lecuri	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned			
1.Title of	2. Transaction Da	emed	3. 4. Securities				5. Amount of	6. Ownership	7. Nature of				
Security	(Month/Day/Yea	r) Executio	on Date, if	Code Disposed of (D)				Securities	Form: Direct	Indirect			
(Instr. 3)		any (Month/	'Day/Year)					Beneficially Owned		Beneficial Ownership			
			$(\operatorname{IISU}, 3, 4 \operatorname{all} 3)$				5)	Following		(Instr. 4)			
						(A)		Reported					
						or		Transaction(s)					
				Code V	Amount	(D)	Price	(Instr. 3 and 4)					
Common Stock	05/04/2018			А	3,191 (1)	А	\$0	16,411	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. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna 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						
1	Director	10% Owner	Officer	Other			
Hill Colin 1000 CEDAR HOLLOW RD. SUITE 102 MALVERN, PA 19355	Х						
Signatures							
/s/ Peter F. Ferola, Attorney-in-Fact	5/07/2018						
**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) Grant of restricted stock units that, subject to certain exceptions, will vest in full on the first anniversary of the grant date.

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.