Edgar Filing: LEMAITRE VASCULAR INC - Form 4

LEMAITRE Form 4 August 07, 2	EVASCULAR I	NC										
										OMB AF	PROVAL	
FORM	14 UNITED) STATES				ND EX D.C. 20		NGE CO	OMMISSION	OMB Number:	3235-0287	
Check th				0						Expires:	January 31,	
Section 16. Form 4 or			F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Estimated average burden hours per response 0.		
Form 5 obligatio may cont <i>See</i> Instru 1(b).	ns Section 17	(a) of the	Public U	tility H	Iolo	ding Cor	npan	-	Act of 1934, 1935 or Section)	1		
(Print or Type I	Responses)											
Kamke Trent G Symbol			Symbol						5. Relationship of Reporting Person(s) to Issuer			
	[LMAT]								(Check all applicable)			
				e of Earliest Transaction h/Day/Year)					Director 10% Owner Officer (give title Other (specify below) below)			
	ITRE VASCUL ECOND AVENU		08/05/2	015					below) Senior V	V. P., Operation	ns	
			nendment, Date Original					6. Individual or Joint/Group Filing(Check				
BURLING	ГОN, MA 01803	3	Filed(Mo	ntn/Day/	Y ear)			Applicable Line) _X_ Form filed by O Form filed by M Person			
(City)	(State)	(Zip)	Tab	le I - No	on-D	Derivative	Secu	rities Acqu	ired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)		ransaction Date 2A. Deemed nth/Day/Year) Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common				Code	V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	08/05/2015			М		410 <u>(1)</u>	А	\$ 11.78	28,440	D		
Common Stock	08/05/2015			S		410	D	\$ 14.1	28,030	D		
Common Stock	08/06/2015			М		7,285 (1)	А	\$ 11.78	35,315	D		
Common Stock	08/06/2015			S		7,285	D	\$ 12.848 (2)	28,030	D		

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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)

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. Number on f Derivative Securities 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)	\$ 11.78	08/05/2015		М	410	11/22/2005 <u>(3)</u>	11/22/2015	Common Stock	410
Stock Option (Right to Buy)	\$ 11.78	08/06/2015		М	7,285	11/22/2005 <u>(3)</u>	11/22/2015	Common Stock	7,285

Reporting Owners

Reporting Owner Name / Address	Relationships						
i g	Director	10% Owner	Officer	Other			
Kamke Trent G C/O LEMAITRE VASCULAR , INC. 63 SECOND AVENUE BURLINGTON, MA 01803			Senior V. P., Operations				
Signatures							
/s/ Laurie Churchill, Attorney-in-fact	08/07/2015						
**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) Represents shares acquired upon exercise of options by the Reporting Person, as reported in Table II.

The price reported in Column 4 is a weighted average price. The transaction was executed in multiple trades ranging from \$12.70 to
 (2) \$13.30. The reporting person undertakes to provide to the issuer, any securityholder of the issuer or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares and price at which the transaction was effected.

(3) This option is fully vested and exercisable.

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.