### Edgar Filing: ALLIED HEALTHCARE PRODUCTS INC - Form 4

#### ALLIED HEALTHCARE PRODUCTS INC

Form 4 June 12, 2008

### FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL** OMB

3235-0287 Number: January 31,

Expires:

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if no longer subject to Section 16. Form 4 or Form 5

obligations

Check this box

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 may continue. 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

See Instruction

A			2. Issuer Name and Ticker or Trading Symbol ALLIED HEALTHCARE PRODUCTS INC [AHPI]				ng	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)		
(Last) 35 CROSB	, , ,	Middle)	3. Date of (Month/D) 06/11/2	-	ransaction			_X Director 10% Owner Officer (give title below) Other (specify below)		
BEDFORD	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting		
								Person		
(City)	(State)	(Zip)	Tabl	le I - Non-I	Derivative	Secur	ities Acq	uired, Disposed o	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)		2. Transaction Date 2A. Deemed (Month/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)				Owned Indirect (I) Ov		
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		
Common stock	06/11/2008			M	500	A	\$ 1.875	500	D	
Common stock	06/11/2008			M	1,000	A	\$ 2.5	1,500	D	
Common stock	06/11/2008			S	500	D	\$ 6.9	1,000	D	
Common stock	06/11/2008			S	1,000	D	\$ 6.9	0	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474 (9-02)

# $\label{thm:convergence} \begin{tabular}{ll} Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned \\ (e.g., puts, calls, warrants, options, convertible securities) \end{tabular}$

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	e 3A. Deemed Execution Date, if any (Month/Day/Year)	Code			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
Option to purchase common stock	\$ 6.73						11/08/2008	11/07/2017	Common stock	1,500
Option to purchase common stock	\$ 5.24						11/16/2007	11/15/2016	Common stock	1,500
Option to purchase common stock	\$ 5.63						12/14/2006	12/13/2015	Common stock	1,500
Option to purchase common stock	\$ 6.841						11/12/2005	11/11/2014	Common stock	1,500
Option to purchase common stock	\$ 3.9						11/14/2004	11/13/2013	Common stock	1,500
Option to purchase common stock	\$ 2.9						11/15/2003	11/14/2012	Common stock	1,500
Option to purchase common	\$ 3.4						11/13/2002	11/12/2011	Common stock	1,000

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stock								
Option to purchase common stock	\$ 2.75				11/14/2001	11/13/2010	Common stock	1,000
Option to purchase common stock	\$ 2.31				11/12/2000	11/11/2009	Common stock	1,500
Option to purchase common stock	\$ 1.875	06/11/2008	M	500	04/01/2000(1)	03/31/2009	Common stock	500
Option to purchase common stock	\$ 2.5	06/11/2008	M	1,000	11/16/1999 <u>(1)</u>	11/15/2008	Common stock	1,000

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
PECK WILLIAM A 35 CROSBY DRIVE BEDFORD, MA 01730	X						

## **Signatures**

William A.
Peck, M.D.

\*\*Signature of Date

\*\*Signature of Reporting Person

## **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) Options may not be exercised for a period of one year from the date of the grant and thereafter are exercisable in full.

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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