Perseon Corp Form 3 April 14, 2015

## FORM 3

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

**OMB APPROVAL** 

**OMB** Number:

3235-0104

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES** 

January 31, Expires: 2005

Estimated average burden hours per

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

response... 0.5

(Print or Type Responses)

1. Name and Address of Reporting

Person \*

(Last)

Statement

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

Meltzer Brian A.

(First)

(Month/Day/Year) 04/01/2015

Perseon Corp [prsn]

(Middle)

4. Relationship of Reporting Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year)

24 BROAD AXE LN

(Street)

(Check all applicable)

6. Individual or Joint/Group

10% Owner Director \_X\_\_ Officer Other

Filing(Check Applicable Line) \_X\_ Form filed by One Reporting

Person

WILTON, CTÂ 06897

1. Title of Security

(Instr. 4)

(give title below) (specify below) Chief Medical Officer

Form filed by More than One

Reporting Person

(City) (State) (Zip)

> 2. Amount of Securities Beneficially Owned

(Instr. 4)

Ownership

Table I - Non-Derivative Securities Beneficially Owned

4. Nature of Indirect Beneficial

Ownership (Instr. 5)

Form: Direct (D) or Indirect (I) (Instr. 5)

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

SEC 1473 (7-02)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

(Instr. 4)

1. Title of Derivative Security (Instr. 4)

2. Date Exercisable and **Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying **Derivative Security** 

4. Conversion or Exercise Price of Derivative

Security

5. Ownership Form of Derivative Security:

6. Nature of Indirect Beneficial Ownership (Instr. 5)

Expiration Date Exercisable Date

Amount or Title

Number of Shares

Direct (D) or Indirect (I) (Instr. 5)

## **Reporting Owners**

Reporting Owner Name / Address

Director 10% Owner Officer Other

Meltzer Brian A.

24 BROAD AXE LN Â Â Â Chief Medical Officer Â

WILTON, CTÂ 06897

#### **Signatures**

Brian A. Meltzer 04/14/2015

\*\*Signature of Person Date

Reporting Person

# **Explanation of Responses:**

No securities are beneficially owned

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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.

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