Edgar Filing: CAS MEDICAL SYSTEMS INC - Form 4

CAS MEDICAL Form 4 June 26, 2014	SYSTEMS IN	ίC									
	I							OMB APPROVAL			
FORM 4	UNITEDS	URITIES A Vashington,			NGE (COMMISSION	OMB Number:	3235-0287			
Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMI		SECUR	GES IN BENEFICIAL OWNERSHIP OF SECURITIES (a) of the Securities Exchange Act of 1934.					January 31, 2005 average irs per 0.5		
obligations may continue.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).1(b).											
(Print or Type Respo	JIISES)										
1. Name and Addres THOMAS JAM	ol	uer Name and Ticker or Trading l MEDICAL SYSTEMS INC				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
	[CA	SM]				(Check an applicable)					
(Last) C/O THOMAS, PARTNERS, 60 STREET, SUITI	te of Earliest Tra th/Day/Year) 5/2014					_X_Director _X_10% Owner Officer (give titleOther (specify below) below)					
(Street) 4. If Amendment, Date Filed(Month/Day/Year)				/Year) Applicable Line) _X_Form filed by C				int/Group Filing(Check One Reporting Person Iore than One Reporting			
MINNEAPOLIS	S, MN 55402						Person	Aore than One Re	eporung		
(City)	(State) (Z	Zip)]	able I - Non-D	erivative S	Securi	ties Ac	quired, Disposed of	f, or Beneficial	lly Owned		
1.Title of Security (Instr. 3) 2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)		Code	4. Securi onAcquired Disposed (Instr. 3,	(A) of of (D 4 and (A))	SecuritiesIBeneficially(OwnedI	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Common 06 Stock 06	5/25/2014		Code V A	Amount 5,076	or (D) A	Price \$ 0 (1)	(Instr. 3 and 4)	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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
THOMAS JAMES E C/O THOMAS, MCNERNEY & PART 60 SOUTH 6TH STREET, SUITE 3620 MINNEAPOLIS, MN 55402		X	Х				
Signatures							
/s/Jeffery A. Baird Attorney-in-Fact	06/26/2	2014					
<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).
- (1) Grant of restricted common stock vesting over one year (25% every quarter)

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.