Ratton Steve W JR Form 4 March 09, 2009

#### FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

3235-0287

Expires:

January 31, 2005

Estimated average burden hours per

response... 0.5

**OMB APPROVAL** 

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 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

may continue.

1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Ratton Steve W JR Issuer Symbol **Emergency Medical Services CORP** (Check all applicable) [EMS] (Last) (First) (Middle) 3. Date of Earliest Transaction Director 10% Owner Other (specify \_X\_\_ Officer (give title . (Month/Day/Year) below) C/O EMERGENCY MEDICAL 03/05/2009 Sr. VP M&A and Treasurer SERVICES CORP., 6200 S. SYRACUSE WAY, SUITE 200 (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting **GREENWOOD** Person VILLAGE, CO 80111-4737

(City)	(State)	(Zip) Tabl	le I - Non-I	<b>Derivative</b>	Secui	rities Acqu	ired, Disposed of	, or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	· / /		5. Amount of 6. Securities Ownership Form: Direct Owned (D) or Following Indirect (I) Reported (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(msu. 4)	
Common Stock	03/05/2009		S	100	D	\$ 29.1	14,900	D	
Common Stock	03/05/2009		S	100	D	\$ 29.09	14,800	D	
Common Stock	03/05/2009		S	267	D	\$ 29.07	14,533	D	
Common Stock	03/05/2009		S	200	D	\$ 29.06	14,333	D	

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Common Stock	03/05/2009	S	332	D	\$ 29.04	14,001	D
Common Stock	03/05/2009	S	201	D	\$ 29.03	13,800	D
Common Stock	03/05/2009	S	300	D	\$ 29.01	13,500	D
Common Stock	03/05/2009	S	1,100	D	\$ 29	12,400	D
Common Stock	03/05/2009	S	110	D	\$ 28.97	12,290	D
Common Stock	03/05/2009	S	90	D	\$ 28.96	12,200	D
Common Stock	03/05/2009	S	100	D	\$ 28.92	12,100	D
Common Stock	03/05/2009	S	100	D	\$ 28.9	12,000	D
Common Stock	03/06/2009	S	100	D	\$ 30.09	11,900	D
Common Stock	03/06/2009	S	100	D	\$ 30.06	11,800	D
Common Stock	03/06/2009	S	200	D	\$ 30.035	11,600	D
Common Stock	03/06/2009	S	200	D	\$ 30.03	11,400	D
Common Stock	03/06/2009	S	100	D	\$ 30.01	11,300	D
Common Stock	03/06/2009	S	900	D	\$ 30	10,400	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.

SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exercisable and	7. Title and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orNumber	Expiration Date	Amount of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/Year)	Underlying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e	Securities	(Instr. 5)	Bene
	Derivative				Securities	S	(Instr. 3 and 4)		Own
	Security				Acquired				Follo
					(A) or				Repo

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Disposed of (D) (Instr. 3, 4, and 5)

Code V (A) (D) Date Exercisable Date

Expiration Title Amount

Number of Shares

Other

## **Reporting Owners**

**Reporting Owner Name / Address** 

Relationships

Director 10% Owner Officer

Ratton Steve W JR C/O EMERGENCY MEDICAL SERVICES CORP. 6200 S. SYRACUSE WAY, SUITE 200 GREENWOOD VILLAGE, CO 80111-4737

Sr. VP M&A and Treasurer

# **Signatures**

/s/ Steve W. Ratton, Jr.

03/09/2009

\*\*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).

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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