PRESSTEK INC /DE/

Form 4

November 02, 2004

FORM 4

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

OMB APPROVAL OMB 3235-0287

Check this box if no longer subject to

Number: January 31, Expires:

2005

Section 16. Form 4 or Form 5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Estimated average burden hours per

obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

| 1. Name and Address of Reporting Person * VENTOLA DAVID P | | | 2. Issuer Name and Ticker or Trading Symbol PRESSTEK INC /DE/ [PRST] | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
|---|--------------------------------------|----------|--|-------------------------|---|--|--|-----------|--|
| (Last) | (First) | (Middle) | 3. Date of | f Earliest T | ransaction | (Clied | ж ан аррисаон | 5) | |
| 55 EXECUT | ΓIVE DRIVE | | (Month/E 10/29/2 | • | DirectorX_ Officer (give title below) General Manag | | | | |
| (Street) | | | 4. If Amendment, Date Original | | | 6. Individual or Joint/Group Filing(Check | | | |
| HUDSON, I | NH 03051 | | Filed(Mon | nth/Day/Yea | r) | Applicable Line) _X_ Form filed by 0 Form filed by N Person | 1 0 | | |
| (City) | (State) | (Zip) | Tabl | le I - Non-l | Derivative Securities Acq | quired, Disposed o | f, or Beneficial | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Da (Month/Day/Year | | | 3. Transacti Code | 4. Securities Acquired or(A) or Disposed of (D) (Instr. 3, 4 and 5) | 5. Amount of Securities Beneficially | 6. Ownership Form: Direct (D) or | | |

(A) Transaction(s) (Instr. 3 and 4) Code V Amount (D) Price Common 10/29/2004 M 5,300 A \$ 5.05 5,300 D Stock 5,300 Common S D 10/29/2004 D Stock (1)

(Instr. 8)

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

(Month/Day/Year)

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Owned

Following

Reported

Indirect (I)

(Instr. 4)

of

Ownership

(Instr. 4)

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

 \mathbf{D}

| 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. Transactic Code (Instr. 8) | onof Derivative Securities | | 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 Options (Right to buy) | \$ 5.05 | 10/29/2004 | | M | | 5,300 | 02/20/2004 | 02/20/2013 | Common Stock | 5,300 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--------------------------------|---------------|-----------|-----------------|-------|--|--|--|
| • 0 | Director | 10% Owner | Officer | Other | | | |
| VENTOLA DAVID P | | | | | | | |
| 55 EXECUTIVE DRIVE | | | General Manager | | | | |
| HUDSON NH 03051 | | | | | | | |

Signatures

/s/ David P. Ventola, by James F. Scafide as Attorney-in-fact, dated

**Signature of Reporting Person Date

11/01/2004

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) The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person.

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.

Reporting Owners 2