Patient Safety Technologies, Inc Form 4

March 08, 2006 FORM 4

#### **OMB APPROVAL**

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16.

Washington, D.C. 20549

January 31, Expires: 2005

Form 4 or Form 5

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

Estimated average burden hours per response... 0.5

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

Campbell Alice M

Patient Safety Technologies, Inc

(Check all applicable)

[PST]

(Last)

(Middle)

(Zip)

3. Date of Earliest Transaction

\_X\_\_ Director 10% Owner Other (specify Officer (give title

(First) 1800 CENTURY PARK EAST,

STE. 200

(City)

01/25/2006

(Month/Day/Year)

(Street)

(State)

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check Applicable Line)

Filed(Month/Day/Year)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

LOS ANGELES, CA 90067

(,)	()	Table 1 - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned							
1.Title of	2. Transaction Date		3.	4. Securi			5. Amount of	6. Ownership	7. Nature of
Security (Instr. 3)	(Month/Day/Year)	any	Code	onAcquired (A) or Disposed of (D)		Securities Beneficially	Form: Direct (D) or	Indirect Beneficial	
(111511. 3)		(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4 and 5)		Owned	Indirect (I)	Ownership	
		(	(======================================				Following	(Instr. 4)	(Instr. 4)
				$(\Delta)$		Reported			
					or		Transaction(s)		
			Code V	Amount	(D)	Price	(Instr. 3 and 4)		
Common									
Stock, par	01/25/2006		A	4,500	A	\$0	29,604	D	
value \$0.33									
Common									
Common	01/05/2006		<b>A</b>	1.050	٨	Φ.Ω	20.054	Ъ	
Stock, par	01/25/2006		A	1,250	A	\$ 0	30,854	D	
value \$0.33									

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

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

#### Edgar Filing: Patient Safety Technologies, Inc - Form 4

#### 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of or Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Derivative Expiration Date Gecurities (Month/Day/Year) Acquired (A) or Disposed of D) Instr. 3, 4,		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)	\$ 4.3	01/25/2006		A	15,000	01/01/2007	01/01/2017	Common Stock	15,000

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
1	Director	10% Owner	Officer	Other		
Campbell Alice M 1800 CENTURY PARK EAST, STE. 200 LOS ANGELES, CA 90067	X					

### **Signatures**

/s/ Alice M.
Campbell

\*\*Signature of Reporting Person

O3/06/2006

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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