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CRYOLIFE INC

Form 4

April 08, 2002

UNITED STATES SECURITIES AND EXCHANGE COMMISSION WASHINGTON, D.C. 20549 FORM $4\,$

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

() Check this box if no longer subject to Section 16.

Form 4 or Form 5 obligations may continue. See Instructions 1(b).

1. Name and Address of Reporting Person

LACY, VIRGINIA C.

c/o CryoLife, Inc.

1655 Roberts Boulevard, N.W.

Kennesaw, GA 30144

USA

Issuer Name and Ticker or Trading Symbol CRYOLIFE, INC.

CRY

- 3. IRS or Social Security Number of Reporting Person (Voluntary)
- 4. Statement for Month/Year 03/06/2002
- 5. If Amendment, Date of Original (Month/Year)
- 6. Relationship of Reporting Person(s) to Issuer (Check all applicable) (X) Director () 10% Owner () Officer (give title below) () Other (specify below) Director
- 7. Individual or Joint/Group Filing (Check Applicable Line)
 - (X) Form filed by One Reporting Person
 - () Form filed by More than One Reporting Person

1. Title of Security 2. 3. 4. Securities Acquired (A) 5. Amount of	Table I Non-Derivati	ve Securities Acquired, Di	isposed of, or Benefic	ially Owned	
Date Code V Amount D Price End of Month	1. Title of Security		sposed of (D)	Securities Beneficially	
		Date Code V Amou			
	Common Stock	3-6-02 G V 5,000	D	355,280	I
				165,879	
			 	22 , 500	

Table II Derivative Securitites Acquired, Disposed of, or Beneficially Owned									
1.Title of Derivative	2.Con-	13.	4.	5.Number of I	De 6.Date Exer 7	.Title and Amount	8.P		
Security	version	Tran	saction	rivative Sec	cu cisable and	of Underlying	lof		
	or Exer	1	1	rities Acqui	i Expiration	Securities	vat		
	cise	1		red(A) or Di	is Date(Month/		Sec		
	Price of	<i>[</i>		posed of(D)	Day/Year)		rit		
	Deriva-	1	1		Date Expir		1		
	tive	1		1	A/ Exer- ation	Title and Number			

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	'	•		Amount			•			
1		I						1		

Explanation of Responses:

(1) Ms. Lacy is the beneficiary of three Trusts and an IRA in the name of her deceased spouse.

SIGNATURE OF REPORTING PERSON

/s/ Virginia C. Lacy

DATE

April 8, 2002