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CRYOLIFE INC

Form 4

September 04, 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 ELKINS, RONALD C. M.D. c/o CryoLife, Inc. 1655 Roberts Boulevard, N.W. Kennesaw, GA 30144 USA 2. 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 08/31/2002 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

Table I Non-Derivative	Securi	ties Acqu	ired, Dispos	ed of, or Bene	ficiall	y Owned	
1. Title of Security	Tran		or Dispose	Acquired (A) d of (D) A/ D	Price	5.Amount of Securities Beneficially Owned at End of Month	
Common Stock	 					43 , 250	

Table II -- Derivative Securitites Acquired, Disposed of, or Beneficially Owned

1.Title of Derivative	2.Con-	13.	4.	5.Numbe	r of De	e 6.Date Exer 7	.Title and Amount	8.P
Security	version	Trans	saction	rivati	ve Secu	cisable and	of Underlying	of
	or Exer			rities	Acqui	Expiration	Securities	vat
	cise			red(A)	or Dis	Date(Month/		Sec
	Price of			posed	of(D)	Day/Year)		rit
	Deriva-			1		Date Expir		
	tive			1	A	//Exer- ation	Title and Number	1
	Secu-			1	D	cisa- Date	of Shares	
	rity	Date	Code V	/ Amour	ıt	ble		

Stock Option |\$2.20 |08/31|A | |30,000

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Explanation of Responses: SIGNATURE OF REPORTING PERSON /s/ Ronald C. Elkins, M.D. DATE September 3, 2002