Edgar Filing: WEST MICHAEL D - Form 4

WEST MIC	HAEL D										
Form 4											
June 23, 201	1										
FORM	ЛД								OMB AF	PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMMISSION	OMB	2025 0297		
	• 1		Wa	shington	, D.C. 20	549			Number:	3235-0287	
Check th if no lon	cor								Expires:	January 31,	
subject t		AENT OI	F CHAN			ICIA	L OWN	ERSHIP OF	Estimated a	2005 Iverage	
Section		SECURITIES						burden hours per			
Form 4 o									response	0.5	
Form 5 obligatio	n a –						-	Act of 1934,			
may con				•	•	· ·		1935 or Section	l		
See Instr		30(h)	of the Ir	nvestment	Compan	y Ac	t of 1940)			
1(b).											
(Drint or Type)	Deemonaac)										
(Print or Type	Kesponses)										
1 Name and /	Address of Reporting	Person *	0 I	N	I.T. 1	т. I [.]		5 Relationship of]	Reporting Pers	son(s) to	
								5. Relationship of Reporting Person(s) to Issuer			
			Symbol BIOTH	ME INC [DTVI						
				-	-			(Check	all applicable	;)	
(Last)	(First) (I	Middle)		of Earliest Tr	ransaction						
				onth/Day/Year)				X_ Director 10% Owner X_ Officer (give title Other (specify			
1301 HARBOR BAY PARKWAY 06/22/20								below) below)			
								Chief E	xecutive Offic	er	
(Street) 4. If An			4. If Am	f Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
Filed(Mo			Filed(Mo					Applicable Line)			
							-	_X_ Form filed by O			
ALAMEDA	A, CA 94502						-	Form filed by Me Person	ore than One Re	porting	
(City)	(State)	(Zip)	T - 1	1. T. N T	.	C	•	·			
		-		le I - Non-I			-	ired, Disposed of,		ly Owned	
1.Title of	2. Transaction Date			3.				5. Amount of	6.	7. Nature of	
Security (Instr. 3)	(Month/Day/Year)	Execution any	Date, if	Transactio Code	(Instr. 3, 4			Securities Beneficially	Ownership Form:	Indirect Beneficial	
(1130.3)		(Month/D	ay/Year)	(Instr. 8)	(111501. 5, -	r anu .))	Owned	Direct (D)	Ownership	
		× ·						Following	or Indirect	(Instr. 4)	
						(A)		Reported	(I)		
						or		Transaction(s)	(Instr. 4)		
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common							\$				
Shares, no	06/22/2011			Р	10,000	А	4.3962	79,600 <u>(2)</u>	D		
par value							(1)				

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.

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

 (e.g., puts, calls, warrants, options, convertible securities)

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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)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Title Amour Underl Securit (Instr. 1	nt of ying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
WEST MICHAEL D 1301 HARBOR BAY PARKWAY ALAMEDA, CA 94502	Х		Chief Executive Officer				
Signatures							
/s/ Michael D.							

West	06/22/2011			
<u>**</u> 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).
- The price of \$4.3962 per share represents a weighted average of prices ranging from \$4.33 to \$4.43 per share. The reporting person
 (1) undertakes to provide upon request by the Commission staff, the issuer, or a security holder of the issuer, full information regarding the number of shares purchased or sold at each separate price.
- (2) Does not include shares that may be acquired upon the exercise of certain stock options.

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.