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NOVAMED Form 4											
September 1 [°]	ГЛ									PPROVAL	
		SECURITIES AND EXCHANGE COMMISSI Washington, D.C. 20549						3235-0287			
Check thi if no long subject to Section 1 Form 4 o Form 5 obligation	Section 1	SECUR 6(a) of the	ITIES e Securit	ies E	NERSHIP OF	Expires: January 31 2009 Estimated average burden hours per response 0.9					
may cont See Instru 1(b).	inue. Section 17			vestment (•	· ·		f 1935 or Sectio 40	'n		
(Print or Type F	Responses)										
1. Name and Address of Reporting Person <u>*</u> HALL THOMAS S			2. Issuer Name and Ticker or Trading Symbol NOVAMED INC [NOVA]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (0					(Chec	eck all applicable)		
980 N. MICHIGAN AVE, SUITE 1620			(Month/Day/Year) 09/14/2007					X Director 10% Owner X Officer (give title Other (specify below) below) Chairman, President & CEO			
				nendment, Date Original onth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
CHICAGO,	IL 60611							Person	More than One R	eporting	
(City)	(State)	(Zip)	Tabl	e I - Non-Do	erivative S	Securi	ities Acc	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	any		emed on Date, if /Day/Year)	3. Transactic Code (Instr. 8)	4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5) (A)		Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	or	Price	(Instr. 3 and 4)			
Common Stock	09/14/2007			Р	6,000	Α	\$ 4.64	222,811 <u>(1)</u>	D		
Common Stock	09/14/2007			Р	4,000	А	\$ 4.65	226,811 <u>(1)</u>	D		

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

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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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration I (Month/Day e	6. Date Exercisable and Expiration Date7. Title and Amount o Underlying Securities (Instr. 3 and 4)7. Title and Amount o Underlying Securities		Securities	8. Pri Deriv Secur (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Options (right to buy)	\$ 6.49					<u>(2)</u>	11/14/2015	Common Stock	250,000 (2)	
Stock Options (right to buy)	\$ 7.28					<u>(3)</u>	11/14/2016	Common Stock	125,000	
Stock Options (right to buy)	\$ 7.35					<u>(4)</u>	02/21/2017	Common Stock	250,000	

Reporting Owners

Reporting Owner Name / Address								
	Director	10% Owner	Officer	Other				
HALL THOMAS S 980 N. MICHIGAN AVE, SUITE 1620 CHICAGO, IL 60611	Х		Chairman, President & CEO					
Signatures								
/s/ John Lawrence by Power of	00/17	//2007						
Attorney **Signature of Reporting Person		72007 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).

(1) Includes 135,417 restricted shares of common stock.

(2) Subject to certain restrictions, 31,250 of these options vested on 5/14/06 with the remainder vesting approximately 5,208 per month starting on 6/14/06.

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(3) Subject to certain restrictions, 15,625 of these options vested on 5/14/07, with the remainder vesting 2,604 per month starting on 6/14/07.

(4) Subject to certain restrictions, 31,250 of these options vested on 8/21/07 with the remainder vesting 5,208 per month starting 9/21/07

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.