#### Edgar Filing: IMAGE SENSING SYSTEMS INC - Form 4

#### **IMAGE SENSING SYSTEMS INC**

Form 4

September 08, 2014

### FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB** Number:

3235-0287

Expires:

January 31, 2005

0.5

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

Estimated average burden hours per

**OMB APPROVAL** 

response...

if no longer subject to Section 16. Form 4 or Form 5

Check this box

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).

Stock

(Print or Type Responses)

1. Name and Address of Reporting Person * Fisher Melissa B			suer Name <b>and</b> ol GE SENSIN			C	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
			S]	0.5151	LIVIO	nve				
(Last)	(First) (M	,	e of Earliest Tr h/Day/Year)	ansaction			X Director Officer (given	ve title Oth	6 Owner er (specify	
1600 UNIVERSITY AVE W #500			5/2014				below)	below)		
			4. If Amendment, Date Original Filed(Month/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 Person			
ST. PAUL, MN 55104										
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1.Title of 2. Transaction Date 2A. Dee		2A. Deemed	emed 3. 4. Securities			5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Execution Date	on Date, if TransactionAcquired (A)		d (A) c	r	Securities	Form: Direct	Indirect	
(Instr. 3) any		•		Code Disposed o		1	Beneficially	(D) or	Beneficial Ownership	
		(Month/Day/Y	ar) (Instr. 8)	(Instr. 8) (Instr. 3, 4 and 5)			Owned	Indirect (I)		
							Following	(Instr. 4)	(Instr. 4)	
					(A)		Reported Transaction(s)			
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	09/05/2014		A	911	A	\$0	1,710	D		

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 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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Title a	ınd	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orNumber	Expiration Date		Amount	of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	/Year)	Underlyi	ing	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es	(Instr. 5)	Bene
	Derivative				Securities	3		(Instr. 3 a	and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
								٨٠	ma a u m t		
									mount		
						Date	Expiration	or			
						Exercisable	Date		umber		
				G 1 17	(A) (D)			of			
				Code V	(A) (D)			Sh	nares		

# **Reporting Owners**

Reporting Owner Name / Address

Director 10% Owner Officer Other

Fisher Melissa B
1600 UNIVERSITY AVE W #500 X

ST. PAUL, MN 55104

## **Signatures**

/s/ Dale E. Parker, Attorney-in-Fact for Melissa B.
Fisher

09/08/2014

\*\*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).

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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