Edgar Filing: FILTON STEVE - Form 4

FILTON ST Form 4 August 24, 2											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMM								OMB AF	PROVAL		
	UNITED	STATES S	ECURITI Washin				NGE CO	OMMISSION	OMB Number:	3235-0287	
Check th if no lor subject to Section Form 4 Form 5 obligation may cor <i>See</i> Inst 1(b).	nger to 16. or Filed pur ^{Dns} Section 17(STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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							Expires: Estimated a burden hour response	•	
(Print or Type	Responses)										
FILTON STEVE Symbo				ERSAL HEALTH SERVICES				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
367 SOUTH GULPH ROAD (Mon 08/24 (Street) 4. If A				b/24/2006 f Amendment, Date Original ed(Month/Day/Year)				Director 10% Owner _X Officer (give title Other (specify below) below) Senior Vice President & CFO			
								6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
KING OF	PRUSSIA, PA 19	406						Form filed by Mo Person	ore than One Rej	porting	
(City)	(State)	(Zip)	Table I - I	Non-D	erivative	Secur	ities Acqu	ired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Da any (Month/Day/	Code Year) (Inst	saction e r. 8)	4. Securiti or Dispose (Instr. 3, 4 Amount	ed of (5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Class B Common Stock	08/24/2006		S		20,000	D	\$ 58.7485	96,567	D		

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 Derivatives Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
FILTON STEVE 367 SOUTH GULPH ROAD KING OF PRUSSIA, PA 19406			Senior Vice President & CFO				
Signatures							
	10000						

/s/ Steve Filton 08/24/2006

<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).

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.