

LAKE SALLY

Form 4

September 06, 2002

**FORM 4**

[ ] Check this box if no longer  
subject to Section 16. Form 4 or  
Form 5 obligations may continue.  
See Instruction 1(b).

(Print or Type Responses)

**UNITED STATES SECURITIES AND EXCHANGE  
COMMISSION**

**Washington, D.C. 20549**

**STATEMENT OF CHANGES IN  
BENEFICIAL OWNERSHIP**

**OMB APPROVAL**

OMB Number 3235-0287

Expires: December 31, 2001

Estimated average burden

hours per response 0.5

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(f) of the Investment Company Act of 1940

|                                                                                        |                                                                                                                                                                                                                                                          |
|----------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Name and Address of Reporting Person*<br><br>Lake, Sally<br>(Last) (First) (Middle) | 4. Statement for Month/Year<br><br>August 6, 2002                                                                                                                                                                                                        |
| 850 - 76th Street, SW<br>(Street)                                                      | 5. If Amendment, Date of Original (Month/Year)                                                                                                                                                                                                           |
| Grand Rapids Michigan 49518<br>(City) (State) (Zip)                                    |                                                                                                                                                                                                                                                          |
| 2. Issuer Name and Ticker or Trading Symbol<br><br>Spartan Stores, Inc. ("SPTN")       | 6. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable)<br>_____ Director _____ 10% Owner<br><input checked="" type="checkbox"/> Officer (give title _____ Other (specify below)<br>below)<br>_____<br>_____ Vice President Marketing |
| 3. I.R.S. or Social Security Number of Reporting Person (Voluntary)                    | 7. Individual or Joint/Group Filing (Check Applicable Line)<br><input checked="" type="checkbox"/> Form Filed by One Reporting Person<br>_____ Form Filed by More than One Reporting Person                                                              |

**Table I -- Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

| 1. Title of Security<br>(Instr. 3) | 2. Transaction<br>Date<br>(Month/<br>Day/<br>Year) | 3. Transaction<br>Code<br>(Instr. 8) | 4. Securities Acquired (A)<br>or Disposed of (D)<br>(Instr. 3, 4 and 5) |        |            | 5. Amount of<br>Securities<br>Beneficially<br>Owned at<br>End of<br>Month<br>(Instr. 3<br>and 4) | 6. Ownership<br>Form: Di-<br>rect (D) or<br>Indirect (I)<br>(Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|------------------------------------|----------------------------------------------------|--------------------------------------|-------------------------------------------------------------------------|--------|------------|--------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|-------------------------------------------------------------------|
|                                    |                                                    | Code                                 | V                                                                       | Amount | (A) or (D) | Price                                                                                            |                                                                        |                                                                   |
| Common Stock                       | 8/06/02                                            | P                                    |                                                                         | 3,150  | A          | \$3.19                                                                                           | 12,006                                                                 | D                                                                 |
|                                    |                                                    |                                      |                                                                         |        |            |                                                                                                  |                                                                        |                                                                   |
|                                    |                                                    |                                      |                                                                         |        |            |                                                                                                  |                                                                        |                                                                   |
|                                    |                                                    |                                      |                                                                         |        |            |                                                                                                  |                                                                        |                                                                   |
|                                    |                                                    |                                      |                                                                         |        |            |                                                                                                  |                                                                        |                                                                   |
|                                    |                                                    |                                      |                                                                         |        |            |                                                                                                  |                                                                        |                                                                   |
|                                    |                                                    |                                      |                                                                         |        |            |                                                                                                  |                                                                        |                                                                   |

Edgar Filing: LAKE SALLY - Form 4

|  |  |
|--|--|
|  |  |
|--|--|

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

\* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

**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 control number.**

Form 4 (continued)

**Table II -- Derivative Securities Acquired, Disposed of, or Beneficially Owned**  
(*e.g., puts, calls, warrants, options, convertible securities*)

| 1. Title of Derivative Security<br>(Instr. 3)                 |                            | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date<br>(Month/Day/Year)    | 4. Transaction Code<br>(Instr. 8)                                                   |   | 5. Number of Derivative Securities Acquired (A) or Disposed of (D)<br>(Instr. 3, 4, and 5) |     | 6. Date Exercisable and Expiration Date<br>(Month/Day/Year) |                 |
|---------------------------------------------------------------|----------------------------|--------------------------------------------------------|--------------------------------------------|-------------------------------------------------------------------------------------|---|--------------------------------------------------------------------------------------------|-----|-------------------------------------------------------------|-----------------|
|                                                               |                            |                                                        |                                            | Code                                                                                | V | (A)                                                                                        | (D) | Date Exercisable                                            | Expiration Date |
|                                                               |                            |                                                        |                                            |                                                                                     |   |                                                                                            |     |                                                             |                 |
|                                                               |                            |                                                        |                                            |                                                                                     |   |                                                                                            |     |                                                             |                 |
|                                                               |                            |                                                        |                                            |                                                                                     |   |                                                                                            |     |                                                             |                 |
|                                                               |                            |                                                        |                                            |                                                                                     |   |                                                                                            |     |                                                             |                 |
|                                                               |                            |                                                        |                                            |                                                                                     |   |                                                                                            |     |                                                             |                 |
|                                                               |                            |                                                        |                                            |                                                                                     |   |                                                                                            |     |                                                             |                 |
|                                                               |                            |                                                        |                                            |                                                                                     |   |                                                                                            |     |                                                             |                 |
|                                                               |                            |                                                        |                                            |                                                                                     |   |                                                                                            |     |                                                             |                 |
|                                                               |                            |                                                        |                                            |                                                                                     |   |                                                                                            |     |                                                             |                 |
| 7. Title and Amount of Underlying Securities (Instr. 3 and 4) |                            |                                                        | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned at End of Month<br>(Instr. 4) |   | 10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)           |     | 11. Nature of Indirect Beneficial Ownership (Instr. 4)      |                 |
| Title                                                         | Amount of Number of Shares |                                                        |                                            |                                                                                     |   |                                                                                            |     |                                                             |                 |
|                                                               |                            |                                                        |                                            |                                                                                     |   |                                                                                            |     |                                                             |                 |
|                                                               |                            |                                                        |                                            |                                                                                     |   |                                                                                            |     |                                                             |                 |
|                                                               |                            |                                                        |                                            |                                                                                     |   |                                                                                            |     |                                                             |                 |
|                                                               |                            |                                                        |                                            |                                                                                     |   |                                                                                            |     |                                                             |                 |
|                                                               |                            |                                                        |                                            |                                                                                     |   |                                                                                            |     |                                                             |                 |
|                                                               |                            |                                                        |                                            |                                                                                     |   |                                                                                            |     |                                                             |                 |
|                                                               |                            |                                                        |                                            |                                                                                     |   |                                                                                            |     |                                                             |                 |
|                                                               |                            |                                                        |                                            |                                                                                     |   |                                                                                            |     |                                                             |                 |

Explanation of Responses:

\*\*Intentional misstatements or omissions of facts constitute Federal Criminal Violations.  
See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

By: /s/ Sally Lake\*  
\*Signature of Reporting Person  
Sally Lake  
\*Alex J. DeYonker

September 6, 2002  
Date

## Edgar Filing: LAKE SALLY - Form 4

Attorney-in-Fact

Note: File three copies of this Form, one of which must be manually signed.

If space provided 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.

---

### LIMITED POWER OF ATTORNEY

The undersigned does hereby constitute and appoint ALEX J. DEYONKER and TIMOTHY L. HORNER, or any one or more of them, his or her true and lawful attorneys and agents to do any and all acts and things and to execute and file any and all instruments that such attorneys and agents, or any of them, may consider necessary or advisable to enable the undersigned (in his or her individual capacity or in a fiduciary or other capacity) to comply with the Securities Exchange Act of 1934, as amended (the "Act"), and any requirements of the Securities and Exchange Commission in respect thereof, in connection with the preparation, execution and filing of any report or statement of beneficial ownership or changes in beneficial ownership of securities of SPARTAN STORES, INC. (the "Company") that the undersigned (in his or her individual capacity or in a fiduciary or other capacity) may be required to file pursuant to Sections 13 or 16 of the Act including, without limitation, full power and authority to sign the undersigned's name, in his or her individual capacity or in a fiduciary or other capacity, to any report, application or statement on Form ID, Forms 3, 4 or 5, Schedules 13D or 13G, or to any amendments or any successor forms thereto, or any form or forms adopted by the Securities and Exchange Commission in lieu thereof or in addition thereto, hereby ratifying and confirming all that such attorneys and agents, or any of them, shall do or cause to be done by virtue hereof.

The undersigned agrees that the attorneys-in-fact named herein may rely entirely on information furnished orally or in writing by the undersigned to such attorneys-in-fact. The undersigned also agrees to indemnify and hold harmless the attorneys-in-fact against any losses, claims, damages or liabilities (or actions in respect thereof) that arise out of or are based upon any untrue statement or omission of necessary fact in the information provided by the undersigned to the attorneys-in-fact for purposes of executing, acknowledging, delivering or filing any such forms, or any amendments or any successor forms thereto, or any form or forms adopted by the Securities and Exchange Commission in lieu thereof or in addition thereto.

This authorization shall be in addition to all prior authorizations to act for the undersigned with respect to securities of the Company in these matters.

Date: December 29, 2000

/s/ Sally Lake

---

Sally Lake