#### Edgar Filing: ALLIED HEALTHCARE PRODUCTS INC - Form 4

#### ALLIED HEALTHCARE PRODUCTS INC

Form 4

November 20, 2006

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB Number:

3235-0287

0.5

January 31, Expires: 2005

**OMB APPROVAL** 

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if no longer subject to Section 16. Form 4 or

Check this box

Form 5 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).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person \* PECK WILLIAM A

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

ALLIED HEALTHCARE PRODUCTS INC [AHPI]

(Check all applicable)

(First)

3. Date of Earliest Transaction

X Director Officer (give title

10% Owner Other (specify

35 CROSBY DRIVE

11/16/2006

(Month/Day/Year)

4. If Amendment, Date Original

Applicable Line)

\_X\_ Form filed by One Reporting Person

6. Individual or Joint/Group Filing(Check

Form filed by More than One Reporting

(Instr. 4)

Filed(Month/Day/Year)

Person

below)

BEDFORD, MA 01730

(Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of Security (Instr. 3)

(City)

2. Transaction Date 2A. Deemed (Month/Day/Year)

(Street)

(State)

Execution Date, if

(Month/Day/Year)

(Middle)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) 5. Amount of Securities Beneficially Owned

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (I)

(Instr. 4)

(A) or

Reported Transaction(s) (Instr. 3 and 4)

Following

Code V Amount (D) Price

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)

1. Title of Derivative Security

Conversion or Exercise

3. Transaction Date 3A. Deemed

(Month/Day/Year) Execution Date, if any

5. Number Transaction of Derivative Expiration Date Code Securities

6. Date Exercisable and (Month/Day/Year)

7. Title and Amount of 8 **Underlying Securities** (Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)				
				Code V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option to purchase common stock	\$ 5.24	11/16/2006		A	1,500	11/16/2007	11/15/2016	Common stock	1,500
Option to purchase common stock	\$ 5.63					12/14/2006	12/13/2015	Common stock	1,500
Option to purchase common stock	\$ 6.841					11/12/2005	11/11/2014	Common stock	1,500
Option to purchase common stock	\$ 3.9					11/14/2004	11/13/2013	Common stock	1,500
Option to purchase common stock	\$ 2.9					11/15/2003	11/14/2012	Common stock	1,500
Option to purchase common stock	\$ 3.4					11/13/2002	11/12/2011	Common stock	1,000
Option to purchase common stock	\$ 2.75					11/14/2001	11/13/2010	Common stock	1,000
Option to purchase common stock	\$ 2.31					11/12/2000	11/11/2009	Common stock	1,500
Option to purchase common stock	\$ 1.875					04/01/2000	03/31/2009	Common stock	500

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Option to purchase common stock	\$ 2.5	11/16/1999	11/15/2008	Common stock	1,000
Option to purchase common stock	\$ 7.63	11/17/1998	11/16/2007	Common stock	1,000

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
• 0	Director	10% Owner	Officer	Other		
PECK WILLIAM A 35 CROSBY DRIVE BEDFORD, MA 01730	X					

# **Signatures**

William A.
Peck, M.D.

\*\*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).
- (1) Issued pursuant to the Company's 2005 Directors' Stock Option Plan.

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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