Edgar Filing: ROSENTRATER ELDON P - Form 4

ROSENTRA' Form 4 May 24, 2011	TER ELDON P											
FORM	Δ									-	PPROVAL	
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
subject to				GES IN BENEFICIAL OWNERSHIP (SECURITIES						Expires: January 31 2005 Estimated average burden hours per response 0.5		
Form 5 obligation may contin <i>See</i> Instruct 1(b).	s Section 17	(a) of the		ility H	oldi	ing Com	pany	Act o	ge Act of 1934, f 1935 or Sectio 40			
(Print or Type R	esponses)											
ROSENTRATER ELDON P Symbol ALLIE				Issuer Name and Ticker or Trading ^{nbol} LIED HEALTHCARE ODUCTS INC [AHPI]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)(First)(Middle)3. Date of 11720 SUBLETTE AVENUE05/20/20				-					Director 10% Owner X Officer (give title Other (specify below) below) VP - Administration			
				nendment, Date Original Ionth/Day/Year)					 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
ST. LOUIS,	MO 63110								Form filed by M Person	Aore than One Ro	eporting	
(City)	(State)	(Zip)	Table	e I - Nor	1-De	rivative S	Securi	ties Aco	quired, Disposed of	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year) Execution any	emed on Date, if /Day/Year)	Code (Instr.	8)	4. Securi nAcquired Disposed (Instr. 3, Amount	l (A) c l of (D)	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)	
Common stock	05/20/2011			G	V	1,000	D	<u>(1)</u>	13,169	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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transact: Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	;	ate	1 7. Title and Amount of Underlying Securities (Instr. 3 and 4)	Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr	
			Code V	4, and 5)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	1	Relationships							
	Director	10% Owner	Officer	Other					
ROSENTRATER ELDON P 1720 SUBLETTE AVENUE ST. LOUIS, MO 63110			VP - Administration						
Signatures									
Eldon P. Rosentrater 05	6/24/2011								

<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).

(1) Transactions reported relate to charitable donations in which no price was paid or received.

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.