Edgar Filing: Arellano Mauricio - Form 4

Arellano Ma	uricio										
Form 4	010										
Check this box if no longer subject to Section 16. TATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Section 16. SECURITIES								OMB 3235-02			
(Print or Type F	Responses)										
Arellano Mauricio Symbol			r Name and Ticker or Trading FBATCH, INC. [GB]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First) (Middle)	3. Date of	Earliest Tr	ansaction			(Chec	k all applicable)	
			(Month/D 01/01/20	-				Director 10% Owner X Officer (give title Other (specify below) Sr.VP, Cardiac and Neurology			
				ndment, Date Original th/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person			
CLARENCI	E, NY 14031							Form filed by M Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	Executio any			(Instr. 3,	ispose	d 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)	Indirect Beneficial	
Common Stock	01/01/2010			Code V F	2,346	D	\$ 19.23	14,779	D		
Common Stock								2,392	I	By 401(k)	

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

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
1	Director 10% Owner Officer		Officer		Other		
Arellano Mauricio 10000 WEHRLE DRIVE CLARENCE, NY 14031			Sr.VP, Cardiac a	and Neurology			
Signatures							
/s/ Christopher J. Thome as atto Arellano	orney-in-f	fact for Mau	ricio	01/04/2010			
<u>**</u> Signature of Re	eporting Perso	on		Date			

**Signature of Reporting Person

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.