## Edgar Filing: PETMED EXPRESS INC - Form 4

PETMED EXH	PRESS INC									
Form 4	10									
August 03, 201								OMB AF	PROVAL	
FORM	RITIES AND EXCHANGE COMMISS shington, D.C. 20549				COMMISSION	OMB Number:	3235-0287			
Check this if no longer subject to Section 16. Form 4 or Form 5	SECUR	ITIES			NERSHIP OF	Expires: January 3 200 Estimated average burden hours per response 0.				
obligations may continu See Instruct 1(b).	ue. Section 17(a	suant to Section 1 a) of the Public U 30(h) of the In	tility Hold	ling Con	ipany	Act of	1935 or Section	1		
(Print or Type Res	sponses)									
	dress of Reporting I ER ROBERT C	Symbol	r Name <b>and</b>			-	5. Relationship of Issuer			
(Last)	(First) (M	Aiddle) 3. Date of	f Earliest Tr	ansaction	L		(Checl	k all applicable	)	
1441 SW 29TH AVENUE         (Month/D           07/30/20			Day/Year) 2010				X_ Director10% Owner Officer (give titleOther (specify below) below)			
			nendment, Date Original Ionth/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>			
POMPANO E	BEACH, FL 330	)69					Form filed by M Person			
(City)	(State)	(Zip) Tabl	e I - Non-D	<b>Derivative</b>	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
Security ( (Instr. 3)	2. Transaction Date Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	4. Securi on(A) or Di (Instr. 3, Amount	sposed 4 and (A) or	d of (D) 5) Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	07/30/2010		А	7,500 (1)	А	\$ 15.95	50,834	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 Derivati Security (Instr. 3	v Conversion or Exercise	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	of	er ative ities red sed 3,		ate	Amou Unde Secur	le and unt of rlying tities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (	· ·	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
SCHWEITZER ROBERT C 1441 SW 29TH AVENUE POMPANO BEACH, FL 33069	Х						
Signatures							
/s/ Robert C. 08 Schweitzer 08	/03/2010						
**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).

Issued pursuant to the terms and conditions of the PetMed Express, Inc. 2006 Employee Equity Compensation Restricted Stock Plan, and(1) held in escrow to be released ratable over a three year period condition upon continued employment. Mr. Schweitzer retains voting rights over all the shares while in escrow.

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.