Edgar Filing: Workman John L - Form 4

Workman Jol Form 4 July 02, 2008											
FORM	•						OMB APPROVAL				
	UNITED	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								3235-0287	
Check this if no long subject to Section 10 Form 4 or	er STATEN 6.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Estimated burden hou	Expires: January 31, 2005 Estimated average burden hours per response 0.5	
Form 5 obligation may conti <i>See</i> Instru 1(b).	Inue. Section 17(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									
(Print or Type R	lesponses)										
1. Name and Address of Reporting Person <u>*</u> Workman John L			2. Issuer Name and Ticker or Trading Symbol APAC CUSTOMER SERVICE INC [APAC]				-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
	(First) () CUSTOMER INC., SIX PAR	Middle) KWAY	3. Date o	of Earliest Tr Day/Year)	ransaction			X Director Officer (giv below)	ve title 0th below)	% Owner her (specify	
(Street) DEERFIELD, IL 60015			4. If Amendment, Date Original Filed(Month/Day/Year)					 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
								Person			
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Securi	ities A	cquired, Disposed	of, or Beneficia	lly Owned	
	. Transaction Date 2A. Deer Month/Day/Year) Execution any (Month/I		a Date, if TransactionAcquired (A) or S Code Disposed of (D) E Day/Year) (Instr. 8) (Instr. 3, 4 and 5) C (A) T			Securities Deneficially Covned Covned Covned Covned Covned Covned Covned Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Reminder: Repo	ort on a separate line	e for each cla	ass of sec	urities benef	ficially own	ned dir	ectly o	r 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)

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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)	ution Date, if Transactio Code		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Ar Underlying Se (Instr. 3 and 4)
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title A
Non-Qualified Stock Option (right to buy)	\$ 1.49	07/01/2008		A	12,431	07/01/2009(1)	07/01/2018	Common Stock

Reporting Owners

W C SI D S

> Р W

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
orkman John L O APAC CUSTOMER SERVICES, INC. X PARKWAY NORTH EERFIELD, IL 60015	Х						
ignatures							
amela R. Schneider, Attorney-in-Law Fact/J	07/02/2008						
**Signature of Reporting Person			Date	e			

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).

Stock option granted pursuant to the APAC Customer Services, Inc. 2005 Amended and Restated Incentive Stock Plan. Subject to a change in control of the Issuer, the options vest in three equal annual installments beginning on the first anniversary, and expire 10 years

(1) from the date of original grant, unless earlier terminated pursuant to the terms of the Plan. The options include the right of the Reporting Person to surrender shares to the Issuer in order to pay the exercise price of an option.

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.