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KENYON LAWRENCE A Form 3 January 18, 2007 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-0104

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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 Responses)

1. Name and A Person <u>*</u> KENYOI	-	-	2. Date of Event RequiringStatement(Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol ALFACELL CORP [ACEL]			
(Last)	(First)	(Middle)	01/16/2007	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)
C/O ALFACELL CORPORATION, 225 BELLEVILLE AVENUE (Street) BLOOMFIELD, NJ 07003			Director X Officer (give title belo				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)	Table I - Non-Derivative Securities Beneficially Owned				
1.Title of Secur (Instr. 4)	rity		2. Amount o Beneficially (Instr. 4)	of Securities v Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	•
No securities	s beneficia	lly owned	0		D	Â	
Reminder: Report on a separate line for each class of securities beneficiall owned directly or indirectly. Persons who respond to the collection of information contained in this form are not required to respond unless the form display currently valid OMB control number.					SEC 1473 (7-02	2)	

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	
			Derivative	Security:	

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

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Date Exercisable	Expiration Date	Title	Amount or Number of	Security	Direct (D) or Indirect
2.10101.04010	2 4.0		Shares		(I)
					(Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
KENYON LAWRENCE A C/O ALFACELL CORPORATION 225 BELLEVILLE AVENUE BLOOMFIELD, NJ 07003	Â	Â	EVP, CFO and Secretary	Â		
Signatures						
/s/ Lawrence A. 01/18/20 Kenyon	007					
<u>**</u> Signature of Date Reporting Person						

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 5(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.