HIRERIGHT INC Form 4

August 07, 2007

# FORM 4

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Check this box if no longer

subject to Section 16. Form 4 or

Form 5 obligations may continue. See Instruction STATEMENT OF CHANGES IN 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(b).

(Last)

1. Name and Address of Reporting Person \* Pickell Robert J

> (First) (Middle)

C/O HIRERIGHT, INC., 5151 CALIFORNIA AVENUE

(Street)

(State)

(Month/Day/Year)

(Zip)

2. Transaction Date 2A. Deemed

**IRVINE, CA 92617** 

(City)

1. Title of

Security

(Instr. 3)

2. Issuer Name and Ticker or Trading Symbol

HIRERIGHT INC [HIRE]

3. Date of Earliest Transaction (Month/Day/Year) 08/07/2007

4. If Amendment, Date Original

Filed(Month/Day/Year)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 3. 4. Securities

Execution Date, if TransactionAcquired (A) or Code Disposed of (D) (Month/Day/Year) (Instr. 8)

(Instr. 3, 4 and 5)

(A)

Code V Amount (D) Price

5. Relationship of Reporting Person(s) to

OMB

Number:

Expires:

response...

Estimated average

burden hours per

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

Issuer

(Check all applicable)

Director 10% Owner X\_ Officer (give title Other (specify

below) below)

VP, Product Management

6. Individual or Joint/Group Filing(Check Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting Person

> 6. Ownership 7. Nature of

Form: Direct Indirect (D) or Indirect Beneficial Ownership (T)

(Instr. 4) (Instr. 4)

Transaction(s) (Instr. 3 and 4)

5. Amount of

Securities

Owned

Beneficially

Following

Reported

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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 Conversion Security or Exercise

3. Transaction Date 3A. Deemed (Month/Day/Year)

Execution Date, if any

4. 5. Number Transaction of Derivative Expiration Date Securities Code

6. Date Exercisable and (Month/Day/Year)

7. Title and Amount of **Underlying Securities** (Instr. 3 and 4)

#### Edgar Filing: HIRERIGHT INC - Form 4

(Instr. 3) Price of Derivative Security

(Month/Day/Year) (Instr. 8) Acquired (A) or

Disposed of (D) (Instr. 3, 4, and 5)

Code V (A) (D) Date Exercisable Expiration Title

Date

or Number of

Shares

Amount

Option

(right to \$ 15 08/07/2007 A 5,555  $02/07/2008\underline{^{(2)}}$  08/06/2017 Common Stock 5,555

buy) (1)

# **Reporting Owners**

**Reporting Owner Name / Address** 

Relationships

Director 10% Owner Officer Other

Pickell Robert J C/O HIRERIGHT, INC. 5151 CALIFORNIA AVENUE IRVINE, CA 92617

VP, Product Management

#### **Signatures**

/s/ Jason R. Wisniewski, as Attorney in Fact for Robert J. Pickell

08/07/2007

\*\*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) Granted pursuant to the HireRight, Inc. 2007 Long-Term Equity Incentive Plan.

The option vests and becomes exercisable for twelve and one-half percent (12.5%) of the option shares on the date that is six months from (2) the date of grant, and the remaining option shares vest and become exercisable thereafter in a series of forty-two (42) equal monthly

(2) the date of grant, and the remaining option shares vest and become exercisable thereafter in a series of forty-two (42) equal monthly installments.

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.

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