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Clarke Virg Form 4											
April 22, 20								OMB AF	PROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							MMISSION	OMB Number:	3235-0287		
Check the check	nger		0					Expires:	January 31,		
if no longer subject to Section 16. Form 4 or							Estimated a burden hour response	•			
Form 5 obligatio may cor <i>See</i> Inst 1(b).	ons ntinue. Section 17(a) of the Pu	ction 16(a) of the ablic Utility Hol for the Investment	ding Cor	npan	y Act of 1					
(Print or Type	Responses)										
Clarke Virginia A Symb			Symbol MEDICAL PRC	Ic				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
			NC [MPW]								
(M			3. Date of Earliest Transaction				Director 10% Owner Officer (give titleX Other (specify below) Former Director				
DRIVE, SU	(Street)	1	If Amondmont D	unto Origina	.1	6	Individual or Ioi	nt/Group Filin	or Chaolt		
	Filed(Month/Day/Yea	Ionth/Day/Year) A				. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person					
BIRMING	HAM, AL 35242					Pe	_ Form filed by Mo erson	ore than One Re	porting		
(City)	(State)	(Zip)	Table I - Non-	Derivative	Secu	rities Acquir	red, Disposed of,	or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Dec (Month/Day/Year) Executi any (Month		1 、			(D)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code V	Amount	(A)or(D) Price		Transaction(s) (Instr. 3 and 4)	(Instr. 4)			
Common stock, par value \$.001	04/20/2011		D	20,000	D	\$ 11.9004	44,096	D			
Common stock, par value \$.001	04/21/2011		D	10,000	D	\$ 11.9654	34,096	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 of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transactio	5. orNumber	6. Date Exerc Expiration Da		7. Titl Amou		8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security	(monta, Day) (out)	(Month/Day/Year)	Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/ e		Under Securi	lying	Security (Instr. 5)	Secur Bene Owno 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						
	Director	10% Owner	Officer	Other			
Clarke Virginia A 1000 URBAN CENTER DRIVE SUITE 501 BIRMINGHAM, AL 35242				Former Director			
Signatures							
Alison G. Schmidt, by power of attorney		04/22/20	11				

Explanation of Responses:

**Signature of Reporting Person

* 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).

Date

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.