Edgar Filing: Augusta Gary - Form 4/A

Augusta Gar Form 4/A	У										
August 24, 2	2018										
FORM									OMB AF	PROVAL	
	UNITEI	O STATES		RITIES A shington,			NGE CO	OMMISSION	OMB Number:	3235-0287	
Check th				8	, 				Expires:	January 31,	
Section 16.				NGES IN BENEFICIAL OWNERSHIP O SECURITIES				ERSHIP OF	Estimated average burden hours per		
Form 4 o Form 5 obligatio may cont <i>See</i> Instru 1(b).	Filed pu ns Section 17	7(a) of the 1	Public U		ding Con	npany	y Act of	Act of 1934, 1935 or Section)	response	0.5	
(Print or Type l	Responses)										
Augusta Gary Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
				Medical Holdings, Inc. H]							
(Mon			(Month/I	Date of Earliest Transaction onth/Day/Year) /17/2018			_X_ Director10% Owner Officer (give titleOther (specify below)Other (specify				
1400											
	Filed(Mo			onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
GLENDAL	E, CA 91203		08/22/2	018				Form filed by M Form filed by M Person			
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secur	ities Acqu	ired, Disposed of,	or Beneficial	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year		n Date, if	3. Transactio Code (Instr. 8)		ed of ((D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	08/17/2018			Code V S	Amount 12,948	(D) D	Price \$ 18.707	(1152,997	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)

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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)	4. Transactio Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
					(Instr. 3, 4, and 5)						
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Addr	ess	Relationships							
1 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	Director	10% Owner	Officer	Other					
Augusta Gary 700 N. GRAND BLVD. SUITE 1400 GLENDALE, CA 91203	Х								
Signatures									
Gary Augusta	08/24/2018								

**Signature of

Date

_Signature of Reporting Person

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).

Remarks:

This is a correcting amendment. The transaction code for the disposition of the Issuer's common stock by the reporting person

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.