CRITICARE SYSTEMS INC /DE/

Form 4

Stock, par

November 21, 2007

November 2	1, 2007										
FORM	14				~== .	NOT	~~. • • • • • • • • • • • • • • • • • •	_	PPROVAL		
UNITED STATES SECURITIES AND EACHANGE COMMISSION									3235-0287		
Washington, D.C. 20549 Check this box								Number:	January 31,		
if no long	ger STATEN	IENT OF C	CHANCES IN	DENIER	ICT A	LOW	NERSHIP OF	Expires:	2005		
subject to		IENI OF C	HANGES IN SECUI		ICIA	LUW	NEKSHIF OF	Estimated average			
Section 1 Form 4 or			SECUI	MIIES				burden hou	•		
Form 5		suant to Sec	tion 16(a) of th	e Securit	ies F	vehane	ge Act of 1934,	response	0.5		
obligation	Section 176						f 1935 or Section	n			
may conti See Instru	inue.		the Investment	_							
1(b).	iction	. ,		•	•						
(Print or Type F	Responses)										
1. Name and A	ddress of Reporting 1	Person * 2	2. Issuer Name an o	d Ticker or	Tradii	ng	5. Relationship of	Reporting Per	son(s) to		
MOORE W	ILLIAM M	Sy	mbol	· · · · · · · · · · · · · · · · · · ·				Issuer			
	RITICARE SY CMD]	STEMS	INC .	/DE/	(Check all applicable)						
(Last)	(First) (M	Middle) 3.	Date of Earliest T	ransaction			_X_ Director		Owner		
			Ionth/Day/Year)				Officer (give below)	title Other	er (specify		
	E SYSTEMS,		1/19/2007				ocio")	ociow)			
	CROSSROADS										
CIRCLE, SU	JITE 100										
	(Street)	4.	If Amendment, D	ate Origina	1		6. Individual or Jo	oint/Group Filir	ng(Check		
		Fi	led(Month/Day/Yea	r)			Applicable Line) _X_ Form filed by 0	One Departing De	arcon.		
WALIKESH	IA, WI 53186							More than One Re			
WACKLSII	A, W1 33100						Person				
(City)	(State)	(Zip)	Table I - Non-l	Derivative	Secur	ities Ac	quired, Disposed of	f, or Beneficial	ly Owned		
1.Title of	2. Transaction Date						5. Amount of	6. Ownership			
Security	(Month/Day/Year)			ion(A) or D	ispose	ed of	Securities	Form: Direct			
(Instr. 3)		any (Month/Day	Code (Year) (Instr. 8)	(D) (Instr. 3,	4 and	5)	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(1/1011111/24)	, 10) (11.61 0)	(1115117-0)		, , ,	Following	(Instr. 4) (Instr. 4)			
					(A)		Reported				
					or		Transaction(s) (Instr. 3 and 4)				
C			Code V	7 Amount	(D)	Price	(moure and r)				
Common						¢					
Stock, par value \$.04	11/19/2007		P	1,000	A	\$ 3.31	5,949	D			
per share						3.31					
•											
Common						Ф					
Stock, par	11/20/2007		P	51	A	\$ 3.41	6,000	D			
value \$.04 per share						3.41					
•											
Common	11/20/2007		P	700	Α	\$	6,700	D			

3.41

value \$.04 per share							
Common Stock, par value \$.04 per share	11/20/2007	P	100	A	\$ 3.41	6,800	D
Common Stock, par value \$.04 per share	11/20/2007	P	100	A	\$ 3.41	6,900	D
Common Stock, par value \$.04 per share	11/20/2007	P	100	A	\$ 3.41	7,000	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.

SEC 1474 (9-02)

> 9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transac	tiorNumber	Expiration D	ate	Amou	nt of	Derivative
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8) Derivative	e		Secur	ities	(Instr. 5)
	Derivative				Securities			(Instr.	3 and 4)	
	Security				Acquired					
					(A) or					
					Disposed					
					of (D)					
					(Instr. 3,					
					4, and 5)					
									Amount	
						Date	Expiration	m: 1	or	
						Exercisable D	Date		Number	
				G 1 1	7 (4) (5)				of	
				Code V	V (A) (D)				Shares	

Reporting Owners

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
MOORE WILLIAM M CRITICARE SYSTEMS, INC. 20925 CROSSROADS CIRCLE, SUITE 100 WAUKESHA, WI 53186	X						

Reporting Owners 2

Signatures

Joel D. Knudson, Attorney-in-fact

**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).

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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