## Edgar Filing: LINDELL ANDREA R - Form 4

LINDELL	ANDREA R										
Form 4											
May 23, 20	)18										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL			
Washington, D.C. 20549							OMB Number:	3235-0287			
Check this box if no longer						Expires:	January 31,				
subject to STATEMENT OF CHANG				IGES IN BENEFICIAL OWNE				Estimated a	2005 average		
	Section 16. SECURITIES							burden hours per			
Form 4 Form 5	Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,						response	0.5			
obligat	ions Pileu pu						f 1935 or Sectio	n			
-	ontinue.		e Investme	•	-	•		11			
See Ins 1(b).	truction	50(11) 01 11	e mvestne	nt comp	Juliy 1	100 01 17	10				
-(-).											
(Print or Type	e Responses)										
1 37 1		<b>D</b> *					5 D L (* 1* 0				
					5. Relationship of Issuer	Relationship of Reporting Person(s) to suer					
	bol EMED COI		<b>C</b> 1								
			EMED CORP [CHE]				(Check all applicable)				
(Mon			Date of Earliest Transaction Month/Day/Year) 5/21/2018				X Director	100	Owner		
							_X_Director10% Owner Officer (give titleOther (specify				
2000 022		2 0512	/21/2018				below)	below)			
(Street) 4. If An				mendment, Date Original				6. Individual or Joint/Group Filing(Check			
	(Month/Day/Y	ear)			Applicable Line) _X_ Form filed by One Reporting Person						
GREENSI	BORO, NC 27455	5					Form filed by N				
ORLENS	DORO, INC 27433	,					Person				
(City)	(State)	(Zip)	Table I - Nor	n-Derivati	ive Sec	urities Acc	quired, Disposed of	f, or Beneficial	ly Owned		
1.Title of	2. Transaction Date	2A. Deemed	3.	4. Secur			5. Amount of	-			
Security	(Month/Day/Year)	Execution Date, i			-		Beneficially	Form: Direct			
(Instr. 3)		any (Month/Day/Yea	Code (Instr. 8)	(Instr. 3	, 4 and	5)		` /	Beneficial Ownership		
			, (,				Following	(Instr. 4)	(Instr. 4)		
					(A)		Reported Transaction(s)				
					or	D.'	(Instr. 3 and 4)				
conitol			Code V	Amount	t (D)	Price ¢					
capital stock	05/21/2018		A <u>(1)</u>	255	А	\$ 333.75	7,565	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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Title an	nd 8	. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	<ul> <li>Expiration D</li> </ul>	ate	Amount o	of D	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day	/Year)	Underlyin	ng S	ecurity	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivati	Derivative		Securities	s (1	Instr. 5)	Bene
	Derivative				Securiti	es		(Instr. 3 an	nd 4)		Owne
	Security				Acquire	d					Follo
	2				(A) or						Repo
					Dispose	d					Trans
					of (D)						(Instr
					(Instr. 3						
					4, and 5)						
					,	·					
				Code V	(A) (D	) Date	Expiration	Title Am	nount		
						Exercisable	Date	or			
								Nu	mber		
								of			
								Sha	ares		

## **Reporting Owners**

Reporting Owner Name / Ad	dress	Relationships							
reporting o when I when a rout out		Director	10% Owner	Officer	Other				
LINDELL ANDREA R 2008 CEDAR VIEW DRI GREENSBORO, NC 274		Х							
Signatures									
Andrea R. 05 Lindell		/23/2018							
<u>**</u> 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) Award of stock

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.