#### WOOD CONNIE J. Form 3 August 24, 2012 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB Number:

### **INITIAL STATEMENT OF 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. Name and Address of Reporting Person <u>*</u> WOOD CONNIE J.			2. Date of Event Requiring Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol MICROPAC INDUSTRIES INC [MPAD]				
(Last)	(First)	(Middle)	09/01/1984		4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)	
877 FM 294	48								
	(Street)				(Check all applicable)		6. Individual or Joint/Group		
COMO, 1	COMO, TX 75431				X_Director10% Owner OfficerOther (give title below) (specify below)		Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)		Table I - N	Non-Derivat	ive Securiti	ies Be	neficially Owned	
1.Title of Secu (Instr. 4)	urity			2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Na Owne (Instr	1	
Micropac Industries, Inc. Common Stock \$0.10 par value			6,000		D	Â			
Reminder: Rep owned directly	· -		ach class of sec	urities benefic	<sup>ially</sup> S	EC 1473 (7-02	2)		
	infor requi	mation cont ired to resp	spond to the c ained in this ond unless th MB control n	form are not le form displ	t				

#### Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of (	(Instr. 5)
		(Instr. 4)	Price of	Derivative	
		Title	Derivative	Security:	
			Security	Direct (D)	

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January 31,

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Expires:

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Estimated average burden hours per

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Date	Expiration	Amount or	or Indirect
Exercisable	Date	Number of	(I)
		Shares	(Instr. 5)

# **Reporting Owners**

Reporting Owner Name / Add	ress	Relationships					
		10% Owner	Officer	Other			
WOOD CONNIE J. 877 FM 2948 COMO, TX 75431	ÂX	Â	Â	Â			
Signatures							
/s/ Connie J. Wood	08/08/2012						
<u>**</u> Signature of Reporting Person	Date						

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, see Instruction 5(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.