Edgar Filing: INTEST CORP - Form 4

INTEST CO	RP											
Form 4												
March 08, 20	007											
FORM	14								-	PPROVAL		
	UNITE	D STATES			ND EXC D.C. 205		NGE (COMMISSION	OMB Number:	3235-0287		
Check this box if no longer subject to STATEMENT OF CHANG				GES IN BENEFICIAL OWN					Expires:	January 31,		
								NERSHIP OF	•	2005 average		
-	Section 16.				SECURITIES				Estimated average burden hours per			
Form 4 or									response 0.5			
Form 5 obligation	*						•	e Act of 1934,				
may cont	Section 1			•	•	• •		f 1935 or Sectio	n			
See Instru	uction	30(h)) of the In	vestment	Company	y Act	of 194	10				
1(b).												
(Print or Type F	Responses)											
(The of Type I	(coponses)											
1. Name and A	ddress of Reportin	ng Person *	2 Issuer	Name and	Ticker or 1	Fradin	J	5. Relationship of	elationship of Reporting Person(s) to			
GREED JAMES J JR Symbol				2. Issuer Name and Ticker or Trading /mbol VTEST CORP [INTT]				Issuer				
				Date of Earliest Transaction				(Check all applicable)				
(Last)	(Filst)	(Wildule)	(Month/D		ansaction			X Director	10%	Owner		
INTEST CC	ORP, 7 ESTERI	BROOK	03/06/20	-				Officer (give		er (specify		
LANE	,		00,00,20					below)	below)			
	(Street)		4 If Ame	ndment Da	te Original			6 Individual or Io	oint/Group Filir	or and the second se		
				If Amendment, Date Original led(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)				
			1 1100(1110)	ui, 2 uj, 1 ou	,			_X_ Form filed by 0				
CHERRY H	IILL, NJ 08003	i						Form filed by M Person	Iore than One Re	porting		
		(7.)										
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securit	ies Acq	uired, Disposed of	f, or Beneficial	ly Owned		
1.Title of	2. Transaction D	ate 2A. Dee	emed	3.	4. Securit	ies Ac	quired	5. Amount of	6. Ownership			
Security	(Month/Day/Yea	· ·	on Date, if	Transaction(A) or Disposed of				Securities	Form: Direct			
(Instr. 3)		any (Month	/Day/Year)	Code (D) (Instr. 8) (Instr. 3, 4 and 5)			Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership			
		(infoliation	(Duj) i cui)	(111541:0)	(1150.5,	i una i	,	Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported				
						or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common Stock	03/06/2007			А	10,000	А	\$0	16,000	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.

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

Reporting Owners

Reporting Owner Name / Addre	ess	Relationships							
	Director	10% Owner	Officer	Other					
GREED JAMES J JR INTEST CORP 7 ESTERBROOK LANE CHERRY HILL, NJ 08003	Х								
Signatures									
/s/ James J. Greed, Jr.	03/08/2007								

<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) The shares acquired are restricted shares issued pursuant to the Issuer's 1997 Stock Plan and will vest in increments of 25% annually commencing on March 6, 2008.

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.