PITLER DAVID

Form 4

February 23, 2010

### FORM 4

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL** OMB 3235-0287

Number: January 31, Expires:

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if no longer subject to Section 16. Form 4 or Form 5 obligations may continue.

Check this box

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

1(b).

(Print or Type Responses)

See Instruction

1. Name and Address of Reporting Person * PITLER DAVID	2. Issuer Name and Ticker or Trading Symbol BIOCLINICA INC [BIOC]	5. Relationship of Reporting Person(s) to Issuer		
(Last) (First) (Middle)  C/O BIOCLINICA, INC., 826 NEWTOWN-YARDLEY ROAD	3. Date of Earliest Transaction (Month/Day/Year) 02/19/2010	(Check all applicable)  Director Officer (give title below)  Sr. V.P., Operations		
(Street) NEWTOWN, PA 18940	4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		

(City)	(State)	Zip) Table	e I - Non-D	erivative S	Securi	ties Acq	uired, Disposed o	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securit on(A) or Dis (Instr. 3, 4)	sposed	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	02/19/2010		S	14,500 (1)	D	\$ 4.28 (1)	10,000	D	
Common stock	02/22/2010		S	2,500 (2)	D	\$ 4.21 (2)	10,000	D	
Common stock	02/22/2010		M	26,000	A	\$ 1.28	36,000	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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

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. Transactic Code (Instr. 8)	TransactionDerivative Code Securities		Derivative Expiration Date Securities (Month/Day/Year) Acquired (A) or Disposed of D) Instr. 3, 4,		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option to purchase Common Stock	\$ 1.28	02/19/2010		M		14,500	03/06/2000	03/06/2010	Common Stock	14,500
Option to purchase Common stock	\$ 1.28	02/22/2010		M		2,500	03/06/2000	03/06/2010	Common Stock	2,500
Option to purchase Common Stock	\$ 1.28	02/22/2010		M		26,000	03/06/2000	03/06/2010	Common Stock	26,000

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
• 0	Director	10% Owner	Officer	Other		
PITLER DAVID						
C/O BIOCLINICA, INC.			Sr. V.P., Operations			
826 NEWTOWN-YARDLEY ROAD			Si. v.r., Operations			
NEWTOWN, PA 18940						

## **Signatures**

/s/ Maria T. Kraus as attorney-in-fact	02/23/2010	
**Signature of Reporting Person	Date	

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### **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) Such amount represents the average closing price of the common stock sold. The breakdown is as follows: 14,500 shares at \$4.28.
- (2) Such amount represents the average closing price of the common stock sold. The breakdown is as follows: 2,500 shares at \$4.21.
- (3) Includes multiple option grants with different exercise prices and vesting dates.

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.