

HEMOSENSE INC
Form 3
June 13, 2005

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB
Number: 3235-0104
Expires: January 31,
2005
Estimated average
burden hours per
response... 0.5

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 *

Â GC TECHNOLOGY FUND
LP

(Last) (First) (Middle)

777 POST OAK
BLVD.,Â SUITE 250

(Street)

HOUSTON,Â TXÂ 77056

(City) (State) (Zip)

2. Date of Event Requiring
Statement

(Month/Day/Year)
06/13/2005

3. Issuer Name **and** Ticker or Trading Symbol
HEMOSENSE INC [HEMO]

4. Relationship of Reporting
Person(s) to Issuer

(Check all applicable)

____ Director ____X__ 10% Owner
____ Officer ____ Other
(give title below) (specify below)

5. If Amendment, Date Original
Filed(Month/Day/Year)

6. Individual or Joint/Group
Filing(Check Applicable Line)
____ Form filed by One Reporting
Person
X Form filed by More than One
Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security
(Instr. 4)

2. Amount of Securities
Beneficially Owned
(Instr. 4)

3. Ownership
Form:
Direct (D)
or Indirect
(I)
(Instr. 5)

4. Nature of Indirect Beneficial
Ownership
(Instr. 5)

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

SEC 1473 (7-02)

**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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security
(Instr. 4)

2. Date Exercisable and
Expiration Date
(Month/Day/Year)

3. Title and Amount of
Securities Underlying
Derivative Security
(Instr. 4)

4. Conversion
or Exercise
Price of
Derivative
Security

5. Ownership
Form of
Derivative
Security:
Direct (D)

6. Nature of Indirect
Beneficial Ownership
(Instr. 5)

Date
Exercisable

Expiration
Date

Title

Amount or
Number of

Edgar Filing: HEMOSENSE INC - Form 3

				Shares		or Indirect (1) (Instr. 5)	
Series B-3 Preferred Stock	Â (1)	Â (2)	Common Stock	632,911 (3)	\$ (3)	D (4)	Â
Series C-3 Preferred Stock	Â (1)	Â (2)	Common Stock	411,409 (3)	\$ (3)	D (4)	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
GC TECHNOLOGY FUND LP 777 POST OAK BLVD. SUITE 250 HOUSTON, TX 77056	Â	Â X	Â	Â
GCV Management LLC 777 POST OAK BLVD. SUITE 250 HOUSTON, TX 77056	Â	Â X	Â	Â
GELLER MARC 777 POST OAK BLVD. SUITE 250 HOUSTON, TX 77056	Â	Â X	Â	Â
Cellier Marc L 777 POST OAK BLVD. SUITE 250 HOUSTON, TX 77056	Â	Â X	Â	Â

Signatures

/s/ Marc Geller, General Partner of GCV Management
LLC

06/13/2005

__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).

(1) Immediately.

(2) Not applicable.

Pursuant to a 1-for-4 reverse stock split of the issuer's Common Stock effectuated on May 4, 2005, each share of Series B-3 and C-3 Preferred Stock will automatically convert into 0.25 shares of Common Stock immediately prior to the closing of the issuer's initial public offering to occur on or around June 17, 2005.

The reported securities are owned directly by GC Technology Fund L.P., and indirectly by GCV Management LLC, as general partner of
(4) GC Technology Fund L.P., and Marc Geller and Marc Cellier, as general partners of GCV Management LLC. GCV Management LLC, Mr. Geller and Mr. Cellier disclaim beneficial ownership of the reported securities except to the extent of their pecuniary interest therein.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure.

Edgar Filing: HEMOSENSE INC - Form 3

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.