

Leide Dominic  
Form 3  
February 05, 2013

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**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 *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â Leide Dominic		(Month/Day/Year)	SUPERIOR UNIFORM GROUP INC [SGC]	
(Last)	(First)	(Middle)	02/01/2013	
SUPERIOR UNIFORM GROUP,Â 10055 SEMINOLE BLVD.			4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
(Street)	(Check all applicable)			
	<input type="checkbox"/> Director	<input type="checkbox"/> 10% Owner		
	<input type="checkbox"/> Officer	<input checked="" type="checkbox"/> Other	6. Individual or Joint/Group Filing(Check Applicable Line)	
	(give title below) (specify below)		<input checked="" type="checkbox"/> Form filed by One Reporting Person	
	V.P. Admin & Customer Support / President of The Office Gurus		<input type="checkbox"/> Form filed by More than One Reporting Person	
SEMINOLE,Â FLÂ 33772				
(City)	(State)	(Zip)		

**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)
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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	

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				Shares		or Indirect (I) (Instr. 5)	
Common Stock <u>(1)</u>	02/08/2010	02/04/2015	Common Stock	6,000	\$ 9.8	D	Â
Stock Appreciation Rights <u>(5)</u>	02/07/2011	02/04/2016	Common Stock	3,104	\$ 11.24	D	Â
Common Stock <u>(6)</u>	02/07/2011	02/04/2016	Common Stock	8,896	\$ 11.24	D	Â
Common Stock <u>(2)</u>	02/06/2012	02/03/2017	Common Stock	7,604	\$ 13.15	D	Â
Stock Appreciation Rights <u>(7)</u>	02/06/2012	02/03/2017	Common Stock	2,396	\$ 13.15	D	Â
Common Stock <u>(3)</u>	02/04/2013	02/01/2018	Common Stock	8,857	\$ 11.29	D	Â
Stock Appreciation Rights <u>(4)</u>	02/04/2013	02/01/2018	Common Stock	1,143	\$ 11.29	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Leide Dominic SUPERIOR UNIFORM GROUP 10055 SEMINOLE BLVD. SEMINOLE, FL 33772	Â	Â	Â V.P. Admin & Customer Support	President of The Office Gurus

## Signatures

/s/ Joan Petronella, POA 02/05/2013

\*\*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) To list options granted 2/5/10
- (2) To list options granted 2/3/12
- (3) To list options granted 2/1/13
- (4) To list SARS granted 2/1/13
- (5) To list SARS granted 2/4/11
- (6) To list options granted 2/4/11

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(7) To list SARS granted 2/3/12

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.