

Edgar Filing: CRYOLIFE INC - Form 4

CRYOLIFE INC  
 Form 4  
 June 10, 2002

UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
 WASHINGTON, D.C. 20549  
 FORM 4

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

( ) Check this box if no longer subject to Section 16.  
 Form 4 or Form 5 obligations may continue. See Instructions 1(b).

1. Name and Address of Reporting Person  
 ELKINS, RONALD C. M.D.  
 c/o CryoLife, Inc.  
 1655 Roberts Boulevard, N.W.  
 Kennesaw, GA 30144  
 USA
2. Issuer Name and Ticker or Trading Symbol  
 CRYOLIFE, INC.  
 CRY
3. IRS or Social Security Number of Reporting Person (Voluntary)
4. Statement for Month/Year  
 05/08/2002
5. If Amendment, Date of Original (Month/Year)
6. Relationship of Reporting Person(s) to Issuer (Check all applicable)  
 (X) Director ( ) 10% Owner ( ) Officer (give title below) ( ) Other  
 (specify below)  
 Director
7. Individual or Joint/Group Filing (Check Applicable Line)  
 (X) Form filed by One Reporting Person  
 ( ) Form filed by More than One Reporting Person

Table I -- Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security | 2. Transaction Date | 3. Code | 4. Securities Acquired (A) or Disposed of (D) Amount | 5. Amount of Securities Beneficially Owned at End of Month |
|----------------------|---------------------|---------|--|--|
| Common Stock         | 5-8-02              | S       | 1,000  | 43,520   |

Table II -- Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Derivative Security | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date | 4. Code | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) Amount | 6. Date Exercisable and Expiration Date | 7. Title and Amount of Underlying Securities | 8. Percentage of Total Ownership |
|---------------------------------|--|---------------------|---------|---|---|--|----------------------------------|
|                                 |  |                     |         |   |   |  |                                  |

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Explanation of Responses:  
SIGNATURE OF REPORTING PERSON  
/s/ Ronald C. Elkins, M.D.  
DATE  
June 7, 2002