MOORE MEDICAL CORP Form 4 March 06, 2001

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+	DRM 4 +	U.S. SECURITIES AND EXCHAN WASHINGTON, D.C. 2					
[_]	Check this box if o longer subject STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP to Section 16.						
	Form 4 or Form 5 obligations may continue. See Instruction 1(b).	Filed pursuant to Section 16(a) Exchange Act of 1934, Section Public Utility Holding Company Section 30(f) of the Investment	n 17(a) of the 7 Act of 1935 or				
1.	Name and Address of	Reporting Person*					
	Steele,	Robert	н.				
	(Last)	(First)	(Middle)				
	138 River Road						
		(Street)					
	Essex	CT	06426				
	(City)	(State)	(Zip)				
2.	Issuer Name and Tick	er or Trading Symbol Moore Medical	. Corp. (MMD)				
3.	I.R.S. Identification (Voluntary)	n Number of Reporting Person, if an	ı Entity				
4.	Statement for Month/	Year 2/01					
5.	If Amendment, Date o	f Original (Month/Year)					
6.	Relationship of Repo	rting Person to Issuer (Check all a	upplicable)				
		Officer 10% Owner (give title below)	(specify below)				
7.		Group Filing (Check applicable line					
	_X Form filed by or Form filed by m	ne Reporting Person ore than one Reporting Person					
Tab	le INon-Derivative	Securities Acquired, Disposed of, o	or Beneficially Owned				

1. Title of Security (Instr. 3)	action ity Date r. 3) (Month/		3. Trans- action Code (Instr. 8)		* · · · · · · · · · · · · · · · · · · ·		
	Day/ Year)	Code	V	Amount	(A) or (D)	Price	End of Month (Instr. 3 a
Common Stock	2/14/01	Р		500	А	\$7.90	
	2/14/01	Р		500	A	\$7.75	
	2/14/01	Р		2,000	А	\$7.55	
	2/14/01	Р		2,000	А	\$7.35	
	2/15/01	Р		1,000	А	\$7.95	
	2/15/01	Р		5,000	А	\$8.10	
	2/16/01	Р		2,000	А	\$7.61	
	2/23/01	Р		500	А	\$7.20	
	2/23/01	Р		2,000	А	\$7.50	
	2/26/01	Р		2,500	А	\$7.20	
	2/26/01	Р		1,000	А	\$7.14	35,000

^{*} If this form is filed by more than one reporting person, see Instruction $4\,(b)\,(v)$.

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

(Print or Type Response) (Over)

FORM 4 (continued)

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

Title of Derivative	2. Conver-	3. Trans-	4. Transac-
Security (Instr. 3)	sion or	action	tion Code
	Exercise	Date	(Instr. 8)
	Price of	(Month/	
	Deriv-	Day/	
	ative	Year)	
	Security		

					_			
1. Title of Derivative	6. Date E	Exer-		d Amount of	8.	Price	9.	Numbe
Security (Instr. 3)		.e and		ng Securities		of		of De
	Expira	ition	(Instr. 3	3 and 4)		Deriv-		ative
	Date					ative		Secur
								ities
	(Month	ı/Day/				Secur-		
	(Month Year)	ı/Day/				ity		Bene-
					_	ity (Instr.		Bene- ficia
	Year)				_	ity		Bene- ficia Owned
	Year)	Expira-		Amount or Number of	_	ity (Instr.		Bene- ficia
	Year) Date	Expira- tion		Amount or	_	ity (Instr.		Bene- ficia Owned at En
	Year) Date Exer-	Expira- tion		Amount or Number of	_	ity (Instr.		Bene- ficia Owned at En
	Year) Date Exer-	Expira- tion		Amount or Number of	-	ity (Instr.		Bene- ficia Owned at En of Month
	Year) Date Exer-	Expira- tion		Amount or Number of		ity (Instr.		Bene- ficia Owned at En of Month
	Year) Date Exer-	Expira- tion		Amount or Number of	-	ity (Instr.		Bene- ficia Owned at En of Month
	Year) Date Exer-	Expira- tion		Amount or Number of	-	ity (Instr.		Bene- ficia Owned at En of Month
	Year) Date Exer-	Expira- tion		Amount or Number of		ity (Instr.		Bene- ficia Owned at En of Month
	Year) Date Exer-	Expira- tion		Amount or Number of	- 	ity (Instr.		Bene- ficia Owned at En of Month
	Year) Date Exer-	Expira- tion		Amount or Number of	- 	ity (Instr. 5)		Bene- ficia Owned at En of Month
	Year) Date Exer-	Expira- tion	Title	Amount or Number of Shares		ity (Instr. 5)		Bene- ficia Owned at En of Month (Inst
	Year) Date Exer-	Expira- tion	Title	Amount or Number of		ity (Instr. 5)		Bene- ficia Owned at En of Month (Inst
	Year) Date Exer-	Expira- tion	Title	Amount or Number of Shares		ity (Instr. 5)		Bene- ficia Owned at En of Month (Inst
	Year) Date Exer-	Expira- tion	Title	Amount or Number of Shares		ity (Instr. 5)		Bene- ficia Owned at En of Month (Inst
	Year) Date Exer-	Expira- tion	Title	Amount or Number of Shares		ity (Instr. 5)		Bene- ficia Owned at En of Month (Inst
	Year) Date Exer-	Expira- tion	Title	Amount or Number of Shares		ity (Instr. 5)		Bene- ficia Owned at En of Month (Inst
	Year) Date Exer- cisable	Expira- tion Date	Title	Amount or Number of Shares		ity (Instr. 5)		Bene- ficia Owned at En of Month (Inst
	Year) Date Exer- cisable	Expira- tion Date	Title	Amount or Number of Shares		ity (Instr. 5)		Bene- ficia Owned at En of Month (Inst
	Year) Date Exer- cisable	Expira- tion Date	Title	Amount or Number of Shares		ity (Instr. 5)		Bene- ficia Owned at En of Month (Inst
	Year) Date Exer- cisable	Expira- tion Date	Title	Amount or Number of Shares		ity (Instr. 5)		Bene- ficia Owned at En of Month (Inst
	Year) Date Exer- cisable	Expira- tion Date	Title	Amount or Number of Shares		ity (Instr. 5)		Bene- ficia Owned at En of Month (Inst

Explanation of Responses:

3/6/01
----**Signature of Reporting Person Date
Robert H. Steele

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations.

See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this form, one of which must be manually signed. If space provided is insufficient, see Instruction 6 for procedure.

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