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SIRICOMM INC
Form 3
November 22, 2002

FORM 3

U.S. SECURITIES AND EXCHANGE COMMISSION
WASHINGTON, DC 20549

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(f)
of the Investment Company Act of 1940

1. Name and Address of Reporting Person Noland Tom (Last) (First) (Middle) 2900 Davis boulevard, Suite 130 (Street) Joplin, Missouri 64804 (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 11/21/02 3. IRS or Social Security Number of Reporting Person (Voluntary)	4. Issuer Name and Ticker SiriCOMM, Inc. (f/k/a Fo 5. Relationship of Reporting Person to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) Exec. Vice President - Administration, General & Secretary
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TABLE 1 -- NON-DERIVATIVE SECURITIES BENEFICIALLY OWNED

1. Title of Security (Instr. 4) Common Stock, \$.001 par value	2. Amount of Securities Beneficially Owned (Instr. 4) 295,250	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) D
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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly

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* If the form is filed by more than one reporting person, see Instruction 5(b)(v).

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FORM 3 (CONTINUED)

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
	Date Exercisable Date	Expira- tion Date	Title
			Amount or Number of Shares

None

Explanation of Responses:

**Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

/s/ Tom N

**Signature

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

Tom Nol

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