## Edgar Filing: ST MARK CAROLE F - Form 4

ST MARK C	AROLE F											
Form 4												
August 22, 20	)11											
FORM	Δ									-	PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check this box				CHANGES IN BENEFICIAL OW						Expires:	January 31,	
									NERSHIP OF	•	2005 1 overege	
Section 16. SI					SECURITIES					Estimated average burden hours per		
	Form 4 or							response	•			
Form 5	Filed	pursuan	t to Section 16	6(a) of t	he	Securiti	es Ex	chang	ge Act of 1934,			
obligation may conti				•		•			f 1935 or Sectio	n		
See Instru		3	0(h) of the Inv	vestmen	nt C	Company	Act	of 19	40			
1(b).												
(Print or Type R	esponses)											
(i init of Type it	esponses)											
1. Name and Ad	ddress of Report	ing Perso	n <sup>*</sup> 2. Issuer	Name an	nd 1	Ficker or T	Fradin	σ	5. Relationship of	Reporting Per	son(s) to	
ST MARK CAROLE F Symbo				2. Issuer Name <b>and</b> Ticker or Trading				Б	Issuer			
				GERBER SCIENTIFIC INC [GRB]								
				(Check all applicab						k all applicable	e)	
				Date of Earliest Transaction					X Director	100	Quinor	
				(onth/Day/Year) /18/2011					_X_ Director 10% Owner Officer (give title Other (specify			
WEST		Rond	00/10/20	/11					below)	below)		
11201	(Stars at)		4 16 4	1 ( 1		0 1				·		
				If Amendment, Date Original ed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check			
Filed				th/Day/Ye	ar)				Applicable Line) _X_ Form filed by One Reporting Person			
TOLLAND,	CT 06084								Form filed by N			
rollind,	00001								Person			
(City)	(State)	(Zip)	Table	e I - Non-	De	rivative S	ecuri	ties Ac	quired, Disposed of	f, or Beneficia	lly Owned	
1.Title of	2. Transaction	Date 2A	. Deemed	3.		4. Securit	ties		5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Y		ecution Date, if	TransactionAcquired (A) or						Form: Direct	Indirect	
(Instr. 3)		any		CodeDisposed of (D)/Day/Year)(Instr. 8)(Instr. 3, 4 and 5)					Beneficially Owned		Beneficial Ownership	
		(Month/Day/Year)				(11150. 5,	4 anu	5)	Following	(Instr. 4)	(Instr. 4)	
							(1)		Reported			
							(A) or		Transaction(s)			
				Code	V	Amount	(D)	Price	(Instr. 3 and 4)			
Common	08/18/2011			А		833 (1)	٨	\$ 0	53 760 71	D		
Stock	08/18/2011			A		855 <u>(1)</u>	A	\$0	53,769.71	D		

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

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 Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. tionNumber of ) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
ST MARK CAROLE F 24 INDUSTRIAL PARK ROAD WEST TOLLAND, CT 06084	Х							
Signatures								
/s/Tracy L. Chartier, Attorney-in-Fact	08/22/20							
<u></u> Signature of Reporting Person	Date							

## Explanation of Responses:

If the form is filed by more than one reporting person, *see* Instruction 4(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) These shares were acquired under the Gerber Scientific Non-Employee Director's Stock Grant Plan.

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.