Edgar Filing: DRAUT ERIC JOHN - Form 4

DRAUT ERI	C JOHN												
Form 4													
May 24, 2012	2												
FORM	1									-	PPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287				
Check this box				5 /						Expires:	January 31,		
				GES IN BENEFICIAL OWN				OW	NERSHIP OF	•	2005		
Section 16. S				SECU	SECURITIES					Estimated average burden hours per			
Form 4 or	r									response	•		
Form 5	Filed p	oursuant to	Section 16	6(a) of the function of the	he S	Securiti	es Ex	chang	e Act of 1934,				
obligatior may conti	Section 1			•		U			f 1935 or Sectio	n			
See Instru		30(h)	of the Inv	vestmen	t C	ompany	Act	of 194	40				
1(b).													
(Drint on Type D													
(Print or Type R	(esponses)												
DRAUT ERIC JOHN Symbol				Name an	and there of thung				5. Relationship of Issuer	. Relationship of Reporting Person(s) to			
				•					155001				
Inte			Intermed	ntermec, Inc. [IN]					(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of	Earliest 7	Гran	saction			~		,		
			(Month/D	•					_X_ Director		6 Owner		
	MEC, INC., 60	001 36TH	05/22/20)12					Officer (give below)	title Othe below)	er (specify		
AVE. W													
(Street)			4. If Amer	4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
Filed				iled(Month/Day/Year)					Applicable Line)				
									X Form filed by 0 Form filed by N				
EVERETT,	WA 98203-12	.64							Person		porting		
(City)	(State)	(Zip)	Table	e I - Non-	Der	ivative S	ecurit	ies Acq	uired, Disposed of	f, or Beneficial	lly Owned		
1.Title of	2. Transaction I	Date 2A. Dee	emed	3.	4	4. Securit	ies Ac	quired	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Ye	on Date, if Transaction(A) or Disposed of						Securities	Form: Direct				
(Instr. 3)		$\frac{\text{Code} (D)}{(\text{Day}/\text{Vear}) (\text{Instr} \ 2 \ 4 \text{ and } 5)}$					5)	Beneficially (D) or Owned Indirect (I)		Beneficial Ownership			
		Day/Year) (Instr. 8) (Instr. 3, 4 and 5)))	Following		(Instr. 4)					
							()		Reported	(1115411-1)	(115117-1)		
							(A) or		Transaction(s)				
				Code	V	Amount	(D)	Price	(Instr. 3 and 4)				
Common	05/22/2012			٨	1	17,699	٨	¢ 0	52 126	D			
Stock	05/22/2012			А	((1)	А	\$0	53,126	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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
i o	Director	10% Owner	Officer	Other			
DRAUT ERIC JOHN C/O INTERMEC, INC. 6001 36TH AVE. W EVERETT, WA 98203-1264	Х						
Signatures							
By: Nancy Gallup For: Eric J. Draut		05/24/2012	2				
**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).
- Annual award of restricted stock units to director under the Company's Director Compensation Program under the 2008 Omnibus
 (1) Incentive Plan. The RSUs vest in four quarterly installments and are paid out in ordinary shares of the Company's common stock on the anniversary of the grant.

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.