Edgar Filing: INVACARE CORP - Form 4

INVACARE O	CORP								
Form 4									
January 05, 20)06								
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION						т	OMB APPROVAL		
Washington, D.C. 20549						NUMB	3235-0287		
Check this if no longer subject to Section 16. Form 4 or Form 5		F CHANGES IN BENEFICIAL OWNERSHIP O SECURITIES Section 16(a) of the Securities Exchange Act of 1934				Expires: January 31, 2005 Estimated average burden hours per response 0.5			
obligations may contin <i>See</i> Instruc 1(b).	Section 17(a)		Utility Hold	ling Com	pany Act c	of 1935 or Section	on		
(Print or Type Re	esponses)								
1. Name and Address of Reporting Person <u>*</u> LaPorte Dale C			2. Issuer Name and Ticker or Trading Symbol			5. Relationship of Reporting Person(s) to Issuer			
	INVA	CARE CO	RP [IVC]		(Check all applicable)				
(Last) ONE INVAC	(Month	3. Date of Earliest Transaction (Month/Day/Year) 01/03/2006			Director 10% Owner X Officer (give title Other (specify below) below) below) SVP and General Counsel				
			4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check			
			Ionth/Day/Year)		Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State) (Z	Zip) Ta	ble I - Non-D	erivative S	Securities Ac	quired, Disposed o	of, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code (Instr. 8)	4. Securi onAcquired Disposed (Instr. 3, Amount	(A) or l of (D) 4 and 5) (A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Shares						20,000	Ι	By Trust	

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. Transactio Code (Instr. 8)	5. Number onof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (Right to Buy)	\$ 31.65	01/03/2006		A <u>(2)</u>	8,750	03/31/2007	01/03/2016	Common Shares	8,750
Employee Stock Option (Right to Buy)	\$ 31.65	01/03/2006		A <u>(2)</u>	8,750	03/31/2008	01/03/2016	Common Shares	8,750
Employee Stock Option (Right to Buy)	\$ 31.65	01/03/2006		A <u>(2)</u>	8,750	03/31/2009	01/03/2016	Common Shares	8,750
Employee Stock Option (Right to Buy)	\$ 31.65	01/03/2006		A <u>(2)</u>	8,750	03/31/2010	01/03/2016	Common Shares	8,750

Reporting Owners

Reporting Owner Name / Addre	SS	Relationships					
	Director	10% Owner	Officer	Other			
LaPorte Dale C ONE INVACARE WAY ELYRIA, OH 44035			SVP and General Counsel				
Signatures							
/s/ Dale LaPorte	01/05/2006						
**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) Owned by Reporting Person's Profit Sharing Trust Plan.
- (2) The reporting person was granted options to purchase Common Shares (with tandem tax withholding rights) under the Invacare Corporation 2003 Performance Plan in reliance upon an exemption provided under Rule 16b-3.

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.