Edgar Filing: HAGELSTEIN DAVID A - Form 4

| HAGELSTE | IN DAVID A | | | | | | | | | | |
|--|-----------------|-----------|--|--|-----------|------------------|---|---|--|-------------|--|
| Form 4 | 2 | | | | | | | | | | |
| June 05, 201 | | | | | | | | | | PROVAL | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | OMB OMB Number: | 3235-0287 | | |
| Check th | | | vv as | inington, | D.C. 20 | 347 | | | Expires: | January 31, | |
| if no longer subject to Section 16. Form 4 or | | | | GES IN I SECUR | | CIA | L OWN | NERSHIP OF | Estimated a burden hou response | | |
| Form 5 obligation may cont <i>See</i> Instru 1(b). | ns Section 17(a | a) of the | Public Ut | | ling Con | ipany | y Act of | e Act of 1934, 1935 or Sectior 0 | 1 | | |
| (Print or Type I | Responses) | | | | | | | | | | |
| HAGELSTEIN DAVID A Symbol ROCKW | | | | r Name and Ticker or Trading WELL MEDICAL JOLOGIES INC [RMTI] | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) | | | | | - | X1VI I | 1] | DirectorX 10% Owner | | | |
| (Last) (First) (Middle) 3. Date of (Month/D: 36801 WOODWARD AVE, STE 06/05/20 313 | | | | ay/Year) | ansaction | | | Officer (give titleOther (specify below) below) | | | |
| | | | ndment, Date Original hth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | |
| BIRMINGH | IAM, MI 48009 | | | | | | | Form filed by M Person | ore than One Re | porting | |
| (City) | (State) | (Zip) | Tabl | e I - Non-D | erivative | Secur | ities Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year) | | | n Date, if | 3.4. Securities AcquiredTransaction(A) or Disposed of (D)Code(Instr. 3, 4 and 5)(Instr. 8) | | | | 5. Amount of Securities Beneficially Owned Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| | | | | Code V | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | | |
| Common Stock | 06/05/2012 | | | P | 100 | A | \$ 8.749 | 1,342,800 | D | | |
| Common Stock | 06/05/2012 | | | Р | 1,697 | А | \$ 8.75 | 1,344,497 | D | | |
| Common Stock | 06/05/2012 | | | Р | 400 | А | \$ 8.79 | 1,344,897 | D | | |
| Common | 06/05/2012 | | | Р | 3,803 | А | \$ 8.8 | 1,348,700 | D | | |

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

Stock

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Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transacti Code (Instr. 8) | 5. orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | ; | ate | Under Secur | unt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne 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 | | | | | | |
|---|---------------|-----------|---------|-------|--|--|--|
| 1 | Director | 10% Owner | Officer | Other | | | |
| HAGELSTEIN DAVID A 36801 WOODWARD AVE STE 313 BIRMINGHAM, MI 48009 | | Х | | | | | |
| Signatures | | | | | | | |
| Fred B. Green as attorney-in-fact | 00 | 6/05/2012 | | | | | |
| **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).

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.