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PROXYMED INC /FT LAUDERDALE/

Form 4

July 20, 2001

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION
WASHINGTON, D.C. 20549
FORM 4
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
( ) Check this box if no longer subject to Section 16.
Form 4 or Form 5 obligations may continue. See Instructions 1(b).
1. Name and Address of Reporting Person
  Schmid, Judson E
  1012 N.W. 105th Avenue
  Plantation, FL 33322
  USA
2. Issuer Name and Ticker or Trading Symbol
  ProxyMed, Inc.
  PILL
3. IRS or Social Security Number of Reporting Person (Voluntary)
4. Statement for Month/Year
  07/2001
5. If Amendment, Date of Original (Month/Year)
6. Relationship of Reporting Person(s) to Issuer (Check all applicable)
  ( ) Director ( ) 10% Owner (X) Officer (give title below) ( ) Other
  (specify below)
  Exec. Vice Pres. and Chief Financial Officer
7. Individual or Joint/Group Filing (Check Applicable Line)
  (X) Form filed by One Reporting Person
  ( ) Form filed by More than One Reporting Person
Table I -- Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned
                     |2. |3. |4.Securities Acquired (A) |5.Amount of
1. Title of Security
                      | Transaction | or Disposed of (D)
                                                                | Securities
                                                               | Beneficially
                      | A/|
                      1
                           | Owned at
                                                | D | Price | End of Month
                      | Date |Code|V| Amount
                                                |A |$1.00 |13,290
Common Stock, $.001 par val|7/17/0|P |V|5,000
                                                 1 1
                   |1 | | |
Table II -- Derivative Securitites Acquired, Disposed of, or Beneficially Owned
1. Title of Derivative |2.Con- |3. |4. |5. Number of De |6.Date Exer|7. Title and Amount |8.F
                  Security
                  |Sec
                                                                              |rit
                  |rity |Date |Code|V| Amount | |ble | |
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Explanation of Responses: SIGNATURE OF REPORTING PERSON Judson E. Schmid DATE July 20, 2001