Edgar Filing: BENCHIMOL CLAUDE - Form 4

BENCHIMO	OL CLAUDE											
Form 4												
November 1	8, 2008											
FORM	4		~~~~~		~ .		~			OMB AF	PROVAL	
	• • UNITED S	STATES						NGE C	OMMISSION	OMB	3235-0287	
Check th	iis box		Wa	shingt	on,	D.C. 20	549			Number:	January 31,	
if no lon	ger	IENT O	Г СНАХ	CES	IN I	PENEEI	CTA		NEDSHID OF	Expires:	2005	
subject to					GES IN BENEFICIAL OWNERS SECURITIES					Estimated a		
Form 4 c					UN				burden hours per response 0.5			
Form 5								e Act of 1934,	10000100	0.0		
obligatio	$^{\rm ns}$ Section 17(•	1935 or Section	1		
may con See Instr		30(h)	of the In	vestm	ent	Compan	y Ac	t of 194	0			
1(b).												
(Print or Type]	Responses)											
1 Name and A	Address of Reporting 1	Person *	2 Iagua	Nomo	and	Tielen on	Tradia		5. Relationship of	Reporting Pers	son(s) to	
BENCHIMOL CLAUDE Symbol			er Name and Ticker or Trading					Issuer				
			-	ROGE	N C	ORP [IV	/GN]					
(Last)	(First) (N	(liddle)				L	j		(Checl	k all applicable		
(Last)	(113) (1	nuale)		. Date of Earliest Transaction Month/Day/Year)					Director 10% Owner			
5791 VAN ALLEN WAY 11/14/2			-					X Officer (give title Other (specify				
									below) SVP. Advan	below) ced Genomic S	systems	
	(Street)		4 If Ame	ndmant	t Da	ta Origina	1				-	
				If Amendment, Date Original led(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)			
			1 nea(mo	iui/Duj/	1 cur)	, 			_X_ Form filed by C			
CARLSBA	D, CA 92008								Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)										
(City)	(State)	(Zip)	Tabl	e I - No	on-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date		1						5. Amount of	6.	7. Nature of	
Security (Instr. 3)	(Month/Day/Year)	any	n Date, if	Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)						- · · · r	Indirect Beneficial	
			/Day/Year) (Instr. 8)					Owned	(D) or	Ownership		
									Following	Indirect (I)	(Instr. 4)	
							(A)		Reported Transaction(s)	(Instr. 4)		
					• •		or	D.	(Instr. 3 and 4)			
Common				Code	V	Amount	(D)	Price				
Stock	11/14/2008	11/14/2	2008	М	V	6,000	А	\$0	28,138	D		
								¢				
Common Stock ⁽¹⁾	11/14/2008	11/14/2	2008	F	V	2,145	D	\$ 25.05	25,993	D		

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

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti 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
Restricted Stock Unit	\$ 0	11/14/2008	11/14/2008	M V	6,000	11/14/2008	11/14/2015	Common Stock	6,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
BENCHIMOL CLAUDE 5791 VAN ALLEN WAY CARLSBAD, CA 92008			SVP, Advanced Genomic Systems				
0.							

Signatures

**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) This sale conducted to cover the sales price and tax liability resulting from the vesting of a restricted stock award.
- (2) Shares exercised and sold from grant #RS1013.

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.