

SPECTRUM CONTROL INC
Form 4
December 05, 2007

FORM 4

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0287
Expires: January 31, 2005
Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
WARD BRIAN F

2. Issuer Name and Ticker or Trading Symbol
SPECTRUM CONTROL INC
[SPEC]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)
8031 AVONIA ROAD

(Street)

3. Date of Earliest Transaction
(Month/Day/Year)
12/03/2007

____ Director
 Officer (give title below) _____ 10% Owner
_____ Other (specify below)
Vice President

FAIRVIEW, PA 16415

(City) (State) (Zip)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership (Instr. 4)
			(A) or (D)	Code V	Amount	(D)	Price

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

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SEC 1474
(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any	4. Transaction Code	5. Number of Derivative Securities	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Security (Instr. 3 and 4)
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(Instr. 3)	Price of Derivative Security	(Month/Day/Year)	(Instr. 8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Options	\$ 5.05								(1)	01/31/2008	Common Stock	12,000
Options	\$ 8.68								(2)	01/19/2009	Common Stock	13,500
Options	\$ 7.6								(3)	01/19/2010	Common Stock	15,000
Non-qualified Stock Options	\$ 6.31								(4)	11/01/2010	Common Stock	30,000
Incentive Stock Options	\$ 15	12/03/2007			A		15,000		(5)	12/03/2012	Common Stock	15,000

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
WARD BRIAN F 8031 AVONIA ROAD FAIRVIEW, PA 16415			Vice President	

Signatures

John P. Leemhuis, Jr. Attorney in fact for Brian F. Ward
12/05/2007

__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) All of the options are currently exercisable
- (2) 2/3rds of the options are currently exercisable and the remaining 1/3rd are exercisable 1/19/2008.
- (3) 1/3rd of the options are currently exercisable, 1/3rd are exercisable 1/19/2008, and the remaining 1/3rd are exercisable 1/19/2009.
- (4) 1/3rd of the options are currently exercisable, 1/3rd are exercisable 11/1/2008, and the remaining 1/3rd are exercisable 11/1/2009.
- (5) 1/3rd of the options are exercisable 12/3/2009, 1/3rd are exercisable 12/3/2010, and the remaining 1/3rd are exercisable 12/3/2011.
- (6) All are granted under the Spectrum Control, Inc. Employee Stock Option Plan which is a Rule 16b-3 plan

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.