Edgar Filing: Clark Sheryl - Form 4

Clark Sheryl												
Form 4 October 05, 2	2012											
·										OMB A	PPROVAL	
FORM	UNITE	D STATES				ND EX(D.C. 20		NGE (COMMISSION	OMB Number:	3235-0287	
Check thi if no long	ter.									Expires:	January 31, 2005	
subject to STATEMENT OF CHANC Section 16.						BENEFI ITIES	[CIA]	NERSHIP OF	Estimated average burden hours per			
Form 4 or Form 5		and the second test	Section 14	f(a) of	tha	Connit	ias Es	rohono	ha A at of 1024	response	0.5	
obligation may conti <i>See</i> Instru 1(b).	ns Section 1	7(a) of the		ility H	old	ing Con	ipany	Act of	e Act of 1934, f 1935 or Section 40	n		
(Print or Type R	Responses)											
Clark Sheryl Symb			Symbol	2. Issuer Name and Ticker or Trading ymbol 'HICOS FAS INC [CHS]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of						(Chec	k all applicable	:)	
11215 MET	RO PARKWA	Y	(Month/D 10/01/20	-	.)				Director X Officer (give below) Brand Pres		Owner er (specify Proper	
				f Amendment, Date Original d(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
FORT MYE	ERS, FL 33966								Form filed by M Person	fore than One Re	porting	
(City)	(State)	(Zip)	Table	e I - Noi	n-De	erivative	Securi	ties Acq	uired, Disposed of	, or Beneficial	ly Owned	
(Instr. 3) any		ar) Executio any	emed 3. 4. Securities Acquired on Date, if Transaction(A) or Disposed of Code (D) Day/Year) (Instr. 8) (Instr. 3, 4 and 5) (A)			d of	Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)				
				Code	v	Amount	or	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	10/01/2012			А	V	282	A	\$ 16.1	150,282	D		

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. Transact Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	⁷ (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
Clark Sheryl 11215 METRO PARKWAY FORT MYERS, FL 33966			Brand President- Boston Proper						
Signatures									
David M. Oliver, Attorney in Fact		10/05/2012							
<u>**Signature of Reporting Person</u>		Date							

<u>**</u>Signature of Reporting Person

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.