Edgar Filing: Michels Douglas A - Form 4

Michels Dou	glas A											
Form 4	_											
June 24, 200	_											
FORM	14 UNITE	יה פידא דדפ	SECUD	TTIES A	ND EV(TI A N		COMMISSION		OMB APPROVAL		
-	UNITE	DSIAIES			D.C. 205		NGE (.0111115510N	OMB Number:	3235-0287		
Check thi	is box		vv as	inington,	D.C. 20.	/ - /				January 31,		
if no longer subject to STATEMENT OF CHANGES IN BENEFICIA					CIAI	LOW	NERSHIP OF	Expires:	2005			
subject to Section 1		SECURITIES							Estimated average burden hours per			
Form 4 or	r								response 0.			
Form 5 obligation	n a -	•					-	e Act of 1934,				
may cont								f 1935 or Section	n			
See Instru	uction	30(h)	of the In	vestment	Compan	y Act	of 194	10				
1(b).												
(Print or Type F	Responses)											
						•	5. Relationship of Reporting Person(s) to					
Michels Douglas A Symbol								Issuer				
				ASURE TECHNOLOGIES INC				(Check all applicable)				
			[OSUR]									
(Last)				of Earliest Transaction			_X_ Director 10% Owner _X_ Officer (give title Other (specify					
			(Month/D 06/22/20	-				below) below)				
220 11101 1	IKST STREE	1	00/22/20	505				Pres	sident & CEO			
			endment, Date Original			6. Individual or Joint/Group Filing(Check						
Filed(Mon				fonth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
BETHLEHE	EM, PA 18015	i						Form filed by M				
								Person				
(City)	(State)	(Zip)	Tabl	e I - Non-E	Derivative S	Securi	ties Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction I			3.	4. Securit			5. Amount of	6. Ownership			
Security (Instr. 3)	(Month/Day/Ye	/	on Date, if	Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)			Securities Beneficially	Form: Direct (D) or	Indirect Beneficial			
(instr. 5)		any (Month/	(Instr. 8) (Day/Year) (Instr. 8)					Owned	Indirect (I)	Ownership		
								Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported Transaction(s)				
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common							\$					
Stock	06/22/2005			F <u>(1)</u>	43,699	D	9.34	385,051	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)

Edgar Filing: Michels Douglas A - Form 4

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Tit	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr	. 3 and 4)		Owne
	Security				Acquired						Follo
	2				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						X
					4, and 5)						
					., und c)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date		Number		
						Exercisable			of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address		Rel	lationships	
	Director	10% Owner	Officer	Other
Michels Douglas A 220 EAST FIRST STREET BETHLEHEM, PA 18015	Х		President & CEO	
A				

Signatures

Mark L. Kuna, as Attorney In Fact for Douglas A. Michels (Power of Attorney previously 06/24/2005 filed)

**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).

(1) Withholding of shares to pay the tax liability associated with vesting of restricted shares.

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.

Date