Edgar Filing: TELEFLEX INC - Form 4

TELEFLEN DIC

Form 4										
February 24, 200	6									
FORM 4	UNITED	STATES					COMMISSIO	N OMB	PPROVAL 3235-0287	
Check this box		Wa	shington	Number:	January 31,					
if no longer subject to Section 16. Form 4 or Form 5 obligations Filed pursuant to Section 16(a) of the Securities Exchange Act of Section 17(a) of the Public Utility Holding Company Act of 1935						nge Act of 1934,	Estimated burden hou response	2005 average urs per		
may continue. <i>See</i> Instructior 1(b).				•	•	y Act of 1		UII		
(Print or Type Respo	onses)									
1. Name and Addres BLACK JEFFR		Person <u>*</u>	Symbol	er Name an FLEX ING		Trading	5. Relationship o Issuer	of Reporting Per eck all applicabl		
(Last) (First) (Middle) 155 S. LIMERICK ROAD			3. Date of Earliest Transaction(Month/Day/Year)02/22/2006			X Director 10% Owner X Officer (give title Other (specify below) President, CEO				
				4. If Amendment, Date Original Filed(Month/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 			
	(State)	(Zip)	Tab	ole I - Non-J	Derivative	Securities A	cquired, Disposed	of, or Beneficia	llv Owned	
	ansaction Date hth/Day/Year)	2A. Deem Execution any (Month/Da	ed Date, if	3. Transactic Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3, 4 Amount	ies (A) or of (D)	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 Indirect	
Reminder: Report or	n a separate line	e for each cl	ass of sec	urities bene	ficially own	ned directly	or indirectly.			
					inforn requir	nation cont ed to resp ys a curre	spond to the colle ained in this form ond unless the fo ntly valid OMB co	n are not rm	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	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

8 E S

Edgar Filing: TELEFLEX INC - Form 4

(Instr. 3)	Price of Derivative Security	(Month/Day/Y	ear) (Instr. 8)	Acquired (A) or Disposed (D) (Instr. 3, 4, and 5)				(
			Code V	7 (A) (I	D) Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option / (Right to Buy)	\$ 64.19	02/22/2006	A	82,709	<u>(1)</u>	02/22/2016	Common Stock	82,709

Reporting Owners

Black

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
BLACK JEFFREY P 155 S. LIMERICK ROAD LIMERICK, PA 19468-1699	Х		President, CEO				
Signatures							
Sherrie L. Hedrick with POA for Jeffrey P.			02/24/2006				

**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) Exercisable for one-third of the shares on each of February 22, 2007, 2008 and 2009.

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. rder:none">(1)The amount represents restricted stock units that vest in full on the earliest of June 13, 2019, or the date of Arena's next annual meeting of stockholders. The shares underlying the restricted stock units will be issued upon vesting of the restricted stock units.(2)The options vest in 12 equal monthly installments (except as otherwise necessary to avoid vesting of a fractional share) over one year beginning on July 13, 2018, and are exercisable once vested.

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.