

Edgar Filing: BOSHART JOSEPH - Form 4

BOSHART JOSEPH  
Form 4  
April 15, 2003

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OMB APPROVAL  
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U.S. SECURITIES AND EXCHANGE COMMISSION  
Washington, DC 20549

FORM 4

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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(f) of the Investment Company Act of 1940

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

(Print or Type Responses)

1. Name and Address of Reporting Person\*

Boshart Joseph A.  
-----  
(Last) (First) (Middle)

17801 Fieldbrook Circle W.  
-----  
(Street)  
Boca Raton, FL 33496  
-----  
(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol

Cross Country, Inc. (CCRN)

3. IRS Identification Number of Reporting Person, if an Entity (Voluntary)

4. Statement for Month/Day/Year

4/11/03

5. If Amendment, Date of Original (Month/Day/Year)

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6. Relationship of Reporting Person(s) to Issuer  
(Check all applicable)

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Director                   | <input type="checkbox"/> 10% Owner             |
| <input checked="" type="checkbox"/> Officer (give title below) | <input type="checkbox"/> Other (specify below) |

Director, President and Chief Executive Officer

7. Individual or Joint/Group Filing (Check applicable line)

- Form filed by one Reporting Person  
 Form filed by more than one Reporting Person

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Table I -- Non-Derivative Securities Acquired, Disposed of,  
or Beneficially Owned

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| 1.<br>Title of Security<br>(Instr. 3) | 2. Trans-<br>action<br>Date<br>(mm/dd/yy) | 2A.<br>Deemed<br>Execu-<br>tion<br>Date,<br>if any<br>(mm/dd/yy) | 3.<br>Transaction<br>Code<br>(Instr. 8)<br>-----<br>Code V |     | 4.<br>Securities Acquired (A) or<br>Disposed of (D)<br>(Instr. 3, 4 and 5)<br>-----<br>Amount or Price |    |     |
|---------------------------------------|---|--|--|-----|--|----|-----|
|                                       |   |  | (A)  | (D) | (A)  | or | (D) |
|                                       |   |  |  |     |  |    |     |
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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

\*If the Form is filed by more than one Reporting Person, see Instruction 4(b)(v).

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

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FORM 4 (continued)

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

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| 1.<br>Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conver-<br>sion<br>or<br>Exer-<br>cise<br>Price<br>of<br>Deriv-<br>ative<br>Secur-<br>ity | 3.<br>Trans-<br>action<br>Date<br>(Month/<br>Day/<br>Year) | 3A.<br>Deemed<br>Execution<br>Date,<br>if any<br>(Month/<br>Day/<br>Year) | 4.<br>Trans-<br>action<br>Code<br>(Instr.<br>8)<br>-----<br>Code V | 5.<br>Number of<br>Derivative<br>Securities<br>Acquired (A)<br>or Disposed<br>of (D)<br>(Instr. 3,<br>4 and 5)<br>-----<br>(A) (D) | 6.<br>Date<br>Exercisable and<br>Expiration Date<br>(Month/Day/Year)<br>-----<br>Date Expira-<br>tion | 7.<br>Title and Amount<br>of Underlying<br>Securities<br>(Instr. 3 and 4)<br>-----<br>Amount<br>or<br>Number<br>of<br>Shares | 8.<br>Pr<br>of<br>De<br>at<br>Se<br>it<br>(I<br>5) |
|--|---|--|---|--|--|---|--|--|
|--|---|--|---|--|--|---|--|--|

|  |         |         |  |   |        |             |                 |        |
|--|---------|---------|--|---|--------|-------------|-----------------|--------|
| Employee<br>Stock Option<br>(Right to Buy) | \$10.38 | 4/11/03 |  | A | 17,000 | (1) 4/11/13 | Common<br>Stock | 17,000 |
|--|---------|---------|--|---|--------|-------------|-----------------|--------|

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Explanation of Responses:

(1) The option vests in four equal annual installments beginning on April 11, 2004.

Joseph A. Boshart

/s/ Joseph A. Boshart

4/11/03

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\*\*Signature of Reporting Person  
Name of Reporting Person

-----  
Date

\*\* 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 provided 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.