Edgar Filing: HAYES WILLIAM H - Form 4

HAYES WI	LLIAM H										
Form 4	_										
May 16, 200									OMB AF	PPROVAL	
FORM	S SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB Number:	3235-0287			
Check th if no long subject to Section 1 Form 4 c	ger STATEN 16.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES									
Form 5 obligatio may com <i>See</i> Instr 1(b).	tinue. Section 17(response 0.8 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 <u>*</u> HAYES WILLIAM H			2. Issuer Name and Ticker or Trading Symbol AMERICAN PHYSICIANS					5. Relationship of Reporting Person(s) to Issuer			
				CAN PH CE GROU			1]	(Check all applicable)			
(Last) (First) (Middle) (Street)			3. Date of Earliest Transaction(Month/Day/Year)05/12/2005					Director 10% Owner X Officer (give title Other (specify below) below) Senior Vice President			
			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			
(City)	(State)	(Zip)	Tabl	e I - Non-E	Derivative	Securi	ities Acqu	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Transaction Date 2A. Deemed Ionth/Day/Year) Execution Date, if any (Month/Day/Year)			4. Securit on(A) or Dis (Instr. 3, 4	sposed and f	l of (D)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	05/12/2005			S	35,000	D	\$ 12.4	101,558	D		
Common Stock	05/16/2005			S	5,000	D	\$ 11.59	96,558	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.

Edgar Filing: HAYES WILLIAM H - Form 4

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

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. Transactio Code (Instr. 8)	Secu Secu Acqu or Di (D)	rities hired (A) isposed of r. 3, 4,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Common Stock Options	\$ 3.58	05/12/2005		М		35,000	01/25/2005	01/25/2007	Common Stock Option	35,000
Common Stock Option	\$ 4.29	05/12/2005		М		13,000	01/07/2005	01/07/2008	Common Stock Option	13,000
Common Stock Option	\$ 9.1	05/12/2005		М		6,000	12/04/2004	12/04/2008	Common Stock Option	6,000
Common Stock Option	\$ 10.12	05/12/2005		М		5,000	12/06/2004	12/06/2009	Common Stock Option	5,000

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
HAYES WILLIAM H			Senior Vice President					

Signatures

/s/ William H. Hayes 05/16/2005 **Signature of Date 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.