

STAAR SURGICAL CO
Form 3
May 02, 2005

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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 * | | 2. Date of Event Requiring Statement | 3. Issuer Name and Ticker or Trading Symbol | |
| Â ANDREWS DEBORAH J | | (Month/Day/Year) | STAAR SURGICAL CO [STAA] | |
| (Last) | (First) | (Middle) | 4. Relationship of Reporting Person(s) to Issuer | 5. If Amendment, Date Original Filed(Month/Day/Year) |
| 1911 WALKER AVENUE | | | (Check all applicable) | |
| (Street) | | | <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input checked="" type="checkbox"/> Other (give title below) (specify below) Vice President / Principal Accounting Officer | |
| MONROVIA,Â CAÂ 91016 | | | 6. Individual or Joint/Group Filing(Check Applicable Line) | |
| (City) | (State) | (Zip) | <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person | |

Table I - Non-Derivative Securities Beneficially Owned

| | | | |
|------------------------------------|--|---|--|
| 1. Title of Security (Instr. 4) | 2. Amount of Securities Beneficially Owned (Instr. 4) | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nature of Indirect Beneficial Ownership (Instr. 5) |
|------------------------------------|--|---|--|

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)

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

| | | | | | |
|---|---|--|--|--|--|
| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable and Expiration Date (Month/Day/Year) | 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) | 4. Conversion or Exercise Price of Derivative Security | 5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
| | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |

(Instr. 5)

| | | | | | | | |
|----------------------|---------------------------|------------|--------------|--------|----------|---|---|
| Common Stock Options | Â <u>(4)</u> | 09/20/2006 | Common Stock | 3,000 | \$ 6.25 | D | Â |
| Common Stock Options | Â <u>(4)</u> | 06/15/2009 | Common Stock | 10,000 | \$ 10.63 | D | Â |
| Common Stock Options | Â <u>(4)</u> | 10/10/2006 | Common Stock | 10,000 | \$ 2.15 | D | Â |
| Common Stock Options | Â <u>(1)</u> | 02/13/2008 | Common Stock | 3,000 | \$ 3.6 | D | Â |
| Common Stock Options | Â <u>(2)</u> | 02/26/2014 | Common Stock | 20,000 | \$ 7.86 | D | Â |
| Common Stock Options | 04/07/2006 ⁽³⁾ | 04/06/2015 | Common Stock | 35,000 | \$ 3.95 | D | Â |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | |
|---|---------------|-----------|------------------|------------------------------|
| | Director | 10% Owner | Officer | Other |
| ANDREWS DEBORAH J 1911 WALKER AVENUE MONROVIA,Â CAÂ 91016 | Â | Â | Â Vice President | Principal Accounting Officer |

Signatures

/s/ Deborah J. Andrews 05/02/2005

**Signature of
Reporting Person

Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 5(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) 2,000 of the options are immediately exercisable and 1,000 vest on 02/13/2006.
- (2) 6,666 of the options are immediately exercisable 6,667 vest on 02/27/2006 and 6,667 vest on 02/27/2007.
- (3) The options vest in three equal annual installments beginning on 04/04/2006.
- (4) Immediately

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.