**TELEFLEX INC** 

Form 4

September 10, 2007

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL OMB** 

3235-0287 Number:

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Form filed by More than One Reporting

Person

response... 0.5

if no longer subject to Section 16. Form 4 or

Check this box

Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

| 1. Name and A<br>BLACK JEF | -        | rting Person * | 2. Issuer Name <b>and</b> Ticker or Trading Symbol | 5. Relationship of Reporting Person(s) to Issuer |  |  |
|----------------------------|----------|----------------|--|--|--|--|
|                            |          |                | TELEFLEX INC [TFX]                                 | (Check all applicable)                           |  |  |
| (Last)                     | (First)  | (Middle)       | 3. Date of Earliest Transaction                    |  |  |  |
|                            |          |                | (Month/Day/Year)                                   | X Director 10% Owner                             |  |  |
| 155 S. LIMERICK ROAD       |          |                | 09/07/2007   | X Officer (give title Other (specify below)      |  |  |
|                            | (Ctuant) |                | 4.16.4 1 4.15.4 0.11.1                             | ,  |  |  |
|                            | (Street) |                | 4. If Amendment, Date Original                     | 6. Individual or Joint/Group Filing(Check        |  |  |
|                            |          |                | Filed(Month/Day/Year)                              | Applicable Line)                                 |  |  |
|                            |          |                |  | _X_ Form filed by One Reporting Person           |  |  |

#### LIMERICK, PA 19468-1699

(State)

(City)

| (City)                               | (State)                              | (Zip) Tabl  | le I - Non-I                           | Derivative S                                     | ecurit  | ies Acqui   | red, Disposed of,  | or Beneficiall   | y Owned   |
|--------------------------------------|--------------------------------------|---|--|--|---------|-------------|--|--|---|
| 1.Title of<br>Security<br>(Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 3.<br>Transactic<br>Code<br>(Instr. 8) | 4. Securitie on Disposed (Instr. 3, 4 and Amount | d of (D | ))          | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
| Common<br>Stock                      | 09/07/2007                           |   | M                                      | 7,000  | A       | \$<br>32.25 | 92,548   | D  |   |
| Common<br>Stock                      | 09/07/2007                           |   | A                                      | 368.501  | A       | <u>(1)</u>  | 8,726.088  | I  | By 401(k)<br>Trustee  |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5. Number tion Derivative Securities ) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) |       | ivative Expiration Date ties (Month/Day/Year) red red sed of 3, 4, |                    | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) |  | . 8<br>I |
|---|---|---|---|--|---|-------|--|--------------------|---|--|----------|
|   |   |   |   | Code V                                 | (A)   | (D)   | Date<br>Exercisable  | Expiration<br>Date | Title   | Amount<br>or<br>Number<br>of<br>Shares |          |
| Stock<br>Option<br>(Right /<br>to Buy)              | \$ 32.25  | 09/07/2007                              |   | M                                      |   | 7,000 | 09/15/2000   | 09/15/2007         | Common<br>Stock   | 7,000                                  |          |

## **Reporting Owners**

| Reporting Owner Name / Address                                     | Relationships |           |                                |       |  |  |  |  |
|--|---------------|-----------|--------------------------------|-------|--|--|--|--|
| • 0  | Director      | 10% Owner | Officer                        | Other |  |  |  |  |
| BLACK JEFFREY P<br>155 S. LIMERICK ROAD<br>LIMERICK, PA 19468-1699 | X             |           | Chairman,<br>President,<br>CEO |       |  |  |  |  |

## **Signatures**

Sherrie L. Hedrick with POA for Jeffrey P.

Black

09/10/2007

\*\*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) Total number of shares of Common Stock held by Reporting Person indirectly by the 401(K) Trustee is based on a plan statement as of September 7, 2007.

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.

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