#### LUBSEN SIGISMUNDUS W W

Form 4 May 04, 2009

### FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB APPROVAL

Number: 3235-0287

Sypiron: January 31,

Expires: 2005
Estimated average

0.5

burden hours per response...

5 Relationship of Reporting Person(s) to

Section 16. Form 4 or Form 5 obligations may continue.

Check this box

if no longer

subject to

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

See Instruction 30(n) of the Investment Comp

1(b).

Common

Stock

(Print or Type Responses)

1 Name and Address of Reporting Person \*

05/01/2009

LUBSEN SIGISMUNDUS W W			Symbol TELEFLEX INC [TFX]				Issuer (Check all applicable)			
(Last)	(First) (I	Middle)	3. Date of Earliest Transaction				(5	<b>F</b> F	-,	
			(Month/Da	ay/Year)		_	_X_ Director	10%	6 Owner	
KONIJNENLAAN 39, 2243 EN WASSENAAR			05/01/2009				Officer (give pelow)	e title Other (specify below)		
(Street)			4. If Amendment, Date Original			6	6. Individual or Joint/Group Filing(Check			
			Filed(Mont	h/Day/Year)			Applicable Line) X_ Form filed by	1 0		
THE NETI	HERLANDS					F	Form filed by I Person	More than One Ro	eporting	
(City)	(State)	(Zip)	Table	I - Non-De	erivative Securities	Acqui	ired, Disposed o	of, or Beneficia	lly Owned	
1.Title of	2. Transaction Dat	e 2A. Deen	ned	3.	4. Securities	5.	Amount of	6. Ownership	7. Nature o	
Security	(Month/Day/Year)	) Execution	Execution Date, if		onAcquired (A) or	Se	ecurities	Form: Direct	Indirect	
(Instr. 3)		any		Code	Disposed of (D)	В	eneficially	(D) or	Beneficial	
		(Month/D	ay/Year)	(Instr. 8)	(Instr. 3, 4 and 5)	O	wned	Indirect (I)	Ownership	
						Fo	ollowing	(Instr. 4)	(Instr. 4)	
					(A)	R	eported			
					(A)	T	ransaction(s)			

Code V Amount

1,170

A

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.

SEC 1474

(9-02)

(Instr. 3 and 4)

D

5,892

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

or

(D)

Price

(1)

#### Edgar Filing: LUBSEN SIGISMUNDUS W W - Form 4

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Titl		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration D	ate	Amou	ınt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative		•		Securities	3		(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(2.11541
					4, and 5)						
					i, and 3)						
									Amount		
						Data	Evaluation		or		
						Date	Expiration	Title	Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
•	Director	10% Owner	Officer	Other			
LUBSEN SIGISMUNDUS W W KONIJNENLAAN 39 2243 EN WASSENAAR THE NETHERLANDS	X						

# **Signatures**

Sherrie L. Hedrick with POA for Reporting
Person 05/04/2009

\*\*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) Restricted stock award granted pursuant to the Teleflex Incorporated 2000 Stock Compensation Plan. Shares vest on November 1, 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.

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