Edgar Filing: AYERS JASON C - Form 4

AYERS JASO	ON C										
Form 4											
August 01, 20	012										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL		
	■ UNITE	ED STATES					NGE	COMMISSION		3235-0287	
Check this box Washington, D.C. 20549							Number:	nber: January 31			
if no longe		EMENT O			DENIDEL	CTAI			Expires:	January 31, 2005	
subject to STATEMENT OF CHAN				GES IN BENEFICIAL OWNERSHIP OF					Estimated average		
Section 16 Form 4 or		SECURITIES						burden hours per			
Form 5		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,						response	0.5		
obligation	^s Section	-					-	of 1935 or Section	n		
may contin See Instru	nue.) of the Inv	•	•						
1(b).	ction	. ,			1.						
(Print or Type R	esponses)										
1 Nama and A	dress of Report	ing Domon *						5 Deletionship e	f Donostin a Dos	non(a) to	
AYERS JAS	2. Issuer Name and Ticker or Trading				g	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
		Symbol FULLNET COMMUNICATIONS									
			INC [FULO]							110	
(Last)	(First)	(Middle)	-	-	ngation			Director	100	6 Owner	
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)					X Officer (give title Other (specify			
201 ROBER	T S KERR A	VE STE	07/30/20	-				below) Vice Pr	below) esident Operati	one	
210								vice II	esident Operati	10115	
	(Street)		4. If Amer	ndment, Dat	te Original			6. Individual or J	oint/Group Fili	ng(Check	
				th/Day/Year)	-			Applicable Line)			
								X Form filed by			
OKLAHOM	A CITY, OK	73102						Form filed by M Person	More than One R	eporting	
(City)	(State)	(Zip)	Table	I Non D	orivotivo S	ocuri	tios A a	quired, Disposed o	f or Bonoficio	lly Ownod	
	от <i>(</i> ;						ues Ac			-	
1.Title of Security	2. Transaction (Month/Day/Y			3. Transactio	4. Securit onAcquired		r	5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect	
(Instr. 3)	(monul, Duj) 1	any	on Dute, n	Code	Disposed			Beneficially	(D) or	Beneficial	
		(Month/Day/Year)			(Instr. 8) (Instr. 3, 4 and 5)					Ownership	
								Following Reported	(Instr. 4)	(Instr. 4)	
						(A)		Transaction(s)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common					mount		11100	505 505	D		
Stock								505,795	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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

Edgar Filing: AYERS JASON C - Form 4

1. Title of Derivative2.Derivative SecurityConversion or Exercise(Instr. 3)Price of Derivative Security	a	Execution Date, if T any C	4. 5. Number of TransactiorDerivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of 8 Underlying Securities (Instr. 3 and 4)		8 I S (
Stock Option \$ 0.003	07/30/2012		Code V A	(A) 30,000	(D)	Date Exercisable	Expiration Date 07/30/2022	Title Common Stock	Amount or Number of Shares 30,000	

Reporting Owners

Reporting Owner Name / Address					
	reporting officer (and) readeds		10% Owner	Officer	Other
AYERS JASON C 201 ROBERT S KERR AV OKLAHOMA CITY, OK 7				Vice President Operations	
Signatures					
Jason C Ayers	08/01/2012				

Jason C Ayers
<u>**Signature of</u>

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).

(1) 10,000 7/30/2013 10,000 7/30/2014 10,000 7/30/2015

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.

8 E S