REFLECT SCIENTIFIC INC Form 3 October 04, 2007 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-0104

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 <u>*</u> Strate David Scott			2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol REFLECT SCIENTIFIC INC [rscf]				
(Last)	(First)	(Middle)	10/01/2007	4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)		
1270 S 1380	0 W							
(Street) OREM, UT 84058				(Check all applicable)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 	
					Director10% Owner OfficerOther Ide below) (specify below) CFO			
(City)	(State)	(Zip)	Table I - N	lon-Derivat	ive Securiti	ies Be	neficially Owned	
1.Title of Security (Instr. 4)			Beneficially Owned Ownership			ture of Indirect Beneficial ership . 5)		
Reminder: Rep owned directly			ach class of securities benefic	ially S	EC 1473 (7-02	2)		
	inforr requi	mation cont red to respo	pond to the collection of ained in this form are not ond unless the form displ MB control number.					
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		4. Conversion or Exercise	5. Ownership Form of	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	(Instr. 4) Title	Amount or Number of Shares	Price of Derivative Security	Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

Reporting Owners

Reporting Owner Name / Add	ress	Relationships					
		10% Owner	Officer	Other			
Strate David Scott 1270 S 1380 W OREM, UT 84058	Â	Â	CFO	Â			
Signatures							
/s/David S Strate	10/04/2007						
<u>**</u> Signature of Reporting Person	Date						

Explanation of Responses:

No securities are beneficially owned

* 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).

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.