

ARRHYTHMIA RESEARCH TECHNOLOGY INC /DE/
 Form 4
 December 06, 2012

FORM 4

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

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN 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 *
GARRISON DAVID A

2. Issuer Name and Ticker or Trading Symbol
ARRHYTHMIA RESEARCH TECHNOLOGY INC /DE/ [HRT]

5. Relationship of Reporting Person(s) to Issuer
 (Check all applicable)
 Director 10% Owner
 Officer (give title below) Other (specify below)
 Chief Financial Officer

(Last) (First) (Middle)

C/O ARRHYTHMIA RESEARCH TECHNOLOGY INC., 25 SAWYER PASSWAY

(Street)

3. Date of Earliest Transaction (Month/Day/Year)
12/05/2012

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

FITCHBURG, MA 01420

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership (Instr. 4)
			Code	V	Amount or Price (A) or (D)		
Common Stock	12/05/2012	12/05/2012	A		488 A \$ 2.25	18,088	I see footnote 1 (1)
Common Stock	12/05/2012	12/05/2012	A		100 A \$ 2.46	18,188	I See Footnote 1 (1)
Common Stock	12/05/2012	12/05/2012	A		100 A \$ 2.47	18,288	I See Footnote 1 (1)

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Common Stock	12/05/2012	12/05/2012	A	20	A	\$ 2.5	18,308	I	See Footnote 1 (1)
Common Stock	12/05/2012	12/05/2012	A	200	A	\$ 2.51	18,508	I	See Footnote 1 (1)
Common Stock	12/05/2012	12/05/2012	A	1,205	A	\$ 2.53	19,713	I	See Footnote 1 (1)
Common Stock	12/05/2012	12/05/2012	A	1,887	A	\$ 2.55	21,600	I	See Footnote 1 (1)
Common Stock	12/06/2012	12/06/2012	A	300	A	\$ 2.57	21,900	I	See Footnote 1 (1)
Common Stock	12/06/2012	12/06/2012	A	100	A	\$ 2.58	22,000	I	See Footnote 1 (1)
Common Stock	12/06/2012	12/06/2012	A	1,600	A	\$ 2.58	23,600	I	See Footnote 1 (1)

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

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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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities 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 Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned (Instr. 6)
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
GARRISON DAVID A C/O ARRHYTHMIA RESEARCH TECHNOLOGY INC. 25 SAWYER PASSWAY FITCHBURG, MA 01420			Chief Financial Officer	

Signatures

David A.
Garrison

12/06/2012

**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) Shares are in the IRA of David Garrison or his wife for which he has power of attorney.

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.