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BIERMAN JAMES L

Form 3 June 21, 2007

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

SECURITIES

response... 0.5

(Print or Type Responses)

1. Name and Add BIERMAN	^	_	2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol OWENS & MINOR INC/VA/ [OMI]							
(Last)	(First)	(Middle)	06/13/2007	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)				
9120 LOCKW	OOD BO	ULEVARD					()				
	(Street)			(Check all applicable)			6. Individual or Joint/Group				
MECHANICSVILLE, VA 23116				Director 10 Owner _X_ Officer Ot (give title below) (specify by SVP, Chief Finanical Co		ther below)	Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table I - N	Table I - Non-Derivative Securities Beneficially Owned							
1.Title of Securit (Instr. 4)	y		2. Amount of S Beneficially Ov (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Natu Owner (Instr.	*				
Reminder: Report		te line for each c	lass of securities beneficiall	y s	SEC 1473 (7-02	2)					
	informa require	ation contained to respond t	d to the collection of d in this form are not unless the form display	s a							

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)	

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

BIERMAN JAMES L 9120 LOCKWOOD BOULEVARD MECHANICSVILLE, VAÂ 23116

 \hat{A} \hat{A} \hat{A} SVP, Chief Finanical Officer \hat{A}

Signatures

James L. 06/21/2007 Bierman

**Signature of Date
Reporting Person

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.

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