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FIELDS TECHNOLOGIES INC

Form 4/A December 19, 2001

FORM 4

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

U.S. SECURITIES AND EXCHANGE COMMISSION WASHINGTON, DC 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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(f) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*			2. Issuer Name and Ticker Trading Symbol				
Jones	William	R	Fields Technolo	ogies, Ind	c FLDT	(
	(First) Oak Brook Way		e) 3. IRS Identification Number of Reporting Person, if an entity				
	(Street)				5. If Amendment of Original (Month/Year)	, Date	
_	Georgia				October 200		
(City)	(State)	(Zip) TABLE 1	Non-Deriv	vative Securitie	es Acquired, Di	
1. Title of Security (Instr. 3)		2. Trans- action Date			rities Acquired(isposed of (D) tr. 3,4 and 5)	(A) 5. Amount Securit Benefic	
		Day/ Year)	Code V	Amount	(A) or Pric	ce of Mont (Instr.	
Common Stock						33,300	

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Reminder: Report on a separate line for each class of securities beneficially owned directly or i \star If the form is filed by more than one reporting person, see Instruction on 4(b)(v).

FORM 4 (CONTINUED)

Table II -- Derivative Securities Acquired, Disposed of, or Benf (e.g., puts, calls, warrants, options, convertible secur

1.Title of Derivative Security (Instr.3)	2.Conversion or Exercise Price of Derivative Security	action Date (Month/ Day/ Year)	4.Tansac- tion Code (Instr.8)	5.Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr.3, 4 and 5)	able and		7.Title and Amount of Underlying Securities (Intr. 3 and 4)		8.Pric of Deri vati Secu rity (Inst
			Code V		Date Exer- cisable	Expir- ation Date	Title	Amount or Number of Shares	5)
Common Stock Options	\$0.14	10/17 2001	A	50,000	07/01 2002	10/17 2006	Common	50,000	\$0.1
Common Stock Options	\$0.14	10/29 2001	A	75,000	07/01 2002	10/29 2006	Common	75,000	\$0.1

Explanation of Responses:

Note. File three copies of this Form, one of which must be manually signed.

If space provided is insufficient, see Instruction 6 for procedure.

/s/ Willi

** Signat

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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.