

CARESIDE INC  
Form 4  
April 23, 2003

**FORM 4**

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

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

OMB APPROVAL

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**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(h) of the Investment Company Act of 1940

Filed By  
Romeo and Dye's  
Section 16 Filer  
www.section16.net

|  |                                      |  |   |   |   |          |   |  |                                   |                     |
|--|--------------------------------------|--|---|---|---|----------|---|--|-----------------------------------|---------------------|
| 1. Name and Address of Reporting Person* |                                      |  | 2. Issuer Name and Ticker or Trading Symbol   |   |   |          | 6. Relationship of Reporting Person(s) to Issuer (Check all applicable)   |  |                                   |                     |
| <b>Paulson Capital Corp.</b>             |                                      |  | <b>Careside, Inc. (CASI)</b>  |   |   |          | <input type="checkbox"/> Director <input checked="" type="checkbox"/><br><input type="checkbox"/> 10% Owner <input type="checkbox"/><br><input type="checkbox"/> Officer (give title below) <input type="checkbox"/><br><input type="checkbox"/> Other (specify below) <input type="checkbox"/> |  |                                   |                     |
| (Last) (First) (Middle)                  |                                      |  | 3. I.R.S. Identification Number of Reporting Person, if an entity (voluntary)         |   | 4. Statement for Month/Day/Year<br><b>4/22/03</b> |          | 7. Individual or Joint/Group Filing (Check Applicable Line)<br><input type="checkbox"/> Form filed by One Reporting Person<br><input checked="" type="checkbox"/> Form filed by More than One Reporting Person  |  |                                   |                     |
| <b>811 SW Naito Parkway, Suite 200</b>   |                                      |  |   |   |   |          |   |  |                                   |                     |
| (Street)                                 |                                      |  | 5. If Amendment, Date of Original (Month/Day/Year)                                    |   |   |          |   |  |                                   |                     |
| <b>Portland, OR 97204</b>                |                                      |  |   |   |   |          |   |  |                                   |                     |
| (City) (State) (Zip)                     |                                      |  | <b>Table I Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned</b> |   |   |          |   |  |                                   |                     |
| 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 & 5) |   |          | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 & 4)   | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Ownership (Instr. 4) |                     |
|  |                                      |  | Code V  | Amount  | (A) or (D)  | Price    |   |  |                                   |                     |
| <b>Common Stock</b>                      | <b>04/22/03</b>                      |  | <b>P</b>  |   | <b>5,000</b>                                      | <b>A</b> | <b>\$0.0002</b>   | <b>2,991,450</b>   | <b>I</b>                          | <b>See Footnote</b> |

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

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

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

**FORM 4 (continued) 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 (A) or Disposed | 6. Date Exercisable and Expiration Date (Month/Day/Year) | 7. Title and Amount of Underlying Securities (Instr. 3 & 4) | 8. Price of Derivative Security (Instr. 5) | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) | 10. Ownership Form of Derivative Security: Direct | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|--|--|--------------------------------------|--|--------------------------------|--|--|---|--|---|---|--|

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|  |  |  |  |  |                   |   |     |     |                   |                  |       |                            |            |                            |
|--|--|--|--|--|-------------------|---|-----|-----|-------------------|------------------|-------|----------------------------|------------|----------------------------|
|  |  |  |  |  | of (D)            |   |     |     |                   |                  |       |                            | (Instr. 4) | (D)                        |
|  |  |  |  |  | (Instr. 3, 4 & 5) |   |     |     |                   |                  |       |                            |            | or Indirect (I) (Instr. 4) |
|  |  |  |  |  | Code              | V | (A) | (D) | Date Exer-cisable | Expira-tion Date | Title | Amount or Number of Shares |            |                            |

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Signatures:

/s/ Harry L. Striplin, Attorney-in-Fact for  
Chester L.F. Paulson, individually

/s/ Harry L. Striplin, Attorney-in-Fact for  
Jacqueline M. Paulson

Paulson Family LLC

By: /s/ Harry L. Striplin, Attorney-in-Fact for  
Chester L.F. Paulson, Manager

Paulson Investment Company

By: /s/ Harry L. Striplin, Attorney-in-Fact for  
Chester L.F. Paulson, Chairman