

Edgar Filing: PROXYMED INC /FT LAUDERDALE/ - Form 4

PROXYMED INC /FT LAUDERDALE/  
 Form 4  
 July 20, 2001

UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
 WASHINGTON, D.C. 20549  
 FORM 4

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person  
 Schmid, Judson E  
 1012 N.W. 105th Avenue  
 Plantation, FL 33322  
 USA
2. Issuer Name and Ticker or Trading Symbol  
 ProxyMed, Inc.  
 PILL
3. IRS or Social Security Number of Reporting Person (Voluntary)
4. Statement for Month/Year  
 07/2001
5. If Amendment, Date of Original (Month/Year)
6. Relationship of Reporting Person(s) to Issuer (Check all applicable)  
 ( ) Director ( ) 10% Owner (X) Officer (give title below) ( ) Other  
 (specify below)  
 Exec. Vice Pres. and Chief Financial Officer
7. Individual or Joint/Group Filing (Check Applicable Line)  
 (X) Form filed by One Reporting Person  
 ( ) Form filed by More than One Reporting Person

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

1. Title of Security	2. Transaction Date	3. Code	4. Securities Acquired (A) or Disposed of (D) Amount	5. Amount of Securities Beneficially Owned at End of Month
Common Stock, \$.001 par value	7/17/01	P	5,000	13,290

Table II -- Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date	4. Code	5. Number of Derivative Securities Acquired (A) or Disposed of (D) Amount	6. Date Exercisable and Expiration Date Date (Month/Day/Year)	7. Title and Amount of Underlying Securities Title and Number of Shares	8. Payment of Underlying Securities of
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Explanation of Responses:  
SIGNATURE OF REPORTING PERSON  
Judson E. Schmid  
DATE  
July 20, 2001