Edgar Filing: Buckelew Larry C. - Form 4/A

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Form 4/A March 12, 201	•										
									OMB AI	PROVAL	
FORM		SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						3235-0287			
Check this if no longe subject to Section 16. Form 4 or	r STAT								Expires: January 31 2005 Estimated average burden hours per response 0.5		
Form 5 obligations may contin <i>See</i> Instruc 1(b).	ue. Section 1	7(a) of the	Public Ut	ility Hold		pany	Act of	e Act of 1934, f 1935 or Sectio 40	n		
(Print or Type Re	esponses)										
1. Name and Address of Reporting Person <u>*</u> Buckelew Larry C.			2. Issuer Name and Ticker or Trading Symbol Alliance HealthCare Services, Inc					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 100 BAYVIEW CIRCLE, SUITE 400			[AIQ] 3. Date of Earliest Transaction (Month/Day/Year) 12/31/2011					XDirector10% Owner Officer (give titleOther (specify below)below)			
Filed(M 01/04/				Amendment, Date Original I(Month/Day/Year))4/2012				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
NEWPORT I	BEACH, CA	92660						Person		porting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecurit	ies Acq	uired, Disposed of	f, or Beneficial	ly Owned	
	2. Transaction I (Month/Day/Ye	ear) Executio any	on Date, if	Code	on(A) or Dis (D) (Instr. 3, 4	sposed	of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
Common Stock	12/31/2011			A	73,846		\$ 0	134,541 <u>(1)</u>	D		

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

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.

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

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relations			
	Director	10% Owner	Officer	Other	
Buckelew Larry C. 100 BAYVIEW CIRCLE SUITE 400 NEWPORT BEACH, CA 92660	X)				
Signatures					
Leigh Ann Clifford with Power Buckelew	03/12/2012				
**Signature of Re	eporting 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).
- The original Form 4 for this transaction incorrectly reported the total number of securities beneficially owned by the reporting person (1) following the transaction.

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.