## Edgar Filing: Meinert Deborah Jean - Form 4

Meinert Deb	orah Jean										
Form 4											
June 18, 2012	2										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION							OMB AF	PPROVAL			
	<b>UNITED STATES SECURITIES AND EXCHANGE COMMISSIO</b> Washington, D.C. 20549							COMMISSION	OMB Number:	3235-0287	
Check thi if no long	or									January 31,	
subject to	F CHAN	F CHANGES IN BENEFICIAL OWNE					Expires: Estimated a	2005 average			
Section 16.				SECURITIES					burden hou	rs per	
Form 4 or Form 5			o 1		a	Б	1	A ( 61024	response	0.5	
obligation	<b>1</b> 0						-	e Act of 1934,			
may conti	inue. Section I		of the In	•	•	• •		f 1935 or Section	n		
<i>See</i> Instru 1(b).	iction	50(II)		vestment	Company	Act	01 194	Ю			
(Print or Type R	Responses)										
Meinert Deborah Jean Symbol				Issuer Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
				ADE INC	C [ESCA]						
								(Check all applicable)			
(Month/D			bate of Earliest Transaction				Director 10% Owner				
			06/15/2	-				X Officer (give title Other (specify			
								below) VP. CI	below) FO and Secreta	rv	
	(Street)		1 If Ama	ndmant Da	ta Original					-	
				If Amendment, Date Original ed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)			
			1 neu(moi	illi/Duy/Tea	)			_X_ Form filed by C	One Reporting Pe	rson	
EVANSVIL	LE, IN 47711							Form filed by M Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-E	erivative S	ecuri	ties Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction I	Date 2A. Dee	med	3.	4. Securit	ies Ac	quired	5. Amount of 6. Ownership 7. Natur			
Security	(Month/Day/Year) Execution Da				on(A) or Dis	-		Securities	Form: Direct		
(Instr. 3)		any (Month/	Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)					Beneficially Owned	· · · · · · · · · · · · · · · · · · ·	Beneficial Ownership	
		(Wonth)	Day/Tear)	(1130.0)				Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
~				Code V	Amount	(D)	Price	(ilisu: 5 aliu 4)			
Common Stock	06/15/2012			М	45,000 (1)	А	\$ 0.64	54,275	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)

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. Transactic Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Common Stock Option	\$ 0.64	06/15/2012	06/15/2012	М	45,000	03/31/2012	03/31/2014	Common Stock	45,000 (1)

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## **Reporting Owners**

Reporting Owner Name / Addr	ess	Relationships						
reporting o when I when the	Director	10% Owner	Officer	Other				
Meinert Deborah Jean 817 MAXWELL AVENUE EVANSVILLE, IN 47711	2		VP, CFO and Secretary					
Signatures								
/s/ Deborah Meinert	06/18/2012							
**Signature of	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).

(1) Shares issued pursuant to the exercise of options under the Escalade, Incorporated 2007 Incentive Plan.

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.

Reporting Person