# FORM 4

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

OMB APPROVAL					
OMB Number:	3235-0287				
Estimated average burden hours per					
response	0.5				

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

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Respons	ses)															
					. Issuer Name and Ticker or Trading Symbol EPRO MED SYSTEMS INC [REPR]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
35 MAIDEN LAN	(Firs	st)		3. Date of Earliest Transaction (Month/Day/Year) 09/29/2017					Officer (give title below	v)	Other (spec	ify below)				
GOSHEN, NY 109	(Stre	et)	4	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) X. Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(Sta	te)	(Zip)	Table I - Non-Derivative Securities Acqu						aired, Disposed of, or Beneficially Owned						
(Instr. 3) Date		2. Transaction Date (Month/Day/Ye	Execution Date, if		(Instr. 8)			4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. 7. Nature Ownership Form: Beneficial Direct (D) Ownership		
				(Month	/Day/Yea	Code	, ,	V	Amount	(A) or (D)	Price				or Indirect (I) (Instr. 4)	
Common Stock			09/29/2017			A			5,896	A	\$ 0.53	1,860,685			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.  SEC 1474 (9-02										1474 (9-02)						
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)		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction if Code Derivative Securities Acquired (A) or		aı	and Expiration Date Unde		Under	le and Amount of rlying Securities 3 and 4)  8. Price of Derivative Security (Instr. 5)		9. Number of Derivative Securities Beneficially Owned	Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)		oate xercisable	Expiration Date	Title	Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	

### **Reporting Owners**

D	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Baker Paul Mark 35 MAIDEN LANE GOSHEN, NY 10924	X					

#### **Signatures**

/s/ Paul M. Baker	10/02/2017
Signature of Reporting 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).

#### Remarks

The filing of this statement shall not be construed as an admission (a) that the person filing this statement is, for the purposes of Section 16 of the Securities Exchange Act of 1934, as amended, the be

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.