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ENSIGN GROUP, INC

Form 3

November 08, 2007

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

OMB APPROVAL

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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

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

SECURITIES

30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting

Person *

Christensen Roy E

(Last)

(First)

(Middle)

Statement

(Month/Day/Year)

11/08/2007

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

ENSIGN GROUP, INC [ENSG]

4. Relationship of Reporting Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year)

C/O THE ENSIGN GROUP, INC., 27101 PUERTA REAL,

SUITE 450

(Street)

X Director _X_ 10% Owner _X__ Officer Other

(Check all applicable)

(give title below) (specify below) Chairman of the Board

6. Individual or Joint/Group

Filing(Check Applicable Line) Form filed by One Reporting

Person

X Form filed by More than One

Reporting Person

MISSION VIEJO. CAÂ 92691

(City) (State) (Zip)

> 2. Amount of Securities Beneficially Owned

(Instr. 4)

3. Ownership

Table I - Non-Derivative Securities Beneficially Owned

4. Nature of Indirect Beneficial

Ownership Form: (Instr. 5)

Direct (D) or Indirect (I)

(Instr. 5)

I (1)

By the Christensen Family Trust

Dated 8/17/92

Common Stock

1. Title of Security

(Instr. 4)

3,910,000

SEC 1473 (7-02)

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

1. Title of Derivative Security (Instr. 4)

2. Date Exercisable and **Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying **Derivative Security**

Conversion or Exercise

6. Nature of Indirect Ownership Beneficial Ownership Form of (Instr. 5)

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		(Instr. 4)		Price of	Derivative
Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
Christensen Roy E C/O THE ENSIGN GROUP, INC. 27101 PUERTA REAL, SUITE 450 MISSION VIEJO, CA 92691	ÂX	ÂΧ	Chairman of the Board	Â	
Christensen Family Trust dated 8/17/92 C/O THE ENSIGN GROUP, INC. 27101 PUERTA REAL, SUITE 450 MISSION VIEJO, CA 92691	Â	ÂX	Â	Â	
Christensen Carol M. C/O THE ENSIGN GROUP, INC. 27101 PUERTA REAL, SUITE 450 MISSION VIEJO, CA 92691	Â	ÂX	Â	Â	

Signatures

Olgilata 65						
/s/ Daniel Walker, as attorney-in-fact for Roy E. Christensen						
**Signature of Reporting Person	Date					
/s/ Daniel Walker, as attorney-in-fact for the Trustee of the Christensen Family Trust dated 08/17/92						
**Signature of Reporting Person	Date					
/s/ Daniel Walker, as attorney-in-fact for Carol M. Christensen						
**Signature of Reporting Person	Date					

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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).

These shares are directly owned by the Christensen Family Trust dated 8/17/92, a ten percent owner of the issuer, and indirectly by Roy

(1) E. Christensen, a ten percent owner, director and officer of the issuer, and indirectly by Carol M. Christensen, a ten percent owner of the issuer

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Remarks:

Exhibit List: Exhibit 24.1 Power of Attorney for Roy E. Christensen; Exhibit 24.2 Power of Attorney

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.

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