## Edgar Filing: BENT MICHAEL A - Form 4

| Form 4  | IAEL A                            |  |  |                             |   |  |           |   |  |   |  |
|---|-----------------------------------|--|--|-----------------------------|---|--|-----------|---|--|---|--|
| January 02, 2   | 2013                              |  |  |                             |   |  |           |   |  |   |  |
| FORM  | <b>4</b> UNITE                    | D STATES   |  |                             |   |  | NGE       | COMMISSION  |  | 9PROVAL<br>3235-0287  |  |
| Check thi<br>if no long<br>subject to<br>Section 10<br>Form 4 or<br>Form 5<br>obligatior<br>may conti<br><i>See</i> Instru<br>1(b). | 6.<br>Filed p<br>Section 1        | <b>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF</b><br><b>SECURITIES</b><br>Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,<br>Section 17(a) of the Public Utility Holding Company Act of 1935 or Section |  |                             |   |  |           |   |  | Expires:January 31,Estimated averageburden hours perresponse0.5   |  |
| (Print or Type R  | Responses)                        |  |  |                             |   |  |           |   |  |   |  |
|   |                                   |  | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>HESKA CORP [HSKA] |                             |   |  |           | 5. Relationship of Reporting Person(s) to<br>Issuer   |  |   |  |
| (Last) (First) (Middle) 3. Date of<br>(Month/)<br>3760 ROCKY MOUNTAIN<br>AVENUE<br>(Street) 4. If Am                                |                                   |  | 3. Date of Earliest Transaction<br>(Month/Day/Year)<br>12/28/2012          |                             |   |  |           | (Check all applicable)<br><u></u> Director <u></u> 10% Owner<br><u>X</u> Officer (give title <u></u> Other (specify<br>below)<br>V.P.Actg. Officer & Controller |  |   |  |
|   |                                   |  |  | ndment, Dat<br>th/Day/Year) | -   |  |           | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>_X_ Form filed by One Reporting Person   |  |   |  |
| LOVELANI  | D, CO 80538                       |  |  |                             |   |  |           |   | More than One Ro   |   |  |
| (City)  | (State)                           | (Zip)  | Table  | e I - Non-D                 | erivative S   | Securi                                   | ties Ac   | quired, Disposed o  | of, or Beneficia   | lly Owned   |  |
| 1.Title of<br>Security<br>(Instr. 3)  | 2. Transaction E<br>(Month/Day/Ye | ar) Executi<br>any   | emed<br>on Date, if<br>/Day/Year)  | Code<br>(Instr. 8)          | 4. Securi<br>onAcquired<br>Disposed<br>(Instr. 3,<br>Amount | l (A) o<br>l of (D<br>4 and<br>(A)<br>or | ))        | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4)  | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
| Common<br>Stock   | 12/28/2012                        |  |  | M                           | 3,000   | A A                                      | \$<br>3.4 | 9,773   | 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)

## Edgar Filing: BENT MICHAEL A - Form 4

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5. Number<br>of Derivativ<br>Securities<br>Acquired<br>(A) or<br>Disposed of<br>(D)<br>(Instr. 3, 4,<br>and 5) | e Expiration Da<br>(Month/Day/Y | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                 | 7. Title and Amount of<br>Underlying Securities<br>(Instr. 3 and 4)1(( |  |
|---|---|---|---|--|--|---------------------------------|--|-----------------|--|--|
|   |   |   |   | Code V                                 | (A) (D)  | Date<br>Exercisable             | Expiration<br>Date   | Title           | Amount<br>or<br>Number<br>of<br>Shares                                 |  |
| Incentive<br>Stock<br>Option<br>(right to<br>buy)   | \$ 3.4  | 12/28/2012                              |   | М                                      | 3,00   | ) 01/06/2004                    | 01/06/2013   | Common<br>Stock | 3,000  |  |

## **Reporting Owners**

| Reporting Owner Name / Address                                     | Relationships |           |                                |       |  |  |  |
|--|---------------|-----------|--------------------------------|-------|--|--|--|
| 1 0  | Director      | 10% Owner | Officer                        | Other |  |  |  |
| BENT MICHAEL A<br>3760 ROCKY MOUNTAIN AVENUE<br>LOVELAND, CO 80538 |               |           | V.P.Actg. Officer & Controller |       |  |  |  |
| Signatures   |               |           |                                |       |  |  |  |
| By: Jason A. Napolitano For: Michael A. Bent                       |               | 01/02/201 | 3                              |       |  |  |  |
| **Signature of Reporting Person                                    |               | Date      |                                |       |  |  |  |
| <b>Explanation of Respon</b>                                       | ses:          |           |                                |       |  |  |  |

## \* 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).

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.