

# SECURITIES AND EXCHANGE COMMISSION

## FORM 4/A

Statement of changes in beneficial ownership of securities [amend]

Filing Date: **2004-05-18** | Period of Report: **2004-05-14**  
SEC Accession No. **0001209191-04-026237**

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### REPORTING OWNER

#### SCHWARTZ SAMUEL R

CIK: **1218530**

Type: **4/A** | Act: **34** | File No.: **000-26126** | Film No.: **04814780**

Mailing Address  
*SEROLOGICALS CORP  
5655 SPALDING DR  
NORCROSS GA 30092*

### ISSUER

#### SEROLOGICALS CORP

CIK: **767673** | IRS No.: **582152225** | State of Incorporation: **DE** | Fiscal Year End: **1227**  
SIC: **2836** Biological products, (no diagnostic substances)

Mailing Address  
*5655 SPALDING DRIVE  
5655 SPALDING DRIVE  
NORCROSS GA 30092*

Business Address  
*5655 SPALDING DRIVE  
5655 SPALDING DRIVE  
NORCROSS GA 30092  
4042965595*

# FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

### OMB APPROVAL

OMB Number: 3235-0287  
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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

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 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person <b>SCHWARTZ SAMUEL R</b>			2. Issuer Name and Ticker or Trading Symbol <b>SEROLOGICALS CORP [SERO]</b>		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) ____ Director _____ 10% Owner <input checked="" type="checkbox"/> Officer (give title below) _____ Other (specify below) <b>Corporate Controller</b>	
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) <b>05/14/2004</b>			
5655 SPALDING DRIVE			4. If Amendment, Date Original Filed(Month/Day/Year) <b>05/14/2004</b>		6. Individual or Joint/Group Filing (Check applicable line) <input checked="" type="checkbox"/> Form Filed by One Reporting Person ____ Form Filed by More than One Reporting Person	
(Street)						
NORCROSS, GA 30092						
(City)	(State)	(Zip)				

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (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. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			

**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. Transaction Code (Instr. 8)		5. Number of Derivative 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 Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date						Title
Employee Stock Options (Right to Purchase)	\$18.79	05/14/2004	05/14/2004	A	K	10,000		05/14/2005 <sup>(L)</sup>	05/14/2010	Common Stock, \$0.01 Par Value	10,000	\$ 0	60,000	D	

**Explanation of Responses:**

1. Options vest at 25% per year after the anniversary date of the effective date.

**Signatures**

/s/ Matt Cagwin, Attorney in Fact for Samuel R. Schwartz

\*\* Signature of Reporting Person

05/18/2004

Date

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

\* 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.

**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 Number.**

Power of Attorney

KNOW ALL MEN BY THESE PRESENTS that I, the undersigned, do hereby appoint Craig L. Brown, Matthew Cagwin, Harold W. Ingalls and Samuel R. Schwartz or either one of them, my attorney-in-fact solely for the purpose of signing for me and in my name and on my behalf any and all required Form 3, Form 4 or Form 5 filings, and any new or related filings, if any, promulgated by the Securities and Exchange Commission pursuant to Section 16 of the Securities Exchange Act of 1934 and I hereby authorize them, or either one of them, to do and to perform any and all things necessary to be done in the premises as fully and effectively in all respects as I could do if personally present.

IN

WITNESS WHEREOF, I have hereunto set my hand and seal this 16 day of May, 2003.

/s/ Samuel Schwartz

Printed Name: Samuel Schwartz

/s/ Amanda Benson (SEAL)

Notary Public for the State of: Georgia

My Commission Expires: 8/2/05