#### SECURITIES AND EXCHANGE COMMISSION

## FORM 3

Filing Date: **2006-10-16** | Period of Report: **2006-09-13** SEC Accession No. 0001378153-06-000001

(HTML Version on secdatabase.com)

### **ISSUER**

#### PHYTOMEDICAL TECHNOLOGIES INC

CIK:1002422| IRS No.: 870429962 | State of Incorp.:NV | Fiscal Year End: 1231

SIC: 8093 Specialty outpatient facilities, nec

Mailing Address 1628 WEST 1ST AVENUE SUITE 216 VANCOUVER A1 V6J 1G1 Business Address 1628 WEST 1ST AVENUE SUITE 216 VANCOUVER A1 V6J 1G1 604-659-5004

### **REPORTING OWNER**

**Branning Gary** 

CIK:1378153

Type: 3 | Act: 34 | File No.: 000-28790 | Film No.: 061146442

Mailing Address Business Address 216 - 1628 WEST 1ST AVENUE800-611-3388 VANCOUVER A1 V6J1G1 FORM 3

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104

Expires: 02/28/2011

Estimated average burden
hours per response 0.5

# INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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 Addi                                   | Statemen<br>Year) | 2. Date of Event Requiring Statement (Month/Day/ Year)  - 09/13/2006 |                     | 3. Issuer Name and Ticker or Trading Symbol PHYTOMEDICAL TECHNOLOGIES INC [PYTO] |   |  |  |   |                 |   |  |
|--|-------------------|--|---------------------|--|---|--|--|---|-----------------|---|--|
| (Last) (First) (Middle) 216 - 1628 WEST 1ST AVENUE |                   |  |                     | — 09/13/20   | 4. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director Officer (give title  Other (specify |  |  | 5. If Amendment, Date Original Filed (Month/Day/Year)   |                 |   |  |
| (Street)   |                   |  |                     |  | below) below)   |  | 6.   | 6. Individual or Joint/Group Filing (Check applicable line)  X Form Filed by One Reporting Person |                 |   |  |
| VANCOUVER  | _                 |  |                     |  |   |  | Form Filed by More than One Reporting Person |   |                 |   |  |
| (City)   | (State)           | (Zip)  |                     |  |   |  |  |   |                 |   |  |
|  |                   |  | Table I -           | - Non-De   | erivati   | ve Securities Benet                                    | icially Owne                                 | d   |                 |   |  |
| 1.Title of Security                                |                   |  |                     | t of Securities<br>lly Owned (Instr. 4)  | 3. Ownership<br>Form: Direct (D)<br>or Indirect (I)<br>(Instr. 5)   | 4. Nature of Indirect Beneficial Ownership (Instr. 5)  |  |   |                 |   |  |
| Т  | able II - Deriv   | vative Secu  | rities Bene         | eficially  | Owne  | ed (e.g., puts, calls,                                 | warrants. opt                                | ions. con   | vertible sec    | curities)   |  |
| 1. Title of Derivative Security (Instr. 4)  2. E D |                   |  | 2. Date Exerc       | 2. Date Exercisable and Expiration Date (Month/                                  |   | Title and Amount of Securerivative Security (Instr. 4) |  | 4.<br>Conversion<br>or Exercise   | 5.<br>Ownership | 6. Nature of Indirect<br>Beneficial Ownership<br>(Instr. 5) |  |
|  |                   |  | Date<br>Exercisable | ercisable Date   |   | tle  | Amount or<br>Number of<br>Shares             | Price of<br>Derivative<br>Security  |                 |   |  |
|  |                   |  |                     |  |   |  |  |   |                 |   |  |
|  |                   | Sig  | natures             |  |   |  |  |   |                 |   |  |
| Gary Branning  ** Signature of Reporting Person    |                   |  |                     |  |   |  |  |   |                 | 10/16/2006  |  |
|  |                   |  |                     |  |   |  |  |   |                 | Date  |  |

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).