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HealthWarehouse.com, Inc. Form 4 September 06, 2011

September (06, 2011										
FORM	14								OMB AF	PROVAL	
-	UNITED	STATES			AND EXCH , D.C. 2054		E CO	OMMISSION	OMB Number:	3235-0287	
if no lon subject t Section	Check this box if no longer subject to Section 16. Form 4 or							Expires: Estimated a burden hour response	-		
obligatio may con <i>See</i> Instr 1(b).	tinue. Section 17	a) of the	Public U	tility Hol		ny A	ct of 1	Act of 1934, 935 or Section			
Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> Rock Castle Holdings, LLC			2. Issuer Name and Ticker or Trading Symbol HealthWarehouse.com, Inc. [HEWA]					5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle) 3. Date of Earliest Transaction					(Check all applicable)						
6434 HAM	ILTON MASON	(Month/Day/Year) 09/02/2011					DirectorOfficer (give titleOther (specify below)Other (specify below)				
				endment, Da nth/Day/Yea	ate Original r)		A	 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
HAMILTO	N, OH 45069						_	Form filed by Mo Person			
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative Sec	urities	Acqui	red, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deen Executior any (Month/D	n Date, if	Code (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	09/02/2011	09/02/2	011	Code V S	Amount 1,179,212	or (D) D	Price \$ 2.9	(Instr. 3 and 4)	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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	of	r Expiration E (Month/Day ive es ed	;		le and ant of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	4, and 5 (A) (D	·	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address		Relationships							
	uu: 0 05	Director	10% Owner	Officer	Other				
Rock Castle Holdings, LLC 6434 HAMILTON MASON HAMILTON, OH 45069			Х						
Signatures									
Jason Smith, Manager	09/06/20	11							
**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).

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.